

DATE 04/01/2013

# Columbia County Building Permit

**PERMIT**  
**000030885**

This Permit Must Be Prominently Posted on Premises During Construction

APPLICANT CRYSTAL SMITH PHONE 386-234-1396  
 ADDRESS 328 NW LANDRESS TERR LAKE CITY FL 32055  
 OWNER NORTHERN ALACHUA HOLDING,LLC PHONE 352-215-1018  
 ADDRESS 328 NW LANDRESS TERR LAKE CITY FL 32055  
 CONTRACTOR BERNIE THRIFT PHONE 623-0046  
 LOCATION OF PROPERTY 41 N, R 246, R LANDRESS TERR, 1ST LOT ON R, CORNER LOT

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00  
 HEATED FLOOR AREA \_\_\_\_\_ TOTAL AREA \_\_\_\_\_ HEIGHT \_\_\_\_\_ STORIES \_\_\_\_\_  
 FOUNDATION \_\_\_\_\_ WALLS \_\_\_\_\_ ROOF PITCH \_\_\_\_\_ FLOOR \_\_\_\_\_  
 LAND USE & ZONING AG-3 MAX. HEIGHT 35  
 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 16-2S-16-01631-018 SUBDIVISION SUWANNEE HIGHLANDS  
 LOT 18 BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 1.00

IH1025155 X Crystal Smith  
 Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_  
 EXISTING 13-0102-R BK TM N  
 Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD  
 AUTHORIZATION LETTER ON FILE  
 REPLACING A PREVIOUSLY MOVED MH Check # or Cash 315340

## 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 \$ 38.52 WASTE FEE \$ 100.50  
 FLOOD DEVELOPMENT FEE \$ \_\_\_\_\_ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ \_\_\_\_\_ **TOTAL FEE** 464.02  
 INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

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.

NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

"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.**

WIND ZONE II DATA SHEET

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

**For Office Use Only** (Revised 1-11) Zoning Official BLK 18 March 2013 Building Official TM 3/7/13

AP# 1303-11 Date Received 3/5 By LN Permit # 30885

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 1' above River N/A In Floodway N/A

Site Plan with Setbacks Shown  EH # 13-0102R  EH Release  Well letter  Existing well

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

Parent Parcel # \_\_\_\_\_  STUP-MH \_\_\_\_\_  F W Comp. letter  App Fee Pd  VF Form

IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_  Out County  In County

Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL \_Suspended March 2009\_  Ellisville Water Sys

Property ID # 16-25-16-01631-018 Subdivision Suwannee Highlands lot 18

- New Mobile Home \_\_\_\_\_ Used Mobile Home  MH Size 66x14 Year 1993
- Applicant Crystal Smith & Marcus Powell Phone # 386-234-1396
- Address 328 NW Landress Terr Lake City, FL 32055
- Name of Property Owner Northern Alachua Holdings LLC Phone # 352-215-1018
- 911 Address 328 NW Landress Terr, LAKE CITY, FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Kathleen McGlamery Phone # 386.365.4506  
Address c/ POB - 653, Newberry, FL 32669
- Relationship to Property Owner Lease Contract
- Current Number of Dwellings on Property 0 (1 was removed)
- Lot Size \_\_\_\_\_ Total Acreage 1 acre
- 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 41 North to CR 246 turn right, Make first right on Landress Terr first lot on right (corner lot)
- Name of Licensed Dealer/Installer Bernie Thrift Phone # 623 0046
- Installers Address 5857 NW Falling creek rd White Springs FL 32096
  - License Number IH1025155 Installation Decal # 14617

