DATE 03/11/2005 Columbia Count	y Building Permit	PERMIT
This Permit Expires One APPLICANT MICHELE WILLINGHAM	Year From the Date of Issue PHONE 386.497.1722	000022899
ADDRESS RT. 2, BOX 407	The state of the s	FL 32054
OWNER MICHELE WILLINGHAM	PHONE 386.496.1722	
ADDRESS 179 SW LEONARD TERRACE	LAKE CITY	FL 32024
CONTRACTOR MICHELE WILLINGHAM	PHONE 386.496.1722	
LOCATION OF PROPERTY 90-W TO PINEMOUNT RD,T	L GO TO BARWICK,TL GO TO PARKER	e .
,T AND IT'S THE 3RD PROPI	ERTY ON L.(BLUE ROOF ON SFD)	
TYPE DEVELOPMENT ATTACHED SHOP	ESTIMATED COST OF CONSTRUCTION	34000.00
HEATED FLOOR AREA 680.00 TOTAL A	AREA680.00 HEIGHT13.00	STORIES 1
FOUNDATION CONC WALLS FRAMED	ROOF PITCH 4'12 FLOO	OR CONC
LAND USE & ZONING A-3	MAX. HEIGHT 35	
Minimum Set Back Requirments: STREET-FRONT 30.	00 REAR 25.00 SI	DE _25.00
NO. EX.D.U. 1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.	
PARCEL ID 08-4S-16-02815-004 SUBDIVIS	SION BARWICK	
LOT 3 BLOCK PHASE UNIT	TOTAL ACRES 1.41	
Culvert Permit No. Culvert Waiver Contractor's License N EXISTING 05-0176-E Driveway Connection Septic Tank Number LU & Zo	Jumber Applicant/Owner/Con Approved for Issuance	itractor N New Resident
COMMENTS: NOC ON FILE	Tipproved for Issuance	New Resident
	Check # or Cash	
COMMENTS: NOC ON FILE 1 FOOT ABOVE ROAD.		604
COMMENTS: NOC ON FILE 1 FOOT ABOVE ROAD.	Check # or Cash	
COMMENTS: NOC ON FILE 1 FOOT ABOVE ROAD. FOR BUILDING & ZON	Check # or Cash	604
COMMENTS: NOC ON FILE 1 FOOT ABOVE ROAD. FOR BUILDING & ZON Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab	Check # or Cash ING DEPARTMENT ONLY Monolithic date/app. by Sheathing/Nail	(footer/Slab) date/app. by
COMMENTS: NOC ON FILE 1 FOOT ABOVE ROAD. FOR BUILDING & ZON Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab date/app. by	Check # or Cash ING DEPARTMENT ONLY Monolithic date/app. by Sheathing/Nail date/app. by	(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.

