DATE 02/25/2004

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT
000021545

APPLICANT TODD DENMARK PHONE 755-5611

ADDRESS RT 9 BOX 3691-1 LAKE CITY FL 32024

OWNER TODD DENMARK PHONE 755-5611

ADDRESS RT 9, BOX 3691-1 LAKE CITY FL 32024

CONTRACTOR OWNER BUILDER PHONE

LOCATION OF PROPERTY 47S, TL ON WESTER ROAD, 1 MILE ON LEFT BEFORE SHARP CURVE, GRAY HOUSE

TYPE DEVELOPMENT ADDITION TO SFD ESTIMATED COST OF CONSTRUCTION 21100.00

HEATED FLOOR AREA 422.00 TOTAL AREA 422.00 HEIGHT .00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB

LAND USE & ZONING A-3 MAX. HEIGHT 8

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 30-4S-17-08912-002 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 2.00

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
EXISTING	04-0213-N	BK	RJ
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance

New Resident

COMMENTS: NOC ON FILE

Check # or Cash 3437

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 $ 110.00 CERTIFICATION FEE $ 2.11 SURCHARGE FEE $ 2.11

Columbia County
Building Permit Application

21545

Date 2-16-04

Application No. 0402-69

Applicants Name & Address X M.T. Jenk Rt 9 Box 3691-1 LC FL 32024 Phone 386-755-5611

Owners Name & Address SAME Phone

Fee Simple Owners Name & Address Phone

Contractors Name & Address OWNER Phone

Legal Description of Property R30-4S-17-08912-002

Location of Property WESTER ROAD.

Tax Parcel Identification No. R30-4S-17-08912-002 Estimated Cost of Construction $ 33,000.00

Type of Development ADDITION Number of Existing Dwellings on Property 1

Comprehensive Plan Map Category A-3 Zoning Map Category A-3

Building Height 8' Number of Stories 1 Floor Area Total Acreage in Development

Distance From Property Lines (Set Backs) Front 196 Side 46'/126' Rear 161' Street

Flood Zone X Certification Date Development Permit N/A

Bonding Company Name & Address

Architect/Engineer Name & Address MARK DISOWAY

Mortgage Lenders Name & Address

Application is hereby made to obtain a permit to do the 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 will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner or Agent (Including contractor)

Contractor

Donna L Kennington
My Commission DD007402

Permit No._____ Tax Parcel No. R30-4S-17-09912-002

COLUMBIA COUNTY NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF COLUMBIA

Inst:2004003546 Date:02/18/2004 Time:09:01
MCK DC,P.DeWitt Cason,Columbia County B:1007 P:1112

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.

1. Description of property: (legal description of the property, and street address if available.) R30-4S-17 Wester Road.

2. General description of improvement: ADD BEDROOM; CLOSET; BATH

3. Owner Information:

A. Name and address:

X ~~M~~ Michael Todd Denmark
Rt. 9 Box 3691-1 LC. Fl. 32024

B. Interest in property:

OWNER

C. Name and address of fee simple titleholder (if other than owner):

4. Contractor: (name and address)

OWNER

8. In addition to himself, owner designates N/A of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) _____.

X _____
(Signature of Owner)

SWORN TO and subscribed before me this 17th day of February ~~19~~ 2004.

_____
Notary Public

(NOTARIAL SEAL)

