DATE 09/2	8/2009				ing Permit	nstruction	PERMIT 000028107
APPLICANT	DENNIS ON		•		PHONE	352.283.1549	
ADDRESS		NW 13TH STREI	ET	GA	INESVILLE		FL 32609
OWNER	I. DEWAYN	E & TERRY STI	DHAM		PHONE	352.494.2813	-
ADDRESS	193	SW GOPHER CO	URT	FT.	WHITE		FL 32038
CONTRACTO	R MARIO	ON E. YORK			PHONE	352.283.1549	
LOCATION O	F PROPERTY	441-S T	O C-778,TURN V	WEST, TO FOR	RTUNE LANE,TU	RN WEST TO	
		QUAIL,	TURN WEST TO	O GOPHER TU	JRN SOUTH, 1/4 !	MILE ON R.	
TYPE DEVEL	OPMENT	SWIMMING P	OOL	ESTIMA	TED COST OF CO	ONSTRUCTION	20000.00
HEATED FLO	OR AREA		тот	`AL AREA _		HEIGHT	STORIES
FOUNDATION	١	WA	LLS	ROOF	РІТСН	FL0	OOR
LAND USE &	ZONING	A-3			MAX	. HEIGHT	
Minimum Set I	Back Requirme	ents: STREE	T-FRONT	30.00	REAR	25.00	SIDE 25.00
NO. EX.D.U.	1	FLOOD ZONI	3	DEV	— ELOPMENT PERI	MIT NO.	:
PARCEL ID	18-7S-17-100	013-030	SURI	DIVISION	COLUMBIA ACR	FS -	
LOT 30	BLOCK	PHASE		NIT		AL ACRES 5.0	00
LO1 30	BLOCK				7	AL ACKES 5.0	70
Driveway Conr COMMENTS:	NOC ON FIL	eptic Tank Numb	er LU	& Zoning che	cked by App	Check # or Ca	
		500.5	NIII DINO 8	ZONINO D	ED A DIMENT	AND AND DESCRIPTION OF THE PARTY	
T D	500	FORE			EPARTMENT		(footer/Slab)
Temporary Pov		date/app. by	Foundation		e/app. by	_ Monolithic _	date/app. by
Under slab roug		0.7		Slab		Sheathing/1	Nailing
300000000000000000000000000000000000000		date	app. by	-	date/app. by		date/app. by
Framing	date/app. l		Insulation				
	date/app. t	ру		date/app.			
Rough-in plum	oing above slat	and below wood	i floor	J-4-/		ectrical rough-in	date/app. by
Heat & Air Duc	et		Peri. bea	date/app um (Lintel)	p. by	Pool	чанеларр. бу
_		app. by		_	date/app. by		date/app. by
Permanent power	date/a	app. by	C.O. Final	date/ap	in by	Culvert	date/app. by
Pump pole		Utility Pole			blocking, electricit	y and plumbing	00000000000000000000000000000000000000
Reconnection	ate/app. by		late/app. by	7		Re-roof	date/app. by
Reconnection	date	/app. by	- "		e/app. by	Re-1001	date/app. by
BUILDING PE	RMIT FEE \$	100.00	CERTIFICAT	ION FEE \$	0.00	SURCHARGE	FEE\$ 0.00
MISC. FEES \$			G CERT. FEE \$		IRE FEE \$ 0.0		E FEE \$
	-						AL, FEE 100.00
			1.			//	//

PERMIT

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.

INSPECTORS OFFICE

"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."

