

DATE 09/10/2003

Columbia County Building Permit / Application

PERMIT

000021059

New Resident N


This Permit Expires One Year From Date of Issue

APPLICANT	AARON SIMQUE			PHONE	386.755.0841				
ADDRESS	RT. 9. BOX 785-33			LAKE CITY	FL	32024			
OWNER	SAME AS APPLICANT			PHONE	SAME				
ADDRESS	SAME			SAME	FL	SAME			
CONTRACTOR	AAROM SIMQUE			PHONE	386.755.0841				
LOCATION OF PROPERTY	SISTERS WELCOME ROAD JUST PAST AIRPARK ON RIGHT, CREEKSIDE S.D ON THE R, TURN IN, FOLLOW RD TO L, LOT ON LEFT.								
TYPE DEVELOPMENT	SFD,SEPTIC,UTILITY			ESTIMATED COST OF CONSTRUCTION			56790.00		
FLOOR AREA	1893.00	TOTAL AREA	2817.00	HEIGHT	22.00	STORIES	1	WALLS	FRAME
FOUNDATION	CONC	ROOF (Type & Pitch)		8'12	FLOOR		CONC		
LAND USE & ZONING	RSF-2			MAX. HEIGHT		35			
MINIMUM SET BACK:	STREET-FRONT / SIDE		25.00	REAR	15.00	SIDE	10.00		
NO. EX.D.U.	0	FLOOD ZONE	X	CERT. DATE	DEV. PERMIT				

LEGAL DESCRIPTION

PARCEL ID	12-4S-16-02939-107	SUBDIVISION	CREEKSIDE
BLOCK	LOT 7	UNIT	TOTAL ACRES .50

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

18"X32"MITERED		LB 29003130	
Driveway Connection	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor

<u>03-0767-N</u>	<u>BLK</u>	<u>JDK</u>
Septic Tank Number	LU & Zoning checked by	Approved for Issuance

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	framing
date/app. by	date/app. by	date/app. by
Rough-in plumbing above slab and below wood floor		
date/app. by		
Electrical rough-in	Heat and Air Duct	Peri. beam
date/app. by	date/app. by	date/app. by
Permanent power	Final	Pool
date/app. by	date/app. by	date/app. by

COMMENTS: 1 FT. ABOVE RD.

OTHER TYPES OF INSPECTIONS

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

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

BUILDING PERMIT FEE \$ 285.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$ 14.09 Surcharge \$ 14.09

MISC. FEES \$.00 CULVERT FEE \$ 5.00 TOTAL PERMIT FEE \$ 343.18
INSPECTORS OFFICE _____ CLERKS OFFICE CH

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 INCONVENIENCE, 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

#21059

Date 8-27-83

Application No. 0308-68

Applicants Name & Address AARON SIMAVE Homes, INC. Phone 755-0841
RT. 9 BOX 785-33 LAKE CITY FL. 32024

Owners Name & Address SAME AS ABOVE Phone _____

Fee Simple Owners Name & Address SAME AS ABOVE Phone _____

Contractors Name & Address SAME AS ABOVE Phone _____

Legal Description of Property CREEKside LOT 7
911 ADDRESS 280 SW CreekSide Lane

Location of Property IN CreekSide OFF OF SISTERs welcome RD.
across from the AIR PARK

Tax Parcel Identification No. 12-45-16-02939-107 Estimated Cost of Construction \$ 100,000

Type of Development Residential Number of Existing Dwellings on Property 0

Comprehensive Plan Map Category RES. LOW DENSITY Zoning Map Category RSF-2

Building Height 23' Number of Stories 1 Floor Area 863 Total Acreage in Development 1/2

Distance From Property Lines (Set Backs) Front 30' 50' Side 10' 17.8' / 17.1' Rear 30' 82.05' Street 35'

Flood Zone NOX per plat Certification Date _____ Development Permit N/A

Bonding Company Name & Address NONE

Architect/Engineer Name & Address William Myers / Mark D. S. S. Wray / LAKE CITY FL.

