

DEPARTMENT OF GROWTH MANAGEMENT

205 North Marion Avenue Lake City, Florida 32055 Telephone: (386) 752-2031

growthmanagement@lcfla.com

COA35 -02

USE THIS FORM TO

Apply for approval for projects located within historic districts. Projects may require either a Agency-level review or a Staff-level review.

Once application is submitted it will be reviewed for completeness. Once verified complete the applicant will be notified.

Type of Resiew	Reviewed By	Date
Certificate of Appropriatenes s (COA): Staff Review		
Certificate of Appropriatenes s (COA); HPA Review — Single Family Structure or its Accessory Structure		
Certificate of Appropriatures s (COA): HPA Review All Other Structures		
After-the-Fact Certificate of Appropriationes s (COA); if work begun prior to issuance of a COA		

BASIS FOR REVIEW

All applications, whether Staff or HPA review, are reviewed for consistency with the City of Lake City Comprehensive Plan, Land Development Code, and applicable guidelines such as the Guidelines for the Historic Districts are based on the U.S. Secretary of the Interior's Standards for Rehabilitation.

Application

Meeting Date

Historic Preservation Agent

Dec 01

2022

Jan

04

2023

2023

Feb

07

2023

2023

Mar

07

2023

2023

Apr

04

2023

2023

May

02

2023

2023

Jun

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Jul

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Aug

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Sep

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Oct

03

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Nov

07

2023

2023

Dec

05

2023

HISTORIC PRESERVATION AGENCY (HPA)

Certificate of Appropriateness (COA) Application

	PROJECT TYPE			
	□ New Construction □ Addition □ Demolition □ Fence □ Paint			
	☐ Repair ☐ Relocation ☐ Re-Roof/Roof-Over ☐ SignShed☐ Garage			
	Classification of	f Work (see LDR 10.11.3)		
	Routine Maintenance Minor Work Major Work			
	APPROVAL TYPE: Staff Approval Board Approval: Conceptual or Final			
	PROPERTY INFORMATION: Property information can be found at the Columbia County Property Appraiser's Website			
	Historic District: Lake Isabella Historical Residential District Downtown Historical District			
	Site Address: 227 SW COLUMBIA PAVE			
	Parcel ID #(s) 00-00-00-12105-000 (41200)			
	OWNER OF RECORD As recorded with the Columbia County Property Appraiser	APPLICANT OR AGENT If other than owner. If an agent will be representing the owner, on Owner's Authorization for Agent Representation form must be included		
	Owner(s) Name GYCGOYU LONO	Applicant Name		
	Company (if applicable)	Company (if applicable)		
	Street Address 227 SW COlumbia Ave	Street Address 1014 Paanaina Bud.		
	LAKE CITY, FL 32025	Ovanal Park, FL 32005		
	Telephone Number (520) 221 - 3698	Telephone Number		
	KONDAYCADYU OZWEGYYYOU	COM LOYEU E VAUCOVO)		
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IMPORTANT NOTES

PRE-APPLICATION MEETING

To guide you through the process and to ensure that your application is properly processed, you'll need to meet with the Planner prior to submitting your application. This should be done prior to your anticipated submittal date to allow time for review.

Staff approval applications are accepted on a rolling basis and are generally completed within 10 business days. Please note that projects can only begin after receiving a Certificate of Appropriateness (COA) and a building permit (if required).

CONCEPTUAL APPROVALS

Conceptual approvals are provided by the HPA as a courtesy to the applicant in an effort to allow comment from the Historic Preservation Agency during the conceptual design process. The HPA will provide the applicant with feedback and guidance relating to the proposal. In all cases, the applicant must return to the HPA to seek final approval of their projects.

APPLICATION REQUIREMENTS

- A complete/ signed application. (If all requirements are not submitted it could delay your approval);
- ☐ Proof of Ownership (copy of deed or tax statement);
- ☐ A current survey of the property, for new construction and any change to existing footprint. (no older than two years);
- ☐ 1 digital set of elevations & plans (to scale);
- ☐ Photographs:
- Any additional backup materials, as necessary;
- ☐ If applying as an agent, Owner's Authorization for Agent Representation form must be signed/notarized and submitted as part of the application;
- □ For window replacement, a Window Survey must be completed.

PROJECT DESCRIPTION

DESCRIBE THE PROPOSED PROJECT AND MATERIALS.

Describe the proposed project in terms of size, affected architectural elements, materials, and relationship to the existing structure(s).

Tear Off metal shingles and replace with Owens Corning Tru clet auration only black Prenifectural shingles.

Replace any deck boards that are needed.

List proposed materials:

Project Scope	Manufacturer	Product Description	Color (Name/Number)
Exterior Fabric			
Doors			
Windows			
Roofing	corning	tru action	PLIOUSY-RIQ
Fascia/Trim	,		
Foundation		ing the second	
Shutters			
Porch/Deck	4	and a second	0.90
Fencing			
Driveways/Sidewalks		THE THE	
Signage			
Other	1		

PLEASE SUBMIT ALL PRODUCT BROCHURES, PAINT COLOR SAMPLES, AND MATERIAL SAMPLES WITH YOUR APPLICATION.

DID YOU REMEMBER

Review the Historic District Application Checklist (Article 10 LDR) to ensure you are including all required materials. If all requirements are not submitted, it will delay your approval.

Review the applicable Guidelines (Article 10 LDR)

A pre-application meeting is required before a final application for HPA Review. (Please call 386-752-2031 to schedule an appointment)

Please see the City of Lake City Land Development Regulations for detailed information.

Historic Preservation Districts maps are located on the city web site (www.lcfla.org)

Historic Preservation Agency can be found in the LDR Article 10.

Variances can be found in the LDR Article 11

The Land Development Regulations can be located on the city web site (www.lcfla.org)

APPEALS

Agency Decisions – Persons with standing, as listed in LDR Article 10, Section 10.11.6, may appeal a decision of the HPA, as outlined in Article 11, Section 11.1.4

Administrative Decisions – Persons with standing, as listed in LDR Article 10. Section 10.11.6, may appeal a decision of the Administrator, as outlined in Article 10. Section 10.11.5.

DEMOLITIONS (if applicable)

Please identify any unique qualities of historic and/or architectural significance, the prevalence of these features within the region, city, or neighborhood, and feasibility of reproducing such a building, structure, or object.

Discuss measures taken to save the building structure/object from collapse. Also, address whether it is capable of earning a reasonable economic return on its value.

RELOCATIONS (if applicable)

For relocations, address the context of the proposed future site and proposed measures to protect the physical integrity of the building.

Additional criteria for relocations and demolitions: Please describe the future planned use of the subject property once vacated and its effect on the historical context.

MODIFICATION OF EXISTING ZONING REQUIREMENTS (If Applicable)

Any change shall be based on competent demonstration by the petitioner of Article 4 of the Land Development Code.