Joy spoke by crystal 3-19-13  
Spoke by Crystal 3-26-13

CK# 315340

# COLUMBIA COUNTY PERMIT WORKSHEET

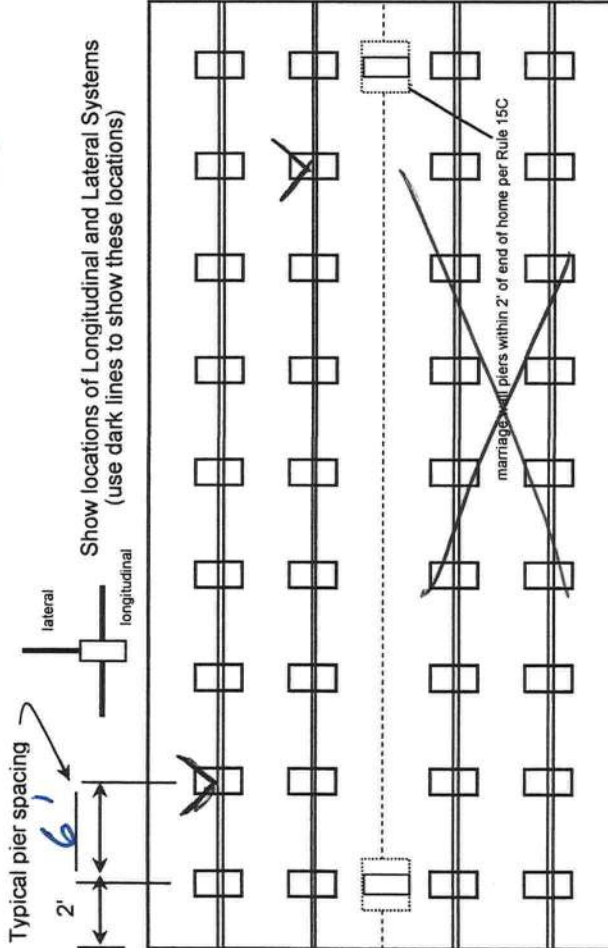
These worksheets must be completed and signed by the installer.  
Submit the originals with the packet.

Installer Bernie Thrift License # 1028159  
 911 Address where home is being installed. 328 NW Lamoreaux Terrace Lake City, FL 32055  
 Manufacturer Redman Length x width 14x8-66

**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 BT



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 # 14617

Triple/Quad  Serial # 146m7197

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	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 dsf	3'	4'	4'	5'	6'	7'	8'
1500 dsf	4'6"	6'	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'	8'
2500 dsf	7'6"	8'	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'	8'

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

## PIER PAD SIZES

I-beam pier pad size 17X22

Perimeter pier pad size 16X16

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 NA Pier pad size \_\_\_\_\_

Opening \_\_\_\_\_ Pier pad size \_\_\_\_\_

Opening \_\_\_\_\_ Pier pad size \_\_\_\_\_

## POPULAR PAD SIZES

Pad Size	Sq in
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

## 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 OTI  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer OTI

## OTHER TIES

Sidewall \_\_\_\_\_  
 Longitudinal \_\_\_\_\_  
 Marriage wall \_\_\_\_\_  
 Shearwall \_\_\_\_\_

Number 26

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil without testing.

X 2500 X 2000 X 2000

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 2500 X 2000 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 290 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.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Bennis Thirift
Date Tested 2-14-13

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. 5

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5

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 NA

Type gasket NA
Pg. 10
Installed:
Between Floors Yes NA
Between Walls Yes NA
Bottom of ridgebeam Yes NA

