

DATE 12/20/2011

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029832

APPLICANT DALE BURD PHONE 386.497.2311
 ADDRESS POB 39 FT. WHITE FL 32038
 OWNER ROCKY FORD PHONE 386.497.2311
 ADDRESS 551 SW CENTRAL TERRACE FT. WHITE FL 32038
 CONTRACTOR TERRY L. THRIFT PHONE 386.623.0115

LOCATION OF PROPERTY 47-S TO US 27,TR TO RIVERSIDE,TL TO UTAH,TL TO CENTRAL,TR AND IT'S 4/10 OF A MILE TO LOT ON L.

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING A-3 MAX. HEIGHT _____

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 23-6S-15-01169-000 SUBDIVISION 3 RIVERS ESTATES

LOT 20 BLOCK _____ PHASE _____ UNIT 19 TOTAL ACRES 0.91

IH1025139

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 11-0511-E BLK JLW N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FOOT ABOVE ROAD.

Check # or Cash 8391

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____

Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by _____ date/app. by _____ date/app. by _____

Framing _____ Insulation _____
date/app. by _____ date/app. by _____

Rough-in plumbing above slab and below wood floor _____ Electrical rough-in _____
date/app. by _____ date/app. by _____

Heat & Air Duct _____ Peri. beam (Lintel) _____ Pool _____
date/app. by _____ date/app. by _____ date/app. by _____

Permanent power _____ C.O. Final _____ Culvert _____
date/app. by _____ date/app. by _____ date/app. by _____

Pump pole _____ Utility Pole _____ M/H tie downs, blocking, electricity and plumbing _____
date/app. by _____ date/app. by _____ date/app. by _____

Reconnection _____ RV _____ Re-roof _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 64.20 WASTE FEE \$ 167.50

FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ **TOTAL FEE** 556.70

INSPECTORS OFFICE _____ CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

CH# 8391

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 20 Dec. 2011 Building Official T.C. 12-19-11

AP# 1112-17 Date Received 12/7/11 By GT Permit # 29832

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments _____

FEMA Map# N/A Elevation N/A Finished Floor 1st level River N/A In Floodway N/A

Site Plan with Setbacks Shown EH # 11-0511-E EH Release Well letter Existing well

Recorded Deed or Affidavit from land owner Installer Authorization State Road Access 911 Sheet

Parent Parcel # _____ STUP-MH _____ F W Comp. letter VF Form

IMPACT FEES: EMS _____ Fire _____ Corr _____ Out County In County

Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 _____

Property ID # 000000-01169-000 Subdivision 3 RIVERS EST LOT 20 UNIT 19

- New Mobile Home _____ Used Mobile Home MH Size 56x14 Year 04
- Applicant Mr Burrell on Rocky Ford Phone # 386-497-2311
- Address PO Box 39, Fort White, FL 32038
- Name of Property Owner Rocky Ford Phone# 623-3396
- 911 Address 551 SW CENTRAL TERRACE, Ft White, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home SAME Phone # SAME
Address SAME
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property 0
- Lot Size 100x400 Total Acreage .91
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 47 South, TR on US 27, TL on
Riverside Ave, TL on UTAH, TR on CENTRAL 4/10th
TO LOT ON LEFT
- Name of Licensed Dealer/Installer TERRY L. Thrafi Phone # 386) 623-0115
- Installers Address 448 NW Dye Hunter Dr Lake City Fla 32055
 - License Number IH-1025189 Installation Decal # 7602

in spokeny Dec 12.10.11

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Terry L. Thraff PHONE (386) 623-0111

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

✓ ELECTRICAL ✓ MECHANICAL/ A/C ✓ PLUMBING/ GAS <u>680</u>	Print Name <u>Rezly D Ford</u> License #: <u>OWNER</u>	Signature <u>[Signature]</u> Phone #: <u>623-3396</u>
	Print Name <u>Rezly D Ford</u> License #: <u>OWNER</u>	Signature <u>[Signature]</u> Phone #: <u>623-3396</u>
	Print Name <u>Terry L. Thraff</u> License #: <u>IH-1025139</u>	Signature <u>[Signature]</u> Phone #: <u>(386) 623-0111</u>