CLERKS OFFICE

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.

and the state of t
For Office Use Only Application # 0909=34 Date Received 3/23 By Jw Permit # 28/07
Zoning Official Date 25 09 Flood Zone Land Use A-3 Zoning A
FEMA Map # Elevation MFE River Plans Examiner HO Date 9 24-0 F
Comments SWIMMING TOUL CHECKLIZ L DEFORD WY ONNER CAMBELLE D
bNOC □ EH □ Deed or PA d 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. V-07297 Denvis Onbrako Sax 352 - 263-1549 Phase Authorized Person Signing Pormit
Name Authorized Person Signing Permit Phone 494-4813
Address 4404 NW13 ST. Gainesville, 77. 32609
Owners Name Dewayne Stidham Phone 386-454-3640
911 Address 193 SW Gopher CT. FT. White, F1. 32036
Contractors Name Marion E. York Phone 352-283-1549
Address 4404 NW13 ST. Gainesville Fl. 32609
Fee Simple Owner Name & Address Fee Simple
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address / / /
Mortgage Lenders Name & Address Name & Address Name & Address
Circle the correct power company - FL Power & Light - Clay Elec Suwannee Valley Elec Progress Energy
Property ID Number 18-75-17-10013-630- HX Estimated Cost of Construction <u>40,000.60</u>
Subdivision Name Columbia Acres Plot Block Unit Phase
Tun higher Turn R"conney of Quail Ct. + Gopher Ct. Turn.
Tun higher Fren R"conney of Quail Ct. + Gopher Ct. Tun.
Number of Existing Dwellings on Property 2
Construction of <u>9vgkound Swimming pool</u> Total Acreage <u>5</u> 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 15 Side 180 Rear NA
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

<u>TIME LIMITATIONS OF APPLICATION</u>: 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.

<u>TIME LIMITATIONS OF PERMITS:</u> 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 COMMENCMENT 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.

<u>NOTICE TO OWNER:</u> 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.

**OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.

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**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.

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**CONTRACTORS AFFIDAVIT: By my signature (Permit to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit time limitations.

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**CONTRACTORS AFFIDAVIT: By my signature (Permit to the owner of all the owner of all the owner of all the owner of all th

(Owners Must Sign All Applications Before Permit Issuance.)

Ingt:200912015907 Date:9/23/2009 Time:9:55 AM	
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:118	1 P:462

County Clerk's Office Stamp or Seal

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 18-75-17-10013-030 HX

Florida Statutes, the following information is provided in this NO	III be made to certain real property, and in accordance with Section 713.13 of the ITICE OF COMMENCEMENT.
1. Description of property (legal description):	NEL CY. FT. White, Fl. 32038
2. General description of improvements: <u>ONGROUN</u>	n pook
20 70 3	ham 193 SW Gopher CV. FT. White, F1.
4. Contractor Information a) Name and address: Hab 9 ndustrio b) Telephone No: 352-375-7800	Fax No. (Opt.) Gainesoille, \f. 32600
a) Name and address: N/A	
b) Amount of Bond:	Fax No. (Opt.)
6 London	rax No. (Opt.)
6. Lender a) Name and address: Name	Fax No. (Opt.)
b) Phone No	ner upon whom notices or other documents may be served:
a) Name and address:	Fax No. (Opt.)
b) Telephone No.:	rax No. (Opt.)
Florida Statutes:	Preceive a copy of the Lienor's Notice as provided in Section 713.13(I)(b), Fax No. (Opt.)
9. Expiration date of Notice of Commencement (the expiration d is specified):	Fax No. (Opt.) ate is one year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROPER PAY STATUTES, AND CAN RESULT IN YOUR PAYING TWIC COMMENCEMENT MUST BE RECORDED AND POSTED	E OWNER AFTER THE EXPIRATION OF THE NOTICE OF MENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA E FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
STATE OF FLORIDA COUNTY OF COLUMBIA	Signature of Owner or Owner's Authorized Office/Director/Partner/Manager Dewayne Stidham
	Finit Ivanic
The foregoing instrument was acknowledged before me, a Florida No	tary, this 22 day of 3ept. 2009 by:
Dennis ONBRAKO 25	(type of authority, e.g. officer, trustee, attorney
fact) for OWNER	(name of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification Type	
Notary Signature Gennis 9, Ondie	Notary Stamp or Scal: Notary Stamp or Scal: Notary Public State of Florida Dennis N Ondrako My Commission DD818209 Expires 08/27/2012
 Verification pursuant to Section 92.525, Florida Statutes. Uf facts stated in it are true to the best of my knowledge and I 	Inder penalties of perjury, I declare that make read me foregoing and twa the belief.