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

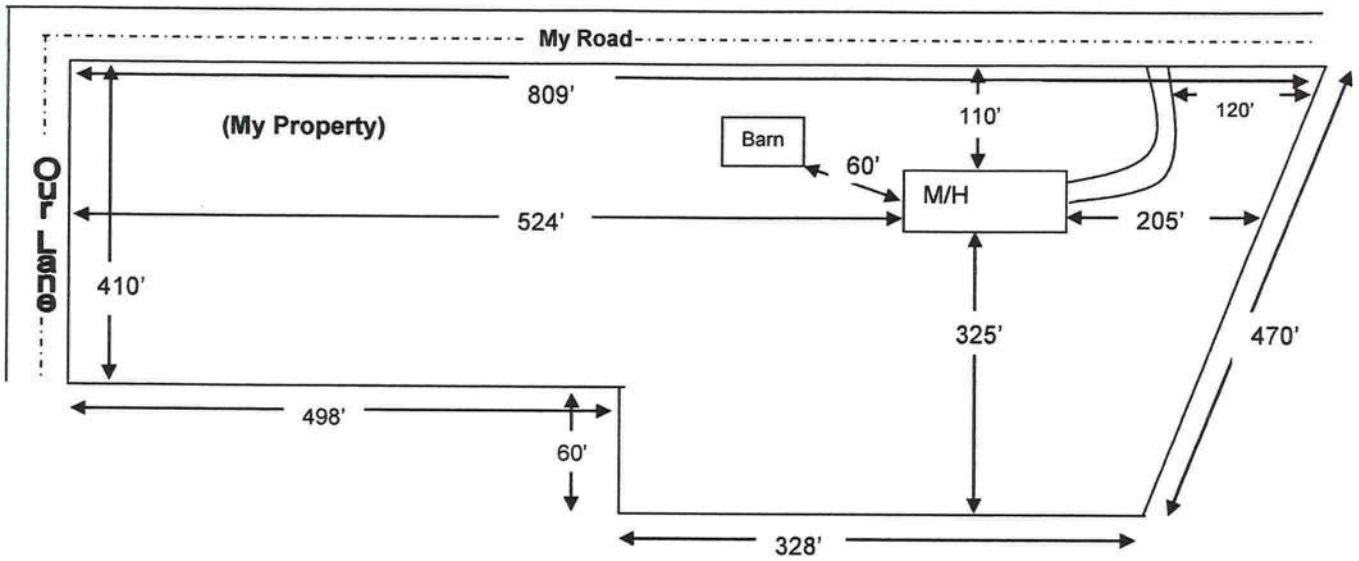
Miscellaneous

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 NA
Other:

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

Installer Signature Date 2-14-13

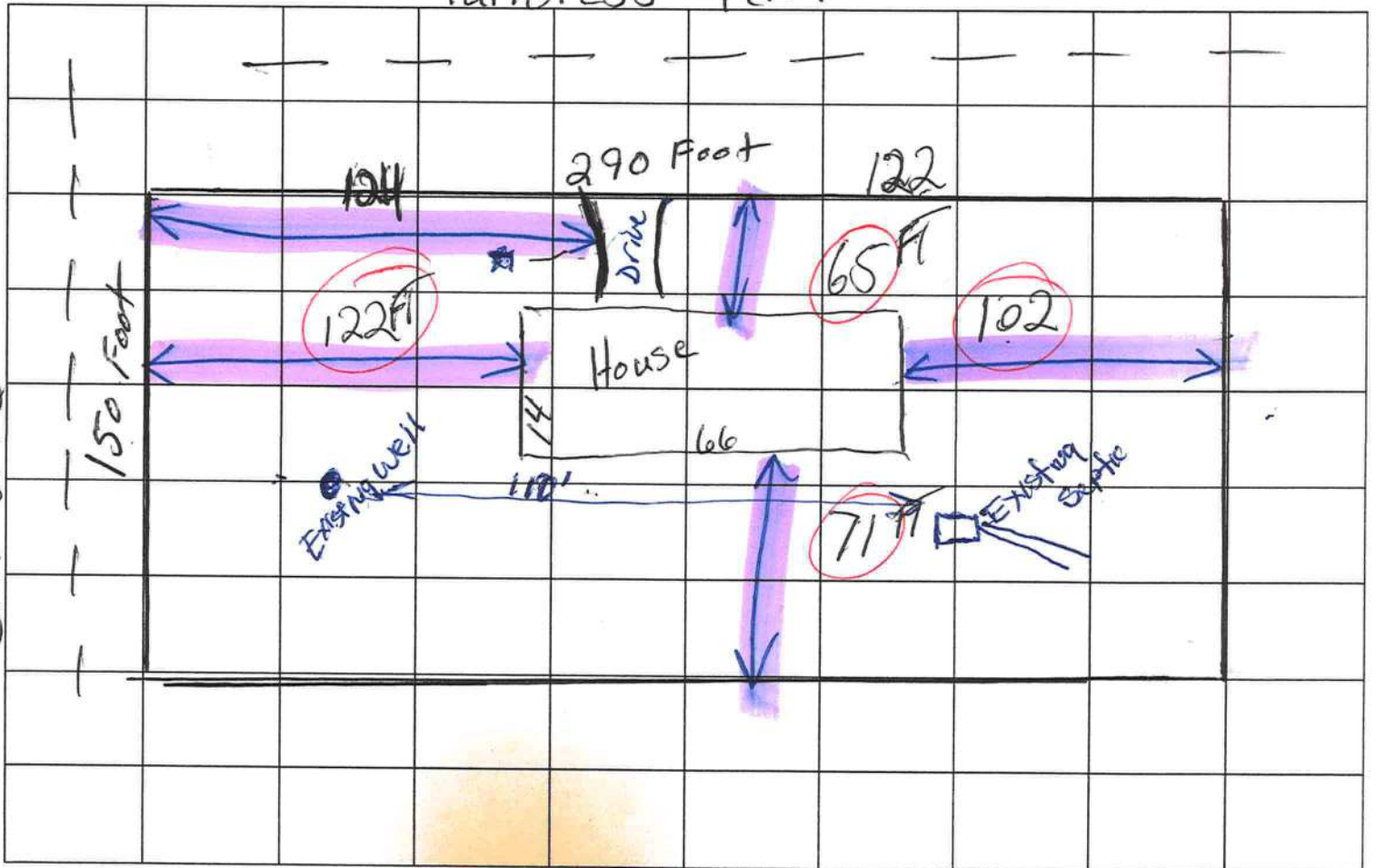
# SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.

