

Columbia County Building Permit Application

Revised 9-23-04

For Office Use Only Application # 0711-48 Date Received 11-18-07 By LH Permit # 26437
Application Approved by - Zoning Official _____ Date _____ Plans Examiner _____ Date _____
Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
Comments _____

Applicants Name ADAM PAGE Phone 386-752-7578
Address PO BOX 2166 - LAKE CITY, FL 32056
Owners Name DOUGLAS HAGLER Phone 386-752-1608
911 Address 569 SE ROSSI DR. - LAKE CITY, FL
Contractors Name ONEAL ROOFING CO. Phone 386-752-7578
Address PO BOX 2166 - LAKE CITY, FL 32056
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. - Progressive Energy
Property ID Number 12-45-17-08331-000 HX Estimated Cost of Construction \$43,000.00
Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____
Driving Directions GO OUT HWY 252 - (NEXT TO COLUMBIA HIGH) GO TO PRICE CREEK RD
(CR 245) TURN LEFT GO 1 MILE TO CR 245A - TURN RIGHT - FOLLOW
TO ROSSI DR. TURN RIGHT WILL BE 1ST DRIVEWAY ON LEFT - LOG HOME
Type of Construction RE-ROOF SFD Number of Existing Dwellings on Property _____
Total Acreage _____ Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____
Total Building Height _____ Number of Stories _____ Heated 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.

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 COMMENCEMENT 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.

Adam Page
Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 12th day of November 2007.
Personally known ✓ or Produced Identification _____

John W. Edge
Contractor Signature
Contractors License Number CCC 16346
Competency Card Number _____
NOTARY STAMP/SEAL

Cindy Edge
Notary Signature
Cindy Edge
Commission # DD308375
Expires July 20, 2008
Bonded-Troy Pain-Investments, Inc. 800-285-7018

Columbia County Property Appraiser

DB Last Updated: 10/22/2007

2007 Proposed Values

[Tax Record](#)
[Property Card](#)
[Interactive GIS Map](#)
[Print](#)

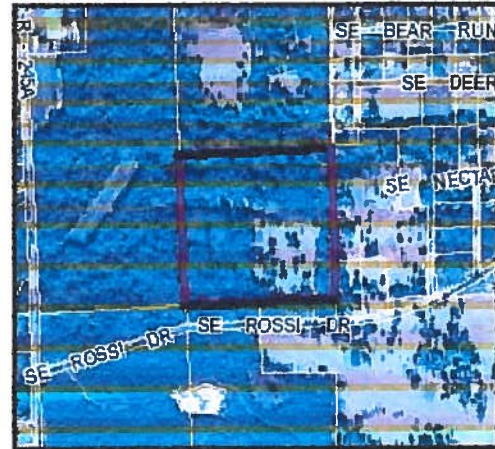
Parcel: 12-4S-17-08331-000 HX

Owner & Property Info

Search Result: 1 of 1

Owner's Name	HAGLER DOUGLAS S & LUCINDA		
Site Address	ROSSI		
Mailing Address	P O BOX 851 LAKE CITY, FL 32056		
Use Desc. (code)	IMPROVED A (005000)		
Neighborhood	12417.00	Tax District	3
UD Codes	MKTA04	Market Area	04
Total Land Area	40.000 ACRES		
Description	SW1/4 OF SW1/4. ORB 463-607, 625-272 (JOINS RE#13-4S-17- 08336-001) & WEST 13.37 FT OF SE1/4 OF SW1/4 (ORB 1103-1694 HAS WRONG SEC IN LEGAL), CWD 1110-1884		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	\$9,100.00
Ag Land Value	cnt: (1)	\$5,343.00
Building Value	cnt: (1)	\$236,022.00
XFOB Value	cnt: (6)	\$21,432.00
Total Appraised Value		\$271,897.00

Just Value	\$393,304.00
Class Value	\$271,897.00
Assessed Value	\$206,442.00
Exempt Value	(code: HX) \$25,000.00
Total Taxable Value	\$181,442.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
10/26/2006	1103/1694	WD	V	U	01	\$2,500.00
5/16/1987	625/272	WD	V	U		\$53,100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1997	Above Avg. (10)	3098	4790	\$236,022.00
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	1997	\$750.00	500.000	20 x 25 x 0	(.00)
0180	FPLC 1STRY	1997	\$2,300.00	1.000	0 x 0 x 0	(.00)
0280	POOL R/CON	2000	\$11,232.00	480.000	16 x 30 x 0	(.00)
0166	CONC,PAVMT	2000	\$1,710.00	1140.000	0 x 0 x 0	(.00)
0060	CARPORT F	2005	\$1,600.00	320.000	16 x 20 x 0	(.00)

