

BUILDING PERMIT APPLICATION

EXHIBIT 1(b)

CITY OF ATLANTIC BEACH

800 Seminole Road, Atlantic Beach, FL 32233
Office (904) 247-5826 Fax (904) 247-5845

Job Address: 298 PINE STREET ATLANTIC BEACH, FL Permit Number:

Legal Description FENCE VINYL Parcel #
Valuation of Work \$ 2360.00 Floor Area of Proposed Work Sq.Ft. heated/cooled Sq.Ft. non-heated/cooled

Class of Work (circle one): New Addition Alteration Repair Move Demolition pool/spa window/door

Use of existing/proposed structure(s) (circle one): Commercial Residential
If an existing structure, is a fire sprinkler system installed? (Circle one): Yes No N/A

Florida Product Approval #
For multiple products use product approval form

Describe in detail the type of work to be performed: Putting in A FENCE ON SIDE OF HOUSE

Property Owner Information:

Name: KAREN BERNSTEIN Address: 298 PINE STREET
City ATLANTIC BEACH State FL Zip 32233 Phone 786 325 8963
E-Mail or Fax # (Optional)

Contractor Information: Pence

Company Name: PENCE PROPERTY MANAGEMENT Qualifying Agent: DANIEL PENCE
Address: 123 TO RUNNING RIVER RD S. City JACKSONVILLE State FL Zip 32225
Office Phone 904 535 3362 Job Site/ Contact Number SAME Fax #
State Certification/Registration #
Architect Name & Phone #
Engineer's Name & Phone #
Fee Simple Title Holder Name and Address
Bonding Company Name and Address
Mortgage Lender Name and Address

FILE COPY

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. This permit becomes null and void if work is not commenced within six (6) months, or if construction or work is suspended or abandoned for a period of six (6) months at any time after work is commenced. I understand that separate permits must be secured for Electrical Work, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, Tanks and Air Conditioners, etc.

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.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other federal, state, or local law regulating construction or the performance of construction.

Signature of Owner Karen Bernstein
Print Name Karen Bernstein

Signature of Contractor [Signature]
Print Name DANIEL L. PENCE

Before me this 11 Day of February, 2013

Before me this 11 Day of FEB, 2013

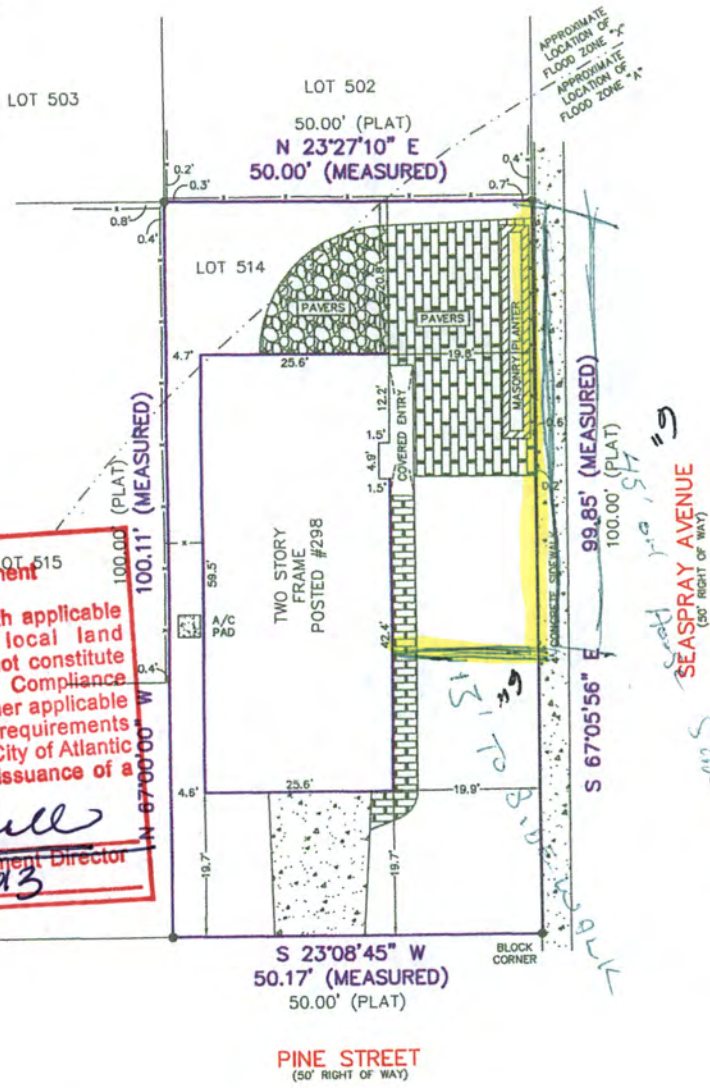
Notary Public MELISSA A. HART
MY COMMISSION # EE 861935
EXPIRES: January 1, 2017
Bonded Thru Notary Public Underwriters

