

DATE 06/08/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021942

APPLICANT UNIQUE POOLS & SPAS/JACKIE PHONE 752.1014

ADDRESS POB 1867 LAKE CITY FL 32056

OWNER DIANE REYNOLDS PHONE 752.2137

ADDRESS 395 SW QUAIL HEIGHTS TERRACE LAKE CITY FL 32025

CONTRACTOR ROBERT LOWREY PHONE 752.1014

LOCATION OF PROPERTY 90-W TO C-247-S THRU SIGNAL 1/2 MILE DOWN ON LEFT, TURN ON SW QUAL HEIGHT TERRACE, 2ND HOME ON LEFT.

TYPE DEVELOPMENT SWIMMING POOL ESTIMATED COST OF CONSTRUCTION 15800.00

HEATED FLOOR AREA                      TOTAL AREA                      HEIGHT .00 STORIES                     

FOUNDATION                      WALLS                      ROOF PITCH                      FLOOR                     

LAND USE & ZONING RSF-2 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 1 FLOOD ZONE N/A DEVELOPMENT PERMIT NO. N/A

PARCEL ID 01-4S-16-02678-006 SUBDIVISION QUAIL HEIGHTS

LOT 2 BLOCK                      PHASE                      UNIT 1 TOTAL ACRES .75

RP 0067172 Jackie Jennings

Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor                     

EXISTING                      X-04-0106 BLK HD N

Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                     

COMMENTS: NOC ON FILE

Check # or Cash 1118

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                      date/app. by                      date/app. by                     

Framing                      Rough-in plumbing above slab and below wood floor                     

                     date/app. by                      date/app. by                     

Electrical rough-in                      Heat & Air Duct                      Peri. beam (Lintel)                     

                     date/app. by                      date/app. by                      date/app. by                     

Permanent power                      C.O. Final                      Culvert                     

                     date/app. by                      date/app. by                      date/app. by                     

M/H tie downs, blocking, electricity and plumbing                      Pool                     

                     date/app. by                      date/app. by                     

Reconnection                      Pump pole                      Utility Pole                     

                     date/app. by                      date/app. by                      date/app. by                     

M/H Pole                      Travel Trailer                      Re-roof                     

                     date/app. by                      date/app. by                      date/app. by                     

BUILDING PERMIT FEE \$ 80.00 CERTIFICATION FEE \$ .00 SURCHARGE FEE \$ .00

MISC. FEES \$ .00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$                      WASTE FEE \$                     

FLOOD ZONE DEVELOPMENT FEE \$                      CULVERT FEE \$                      TOTAL FEE 130.00

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. 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.



After Recording return to:

Unique Pools & Spas

PO Box 1867

Lake City, FL 32056

Permit No. \_\_\_\_\_

Inst: 2004010610 Date: 05/10/2004 Time: 13:29

DC, P. DeWitt Cason, Columbia County B: 1014 P: 2259

**NOTICE OF COMMENCEMENT**  
**FS 713.13**

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. Legal description of property and street address if available: Lot 2 of Quail Heights Unit 1, an unrecorded subdivision in Section 1 Township 4 South, Range 16 East Columbia County, Florida  
General description of improvement: Installing in-ground, concrete swimming pool.

2. Owner Information: Name and address:

Dennis L Reynolds & Diana P. Reynolds  
395 SW Quail Heights Terrace Lake City, FL 32025

Interest in property: 100%

c. Name and address of fee simple titleholder (if other than Owner) \_\_\_\_\_

3. Contractor: Name and address: Unique Pools & Spas - PO Box 1867  
Lake City, FL 32056

Phone number (386) 752-1014 Fax number (optional, if service by fax is acceptable) (386) 752-5613

4. Surety: Name and address N/A

Phone number N/A Fax number (optional, if service by fax is acceptable) \_\_\_\_\_

Amount of Bond \$ \_\_\_\_\_

5. Lender: Name and address N/A

Phone number N/A Fax number (optional, if service by fax is acceptable) N/A

6. 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: (name and address): \_\_\_\_\_