Land Breakdown

--	--	--	--	--	--	--

>> Print as PDF <<

SW1/4 OF SW1/4. ORB 463-607, 625-272 (JOINS RE#13-4S-17- 08336-001) & WEST 13.37 FT OF SE1/4 OF SW1/4 (ORB 1103-1694				HAGLER DOUGLAS S & LUCINDA P O BOX 851 LAKE CITY, FL 32056				12-4S-17-08331-000				Columbia County 2007 R CARD 001 of 001 BY JEFF			
								PRINTED 10/22/2007 9:25 APPR 10/27/2005 DF							
BUSE 000100 SINGLE FAM				AE? Y		3098 HTD AREA		140.767 INDEX		12417.00 DIST 3		PUSE 005000 IMPROVED AG			
MOD 1 SFR BATH				3.50		3685 EFF AREA		70.384 E-RATE		100.000 INDX		STR 12- 4S- 17			
EXW 10 ABOVE AVG. FIXT						259365 RCN				1997 AYB		MKT AREA 04			
% 0000000000 BDRM				5		91.00 %GOOD		236,022 B BLDG VAL		1997 EYB		(PUD1			
RSTR 08 IRREGULAR RMS												AC 40.000			
RCVR 03 COMP SHNGL UNTS						FIELD CK:		HX AppYr 1998				NTCD			
% N/A C-W%						LOC: 569 ROSSI DR SE						APPR CD			
INTW 06 CUST PANEL HGHT												CNDO			
40% 05 DRYWALL PMTR						+--18+						SUBD			
FLOR 14 CARPET STYS				2.0		IFUS1997 +--18-+						BLK			
40% 12 HARDWOOD ECON						3 +--20-+ I						LOT			
HTTP 04 AIR DUCTED FUNC						0 2						MAP# 152			
A/C 03 CENTRAL SPCD						I 5						HX			
QUAL 07 07 DEPR 52						+-----56-----+						TXDT 003			
FNDN N/A UD-1 N/A								+--24-+							
SIZE 03 RECTANGLE UD-2 N/A						+--20+		+--24-+				----- BLDG TRAVERSE -----			
CEIL N/A UD-3 N/A						IUOP1997		1FCP1997				FSP1997=W18 S8 E18 N8\$			
ARCH N/A UD-4 N/A						+--18-+--20+--18-+--176FST1997						18 S30 FOP1997=S8 E56 N8 W56\$ E56 N26 FSP1			
FRME 01 NONE UD-5 N/A						+--18-+ IFSP1997-17+--24-+						997=N8CAN1997=E17 FCP1997=S2 E24 N18FST199			
KTCH 01 01 UD-6 N/A						IFSP1997 +--18-+CAN1997						7=N6 W24 S6 E24\$ W24 S16\$ N4 W17 S4\$ N4W18			
WNDO N/A UD-7 N/A						3BAS1997 I						S12 E18\$ W18 N12 UOP1997=N12 W20 S12			
CLAS N/A UD-8 N/A						0 2						E20\$ W20\$ PTR1997=N30 FUS1997=N25 W18 S8 W			
OCC N/A UD-9 N/A						I 6						20 N13 W18 S30 E56\$ S30\$.			
COND 03 03 % N/A						+-----56-----+						----- PERMITS -----			
SUB A-AREA % E-AREA SUB VALUE						+FOP1997-56-----+						NUMBER DESC AMT ISSUED			
FSP97 360 55 198 12681												16361 POOL 100 12/03/1999			
BAS97 1768 100 1768 113239												10928 SFR 470 3/25/1996			
FOP97 448 30 134 8582												----- SALE -----			
CAN97 68 30 20 1282												BOOK PAGE DATE PRICE			
FCP97 432 25 108 6918												1103 1694 10/26/2006 U V 2500			
FST97 144 55 79 5060												GRANTOR BRADLEY N & BETSY S DICKS			
UOP97 240 20 48 3075												GRANTEE HAGLER DOUGLAS S &			
FUS97 1330 100 1330 85185												625 272 5/16/1987 U V 53100			
TOTAL 4790 3685 236022												GRANTOR ROSSIE WILLIAM H &			
												GRANTEE HAGLER DOUGLAS S &			
-----EXTRA FEATURES-----															
AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE															
Y 1 0180 FPLC 1STRY 20 25 1 1997 1.00 1.000 UT 2300.000 2300.000 100.00 2,300															
Y 0166 CONC,PAVMT 20 25 1 1997 1.00 500.000 UT 1.500 1.500 100.00 750															
Y 0280 POOL R/CON 16 30 1 2000 1.00 480.000 SF 36.000 36.000 65.00 11,232															
Y 0166 CONC,PAVMT 16 30 1 2000 1.00 1140.000 SF 1.500 1.500 100.00 1,710															
Y 0060 CARPORT F 16 20 1 2005 1.00 320.000 SF 5.000 5.000 100.00 1,600															
Y 0169 FENCE/WOOD 48 8 1 2005 1.00 384.000 SF 10.000 10.000 100.00 3,840															
TOTAL 4790 3685 236022															