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

Columbia County Property Appraiser

DB Last Updated: 7/22/2009

2009 Preliminary Values

Tax Record Property Card

Interactive GIS Map

Search Result: 1 of 1

Print

Parcel: 18-7S-17-10013-030 HX

Owner & Property Info

Owner's Name	STIDHAM TERRY R & IRA DEWAYNE				
Site Address	GOPHER				
Mailing Address	193 SW GOPHER CT FT WHITE, FL 32038				
Use Desc. (code)	SINGLE FAM (000100)				
Neighborhood	018717.01	Tax District	3		
UD Codes	MKTA02	Market Area	02		
Total Land Area	0.000 ACRES				
Description	LOT 30 COLUMBIA ACRES S/D. ORB 429-489, 754-112, 771-526, 806-1445, 837-010, FJ DIV#03- 468DR 994-827, WD 1000-551. WD 1042-2950, CWD 1120-15,24, WD 1120-27.				

GIS Aerial



Property & Assessment Values

Total Appraised Value		\$203,052.00
XFOB Value	cnt: (1)	\$900.00
Building Value	cnt: (1)	\$153,552.00
Ag Land Value	cnt: (0)	\$0.00
Mkt Land Value	cnt: (1)	\$48,600.00

Just Value		\$203,052.00	
Class Value		\$0.00	
Assessed Value		\$174,545.00	
Exemptions	(code: HX)	\$50,000.00	
Total Taxable Value	County: \$124,545.00 City: \$124,545.00 Other: \$124,545.00 School: \$149,545.00		

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
6/12/1995	806/1445	WD	I	U	03	\$0.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value	
2	SINGLE FAM (000100)	2008	Above Avg. (10)	1768	3300	\$153,552.00	
	Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0040	BARN,POLE	1994	\$900.00	0000001.000	0 x 0 x 0	(000.00)

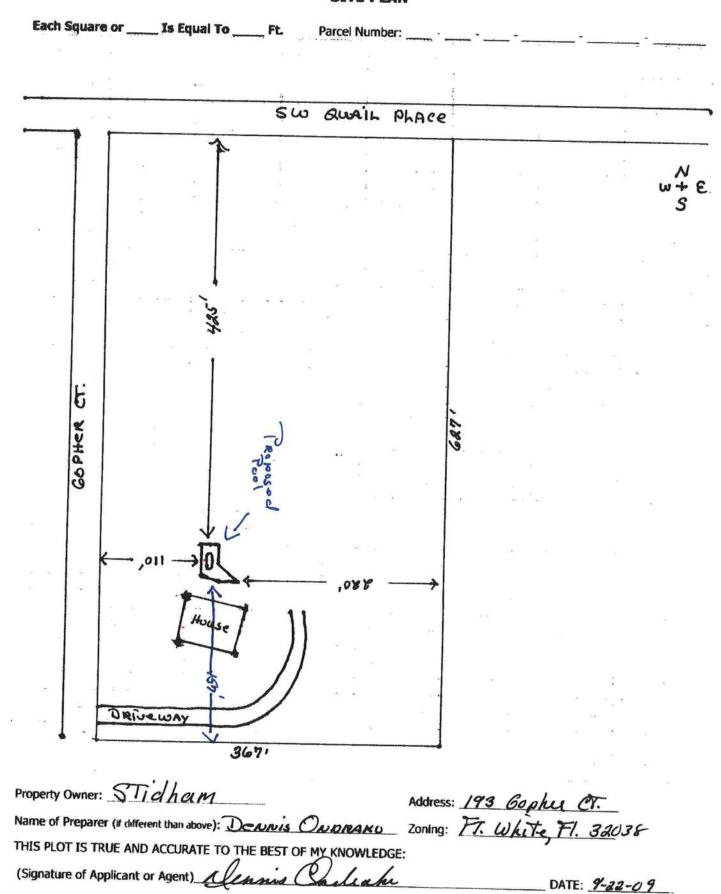
Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	0000001.000 LT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$48,600.00	\$48,600.00