Notary Public SHIRLEY L. GRAHAM
EXPIRES: February 14, 2014
Bonded Thru Notary Public Underwriters

Revised 10.24.12

MAP SHOWING BOUNDARY SURVEY OF
 LOT 514, SECTION 3 SALT AIR, AS RECORDED IN PLAT BOOK 10,
 PAGE 16, OF THE CURRENT PUBLIC RECORDS OF DUVAL COUNTY, FLORIDA.

CERTIFIED TO:
 FRANK BERNSTEIN & KAREN BERNSTEIN
 BANK OF ENGLAND, d/b/a ENG LENDING
 PONTE VEDRA TITLE, LLC/HATHAWAY & REYNOLDS, PA
 OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY



**City of Atlantic Beach
 Planning and Zoning Department**

This approval verifies compliance with applicable zoning, subdivision and other local land development regulations, but does not constitute approval for the issuance of permits. Compliance with Florida Building Code and all other applicable local, State and Federal permitting requirements must be verified by signature of the City of Atlantic Beach Building Official prior to the issuance of a Building Permit.

Approved By: *[Signature]*
 Community Development Director

Date: 04/19/2013

SEASPRAY AVENUE (50' RIGHT OF WAY)

SIDE OF SEASPRAY

15' TO

- LEGEND:**
- = SET 1/2" REBAR STAMPED PSM#6146
 - = FOUND 1/2" IRON PIPE NO IDENTIFICATION (UNLESS OTHERWISE NOTED)
 - = 4"x4" CONCRETE MONUMENT
 - A/C = AIR CONDITIONER
 - X- = FENCE
 - PC = POINT OF CURVATURE
 - PT = POINT OF TANGENCY
 - PRC = POINT OF REVERSE CURVATURE
 - PCC = POINT OF COMPOUND CURVATURE
 - ⊙ = CONCRETE



**Ray Thompson
 SURVEYING, Inc.**
 Going the DISTANCE for You
 4613 Phillips Highway, Suite 210
 Jacksonville, Florida 32207
 (Phone) 904-448-5125
 (Fax) 904-448-5178

PONTE VEDRA TITLE, L.L.C.

REVISIONS	
DATE	DESCRIPTION

JOB # 21849 DATE OF FIELD SURVEY: 12-3-2012 SCALE: 1" = 20'

NOTES:

- BEARINGS ARE BASED ON THE ASSUMED BEARING OF N 67°00'00" W ALONG THE SOUTHWESTERLY BOUNDARY LINE OF SUBJECT PARCEL.
- BY GRAPHIC PLOTTING ONLY THE CAPTIONED LANDS LIE WITHIN FLOOD ZONE AS SHOWN ON THE NATIONAL FLOOD INSURANCE MAP, X & A.
- DATED: APRIL 17, 1989, COMMUNITY NUMBER: 120075 PANEL 0001.D.
- THIS SURVEY REFLECTS ALL EASEMENTS & RIGHT OF WAY AS PER RECORDED PLAT &/OR TITLE COMMITMENT IF SUPPLIED, UNLESS OTHERWISE STATED, NO OTHER TITLE VERIFICATION HAS BEEN PERFORMED BY THE UNDERSIGNED.
- THIS SURVEY IS NOT VALID WITHOUT AN AUTHENTICATED ELECTRONIC SIGNATURE AND AUTHENTICATED ELECTRONIC SEAL.

CERTIFICATE

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 01G17-5, FLORIDA ADMINISTRATIVE CODE PURSUANT TO SECTION 472.02, FLORIDA STATUTES.

