

DATE 11/09/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022481

APPLICANT HUGO ESCALANTE

PHONE 386.288.0666

ADDRESS

FL

OWNER DAVID CASTRO

PHONE 786.256.0878

ADDRESS 660 SW MORNINGSTAR GLEN

FT. WHITE

FL

32038

CONTRACTOR DAVID CASTRO

PHONE 786.256.0878

LOCATION OF PROPERTY 47-S TO MORNINGSTAR GLEN,L, 1 MILE ON RIGHT.

TYPE DEVELOPMENT POOL SCREEN ENCL ESTIMATED COST OF CONSTRUCTION 15000.00

HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES

FOUNDATION CONC WALLS ROOF PITCH FLOOR CONC

LAND USE & ZONING A-3 MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE N/A DEVELOPMENT PERMIT NO.

PARCEL ID 34-5S-16-03752-114 SUBDIVISION SHANNA MEADOWS

LOT 14 BLOCK PHASE UNIT TOTAL ACRES 5.00

Culvert Permit No. Culvert Waiver Contractor's License Number

Applicant/Owner/Contractor

EXISTING X04-0274 BLK RK N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE.

LETTER OF AUTHORIZATION GIVEN.

Check # or Cash 1827

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by

Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by

Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by

Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by

Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by

M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by

Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by

M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 75.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00

MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$

FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 125.00

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."

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

CK# 1827

Revised 9-23-04

For Office Use Only Application # 0410-51 Date Received 10/2/04 By JW Permit # 02481
Application Approved by - Zoning Official BLK Date 05.11.04 Plans Examiner PK 11-7-04 Date _____
Flood Zone N/A Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
Comments _____

Applicants Name David Castro/Hugo Escalante Phone 786-956-0878
Address 660 S.W. Morningside Glen, Fort White, FL, 32038
Owners Name David Castro Phone 786-956-0878
911 Address 660 S.W. Morningside Glen, Fort White, FL 32038
Contractors Name _____ Phone _____
Address _____
Fee Simple Owner Name & Address Same as Owner
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address _____
Mortgage Lenders Name & Address N/A
Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
Property ID Number 34-55-16-03752-114 Estimated Cost of Construction \$15,000
Subdivision Name Shanna Meadows Lot 14 Block _____ Unit _____ Phase _____
Driving Directions 47 South until, Morningside Glen, make left 1 mile on right.

Type of Construction Pool Screen Enclosure Number of Existing Dwellings on Property 1
Total Acreage 5 Acre Lot Size 5 Acre Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front N/A Side 150' Side 125' Rear 280'
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.

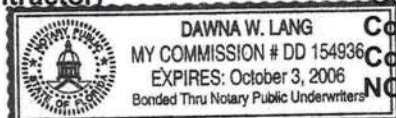
OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT 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)

DAVID ALFONZO CASTRO

STATE OF FLORIDA
COUNTY OF COLUMBIA



Sworn to (or affirmed) and subscribed before me

this 21st day of October 2004.

Personally known _____ or Produced Identification X

FDL #C236-161-43-326-0 Exp. 09-06-07

Contractor Signature

Contractors License Number _____

Competency Card Number _____

NOTARY STAMP/SEAL

Dawna W. Lang
Notary Signature DAWNA W. LANG


OCTOBER 21, 2004

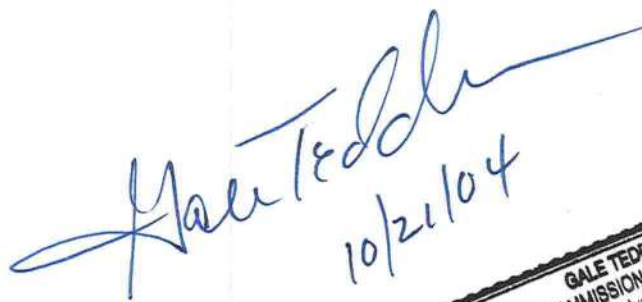
TO WHOM IT MAY CONCERN:

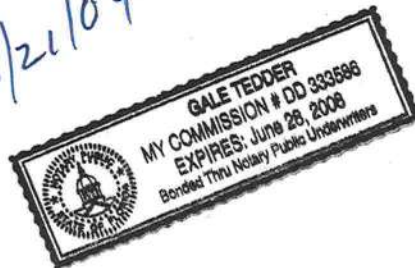
I, DAVID CASTRO, DO HEREBY, AUTHORIZE HUGO ESCALANTE AS
MY AUTHORIZED AGENT TO PULL MY PERMIT FOR SCREEN ENCLOSURE,
LOCATED AT 660 SW MORNINGSTAR GLEN, FT. WHITE, FL 32038

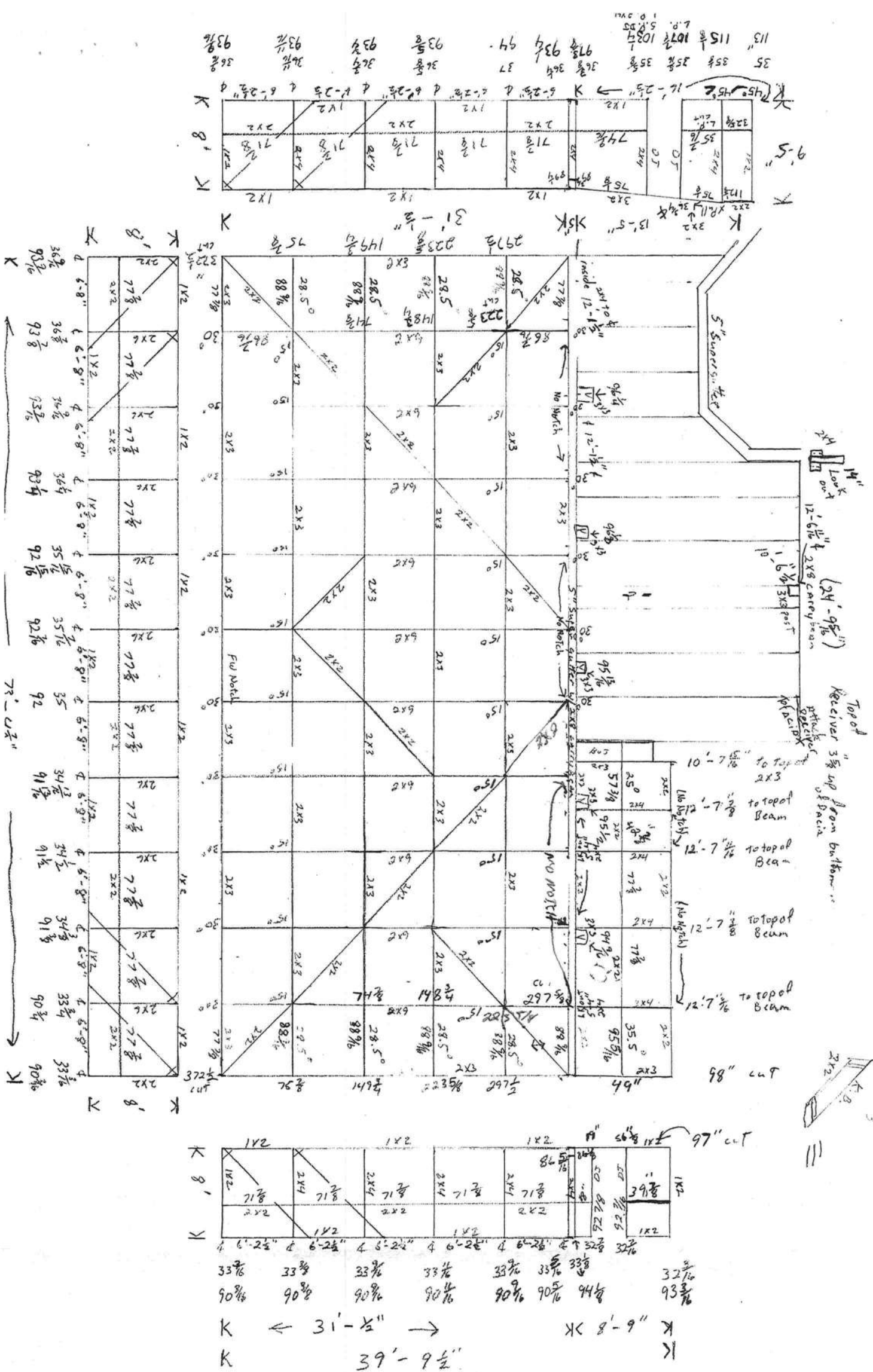
SHOULD YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CONTACT
ME AT 786.256.0878.

