

06/02/2009

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027848

APPLICANT CHRIS PICKERING PHONE 352 372-1221
ADDRESS 4607 NW 6TH ST GAINESVILLE FL 32609
OWNER BRIAN JOHNS PHONE _____
ADDRESS 271 SE PEARL ST LAKE CITY FL 32025
CONTRACTOR CHRIS PICKERING PHONE 352 372-1214
LOCATION OF PROPERTY BAYA, TR ON PEARL ST (EASTSIDE VILLAGE) 5TH LOT
ON LEFT PAST PAMELA PLACE
TYPE DEVELOPMENT RE-ROOF/SFD ESTIMATED COST OF CONSTRUCTION 11159.00
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 N/A DEVELOPMENT PERMIT NO. _____

PARCEL ID 34-3S-17-07018-125 SUBDIVISION EASTSIDE VILLAGE
LOT 25 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

CCC1326022
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
EXISTING X09-158 CS HD N
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: NOC ON FILE
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 \$ 60.00 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 60.00
INSPECTORS OFFICE [Signature] CLERKS OFFICE CN

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 # <u>0906-08</u>	Date Received <u>6/2/09</u>	By <u>GT</u>	Permit # <u>27848</u>
Zoning Official <u>afp</u>	Date <u>6/2/09</u>	Flood Zone <u>X</u>	Land Use <u>RMHD</u>	Zoning <u>RMF-1</u>	
FEMA Map # _____	Elevation _____	MFE _____	River _____	Plans Examiner <u>HD</u>	Date <u>6-2-09</u>
Comments _____					
<input type="checkbox"/> NOC <input type="checkbox"/> EH <input type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> Parent Parcel # _____					
<input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter					
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____					
School _____ = TOTAL _____					

Septic Permit No. _____ Fax 352-372-1214

Name Authorized Person Signing Permit Chris Pickering Phone 352-372-1221

Address 4607 NW 6th St. Ste A

Owners Name Brian Johns Phone _____

911 Address 271 SE Pearl Street - Lake City, FL 32025

Contractors Name Chris Pickering Phone 352-372-1221

Address 4607 NW 6th St. Ste A Gainesville, FL 32609

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 34-35-17-07018-125 Estimated Cost of Construction \$11,159⁵¹

Subdivision Name East Side Village Lot 25 Block _____ Unit _____ Phase _____

Driving Directions Bay A, TR on Pearl St., 5th on left
PAST DAMELA PLANE.

Number of Existing Dwellings on Property _____

Construction of Roofing / Drywall Repairs 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.

NOTICE OF COMMENCEMENT

Inst:200912009054 Date:6/2/2009 Time:2:18 PM
 24 DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1174 P:812

Tax Parcel Identification Number _____

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.

34-35-17-07018-125

1. Description of property (legal description): LOT 25 Eastside Village
 a) Street (job) Address: 271 SE Pearl Ter Lake City FL 32025
2. General description of improvements: Roof Replacement

3. Owner Information

- a) Name and address: Brian Johns
- b) Name and address of fee simple titleholder (if other than owner) 271 SE Pearl Ter Lake City, FL 32025
- c) Interest in property Owner

4. Contractor Information

- a) Name and address: Guineville Restoration Inc, 4607 NW 6th St Guineville FL 32609
- b) Telephone No.: 352-372-1221 Fax No. (Opt.) _____

5. Surety Information

- a) Name and address: NA
- b) Amount of Bond: NA
- c) Telephone No.: NA Fax No. (Opt.) _____

6. Lender

- a) Name and address: NA
- b) Phone No.: NA

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: NA
- b) Telephone No.: NA 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(l)(b), Florida Statutes:

- a) Name and address: NA
- b) Telephone No.: NA 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. _____
 Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Print Name

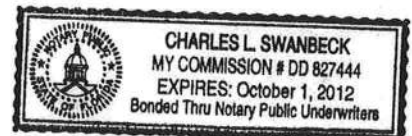
Chris Pickering

The foregoing instrument was acknowledged before me, a Florida Notary, this 2nd day of June, 2009, by:

Chris Pickering as Owner / President (type of authority, e.g. officer, trustee, attorney fact) for Guineville Restoration + Const, Inc (name of party on behalf of whom instrument was executed),

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature Charles L. Swanbeck 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.