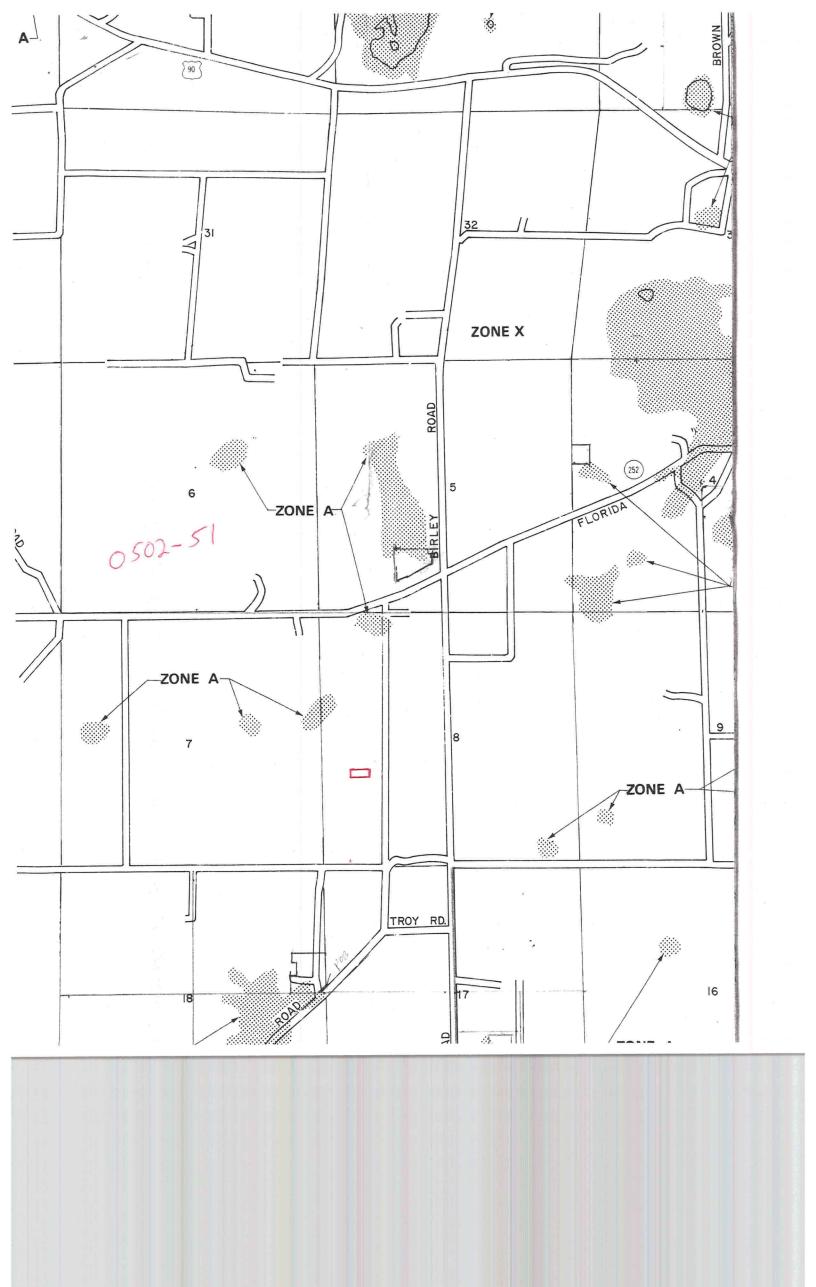
15	
For Office Use Only Application # 0502-5/ Date Receive	
Application Approved by - Zoning Official 62 Date 03 03	Plans Examiner <u>J7H ok</u> Date <u>2-21-05</u>
Flood Zone Development Permit Zoning	Land Use Plan Map Category
Comments	
Reperance 21418 House Permit - Farmed	A to Health Dept.
	719-7098
Applicants Name Michale LWillingham Forcest W	11(1) Ams Phone 386-496.1172
Address Rta Box 407 Lake Butter Pl 32054	
Owners Name Michael Willingham	Phone 386-496-1722
911 Address 199 SW Leonard Ter. Lake Cut	1, FZ
Contractors Name <u>Dumek</u>	Phone
Address	
Fee Simple Owner Name & Address	
Bonding Co. Name & Address	
Architect/Engineer Name & Address Freeman Design grp	16/1 nw madison St Solle 102 Lake City
Mortgage Lenders Name & Address	
Circle the correct power company – FL Power & Light – Clay Ele	c Suwannee Valley Elec Progressive Energy
Property ID Number <u>08 - 48 - 16 - 02815 - 004</u> Esti	mated Cost of Construction #10,000
Subdivision Name Barwick Subdivision	Lot 3 Block Unit Phase
Driving Directions 90-W TO PINE mount Rd, The Go	TO SANWICK (TL GO TO
PARCELTE, 3rd PROPERIN ON L. (BIL	IF ROOF IN EXISTING SED.
Type of Construction Whop Affactua Num	ber of Existing Dwellings on Property
Total Acreage Lot Size Do you need a - <u>Culvert I</u>	Permit or Culvert Waiver of Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 250	Side 34.6 Side 5 Rear 58.6.1
Total Building Height Number of Stories Heat	red Floor Area 678 Roof Pitch 412
Application is hereby made to obtain a permit to do work and instal	lations as indicated. I certify that no work or
installation has commenced prior to the issuance of a permit and the all laws regulating construction in this jurisdiction.	nat all work be performed to meet the standards of
OWNERS AFFIDAVIT: I hereby certify that all the foregoing information	tion is accurate and all work will be done in
compliance with all applicable laws and regulating construction and	
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEN	COMMENCMENT MAY RESULT IN YOU PAYING
LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF	COMMENCEMENT.
200 1 (Q) 00 -k	
Owner Builder or Agent (Including Contractor)	Contractor Signature
	Contractors License Number
	Competency Card NumberNOTARY STAMP/SEAL
	J STAINIF/SEAL
Sworn to (or affirmed) and subscribed before me this day of Febru & q 20_05.	LAURIE HODSON Y COMMISSION # DD 333503
Personally known or Produced Identification	Notary Signa Lire Bonded Thru Notary Public Underwriters
rersonally known or Produced Identification	Traction y Original Traction and Property Public Underwriters