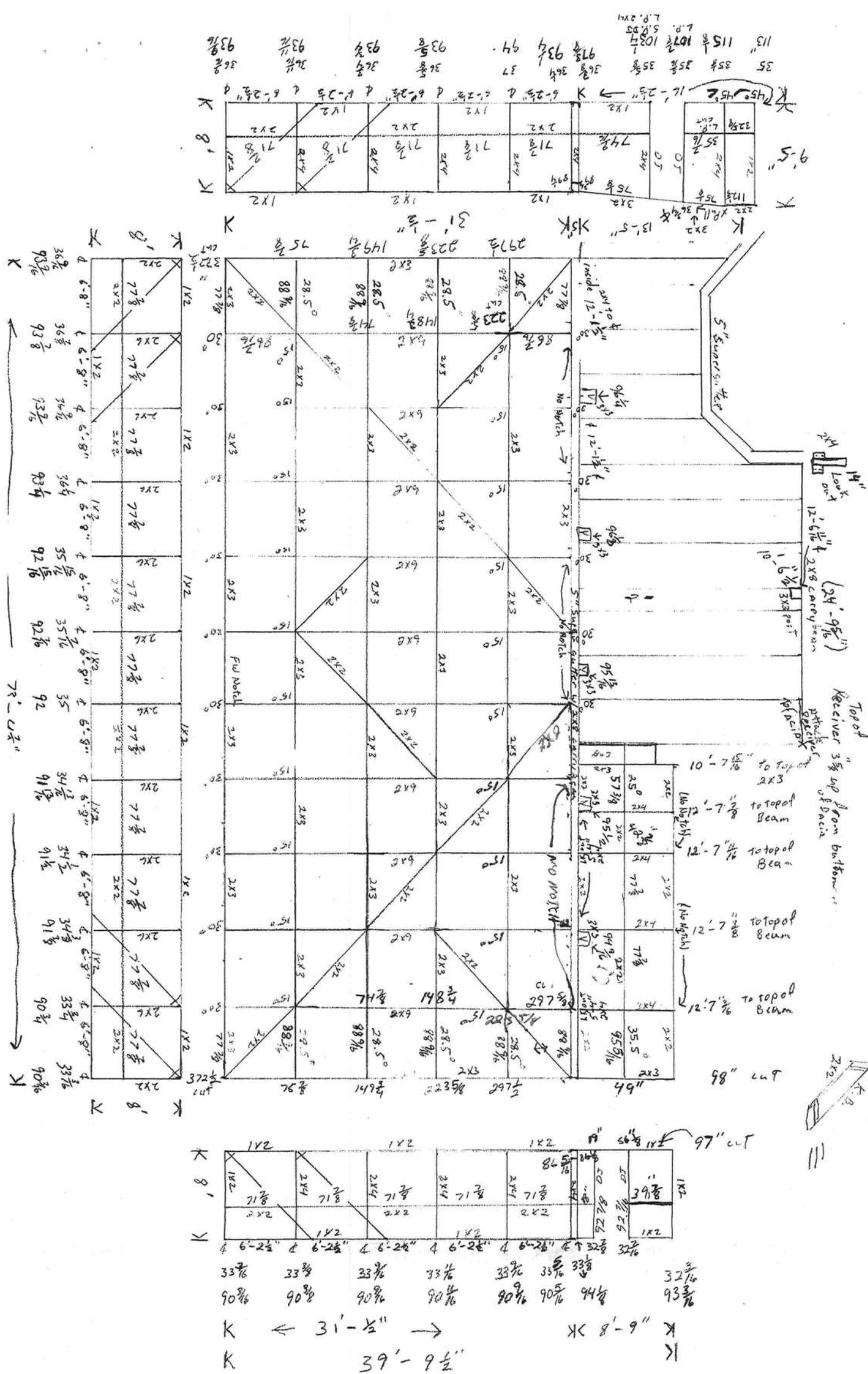
THANK YOU,


DAVID CASTRO
660 SW MORNINGSTAR GLEN
FT. WHITE, FL 32038


10/21/04







NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

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 34-55-16-03752-114

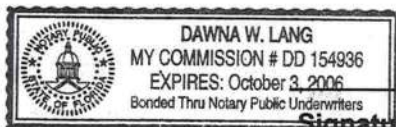
1. Description of property: (legal description of the property and street address or 911 address)
Lot 14, Shanna Meadows, a subdivision as recorded in Plat Book 7, pages 76-77, Columbia City, FL subject to restrictions recorded in OR Book 0933, pages 2634-2635 Columbia City, FL subject to power easements.
(911 Address) 660 S.W. Morningside Glen, Fort White, FL 32038
2. General description of improvement: Screen Enclosure For Pool.
3. Owner Name & Address David Castro, 660 S.W. Morningside Glen, Fort White, FL 32038 Interest in Property _____
4. Name & Address of Fee Simple Owner (if other than owner): N/A
5. Contractor Name _____ Phone Number _____
Address _____
6. Surety Holders Name N/A Phone Number _____
Address _____
Amount of Bond _____
Inst: 2004023714 Date: 10/21/2004 Time: 12:11
YMK DC, P. DeWitt Cason, Columbia County B: 1028 P: 2245
7. Lender Name N/A
Address _____
8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:
Name Hugo Escalante Phone Number 386-288-8666
Address 6210 S.W. CR 18, Fort White, FL 32038
9. In addition to himself/herself the owner designates Hugo Escalante of Fort White, FL 32038 to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) - (a) 7. Phone Number of the designee 386-288-8666
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) _____

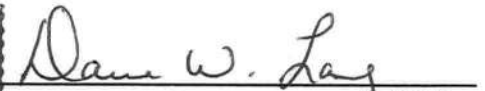
NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.


Signature of Owner
DAVID ALFONZO CASTRO

Sworn to (or affirmed) and subscribed before me
this 21st day of October, 2004
produced DL # C236-161-43-326-0
NOTARY STAMP/SEAL Exp. 09-06-07




Signature of Notary DAWNA W. LANG

DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

TYPE OF CONSTRUCTION

- ☐ Single Family Dwelling
☐ Farm Outbuilding
☐ New Construction
☐ Two-Family Residence
☒ Other Pool Enclosure
☐ Addition, Alteration, Modification or other Improvement