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

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 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 including all application and permit time limitations.

Contractor's Signature (Permittee)

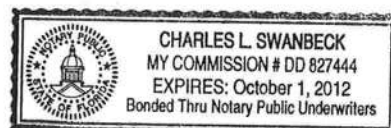
CCC 132602

Contractor's License Number CRC 1327956
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 2nd day of June 2009.
Personally known X or Produced Identification _____

State of Florida Notary Signature (For the Contractor)

SEAL:



AC# 3242328

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L07053100858

DATE	BATCH NUMBER	LICENSE NBR
05/31/2007	060741354	0B40474

The BUSINESS ORGANIZATION

Named below IS QUALIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2009

(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

GAINESVILLE RESTORATION & CONSTRUCTION INC
4607 NW 6TH STREET SUITE 1-B
GAINESVILLE FL 32609

CHARLIE CRIST
GOVERNOR

DISPLAY AS REQUIRED BY LAW

HOLLY BENSON
SECRETARY

AC# 2602688

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

AC# 3982764

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08090801109

DATE	BATCH NUMBER	LICENSE NBR
09/08/2008	086002398	CCC1326022

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2010

PICKERING, CHRISTOPHER JAMES
GAINESVILLE RESTORATION & CONSTRUCTION INC
4607 NW 6TH ST STE A
GAINESVILLE FL 32609

CHARLIE CRIST
GOVERNOR

CHARLES W. DRAGO
SECRETARY

DISPLAY AS REQUIRED BY LAW

Download / Print Report

Columbia County Property Appraiser

1 thru 25 of 62 Total Records

DB Last Updated: 4/27/2009

#	Parcel ID	Owner's Name	Address	Brief Legal	Last Sale	GIS
1	28-2S-16-01772-013 HA WX DX (MOBILE HOM)	HAMMERLE CHARLOTTE &	JOHNSON ELIZABETH A (DECEASED) P O BOX 2306	LOT 13 PINEHILLS S/D.	12/1/1988-\$14,000	GIS Map
2	35-4S-17-09030-034 HX WX (MOBILE HOM)	HARRELL SHIRLEY JEAN &	MABEL ESTHER JOHNSON P O BOX 1223	BEG SW COR OF SE1/4 OF SW1/4,	2/23/2009-\$0	GIS Map
3	08-5S-16-03490-009 HX (SINGLE FAM)	HITSON SHIRLEY &	BUDDY MAC JOHNSON JTWRS 1568 SW DAIRY STR	LOT 9 THE HUNT PLACE S/D.	5/27/1997-\$83,000	GIS Map
4	21-3S-16-02240-007 (MOBILE HOM)	HITSON SHIRLEY A &	BUDDY JOHNSON 184 SW WINDSWEEP GLN	LOT 7 PINE RIDGE S/D.	9/24/2008-\$100	GIS Map
5	34-3S-17-07018-125 (SINGLE FAM)	JOHNS BRIAN	P O BOX 2585	LOT 25 EAST SIDE VILLAGE S/D.	3/4/2005-\$87,000	GIS Map
6	25-4S-15-00398-000 HX 13 (SINGLE FAM)	JOHNS KIRBY W & DIANE H	816 SW CHARLES TER	THE S 6 2/3 AC OF NE1/4 OF	7/30/1998-\$0	GIS Map