landress terr.

CR. 246



# Columbia County Property Appraiser

CAMA updated: 2/1/2013

**2012 Tax Year**

**Parcel:** 16-2S-16-01631-018

<< Next Lower Parcel   Next Higher Parcel >>

## Owner & Property Info

Search Result: 1 of 1

<b>Owner's Name</b>	NORTHERN ALACHUA HOLDING LLC		
<b>Mailing Address</b>	20638 NW 78TH AVE ALACHUA, FL 32615		
<b>Site Address</b>	328 NW LANDRESS TER		
<b>Use Desc. (code)</b>	MOBILE HOM (000200)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	16216
<b>Land Area</b>	1.000 ACRES	<b>Market Area</b>	03
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 18 SUWANNEE HIGHLANDS S/D. ORB 669-630, TD 1200-578, QUIET TITLE ORB 1209-364			



## Property & Assessment Values

2012 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$8,561.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (1)	\$5,987.00
<b>XFOB Value</b>	cnt: (2)	\$1,300.00
<b>Total Appraised Value</b>		\$15,848.00
<b>Just Value</b>		\$15,848.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$15,848.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$15,848 Other: \$15,848   Schl: \$15,848	

## 2013 Working Values

**NOTE:**  
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

## Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/2/2011	1209/364	QT	I	U	18	\$100.00
8/9/2010	1200/578	TD	I	U	18	\$5,900.00
12/7/1988	669/630	WD	I	U		\$7,100.00

## Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1980	WD ON PLY (08)	1745	1987	\$5,987.00
<b>Note:</b> All S.F. calculations are based on exterior building dimensions.						

## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	0	\$100.00	0000001.000	0 x 0 x 0	(000.00)
0190	FPLC PF	1993	\$1,200.00	0000001.000	0 x 0 x 0	(000.00)

## Land Breakdown



COLUMBIA COUNTY BUILDING DEPARTMENT  
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055  
 Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Bernie Thrift, give this authority for the job address show below  
Installer License Holder Name

only, 328 NW Landress Terr, Lake City, Fla, and I do certify that  
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
<u>Crystal Smith</u>	<u>Crystal Smith</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Bernie Thrift  
 License Holders Signature (Notarized)

TH1025155  
 License Number

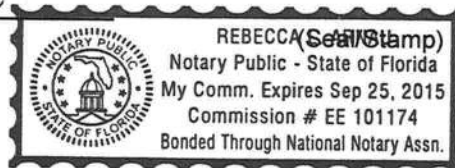
2-14-13  
 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Bernie Thrift, personally appeared before me ~~and is known by me~~ and has produced identification (type of I.D.) \_\_\_\_\_ on this 18 day of February 2013.

Rebecca K. Arman  
 NOTARY'S SIGNATURE



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1303-11 CONTRACTOR Bernie J. Hight PHONE 623.0046

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.*

<input checked="" type="checkbox"/> ELECTRICAL	Print Name: <u>Crystal Smith</u> License #: <u>Owner</u>	Signature: <u>Crystal Smith</u> Phone #:
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name: <u>Crystal Smith</u> License #: <u>Owner</u>	Signature: <u>Crystal Smith</u> Phone #:
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name: <u>Crystal Smith</u> License #: <u>Owner</u>	Signature: <u>Crystal Smith</u> Phone #:

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.