LAND DESC ZONE ROAD {UD1 {UD3 FRONT DEPTH FIELD CK:															
AE CODE TOPO UTIL {UD2 {UD4 BACK DT ADJUSTMENTS UNITS UT PRICE ADJ UT PR LAND VALUE															
Y 000100 SFR A-1 0003 0002 0003 1.00 1.00 1.00 1.00 1.000 AC 9100.000 9100.00 9,100															
N 005600 TIMBER 3 00 1.00 1.00 1.00 1.00 39.000 AC 137.000 137.00 5,343AG															
N 009910 MKT.VAL.AG A-1 0003 0002 0003 1.00 1.00 1.00 1.00 39.000 AC 3250.000 3250.00 126,750MK															
2007															



LAKE CITY, FLORIDA 32056

BY: _____

(386) 752-7578

FAX (386) 755-0240

D. DOUGLAS HAGLER

TO: PO BOX 851

LAKE CITY FL 32056

PHONE 752-1608	DATE 10/17/2007
JOB NAME / LOCATION 569 SE ROSSI DRIVE, LAKE CITY, FL	
JOB NUMBER	JOB PHONE

We hereby submit specifications and estimates for:

1. PREPARE ROOF FOR UNDERLAYMENT AND FLASHINGS. ALL DEBRIS WILL BE PROPERLY DISPOSED OF.
2. INSTALL NEW UNDERLAYMENT, NEW ROOF EDGE, NEW GABLE TRIM, NEW RIDGE VENT, NEW VALLEY METAL, NEW PIPE FLASHINGS, NEW CHIMNEY FLASHINGS, NEW CHIMNEY CRICKET, NEW WALL FLASHINGS, NEW PIPE FLASHINGS, NEW TRANSITION METAL FLASHING, AND NEW 24 GAUGE STANDING SEAM (CONCEALED FASTENERS) METAL ROOFING SYSTEM WITH KYNAR PAINT FINISH.

NOTES:

1. ANY BAD WOOD REPLACED SHALL BE CHARGED COST OF MATERIAL AND LABOR EXTRA.
2. ROOF SHALL BE GUARANTEED WATERTIGHT AND FREE OF DEFECTS FOR A PERIOD OF FIVE (5) YEARS FROM THE DATE OF COMPLETION.
3. ANY WORK INCURRED BY CHANGES IN BUILDING CODES MAY NOT BE COVERED IN THIS PROPOSAL.
4. IF ACCEPTED, PLEASE SIGN AND RETURN COPY.

We Propose hereby to furnish material and labor — complete in accordance with the above specifications, for the sum of:

Forty Three Thousand Eight Hundred Twenty Two and 00/100 Dollars dollars (\$) 43,822.00).

Payment to be made as follows:

100% UPON COMPLETION

GREG O'NEAL

All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Worker's Compensation insurance.

Authorized
Signature _____Note: This proposal may be
withdrawn by us if not accepted within _____ days.

Signature _____

Signature _____

Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance: _____

10/28/07

NOTICE OF COMMENCEMENT

State of FLORIDA
County of COLUMBIA

Inst: 200712025786 Date: 11/19/2007 Time: 1:20 PM
DC, P. DeWitt Cason, Columbia County Page 1 of 1

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: SW 1/4 OF SW 1/4 ORA 463-607
13-45-17-08336-001
2. General description of improvement: RE-ROOF
3. Owner information:
 - a. Name & Address: DOUGLAS HAGLER
PO BOX 851 - LAKE CITY, FL 32056
 - b. Interest In Property: 100%
 - c. Name & Address of fee simple titleholder (other than owner):

4. Contractor's Name & Address: ORIENTAL ROOFING CO.
PO BOX 2166 - LAKE CITY, FL 32056
 - a. Phone number: 386-752-7578
 - b. Fax number: 386-755-0240
5. Surety Information:
 - a. Name & Address: _____
 - b. Phone number: _____
 - c. Fax number: _____
 - d. Amount of Bond: \$ _____
6. Lender's Name & Address: _____
 - a. Phone number: _____
 - b. Fax number: _____
7. Person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by 713.13 (1) (a), 7 Florida Statutes:
Name & Address: _____
 - a. Phone number: _____
 - b. Fax number: _____
8. In addition to himself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

(signature of owner)

Sworn to and subscribed before me
this 8th day of November, 2007.

Notary Cindy Edge

Known Personally/ I.D. Shown FL Drivers License
H 246-177-57097-D

My commission expires: July 20, 2008



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