

DATE 05/19/2008

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

PERMIT  
000027023

APPLICANT SAMUEL DUNN PHONE 719-8955  
ADDRESS 973 SW TROY ST LAKE CITY FL 32024  
OWNER SAMUEL DUNN PHONE 719-8955  
ADDRESS 973 SW TROY ST LAKE CITY FL 32025  
CONTRACTOR SAMUEL DUNN PHONE 719-8955  
LOCATION OF PROPERTY 90W, TL ON 247S, TR ON TROY RD, TR ON DIVEWAY BEFORE  
RUSSWOOD ESTATES

TYPE DEVELOPMENT RE-ROOF ON SFD ESTIMATED COST OF CONSTRUCTION 9000.00  
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES  
FOUNDATION WALLS ROOF PITCH FLOOR  
LAND USE & ZONING MAX. HEIGHT  
Minimum Set Back Requirments: STREET-FRONT REAR SIDE  
NO. EX.D.U. FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 10-4S-16-02849-001 SUBDIVISION  
LOT BLOCK PHASE UNIT TOTAL ACRES 11.50

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING X08-178 BK JH N  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE

Check # or Cash 2562

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 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  
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by  
M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by  
Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by  
M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 45.00 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 45.00  
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 TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

# Columbia County Building Permit Application

**For Office Use Only** Application # 0805-33 Date Received 5/19/08 By GP Permit # 27023

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. \_\_\_\_\_ Fax \_\_\_\_\_

Name Authorized Person Signing Permit Samuel O. Dunn Phone 719-8955

Address 973 S.W. Troy St. Lake City, FL

Owners Name Samuel O. Dunn Phone 719-8955

911 Address 973 S.W. Troy St Lake City, FL

Contractors Name Self 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 10-45-16-02849-001 Estimated Cost of Construction 9,000

Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_

Driving Directions 247<sup>5</sup> turn Right Troy Rd, before Russwood  
Estates on right,

Number of Existing Dwellings on Property \_\_\_\_\_

Construction of Re-roof on SFD (metal) Total Acreage 11.5 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 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.



**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.

**FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment**

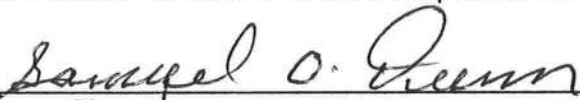
According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects 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 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. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

  
\_\_\_\_\_  
Owners Signature

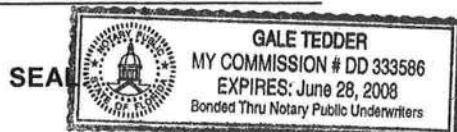
**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit.

\_\_\_\_\_  
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 19<sup>th</sup> day of May 2008.  
Personally known \_\_\_\_\_ or Produced Identification DL

  
\_\_\_\_\_  
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

### NOTARIZED DISCLOSURE STATEMENT

#### FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved for yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You 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 your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that if I am not physically doing the work or physically supervising free labor from friends or relatives, that I must hire licensed contractors, i.e. electrician, plumber, mechanical (heating & air conditioning), etc. I further understand that the violation of not physically doing the work, and the use of unlicensed contractors at the construction site, will cause the project to be shut down by the inspection staff of the Columbia County Building Department. Additionally, state statutes allows for additional penalties. I also understand that if this violation does occur, that in order for the job to proceed, I will have a licensed contractor come in and obtain a new permit as taking the job over. I understand that if I hire subcontractors under a contract price, that they must be licensed to work in Columbia County, i.e. masonry, drywall, carpentry. Contractors licensed by the Columbia County Contractor Licensing Section or the State of Florida are required to have worker's compensation and liability coverage.

☒ Single Family Dwelling  
☐ Other Re-Roof

#### TYPE OF CONSTRUCTION

☐ Two-Family Residence ☐ Farm Outbuilding  
☐ Addition, Alteration, Modification or other Improvement

I, Samuel O. Turner, 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 ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number \_\_\_\_\_

Samuel O. Turner  
Owner Builder Signature

Date

#### FLORIDA NOTARY

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

Notary Signature Gale Tedder Date 5/19/08



#### FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7). Date \_\_\_\_\_ Building Official/Representative \_\_\_\_\_

FL 7809-2

Product Approval Code

Metal Roof



### Columbia County Property Appraiser

J. Doyle Crews, CFA - Lake City, Florida - 386-758-1083

**PARCEL: 10-4S-16-02849-001 - SINGLE FAM (000100)**

COMM SW COR OF E1/2 OF NW1/4, RUN N 31 FT FOR POB, CONT N 1528 FT, E 302.05 FT, S

Name: DUNN SAMUEL O & ROBERTA J

Site: RT 21 BX 5047

Mail: 973 SW TROY ST

LAKE CITY, FL 32024

Sales 2/10/2003 \$189,000.00 I / Q

Info 1/8/1996 \$14,000.00 V / U

4/3/1995 \$150,000.00 I / Q

LandVal \$37,065.00

BldgVal \$101,171.00

ApprVal \$150,854.00

JustVal \$150,854.00

Assd \$150,854.00

Exmpt \$0.00

Taxable \$150,854.00

0 0.05 0.1 0.15 mi



This information, GIS Map Updated: 10/8/2004, 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.



REC

# NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 10-45-16-02849-001

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):  
a) Street (job) Address: \_\_\_\_\_
2. General description of improvements: Re Roof
3. Owner Information  
a) Name and address: Samuel O. Dunn 9735 W. Troyst. Lake City, FL  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property \_\_\_\_\_
4. Contractor Information  
a) Name and address: Samuel O. Dunn  
b) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
5. Surety Information  
a) Name and address: \_\_\_\_\_  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_
6. Lender  
a) Name and address: \_\_\_\_\_  
b) Phone No.: \_\_\_\_\_  
Inst: 200812009696 Date 5/19/2008 Time 1:59 PM  
DC, P DeWitt Cason, Columbia County Page 1 of 1 B:1150 P:1882
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 Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes:  
a) Name and address: \_\_\_\_\_  
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.**

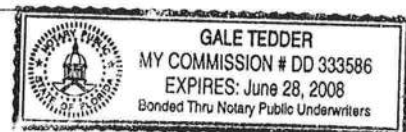
STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. Samuel O. Dunn  
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  
SAMUEL O. DUNN  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 19th day of May, 2008 by:  
Samuel Dunn as owner (type of authority, e.g. officer, trustee, attorney  
fact) for N/A (name of party on behalf of whom instrument was executed).

Personally Known \_\_\_\_\_ OR Produced Identification DL Type \_\_\_\_\_

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