



**BUILDING INSPECTION DIVISION
CITY OF JACKSONVILLE, FLORIDA**

BUILDING PERMIT B-13-583033.000

DATE ISSUED: 10/3/13

PERMIT FEE: \$718.59
DE MINIMIS: \$0.00
STATE FEE: \$18.41
TOTAL FEE: \$718.59

CONTRACTOR LICENSE: cbc1255550 - Shawn Starr

FOR: MARK STARKEY, JR Individual

D.B.A: Dreambuilder Custom Homes LLC

AT: 5128 COMMISSIONERS Drive

BASE PERMIT:

LOT LOT 179

CITY INSPECTOR: Smith, Milton Phone: 509-0024

SUBDIVISION: PABLO CREEK RESERVE PHASE 2 & 2A

PROJECT NAME: DREAMBUILDER 21/STARKEY RESIDE

PROJECT CONTACT: SHAWN STARR

USE: Single Family

New Building **UNITS:** 1

FRAME TYPE: Wood Frame

JOB COST: \$470000.00

DESCRIPTION: DETACHED SINGLE FAMILY HOME W/2 CAR GARAGE AND FRONT AND REAR PORCHES, NEW CONSTRUCTION

Private Provider: Above Slab CITY, Below Slab CITY, Elec CITY, Mech CITY, Plmb CITY

Dimensions - New Building

Stories 2, Enclosed Area 3737, Building Height 30.50, Unenclosed Area 340

Residential Single Family: Bedrooms 4, Full Baths 4, Half Baths 1

Codes FL Building Code - Year: 2010 FBC

FI Bldg Code - Type of Constructio V-B

Violations:

Required Tree Mitigation: Live Oak (4" min) = 4.000 inches, Non - Shade = 3.000 inches, Shade = 3.000 inches

PERMIT REQUIREMENTS

TO SCHEDULE AN INSPECTION CALL 630-1100

- OR -

<http://Buildinginspections.coj.net>

THE WORK DESCRIBED HEREIN SHALL BE ACCOMPLISHED IN ACCORDANCE WITH THE FLORIDA BUILDING CODE, LOCAL ZONING CODE, AND OTHER APPLICABLE REGULATIONS OF THE CITY OF JACKSONVILLE, STATE OF FLORIDA, AND FEDERAL GOVERNMENT. IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THE PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORD OF THE COUNTY (CITY), AND THERE MAY BE ADDITIONAL PERMITS REQUIRED. IF NO WORK IS DONE ON THE PERMIT DURING A SIX MONTH PERIOD, PERMIT MAY BECOME VOID. THE PERMIT HOLDER MUST CONTACT SUNSHINE ONE CALL (1-800-432-4770) PRIOR TO COMMENCING ANY EXCAVATION OR SITE CLEARING. A SEPARATE PERMIT IS REQUIRED TO WORK IN THE CITY'S RIGHT OF WAY OR EASEMENT, CONTACT DEVELOPMENT SERVICES AT 904-255-8310. THE PERMIT HOLDER SHALL DELIVER A COPY OF THIS PERMIT AND ALL FORMS RECEIVED WITH THIS PERMIT TO THE REAL PROPERTY OWNER. FOR A SILT FENCE INSPECTION CALL 904-255-7100.

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.

COPIES OF THIS PERMIT, A SET OF APPROVED PLANS (IF ANY), AND THE RECORDED NOTICE OF COMMENCEMENT (OR A NOTARIZED STATEMENT THAT THE NOTICE OF COMMENCEMENT HAS BEEN FILED FOR RECORDING ALONG WITH A CERTIFIED COPY THEREOF) MUST BE POSTED IN A CONSPICUOUS PLACE ON THE JOB SITE FOR VERIFICATION BY OUR INSPECTORS.

BELOW IS A LIST OF THE MINIMUM REQUIRED INSPECTIONS FOR THIS PERMIT ONLY. THERE MAY BE OTHER INSPECTION REQUIRED. FAILURE OF THIS LIST TO INCLUDE A REQUIRED INSPECTION DOES NOT GRANT YOU PERMISSION TO PROCEED WITHOUT OBTAINING INSPECTIONS REQUIRED BY THE FLORIDA BUILDING CODE. THIS LIST DOES NOT INCLUDE REQUIRED INSPECTIONS FOR SUBCONTRACTOR'S ASSOCIATED PERMITS. IF THIS IS A BUILDING PERMIT, THE LIST WILL INCLUDE A LISTING OF OTHER REQUIRED PERMITS. REQUIRED INSPECTIONS FOR THOSE PERMITS WILL BE LISTED ON THOSE INDIVIDUAL PERMITS. THE ORDER IN WHICH THE INSPECTIONS ARE LISTED ARE NOT NECESSARILY THE ORDER THEY NEED TO BE REQUESTED.