Modification of dimensional requirements. To facilitate new construction, redevelopment, rehabilitation, or relocation of buildings or structures in historic districts or individually listed on the local register, the Administrator or the appropriate board within the development review process may determine dimensional requirements such as front, side, and rear setbacks, building height, separation between buildings, floor area ratios, and maximum lot coverage for buildings and structures based on historic development patterns. Any change shall be based on competent demonstration by the petitioner of the following:

- a. The proposed development will not affect the public safety, health, or welfare of abutting property owners or the district;
- b. The proposed change is consistent with historic development, design patterns or themes in the historic district. Such patterns may include reduced front, rear, and side yard setbacks, maximum lot coverage and large floor area ratios;
- c. The proposal reflects a particular theme or design pattern that will advance the development pattern of the historic district; and
- d. The proposed complies with utility, stormwater, access requirements, and other requirements related to site design in the Land Development Code.

Where the proposed modification would encroach into a side or rear yard setback that adjoins an existing lot, notice shall be provided to the adjacent property owner. Staff or the appropriate reviewing board will document the basis for its decision. If staff makes the decision, it will provide a written determination on the complete modification request within 21 calendar days of receiving the request. If the adjacent property owner objects to the encroachment in writing within 16 calendar days of the date from which the notice was mailed, the request shall be referred to the Board of Adjustment, which shall review the request using the same standards in this section used by staff. If the decision is to be made by a board, the board shall hear the objection of the adjacent property owner as part of its public hearing. The remainder of the requirements, regulations and procedures set forth in this chapter shall remain applicable.

Modification of building code requirements. Structures and buildings listed individually on the local register or deemed contributing to the character of a district listed on the local register shall be deemed historic and entitled to modified enforcement of the standard codes where appropriate.

Please describe the requested zoning modification, addressing a through d above:

The requested modification will change the following zoning or building requirement in this manner:

(select only those that apply)	Required	Existing	Proposed
Front, Side, or Rear building Setback Lines			
Building Height			
Building Separation			
Floor Area Ratio (FAR)			
Maximum Lot Coverage			

CERTIFICATION

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures and have read and understand the following:

- 1. I/We hereby attest to the fact that the above supplied property address(es), parcel number(s) and legal description(s) is (are) the true and proper identification of the area of this petition.
- 2. I/We authorize staff from the Department of Growth Management to enter onto the property in question during regular city business hours in order to take photos which will be placed in the permanent file.
- 3. I/We understand that the COA review time period will not commence until the application is deemed complete by staff and may take up to 10 days to process. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date.
- 4. I/We understand that, for Agency review cases, an agenda and staff report will be available on the City's website approximately one week before the Historic Preservation Agency meeting.
- 5. I/We understand that the Historic Preservation Agency meetings are conducted in a quasi-judicial hearing and as such, exparte communications are prohibited (Communication about your project with a Historic Preservation Agency member).
- 6. I/We understand that the approval of this application by the Historic Preservation Agency or staff in no way constitutes approval of a Building Permit for construction from the City of Lake City Growth Management.
- 7. I/We understand that all changes to the approved scope of work stated in a COA have to be approved by the HPA before work commences on those changes. There will be no charge for a revision to a COA. Making changes that have not been approved can result in a Stop Work Order being placed on the entire project.
- 8. I/We understand that any decision of the HPA may be appealed to the City Council. A person with standing, as described in LDR Article 10, Section 10.11.6, may file a petition to appeal and shall be presented within thirty (30) days after the decision of the HPA; otherwise the decision of the HPA will be final.

9. I/We understand that Certificates of Appropriateness are only valid for on	e (1) year from issuance.
Applicant (Signature)	111312024 Date
Clark Brigas	
Applicant (Print)	

Please submit this application And all required supporting	TO BE COMPLETED BY CITY ADMINISTRATOR		Da	ate Received 3/25	Received By:		
Materials via email to: growthmanagement@lcfla.com	COA 25-02			Staff Approval			
growthmanagementateria.com	Zor	Zoning: (R)			Single Family Structure or its Accessory Structure		
Once the application is received and deemed complete, the applicant will be notified as to whether this will be a staff review or HPA review.	Contributing] Yes	0	Multi-Family requiring HPA approval			
	Pre-Conference	/es	0 [After-The-Fact Certificate of Appropriateness			
	Application Complete	es	0				
	Request for Modification of Setbacks	es	0				



