

DATE 01/28/2009

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

PERMIT
000027600

APPLICANT DAVID ROYAL PHONE 386.755.0240
ADDRESS 212 SE HICKORY DRIVE LAKE CITY FL 32025
OWNER STAFFORD & ANNE SCAFF PHONE 386.752.7344
ADDRESS 4046 SW SR 47 LAKE CITY FL 32024
CONTRACTOR JOHN W.O'NEAL PHONE 386.755.0240
LOCATION OF PROPERTY SR. 47-S TO C-242 @ INTERSECTION STORE ON R.
S&S STORE # 41
TYPE DEVELOPMENT COMM REMODEL ESTIMATED COST OF CONSTRUCTION 10000.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 30-4S-17-08894-001 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 4.46

CBC057550
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
FDOT-EXISTING 09-0036-E BLK RTJ N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REMODEL ONLY. INSIDE EXISTING STRUCTURE.

Check # or Cash 16775

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 \$ 50.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 125.00
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 Permit Application

CK#

For Office Use Only Application # 0901-25 Date Received 1/16/09 By UH Permit # 27600
Zoning Official BLK Date 27.01.07 Flood Zone X Land Use Comm Zoning CF
FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner PJ Date 1/27/09
Comments Inside existing structure
☒ NOC ☒ DEH ☐ Deed or PA ☐ 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 Exempt - existing Sq. Ft.

Septic Permit No. _____

Fax (386) 755-0240

Name Authorized Person Signing Permit DAVID ROYALPhone (386) Cell 365-365-2391 ~~752-7578~~Address 212 SE HICKORY DRIVE LAKE CITY, FL 32025Owners Name STAFFORD L. & ANNE C. SCAFF

Phone (386) 752-7344

911 Address _____

Contractors Name O'NEAL CONTRACTING

Phone (386) 752-7578

Address 212 SE HICKORY DRIVE LAKE CITY, FL 32025

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 30-4S-17-08894-001Estimated Cost of Construction \$10,000.00

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions STATE RD. 47 SOUTH TO COUNTY RD. 242. STORE IS LOCATED AT THIS INTERSECTION,
S&S #41.Number of Existing Dwellings on Property 1Construction of Remodel S&S 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 N/A Side N/A Side N/A Rear N/ANumber of Stories 1 Heated Floor Area N/A Total Floor Area N/A 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

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.

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.

Contractor's Signature (Permitee)

Contractor's License Number CBC057550
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 16th day of January 2009.
Personally known ☒ or Produced Identification _____

State of Florida Notary Signature (For the Contractor)

SEAL:



Columbia County Property Appraiser

DB Last Updated: 1/12/2009

2008 Tax Year

Tax Record

Property Card

Interactive GIS Map

Print

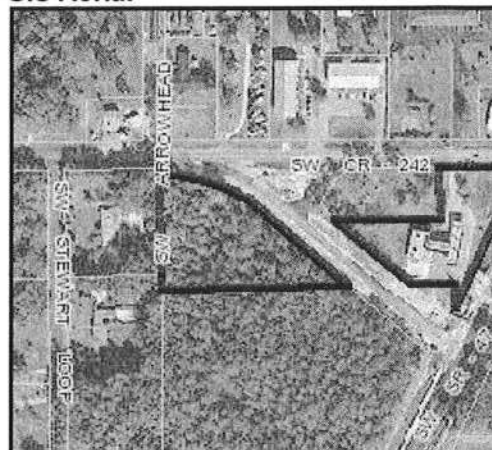
Parcel: 30-4S-17-08894-001

Owner & Property Info

Search Result: 1 of 1

Owner's Name	SCAFF STAFFORD L JR & ANNE C		
Site Address	STATE ROAD 47		
Mailing Address	134 SE COLBURN AVE S/S # 41 LAKE CITY, FL 32025		
Use Desc. (code)	CONV STORE (001126)		
Neighborhood	30417.00	Tax District	2
UD Codes	MKTA06	Market Area	06
Total Land Area	4.463 ACRES		
Description	COMM NW COR OF SW1/4 OF NW1/4, RUN S 45.58 FT TO S R/W CR-242 FOR POB, RUN E 424.54 FT, S 148 FT, E 365 FT, N 148 FT TO S R/W OF CR 242, E ALONG R/W 146.37 FT, SE 100.47 FT TO W R/W SR-47, S ALONG R/W 366.31 FT, N 74 FT, W 821.28 FT, N 346.92 FT TO POB. ORB 627-389, 705-353 (NEW BY-PASS RD R/W TAKEN FROM ASSESSMENT, ROAD ALREADY BUILT AND BEING USED)		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (2)	\$480,256.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$198,476.00
XFOB Value	cnt: (4)	\$12,972.00
Total Appraised Value		\$691,704.00

Just Value	\$691,704.00
Class Value	\$0.00
Assessed Value	\$691,704.00
Exempt Value	\$0.00
Total Taxable Value	\$691,704.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
12/20/1989	705/353	WD	V	Q		\$142,000.00
7/7/1987	627/389	WD	V	Q		\$132,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	NBHD CONVE (004300)	1992	CB Stucco (17)	3690	9488	\$198,476.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0166	CONC,PAVMT	0	\$1,632.00	1920.000	12 x 160 x 0	AP (50.00)
0166	CONC,PAVMT	0	\$2,346.00	2760.000	69 x 40 x 0	AP (50.00)
0260	PAVEMENT-A	0	\$5,994.00	22200.000	60 x 370 x 0	AP (50.00)

