

DATE 02/24/2011

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029212

APPLICANT WENDY GRENNELL PHONE 288-2428
ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038
OWNER WESTRIDGE, INC. PHONE 755-4050
ADDRESS 237 NW TIMUCUA DR LAKE CITY FL 32055
CONTRACTOR ROBERT SHEPPARD PHONE 623-2203

LOCATION OF PROPERTY 90 W, R LAKE JEFFEREY, R LEONIA WAY, R INDIAN RIDGE LN, R TIMUCUA, AT CURVE IT'S THE 1ST ON LEFT

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 5-3S-16-01809-116 SUBDIVISION INDIAN RIDGE S/D

LOT 16 BLOCK PHASE UNIT TOTAL ACRES 5.01

IH1025386 Wendy Grennell
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 11-0064 BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

Check # or Cash 1166

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

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

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

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

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

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

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

MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 51.36 WASTE FEE \$ 134.00

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 560.36

INSPECTORS OFFICE CLERKS OFFICE

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 24.02.11 Building Official T.C. 223-11

AP# 1102-36 Date Received 2/21 By JW Permit # 29212

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 # 11-0069 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 # 5-35-16-01809-116 Subdivision Indian Ridge ^{Lot 16} S/D

▪ New Mobile Home Used Mobile Home _____ MH Size 28x74 Year 2011

▪ Applicant Wendy Grennell Phone # 386-288-2428

▪ Address 3104 SW Old Wire Rd Ft White FL 32038

▪ Name of Property Owner Westridge, Inc. Phone# 386-755-4050

▪ 911 Address 237 NW Timucua Dr 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 Scott & Stacy Parsons Phone # 386-697-5942
 Address 134 NW 109th Ave Pembroke Pines FL

▪ Relationship to Property Owner purchaser - Agreement for Deed

▪ Current Number of Dwellings on Property 0

▪ Lot Size _____ Total Acreage 5.01

▪ 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 90 West, TR on Lake Jeffery Rd, Approx 7 miles, TR on Leonia Way, under I-10, TR on Indian Ridge lane to stop sign, TR on Timucua ^{cur} _{1st} ^{on}

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203

▪ Installers Address 6355 NE CR 245 Lake City FL 32025
 ▪ License Number IH1025386 Installation Decal # 4920

OK 1166

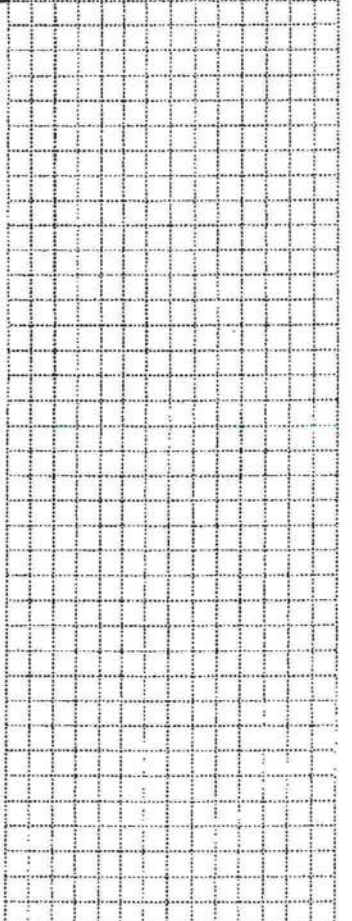
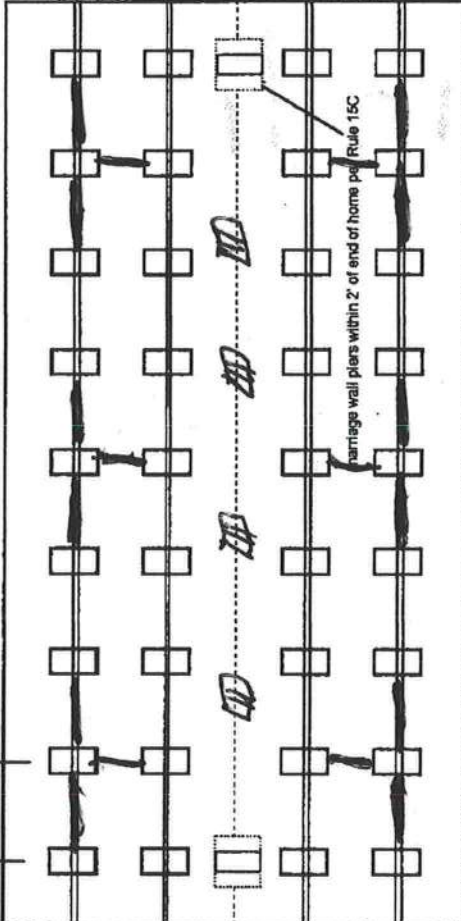
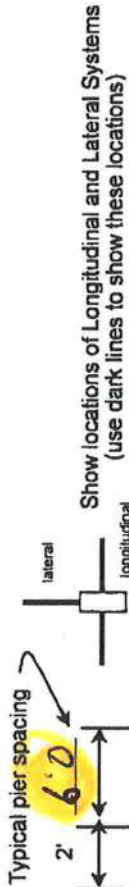
COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Robert Sheppard License # FA 1025 386
 911 Address where home is being installed. NW Timucua Dr.
 Manufacturer Linc Oak Length x width 28x74
Lake City FL

