

DATE 11/07/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023820

APPLICANT ROY SMITH PHONE 386.935.1429
 ADDRESS POB 838 BELL FL 32619
 OWNER MELVIN & MARY MOCK PHONE _____
 ADDRESS 9567 SW US 27 FT. WHITE FL 32038
 CONTRACTOR JERRY CORBETT PHONE _____
 LOCATION OF PROPERTY 47-S TO FT. WHITE @ LIGHT, TR ON US 27, GO ABOUT 2 MILES, TR @
DRIVEWAY PAST C&G TUBE RENTAL.

TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 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 29-6S-16-03974-003 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 42.96

IH0000790
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor *R. Smith*
 FDOT-APPROVED 05-1110-N BLK JTH N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FOOT ABOVE RD. FDOT APPROVED. SEE ATTACHED APPROVAL.

Check # or Cash 9204⁵

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 _____ Rough-in plumbing above slab and below wood floor _____
 date/app. by _____ date/app. by _____
 Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Permanent power _____ C.O. Final _____ Culvert _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ Pool _____
 date/app. by _____ date/app. by _____
 Reconnection _____ Pump pole _____ Utility Pole _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H Pole _____ Travel Trailer _____ Re-roof _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 90.86 WASTE FEE \$ 134.75
 FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ **TOTAL FEE** 500.61

INSPECTORS OFFICE *[Signature]* 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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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 6-23-05) Zoning Official BLK 03.11.05 Building Official OK JTH 11-03
 APS 0510-86 Date Received 10/27/05 By GT Permit # 23820
 Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A G
 Comments FOOT APPROVED

Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
 Site Plan with Setbacks Shown EH Signed Site Plan EH Release Well letter Existing well
 Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from Installer

- Property ID # 29-105-110-03974-003 Must have a copy of the property deed
- New Mobile Home GENERAL Used Mobile Home _____ Year 2004
- Applicant ~~Arthur~~ Roy Smith Phone # ~~386-935-1425~~ (386) 935-1425
- Address ~~956 P St~~ P.O. Box 838 - Bell, FLA. 32619
- Name of Property Owner Melvin Mock Phone# _____
- 911 Address 9567 SW US Hwy 27, Ft. White, FL 37038
- Circle the correct power company - FL Power & Light - Progress Energy
 (Circle One) - Suwannee Valley Electric - _____
- Name of Owner of Mobile Home Melvin & Mary Mock Phone # 352 283-1439
 Address 9567 SW US 27, Ft. White, FL 37038
- Relationship to Property Owner _____
- Current Number of Dwellings on Property 0
- Lot Size 162.51 x 958.37 Total Acreage 42.960
- Do you : Have an FOOT Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO - (owes)
- Driving Directions to the Property From Lake City - TAKE 47
Go Fort White & LIGHT make (R) ON to US 27
GO ABOUT 2 miles - make (B) of DRIVE UP
Just pass C&G TUBE RENTAL.
- Name of Licensed Dealer/Installer Jeffrey Corbett Phone # _____
- Installers Address 1 Live Oak St
- License Number TH 0000 790 Installation Decal # 215842

LEFT MESSAGE with: MARY
11-4-05

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENT, that the undersigned,

Melvin Modz

State which (Buyer, Seller, Legal Owner)

Of the following vehicle:

Type: Mobile Home Year: 2004

Make: General Serial No. 31506

do hereby authorize and irrevocably appoint:

Tom A. Foster
(Attorney)

my (our) true and lawful Attorney to sign in the name, place and stead of the undersigned, any certificate covering the vehicle described above in whatever manner necessary to effect the transfer of such vehicle title, or application for a duplicate of such vehicle title, or application for a new certificate of title of said vehicle, as he or she may deem fit and proper, hereby ratifying and confirming whatever action said Attorney shall or may take by or through him or her in the premises.

IN WITNESS WHEREOF, the undersigned has executed this information this 12 day of October 2008

Print Full Name Jerry Corbett

X Signature Jerry Corbett

Print Full Name _____

X Signature _____

Print Full Name _____

X Signature _____

Subscribed and sworn before me, a Notary Public in and for the County of Sumner State of Florida, on the date first above written, that the owner acknowledged the same to be his or her free and voluntary act and deed.