Columbia County Property Appraiser

DB Last Updated: 7/22/2009

SITE PLAN



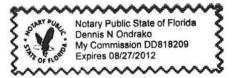
Pool DRAW



COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

1, Marion & York	(license holder name), licensed qualifier					
for Had 9 wolustries INC.	(company name), do certify that					
the below referenced person(s) listed on this for employee leasing arrangement; or, is an officer Florida Statutes Chapter 468, and the said personntrol and is/are authorized to purchase permit	m is/are employed by me directly or through an of the corporation; or, partner as defined in on(s) is/are under my direct supervision and					
Printed Name of Person Authorized	Signature of Authorized Person					
1. Dennis ONDRAKO	1. Cennis Incliaho					
2.	2.					
3.	3.					
4.	4.					
5.	5.					
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.						
License Molders Signature (Notarized) NOTARY INFORMATION:	<u>CRU457036</u> <u>9-22-09</u> License Number Date					
STATE OF: Florida COUNTY O	F <u>: Columbia</u>					
The above license holder, whose name is Depersonally appeared before me and is known by (type of I.D.) **NOWN** on						
NOTARY'S SIGNATURE	- (Seal/Stamp)					



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21 Lake City, FL 32055

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

Application Number 28/0

NOTICE TO SWIMMING POOL OWNERS

have been informed and I understand that prior to the final inspection approval and use of my pool. I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code Chapter 4 Section 24 requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool. Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
- · The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- · Gates located in the pool barrier must open outward away from the pool and be both self-closing and self latching, with a release mechanism not less than 54" above the standing surface at the gate.
- · The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.

· Where a wall of a dwelling serves as part of the barrier one of the following shall apply:

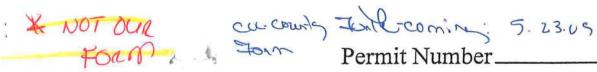
- 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
- 2) Or; all doors providing direct access from the home to the pool must be equipped with a self-closing. self-

latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Address: 193 Gopher Ct.

