		Building Permit	PERMIT
Th APPLICANT MARK HADDOX	is Permit Expires One Ye	ear From the Date of Issue PHONE 755-2411	000025394
ADDRESS P.O. BOX	3535	LAKE CITY	FL 32056
OWNER JOHN & DEBRA LINT	ON	PHONE 755-1743	
ADDRESS 5569 SW CR 240)	LAKE CITY	FL 32024
CONTRACTOR WILLIAM WOO	D	PHONE 755-2411	
LOCATION OF PROPERTY 4	7S, TL ON CR 240, 1 MILE ON	LEFT, JUST BEFORE MEADE	
<u>N</u>	IINISTRIES		
TYPE DEVELOPMENT SFD,UTI	LITY EST	FIMATED COST OF CONSTRUCTION	ON <u>210000.00</u>
HEATED FLOOR AREA 420	00.00 TOTAL ARE	A 4484.00 HEIGHT	STORIES 1
FOUNDATION CONC	WALLS FRAMED R	OOF PITCH 8/12	FLOOR SLAB
LAND USE & ZONING A-3		MAX. HEIGHT	26
Minimum Set Back Requirments: S	TREET-FRONT 30.00	REAR 25.00	SIDE 25.00
NO. EX.D.U. 0 FLOOD	ZONE X PP	DEVELOPMENT PERMIT NO.	
PARCEL ID 11-5S-16-03570-110	SUBDIVISION	WILSON PLACE	
LOT 10 BLOCK P	HASE UNIT _	TOTAL ACRES	5.00
000001294		14/4/1/4/11	1
Culvert Permit No. Culvert Waise	er Contractor's License Num		ner/Contractor
CULVERT 06-1038-N	BK	JH	nei Contractor
Driveway Connection Septic Tank	Number LU & Zonin	g checked by Approved for Issu	ance New Resident
COMMENTS: ONE FOOT ABOVE TO		,pp.	
THE TOTAL STATE OF THE STATE OF	ID NOTE, NOT ON THEE		
		Check # or	Cash 127
F	OR BUILDING & ZONIN	G DEPARTMENT ONLY	
Temporary Power	Foundation		(footer/Slab)
date/app. by		date/app. by Monolithic	date/app. by
Under slab rough-in plumbing	Slab	Sheathi	
·	date/app. by	date/app. by	date/app. by
Framing date/app, by	Rough-in plumbing abo	ove slab and below wood floor	
Electrical rough-in	Harris G. A. D.		date/app. by
date/app. by	Heat & Air Duct	Peri. beam (Li	date/app. by
Permanent power	C.O. Final	Culvert	daterapp. by
date/app. by		ate/app. by	date/app. by
M/H tie downs, blocking, electricity and p	lumbing date/app.	Pool	
Reconnection	Pump pole	Utility Pole	date/app. by
date/app. by	date/a Travel Trailer	pp. by date/app Re-roof	. by
date/app. by		te/app. by	date/app. by
BUILDING PERMIT FEE \$ 1050.0	CERTIFICATION TO	6 22.42	
MISC. FEES \$ ZO	ONING CERT. FEE \$ 50.00		STE FEE \$
FLOOD DEVELOPMENT FEE \$	_ FLOOD ZONE FEE \$ 25.00	CULVERT FEE \$ 25.00 TO	OTAL FEE 1194.84
INSPECTORS OFFICE	le /Erlele	CLERKS OFFICE	/ / /
NOTICE: IN A DOUTION TO THE BEOLUBE	MENTS OF THIS DEPART THERE	MAY BE ADDITIONAL RESTRICTIONS A	

