

DATE 03/04/2013

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000030813

APPLICANT BOBBY DELEGAL PHONE 904.349.0768
ADDRESS 7979 RAMOA BLVD. WEST JACKSONVILLE FL 32221
OWNER ROBERT L. DELEGAL PHONE 386.454.9723
ADDRESS 164 SW BAY PLACE FT. WHITE FL 32038
CONTRACTOR TIMOTHY LEE PHONE 904.786.9725
LOCATION OF PROPERTY 47-S TO US 27, TL TO C-138, TR TO 1ST. ROAD ON L, GO 1/2
MILE TO 1ST ROAD ON R(BAY), 2ND HOME ON L.
TYPE DEVELOPMENT REROOF/SFD ESTIMATED COST OF CONSTRUCTION 0.00
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 30-7S-17-10058-593 SUBDIVISION SANTA FE RIVER PLANTATIONS-REPLAT OF
LOT 46 BLOCK PHASE UNIT TOTAL ACRES 2.24

CCC1329038

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: WIND/STORM DAMAGE TO ROOF. NO CHARGE...

AUTH. ON FILE.

Check # or Cash No Charge

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

BUILDING PERMIT FEE \$ 0.00 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 0.00
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.

Columbia County Building Permit Application

For Office Use Only Application # 1303:05 Date Received 3/4 By 1W Permit # 30813

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. _____ Fax _____

Name Authorized Person Signing Permit Bob DELEGAL Phone 904-345-0768Address 7979 RAMONA BLVD. W. JACKSONVILLE FL. 32221Owners Name Robert T. DELEGAL Phone 386-454-9725911 Address 164 SW BAY PLACE FT. WHITE FL. 32038Contractors Name TIM LEE RAVEN ROOFING LLC Phone 786-9725 (904)Address 7979 RAMONA BLVD. W. JACKSONVILLE FL. 32221

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

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

Property ID Number 30-75-17-10058-593 Estimated Cost of Construction 10,000Subdivision Name SANTA FE RIVER PLANTATIONS Lot 3 Block _____ Unit _____ Phase _____Driving Directions TAKE 47 SOUTH TO HW. 27 TURN LEFT GO 4 to 5MILES TURN RIGHT ON HW- 138 TAKE FIRST RD. ON LEFT GO 1/2 MILEFIRST ROAD ON RIGHT SECOND HOUSE ON LEFT Number of Existing Dwellings on Property 1Construction of REINFORCED Total Acreage 2.24 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 1536 Total Floor Area 2350 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.

Page 1 of 2 (Both Pages must be submitted together.) Revised 3-15-12

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. 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.)



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.

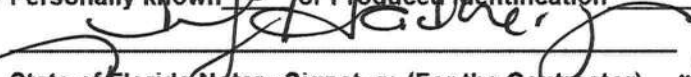


Contractor's Signature (Permitee)

Contractor's License Number CCC-1329038
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 1 day of March 2013

Personally known or Produced Identification _____



State of Florida Notary Signature (For the Contractor)

SEAL:
AJMEE GUDE HACKNEY
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # EE107858
EXPIRES 6/29/2015

Columbia County Property Appraiser

CAMA updated: 2/1/2013

2012 Tax Year

Parcel: 30-7S-17-10058-593

<< Next Lower Parcel

Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

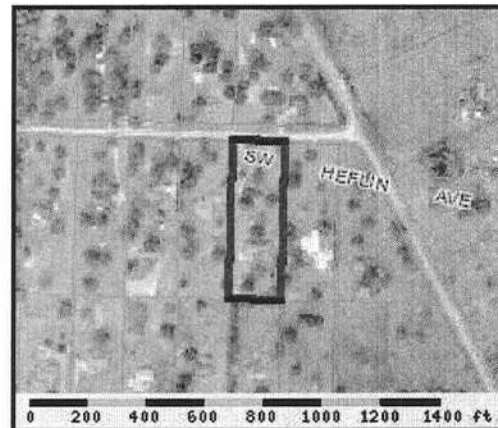
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	DELEGAL ROBERT T & TRACY W		
Mailing Address	164 SW BAY PL FT WHITE, FL 32038		
Site Address	164 SW BAY PL		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	3 (County)	Neighborhood	30717
Land Area	2.240 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 3 SANTA FE RIVER PLANTATIONS REPLAT OF LOT 46, ORB 809-740, 815-152, 952-982,			

