

DATE 06/01/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027844

APPLICANT LORI THOMPSON PHONE 904 838-9394
ADDRESS 18451 NE 19TH PLACE STARTE FL 32091
OWNER CHRISTIAN HERITAGE CHURCH PHONE 752-9119
ADDRESS 159 SW HUDSON LANE LAKE CITY FL 32025
CONTRACTOR RANDY THOMPSON PHONE 904 364-3405
LOCATION OF PROPERTY 47S, TL HUDSON LN, CHURCH IS 1ST ON LEFT

TYPE DEVELOPMENT RE-ROOF CHURCH ESTIMATED COST OF CONSTRUCTION 21370.00
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 DEVELOPMENT PERMIT NO.

PARCEL ID 18-4S-17-08479-101 SUBDIVISION GREENRIDGE ESTATES UNREC.
LOT 1-4 BLOCK SOUTH PHASE UNIT TOTAL ACRES 5.00

CCC1326732

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X09-157 BK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILECheck # or Cash 1411

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 \$ 110.00 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 110.00
INSPECTORS OFFICE CLERKS OFFICE

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

CK# 1411

For Office Use Only		Application # <u>0906-03</u>	Date Received <u>6/1/09</u>	By <u>GT</u>	Permit # <u>27844</u>
Zoning Official _____	Date _____	Flood Zone _____	Land Use _____	Zoning _____	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner _____	Date _____
Comments _____					
<input type="checkbox"/> NOC <input type="checkbox"/> EH <input type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> Parent Parcel # _____					
<input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter					
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____					
School _____		- TOTAL _____			

Septic Permit No. _____ Fax _____

Name Authorized Person Signing Permit Lori A. Thompson Phone 904-838-9394

Address 159 SW Hudson Lane Lake City, FL 32025

Owners Name Christian Heritage Church of Lake City, Florida, Inc Phone 386-752-9119

911 Address 159 SW Hudson Lane Lake City, FL 32025

Contractors Name Randy E Thompson Cornerstone Construction & Roofing, Inc Phone 904-364-3405

Address 18451 NE 19th Place Starke, FL 32091

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

Mortgage Lenders Name & Address N/A

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 18-45-17-08499-10102 Estimated Cost of Construction 21,370

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 41 South to Hwy 47 go 3 miles
on Hwy 47. Church will be on left

Number of Existing Dwellings on Property _____

Construction of ReRoof Church (comm.) Total Acreage 5 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 1 Heated Floor Area _____ Total Floor Area 105 SQ Roof Pitch 5/12

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.

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 a 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.

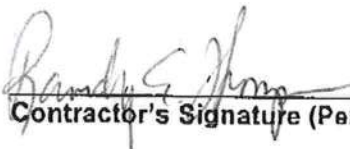
NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage 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.

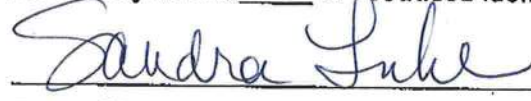

Owners Signature

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.


Contractor's Signature (Permittee)

Contractor's License Number CCC1326732
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 1st day of June 2009.
Personally known _____ or Produced Identification Drivers Lic.


State of Florida Notary Signature (For the Contractor)

SEAL:

SANDRA LUKE
Notary Public, State of Florida
My Comm. Expires April 18, 2012
Commission No. DD 773151

NOTICE OF COMMENCEMENT

Inst:200912008998 Date:6/1/2009 Time:3:23 PM
 DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1174 P:637

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 18-45-17-08472-10102

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): Lots 1 thru 4 Greenridge Estates South under 881-289
 a) Street (job) Address: 159 SW Hudson Lane Lake City, FL 32025 589-514
2. General description of improvements: As-Proposed
3. Owner Information
 a) Name and address: Christian Heritage Church of Lake City Florida, Inc
 b) Name and address of fee simple titleholder (if other than owner) N/A
 c) Interest in property Owner
4. Contractor Information
 a) Name and address: Penly E. Thompson / Crestline Construction & Roofing, Inc. 18451 NE 19th Pl
 b) Telephone No.: 904-364-3405 Fax No. (Opt.) 904-364-4571 Stark, FL 32091
5. Surety Information
 a) Name and address: N/A
 b) Amount of Bond: _____
 c) Telephone No.: _____ Fax No. (Opt.) _____
6. Lender
 a) Name and address: N/A
 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: N/A
 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: N/A
 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. Christopher O. Jones
 Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Christopher O. Jones
 Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 1st day of June, 20 09, by:
Christopher O. Jones as President (type of authority, e.g. officer, trustee, attorney
 fact) for Christian Heritage Church of Lake City Florida, Inc (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification ☒ Type Driver's License

Notary Signature Sandra Luke Notary Stamp or Seal:

SANDRA LUKE
 Notary Public, State of Florida
 My Comm. Expires April 18, 2012
 Commission No. DD 773151

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.

