DATE 01/04		ia County Build			PERMIT
Alta LICANT	This Perm MELANIE RODER	t Expires One Year From	PHONE	386.623.7829	000025369
ADDRESS	387 SW KEMP COURT	LAKE C			FL 32024
OWNER	DANNY KOHLHEPP		PHONE		
ADDRESS	401 SW SLASH LANE	LAKE C			FL 32024
CONTRACTO		2.1123	PHONE	386.755.0086	
		O FOREST COUNTRY S.D,TL @			.F.
LOCATION		ASH,TL CORNER OF LONGLEA		,	
TYPE DEVEL		ESTIMATED		STRUCTION	7650.00
HEATED FLO	OOR AREA	TOTAL AREA		HEIGHT _	STORIES
FOUNDATIO	N WALI	S ROOF PITC	Н	FL-	OOR
LAND USE &	ZONING		MAX.	HEIGHT _	
Minimum Set	Back Requirments: STREET-	RONT	REAR _		SIDE
NO. EX.D.U.	1 FLOOD ZONE	DEVELO	PMENT PERM	IT NO.	
PARCEL ID	16-4S-16-03048-006	SUBDIVISION FOR	EST COUNTR	?	
LOT 6	BLOCK PHASE	UNIT	TOTA	L ACRES	
Culvert Permit EXISTING Driveway Con COMMENTS:	X07-012	ontractor's License Number LU & Zoning checked	JL	pplicant/Owner/Woved for Issuanc	N
				Check # or C	ash 438
		ILDING & ZONING DEP/	#CSW-	-59	
Temporary Po	FOR BU		ARTMENT	ONLY	(footer/Slab)
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NOTICE: IN ADDITION TO THE RÉQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Columbia County Building Permit Application Revised 9-23-04
For Office Use Only Application #O101-15Date Received By Permit # 25369 Application Approved by - Zoning Official Date Plans Examiner Date Flood Zone Development Permit Zoning Land Use Plan Map Category
Applicants Name Melanie Roder Address 387 SW Kemp Court Lake City H 32024 Owners Name Danny Konthepp Phone 911 Address 40 SW Slash in Lake City FL 32024 Contractors Name Darrell Turner Address P.O. Box 3307 Lake City FL 32056 Fee Simple Owner Name & Address Bonding Co. Name & Address Architect/Engineer Name & Address Mortgage Lenders Name & Address
Circle the correct power company - FL Power & Light - Clay Elec Suwannee Valley Elec Progressive Energy Property ID Number 16-45-16-03048-00 Stimated Cost of Construction 7, 1650.00 Subdivision Name Forest Country Lot 10 Block Unit Phase 1 Driving Directions 247 N TL into Forest Country (Sw Monk w Lot on Sw Longled at TL on Sw Slash In Lot on Corner of Longled and Slash Type of Construction (2500+ on St) Number of Existing Dwellings on Property Total Acreage Lot Size Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Actual Distance of Structure from Property Lines - Front Side Side Rear Total Building Height Number of Stories Heated Floor Area Roof Pitch
Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT
Owner Builder or Agent (Including Contractor) STATE OF FLORIDA COUNTY OF COLUMBIA Sworn to (or affirmed) and subscribed before a give this day of or Produced Identification Notary Signature Personally known or Produced Identification Notary Signature

BK 0832 PG 2335

, 1996.

THIS INDENTURE, made this 30th day of December

John T. Myles and Deborah S. Myles, his wife

OFFICIAL RECORDS

Social Security # Social Security #

of the County of

Columbia

, State of

Florida

, grantor and

Danny Lee Kohlhepp and Angela M. Kohlhepp, his wife

Social Security #

Social Security #

of the County of

Columbia

Whose mailing address is Rt. 5, Box 908, Lake City, Florida 32024 , State of Florida

, grantee

WITNESSETH: This said grantor, for and in consideration of the sum of TEN AND NO/100'S--Dollars, to them in hand paid by the grantee(s), the receipt whereof is hereby acknowledged, has/have granted, bargained, and sold to said grantee(s), their heirs and assigns forever, the following described land, situate, lying and County, Florida, to wit: Columbia

Lot 6, FOREST COUNTRY, Phase 1, a subdivision according to the plat thereof recorded in Plat Book 4, page 94, public records of Columbia County, Florida.