DALE BIRD
 NOTARY PUBLIC
 STATE OF FLORIDA
 Comm# EE002925
 Expires 7/16/2014

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer TERRY L. THRETS License # TH-1025139

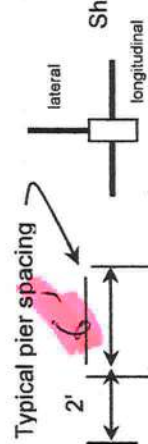
911 Address where home is being installed. SW CENTRAL TOWER
Fort White, FL 32038

Manufacturer CIAR Length x width 56x14'

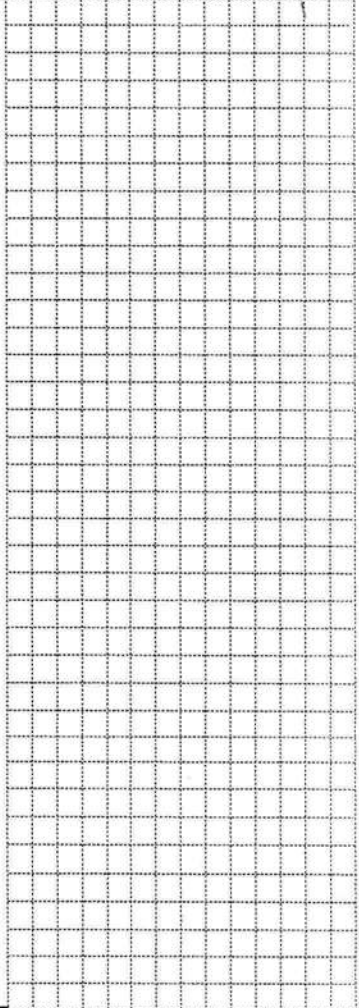
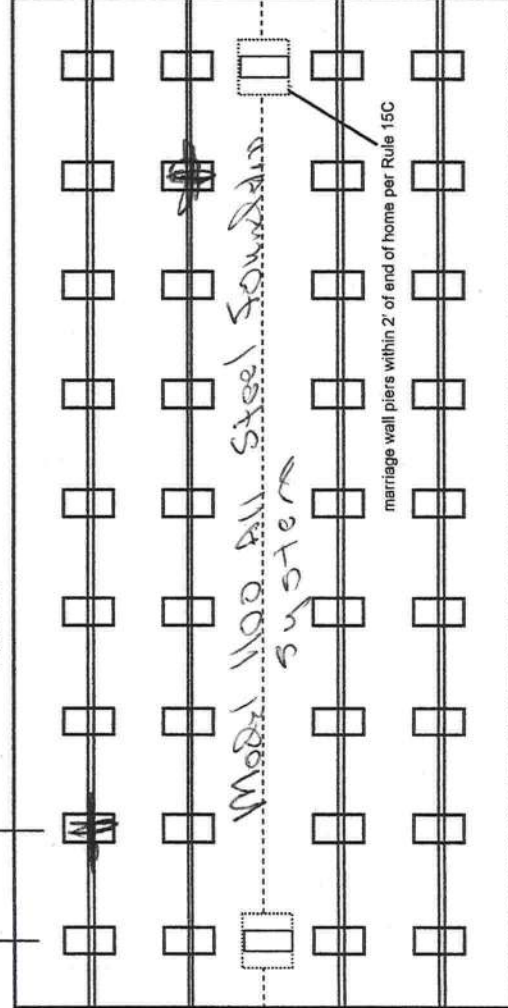
NOTE: if home is a single wide fill out one half of the blocking plan
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials TH