Tom A. Foster
MY COMMISSION EXPIRES
October 14, 2008
FORGIVE YOUR TRAVEL INSURANCE ONE.

Tom A. Foster
Notary Public

(SEA) My Commission expires _____
FOA (11/1/08) Original Document

CLYATT WELL DRILLING, INC.

(Established in 1971)

Post Office Box 180

Worthington Springs, FL 32697

Phone (386)496-2488 FAX (386)496-4640

WELL DESCRIPTION

DESCRIPTION DATE

CUSTOMER NAME AND ADDRESS

Mr. Roy Smith
FAX #386-935-1459

DESCRIPTION OF WORK

Melvin Mock Job
4" Well and Pump

DESCRIPTION

4" Well
1 HP Submersible Pump
1-1/4" Galvanized Drop Pipe
14/3 Submersible Pump Wire
81 Gallon Captive Air Tank
4 X 1-1/4 Well Seal
Pressure Relief Valve
Controls, Wire and Fittings
Out-of-state sale, exempt from sales tax

THANK YOU FOR YOUR BUSINESS! This document is provided to give a description of the well to be constructed on your behalf. All materials remain the property of Clyatt Well Drilling, Inc., until paid for in full. Clyatt Well Drilling, Inc., does not agree to find or develop water, nor does it represent, warrant or guarantee the quality or kind of water which may be encountered. If it is necessary to install water filters, the owner agrees it is his/her responsibility to pay the cost. Right to repossess is granted if payment for well is not made.

@ CAM112M01 S CamaUSA Appraisal System
10/27/2005 14:13 Legal Description Maintenance
Year T Property * PRIOR YEAR * Sel
2005 R 29-6S-16-03974-003

Columbia County
Land 000
5971 AG 001
Bldg 000
Xfea 000
5971 TOTAL B

MOCK MELVIN E & MARY S

1	BEG AT SE COR OF NW1/4 OF NE	1/4, RUN W 1323.13 FT, CONT W	2
3	693.11 FT, N 210 FT, W 391.87	FT, NE 211.02 FT, NW 193.55 FT	4
5	NE 115.83 FT, NW 119.56 FT, E	1100.39 FT, N 641.32 FT TO SEC	6
7	LINE, E 662.51 FT, S 1320.45	FT TO POB, EX APPROX 1.54 AC	8
9	DESC IN ORB 1039-466.	ORB 1032-2717 JOINS #3896-001	10
11	.....	.....	12
13	.....	.....	14
15	.....	.....	16
17	.....	.....	18
19	.....	.....	20
21	.....	.....	22
23	.....	.....	24
25	.....	.....	26
27	.....	.....	28