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 RS



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 # 4920
 Triple/Quad Serial # ordered

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'	5'	6'	7'	8'	8'
1500 dsf	4.6"	6'	7'	8'	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 17x25
 Perimeter pier pad size 17x25
 Other pier pad sizes (required by the mfg.) 17x25

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

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 Super 1101V

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall
 Number 6
2
4

342
 Req.
 425
 provided

POCKET PENETROMETER TEST

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

x 1700 x 1700 x 1700

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 1600 x 1600 x 1700

TORQUE PROBE TEST

The results of the torque probe test is 295 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 Robert Sheppard
Date Tested 2-16-11

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. 27

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16
 Walls: Type Fastener: screws Length: 4 Spacing: 16
 Roof: Type Fastener: lags Length: 6 Spacing: 16
 For used homes admin. 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 RS

Type gasket FOAM
 Pg. 22
 Installed:
 Between Floors Yes
 Between Walls Yes
 Bottom of ridgebeam Yes

Weatherproofing

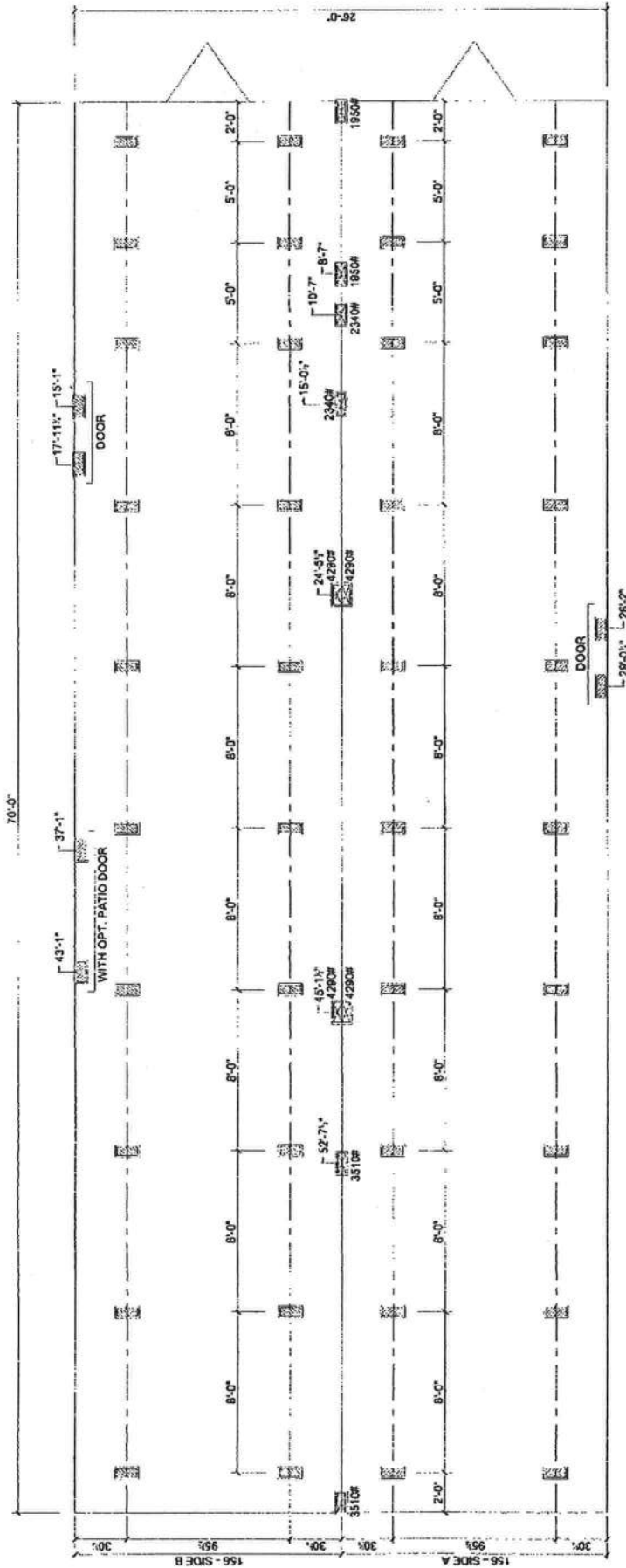
The bottomboard will be repaired and/or taped. Yes Pg. 28
 Siding on units is installed to manufacturer's specifications. Yes
 Fireplace chimney installed so as not to allow intrusion of rain water. Yes