GROWTH MANAGEMENT DEPARTMENT 205 North Marion Ave. Lake City, FL 32055

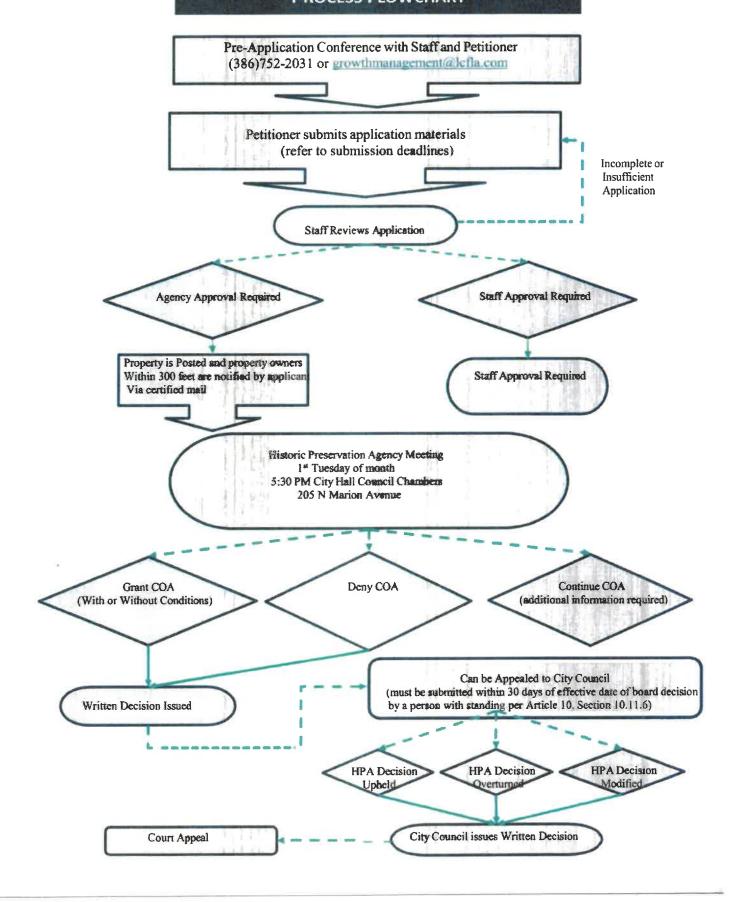
Phone: 386-719-5750

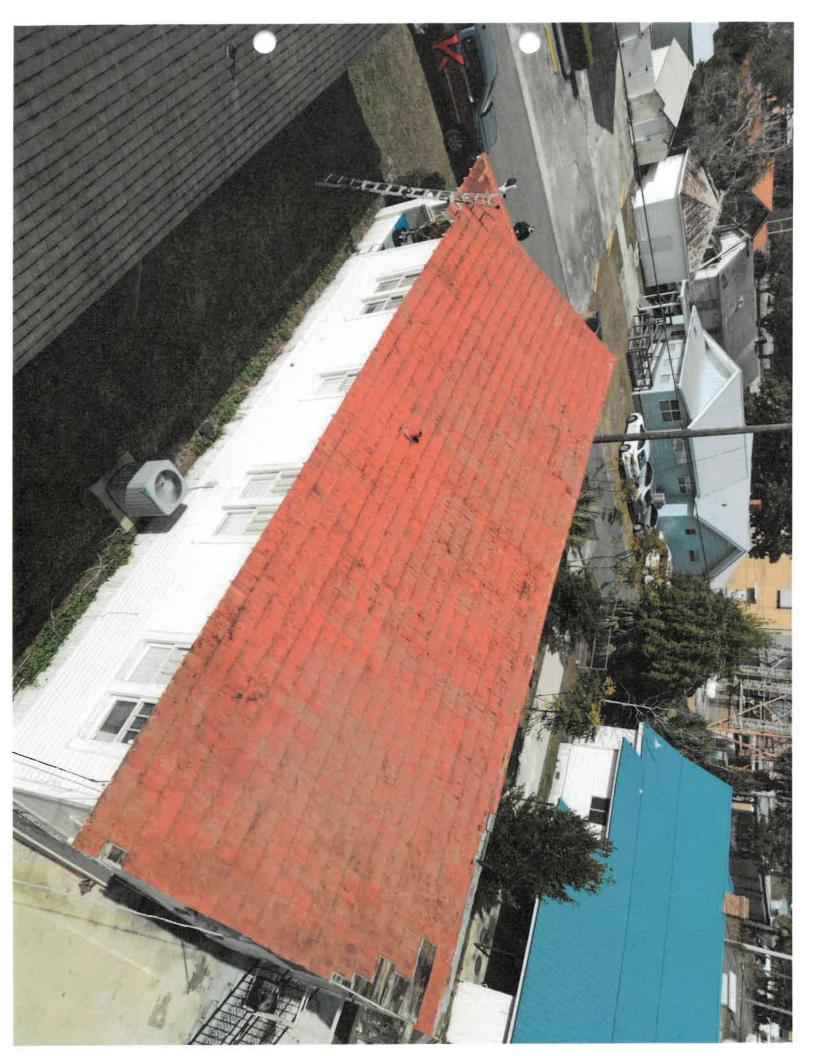
F-mail: growthmanagement/a lefla.com

AGENT AUTHORIZATION FORM

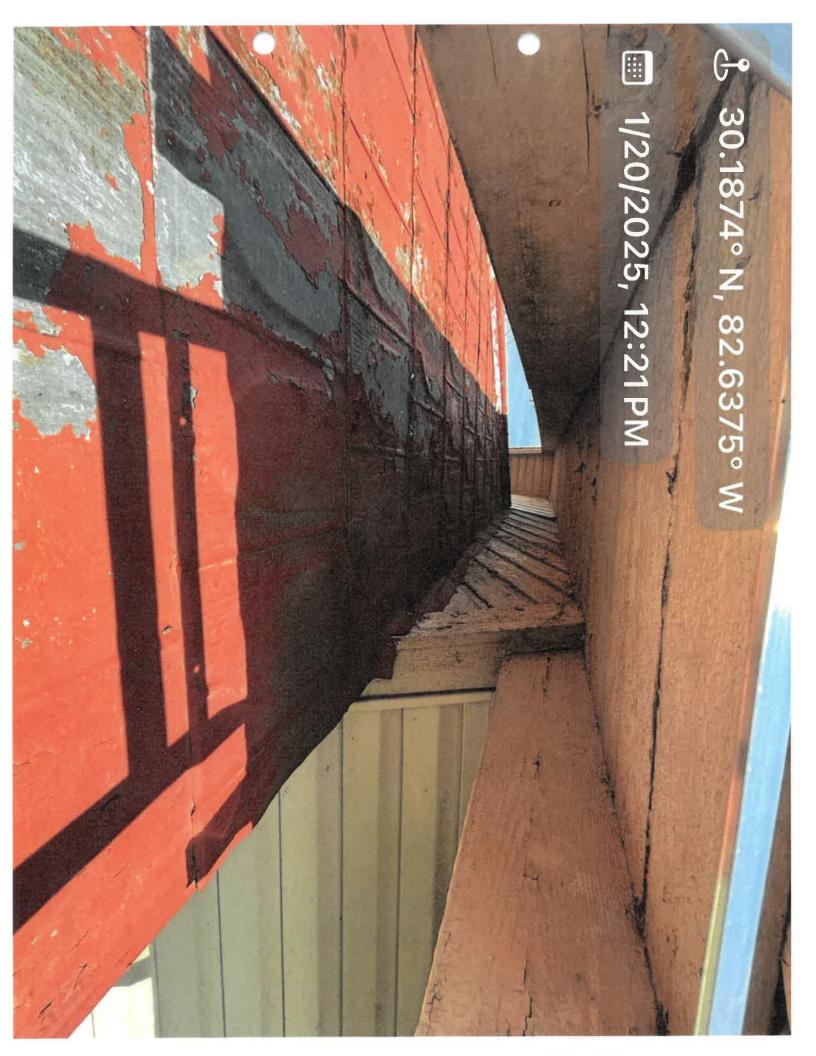
. Gregory kolo	(owner name), owner of property parcel			
	(4)200) (parcel number), do certify that			
	m is/are contracted/hired by me, the owner, or, is an officer of the tutes Chapter 468, and the said person(s) is/are authorized to matters relating to this parcel.			
Printed Name of Person Authorized	Signatur of Authorized Person			
1. CHAYK bridgs (knowing)	1. CLYLMY			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
I, the owner, realize that I am responsible for all agreements my duly authorized agent agrees with, and I am fully responsible for compliance with all Florida Statutes. City Codes, and Land Development Regulations pertaining to this parcel.				
notify this department in writing of the changes a	is are no longer agents, employee(s), or officer(s), you must and submit a new letter of authorization form, which will y allow unauthorized persons to use your name and/or license			
Owner Signature (Notarized)	Date /17-2025			
NOTARY INFORMATION: STATE OF: HCLTOYOL COUNTY OF:	Cochise			
The above person, whose name is <u>Greco</u> appeared before me and is known by me or has (type of I.D.) <u>AZ driver licerse</u> on	produced identification _			
NOTARYS'SIGNATURE	Spal/Siabes LIE A BIELAS			
	NOTARY PUBLIC - ARIZONA COCHISE COUNTY COMMISSION # 661147 MY COMMISSION EXPIRES DECEMBER 14, 2027			