Mortgage Lenders Name & Address Peoples State Bank LAKE CITY

Application is hereby made to obtain a permit to do the 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 will 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 regulating construction and zoning.

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AARON Simave
Owner or Agent (including contractor)

AARON Simave
Contractor
RB 29003130
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____

Personally Known _____ OR Produced Identification

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____

Personally Known _____ OR Produced Identification



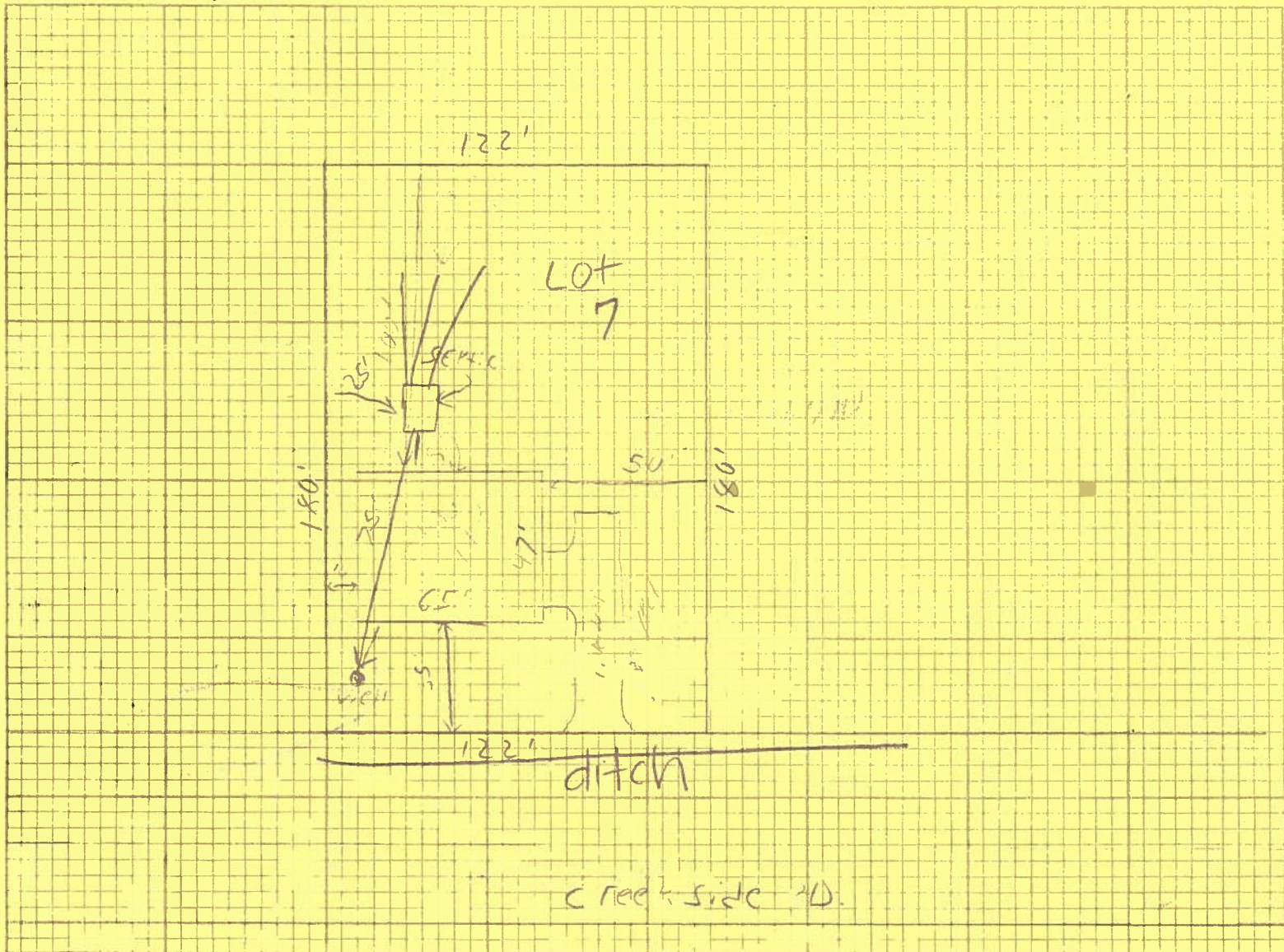
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 03-0767N