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 08-49-16-02815-004

1.	Description of property: (legal description of the property and street address or 911 address)
	1 st 3 Sout A Pance Us
	- 1015 QCT: 1 4/4/9/14
2.	General description of improvement: Look Shop
3.	Owner Name & Address Michele L. Willingham Rt 2 Box 401
A	Name & Address of Fee Simple Course (if allow the
٠.	Name & Address of Fee Simple Owner (if other than owner): Lake Butter PL 32054
5.	Contractor Name Owner-Michele Willingham Phone Number 386-496-1722
•	Address R+2 Box 407 Lake Butlor FL 32054
6.	Surety Holders Name
	AddressInst:2005003817 Date:02/18/2005 Time:14:19
	Amount of BondDC,P. DeWitt Cason,Columbia County B:1038 P:1034
7.	Lender Name
	Address
8. se	Persons within the State of Florida designated by the Owner upon whom notices or other documents may be rved 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)
NC	TICE AS PER CHAPTER 713, Florida Statutes:
111	e owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.
	Sworn to (or affirmed) and subscribed before
	day of $\frac{7-18}{2}$, $\frac{20}{0.5}$
	Signature of Owner NOTARY STATES LAURIE HODSON MY COMMISSION # DD 333503 EXPIRES: June 28, 2008 Bonded Thru Notary Public Underwriters
	Signature of Notary
	- Granis or rectify





0502-57 STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 25-0176E

PART	II - SITE PLAN
Scale: Each block represents 5 feet and 1 inch = 50 feet.	Leonard Terr
Source Control of the	FPANGORY)
See AHACKED	
the fit outle	
1.59 &	(2)
	WELL EH!
	S SE EXIST ESS
	2 22 - 23 -
120	
PX ()	PORTE HOME OF TWELL
	CAUBILLE HOME GO FI WELL
	SEPA
not a language	\$ 159
Notes: MH not hooked in	
at inspection on	
2-22.04 5	
Site Plan submitted by: Malice & Wil	OCIOCACIO MANAMA
Signatur	re Title
	pproved DateDate
By Silli Thadd - +51	County Health Department
ALL CHANGES MUST BE APPROVE	D BY THE COUNTY HEALTH DEPARTMENT
DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used)	
(Stock Number: 5744-002-4015-6)	Page 2 of 3

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.

all applicable laws, ordinances, build	ling codes, and zoning regulations.
() Single Family Dwelling () Farm Outbuilding () New Construction NEW CO	TYPE OF CONSTRUCTION () Two-Family Residence () Other Addition, Alteration, Modification or other Improvement ONSTRUCTION OR IMPROVEMENT
for exemption from contractor ling	ng as an owner/builder. I agree to comply with all requirements
Signature & Willing	Date
I hereby certify that the above listed ov Florida Statutes ss 489.103(7).	FOR BUILDING USE ONLY wner/builder has been notified of the disclosure statement in
Date 2-18-05 Building Of	fficial/Representative Laurie La

27900 Reconnection

I Travis Saunders agree to let Randy Saunders handle any and all receiving of permits as needed for Clay Electric to turn my power on to my property.