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

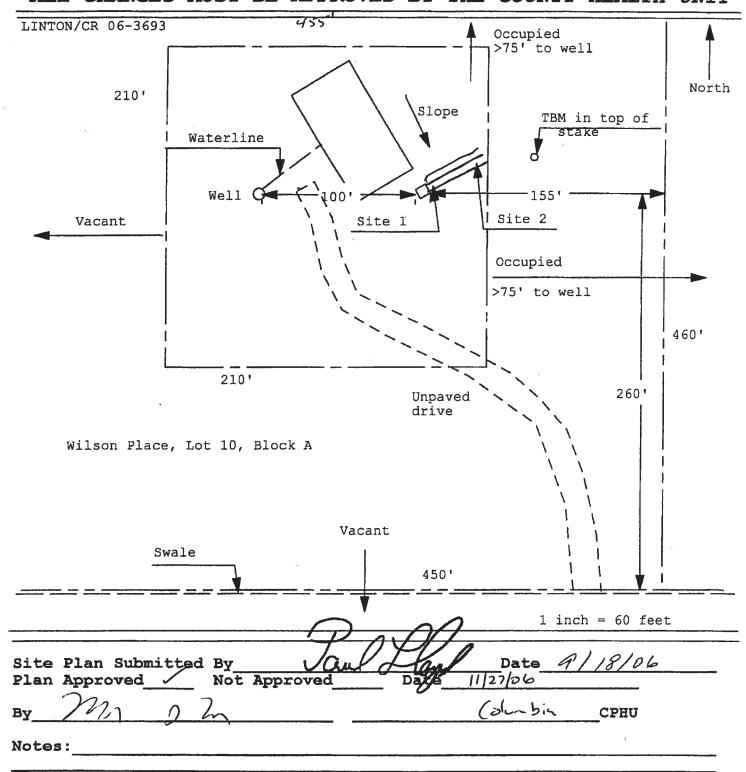
Revised 9-23-04

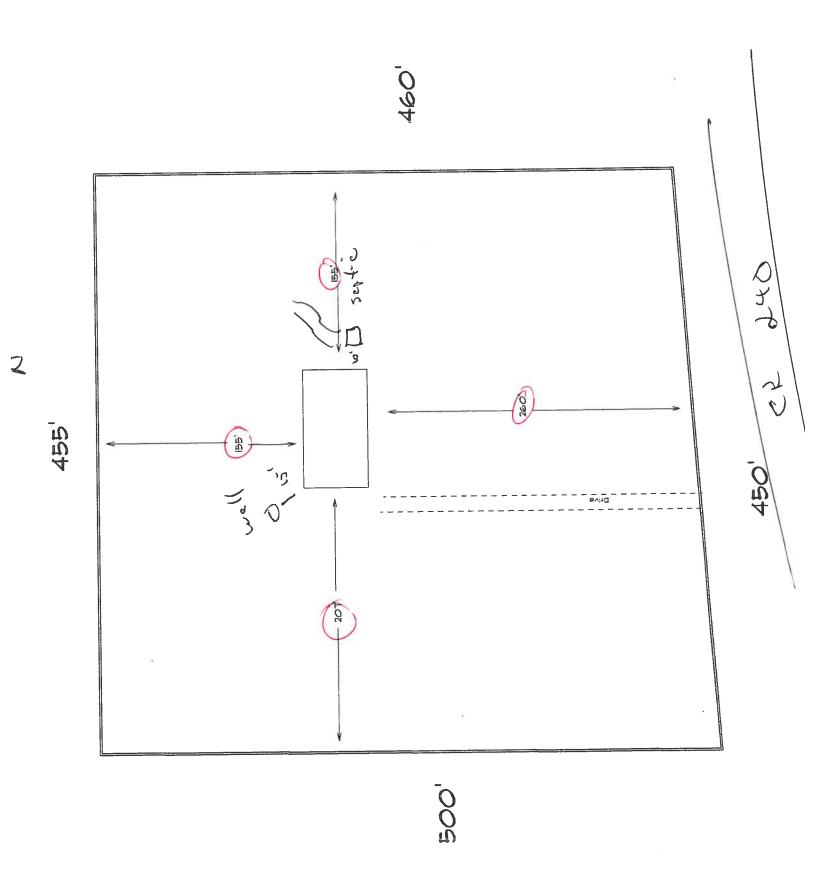
For Office Use Only Application # 06 11-53 Date Received 11/22/66 By CH Permit # 1294/25394
Application Approved by - Zoning Official BL Date 05.12.06 Plans Examiner OK 57H Date 12-14-00
Flood Zone X Plat Development Permit <u>N/A</u> Zoning A-3 Land Use Plan Map Category A-3
Comments