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



New Home Used Home

Home installed to the Manufacturer's Installation Manual

Home is installed in accordance with Rule 15-C

Single wide Wind Zone II Wind Zone III

Double wide Installation Decal # 5602

Triple/Quad Serial # 005131

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	16' x 16" (256)	18 1/2" x 18 1/2" (342)	20' x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 .psf	3'	4'	5'	6'	7'	8'
1500 .psf	4' 6"	6'	7'	8'	8'	8'
2000 .psf	6'	8'	8'	8'	8'	8'
2500 .psf	7' 6"	8'	8'	8'	8'	8'
3000 .psf	8'	8'	8'	8'	8'	8'
3500 .psf	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 1 1/2 x 2 1/2

Perimeter pier pad size _____

Other pier pad sizes (required by the mfg.) _____

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier-pad sizes below.

Opening _____ Pier pad size _____

ANCHORS

4 ft 5 ft

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer OLIVER VSCA

OTHER TIES

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

Number 005131

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1600 X 1500
285 290 285

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X 1500 X 1600 X 1500
285 290 285

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

YLT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Terry L. Thrift
Date Tested 11/19/11

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 2

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 2

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 2

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:
For used homes a min. 30-gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Type gasket Pg.

Installed:
Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes N/A
Range downflow vent installed outside of skirting. Yes N/A
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other:

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Terry L. Thrift Date 11/19/11

Columbia County Property Appraiser

2011 Tax Year

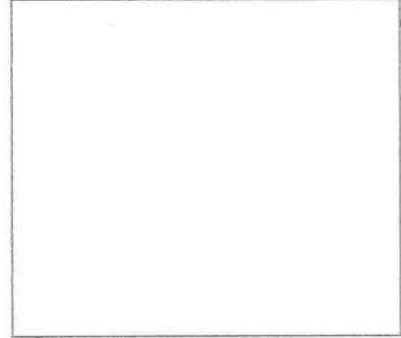
DB Last Updated: 11/15/2011

Parcel: 00-00-00-01169-000

Owner & Property Info

Search Result: 1 of 1

Owner's Name	FORD ROCKY D & LISA B		
Mailing Address	P O BOX 426 FT WHITE, FL 32038		
Site Address	P O BOX 426		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	100000
Land Area	0.918 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 20 UNIT 19 THREE RIVERS ESTATES. ORB 475-720, WD 1042-1496, WD 1042-1496, CORR WD 1071-847, 1071-848, WD 1073-1457, WD 1218-2378,			



Property & Assessment Values

2011 Certified Values	
Mkt Land Value	cnt: (0) \$8,000.00
Ag Land Value	cnt: (1) \$0.00
Building Value	cnt: (0) \$0.00
XFOB Value	cnt: (0) \$0.00
Total Appraised Value	\$8,000.00
Just Value	\$8,000.00
Class Value	\$0.00
Assessed Value	\$8,000.00
Exempt Value	\$0.00
Total Taxable Value	Cnty: \$8,000 Other: \$8,000 Schl: \$8,000

2012 Working Values
<p>NOTE: 2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.</p>

Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
7/16/2011	1218/2378	WD	V	Q	01	\$24,000.00
2/3/2006	1073/1457	WD	V	Q		\$35,000.00
1/11/2006	1071/848	WD	V	Q		\$18,000.00
3/29/2005	1042/1496	WD	V	U	08	\$8,000.00

BSG:dbb
7644.11-11-109
06/30/11

Recording 1850
Doc stamps 168.00
18650

This Instrument Prepared By
BONNIE S. GREEN
DARBY & PEELE
Attorneys at Law
Post Office Drawer 1707
Lake City, Florida 32056-1707

TAX PARCEL #: 00-00-00-01169-000

Inst:201112011711 Date:8/1/2011 Time:4:08 PM
Doc Stamp-Deed:168.00
DC,P,DeWit: Cason,Columbia County Page 1 of 2 B:1218 P 2378

WARRANTY DEED

THIS WARRANTY DEED made this 16 day of July, 2011, by ROBERT L. WOOD, JR., a married man not residing on the property described herein, whose mailing address is 7155 Oxley Road, Brooksville, Florida 34601 (herein "Grantor") to ROCKY D. FORD and LISA B. FORD, his wife, whose mailing address is Post Office Box 426, Fort White, Florida 32038, (herein "Grantee"):

WITNESSETH:

That the Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) ~~DOLLARS and other valuable considerations, receipt whereof is hereby acknowledged,~~ hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 20, Three Rivers Estate, Unit 19, according to the plat thereof as recorded in Plat Book 6, page 13, public records of Columbia County, Florida.