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 Robert Sheppard Date 2-16-11



MARRIAGE LINE OPENING SUPPORT PIERTYP.

SUPPORT PIERTYP

10-4-2010

FOUNDATION NOTES:
 - THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
 - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
 - FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (WO/OPT. HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (WO/OPT. HEAT PUMP OH DUCT)

Live Oak Homes
MODEL: L-2704A - 28 X 74
4-BEDROOM / 2-BATH

L-2704A

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statues Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, Robert Sheppard, license number IH1025386

state that the installation of the manufactured home for owner

Scott & Stacy Parsons

at 911 Address: NW Timucua Dr. City Lake City

will be done under my supervision.

Signed: Robert Sheppard
Mobile Home Installer

Sworn to and described before me this 16 day of February 2011

Shirley M Bennett
Notary public

Shirley M Bennett Personally known

Notary Name DL ID _____



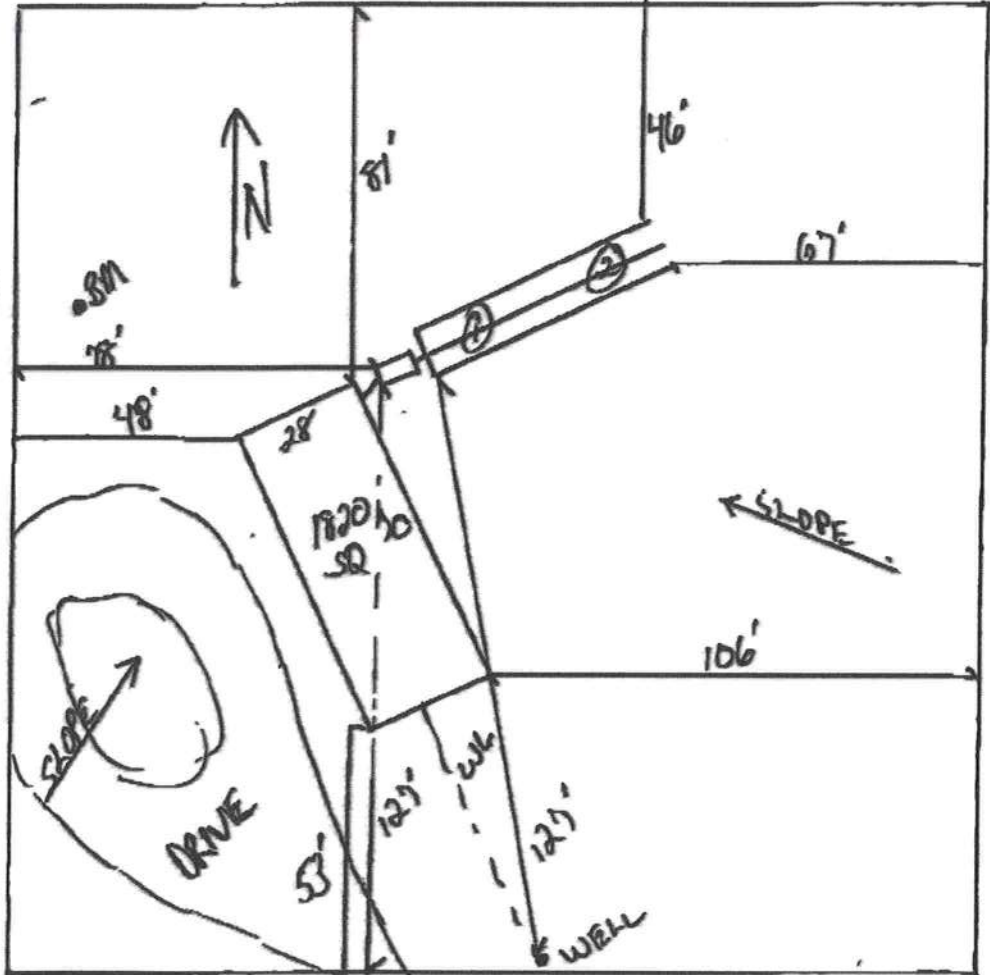
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-0004