Mnt 3/14/2005 WANDA

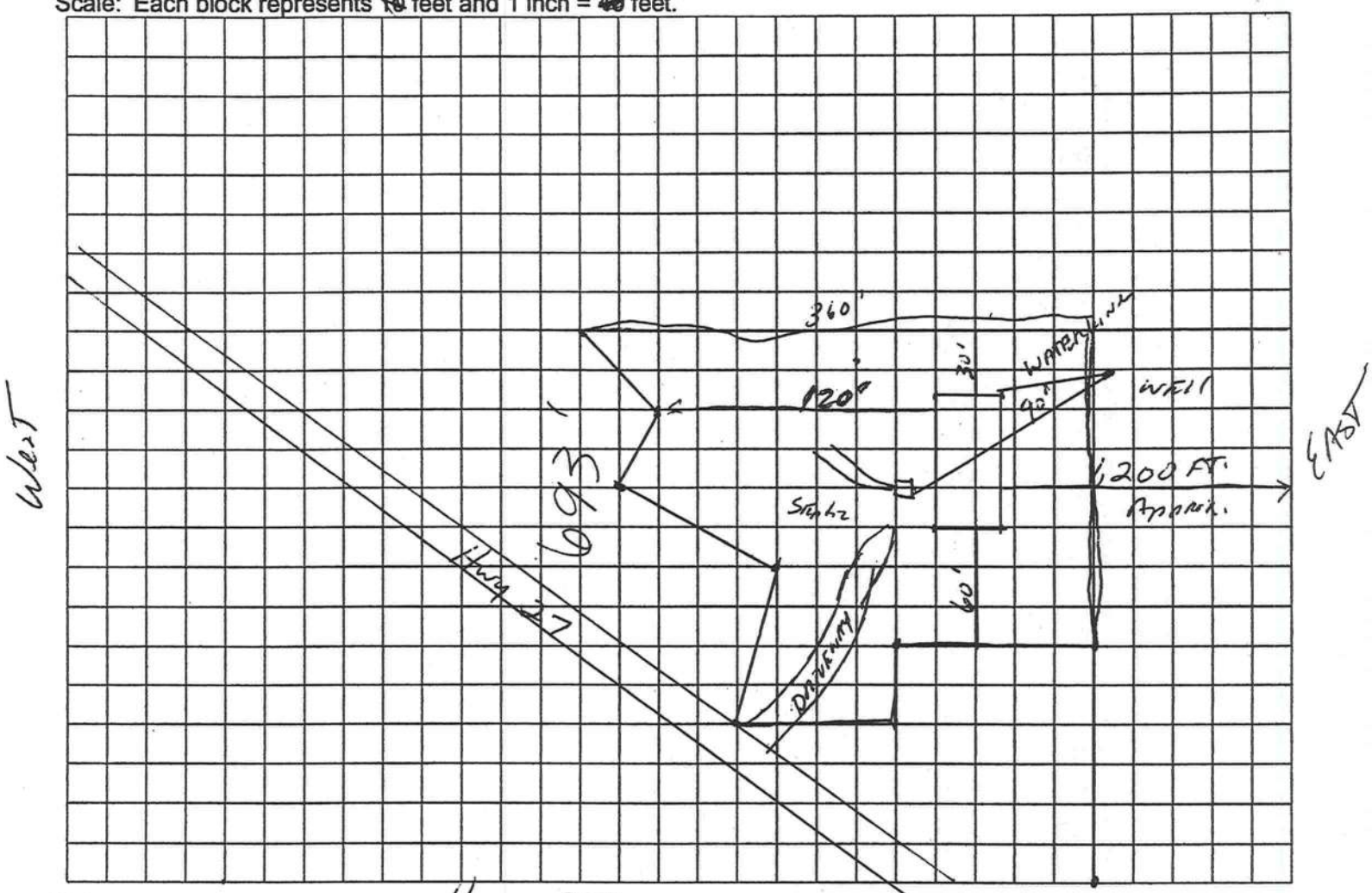
F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

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

Permit Application Number 05-1110N

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

Scale: Each block represents ²⁰10 feet and 1 inch = ⁸⁰40 feet.



Notes: Hwy 27 TOTAL Acres 42.96

Site Plan submitted by: [Signature] see attached forentire area
 Plan Approved [Signature] Not Approved _____ Date 10-27-05
 By Sally Grady -ESI-COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



APPROXIMATE SCALE IN FEET



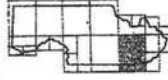
NATIONAL FLOOD INSURANCE PROGRAM

FIRM FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 225 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0225 B

EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mit/bcd.



**FAX
MEMORANDUM****MEMORANDUM****FLORIDA DEPARTMENT OF TRANSPORTATION**

To: Mr. John Kerce, Dept. Director
Columbia Co. Building & Zoning Dept.
Fax No: 386-758-2160

From: Dale L. Cray, FDOT Permits Insp.
Date: 10-31-05 Fax No. 386-961-7183
Attention: Mr. John Kerce

Sign and return. For your files. Please call me. FYI For Review

REF: Notice of Driveway Access Review / Inspected On:10-31-05

PROJECT: Existing Residential Access Driveway

PARCEL ID No: N/A PERMIT# N/A/ SEC#29050

MILE POST N/A Engineer: N/A

Mr. Kerce:

Please accept this as our legal notice for an existing driveway access passing inspection for Melvin & Mary Mock 9567 SW US Hwy 27 Ft. White, Fl. 32038 residential driveway connection to SR-22 / US 27 (W).

The existing access is acceptable and meets FDOT ACCESS Standard Requirements.

If further information is required on this project please do not hesitate to contact this office for additional access permitting information details. My office number is 961-7193 or 961-7146.