REQUIRED INSPECTION ARE MARKED WITH AN 'X'

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 02 DEEP FOUNDATION | <input type="checkbox"/> 21 SWIM POOL | <input type="checkbox"/> 52 PRE-DEMO SAFTEY | <input checked="" type="checkbox"/> 64 DRY IN (RES ONLY) |
| <input checked="" type="checkbox"/> 08 FOOTING | <input type="checkbox"/> 22 RATED WALL | <input type="checkbox"/> 57 OPEN FL FRAMING | <input checked="" type="checkbox"/> 09 FINAL |
| <input type="checkbox"/> 16 TIE BEAM | <input type="checkbox"/> 23 ROOF SHEATH | <input type="checkbox"/> 58 WALL SHEATH | <input type="checkbox"/> 45 FIRE SAFETY FINAL |
| <input checked="" type="checkbox"/> 17 LANDSCAPE | <input type="checkbox"/> 34 HANDICAP ACCESSIBLE | <input checked="" type="checkbox"/> 59 FILL CELL | <input type="checkbox"/> 15 CONSULTATION |
| <input checked="" type="checkbox"/> 18 FRAMING | <input checked="" type="checkbox"/> 46 LATHING | <input type="checkbox"/> 61 DRY WALL FASTENING | <input type="checkbox"/> 67 TCO/PCO OR PST |
| <input checked="" type="checkbox"/> 19 INSULATION | <input type="checkbox"/> 48 FINAL CURTAIN WALL | <input type="checkbox"/> 62 ELEVATED FLATWORK | <input type="checkbox"/> 03 TREE BARRICADE |
| <input checked="" type="checkbox"/> 20 SLAB | <input type="checkbox"/> 49 THRESHOLD INSP RPT | <input checked="" type="checkbox"/> 63 ROOF/WALL SHEATH | |

OTHER REQUIRED PERMITS

1. ELECTRICAL PERMIT, 2. MECHANICAL PERMIT, 3. PLUMBING PERMIT

NOTICE OF COMMENCEMENT

(PREPARE IN DUPLICATE)

Permit No. _____ Tax Folio No. 167766-3380
State of Florida County of Duval

To whom it may concern:

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with Section 713 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

Legal description of property being improved: 58-135 37-3S-28E .31 PABLO CREEK RESERVE PHASE 2 & 2A

Address of property being improved: 5128 Commissioners Dr, Jacksonville, FL 32224

General description of improvements: detached single family home with two car garage and front and rear porches, new construction

Owner Mark Steven Starkey Jr

Address 9734 TAPESTRY PARK CIR #287 JACKSONVILLE, FL 32246

Owner's interest in site of the improvement 100%

Fee Simple Titleholder (if other than owner) _____

Name _____

Address _____

Contractor Dreambuilder Custom Homes

Address 905 Mineral Creek Dr, Jacksonville, FL 32225

Phone No. (904) 612-6946

Fax No. (904) 677-7867

Surety (if any) _____

Address _____

Amount of bond \$ _____

Phone No. _____

Fax No. _____

Name and address of any person making a loan for the construction of the improvements.

Name First Federal Bank of Florida

Address 4705 US Hwy 90 West, Lake City, FL 32060

Phone No. (386) 755-0600

Fax No. _____

Name of person within the State of Florida, other than himself, designated by owner upon whom notices or other documents may be served:

Name Dreambuilder Custom Homes/Shawn Starr

Address 905 Mineral Creek Dr, Jacksonville, FL 32225

Phone No. (904) 612-6946

Fax No. (904) 677-7867

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06 (2) (b), Florida Statutes. (Fill in at Owner's option).

Name Dreambuilder Custom Homes/Shawn Starr

Address 905 Mineral Creek Dr, Jacksonville, FL 32225

Phone No. (904) 612-6946

Fax No. (904) 677-7867

Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

THIS SPACE FOR RECORDER'S USE ONLY

Doc # 2013226963, OR BK 16513 Page 1402,
Number Pages: 1
Recorded 09/03/2013 at 12:00 PM,
Ronnie Fussell CLERK CIRCUIT COURT DUVAL
COUNTY
RECORDING \$10.00

Signed: [Signature] OWNER
Before me this 30 day of September 2013 in the
County of Duval, State of Florida, has personally appeared
Mark Steven Starkey herein by
himself/ herself and affirms that all statements and declarations herein
are true and accurate

[Signature]
Notary Public at Large, State of Florida, County of Duval
My commission expires: November 17, 2016
Personally Known _____ or
Produced Identification Florida Drivers Lic