WESTRIDGE/PARSONS PART II - SITEPLAN
2-10

Scale: 1 inch = 40 feet.

SEIZ
ATTACHED



Notes:

1 of 5.01 ACRES

Site Plan submitted by:

Rocky D Ford

MASTER CONTRACTOR

Plan Approved X

Not Approved _____

Date 2-15-11

By

Sally Ford, EHD Director

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1102-36 CONTRACTOR Robert Sheppard PHONE 386-623-2203

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	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS ✓	Print Name <u>Robert Sheppard</u> License #: <u>JH 1025386</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-2203</u>

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.

OWNER TO OCCUPANT AFFIDAVIT

I/We Westridge Inc own property in Columbia County, FL with the Parcel ID# of 05-35-16-01909-116 and there are no dwellings located on this property. I/We are allowing Scott + Stacy Parsons to place a mobile home on this property.

With this letter I/we authorize the person or persons listed above to be able to apply for and sign for all permits necessary to have the dwelling placed on this property.

*Westridge
Audrey S Bullard, Pres*

Sworn to by Audrey S Bullard, Pres who is personally known or produced to Westridge Inc. to me a Notary Public in the State of Florida.

Holly C Hanover Date 2/17/11

Notary Signature

Notary stamp or seal:



This Instrument Prepared by & return to:

Westridge, Inc.
Address: P.O. Box 1733
Lake City, FL 32056-1733

WARRANTY DEED

Consideration: 53,900.00
Rec: 10.00
Doc: 377.30

Inst: 201012015344 Date: 9/22/2010 Time: 4:07 PM
Doc Stamp-Deed: 377.30
DC: P. DelWitt Cason, Columbia County Page 1 of 1 B: 1201 P: 2320

Property Appraisers Parcel ID Number(s)
R01809-116

Space above this line for processing data

Space above this line for recording data

This Warranty Deed, Made and executed the 16 Day of September, 2010, by ROZINA ALI STEVENS AND ALLEN DIEGO STEVENS, WIFE AND HUSBAND, whose post office address is: 13456 SW 60th Ave Road, Ocala, FL 34473, hereinafter called the grantor, to WESTRIDGE, INC., A FLORIDA CORPORATION, whose post office address is: PO BOX 1733, LAKE CITY, FL 32056, hereinafter called the Grantee.

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

Witnesseth, That said Grantor, for and in consideration of the sum of \$10.00 (Ten Dollars) and other valuable considerations to said Grantor in hand paid by said Grantee, the receipt of which is hereby acknowledged, has granted, bargained, and sold to the said Grantee, and Grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, State of Florida, to-wit:

Lot 16, INDIAN RIDGE, PHASE ONE, a subdivision according to the map or plat thereof as recorded in Plat Book 9, Pages 72-79, public records, Columbia County, Florida

Parcel Identification Number: R01809-116

SUBJECT TO any valid and existing oil, gas or mineral right, reservation, royalty transfer or mineral deed conveying or reserving any interest in the oil, gas or minerals underlying said lands, or any portion thereof, heretofore executed and duly recorded in the public records of said county.

FURTHER SUBJECT TO covenants, conditions, restrictions, easements, reservations and limitations of record, road rights of way and utility easements, and rules, regulations and permitting requirements of Suwannee River Water Management District, if any. Further subject to all matters contained on the Plat of Indian Ridge, Phase One, as recorded in Plat Book 9, Pages 72-79, inclusive, and Declaration of Restrictions as recorded in Official Records Book 1162, Page 799, public records, Columbia County, Florida.

