

DATE 05/13/2010

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

PERMIT
000028563

APPLICANT ARNOLD ROGERS PHONE 758-2077
ADDRESS 737 SW BASCOM NORRIS DR LAKE CITY FL 32025
OWNER BETTY JO & ARNOLD ROGERS PHONE 758-2077
ADDRESS 737 SW BASCOM NORRIS DR LAKE CITY FL 32025
CONTRACTOR OWNER BUILDER PHONE _____
LOCATION OF PROPERTY 247 S, L BASCOM NORRIS DR, JUST PAST CUTTING ATTRACTION
SALON, ON THE LEFT
TYPE DEVELOPMENT RE-ROOF SFD ESTIMATED COST OF CONSTRUCTION 4960.00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES 1
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 01-4S-16-02666-000 SUBDIVISION _____
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

Arnold Rogers
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor
EXISTING X10- LH LH N
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE

OWNER DISCLOSURE STATEMENT, AUTHORIZED PERSON _____

Check # or Cash CASH

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

BUILDING PERMIT FEE \$ 25.00 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** 25.00
INSPECTORS OFFICE [Signature] 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 # 1005-27 Date Received 5-13-10 By LH Permit # 28563

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 _____

Septic Permit No. X10-148 Fax _____

Name Authorized Person Signing Permit Arnold Rogers Phone 758-2077

Address 737 SW Bascom Norris Dr. Lake City FL 32025

Owners Name Betty Jo Rogers / Arnold Rogers Phone 758-2077

911 Address 737 SW Bascom Norris Dr., Lake City, FL 32025

Contractors Name Owner Phone _____

Address _____

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 01-45-16-02666-000 Estimated Cost of Construction 4960.00

Subdivision Name N/A Lot _____ Block _____ Unit _____ Phase _____

Driving Directions 247 S, (L) Bascom Norris Dr, Just past Cutting Attraction on the (L)

Number of Existing Dwellings on Property 1

Construction of Re-Roof SFD (Metal) 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 _____

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.

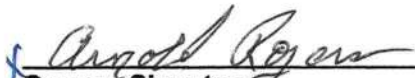
NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage 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 _____

Columbia County

Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 13 day of May 2010.

Personally known _____ or Produced Identification FLDL

SEAL:

State of Florida Notary Signature (For the Contractor)





COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

() Single Family Dwelling () Two-Family Residence () Farm Outbuilding

☒ Addition, Alteration, Modification or other Improvement Re-Roof SFD

() Commercial, Cost of Construction _____ Construction of _____

() Other _____

I Arnold Rogers, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Permit.

☒ Arnold Rogers
Owner Builder Signature

Date _____



NOTARY OF OWNER BUILDER SIGNATURE

The above signer is personally known to me or produced identification FL DL

Notary Signature Laurie Hodson Date 5-13-10 (Seal)

FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner builder has been given notice of the restriction stated above.

Building Official/Representative Laurie Hodson

Columbia County Property Appraiser

DB Last Updated: 5/6/2010

2009 Tax Roll Year

Parcel: 01-4S-16-02666-000

<< Next Lower Parcel

Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

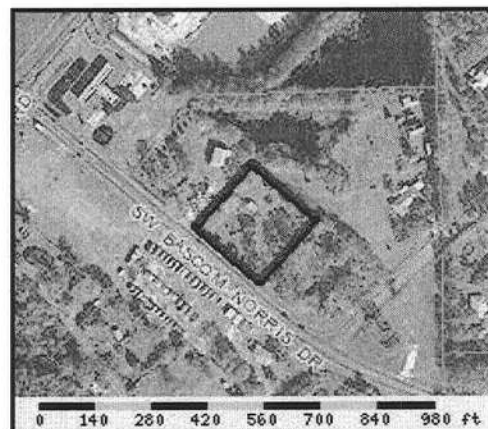
Owner & Property Info

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Owner's Name	ROGERS BETTY JO		
Mailing Address	737 SW BASCOM NORRIS DR LAKE CITY, FL 32025		
Site Address	737 SW BASCOM NORRIS DR		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	Neighborhood	1416
Land Area	1.000 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM NW COR OF SE1/4 OF NW1/4, RUN S 326.6 FT TO S R/W OF SR-247, NE 480 FT, SE 514.56 FT FOR POB, RUN NE 210 FT, SE 210 FT, SW 210 FT, NW 210 FT TO POB. ORB 308-407, 639-483		



Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$102,366.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (1)	\$95,800.00
XFOB Value	cnt: (3)	\$3,225.00
Total Appraised Value		\$201,391.00
Just Value		\$201,391.00
Class Value		\$0.00
Assessed Value		\$87,378.00
Exempt Value	(code: HX DD)	\$51,000.00
Total Taxable Value	Cnty: \$36,378 Other: \$36,378 Schl: \$61,378	

2010 Working Values

NOTE:
2010 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
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1974	COMMON BRK (19)	2133	3456	\$98,103.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0190	FPLC PF	0	\$1,200.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	0	\$1,064.00	0000224.000	8 x 28 x 0	(000.00)
0166	CONC,PAVMT	1993	\$561.00	0000374.000	17 x 22 x 0	(000.00)
0120	CLFENCE 4	2009	\$300.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	43560 SF - (0000001.000AC)	1.00/1.00/1.00/1.00	\$2.35	\$102,366.00

Columbia County Property Appraiser

DB Last Updated: 5/6/2010

<< Prev

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Next >>

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

NOTICE OF COMMENCEMENT

Inst: 201012007543 Date: 5/13/2010 Time: 10:51 AM
DC, P. DeWitt Cason Columbia County Page 1 of 1 B: 1194 P: 579

Tax Parcel Identification Number 01-45-16-02666-000

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): 737 SW Bascom Norris Dr, Lake City FL 32825
a) Street (job) Address: _____
2. General description of improvements: Re-Roof SFD
3. Owner Information
a) Name and address: Betty Jo Rogers
b) Name and address of fee simple titleholder (if other than owner) N/A
c) Interest in property Owner
4. Contractor Information
a) Name and address: Owner Builder
b) Telephone No.: _____ Fax No. (Opt.) _____
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. X Arnold Rogers
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Arnold Rogers
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 13 day of May, 2010, by:
Arnold Rogers as Owner/Agent (type of authority, e.g. officer, trustee, attorney
fact) for Betty Jo Rogers (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification ☒ Type FDL

Notary Signature Laurie Hodson 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.

X Arnold Rogers
Signature of Natural Person Signing (in line #10 above.)