NB: This Deed is executed and delivered in full and complete satisfaction of the mortgage given by first party to Cook Real Estate Investments, Inc., a Florida corporation, dated February 3, 2006, and recorded on February 9, 2006, in Official Records Book 1073, page 1458; which was assigned by Assignment of Mortgage dated December 23, 2008, to Rocky D. Ford and Lisa B. Ford, his wife, and recorded December 23, 2008, in Official Records Book 1164, page 993, all in the public records of Columbia County, Florida, and this is a complete and absolute conveyance and satisfaction of the balance due on the promissory note, which said mortgage secures, and is not given as further security for the payment thereof.

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 the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell

and convey said land; that the Grantor 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.

Signed, sealed and delivered in the presence of:

Michelle Bunch
Witness
Michelle Bunch
(Print or Type Name)

[Signature]
ROBERT L. WOOD, JR.

Linda L. Constantino
Witness
Linda L. Constantino
(Print or Type Name)

STATE OF FLORIDA
COUNTY OF Hernando

The foregoing instrument was acknowledged before me this 10 day of July, 2011, by ROBERT L. WOOD, JR., a married person not residing on the property described herein, who is personally known to me, or who produced Florida Drivers License as identification.

Michelle Bunch
Notary Public, State of Florida
Michelle Bunch
(Print or Type Name)

(NOTARIAL SEAL)