Donna L Kennington
My Commission DD007402
Expires April 28, 2005

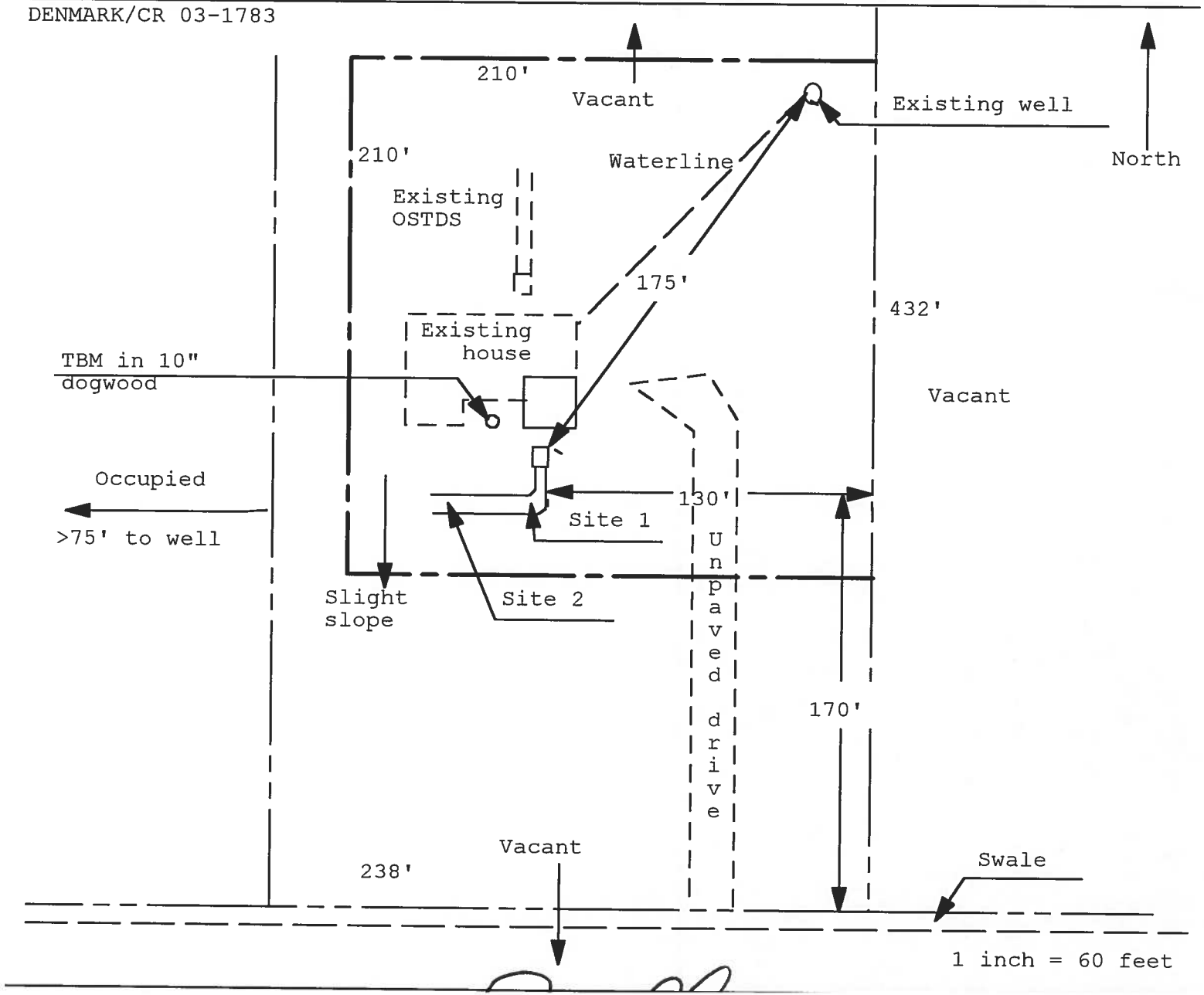
My Commission Expires: April 28, 2005

Inst:2004003546 Date:02/18/2004 Time:09:01
_____DC,P.DeWitt Cason,Columbia County B:1007 P:1113

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 04-0213-N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600B-01 — **Residential Component Prescriptive Method B** — **NORTH 1 2 3**

Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME:	DENMARK JOB	**BUILDER:**	TODD DENMARK
AND ADDRESS:	WESTER ROAD	**PERMITTING OFFICE:**	COLUMBIA
		CLIMATE ZONE:	1 ☐ 2 ☐ 3 ☑
OWNER:	TODD & TAMMY DENMARK	**PERMIT NO.:**	215455
		JURISDICTION NO.:	221000

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" fromTable 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