Sincerely,



Dale L. Cray
Access Permits Inspector

*Tradition
Homes*

October 17, 2005

To Whom It May Concern:

I Jerry Corbett give Royce Smith permission to pull a mobile home permit for general 28x62 s/n 31506.

Jerry Corbett

Jerry Corbett
Lic.# IH0000790



Treea A. Foster
MY COMMISSION # 00058027 EXPIRES
October 18, 2005
BONDED THRU TROY FAIN INSURANCE, INC.

TREEA A. FOSTER
Treea A. Foster
10/17/05

PERMIT NUMBER

Installer TERRY CORBETT License # IHD000790

Address of home being installed

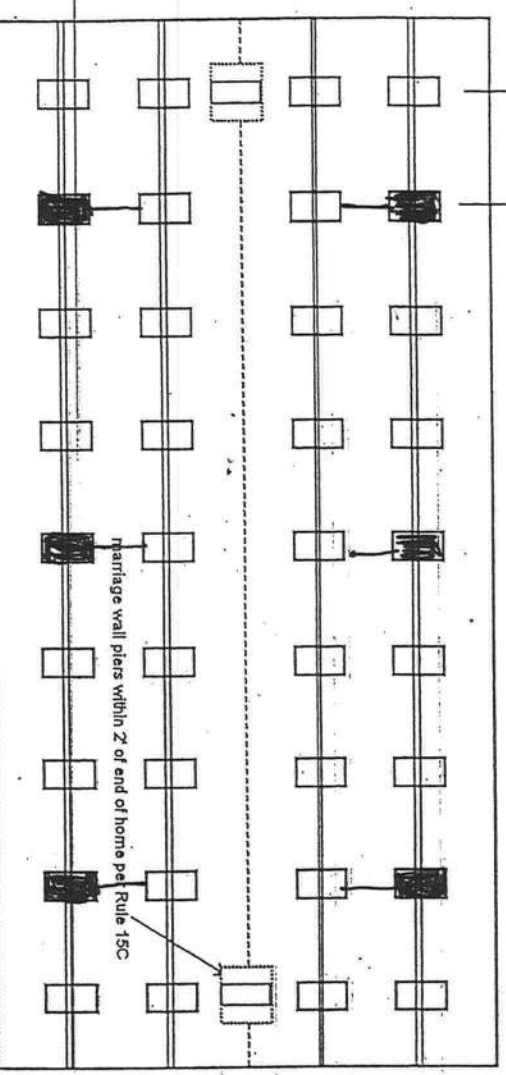
Manufacturer General Length x width 62x28

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

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 # 251842

Triple/Quad Serial # 31506 AB

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 psf	3'	4'	5'	6'	7'	8'	8'
1500 psf	4'6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7'6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17 X 25 X 1

Perimeter pier pad size

17 X 25 X 1

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 8' Pier pad size 17 X 25 X 1

ANGHORS

FRAME TIES

within 2' of end of home spaced at 5'4" oc 28

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer Oliver Tech

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall
 Number 10
10
10

POCKET PENETROMETER TEST

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

X X X

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 X X

TORQUE PROBE TEST

The results of the torque probe test is _____ inch-pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch-pounds or less will require 4-foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewalk 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. Installer's initials _____

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested _____

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. _____

Plumbing

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

Site Preparation

Debris and organic material removed Swale Pad Other _____

Fastening: multi wide units

Floor: Type Fastener: 3/8 Length: 6 Spacing: 24
 Walls: Type Fastener: 3/8 Length: 6 Spacing: 24
 Roof: Type Fastener: 3/8 Length: 6 Spacing: 24
 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 JK

Installed:

Type gasket Carpet
 Pg. _____
 Between Floors Yes
 Between Walls Yes
 Bottom of Ridge Beam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. _____
 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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Jerry Caldwell Date 10/12/05