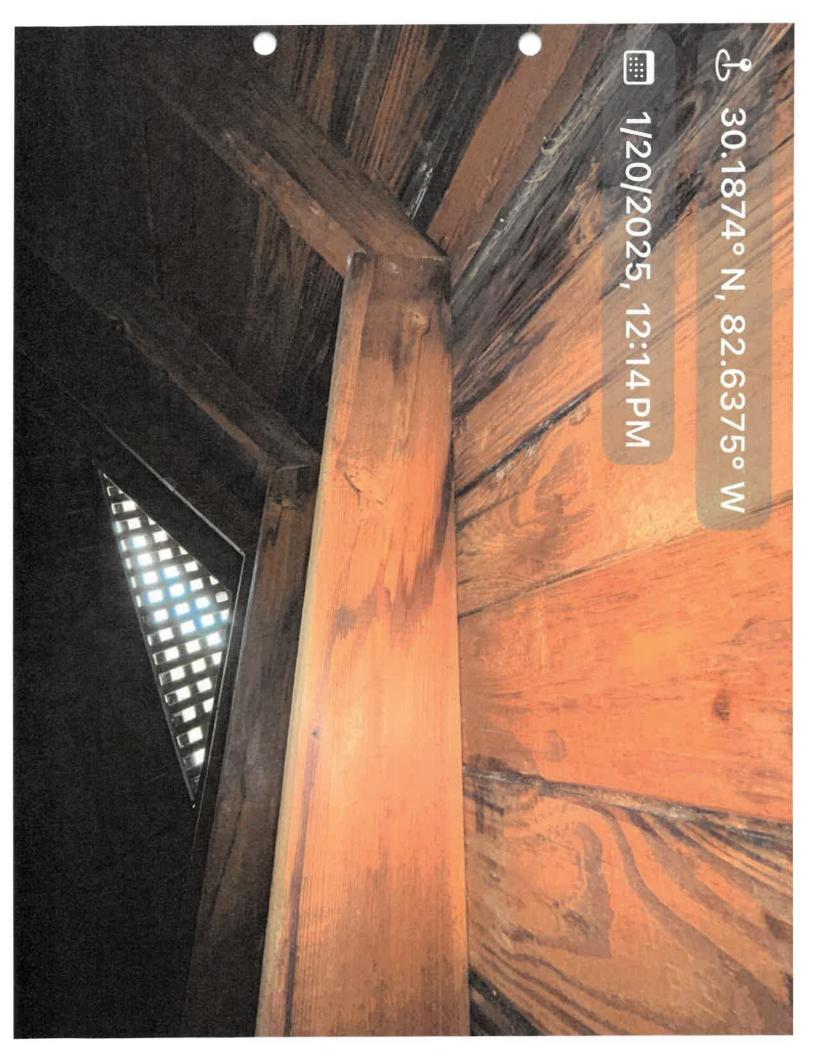
CERTIFICATE OF APPROPRIATENESS PROCESS FLOWCHART

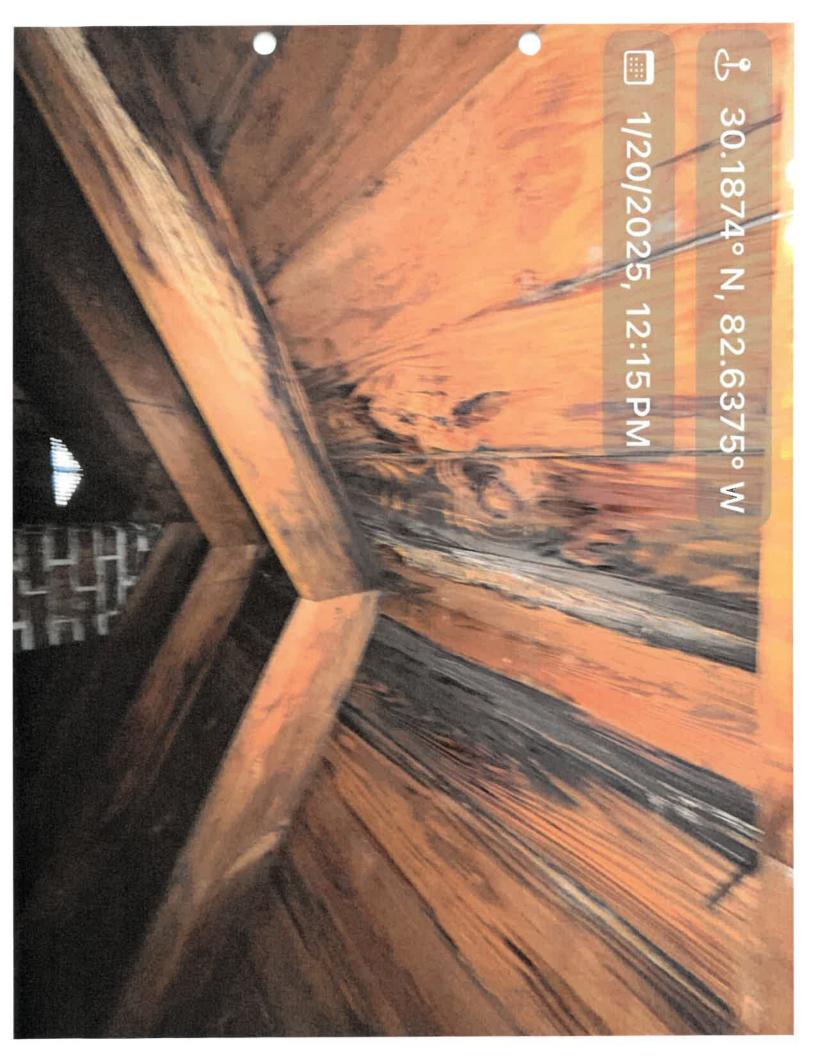


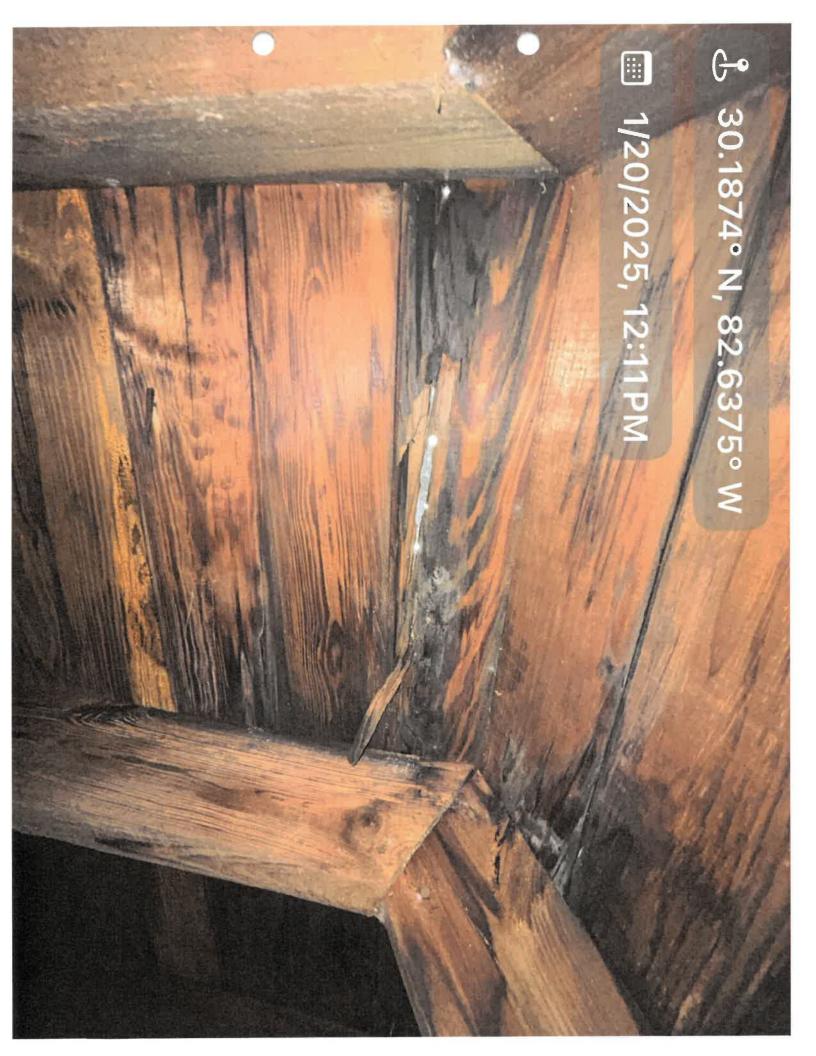


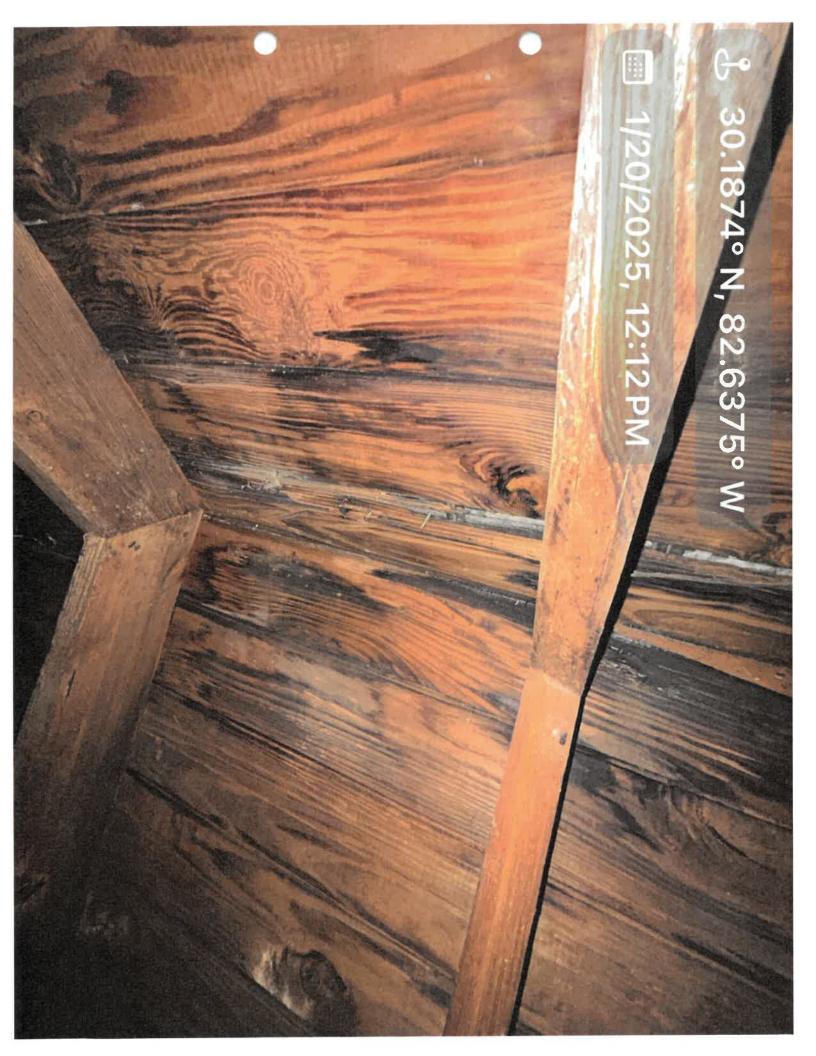


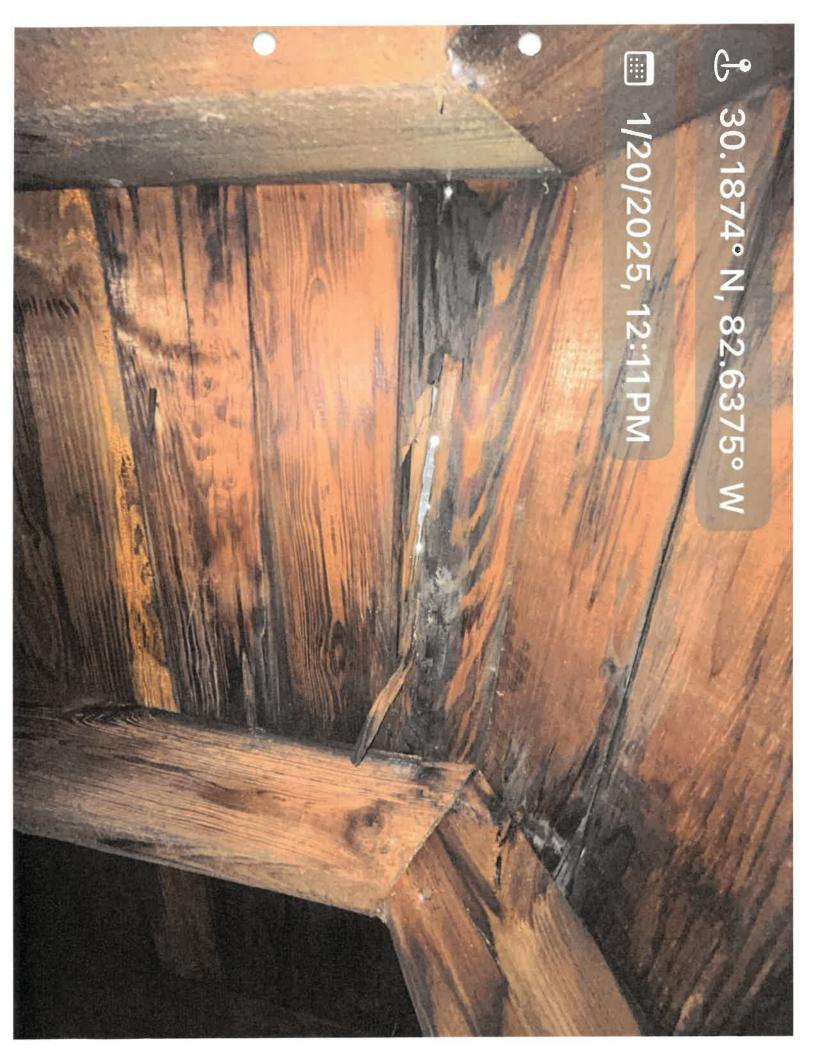


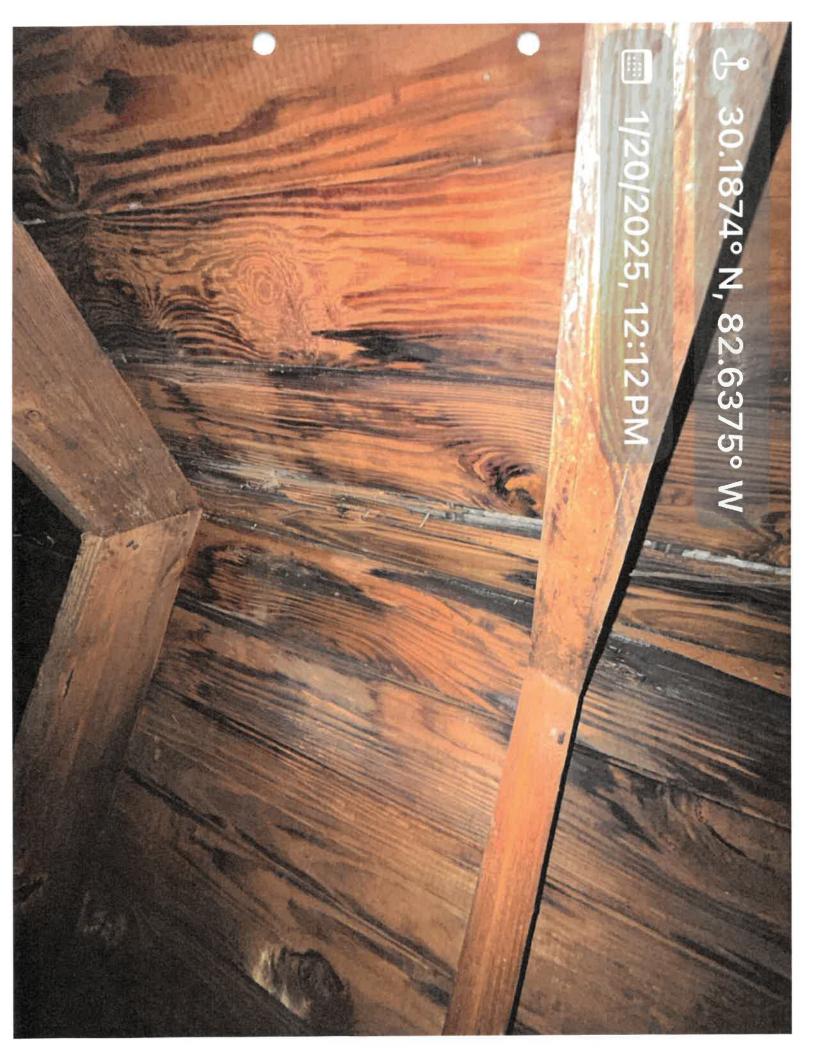


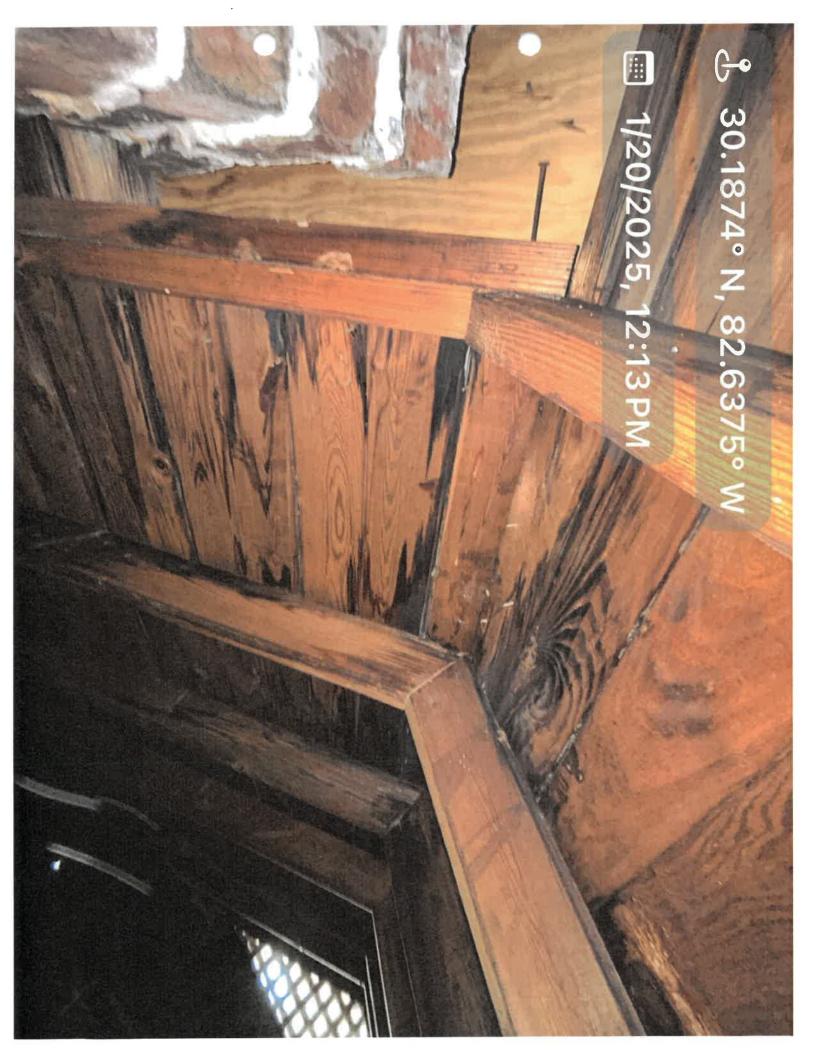


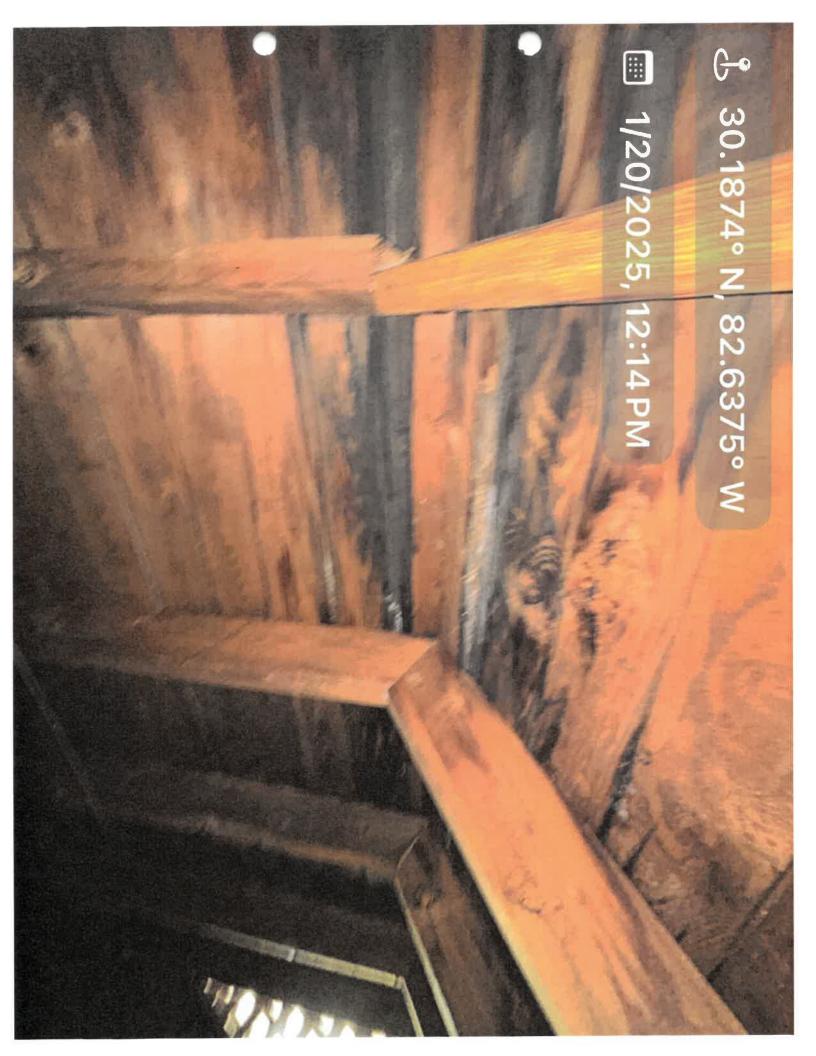


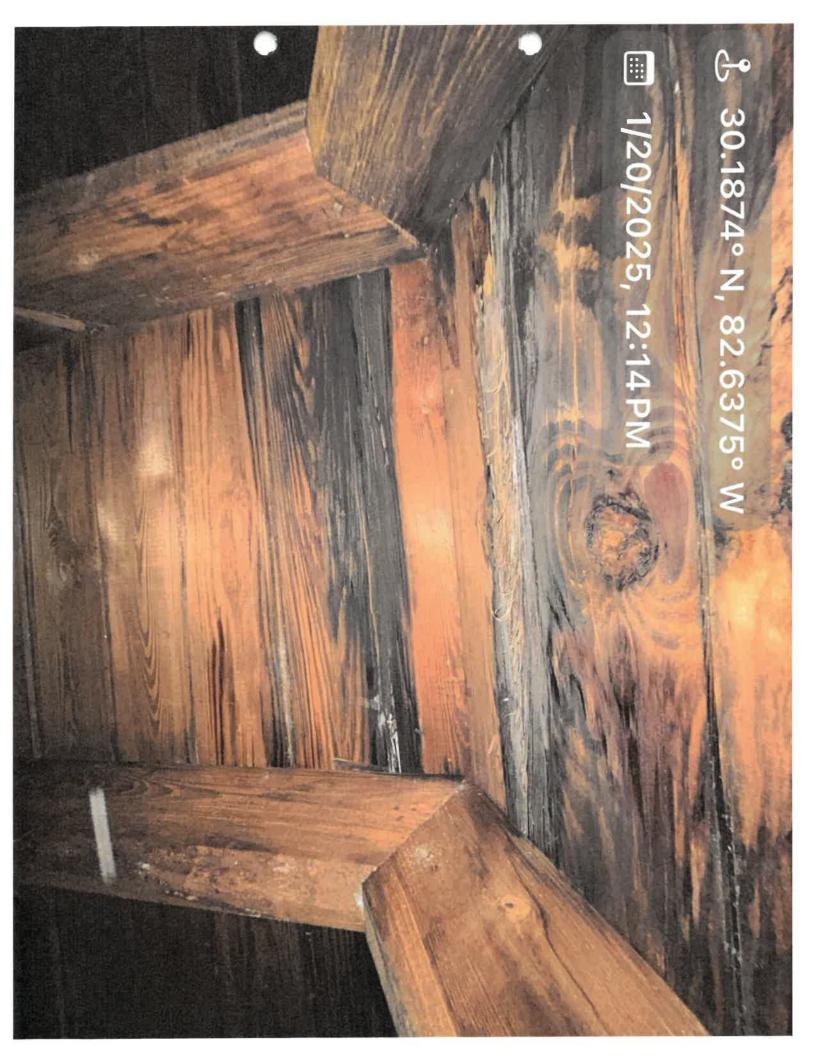










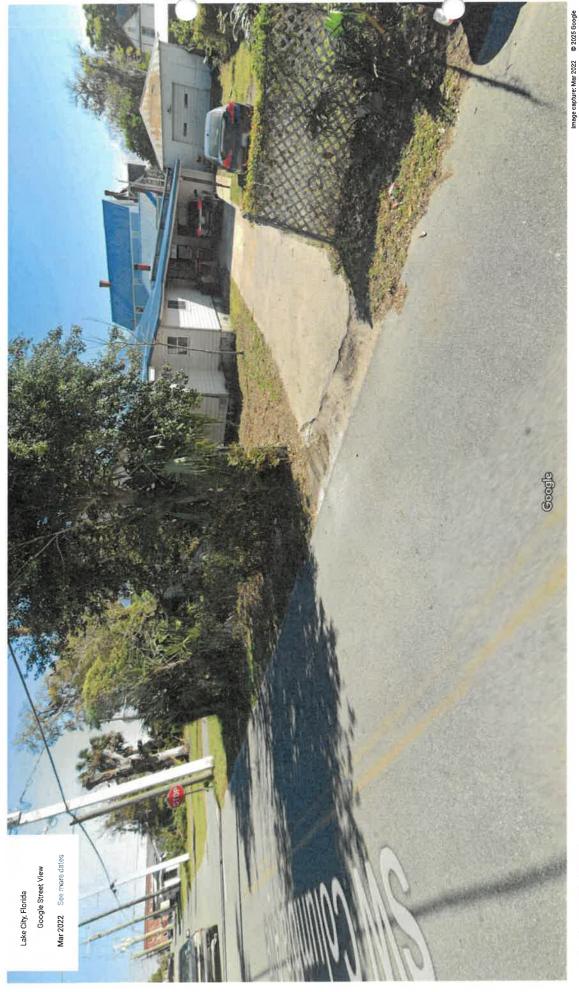




SE Nassau SI SE St Johns SI

Image capture: Mar 2022 @ 2025 Google