7	25-3S-16-02293-000 HX (SINGLE FAM)	JOHNS MARTHA B	448 NW BRADY CIR	BEG NW COR OF SW1/4 OF SE1/4,	7/30/1997-\$2,000	GIS Map
8	21-3S-16-02224-000 HX WX (SFRES/MOBI)	JOHNS PHYLLIS B	436 NW ASH DRIVE	COMM NE COR OF SW1/4 OF SE1/4,		GIS Map
9	00-00-00-13149-000 HX (SINGLE FAM)	JOHNS ROBERT E JR TRUSTEE	P O BOX 143	E DIV: LOTS 4, 5, 6, 7 & 8		GIS Map
10	19-5S-18-10599-002 (IMPROVED A)	JOHNS ROBERT E TRUSTEE	P O BOX 143	E 1/2 OF SW1/4 LYING S OF	10/29/2001-\$160,000	GIS Map
11	19-5S-18-10599-006 HX (IMPROVED A)	JOHNS ROBERT S TRUSTEE	528 SE LESLIE WOOD LN	COMM SW COR OF SE1/4 OF SW1/4,	10/4/2002-\$100	GIS Map
12	00-00-00-00933-000 (VACANT)	JOHNSON ABEL P JR &	JOHNSON DANIEL 11270 MALAGA DR	LOT 71 UNIT 14 THREE RIVERS	12/6/2001-\$100	GIS Map
13	00-00-00-10918-000 HX (MOBILE HOM)	JOHNSON ALBERT & TRACEY	498 NE MARTIN LUTHER KING ST	NE DIV: LOT 1 & 2 BLOCK 29	1/9/2004-\$100	GIS Map
14	00-00-00-13107-008 (VACANT)	JOHNSON ALBERTA	313 NE PATTERSON ST	E DIV: LOT 8 EAST LAKE S/D.		GIS Map
15	00-00-00-13101-001 (VACANT)	JOHNSON ALBERTA (DECEASED)	313 NE PATTERSON ST	E DIV: COMM NE COR OF NE1/4 OF		GIS Map
16	21-6S-16-03899-107 HX (SINGLE FAM)	JOHNSON ALTON B & VIRGINIA C	4720 SW ELIM CHURCH RD	LOTS 7 & 8 ICHETUCKNEE OAKS	2/28/2005-\$100,000	GIS Map
17	09-3S-17-04916-003 (PASTURELAN)	JOHNSON BARRY L	332 WINGED FOOT RD	BEG NE COR, RUN S 1400.82 FT,	6/17/1994-\$0	GIS Map
18	32-2S-16-01810-002 (VACANT)	JOHNSON BENJAMIN & MARION B	2324 FOREST ST	BEG SW COR OF SW1/4 OF NE1/4,	12/29/2000-\$13,500	GIS Map
19	00-00-00-11403-000 (VACANT)	JOHNSON BLONDELL	1033 NW KIMBERLY RD	NW DIV: COMM SW COR, RUN N 85		GIS Map
20	33-2S-16-01816-002 HX (MOBILE HOM)	JOHNSON BOBBI JO WITT &	MICHAEL SHANE JOHNSON 1229 NW QUEEN RD	COMM SW COR OF SW1/4 OF NW1/4,	12/23/1996-\$3,500	GIS Map
21	00-00-00-13405-000 (SINGLE FAM)	JOHNSON BRUYAN L	296 SE MARSH TERR	E DIV: LOTS 1, 2, 3 & 4 BLK 3	12/30/2008-\$116,700	GIS Map
22	22-5S-17-09340-000 (VACANT)	JOHNSON BUDDY	P O BOX 1419	LOTS 5, 6, 15 & 16 BLOCK 8	4/10/2008-\$43,000	GIS Map
23	22-5S-17-09340-055 (VACANT)	JOHNSON BUDDY	P O BOX 1419	NW1/4 OF BLOCK 48 & N1/2 OF	4/10/2008-\$43,000	GIS Map
24	03-5S-16-03457-006 (MOBILE HOM)	JOHNSON BUDDY & STACI	1568 SW DAIRY ST	THE W 100 FT OF LOT 6	3/1/2007-\$100	GIS Map
25	03-5S-16-03457-025 (MOBILE HOM)	JOHNSON BUDDY & STACI	1568 SW DAIRY ST	LOT 6 PLANTATION PARK S/D EX	2/1/2007-\$13,400	GIS Map