No. Data Plate

CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3/5 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Crystal Smith PHONE \_\_\_\_\_ CELL 386-234-1396

ADDRESS \_\_\_\_\_

MOBILE HOME PARK \_\_\_\_\_ SUBDIVISION Twigg Court

DRIVING DIRECTIONS TO MOBILE HOME 47 south past CR 240 turn right on Willis to twigg turn right to 172 twiggs court on left

MOBILE HOME INSTALLER Bernie Thrift PHONE 386-623-0046 CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE Redman YEAR 1993 SIZE 66 x 14 COLOR Grey + White

SERIAL No. 146M7197

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

FLA 502096 Hud

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

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

↓  
Key INSIDE Grill  
At FRONT PORCH

EXTERIOR:

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

STATUS

APPROVED  WITH CONDITIONS: Need Wind Zone II, Data Plate

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE J. [Signature] ID NUMBER \_\_\_\_\_ DATE 3/6/13

# 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: 3/19/2013      DATE ISSUED: 3/21/2013

### ENHANCED 9-1-1 ADDRESS:

328      NW      LANDRESS      TER  
LAKE CITY      FL      32055  
PROPERTY APPRAISER PARCEL NUMBER:  
16-2S-16-01631-018

### Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR 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.**



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## Detail by Entity Name

### Florida Limited Liability Company

NORTHERN ALACHUA HOLDINGS, LLC

### Filing Information

<b>Document Number</b>	L07000019665
<b>FEI/EIN Number</b>	208538880
<b>Date Filed</b>	02/21/2007
<b>State or Country</b>	FL
<b>Status</b>	ACTIVE

### Principal Address

20638 NW 78TH AVENUE  
ALACHUA, FL 32615

### Mailing Address

20638 NW 78TH AVENUE  
ALACHUA, FL 32615

### Registered Agent Name & Address

SULLIVAN, MARK P  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

### Manager/Member Detail

#### **Name & Address**

Title MGRM

SULLIVAN, MARK P  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

Title MGRM

SULLIVAN, NANCY J  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

### Annual Reports

<b>Report Year</b>	<b>Filed Date</b>
2011	01/11/2011



1303-11

**AFFIDAVIT**

**STATE OF FLORIDA  
COUNTY OF COLUMBIA**

This is to certify that I, (We) Northern Alachua Holdings, LLC  
owner of the below described property:

Tax Parcel No. 01631-018

Subdivision (name, lot, block, phase) 328 Nw Landress Terr

Give my permission to Crystal Smith to place a  
mobile home/travel trailer/single family home (circle one) on the above mentioned  
property.

I (We) understand that this could result in an assessment for solid waste and fire  
protection services levied on this property.

*Manjula*  
Owner

\_\_\_\_\_  
Owner

SWORN AND SUBSCRIBED before me this 20<sup>th</sup> day of March  
2013. This (these) person(s) are personally known to me or produced  
ID \_\_\_\_\_.

