

DATE 02/21/2008

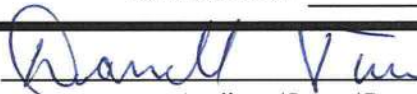
Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000026792

APPLICANT DARRELL TURNER PHONE 755-0056
ADDRESS P.O. BOX 3307 LAKE CITY FL 32056
OWNER LILLIAN HANDY PHONE 754-5644
ADDRESS 10016 S. US HIGHWAY 441 LAKE CITY FL 32025
CONTRACTOR DARRELL TURNER PHONE 755-0086
LOCATION OF PROPERTY 441S, AFTER 242, 3RD ON RIGHT, NEXT DOOR TO FLASH
WRECKER SERVICE

TYPE DEVELOPMENT RE-ROOF ON SFD ESTIMATED COST OF CONSTRUCTION 7500.00
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 15-5S-17-09245-006 SUBDIVISION
LOT BLOCK PHASE UNIT 0 TOTAL ACRES

 CCC1328465 
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING X08-054 BK JH
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident



COMMENTS: NOC ON FILE

Check # or Cash 3986

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 \$ 40.00 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 40.00
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 DEPARTMENT

RE: Permit # 26792

Inspection Affidavit

I Darrell Turner, licensed as a(n) Contractor* by chapter 489 of the FS
(please print name and circle Lic. Type)
License #: CCC 1328465

On or about Feb 24th, I did personally inspect the roof
(Date & time)

deck nailing and/or secondary water barrier work at 10016 891 South,
(circle one) (Job Site Address)

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

Darrell Turner
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 13 day of March, 2008

By Brenda Meads

Notary Public, State of Florida



(Print, type or stamp name)

Commission No.: _____

Personally known ☒ or

Produced Identification _____

Type of identification produced. PID

* General, Building, Residential, or Roofing Contractor certified 489 of the FS.

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 Building Permit Application

For Office Use Only	Application # <u>0802.34</u>	Date Received <u>2/27/08</u>	By <u>GE</u>	Permit # <u>26792</u>
Zoning Official _____	Date _____	Flood Zone _____	FEMA Map # _____	Zoning _____
Land Use _____	Elevation _____	MFE _____	River _____	Plans Examiner _____
Date _____				
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 Authorization from Contractor				
<input type="checkbox"/> Unincorporated area <input type="checkbox"/> Incorporated area <input type="checkbox"/> Town of Fort White <input type="checkbox"/> Town of Fort White Compliance letter				

Name Authorized Person Signing Permit <u>Danell Turner</u>	Fax <u>386-755-4660</u>
Address <u>P.O. Box 3380 Lake City FL 32056</u>	Phone <u>386-755-0086</u>
Owners Name <u>Lillian Handy</u>	Phone <u>NA</u>
911 Address <u>10016 S US 441 Lake City FL 32056</u>	
Contractors Name <u>Danell Turner</u>	Phone <u>386-755-0086</u>
Address <u>P.O. Box 3380 Lake City FL 32056</u>	
Fee Simple Owner Name & Address _____	
Bonding Co. Name & Address _____	
Architect/Engineer Name & Address _____	
Mortgage Lenders Name & Address _____	

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number <u>15-RS-17-09245-006</u>	Estimated Cost of Construction <u>7500.00</u>
Subdivision Name _____	Lot _____ Block _____ Unit _____ Phase _____
Driving Directions <u>441 South after 242 3rd on 2nd house on Right Next door to Flash Wrecker Service</u>	
Construction of <u>Re-roof</u>	Number of Existing Dwellings on Property _____
Do you need a - <u>Culvert Permit</u> or <u>Culvert Waiver</u> or <u>Have an Existing Drive</u>	Total Acreage _____ Lot Size _____
Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____	Total Building Height _____
Number of Stories _____ Heated Floor Area _____	Total Heated Floor Area _____ Roof Pitch <u>6/12</u>

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.