Phone numbers of designated persons \_\_\_\_\_

Fax number (optional, if service by fax is acceptable) \_\_\_\_\_

7. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

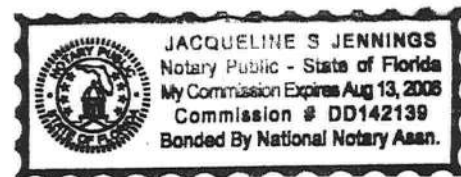
Phone number of person or entity designated by owner \_\_\_\_\_ Fax number (optional, if service by fax is acceptable) \_\_\_\_\_

8. Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified)

May 4, 2004

Diana P. Reynolds

Signature of Owner



STATE OF FLORIDA

COUNTY OF Columbia

Sworn to (or affirmed) and subscribed before me this 4th day of May, 2004, by Diana P. Reynolds, who is

personally known to me or who has produced Drivers License as identification and who did \_\_\_\_\_ or did not \_\_\_\_\_ take an oath.

Jacqueline S. Jennings

Notary Public (Signature)



# Columbia County Building Permit Application

**For Office Use Only** Application # 0405-34 Date Received 5/10/04 By JW Permit # 21942  
 Application Approved by - Zoning Official BLK Date 03.06.04 Plans Examiner NB Date 6.4.04  
 Flood Zone N/A Development Permit N/A Zoning RSF-2 Land Use Plan Map Category RES. LOW DEV.  
 Comments \_\_\_\_\_

Applicants Name Jackie Jennings Unique Pools + Spas Phone 386-752-1014  
 Address PO Box 1867 Lake City, FL 32056  
 Owners Name Diane Reynolds Phone 386-752-2137  
 911 Address 395 SW Quail Heights Terr. Lake City, FL 32025  
 Contractors Name Unique Pools + Spas Phone 386-752-1014  
 Address PO Box 1867 Lake City, FL 32056  
 Fee Simple Owner Name & Address \_\_\_\_\_  
 Bonding Co. Name & Address \_\_\_\_\_  
 Architect/Engineer Name & Address Unique Pools + Spas PO Box 1867 Lake City FL 32056  
 Mortgage Lenders Name & Address Washington Mutual PO Box 660139 Dallas, TX 75266-0139  
 Property ID Number 01-45-16-02678-006 Estimated Cost of Construction \$15,800.00  
 Subdivision Name Quail Heights Unit 1 Lot 2 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
 Driving Directions 90° W to 247 (Branford Hwy) through signal 1/2 mile down on left, turn on SW Quail Height Terrace 2nd house on left.  
 Type of Construction Swimming pool Number of Existing Dwellings on Property 1  
 Total Acreage 3/4 Lot Size \_\_\_\_\_ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive  
 Actual Distance of Structure from Property Lines - Front 100 ft Side 50 ft Side 75 ft Rear 50 ft  
 Total Building Height \_\_\_\_\_ Number of Stories \_\_\_\_\_ Heated Floor Area \_\_\_\_\_ Roof Pitch \_\_\_\_\_

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 COMMENCEMENT 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.

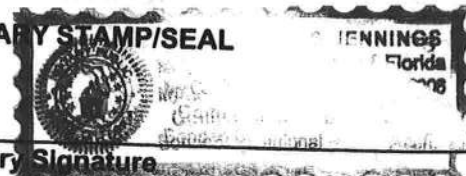
Diane Reynolds  
 Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA  
 COUNTY OF COLUMBIA