Subject to: terms, provisions, restrictive covenants, conditions, reservations and easments contained in Declaration recorded in $0.R.\ Book\ 419$, page 186, public records of Columbia County, Florida.

Subject to: Easement to Clay Electric Coop., Inc.

and Deborah S. Myles, his wife were married on and the relationship of husband and wife continued Myles Tax Parcel # 16-45-16-03048-006 uninterruped until this date.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor(s) has hereunto set grantor's hand and seal the day = and year first above written.

Signed, scaled and delivered in our presence:

witness

Sara L. Joyner
PRINTED NAME OF WITNESS

Kim Watson

96-18463

PRINTED NAME OF WITNESS

1996 DEC 31

STATE OF FLORIDA

STATE OF FLORIDA
COUNTY OF COLUMBIA

I hereby certify that on this day before me, an offiger duly qualified to take acknowledgments, personally appeared John T. Myles and Deborah S. Myles, his wife, known to me to be the person(s) described in and executed the forecast. known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, that I relied upon the following form(s) of identification of the above-named person(s) drivers license

Witness my hand and official seal in the County and State last aforesaid this day of December , 1996.

DOCUMENTARY STA INTANGIBLE TAX

P. DOWITT GASON, CLERK OF COURTS, COLUMBIA COUNTY

a YIK Z

Printed name of

My Commission Expires:

MARTHA BRYAN MY COMM EXPRES: August 10, 1990

Prepared by and return to: Regional Title Company 2015 South First Street Lake City, Florida 32055 Martha Bryan By: KW

NOTICE OF AUTHORIZATION

I Darrell Turner, do hereby authorize Melanie Roder, To be my representative and act on my behalf in all aspects of applying for a Roofing Permit to be located in Columbia County. Contractor's signature Date Sworn and subscribed before me this ____ day of Jan Bonded Thru Atlantic Bonding Co., Inc. Notary Public Personally known \square Produced Identification_

DW Turner Roofing, Inc.

P.O. Box 3307 Lake City, FL 32056 LIC# RC29027074

Date	Estimate #
1/2/2007	492

Name / Address	
KOHLHEPP	
FORREST COUNTRY	

Project

Description	Qty	Rate	Total
PRICE INCLUDES-29g COLORED METAL NEW METAL ROOF METAL PANELS EAVE DRIP RIDGE CAP VENTING SYSTEM BATTEN SYSTEM (1X4) GABLE TRIM VALLEY METAL SCREWS ALL MATERIALS TO FINISH ROOF PIPE FLASHINGS DISPOSAL OF WASTE		7,650.00	7,650.00
		Total	\$7,650.00

Phone #	Fax#
386-755-0086	386-755-4660

NOTICE OF COMMENCEMENT FORM COLUMBIA COUNTY, FLORIDA

THIS DOCUMENT MUST BE RECORDED AT THE COUNTY CLERKS OFFICE BEFORE YOUR FIRST INSPECTION.

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Tax Parcel ID Number 03048 - 000 1. Description of property: (legal description of the property and street address or 911 address) 16-45-16-03048-006 2. General description of improvement: (Proof Interest in Property MMC AUN Name & Address of Fee Simple Owner (if other than owner): 5. Contractor Name Darrell 6. Surety Holders Name **Phone Number** Address Amount of Bond 7. Lender Name N Phone Number _ Address 8. Persons within the State of Florida designated by the OwnInst: 2007000295 Date: 01/04/2007 Time: 15:57 served as provided by section 718.13 (1)(a) 7; Florida Statutes _________DC,P.DeWitt Cason,Columbia County B: 1106 P: 2603 Name_ Address 9. In addition to himself/herself the owner designates ____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -(a) 7. Phone Number of the designee 10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) **NOTICE AS PER CHAPTER 713, Florida Statutes:** The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead. Bonded Thru Atlantic Bonding Co., In OTARY STAMP/SEAL Signature of Notary