

DATE 12/18/2009

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

PERMIT
000028283

APPLICANT ROBERT FEASEL PHONE 755-5137
ADDRESS 628 SW BLANTON LN LAKE CITY FL 32024
OWNER JAMES GAY PHONE 752-5373
ADDRESS 2622 SE GILES MARTIN AVE LAKE CITY FL 32024
CONTRACTOR ROBERT FEASEL PHONE 755-5137
LOCATION OF PROPERTY 41 S, L BAILY RD, GO LEFT AT END THEN 1/8 MILE
ON LEFT(1ST HOUSE ON THE LEFT)
TYPE DEVELOPMENT RE-ROOF SFD ESTIMATED COST OF CONSTRUCTION 10000.00
HEATED FLOOR AREA TOTAL AREA HEIGHT 18.00 STORIES 1
FOUNDATION WALLS ROOF PITCH 4/12 FLOOR
LAND USE & ZONING MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE NA DEVELOPMENT PERMIT NO.

PARCEL ID 11-6S-17-09647-002 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES

RC0032600
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X09-389 LH LH N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident
COMMENTS: NOC, EXISTING SFD

Check # or Cash CASH

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

BUILDING PERMIT FEE \$ 50.00 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** 50.00
INSPECTORS OFFICE LJH 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."

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 # <u>0912-33</u>	Date Received <u>12-18-09</u>	By <u>LH</u>	Permit # <u>28283</u>
Zoning Official _____	Date _____	Flood Zone _____	Land Use _____	Zoning _____	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner _____	Date _____
Comments _____					
<input checked="" type="checkbox"/> NOC <input checked="" 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. X09-389 Fax _____

Name Authorized Person Signing Permit Robert Fenzel Phone 386 755-5137

Address 628 S.W. Stanton Lane LC FI 32024

Owners Name James Gay Phone 386 752-5373

911 Address 2622 SE Giles Martin Ave LC FI 32024

Contractors Name Robert Fenzel Phone 386 755-5137

Address 628 S.W. Stanton Lane LC FI 32024

Fee Simple Owner Name & Address NA

Bonding Co. Name & Address NA

Architect/Engineer Name & Address NA

Mortgage Lenders Name & Address NA

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

Property ID Number 11-65-178 ⁰⁹¹⁶⁴⁷⁻⁰⁰² ~~5000~~ Estimated Cost of Construction \$10,000

Subdivision Name NONE Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 41 South pass ellisville to Bailey RD turn Left go to end go Left 1/8 mile on Left

Number of Existing Dwellings on Property 1

Construction of Re Roof 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 1 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.

Columbia County Building Permit Application

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 CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. It may be to your advantage to check and see if your property is encumbered by any restrictions.

(Owners Must Sign All Applications Before Permit Issuance.)


Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

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 (Permitee)

Contractor's License Number RC0032600
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 18 day of Dec 2009.

Personally known ✓ or Produced Identification _____


State of Florida Notary Signature (For the Contractor)

SEAL:



	Columbia	County	
11605	Land	001	*
800	AG	001	
79370	Bldg	001	*
1700	Xfea	004	
93475	TOTAL		B*

1	BEG NW COR OF SEC, RUN E	2122.4 FT FOR POB, RUN E	2
3	307.07 FT TO W R/W LINE OF RD,	SE ALONG RD R/W 707.62 FT, W	4
5	307.07 FT, N 707.62 FT TO POB.	ORB 404-596. (JOINS 9647-000).	6
7	(SEE NOTE), 834-957		8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

Shingles Certainteed

ASTM D 3462

Felt GAP 30 #

ASTM D 4869

18" GIV VAI 50 Ft 26 gauge

wet/Dri Roof Cement 5/Gal ASTM D 4586

1 1/4 EG Roofing Nails

2 1/2 Ring Shank Nails

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 11-65-17-09647-002

1. Description of property: (legal description of the property and street address or S11 address)

2622 S.E. Giles Martin Ave
Lake City FL 32024

2. General description of improvement: new roof

3. Owner Name & Address JAMES GAY 2622 SE Giles Martin Ave
Interest in Property _____

4. Name & Address of Fee Simple Owner (if other than owner): SAME

5. Contractor Name Robb's Roofing Phone Number 386 755-5137
Address 628 SW Stanton Lane LC FL 32024

6. Surety Holders Name NA Phone Number _____

Address _____

Amount of Bond _____

7. Lender Name NA Phone Number _____

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 713.13 (1)(a) 7; Florida Statutes:

Name _____ Phone Number _____

Address _____

9. In addition to himself/herself the owner designates _____ of _____
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee 752-5373

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 [Signature]



Sworn to (or affirmed) and subscribed before
day of Dec 17, 2009

NOTARY STAMP/SEAL

Brenda Meads