Christopher O. Jones
 Signature of Natural Person Signing (in line #10 above.)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS[Home](#)[Contact Us](#)[E-Filing Services](#)[Document Searches](#)[Forms](#)[Help](#)[Previous on List](#)[Next on List](#)[Return To List](#)

Entity Name Search

[Events](#)[No Name History](#)

Detail by Entity Name

Florida Non Profit Corporation

CHRISTIAN HERITAGE CHURCH OF LAKE CITY, FLORIDA, INC.

Filing Information

Document Number 753008
FEI/EIN Number 592108304
Date Filed 06/18/1980
State FL
Status ACTIVE
Last Event AMENDMENT
Event Date Filed 05/14/1999
Event Effective Date NONE

Principal Address

159 SW HUDSON LANE
LAKE CITY FL 32025

Changed 07/11/2005

Mailing Address

159 SW HUDSON LANE
LAKE CITY FL 32025

Changed 01/23/2004

Registered Agent Name & Address

JONES, CHRISTOPHER C
159 SW HUDSON LANE
LAKE CITY FL 32025 US

Name Changed: 01/14/2009

Address Changed: 07/11/2005

Officer/Director Detail

Name & Address

Title PD

JONES, CHRISTOPHER C
4453 S.E. COUNTRY CLUB RD
LAKE CITY FL 32025

Title VD

KURTZ, TONY
410 SE PEACOCK TERRACE
LAKE CITY FL 32025

Title TD

GRUBB, SHAUN
196 S.W. BRAVA WAY
LAKE CITY FL 32024

Annual Reports

Report Year Filed Date

2007	04/04/2007
2008	01/25/2008
2009	01/14/2009

Document Images

01/14/2009 -- ANNUAL REPORT	View image in PDF format
01/25/2008 -- ANNUAL REPORT	View image in PDF format
04/04/2007 -- ANNUAL REPORT	View image in PDF format
07/07/2006 -- ANNUAL REPORT	View image in PDF format
07/11/2005 -- ANNUAL REPORT	View image in PDF format
01/23/2004 -- ANNUAL REPORT	View image in PDF format
04/28/2003 -- ANNUAL REPORT	View image in PDF format
05/13/2002 -- ANNUAL REPORT	View image in PDF format
05/01/2001 -- ANNUAL REPORT	View image in PDF format
01/20/2000 -- ANNUAL REPORT	View image in PDF format
05/14/1999 -- Amendment	View image in PDF format
03/08/1999 -- REINSTATEMENT	View image in PDF format
05/16/1995 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

[Previous on List](#)[Next on List](#)[Return To List](#)

Entity Name Search

[Events](#)[No Name History](#)[Submit](#)

[| Home](#) | [Contact us](#) | [Document Searches](#) | [E-Filing Services](#) | [Forms](#) | [Help](#) |