N.B. IT IS THE INTENT OF THE GRANTOR AND GRANTEE THAT THE CONVEYANCE OF THE ABOVE-DESCRIBED PROPERTY TO WESTRIDGE, INC. WILL NOT ACT IN ANY WAY AS SATISFACTION OF THE NOTE AND MORTGAGE FROM ROZINA ALI STEVENS AND ALLEN DIEGO STEVENS, TO WESTRIDGE, INC. RECORDED IN OFFICIAL RECORDS BOOK 1187 AT PAGES 500-501, PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA. IT IS THE EXPRESS INTENT OF THE PARTIES HEREIN THAT THE ABOVE-DESCRIBED NOTE AND MORTGAGE WILL NOT MERGE WITH THE INTEREST OF WESTRIDGE, INC. ACQUIRED PURSUANT TO THIS DEED.

In Witness Whereof, the said Grantor has caused these presents to be executed the day and year first above written.

Signed, sealed and delivered in the presence of:

[Signature]
Witness Signature

FRIDDY JACONE
Printed Name

[Signature]
Witness Signature

MILAGROS CANDELIER
Printed Name

[Signature]
Witness Signature

FRIDDY JACONE
Printed Name

[Signature]
Witness Signature

MILAGROS CANDELIER
Printed Name

STATE OF FLORIDA
COUNTY OF MARION

[Signature]
Grantor (Signature)

ROZINA ALI STEVENS
Grantor's Printed Name

13456 SW 60TH AVE ROAD, OCALA, FL 34473
Grantor's Post Office Address

[Signature]
Grantor (Signature)

ALLEN DIEGO STEVENS
Grantor's Printed Name

13456 SW 60TH AVE ROAD, OCALA, FL 34473
Grantor's Post Office Address



I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared ROZINA ALI STEVENS AND ALLEN DIEGO STEVENS, known to me to be the person in whose name the foregoing instrument was executed, and that they severally acknowledged executing the same, freely and voluntarily, and that an oath was not taken. Said persons are personally known to me or produced Fl Driver License as identification.

Witness my hand and official seal in the County and State last aforesaid this 16 of September, 2010.

[Signature]
Notary Signature

>> [Print as PDF](#) <<

LOT 16 INDIAN RIDGE S/D PHS 1. WESTRIDGE INC 05-3S-16-01809-116 Columbia County 2011 R
 WD 1173-709,WD 1184-756, P O BOX 1733 CARD 001 of 001
 WD 1187-498 & WD 1201-2320 LAKE CITY, FL 32056 PRINTED 1/06/2011 11:22 BY JEFF
 APPR 2/02/2009 CM

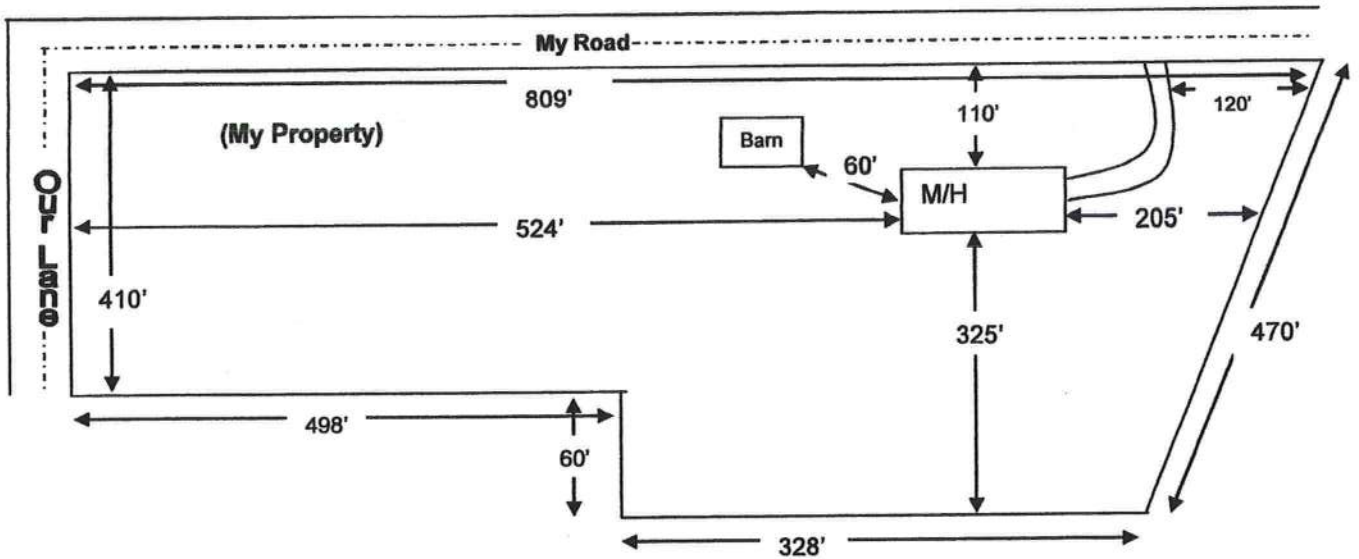
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MOD	BATH	EFF AREA	52.919 E-RATE	.000 INDX	STR 5- 3S- 16		
EXW	FIXT	RCN		AYB	MKT AREA 03		0 BLDG
%	BDRM	%GOOD	BLDG VAL	EYB	(PUD1		0 XFOB
RSTR	RMS				AC 5.010		37,424 LAND
RCVR	UNTS	FIELD CK:			NTCD		0 CLAS
%	C-W%	LOC:			APPR CD		0 MKTUSE
INTW	HGHT				CNDO		37,424 JUST
%	PMTR				SUBD		0 APPR
FLOR	STYS				BLK		
%	ECON				LOT		0 SOHD
HTTP	FUNC				MAP#		0 ASSD
A/C	SPCD						0 EXPT
QUAL	DEPR				TXDT 003		0 COTXBL
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CEIL	UD-3						
ARCH	UD-4						
FRME	UD-5						
KTCH	UD-6						
WDO	UD-7						
CLAS	UD-8						
OCC	UD-9						
COND	%						
SUB	A-AREA % E-AREA	SUB VALUE					