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes:

Site Plan submitted by: [Signature] Signature Title Owner

Plan Approved [Checkmark] Not Approved _____ Date 8/1/03

By Sally A. [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Application for Culvert Permit

Columbia County, Florida

DATE 9-10-03 ¹⁹

TO BOARD OF COUNTY COMMISSIONERS:

Building Permit # 21059

Application is hereby made to install one or more culverts on the property owned by

AARON SIMONE HOMES, INC
Name of Taxpayer

located outside of any incorporated municipality in said County and described on the Tax Rolls as follows:

CHEEKSIDE #10 LOT 7

SECTION: 12 TOWNSHIP: 4 RANGE: 16
(List tax roll description of property)

(INSTALLER IS TO CONTACT BUILDING INSPECTOR'S OFFICE FOR FINAL INSPECTION)

758-1008
758-1124

18" x 32" INTERLOCK
Culvert Size ☒ - Plain/Coated
CONC ON BOTH ENDS
Culvert Inspector / Inspection Date
1 CONC ON TOP OF LOT
Date of Final Inspection

[Signature]
Applicant
Rt. 9, Box 785-33
Address: Street, R. R. or P. O. Box
LAKE CITY, FL 32025
City, State, Zip Code

BOARD OF COUNTY COMMISSIONERS
Columbia County, Florida

5.00
FEE

[Signature]
Building Department

PLEASE BE ADVISED:
Applicant must notify any
appropriate utility company
before digging or placement
of culvert.

WHITE — Owner

YELLOW — Building Inspector

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID 03-612
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Inst:2003019490 Date:09/09/2003 Time:16:32
MLK DC,P.DeWitt Cason,Columbia County B:994 P:584

PERMIT NO. _____

TAX FOLIO NO.: _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

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.

1. Description of property:

Lot 7, CREEKSIDE, a subdivision according to the plat thereof recorded in Plat Book 7, Pages 124-125 of the public records of Columbia County, Florida.

2. General description of improvement: Construction of Dwelling.

3. Owner information:

a. Name and address: AARON SIMQUE HOMES, INC.,
Route 9, Box 785-33, Lake City, FL 32024

b. Interest in property: Fee Simple

c. Name and address of fee simple title holder (if other than Owner): None

4. Contractor: AARON SIMQUE HOMES, INC.
Route 9, Box 785-33, Lake City, FL 32024

5. Surety n/a

a. Name and address:
b. Amount of bond:

6. Lender: Peoples State Bank
350 SW Main Blvd., Lake City, FL 32025

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: None

8. In addition to himself, Owner designates Robert Woodard of Peoples State Bank, 350 SW Main Blvd., Lake City, FL 32025 to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

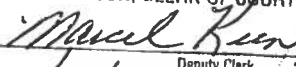
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified). September 5, 2004.

AARON SIMQUE HOMES, INC.


By: AARON SIMQUE, President

The foregoing instrument was acknowledged before me this 5th day of September, 2004, by AARON SIMQUE, as President of AARON SIMQUE HOMES, INC., who is personally known to me and who did not take an oath.

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY, that the above and foregoing
is a true copy of the original filed in this office.
P. DeWITT CASON, CLERK OF COURTS

By 
Deputy Clerk

Date Sept 9 2003




Notary Public

My commission expires: _____