Travis Saunders

____Mar.10,2005

First American Title Insurance Company

Parcel ID -03615-001

Schedule A (Continued)

Issuing Office File No.:

2004-786

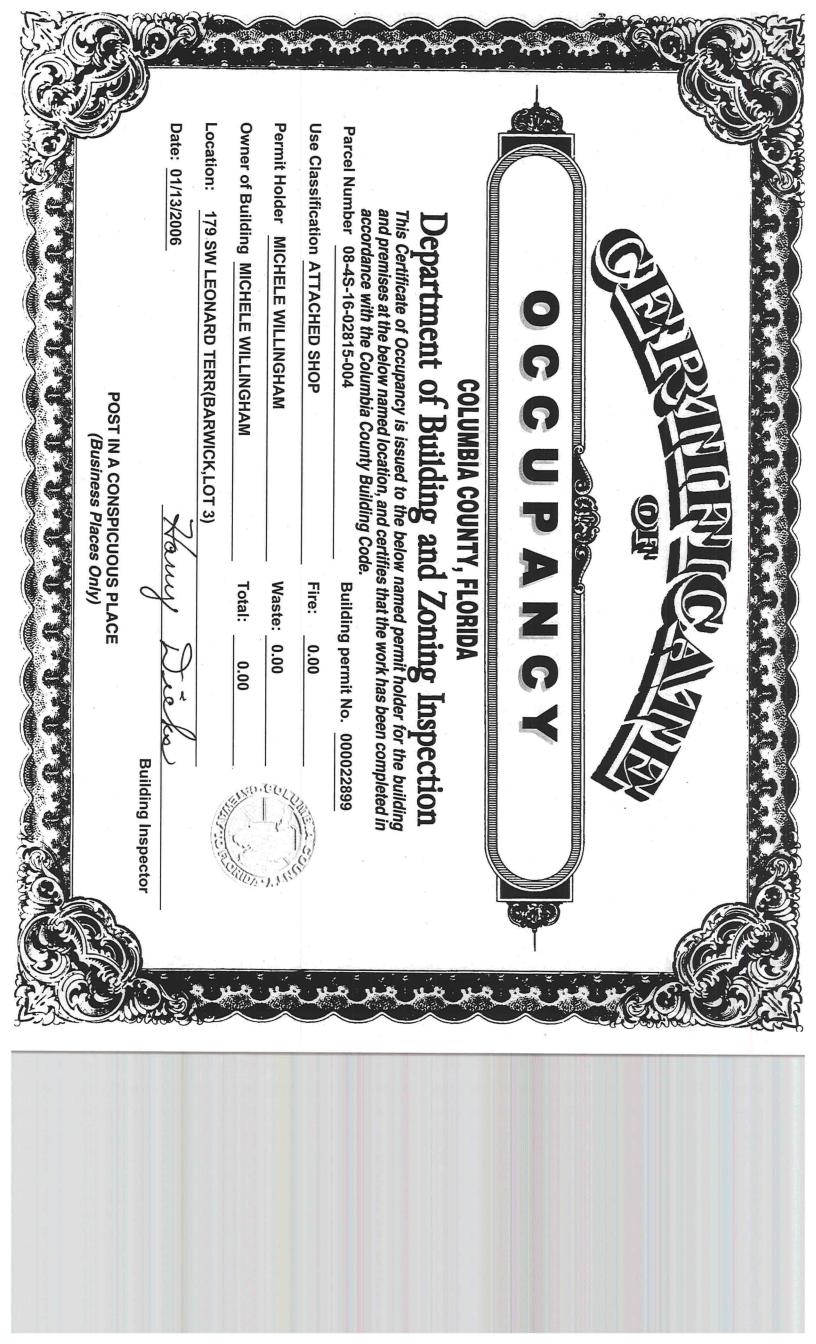
BEGIN AT THE NORTHEAST CORNER OF THE NORTHWEST 1/4 OF SOUTHEAST 1/4, SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND RUN THENCE SOUTH 00 DEG. 20 MIN. 57 SEC. EAST ALONG THE EAST LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4, 1327.13 FEET TO THE SOUTHEAST CORNER THEREOF; THENCE SOUTH 88 DEG. 24 MIN. 30 SEC. WEST ALONG THE SOUTH LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4 1323.35 FEET TO THE SOUTHWEST CORNER THEREOF; THENCE NORTH 00 DEG. 19 MIN. 13 SEC. WEST ALONG THE WEST LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4 660.00 FEET; THENCE NORTH 88 DEG. 24 MIN. 30 SEC. EAST 849.30 FEET; THENCE NORTH 00 DEG. 19 MIN. 13 SEC. WEST 666.52 FEET TO THE NORTH LINE OF SAID NORTHWEST 1/4 OF SOUTHEAST 1/4; THENCE NORTH 88 DEG. 19 MIN. 54 SEC. EAST ALONG SAID NORTH LINE 473.43 FEET TO THE POINT OF BEGINNING. LESS AND EXCEPT THE SOUTH 25 FEET THEREOF AND THE WEST 50 FEET OF THE SOUTH 660 FEET THEREOF FOR CATES ROAD, A COUNTY MAINTAINED GRADED ROAD.