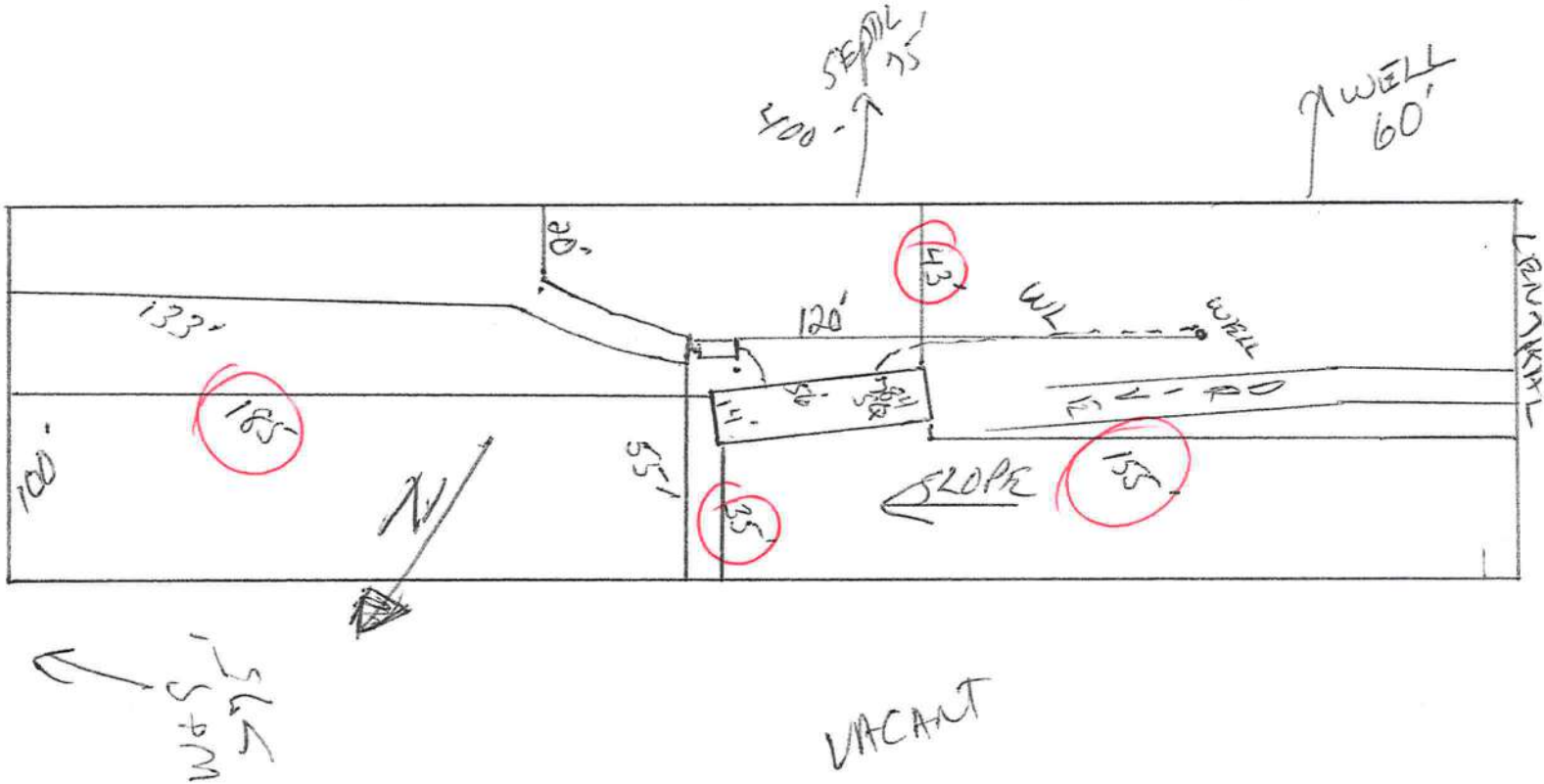
My Commission Expires: Oct 12 2011

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Ford
----- PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: Rocky D Ford **MASTER CONTRACTOR**
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