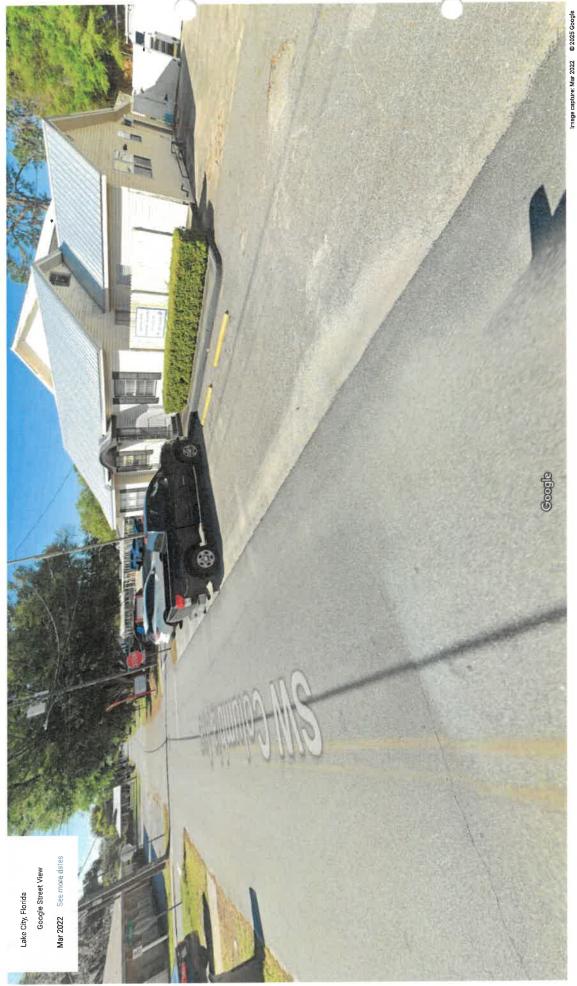


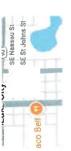


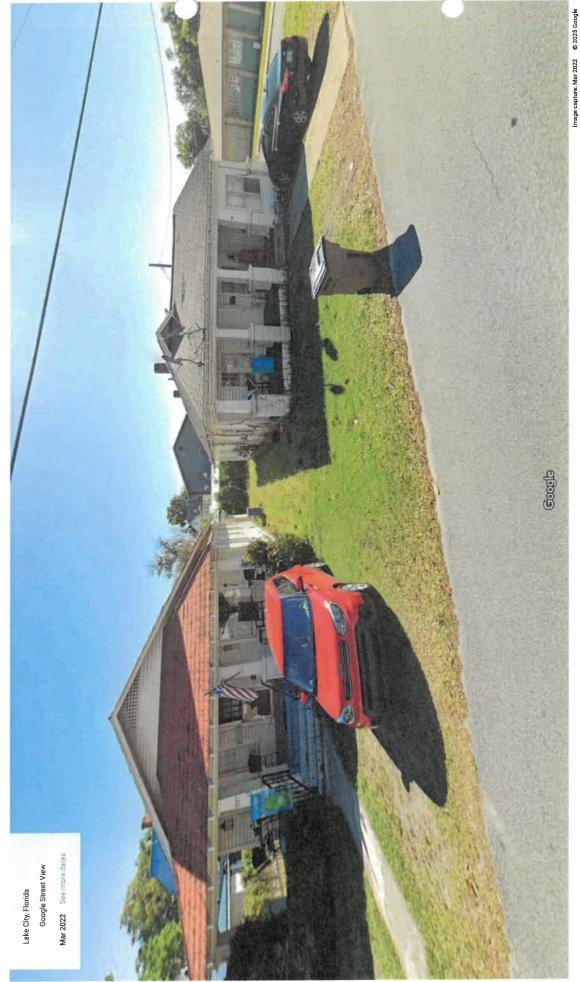


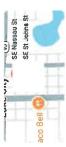












Inst. Number: 201012019743 Book: 1206 Page: 815 Date: 12/10/2010 Time: 11:53:06 AM Page 1 of 1

10.00 329,00 47,000.00

This Instrument Prepared by & return to:

TRISH LANG, an employee of

NORTH CENTRAL FLORIDA TITLE,

LLC

343 NW COLE TERRACE, SUITE 101 Address:

LAKE CITY, FLORIDA 32055

Flle No. 10Y-09029TL

Parcel I.D. #: 12765-000

