

DATE 07/16/2009

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027951

APPLICANT DARRELL TURNER PHONE 755-0086
ADDRESS P.O. BOX 3307 LAKE CITY FL 32056
OWNER DONNA CAMEON PHONE _____
ADDRESS 261 SW WREN ST LAKE CITY FL 32025
CONTRACTOR DARRELL TURNER PHONE 755-0086
LOCATION OF PROPERTY 247S, TL ON LEISURE DRIVE, TR ON WREN ST. TO THE
VERY END

TYPE DEVELOPMENT RE-ROOF ON SFD ESTIMATED COST OF CONSTRUCTION 6500.00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____
FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
LAND USE & ZONING _____ MAX. HEIGHT _____
Minimum Set Back Requirments: STREET-FRONT _____ REAR _____ SIDE _____
NO. EX.D.U. _____ FLOOD ZONE N/A DEVELOPMENT PERMIT NO. _____

PARCEL ID 01-4S-16-02678-119 SUBDIVISION FAIRWAY VILLAS
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

CCC1328465

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
EXISTING X09-212 BK HD N
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE

Check # or Cash 5346

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____
Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by _____ date/app. by _____ date/app. by _____
Framing _____ Insulation _____
date/app. by _____ date/app. by _____
Rough-in plumbing above slab and below wood floor _____ Electrical rough-in _____
date/app. by _____ date/app. by _____
Heat & Air Duct _____ Peri. beam (Lintel) _____ Pool _____
date/app. by _____ date/app. by _____ date/app. by _____
Permanent power _____ C.O. Final _____ Culvert _____
date/app. by _____ date/app. by _____ date/app. by _____
Pump pole _____ Utility Pole _____ M/H tie downs, blocking, electricity and plumbing _____
date/app. by _____ date/app. by _____ date/app. by _____
Reconnection _____ RV _____ Re-roof _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 35.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ _____ FIRE FEE \$ 0.00 WASTE FEE \$ _____
FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ _____ CULVERT FEE \$ _____ **TOTAL FEE** 35.00
INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

NOTICE: IN ADDITION TO THE REQUIREMENTS 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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

Columbia County Building Permit Application

For Office Use Only Application # 0907-22 Date Received 7/16/09 By G Permit # 27951
 Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____
 FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____
 Comments _____

☐ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
 IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
 School _____ = TOTAL _____

Septic Permit No. _____ Fax 386-755-8660

Name Authorized Person Signing Permit Danell Fin Phone 386-255-0086

Address 261 Wren St Lake City FL 32025

Owners Name Dorothy Lynette Cameron Phone NA

911 Address 261^{SW} Wren St Lake City FL 32025

Contractors Name Danell Fin Phone 755-0085

Address PO 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. - Progress Energy

Property ID Number 01-45-16-02678-119 Estimated Cost of Construction 6500.

Subdivision Name Fanning Dallas / Quail Heights Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 247 Toward Branford (Make L at Quail Heights Leisur Dr. 2nd left) (to Wren St. go Right last house on the very end)

Number of Existing Dwellings on Property _____

Construction of Metal Roof Over Shingles - House Total Acreage _____ Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____

Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____

Number of Stories 2 Heated Floor Area _____ Total Floor Area _____ Roof Pitch 4/12

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.

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TIME LIMITATIONS OF APPLICATION: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: 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. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Donna J. Cameron
Owners Signature

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

[Signature]
Contractor's Signature (Permitee)

Contractor's License Number FCC 132 8465
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 16 day of July 2009.
Personally known _____ or Produced Identification _____

Brenda Meads
State of Florida Notary Signature (For the Contractor)

SEAL:



@ CAM110M01 S CamaUSA Appraisal System Columbia County
 7/16/2009 9:20 Property Maintenance 21600 Land 001
 Year T Property Sel AG 000
 2009 R 01-45-16-02678-119 ... * 64840 Bldg 001
 Owner CAMERON DONNA LYNETTE Conf 2780 Xfea 002
 Addr 261 SW WREN CT HX 89220 TOTAL B*
 -Cap?- Total Acres
 SOH 10% ApYr ERnwl ARnwl Notc
 Y Y 1998
 City,St LAKE CITY FL Zip 32025 (PUD1) (PUD2) (PUD3) MKTA06
 Country (PUD1)
 Splt/Co JVChgCd pud4 pud5 pud6
 Appr By HC Date 10/21/2003 AppCode UseCd 000100 SINGLE FAMILY
 TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp
 002 1416.01 06 HX 25000
 TENTH FRWY
 House# 261 Street WREN MD CT Dir SW #
 - City LAKE CITY Zip
 Subd N/A Condo .00 N/A
 Sect 1 Twn 4S Rnge 16E Subd Blk Lot
 Legals COMM NE COR LOT 9 OF TENTH FAIRWAY VILLAS S/D, RUN SW
 ALONG LOT LINE 153.66 FT FOR POB, SW 77.07 FT, NW 89.30 FT, +
 Map# Mnt 2/12/2008 LARRY
 F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

NOTICE OF COMMENCEMENT

Inst:200912011816 Date:7/16/2009 Time:10:29 AM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1177 P:519

Tax Parcel Identification Number 01-45-16-02678-119

County Clerk's Office Stamp or Seal

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): Comm NE Cor lot 9 of Tenth Farming Valley
a) Street (job) Address: Donna Cameron
2. General description of improvements: Metal Roof over existing Shingle
3. Owner Information
a) Name and address: 261 Wren St. Lake City FL 32025
b) Name and address of the single titleholder (if other than owner)
c) Interest in property
4. Contractor Information
a) Name and address: Danell Turner P.O. Box 3307 Lake City FL 32056
b) Telephone No.: 386-755-0088 Fax No. (Opt.) 386-755-0088
5. Surety Information
a) Name and address:
b) Amount of Bond:
c) Telephone No.: Fax No. (Opt.)
6. Lender
a) Name and address:
b) Phone No.:
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address:
b) Telephone No.: Fax No. (Opt.)
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name and address:
b) Telephone No.: Fax No. (Opt.)
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

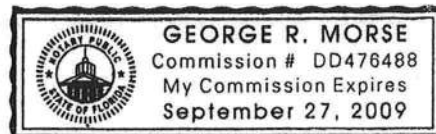
STATE OF FLORIDA
COUNTY OF COLUMBIA

10. Donna Y. Cameron
Signature of Owner or Owner's Authorized Officer/Partner/Manager
DANNA L. CAMERON
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 15 day of July, 2009, by:
Donna T. Cameron as Owner (type of authority, e.g. officer, trustee, attorney
in fact) for _____ (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification ☒ Type FL-10

Notary Signature _____ Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.
Donna Sennette Cameron
Signature of Natural Person Signing (in line #10 above.)

D.W. Turner Roofing Inc.
 Proudly Serving Lake City
 & Surrounding Counties
 LIC# CCC1328465

Date	Estimate #
7/7/2009	1160

Name / Address
Suwannee River Economic Council Live Oak, FL

			Project
			Donna Cameron
Description	Qty	Cost	Total
PRICE INCLUDES--2 STORY HOUSE NEW METAL ROOF-29G COLORED METAL PANELS EAVE DRIP RIDGE CAP VENTING SYSTEM BATTEN SYSTEM (1X4) GABLE TRIM VALLEY METAL SCREWS ALL MATERIALS TO FINISH ROOF OFF PIPE FLASHINGS DISPOSAL OF WASTE PERMITS REPAIR SIDING AND FACIA ROTT REPAIR ROOF IS IN VERY POOR CONDITION ESPECIALLY THE 2 TWO STORY SECTION		6,500.00	6,500.00
Total			\$6,500.00

Phone #	Fax #	E-mail
386-755-0086	386-755-4660	dwturnerroofing@gmail.com

GRIPRAN(C) CANON
OF

M/H O C C U P A N C Y

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 01-4S-16-02678-119

Building permit No. 000027951

Permit Holder DARRELL TURNER

Owner of Building DONNA CAMEON

Location: 261 SW WREN ST, LAKE CITY, FL

Date: 07/30/2009

Wayne H. Russell

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

