DATE 11/17	7/2004			Building Po		PERMIT
APPLICANT	GARY SA		it Expires One Ye	ear From the Date of PHONE	of Issue 365.4055	000022506
ADDRESS	848	SW FAULKNER DR	IVE	FT. WHITE	303,4033	FL 32038
OWNER	JUDY EA			PHONE	386.752.112	
ADDRESS	451	SE ROSEWOOD CIR	RCLE	LAKE CITY		FL 32025
CONTRACTO	R JUD	Y EASTON		PHONE	752.1121	
LOCATION O	F PROPER	TY EAST BAY	A TO ENTRANCE DO	OWN PEARL TERRAC	E TO END, TU	– RN R,
ON ROSEWOOD CIRCLE DOWN AROUND CURVE.						
TYPE DEVELOPMENT ADDITION TO SFD ESTIMATED COST OF CONSTRUCTION 14400.00						
HEATED FLO	OR AREA	288.00	TOTAL ARE	EAEA	HEIGHT	STORIES
FOUNDATION	CONC	WALLS	S FRAMED R	ROOF PITCH	I	FLOOR CONC
LAND USE &	ZONING	RMF-1	1	MAX	K. HEIGHT	35
Minimum Set I	Back Requir	ments: STREET-F	RONT 25.00	REAR	15.00	SIDE
NO. EX.D.U.	_	FLOOD ZONE		DEVELOPMENT PER	MIT NO.	
PARCEL ID	03-4S-17-	07592-615	SUBDIVISIO	N EASTSIDE VILLO	GE	
LOT 15	BLOCK	D PHASE _	UNIT _	6 ТОТ	AL ACRES _	.50
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor EXISTING X-04-0280 BLK HD N Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident COMMENTS: NOC ON FILE LETTER OF AUTHORIZATION GIVEN TO MR. SANDLIN. Check # or Cash 2583						
LETTER OF A	UTHORIZA	TION GIVEN TO MR.	SANDLIN.		Check # or t	Cash 2583
LETTER OF A	UTHORIZA	E		IC DEPARTMENT		
		E	LDING & ZONIN	IG DEPARTMENT	ONLY	Cash 2583 (footer/Slab)
LETTER OF A		FOR BUI		IG DEPARTMENT		(footer/Slab)
	ver	FOR BUI	LDING & ZONIN Foundation	date/app. by	ONLY Monolithic	(footer/Slab) date/app. by
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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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

For Office Use Only Application # 04/0-63 Date Received 10/22/04 By 6 Permit # 22 506
Application Approved by - Zoning Official 5 Date 7, 11,04 Plans Examiner Date
Flood Zone Development Permit Zoning RMF-1 Land Use Plan Map Category RES Med. Dev
Comments
\$ 127.28
Applicants Name Judy EASTON. Phone 753-1/2/
Address 45/5E Rosewood Circle
Same of
Owners Name SAMe Phone Phone
911 Address Trad Cast to the first terms are the same and the same are the same and the same are the sa
Contractors Name Judy EASTON DWNER Phone 752-1121
Address 45/5E Rosewood Creeke
Fee Simple Owner Name & Address
Bonding Co. Name & Address
Architect/Engineer Name & Address MARK Disousty LC Th
Mortgage Lenders Name & Address/
Circle the correct power company - FL Power & Light - Clay Elec Suwannee Valley Elec Progressive Energy
Property ID Number + 01592-615 Estimated Cost of Construction 912,000
Subdivision Name ENST VILLAGE Lot 15 Block D Unit 1 Phase
Driving Directions EAST VILLAGE EMPRONCE COUN PEAST TERRACE &
End TURN Rt. ON ROSEWOOD CIRCLE down aroundcorn
+> 451
Type of Construction Addition Number of Existing Dwellings on Property 1
Total Acreage Lot Size Do you need a - Culvert Permit or Culvert Waiver of Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 60 FW Side 30 Rear 40 Rear
Total Building Height Single Number of Stories 1 Heated Floor Area 2885F Roof Pitch 4/12
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.
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.
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 Builder or Agent (Including Contractor) Contractor Signature
Contractors License Number
STATE OF FLORIDA Competency Card Number
Sworn to (or affirmed) and subscribed before me
this 25 day of O
Division of the second of the
Personally known or Produced Identification Notary Signature

DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THER 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 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.

	TYPE OF CONSTRUCTION
() Single Family Dwelling	() Two-Family Residence
() Farm Outbuilding	() Other
() New Construction	Addition, Alteration, Modification or other Improvement
NEW	CONSTRUCTION OR IMPROVEMENT
I Junith Easton for exemption from contractor lice	, have been advised of the above disclosure statement nsing 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 Bunding Perint	Number
\bigcap \bigcap	
used Cleaston	10/25/04
Signature	Date
/	BOD DAW DAVIG VIOR ON VI
	FOR BUILDING USE ONLY
	d owner/builder has been notified of the disclosure statement in
Florida Statutes ss 489.103(7).	
Date //-/7.04 Buildin	g Official/Representative Harry Dicks

Judith A. Easton 451 S. E. Rosewood Circle Lake City,FL 32025

November 18, 2004

Dear Sirs:

I, Judith Easton, to hereby authorize Sandlin Frame and Finish to pull the permit for future construction to the above property.

Thank you

Judith A. Easton



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 1. Description of property: (legal description of the property and street address or 911 address) General description of improvement: Interest in Property Name & Address of Fee Simple Owner (if other than owner): Contractor Name _ Phone Number __ Address 6. Surety Holders Name Inst:2004024111 Date:10/27/2004 Time:10:24 Address DC,P.DeWitt Cason,Columbia County B:1029 P:432 Amount of Bond __ Lender Name ____ 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. cente. NOTARY STAMP/SEAL Signature of Owne Oy Fain-Inu-Signature of Notary