TOTAL -----
 -----EXTRA FEATURES----- FIELD CK:
 AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE

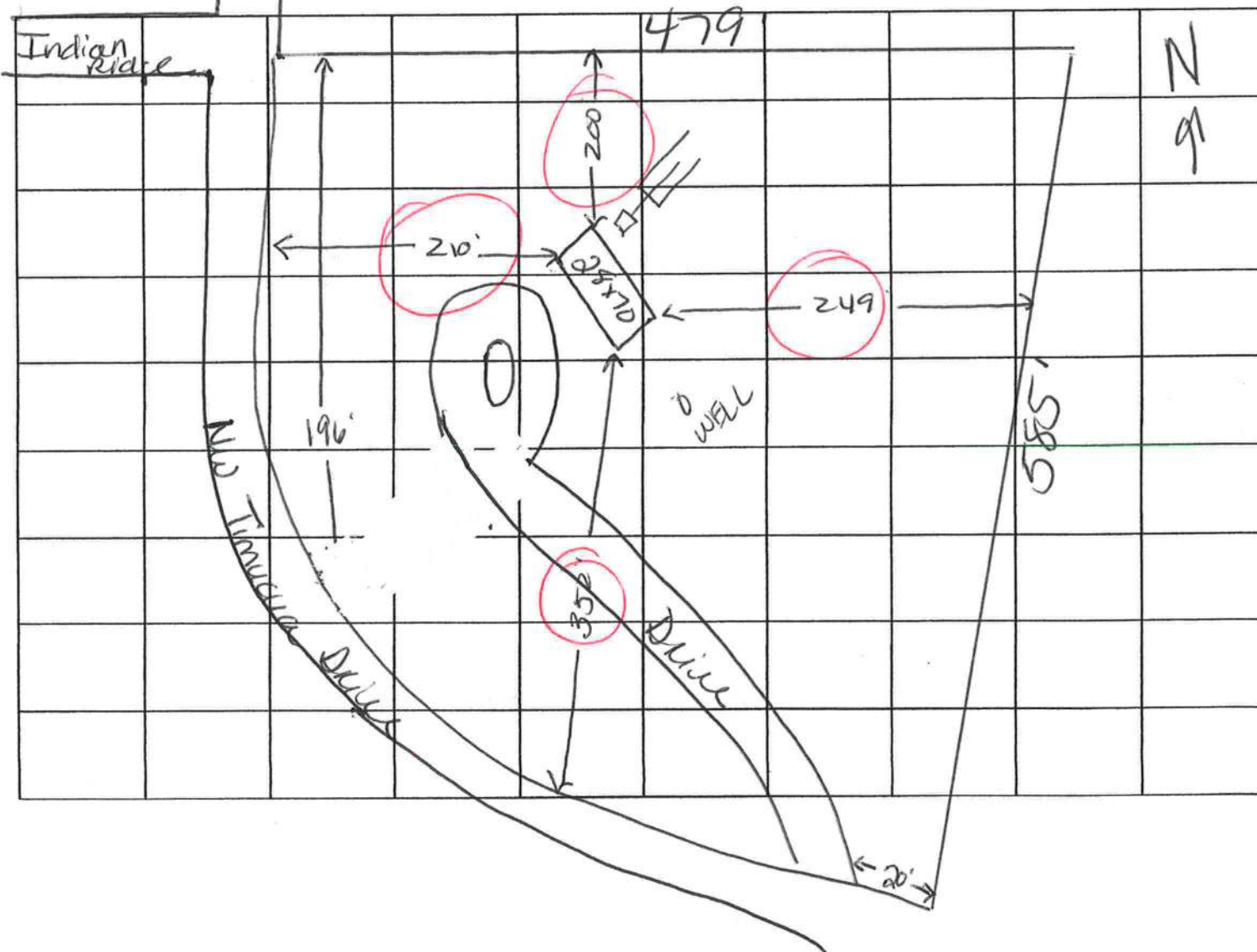
LAND	DESC	ZONE	ROAD	{UD1	{UD3	FRONT	DEPTH	FIELD CK:	UNITS	UT	PRICE	ADJ	UT	PR	LAND VALUE
AE	CODE	TOPO	UTIL	{UD2	{UD4	BACK	DT	ADJUSTMENTS	5.010	AC	7470.000				37,424
Y	000000 VAC RES	A-3	0007					1.00 1.00 1.00 1.00							
			0002												