Copyright and Privacy Policies

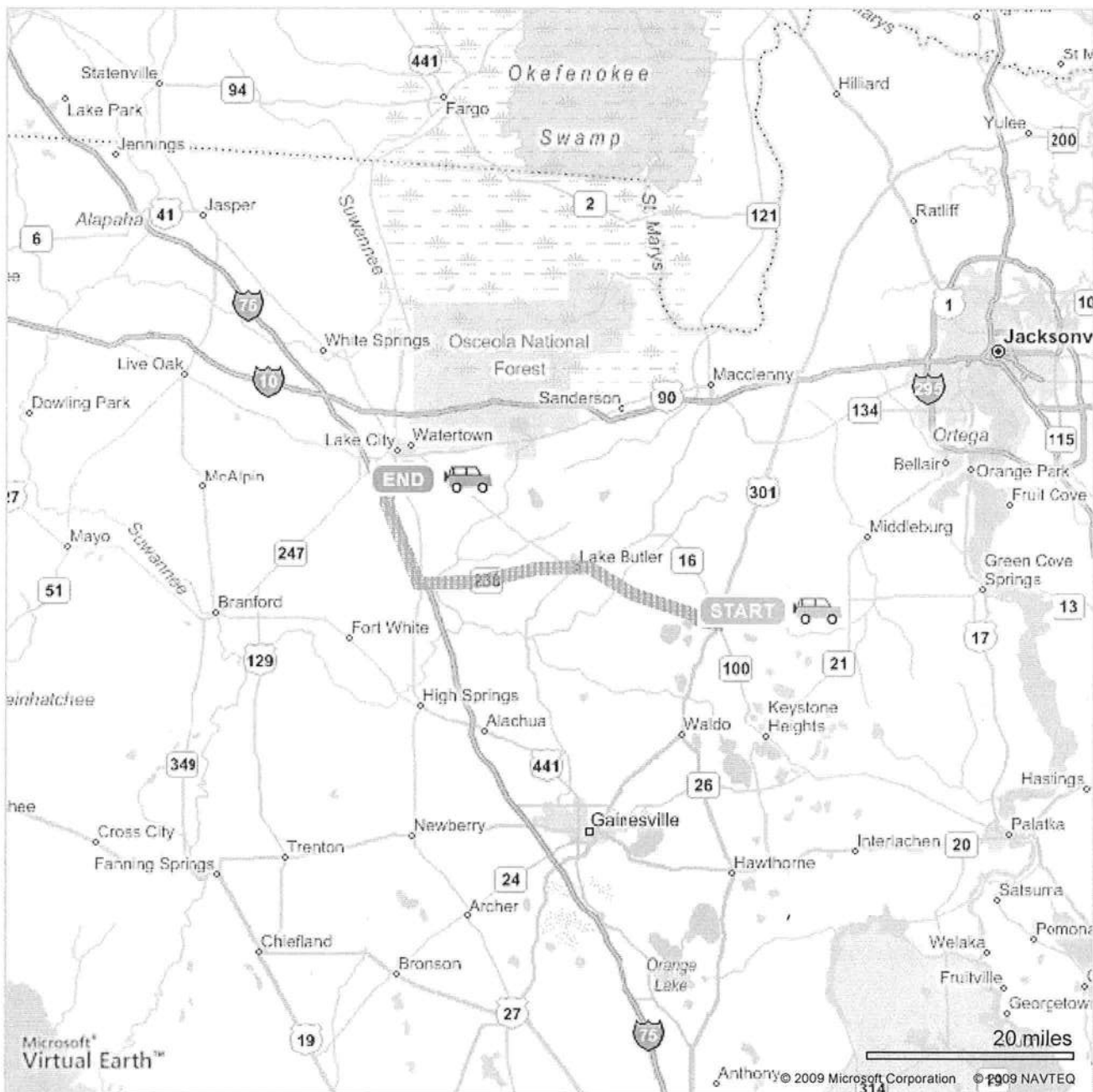
Copyright © 2007 State of Florida, Department of State.

superpages.com we know maps around here

Start: 986 n temple ave starke fl 32091

End: Christian Heritage Church (386) 752-9119
159 SW Hudson Lane, Lake City, FL 32025

Route Summary: 42.5 mi 56.5 minutes



Notes:

--

Start: Depart US-301 / N Temple Ave

- | | |
|---|---------|
| 1. Turn right onto SR-100 / W Madison St | 15.3 mi |
| 2. Turn left onto SR-231 / SR-238 / SW 6th Ave | 0.1 mi |
| 3. Turn right to stay on SR-238 / SW 2nd St | 15.3 mi |
| 4. Turn left onto US-41 / US-441 | 0.2 mi |
| 5. Take ramp right for I-75 | 8.6 mi |
| 6. At exit 423, take ramp right for SR-47 toward FT White / Lake City | 0.3 mi |
| 7. Bear right onto SR-47 | 1.5 mi |
| 8. Turn right onto SW Hudson Ln | 0.3 mi |

End: Arrive

PRODUCT APPROVAL SPECIFICATION SHEET

Location: _____

Project Name: _____

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are **applying for a building permit on or after April 1, 2004**. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles	Atlas	Pinnacle 35yr Asphalt Shingle	FL 9792
2. Underlayments	Atlas	Atlas 3016 felt	FL 11915
3. Roofing Fasteners			
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives - Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection

Randy E. Thompson
 Contractor or Contractor's Authorized Agent Signature
 159 SW Hudson Lane, Lake City, FL 32025
 Location

Randy E. Thompson 6/1/09
 Print Name Date
 Permit # (FOR STAFF USE ONLY)



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

AC# 3879791

CCC1326732 07/29/08 088016886

CERTIFIED ROOFING CONTRACTOR
THOMPSON, RANDY EARL
CORNERSTONE CONSTRUCTION & ROOFI

IS CERTIFIED under the provisions of Ch.489 FS
Expiration date: AUG 31, 2010 L08072901350



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

AC# 3380114

QB42449 08/31/07 078034560

QUALIFIED BUSINESS ORGANIZATION
CORNERSTONE CONSTRUCTION & ROOFIN

(NOT A LICENSE TO PERFORM WORK.
ALLOWS COMPANY TO DO BUSINESS IF
IT HAS A LICENSED QUALIFIER.)