NEW CONSTRUCTION OR IMPROVEMENT

I DAVID CASTRO, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____

[Signature]
Signature

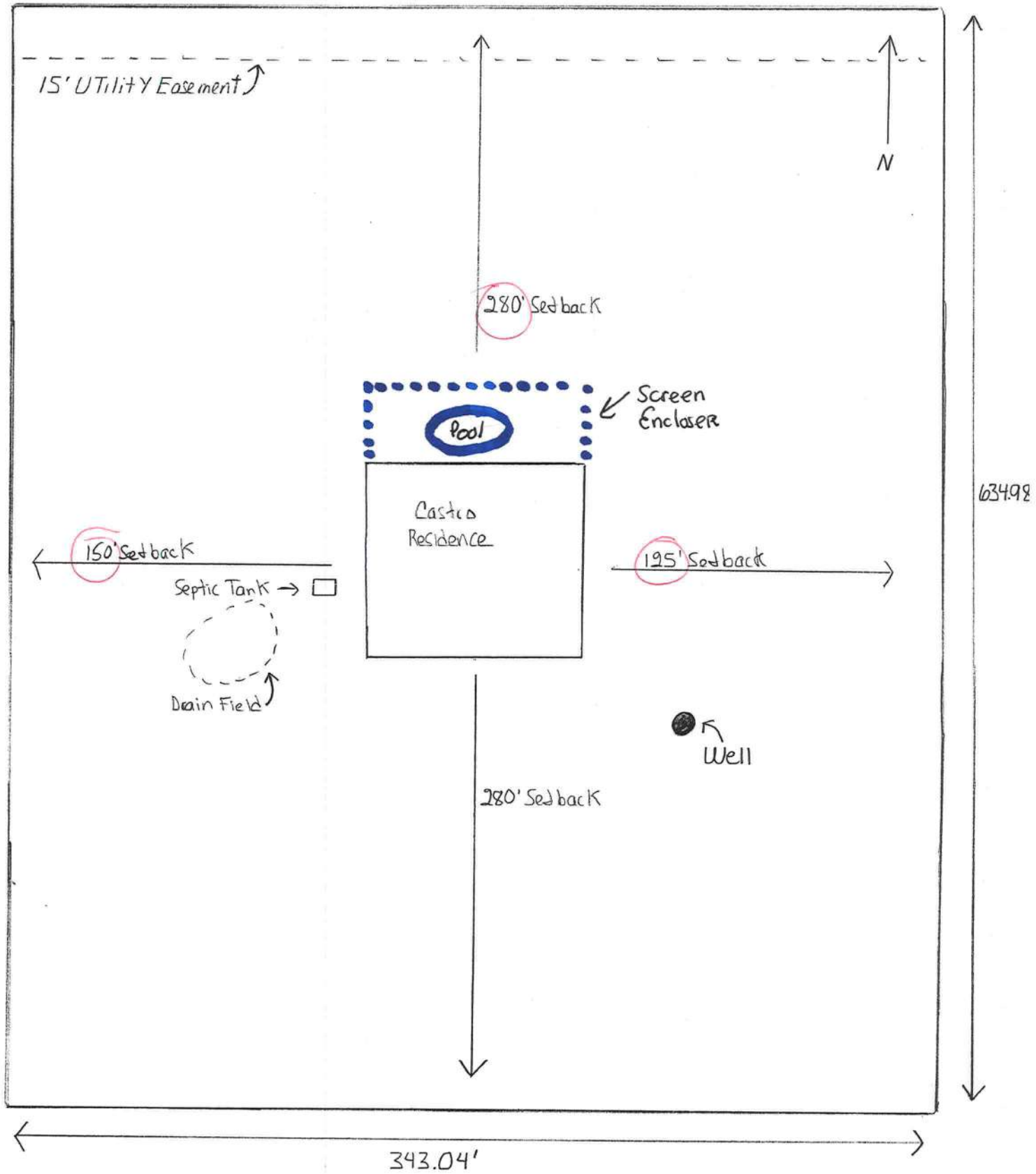
10/21/04
Date

FOR BUILDING USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7).

Date 10-21-04 Building Official/Representative [Signature]

Site Plan (Castro Residence)
Parcel ID # 34-5S-16-03752-114
Shanna Meadows Lot 14



PAID
2/20/05

GLENDALE
CITY

OCCUPANCY

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 34-5S-16-03752-114

Building permit No. 000022481

Use Classification POOL SCREEN ENCL

Fire: _____

Permit Holder DAVID CASTRO

Waste: _____

Owner of Building DAVID CASTRO

Total: .00

Location: 660 SW MORNINGSTAR GLEN (SHANNA MEADOWS, LOT 14)

Date: 02/01/2005



[Signature]

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)