SPACE ABOVE THIS LINE FOR PROCESSINGDATA

Page 1 of 1 B:1206 P:815

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 3rd day of December, A.D. 2010, by PREGNANCY CRISIS

CENTER OF LAKE CITY, INC, hereinafter called the grantor, to GREGORY E. KOLB, single, whose post office address is 1394 S MARION AVENUE APT. #205,LAKE CITY, FLORIDA 32025, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, ad the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in Columbia County, State of Florida, viz:

Beginning at a distance of 52 1/2 feet North from the Southwest corner of Lot or Block 43 and run North 52 1/2 feet; thence East 102 1/2 feet; thence South 52 1/2 feet; thence West 102 1/2 feet to said Point of Beginning. Said land herein conveyed being the North 1/2 of the Southwest 1/4 of Lot or Block 43, in the Central Division of the City of Lake City, Floida.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantee that he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31,2010.

In Witness Whereof, the said grantor has signed and sealed these presents, the day and year first above written.

Witness Stynature

Raeina Simpkin:

Printed Name

Witness Signature PATRICIA LANG

Printed Name

STATE OF FLORIDA COUNTY OF COLUMBIA PREGNANCY CRISIS CENTER OF LAKE CITY, INC.

BY: JOHN WESTER-PRESIDENT

Address:

217 SOUTH COLUMBIA STREET, LAKE CITY, FLORIDA 32055

The foregoing instrument was acknowledged before me this 3rd day of December, 2010, by JOHN WESTER-PRESIDENT OF PREGNANCY CRISIS CENTER OF LAKE CITY, INC, who is known to me or who has produced Driver's License

as identification.

Notary Public

My commission expires

