



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

**BUILDING PERMIT B-17-829912.000**

**DATE ISSUED:** 2/15/17

**PERMIT FEE:** \$860.78

**DE MINIMIS:** \$0.00

**STATE FEE:** \$16.55

**TOTAL FEE:** \$860.78

**CONTRACTOR LICENSE:** cbc1255550 - Shawn Starr

**D.B.A:** Starr Custom Homes LLC

**FOR:** DLRose Holdings Individual

**AT:** 14303 COTTAGE LAKE Road

**BASE PERMIT:**

**LOT** LOT 97

**CITY INSPECTOR:** Turner, Richard Phone: 566-2743

**SUBDIVISION:** PABLO CREEK RESERVE PHASE 3

**PROJECT NAME:** DreamDesign 36

**PROJECT CONTACT:** Shawn Starr

**USE:** Single Family

New Building **UNITS:** 1

**FRAME TYPE:** Wood Frame

**JOB COST:** \$650000.00

**DESCRIPTION:** New construction, single family detached

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

Dimensions - New Building

Stories 2, Enclosed Area 5025, Building Height 34.00, Unenclosed Area 610

Residential Single Family: Bedrooms 5, Full Baths 4, Half Baths 1

**Codes FL Building Code - Year:** FBC 5th Edition

**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**

**1. METAL ROOF**

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 |
| <input 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 type="checkbox"/> 59 FILL CELL                   | <input type="checkbox"/> 15 CONSULTATION      |
| <input checked="" type="checkbox"/> 18 FRAMING    | <input 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, 4. ROOFING PERMIT