

DATE 02/25/2011

Columbia County Building Permit**PERMIT**

This Permit Must Be Prominently Posted on Premises During Construction

000029218

APPLICANT GREG WARD PHONE 386.496.2740
ADDRESS 15231 SW 92ND STREET LAKE BUTLER FL 32054
OWNER WILLIAM J. HARDEE PHONE 386.466.8660
ADDRESS 321 NW HARRIS LAKE DRIVE LAKE CITY FL 32055
CONTRACTOR JASON HENDRICKS PHONE 386.496.2740
LOCATION OF PROPERTY 90-W TO COMMERCE BLVD,TR TO FAIRWAY VIEW, GO ALL THE WAY TO DEAD END.
TYPE DEVELOPMENT REROOF/SFD ESTIMATED COST OF CONSTRUCTION 16987.00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____
FOUNDATION _____ WALLS _____ ROOF PITCH 4'12 FLOOR _____
LAND USE & ZONING _____ MAX. HEIGHT _____
Minimum Set Back Requirements: STREET-FRONT _____ REAR _____ SIDE _____
NO. EX.D.U. 1 FLOOD ZONE _____ DEVELOPMENT PERMIT NO. _____

PARCEL ID 26-3S-16-02309-061 SUBDIVISION FAIRWAY VIEW
LOT 61 BLOCK _____ PHASE _____ UNIT 1 TOTAL ACRES _____

_____ CCC1328866 _____
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
EXISTING _____ N _____
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE.Check # or Cash 2413**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 \$ 85.00 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** 85.00
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."

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 # 1102-52 Date Received 2/25 By JW Permit # 29210

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 ☐ Parent Parcel # _____

☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL 0

Septic Permit No. N/A Fax 386-496-0652

Name Authorized Person Signing Permit GREG WARD Phone 386-496-2740

Address 15231 SW 92nd St LAKE BUTLER FL 32054

Owners Name William JASON HARDEE Phone 386-466-8660

911 Address 321 Harris LAKE DR LAKE City FL 32055

Contractors Name JASON Hendricks Phone 386-496-2740

Address 15231 SW 92nd St LAKE Butler FL 32054

Fee Simple Owner Name & Address William HARDEE 321 Harris LAKE Dr.

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
N/A

Property ID Number 26-35-16-02309-061 Estimated Cost of Construction \$16,987.00

Subdivision Name FAIRVIEW S/D Lot 61 Block _____ Unit _____ Phase _____

Driving Directions Take 90 West to right on Commerce Blvd.

Turn right on Fairway Dr. go to dead end

Number of Existing Dwellings on Property _____

Construction of RE-ROOF FL 5444 shingle 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 _____ 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)

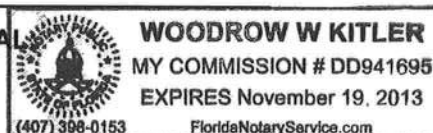
Contractor's License Number CCC1328866
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 25 day of Feb 2011.

Personally known X or Produced Identification _____

State of Florida Notary Signature (For the Contractor)

SEAL



Parcel - 26-35-16-02309-001

Owner & Property Info

<< Prev

Search Result: 5 of 8

Next >>

Owner's Name	HARDEE WILLIAM JASON		
Mailing Address	321 NW HARRIS LAKE DR LAKE CITY, FL 32055		
Site Address	321 NW HARRIS LAKE DR		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	Neighborhood	26316
Land Area	0.000 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 61 FAIRWAY VIEW S/D UNIT 1 ORB 825-2553.			

Inst 201112002922 Date: 2/25/2011 Time: 11:43 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B 1210 P 1123

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 26-35-16-02309-061

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 61 Fairview S/O Unit 1 ORB-825-2553
a) Street (job) Address: 321 NW HARRIS LAKE DR LAKE CITY
2. General description of improvements: RE-ROOF RESIDENCE
3. Owner Information
a) Name and address: WILLIAM JASON HARDEE
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property: OWNER
4. Contractor Information
a) Name and address: JASON HENDRICKS
b) Telephone No.: 386-496-2740 Fax No. (Opt.): 386-496-0652
5. Surety Information
a) Name and address: N/A
b) Amount of Bond: N/A
c) Telephone No.: N/A Fax No. (Opt.): N/A
6. Lender
a) Name and address: N/A
b) Phone No.: N/A
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.: N/A Fax No. (Opt.): N/A
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(l)(b), Florida Statutes:
a) Name and address: N/A
b) Telephone No.: N/A Fax No. (Opt.): N/A
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): 12-13-2011

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. William Jason Hardee
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
WILLIAM JASON HARDEE
Print Name

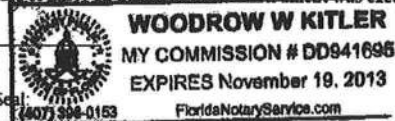
The foregoing instrument was acknowledged before me, a Florida Notary, this 25 day of FEBRUARY, 20 11, by:
WILLIAM HARDEE as SELF (type of authority, e.g. officer, trustee, attorney

fact) for WILLIAM HARDEE (name of party on behalf of whom instrument was executed).

Personally Known X OR Produced Identification _____ Type _____

Notary Signature [Signature]

Notary Stamp or Seal



-AND-

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



Columbia County

BUILDING DEPARTMENT

Re Roof of a Single Family Dwelling

Inspection Affidavit

RE: Permit # 000029218

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

License #: CCC # 13288006

On or about 3-8-11, I did personally inspect the roof
(Date & time)

deck nailing and/or secondary water barrier work at 321 NW HARRIS
(circle one) (Job Site Address)

LAKE DRIVE - LAKE CITY, FL 32055

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

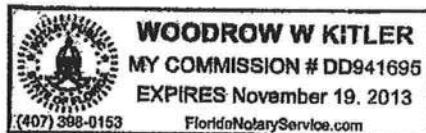
Signature [Signature]

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 8 day of March, 2011

By JASON HENDRICKS

Notary Public, State of Florida



[Signature]
(Print, type or stamp name)

Commission No.: DD941695

Personally known [Signature] or

Produced Identification

Type of identification produced. _____

* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection.

* Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.