	Please Print	CK
1. Compliance package chosen (A-F)	1.	
2. New construction or addition	2.	
3. Single family detached or Multifamily attached	3.	
4. If Multifamily—No. of units covered by this submission	4.	
5. Is this a worst case? (yes / no)	5.	
6. Conditioned floor area (sq. ft.)	6. 422	
7. Predominant eave overhang (ft.)	7. 2	
8. Glass type and area :	Single Pane / Double Pane	
a. Clear glass	8a. _____ sq. ft. / 35 sq. ft.	
b. Tint, film or solar screen	8b. _____ sq. ft. / _____ sq. ft.	
9. Percentage of glass to floor area	9. 8 %	
10. Floor type, area or perimeter, and insulation:		
a. Slab on grade (R-value)	10a. R= _____ _____ lin. ft.	
b. Wood, raised (R-value)	10b. R= _____ _____ sq. ft.	
c. Wood, common (R-value)	10c. R= _____ _____ sq. ft.	
d. Concrete, raised (R-value)	10d. R= _____ _____ sq. ft.	
e. Concrete, common (R-value)	10e. R= _____ _____ sq. ft.	
11. Wall type, area and insulation:		
a. Exterior: 1. Masonry (Insulation R-value)	11a-1 R= _____ _____ sq. ft.	
2. Wood frame (Insulation R-value)	11a-2 R= 13 _____ sq. ft.	
b. Adjacent: 1. Masonry (Insulation R-value)	11b-1 R= _____ _____ sq. ft.	
2. Wood frame (Insulation R-value)	11b-2 R= _____ _____ sq. ft.	
12. Ceiling type, area and insulation:		
a. Under attic (Insulation R-value)	12a. R= 30 _____ sq. ft.	
b. Single assembly (Insulation R-value)	12b. R= _____ _____ sq. ft.	
13. Air Distribution System: Duct insulation, location	13. R= _____ _____	
Test report (attach if required)	14a. Type: CENTRAL	
14. Cooling system	14b. SEER/EER: 12	

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 $25,000. 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 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 th 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, buildin codes, and zoning regulations.

TYPE OF CONSTRUCTION

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

NEW CONSTRUCTION OR IMPROVEMENT

( ) New Construction
(✓) Addition, Alteration, Modification or other Improvement

I TODD DENMARK, 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

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                        Print Key Output                                Page    1
   5722SS1 V5R1M0 010525                    S109D45B            02/17/04  13:53:03

   Display Device . . . . . :  WA
   User  . . . . . . . . . . :  JUDY

 CAM112M01         CamaUSA Appraisal System                      Columbia County
  2/17/2004 13:53 Legal Description Maintenance          15340  Land   001   *
Year T Property                          Sel                    AG     000
2004 R 30-4S-17-08912-002                               59608  Bldg   001
        RT 9 BX 3691-1                                   1588  Xfea   002
HX     DENMARK MICHAEL TODD                             76536  TOTAL       E