SITE PLAN EXAMPLE / WORKSHEET

Revised



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.



Parsons Westridge
App # 1102-36

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: 1/20/2011 DATE ISSUED: 1/26/2011

ENHANCED 9-1-1 ADDRESS:

237 NW TIMUCUA DR
LAKE CITY FL 32055
PROPERTY APPRAISER PARCEL NUMBER:
05-3S-16-01809-116

Remarks:

Address Issued By:


Columbia County 9-1-1 Addressing / GIS Department

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

App 1102-36

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

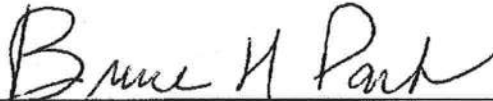
February 21, 2011

To: Columbia County Building Department

Description of Well to be installed for Customer Scott & Stacy Parsons

Located @ Address: 237 NW Timucua Ave.

1 HP 15 GPM submersible pump, 1 1/4" drop pipe, 86 gallon captive tank, and backflow prevention.
With SRWMD permit.



Sincerely,
Bruce N. Park
President

Feb 21 11 05:46p
Feb 15 11 03:58p

Wendy Grennell
Wendy Grennell

3867551031
3867551031

P. 3
P. 6

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1102-36 CONTRACTOR Robert Shepard PHONE 386-623-2203

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	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name <u>ROBERT GRENELL</u> License #: <u>CAC08114971</u>	Signature <u>[Signature]</u> Phone #: <u>800 859 3708</u>
PLUMBING/ GAS	Print Name <u>Robert Shepard</u> License #: <u>TN 1025384</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-2203</u>

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.

Feb 22 11 04:30p

Wendy Grennell

3867551031

P.1

02/26/2011 04:38

9047585576

M AND C ELECTRIC

Feb 21 11 12:06p

Wendy Grennell

3867551031

P.2

Feb 15 11 03:58p

wendy grennell

3867551031

P.0

Parsons/Westridge

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1102-36 CONTRACTOR Robert Shepard PHONE 386-623-2205

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ELECTRICAL	Print Name: <u>John M Courson</u> License #: <u>ER0002038</u>	Signature: <u>[Signature]</u> Phone #: <u>386-752-8575</u>
MECHANICAL/ A/C	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
PLUMBING/ GAS	Print Name: <u>Robert Shepard</u> License #: <u>TH1025386</u>	Signature: <u>[Signature]</u> Phone #: <u>386-623-2205</u>

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 FLORIDA DEPARTMENT OF BUILDING AND ZONING INSPECTION

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 5-3S-16-01809-116

Building permit No. 000029212

Permit Holder ROBERT SHEPPARD

Owner of Building WESTRIDGE, INC.

Location: 237 NW TIMUCUA DRIVE

Date: 02/25/2011



Greg
Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)