

DATE 03/12/2013

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

PERMIT
000030843

APPLICANT WALLACE POWELL PHONE 386.209.5198
ADDRESS POB 1422 MAYO FL 32066
OWNER DIANNE H. WILLIAMS PHONE 386.623.6318
ADDRESS 177 SW EDNA COURT LAKE CITY FL 32024
CONTRACTOR WALLACE POWELL PHONE 386.209.5198
LOCATION OF PROPERTY 90-W TO SR.247-S,TL TO EMERALD,TL TO EDNA,TL AND IT'S THE
3RD PLACE ON R.(177)
TYPE DEVELOPMENT REROOF/SFD ESTIMATED COST OF CONSTRUCTION 5980.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH 5'12 FLOOR
LAND USE & ZONING MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 11-4S-16-02919-251 SUBDIVISION EMRERALD FOREST
LOT 51 BLOCK PHASE 3 UNIT TOTAL ACRES 0.55

CCC057307
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING JLW N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE.
Check # or Cash 2549

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 date/app. by 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 \$ 30.00 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 30.00
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.
NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.
"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.

Nonowner Signature needed
Columbia County Building Permit Application

For Office Use Only Application # 1303-27 Date Received 3/12 By 1 Permit # 38843
Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____
FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____
Comments _____
☒ NOC ☐ EH ☒ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Well letter ☐ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
IMPACT FEES: EMS _____ Fire _____ Corr _____ ☐ Sub VF Form
Road/Code _____ School _____ = TOTAL (Suspended) ☐ Ellisville Water ☐ App Fee Paid

Septic Permit No. NA Fax 386-294-3769
Name Authorized Person Signing Permit WALLACE POWELL Phone 386-209-5198
Address P.O. BOX 1422 MAYO FLA 32066
Owners Name DIANE WILLIAMS Phone 623-6318
911 Address 177 SW EDNA CT LAKE CITY, FL 32024
Contractors Name WALLACE POWELL Phone 386-294-1755
Address P.O. Box 366 MAYO FLA 32066
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 11-45-16-01919-251 Estimated Cost of Construction 5980
Subdivision Name EMERALD FOREST Lot 157 Block _____ Unit _____ Phase 3
Driving Directions 247 TOWARD BAYFORD TO SW EMERALD ST
(L) TO SW EDNA ST LEFT HOUSE ON RIGHT
SIMPLE FAMILY Number of Existing Dwellings on Property ONE

Construction of METAL ROOF - OVER - SFD Total Acreage 55 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 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. **CODE:** Florida Building Code 2010 and the 2008 National Electrical Code.

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. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

(Owners Must Sign All Applications Before Permit Issuance.)

Diana Williams
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.

[Signature]
Contractor's Signature (Permitee)

Contractor's License Number CC - C051307
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 12th day of MARCH 2013

Personally known ☒ or Produced Identification ☐

[Signature]
State of Florida Notary Signature (For the Contractor)

SEA



PRODUCT APPROVAL SPECIFICATION SHEET

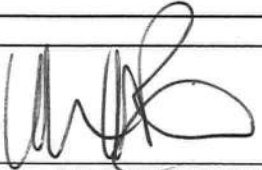
As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. EIFS			
D. STOREFRONTS			
E. CURTAIN WALLS			
F. WALL LOUVER			
G. GLASS BLOCK			
H. MEMBRANE			
I. GREENHOUSE			
J. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. UNDERLAYMENTS			
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING	AGRI-METAL	29 Granite Panels	#14810-1
E. WOOD SHINGLES AND SHAKES			
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT UP ROOFING ROOF SYSTEMS			
J. MODIFIED BITUMEN			
K. SINGLE PLY ROOF SYSTEMS			
L. ROOFING SLATE			
M. CEMENTS-ADHESIVES COATINGS			

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
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ROOF SYSTEMS			
O. ROOF TILE ADHESIVE			
P. SPRAY APPLIED POLYURETHANE ROOF			
Q. OTHER			
5. SHUTTERS			
A. ACCORDION			
B. BAHAMA			
C. STORM PANELS			
D. COLONIAL			
E. ROLL-UP			
F. EQUIPMENT			
G. OTHERS			
6. SKYLIGHTS			
A. SKYLIGHT			
B. OTHER			
7. STRUCTURAL COMPONENTS			
A. WOOD CONNECTORS/ ANCHORS			
B. TRUSS PLATES			
C. ENGINEERED LUMBER			
D. RAILING			
E. COOLERS-FREEZERS			
F. CONCRETE ADMIXTURES			
G. MATERIAL			
H. INSULATION FORMS			
I. PLASTICS			
J. DECK-ROOF			
K. WALL			
L. SHEDS			
M. OTHER			
8. NEW EXTERIOR ENVELOPE PRODUCTS			
A.			
B.			