0253	LIGHTING	0	\$3,000.00	10.000	0 x 0 x 0	(.00)
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Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
001410	CONV STORE (MKT)	83828.280 SF - (1.924AC)	1.00/1.00/1.25/1.00	\$3.75	\$314,356.00
001000	VACANT COM (MKT)	110600.000 SF - (2.539AC)	1.00/1.00/.50/1.00	\$1.50	\$165,900.00

Columbia County Property Appraiser

DB Last Updated: 1/12/2009

1 of 1

Disclaimer

This information was derived from data which was compiled by the Columbia County Property Appraiser's Office solely for the government purpose of property assessment. The information shown is a **work in progress** and should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's Office. The assessed values are **NOT CERTIFIED** values and therefore are subject to change before finalized for ad-valorem assessment purposes.

Notice:

Under Florida Law, e-mail addresses are public record. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead contact this office by phone or in writing.

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O'NEAL CONTRACTING, INC.

P.O. BOX 3505
818 HICKORY LANE
LAKE CITY, FLORIDA 32056

(386) 752-7578
FAX (386) 755-0240

June 29, 2007

I **John W. O'Neal**, do hereby authorize **Dave Royal** to be my representative and act on the behalf of **O'Neal Contracting, Inc.** in all aspects of applying for a building permit in **Columbia County**.

If you have any questions, please call me at (386) 752-7578.

Sincerely,

John W. O'Neal
Vice President

State of **FL**
County of **Columbia**

Sworn to and subscribed before me this 29th day of **June, 2007** by **John W. O'Neal** who is personally known to me.

Notary Public



Cindy Edge
Commission # DD308375
Expires July 20, 2008
Bonded Troy Fain - Insurance, Inc. 800-385-7019

Commission expires **July 20, 2008**
Commission No. **DD308375**

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-0036E

----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.

SEE ATTACHED
LARGE PLAN

Notes: _____

Site Plan submitted by: *Perly D Z*

MASTER CONTRACTOR

Plan Approved ☒ Not Approved ☐

Date 1-23-09

By *Mon A Zander* *Columbia* County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-00360E

----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.

SEE ATTACHED
LARGE PLAN

Notes: _____

Site Plan submitted by: *Perly D Z* MASTER CONTRACTOR

Plan Approved ☒ Not Approved ☐ Date 1-23-09

By *Mon A Zander* Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

LC

09-0036E
PERMIT NO. 908140
DATE PAID: 1-12-09
FEE PAID: 125.00
RECEIPT #: 1903156

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Scaff Inc S & S #41

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: na BLOCK: na SUB: na PLATTED: 2/1

PROPERTY ID #: 30-4S-17-08894-001 ZONING: C-2 I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 4.4 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [X] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] [N] DISTANCE TO SEWER: — FT

PROPERTY ADDRESS (4046 SR 47) & CR 242, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: 47 South, Under I-75, TR into S & S on right

BUILDING INFORMATION

[] RESIDENTIAL [X] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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1

Conv Store

0

3618

2

W/DCL

3

[] Floor/Equipment Drains [] Other (Specify)

SIGNATURE: Rocky Ford

DATE: 1/15/2009



O'NEAL CONTRACTING, INC.

P.O. BOX 3505
818 HICKORY LANE
LAKE CITY, FLORIDA 32056

(386) 752-7578
FAX (386) 755-0240

January 29, 2009

I **John W. O'Neal**, do hereby authorize **Dave Royal** to be my representative and act on the behalf of **O'Neal Contracting, Inc.** in all aspects of applying and signing for a building permit in **Columbia County**.

If you have any questions, please call me at (386) 752-7578.

Sincerely,

John W. O'Neal
Owner

State of **FL**
County of **Columbia**

Sworn to and subscribed before me this 29th day of **January, 2009** by **John W. O'Neal** who is personally known to me.

Notary Public



Commission expires **July 20, 2012**
Commission No. **DD779357**

27600

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 30-48-17-08894-001

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.

1. Description of property (legal description): S&S #41
a) Street (job) Address: _____
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
2. General description of improvements: INTERIOR RE-MODEL
3. Owner Information
a) Name and address: STAFFORD L. & ANNE C. SCAFF 752-7344
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
4. Contractor Information
a) Name and address: ONEAL CONTRACTING
b) Telephone No.: 752-7578 Fax No. (Opt.): 755-0240
5. Surety Information N/A
a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.): _____
6. Lender N/A
a) Name and address: _____
b) Phone No.: _____
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served N/A
a) Name and address: _____
b) Telephone No.: _____ 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: N/A
a) Name and address: _____
b) Telephone No.: _____ 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. Lester Scuff
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 9th day of February, 2009, by:
Lester Scuff as owner (type of authority, e.g. officer, trustee, attorney
fact) for Scuff's Inc. (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

Teresa Horne

Notary Seal or Stamp



-AND-

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.)