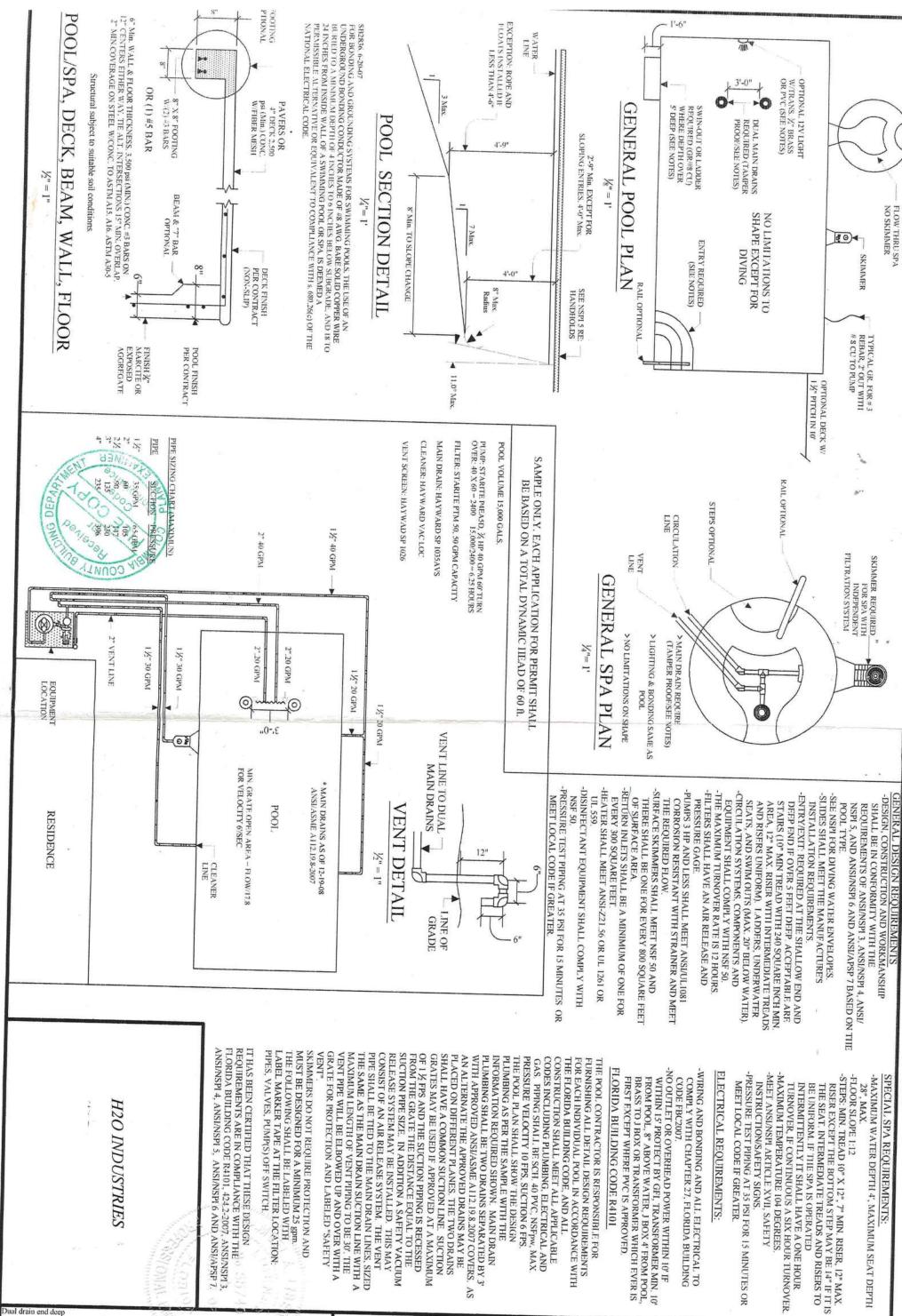
itractor Signature





Residential Swimming Pool Spa and Hot Tub Safety Act Requirement

I, Make	ion E Gork, License # CPC1457036 hereby affirm that collowing methods will be used to meet the requirements of Chapter 515, Florida Statutes.
<u>X</u>	The pool will be isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statute 515.29;
	The pool will be equipped with an approved safety pool cover that complies with ASTM F1346-91 (Standard Performance Specifications for Safety Covers for Swimming Pools, Spas and Hot Tubs);
	All door and windows providing direct access from the home to the pool will be equipped with an exit alarm that has a minimum sound pressure rating of 85 decibels at 10 feet;
	All doors providing direct access from the home to the pool will be equipped with a self- closing, self-catching device with a release mechanism placed no lower than 54" above the floor or deck;
I understand that not having one of the above installed at the time of final inspection will constitute a violation of Chapter 515 F.S., and will be considered as committing a misdemeanor of the second degree, punishable as provided in section 775.082 or section 775.083 F.S.	
Morio	CTOR'S SIGNATURE OWNER'S SIGNATURE
	OWNER'S NAME (PLEASE PRINT)



SPAZICO 2/16/09

Standard Residential Pool and / or Spa Design GB Collins Engineering PA Cerlificate of Authorization 27934

Cardner B. Collins PE 976 1268 Rogers Street Clearwater, FL 33756