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



 APPLICANT SIGNATURE



 DATE

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 201312003647 Date: 3/12/2013 Time: 11:38 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1250 P: 2639

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): 11-45-16-02919-251
a) Street (job) Address: 177 SW EDNA CT LAKE CITY
2. General description of improvements: ROOF - OVER - ROOF
3. Owner Information
a) Name and address: DIANNE WILLIAMS 177 SW EDNA CT LAKE CITY
b) Name and address of fee simple titleholder (if other than owner):
c) Interest in property: OWNER
4. Contractor Information
a) Name and address: POWELL & SONS ROOFING INC P.O. BOX 366 MAGNolia
b) Telephone No.: 386-294-1755 Fax No. (Opt.): 386-294-3769
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. DiAnne Williams
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
DiAnne Williams
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 12 day of March, 2013, by:
DiAnne Williams as owner (type of authority, e.g. officer, trustee, attorney
fact) for DIANNE WILLIAMS (name of party on behalf of whom instrument was executed).

Personally Known ☐ OR Produced Identification ☒ Type FLDL W452168595860

Notary Signature Rebecca Edenfield Notary Stamp or Seal:



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.

DiAnne Williams
Signature of Natural Person Signing (in line #10 above.)

Columbia County Property Appraiser

CAMA updated: 2/1/2013

2012 Tax Year

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 11-4S-16-02919-251

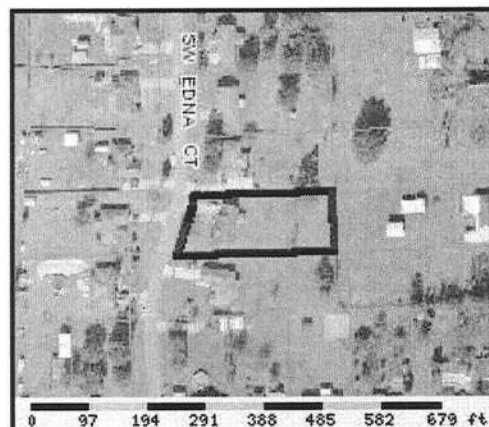
<< Next Lower Parcel

Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	WILLIAMS DIANNE H		
Mailing Address	177 SW EDNA CT LAKE CITY, FL 32024		
Site Address	177 SW EDNA CT		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	Neighborhood	11416
Land Area	0.550 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 51 EMERALD FOREST S/D PHASE 3, ORB 785-1856, CT 824-402, 825-1013, 829-2343, 893-776,			



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$15,000.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$63,939.00
XFOB Value	cnt: (1)	\$1,683.00
Total Appraised Value		\$80,622.00
Just Value		\$80,622.00
Class Value		\$0.00
Assessed Value		\$78,175.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$28,175 Other: \$28,175 Schl: \$53,175	

2013 Working Values

NOTE:

2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/10/1999	893/776	WD	I	Q		\$73,500.00
10/8/1996	829/2343	WD	I	U	11	\$63,500.00
6/28/1996	825/1013	WD	I	U	11	\$0.00
6/25/1996	824/402	CT	I	U	11	\$0.00
1/31/1994	785/1856	WD	I	Q		\$61,300.00
1/30/1994	785/1854	WD	V	U	12	\$12,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1994	COMMON BRK (19)	1145	1752	\$63,102.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)

@ CAM110M01 S CamaUSA Appraisal System		Columbia County	
3/12/2013 11:24 Property Maintenance		15000	Land 001
Year T Property	Sel		AG 000
2013 R 11-4S-16-02919-251	*	63102	Bldg 001
Owner WILLIAMS DIANNE H	Conf	1683	Xfea 001
Addr 177 SW EDNA CT	HX	79785	TOTAL B*
	-Cap?-	.550	Total Acres
	SOH 10% ApYr ERnwl ARnwl		Notc
City, St LAKE CITY	FL Zip 32024	Y Y 2000	
Country	(PUD1)	(PUD2)	(PUD3) MKTA06
Splt/Co	JVChgCd	pub4	pub5
Appr By DF	Date 9/30/2009	AppCode	UseCd 000100 SINGLE FAMILY
TxDist	Nbhd	MktA	ExCode
002	11416.04	06	HX
	EMERALD		25000
House#	177	Street EDNA	MD CT Dir SW #
		City	Zip
Subd	N/A	Condo	.00 N/A
Sect	11 Twn	4S Rnge	16E Subd
Legals	LOT 51 EMERALD FOREST S/D	PHASE 3	ORB 785-1856
	CT 824-402, 825-1013	829-2343	893-776
Map#	70-C	Mnt	11/13/2009 PINKY
F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More			



Columbia County

BUILDING DEPARTMENT

Inspection Affidavit

RE: Permit Number: 30843

I WALLACE POWELL, licensed as a(n) Contractor* /Engineer/Architect,
(please print name and circle Lic. Type) FS 468 Building Inspector*

License #: CC-C057307

On or about 3/15/13 2:00 PM, I did personally inspect the
(Date & time)

☒ roof deck attachment ☐ secondary water barrier ☐ roof to wall connection

work at 177 SW 60th CT
(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

Signature [Signature]

STATE OF FLORIDA

COUNTY OF Lafayette

Sworn to and subscribed before me this 18 day of March, 2013

By [Signature], Notary Public, State of Florida

Lori A. Fredriksson
(Print, type or stamp name)

Personally known ☒ or

Produced Identification Type of identification produced.

* Include photographs of each plane of the roof with the permit number clearly shown marked on the deck for each inspection. Place a tape measure next to the nailing pattern to show distance between nails.

* Photographs must clearly show all work and have the permit number indicated on the roof.

* Affidavit and Photographs must be provided when final inspection is requested.



#30843