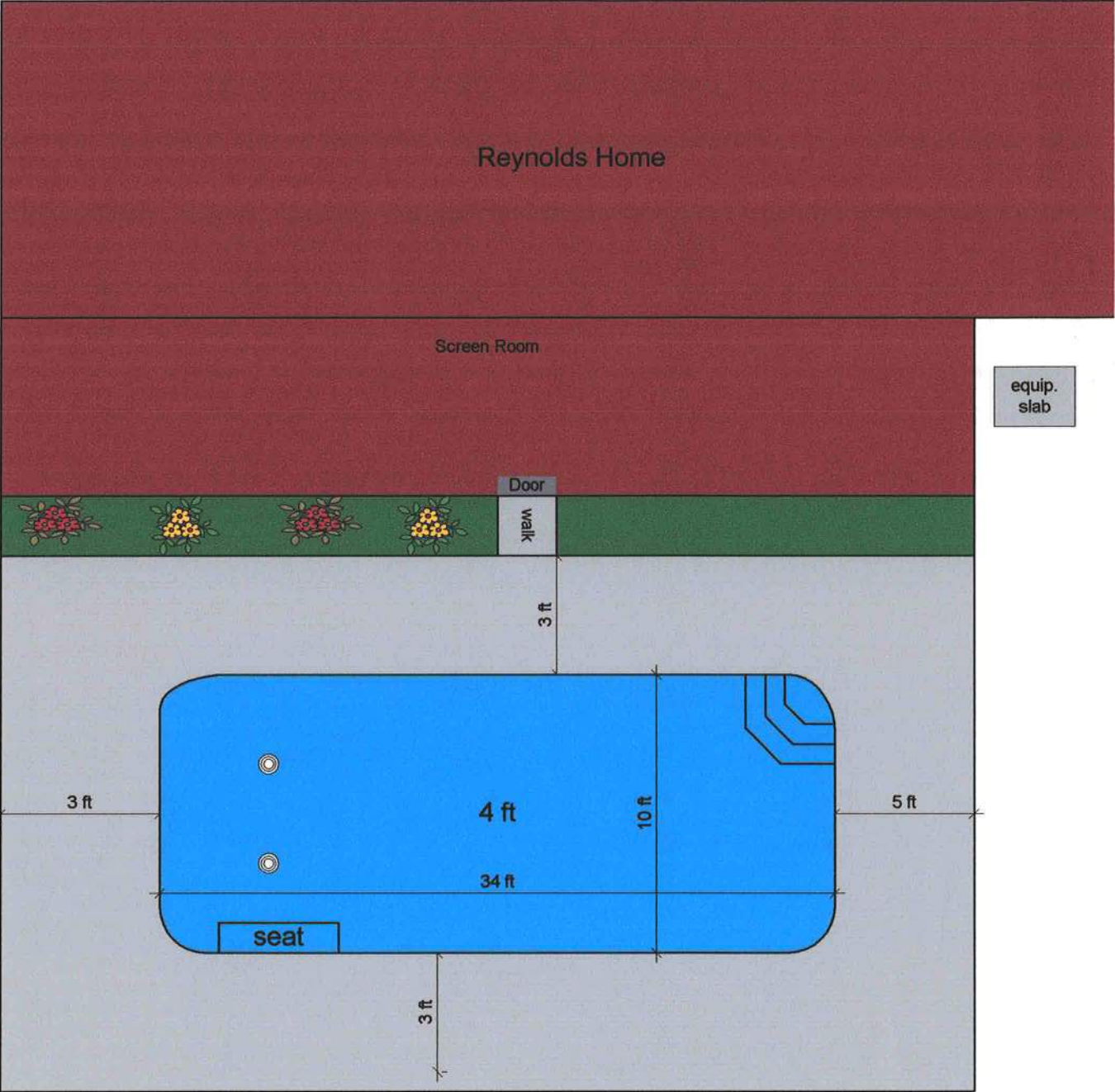
Sworn to (or affirmed) and subscribed before me  
 this 4th day of May 20 04.  
 Personally known \_\_\_\_\_ or Produced Identification ✓

[Signature]  
 Contractor Signature  
 Contractors License Number RP 0067172  
 Competency Card Number \_\_\_\_\_

NOTARY STAMP/SEAL



Jackie Jennings Notary Signature Overfol





Prepared by  
Elaine Davis, an employee of  
First American Title Insurance Company  
300 North Marion Street  
Lake City, Florida 32055  
(386) 752-3561

Return to: Grantee

File No.: 1092-340901

## **WARRANTY DEED**

This indenture made on **October 24, 2003 A.D.**, by

**Marilyn C. Vazquez, a unmarried woman**

whose address is: **Route 18 Box 696, Lake City, FL 32025**  
hereinafter called the "grantor", to