^^ Click Parcel ID for Record Details

Click Here to display GIS Map ^^

Jump to:

Page: 1 of 3

Next >>

Disclaimer

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 06/02/2009
PRODUCER (352)377-2002 FAX (352)376-8393 Scarborough Company Insurance, Inc. 2811 NW 41st Street P. O. Box 147050 Gainesville, FL 32614-7050		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Gainesville Restoration & Construction, Inc. 4607 NW 6th Street Suite A Gainesville, FL 32609		
INSURERS AFFORDING COVERAGE		NAIC #
INSURER A: Southern Owners Insurance Co.		10190
INSURER B: Auto Owners Insurance Co.		18988
INSURER C: Century Surety Company		36951
INSURER D: Bridgefield Casualty Insurance		10335
INSURER E:		

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	094622-78911939-09	01/23/2009	01/23/2010	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
	<input checked="" type="checkbox"/> Hired & Non Owned				PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> Auto				GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY	47-911939-01	01/23/2009	01/23/2010	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS				
<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACCIDENT \$
					AUTO ONLY: AGG \$
A	EXCESS/UMBRELLA LIABILITY	47-911939-00	01/23/2009	01/23/2010	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000				\$
					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	196 14078 0000	04/23/2009	04/23/2010	WE STATU- TORY LIMITS OTH- ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
					E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	OTHER CPL	CCP594550	04/06/2009	04/06/2010	1,000,000 each occurrence

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Columbia County Building Department
 135 NE Hernando Avenue
 Lake City, FL 32055

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Carol Ann Haythorne

ACORD 25 (2001/08) FAX: (386)758-2160

©ACORD CORPORATION 1988

CERTIFICATE OF OCCUPANCY

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 34-3S-17-07018-125

Building permit No. 000027848

Use Classification RE-ROOF/SFD

Fire: 0.00

Permit Holder CHRIS PICKERING

Waste: 0.00

Owner of Building BRIAN JOHNS

Total: 0.00

Location: 271 SE PEARL ST., LAKE CITY, FL



Date: 06/15/2009

Tony Dicks

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



Columbia County

BUILDING DEPARTMENT

Re Roof of a Single Family Dwelling

Inspection Affidavit

RE: Permit # _____

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

License #: CCC 1326022

On or about 3/1/09, I did personally inspect the roof
(Date & time)

deck nailing and/or secondary water barrier work at 271 SE Pearl Street
(circle one) (Job Site Address)

Lake City, Florida

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

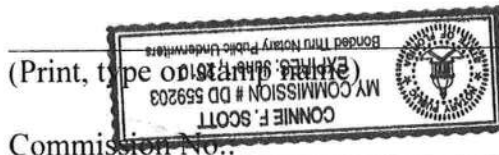
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 2 day of June, 2009

By Connie F. Scott

Notary Public, State of Florida



Personally known _____ or
Produced Identification ☒

Type of identification produced. FL DL

* 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.

COLUMBIA COUNTY OFFICE OF OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 34-3S-17-07018-125

Building permit No. 000027848

Use Classification RE-ROOF/SFD

Fire: 0.00

Permit Holder CHRIS PICKERING

Waste: 0.00

Owner of Building BRIAN JOHNS

Total: 0.00

Location: 271 SE PEARL ST., LAKE CITY, FL

Date: 06/15/2009



Tony Pickle

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

6-17-09

I spoke to Brian John
about the roof. I have
performed the final
Inspection and approved
the final. I explained
that this matter would
have to be addressed
as a civil issue.

Harry Dicks