IS QUALIFIED under the provisions of Ch.489 FS.
Expiration date: AUG 31, 2009 L07083100991

ACORDTM

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/01/2009

PRODUCER 904.964.7826 FAX 904.964.4571
 ROBERTS INSURANCE OF STARKE, INC
 986 N. TEMPLE AVE
 STARKE, FL 32091
 Sandra Luke

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED Cornerstone Construction & Roofing, Inc.
 18451 NE 19th Place
 Starke, FL 32091

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: SOUTHERN OWNERS

10190

INSURER B: Auto Owners Insurance Company

18988

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	054622-78559967-08	10/14/2008	10/14/2009	EACH OCCURRENCE \$ 300,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
					PERSONAL & ADV INJURY \$ 300,000
					GENERAL AGGREGATE \$ 300,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG \$ 300,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY	46-890-581-00	07/21/2008	07/21/2009	COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$ 100,000
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$ 300,000
	<input type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident) \$ 300,000
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	RETENTION \$				\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	051722-78000137	10/14/2008	10/14/2009	WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$ 100,000
					E.L. DISEASE - EA EMPLOYEE \$ 100,000
					E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

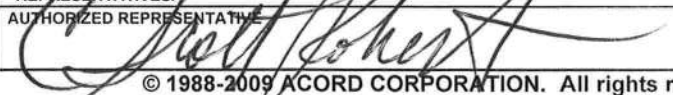
CERTIFICATE HOLDER

COLUMBIA COUNTY
 135 NE HERNANDO AVENUE
 LAKE CITY, FL 32055

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



ACORD 25 (2009/01)

© 1988-2009 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

This Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

Columbia County Property Appraiser

DB Last Updated: 4/27/2009

Parcel: 18-4S-17-08479-101 02

2009 Preliminary Values[Tax Record](#)[Property Card](#)[Interactive GIS Map](#)[Print](#)**Owner & Property Info**

<< Prev

Search Result: 3 of 3

Owner's Name	CHRISTIAN HERITAGE CHURCH OF		
Site Address	HUDSON		
Mailing Address	LAKE CITY FLORIDA INC 159 SW HUDSON LN LAKE CITY, FL 32025		
Use Desc. (code)	CHURCHES (007100)		
Neighborhood	018417.03	Tax District	2
UD Codes	MKTA06	Market Area	06
Total Land Area	0.000 ACRES		
Description	COMM SE COR OF SEC, RUN N 1417.87 FT W 577 FT N 778.50 FT W 1334 FT FOR POB, W 534.81 FT TO E R/W SR47 N 210.82 FT, E 517.57 FT S 210 FT TO POB. (AKA LOTS 1 THRU 4 GREENRIDGE ESTATES SOUTH UNREC) 881-289 ORB 474-724 509-514		

GIS Aerial**Property & Assessment Values**

Mkt Land Value	cnt: (1)	\$86,400.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (2)	\$370,697.00
XFOB Value	cnt: (2)	\$14,900.00
Total Appraised Value		\$471,997.00

Just Value	\$471,997.00
Class Value	\$0.00
Assessed Value	\$471,997.00
Exemptions	(code: 02) \$471,997.00
Total Taxable Value	County: \$0.00 City: \$0.00 Other: \$0.00 School: \$0.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	CHURCH (009100)	1982	Common BRK (19)	4784	5382	\$144,270.00
2	CHURCH (009100)	1987	Common BRK (19)	7342	7678	\$226,427.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0260	PAVEMENT-A	0	\$3,700.00	0000001.000	0 x 0 x 0	(000.00)
0260	PAVEMENT-A	0	\$11,200.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	* Adjustments	Eff Rate	Lnd Value
007100	CHURCH (MKT)	0000004.000 LT - (0000000.000AC)	1.00/1.00/0.80/1.00	\$21,600.00	\$86,400.00

CORNERSTONE CONSTRUCTION & ROOFING, INC.

18451 N.E. 19TH PLACE

STARKE, FL 32091

904-964-9575 OR 904-364-3405

LICENSES #'S CCC1326732(ROOFING) CBC1254354 (GENERAL BUILDERS)

**THIS IS TO ADVISE THAT LORI A. THOMPSON IS AUTHORIZED TO PULL PERMITS AND
CO'S ON MY BEHALF IN ALL CITIES AND COUNTIES.**


RANDY E. THOMPSON



SANDRA LUKE
Notary Public, State of Florida
My Comm. Expires April 18, 2012
Commission No. DD 773151