LESS AND EXCEPT:

COMMENCE AT THE NORTHEAST CORNER OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4, SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, FOR A POINT OF BEGINNING, AND RUN THENCE SOUTH 00 DEG. 20 MIN. 57 SEC. EAST, ALONG THE EAST LINE OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SAID SECTION 14, 1301.62 FEET TO THE NORTHERLY MAINTAINED RIGHT OF WAY LINE OF SOUTHWEST BEAUFORD PLACE; THENCE SOUTH 88 DEG. 28 MIN. 41 SEC. WEST, ALONG THE SAID NORTHERLY RIGHT OF WAY LINE, 804.00 FEET; THENCE NORTH 00 DEG. 14 MIN. 18 SEC. WEST, 635.28 FEET; THENCE NORTH 88 DEG. 27 MIN. 33 SEC. EAST, 329.81 FEET; THENCE NORTH 00 DEG. 15 MIN. 11 SEC. WEST, 666.27 FEET TO THE INTERSECTION WITH THE NORTH LINE OF THE SOUTHEAST 1/4 OF SAID SECTION 14; THENCE NORTH 88 DEG. 28 MIN. 38 SEC. EAST, ALONG SAID NORTH LINE OF THE SOUTHEAST 1/4, 471.81 FEET TO THE POINT OF BEGINNING, BEING AND LYING IN THE NORTHWEST 1/4 OF SECTION 14, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.

755.0233 482 SW Beth DR. L.C. 32024

396 303-2259



Print Technician's Notice of Treatment Applicator Florida Pest Control & Chemical Co. Phone Gal. Time Address 179 Su Leonand Permit# Site Location Subdivision Date Name of Product Applied Block# AREAS TREATED Exterior of Foundation **Extension Walls Driveway Apron** Area Treated **Brick Veneer** Out Building Main Body Tub Trap/s Stoop/s # Porch/s # Patio/s # A/C Pad Walk/s # (Other) Remarks Lot#

Applicator - White · Permit File - Canary · Permit Holder - Pink

Notice of Treatment Quantified Applicator: Florida Pest Control & Chemical Co. (www.flapest.com) Address: Layer Colfy Phone Trail Doze City Lot # Block# Permit # 2 Address NF 544 Lease of Tent Lot # Block# Permit # 2 Address NF 544 Lease of Tent Dremise Imidacloprid 0.12% Premise Imidacloprid 0.12%