**Dennis L. Reynolds and Diana P. Reynolds, husband and wife,**

whose address is: **Route 18 Box 696, Lake City, FL 32025**  
hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

**Witnesseth**, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **Columbia County, Florida**, to-wit:

**LOT 2 OF QUAIL HEIGHTS UNIT 1, AN UNRECORDED SUBDIVISION IN SECTION 1, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCE AT THE NORTHWEST CORNER OF THE SOUTHWEST 1/4 OF SECTION 1 AND RUN SOUTH 02 DEG. 58 MIN. 37 SEC. EAST ALONG THE WEST LINE OF SAID SECTION 1, A DISTANCE OF 1353.03 FEET TO THE NORTHWEST CORNER OF SOUTHWEST 1/4 OF SOUTHWEST 1/4 OF SAID SECTION 1; THENCE NORTH 87 DEG. 19 MIN. 30 SEC. EAST ALONG THE NORTH LINE OF SAID SOUTHWEST 1/4 OF SOUTHWEST 1/4 (SOUTH LINE OF NORTHWEST 1/4 OF SOUTHWEST 1/4), A DISTANCE OF 872.82 FEET TO THE EAST LINE OF QUAIL HEIGHTS BOULEVARD; THENCE SOUTH 14 DEG. 07 MIN. 42 SEC. EAST ALONG SAID EAST LINE, 141.88 FEET TO THE POINT OF BEGINNING; THENCE SOUTH 85 DEG. 07 MIN. 46 SEC. EAST, 136.68 FEET; THENCE SOUTH 29 DEG. 42 MIN. 15 SEC. EAST, 51.49 FEET; THENCE SOUTH 00 DEG. 29 MIN. 39 SEC. EAST, 134.50 FEET; THENCE NORTH 65 DEG. 14 MIN. 28 SEC. WEST, 143.06 FEET TO THE SAID EAST LINE OF QUAIL HEIGHTS BOULEVARD; THENCE NORTH 14 DEG. 07 MIN. 42 SEC. WEST ALONG SAID EAST LINE, 135.0 FEET TO THE POINT OF BEGINNING. ALL LYING AND BEING IN COLUMBIA COUNTY, FLORIDA.**

Parcel Identification Number: **R02678-006**

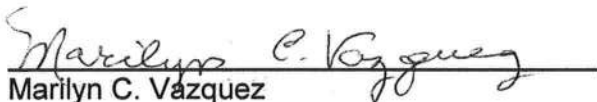
**Subject to** all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.

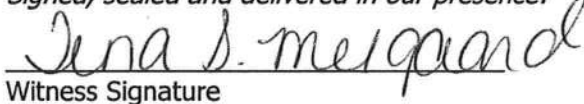
**To Have and to Hold**, the same in fee simple forever.

**And** the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2002.

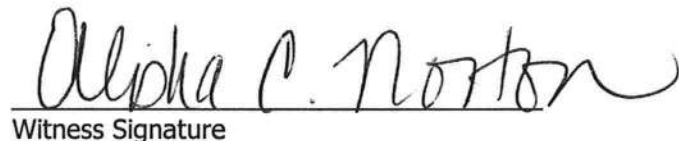
**In Witness Whereof**, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

  
Marilyn C. Vazquez

*Signed, sealed and delivered in our presence:*

  
Witness Signature

Print Name: **TINA S. MELGAARD**

  
Witness Signature

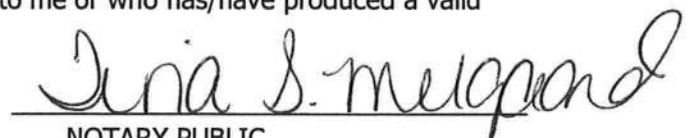
Print Name: **ALISHA C. NORTON**

State of **Florida**

County of **Columbia**

**The Foregoing Instrument Was Acknowledged** before me on **October 24, 2003**, by **Marilyn C. Vazquez, a single woman** who is/are personally known to me or who has/have produced a valid driver's license as identification.





NOTARY PUBLIC

**TINA S. MELGAARD**

Notary Print Name

My Commission Expires: \_\_\_\_\_