*Beverly E. Paine*  
Notary Signature



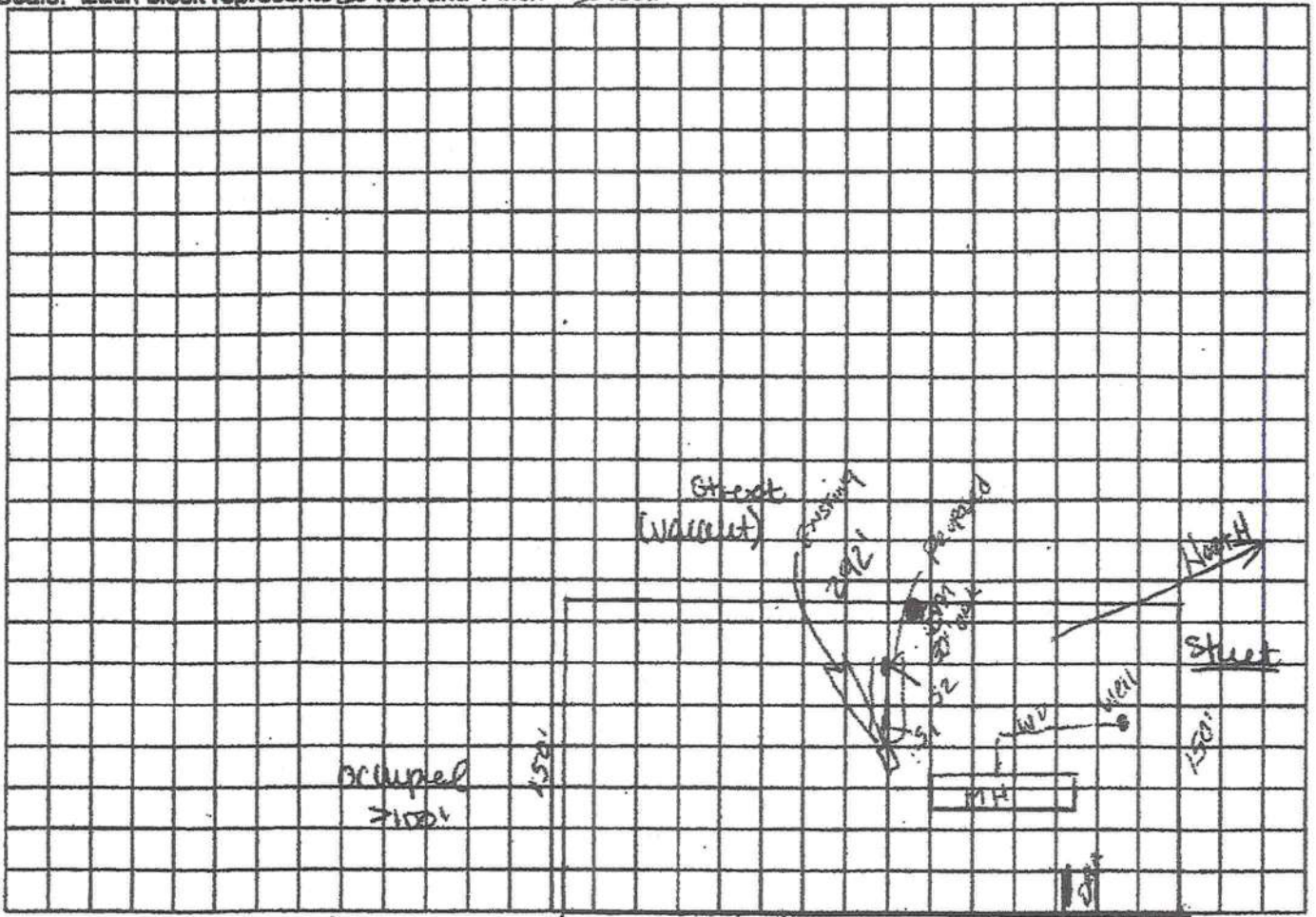
BEVERLY E. PAINE  
MY COMMISSION # DD 905664  
EXPIRES: August 7, 2013  
Bonded Thru Budget Notary Services

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-0102R

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

Scale: Each block represents <sup>20</sup>~~30~~ feet and 1 inch = <sup>20</sup>~~30~~ feet.



Notes: MARCUS TOWELL  
LOT 18 SUWANNEE HIGHLANDS  
1.00 ACRES 16-25-16-01631-018

Site Plan submitted by: Robert W. Ford 2-25-13 Agent  
Plan Approved  Not Approved  Date 2/28/13  
By: [Signature] Env. Spec. Columbia County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

SP



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

PERMIT NO. 13-0102R  
DATE PAID: 2/24/13  
FEE PAID: 185.00  
RECEIPT #: 1098822

APPLICATION FOR:

New System     Existing System     Holding Tank     Innovative  
 Repair     Abandonment     Temporary   

APPLICANT: Northern Alachua Holdings LLC (Marcus Powell)

AGENT: Robert Ford NFST INC TELEPHONE: \_\_\_\_\_

MAILING ADDRESS: 580 NW Guerdon Rd LC FL 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 18 BLOCK: / SUBDIVISION: SWANVEE HIGHLANDS PLATTED: 1976

PROPERTY ID #: 16-25-16-01631-018 ZONING: M/H I/M OR EQUIVALENT: [ Y ]  [ N ]

PROPERTY SIZE: 1.000 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 391.0065, FS? [ Y ]  [ N ] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 328 NW LANDRESS TER.

DIRECTIONS TO PROPERTY: HWY 41 NORTH to LASSIE BLACK (246) TR  
GO ACROSS RTRACKS TAKE RIGHT ON LANDRESS TER  
1st LOT ON RIGHT

BUILDING INFORMATION

RESIDENTIAL     COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>M/H</u>	<u>3</u>	<u>(14x66) 924</u>	
2				
3				
4				

Floor/Equipment Drains     Other (Specify) \_\_\_\_\_

SIGNATURE: Robert W Ford DATE: 2-25-13