**Property & Assessment Values**

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$39,680.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$101,855.00
XFOB Value	cnt: (3)	\$3,847.00
Total Appraised Value		\$145,382.00
Just Value		\$145,382.00
Class Value		\$0.00
Assessed Value		\$128,995.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$78,995 Other: \$78,995 Schl: \$103,995	

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
4/25/2002	952/982	WD	I	Q		\$109,000.00
8/9/1995	809/740	WD	V	Q		\$10,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1996	CB STUCCO (17)	1538	2356	\$100,657.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	1996	\$767.00	0000511.000	0 x 0 x 0	(000.00)
0180	FPLC 1STRY	1996	\$2,000.00	0000001.000	0 x 0 x 0	(000.00)
0040	BARN,POLE	1997	\$1,080.00	0000432.000	18 x 24 x 0	(000.00)

Land Breakdown

N. ROOF SYSTEMS		CERTAINTED SHINGLES	http://www.columbiacountyfla.com/Downloads/BuildingandZoning/... FL# 5444-R4 SHINGLES
O. ROOF TILE ADHESIVE			FL# 5444-R4
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

3/4/13
DATE

Re Roof permit pack.pdf

<http://www.columbiacountyfla.com/Downloads/Buildingandzoning/>

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

30-75-17-10055-595

Clerk's Office Stamp

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): LOT 3 SANTA FE RIVER PLANTATIONS REPLAT OF LOT 40
a) Street (job) Address: 164 SW BAY PL FT WHITE FL 32058
2. General description of improvements: RE-ROOF / ROOF REPLACEMENT
3. Owner Information:
a) Name and address: ROBERT & TRACY DELEGAL 164 SW BAY PL FT WHITE FL 32058
b) Name and address of fee simple titleholder (if other than owner):
c) Interest in property:
4. Contractor Information:
a) Name and address: RAVEN ROOFING LLC 7979 RAMONA BLVD. W. JACKSONVILLE FL 3222
b) Telephone No.: 904-786-9724 Fax No. (Opt.): 904-786-9726
5. Surety Information:
a) Name and address:
b) Amount of Bond:
c) Telephone No.: Fax No. (Opt.):
6. Lender:
a) Name and address:
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:
b) Telephone No.: Fax No. (Opt.):
8. In addition to himself, owner designates the following person to receive a copy of the Lender's Notice as provided in Section 713.13(i)(b), Florida Statutes:
a) Name and address: RAVEN ROOFING LLC 7979 RAMONA BLVD. W. JACKSONVILLE FL 322
b) Telephone No.: 904-786-9724 Fax No. (Opt.): 904-786-9726
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): 30 DAYS

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.

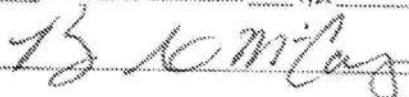
STATE OF FLORIDA
COUNTY OF COLUMBIA


Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Tim LEE
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 1 day of March, 20 13, by:
Tim LEE of Raven Roofing Contractor (type of authority, e.g. officer, trustee, attorney)
for TRACY Delegal (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification _____ Type _____

Notary Signature





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.


Signature of Notary Person Signing (in line #10 above.)



Columbia County

BUILDING DEPARTMENT

Inspection Affidavit

RE: Permit Number: 000036813

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

License #: CCC - 1329038

On or about 3/9/13, I did personally inspect the
(Date & time)

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

work at 164 SW BAY PL. FORT WHITE 32058
(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

Sworn to and subscribed before me this 9 day of march, 2013

By Brynn McCauley, Notary Public, State of Florida

Brynn A. McCauley
(Print, type or stamp name)
COMMISSION # DE672553
EXPIRES: FEB. 07, 2017
WWW.AARCHNOTARY.COM

Personally known X 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.

