

HERNANDO COUNTY
BUILDING PERMIT APPLICATION

Want a Deficiency Report? **RECEIVED**
Please Provide Your FAX#:
Permitting Service FAX#:

116 9178

JUL 05 2005

HERNANDO COUNTY
DEVELOPMENT DEPT.

Key #: 858913
Date: 7/5/05

Describe work to be done: complete demolition

Valuation of work to be done: \$ 3490⁰⁰

Type of construction: _____ Frame: _____ CBS: _____ Other: Mobile

Legal description: Lot: _____ Block: _____ Subdivision: J Stachaffa Unit: _____

Address of job site: No. 16369 Street: Seminole Blvd City: Brooksville Hermando County

Directions to job site: HIN to 476E to Daly N to Osage to Seminole

Property owner: Mary Cobb Phone: _____
Address: 6099 Patricia PL City: Weeki Wachee State: FL Zip: 34607
Interest in property: _____

Name of fee simple titleholder (if Other Than Owner): N/A **FILE COPY**
Address: _____ City: _____ State: _____

Permitting Service Name: N/A Phone: _____ Contact Name: _____

Contractor: Larry Glasbrenner Phone: 352 796 7495
Address: 16178 Cherokee Rd City: Brooksville State: FL Zip: 34601
License Number: AAA 0037161 (State Certification or Hermando County # Only)

Sub-Contractor List (Complete as Necessary)

Electrical: N/A Phone: _____
License Number: _____ (State Certification or Hermando County # Only)

Plumbing: N/A Phone: _____
License Number: _____ (State Certification or Hermando County # Only)

Mechanical: N/A Phone: _____
License Number: _____ (State Certification or Hermando County # Only)

EXHIBIT
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Roofing: _____ Phone: _____
License Number: _____ (State Certification or Hernando County # Only)

Aluminum: N/A Phone: _____
License Number: _____ (State Certification or Hernando County # Only)

Contracting Company Name: <u>N/A</u>		
Address: _____		
City: _____	State: _____	Zip: _____
Architect/Engineer's name: <u>N/A</u> <u>116 91 78</u>		
Address: _____		
City: _____	State: _____	Zip: _____
Mortgage lender's name: <u>N/A</u>		
Address: _____		
City: _____	State: _____	Zip: _____

Application is hereby made to obtain a permit to do the 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 will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I certify that all of the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

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

FILE COPY

Rebecca Jesberger
Owner/Contractor or Authorized Agent

State of FL County of HERNANDO
The foregoing instrument was acknowledged before me this 5 day of July, 2005 by Rebecca Jesberger who is personally known to me or who (who has produced FTX as certification.

Diane E. Hunter Signature of Notary Public
Application Approved By: [Signature] Permit Representative



Diane E. Hunter
Commission # DD 049509
Expires Aug. 13, 2005
Bonded Thru
Atlantic Bonding Co., Inc

Hernando County Development Department

Brooksville Office:
788 Providence Boulevard
Brooksville, FL 34601-2893
Phone: (352)754-4050
FAX: (352)754-4416

Spring Hill Office
7431 Forest Oaks Boulevard
Spring Hill, FL 34606
Phone: (352)688-5050
FAX: (352)688-5056