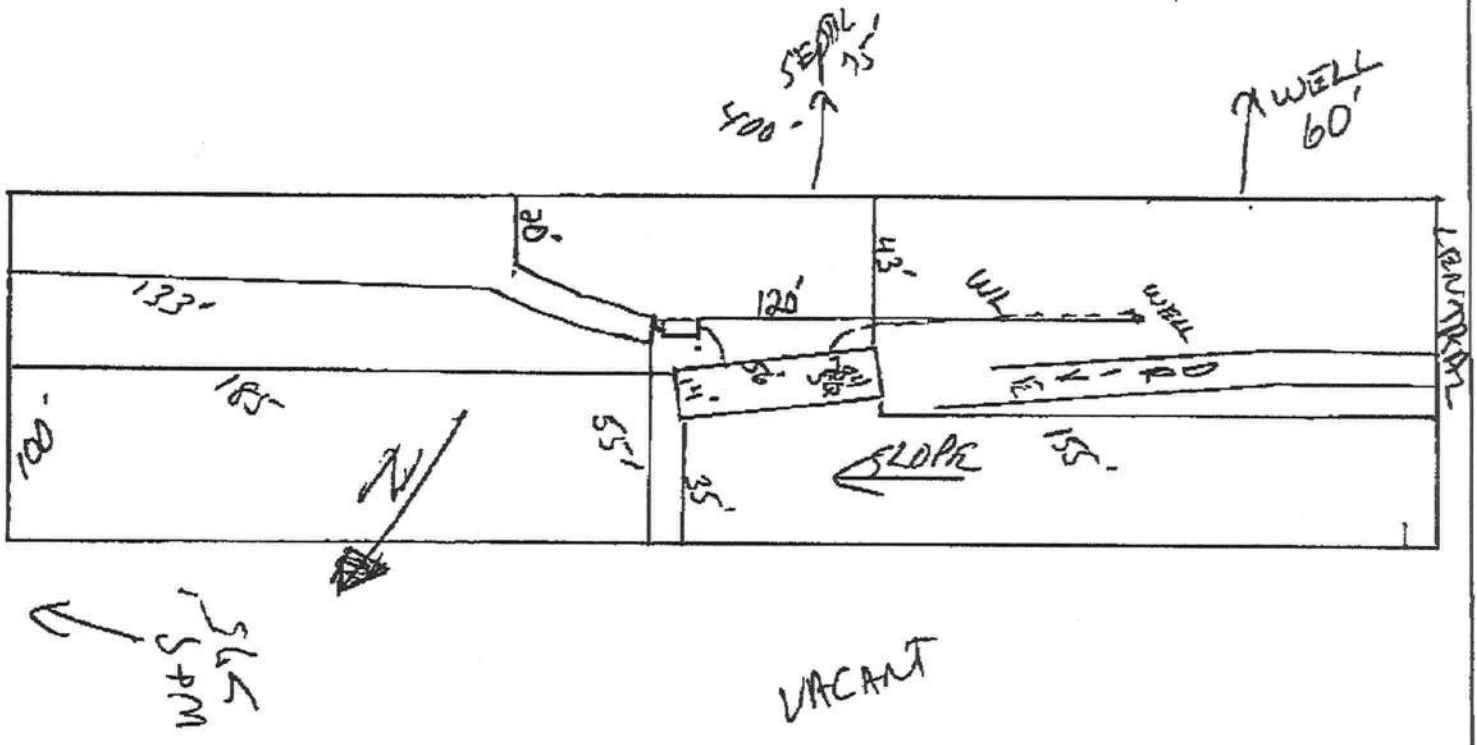
Permit Application Number 11-0511E

Ford

PART II - SITEPLAN

Scale: 1 inch = 40 feet.

APP # 1112-17



Notes:

Site Plan submitted by: Roch D Ford **MASTER CONTRACTOR**
 Plan Approved Not Approved Date 12-14-11
 By Sallye Ford, Env Health Director. **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 12/7/2011 DATE ISSUED: 12/15/2011

ENHANCED 9-1-1 ADDRESS:

551 SW CENTRAL TER
FORT WHITE FL 32038
PROPERTY APPRAISER PARCEL NUMBER:
00-00-00-01169-000

Remarks:

ADDRESS FOR PROPOSED NEW STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12/7/11 BY G IS THE M/R ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Rocky Ford PHONE 497-2311 CELL 623-3596

ADDRESS PO Box 39, Fort White, F 32038

MOBILE HOME PARK NA SUBDIVISION S RIVERS EST

DRIVING DIRECTIONS TO MOBILE HOME 41 North TR on Falling Creek Road, TR on RIVERS LAKE, TR on N/NE HUNTER ROAD, 1ST DRIVE ON RIGHT

MOBILE HOME INSTALLER Teamy Thrift PHONE _____ CELL 623-0115

MOBILE HOME INFORMATION

MAKE CLARION YEAR 84 SIZE 14 x 56 COLOR Brn / w/lt.

SERIAL No. FLFL1A3447005131

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

- SMOKE DETECTOR () OPERATIONAL () MISSING
- FLOORS () SOLID () WEAR () HOLES DAMAGED LOCATION _____
- DOORS () OPERABLE () DAMAGED
- WALLS () SOLID () STRUCTURALLY UNSOUND
- WINDOWS () OPERABLE () INOPERABLE
- PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
- CEILING () SOLID () HOLES () LEAKS APPARENT
- ELECTRICAL (PICTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

- WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
- WINDOWS () CRACKED/ BROKEN GLASS () SCREEN MISSING () WEATHERTIGHT
- ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [Signature] ID NUMBER 402 DATE 12-9-11

CENTRAL FLORIDA OPEN COLUMBIA AVENUE

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 23-6S-15-01169-000 Building permit No. 000029832

Permit Holder TERRY L. THRIFT

Owner of Building ROCKY FORD

Location: 551 SW CENTRAL TERR, FORT WHITE, FL 32038

Date: 01/30/2012  Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)