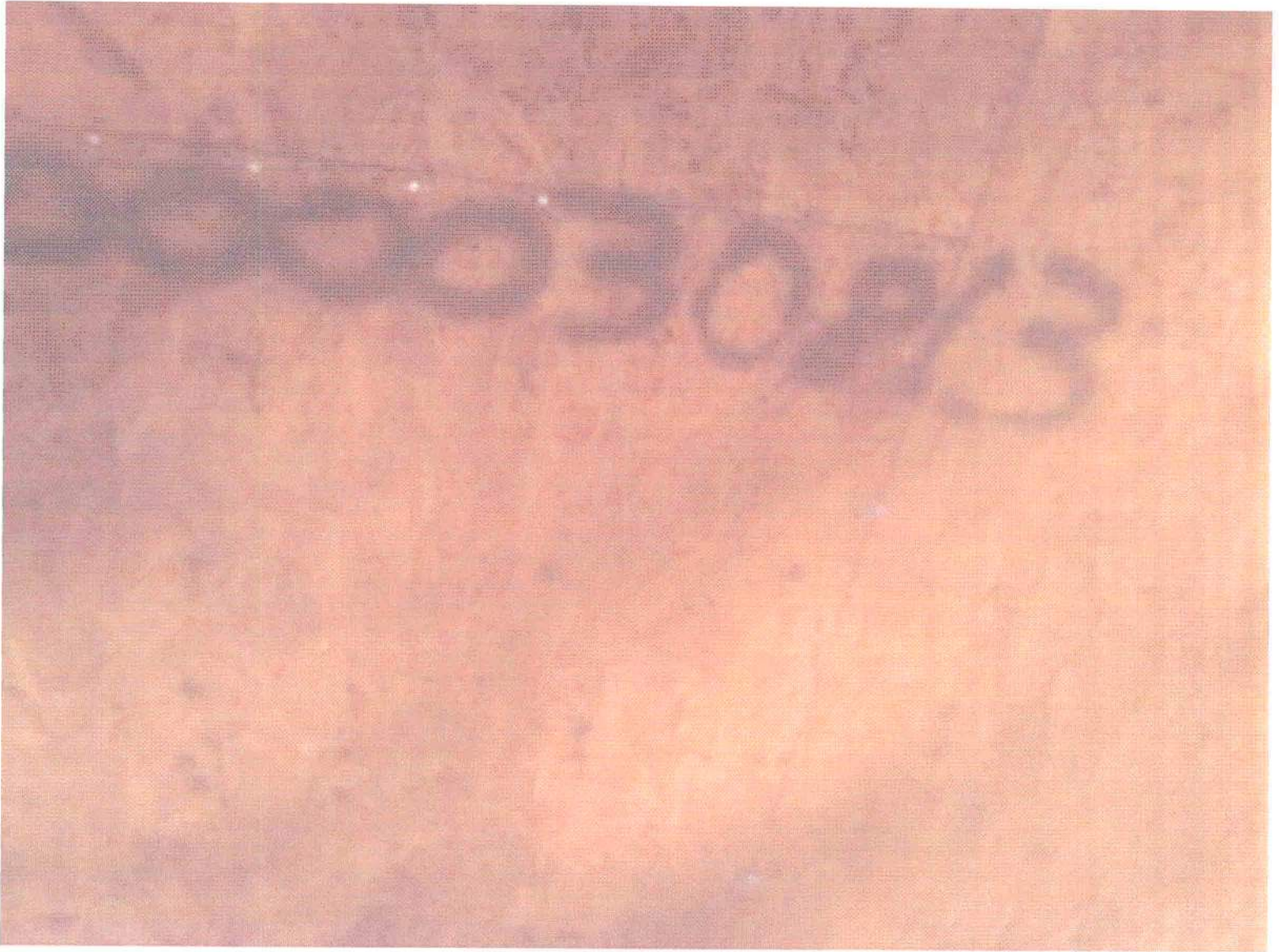
* Photographs must clearly show all work and have the permit number indicated on the roof.

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

#30813



30813





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