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.

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.

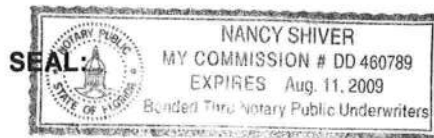
OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

* *Sebastian Handy*
Owners Signature

Affirmed under penalty of perjury to by the Owner and subscribed before me this 20 day of Feb 2008.

Personally known ✓ or Produced Identification _____

Nancy Shiver
State of Florida Notary Signature (For the Owner)



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.

X *Paul Turner*
Contractor's Signature (Permitee)

Contractor's License Number CCE/328465
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 21 day of February 2008.

Personally known ✓ or Produced Identification _____

State of Florida Notary Signature (For the Contractor)

SEAL:



**NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA**

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.

Tax Parcel ID Number 15-55-17-09245-00 6

1. Description of property: (legal description of the property and street address or 911 address)
Comm SAL COR of NE 1/4 Rm E
10016 S US 441 Lake City FL 32025
2. General description of improvement: Re-roof
3. Owner Name & Address Lillian Hardy 10016 US 441
Lake City FL 32025 Interest in Property _____
4. Name & Address of Fee Simple Owner (if other than owner): _____
5. Contractor Name Danell Turner Phone Number 386-755-0086
Address P.O. Box 3307 Lake City FL 32056
6. Surety Holders Name _____ Phone Number _____
Address _____
Amount of Bond _____
7. Lender Name _____ Phone Number _____
Address _____
8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:
Name _____ Phone Number _____
Address _____
9. In addition to himself/herself the owner designates _____ of _____
_____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee _____
10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) _____

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

* Lillian Hardy
Signature of Owner

Sworn to (or affirmed) and subscribed before
day of 20 Feb 2008

NOTARY STAMP/SEAL



DW Turner Roofing, Inc.

Estimate

P.O. Box 3307
Lake City, FL 32056
LIC# RC29027074

Date	Estimate #
2/14/2008	680

Name / Address
Suwannee River Economic Council 1408 6th st Live Oak, FL

			Project
			LILLIAN HANDY
Description	Qty	Rate	Total
Reroof for: PRICE INCLUDES: all permits and disposal of waste tear off old shingles #30 felt paper button caps eave drip valley metal 5x5 flashings ridge vents off ridge vents pipe flashings 30 year shingles installed ridge cap installed coil nails, and tar includes rot repair		6,500.00	6,500.00
		Total	\$6,500.00

Phone #	Fax #
386-755-0086	386-755-4660

@ CAM110M01	S	CamaUSA Appraisal System	Columbia County
2/21/2008 16:16		Property Maintenance	56550 Land 005
Year T Property		Sel	AG 000
2008 R 15-5S-17-09245-006		...	84468 Bldg 003
Owner HANDY LILLIAN M		Conf	2450 Xfea 004
Addr 10016 S US 441			143468 TOTAL B*
			5.180 Total Acres
		Retain Cap?	Renewal Notice
City, St LAKE CITY	FL	Zip 32025	
Country		(PUD1)	(PUD2) (PUD3) MKTA02
Appr By JS	Date 3/23/2005	AppCode	UseCd 000111 SFRES/STORE/SHOP
TxDist Nbhd	MktA	ExCode	Exemption/%
003	15517.00	02	HX 25000
	DIST 3		WX 500 +
House# 10016	Street US HWY 441	MD	Dir S #
	City		
Subd	N/A	Condo	.00 N/A
Sect 15	Twn 5S	Rnge 17	Subd Blk Lot
Legals	COMM SW COR OF NE1/4, RUN E 546.58 FT FOR POB, RUN NW 856.22 FT, E 262 FT TO W R/W US-441, SE ALONG R/W 863.52 +		
Map#	Mnt 3/28/2007 GAIL		
F1=Task F2=Extx F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More			
Invalid selection code			