Applicants Name Marle Haddox Phone 755-2411
Address
Owners Name John & Debra Linton Phone 755-1743
911 Address 5569 SW CR Z40 (ake City fc 32024
Contractors Name William Wood Phone 386-755-1411
Address P.O. Box 3535 Lake City FL 32056
Fee Simple Owner Name & Address v/a
Bonding Co. Name & Address
Architect/Engineer Name & Address
Mortgage Lenders Name & Address Merchantic Bank - (4) 90
Circle the correct power company - FL Power & Light - Clay Elec Suwannee Valley Elec Progressive Energy
Property ID Number 11-53-16-03570-110 Estimated Cost of Construction
Subdivision Name Wilser Place 5/0 Lot Block Unit Phase
Driving Directions 475 to cR 240 (left) about
mile en left. I not before mende ministries
Type of Construction <u>Peridental</u> Number of Existing Dwellings on Property O
Total Acreage Lot Size Do you need a - <u>Culvert Permit</u> or <u>Culvert Waiver</u> or <u>Have an Existing Drive</u>
Actual Distance of Structure from Property Lines - Front 260 Side 55 Side 207 Rear 155
Total Building Height 26'7" Number of Stories 1 Heated Floor Area 4100 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.
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.
Ourses Builder on Ament (Including Contractor)
Owner Builder or Agent (Including Contractor) Contractor Signature Contractor Signature
STATE OF FLORIDA Competency Card Number COUNTY OF COLUMBIA NOTARY STAMP/SEAL \/
Sworn to (or affirmed) and subscribed before me
this 10 day of NOU 2006. Denote Denote
Personally known or Produced Identification Notary Signature
My Commission DD293888
Expires February 24, 2008

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: 06-(0381)

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT





3

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID 06-577 POST OFFICE BOX 1328 LAKE CITY, FL 32056-1328

RETURN TO:

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

Inst:2006026032 Date:11/01/2006 Time:16:13

Doc Stamp-Deed : 0.70

Property Appraiser's Identification Number R03570-110 —

1.4 DC,P.Dewitt Cason,Columbia County B:1100 P:2364

WARRANTY DEED

THIS INDENTURE, made this 30th day of October, 2006, BETWEEN RICHARD PHILPOT and LEANNE B. PHILPOT, Husband and Wife, of the County of Columbia, State of Florida, grantor*, and JOHN T. LINTON and DEBORAH A. LINTON, Husband and Wife whose post office address is Post Office Box 1735, Lake City, FL 32056, of the County of Columbia, State of Florida, grantee*.

WITNESSETH: that said grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Lot 10, Block A of WILSON PLACE, a subdivision according to the plat thereof as recorded in Plat Book 7, Page 86 of the public records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

N.B.: This instrument is being given to fulfill the terms and conditions of Agreement for Deed recorded in Official Records Book 1007, Page 1438, public records of Columbia County, Florida. Documentary Stamps in the amount of \$315.00 were paid with the recording of the Agreement for Deed.

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.

*"Grantor" and "grantee" are used for singular or plural, as context requires.

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

3

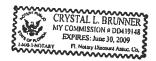
Signed, sealed and delivered in our presence: (SEAL) First Witness) (Signature of First Crystal L. Brunner Grantor RICHARD PHILPOT (Typed Name of First Witness) Printed Name (SEAL) (Signature of Second Witness) Terry McDavid Grantor LEANNE B. PHILPOT Printed Name (Typed Name of Second Witness)

STATE OF Florida COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 30th day of October, 2006, by RICHARD PHILPOT and LEANNE B. PHILPOT, Husband and Wife who are personally known to me or who have produced ______ as identification and who did not take an oath.

My Commission Expires:

Notary Públic Printed, typed, or stamped name:



Inst:2006026032 Date:11/01/2006 Time:16:13

Doc Stamp-Deed : 0.70

___DC,P.DeWitt Cason,Columbia County B:1100 P:2365

11-5S-16-03570-110

		0 BLOCK A WILSON PLACE ORB 1007-1438		LINTON JOHN & DEBORAH A P O BOX 1735		11-5s-16-03570-110			Columbia County 2007				
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