  1  BEG SE COR OF SW1/4, RUN W      238.50 FT, N 367 FT, E 238.50      2
  3  FT, S 367 FT TO POB & A         PORTION LYING IN SEC 31 DESC       4
  5  AS: BEG NE COR OF NW1/4 OF SEC  31, RUN W 238.15 FT, S 65.71       6
  7  FT TO W R/W WESTEER RD, E       ALONG R/W 234.02 FT, N 64.79       8
  9  FT TO POB. ORB 855-2447,                                          10
 11                                                                    12
 13                                                                    14
 15                                                                    16
 17                                                                    18
 19                                                                    20
 21                                                                    22
 23                                                                    24
 25                                                                    26
 27                                                                    28
                                                  Mnt  4/17/1998 TERR
F1=Task  F3=Exit  F4=Prompt  F10=GoTo  PGUP/PGDN  F24=MoreKeys
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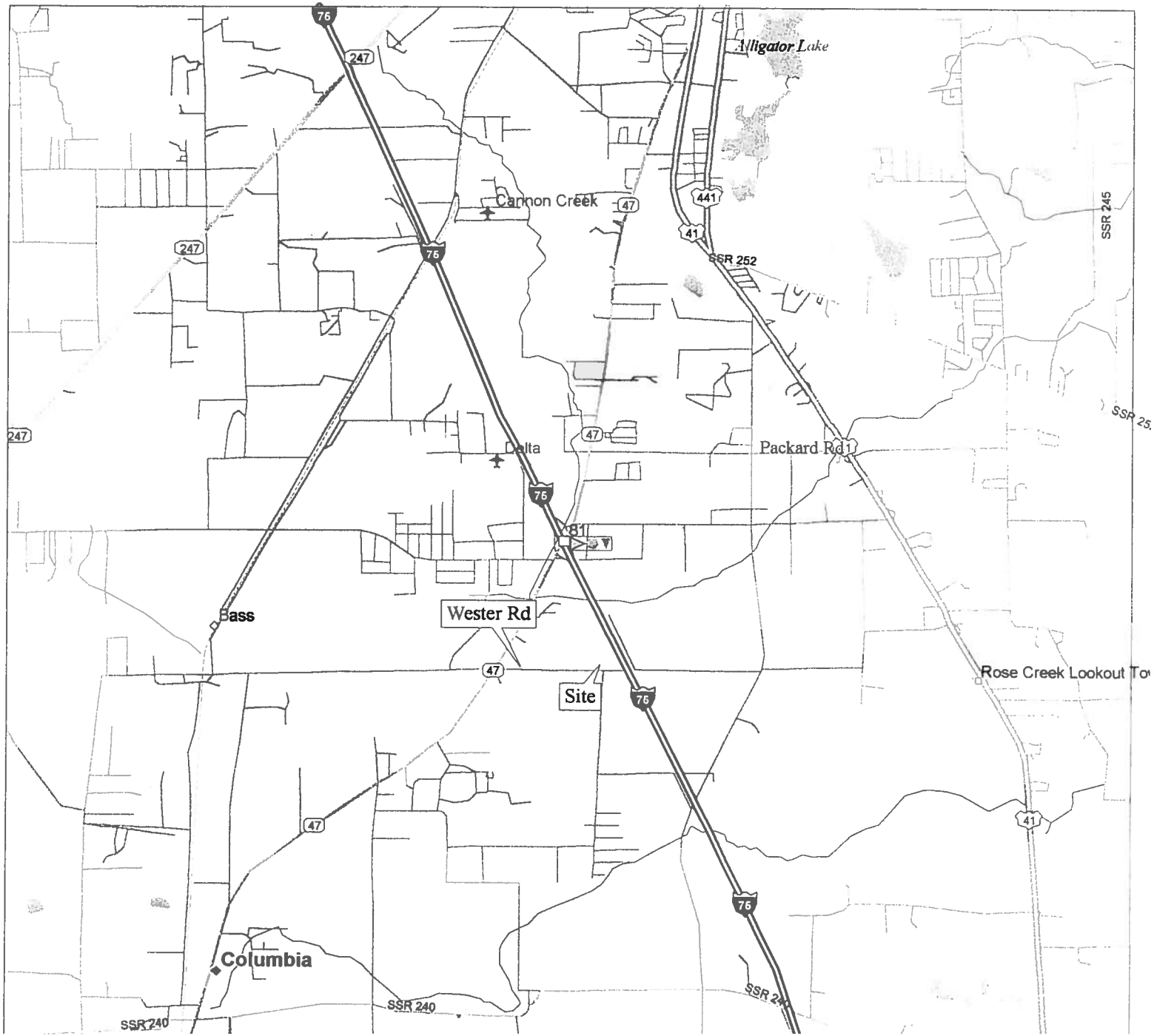
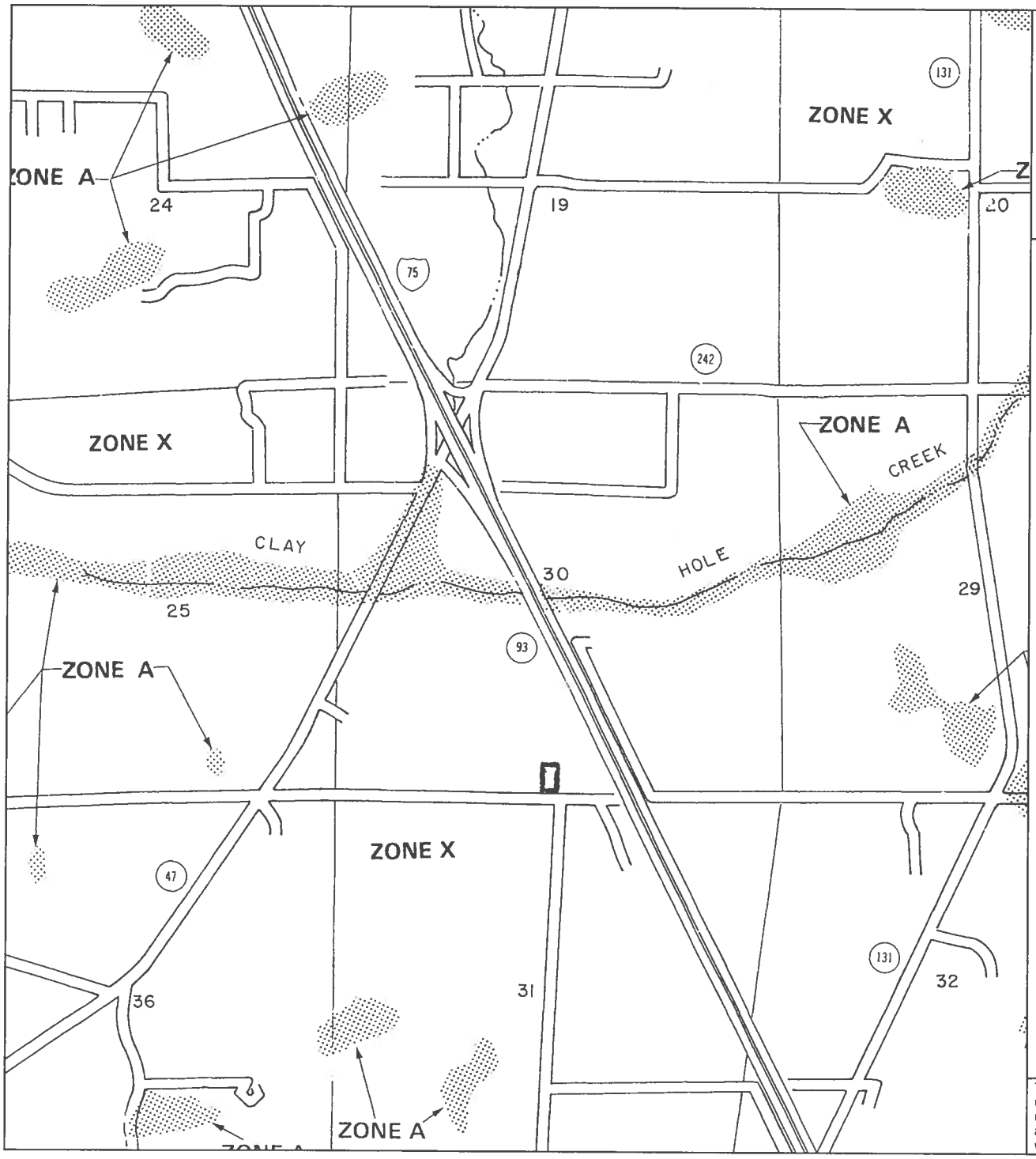
Michael Todd & Tammy Denmark

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www.fema.gov/mit/tsd

Notice of Treatment

Applicator Florida Pest Control & Chemical Co.

Address 5364 Bay DR

City L.C. Phone

Site Location Subdivision

Lot# Block# Permit#

Address Rt 4 Box 369-1 L.C.

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body	3-17-04			
Patio/s #				
Stoop/s #				
Porch/s #				
Brick Veneer				
Extension Walls				
A/C Pad				
Walk/s #				
Exterior of Foundation				
Driveway Apron				
Out Building				
Tub Trap/s				
(Other)				