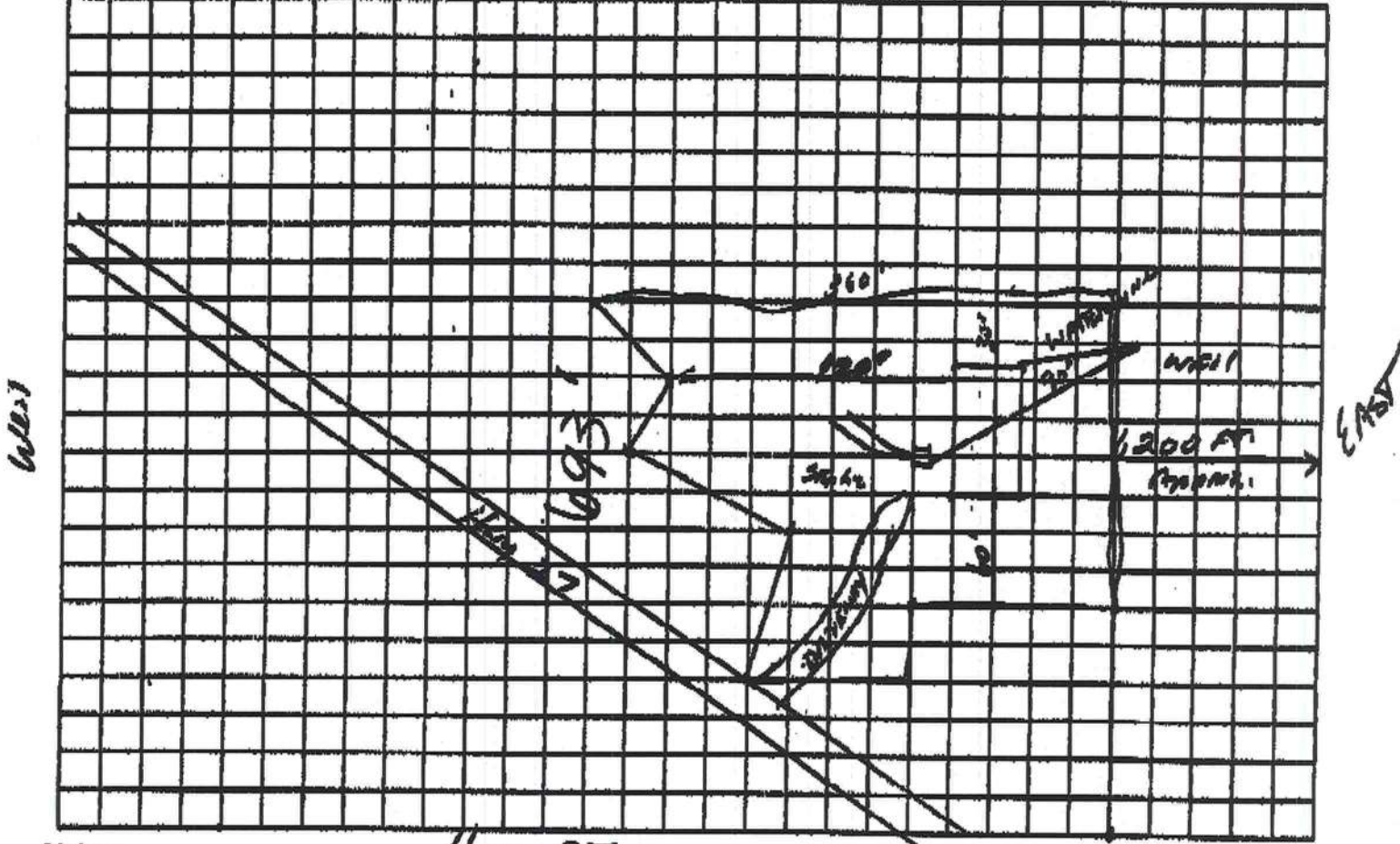
Mock - 05-10-86

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

Permit Application Number 05-1110N

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

Scale: Each block represents ²⁰ 10 feet and 1 inch = ⁸⁰ 40 feet.



Notes: Hwy 27
 TOTAL Area 42.96

Site Plan submitted by: [Signature] see attached for entire area

Plan Approved [Signature] Not Approved _____ Date 10-27-05

By Salli Mader -ES-COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4016, 10/98 (Replaces HRS-H Form 4016 which may be used)
(Stock Number: 8744-002-4016-8)

CHERRYBROOK
OR
ALVINE

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 29-6S-16-03974-003

Building permit No. 000023820

Permit Holder JERRY CORBETT

Owner of Building MELVIN & MARY MOCK

Location: 9567 SW US 27, FT. WHITE, FL 32038

Date: 11/23/2005



Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)