[Signature]
 RAY THOMPSON
 REGISTERED SURVEYOR AND MAPPER #6146 STATE OF FLORIDA
 LICENSE # 1255 No. 7469

LAND SURVEYS ○ CONSTRUCTION SURVEYS ○ SUBDIVISIONS ○



**City of Atlantic Beach
Building Department**
800 Seminole Road
Atlantic Beach, Florida 32233-5445
Phone (904) 247-5826 · Fax (904) 247-5845
E-mail: building-dept@coab.us
City web-site: http://www.coab.us

RECEIVED

FEB 19 2013

BY: _____

APPLICATION NUMBER
(To be assigned by the Building Department.)
13 - 2165
Date routed: 2/19/13

APPLICATION REVIEW AND TRACKING FORM

Property Address: 298 PINE ST
Applicant: PENCE PROPERTY MAINT
Project: 6 FT FENCE REPLACEMENT

Department review required	Yes	No
Building		
Planning & Zoning		
Tree Administrator		
Public Works		
Public Utilities		
Public Safety		
Fire Services		

Review fee \$ 0 Dept Signature [Signature]

Other Agency Review or Permit Required	Review or Receipt of Permit Verified By	Date
Florida Dept. of Environmental Protection		
Florida Dept. of Transportation		
St. Johns River Water Management District		
Army Corps of Engineers		
Division of Hotels and Restaurants		
Division of Alcoholic Beverages and Tobacco		
Other: _____		

APPLICATION STATUS

Reviewing Department (Circle one.) BUILDING PLANNING & ZONING TREE ADMIN. PUBLIC WORKS <u>[Signature]</u> PUBLIC UTILITIES <u>2-25-13</u> PUBLIC SAFETY FIRE SERVICES	First Review: <input checked="" type="checkbox"/> Approved. <input type="checkbox"/> Denied. Comments: Reviewed by: <u>[Signature]</u> Date: <u>2-25-13</u>
Second Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: Reviewed by: _____ Date: _____	
Third Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: Reviewed by: _____ Date: _____	

RECEIVED

FEB 19 2013

BY: _____



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Building Department**
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Phone (904) 247-5826 · Fax (904) 247-5845
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APPLICATION NUMBER
(To be assigned by the Building Department.)
13-2165
Date routed: 2/19/13

APPLICATION REVIEW AND TRACKING FORM

Property Address: 298 PINE ST
Applicant: PENCE Property Maint
Project: WFT fence REPLACEMENT

Department review required	Yes	No
Building		
Planning & Zoning		
Tree Administrator		
Public Works		
Public Utilities		
Public Safety		
Fire Services		

Review fee \$ 0 Dept Signature M

Other Agency Review or Permit Required	Review or Receipt of Permit Verified By	Date
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St. Johns River Water Management District		
Army Corps of Engineers		
Division of Hotels and Restaurants		
Division of Alcoholic Beverages and Tobacco		
Other: _____		

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Reviewing Department (Circle one.) BUILDING PLANNING & ZONING TREE ADMIN. PUBLIC WORKS PUBLIC UTILITIES PUBLIC SAFETY FIRE SERVICES	First Review: <input checked="" type="checkbox"/> Approved. <input type="checkbox"/> Denied. Comments: <u>P- 16/16/13</u> Reviewed by: <u>[Signature]</u> Date: <u>2/22/13</u>
	Second Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: Reviewed by: _____ Date: _____
	Third Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: Reviewed by: _____ Date: _____



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APPLICATION NUMBER		
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<u>13 - 2165</u>		
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APPLICATION REVIEW AND TRACKING FORM

Property Address: 298 PINE ST
 Applicant: PENCE Property Maint
 Project: W/F fence REPLACEMENT

Department review required	Yes	No
Building		
Planning & Zoning	✓	
Tree Administrator		
Public Works		
Public Utilities		
Public Safety		
Fire Services		

Review fee \$ _____ Dept Signature _____

Other Agency Review or Permit Required	Review or Receipt of Permit Verified By	Date
Florida Dept. of Environmental Protection		
Florida Dept. of Transportation		
St. Johns River Water Management District		
Army Corps of Engineers		
Division of Hotels and Restaurants		
Division of Alcoholic Beverages and Tobacco		
Other: _____		

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Reviewing Department (Circle one.) BUILDING PLANNING & ZONING TREE ADMIN. PUBLIC WORKS PUBLIC UTILITIES PUBLIC SAFETY FIRE SERVICES	First Review: <input checked="" type="checkbox"/> Approved. <input checked="" type="checkbox"/> Denied. Comments: _____ Reviewed by: <u>Erika Hall</u> Date: <u>02/19/2013</u>
	Second Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: _____ Reviewed by: _____ Date: _____
	Third Review: <input type="checkbox"/> Approved as revised. <input type="checkbox"/> Denied. Comments: _____ Reviewed by: _____ Date: _____