

DATE 06/17/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027887

APPLICANT AMY TERRELL PHONE 352 538-0683
 ADDRESS 232 SW TRUDY WAY FT. WHITE FL 32038
 OWNER AMY TERRELL PHONE 352 538-0683
 ADDRESS 232 SW TRUDY WAY FT. WHITE FL 32038
 CONTRACTOR TERRY THRIFT PHONE 623-0115
 LOCATION OF PROPERTY 47S, TL SR 27, TL COLGATE LOOP, TL TRUDY WAY,
3RD LOT 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 A-3 MAX. HEIGHT _____
 Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
 NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 12-7S-16-04190-003 SUBDIVISION GOLDEN FARMETTES
 LOT 3 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 2.71

IH0000036
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number A Amy Terrell Applicant/Owner/Contractor
 EXISTING 09-335 CS WR
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: EXISTING MH MUST BE REMOVED, ONE FOOT ABOVE THE ROAD

Check # or Cash CASH

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 \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ _____
 FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ **TOTAL FEE** 375.00
 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."

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.

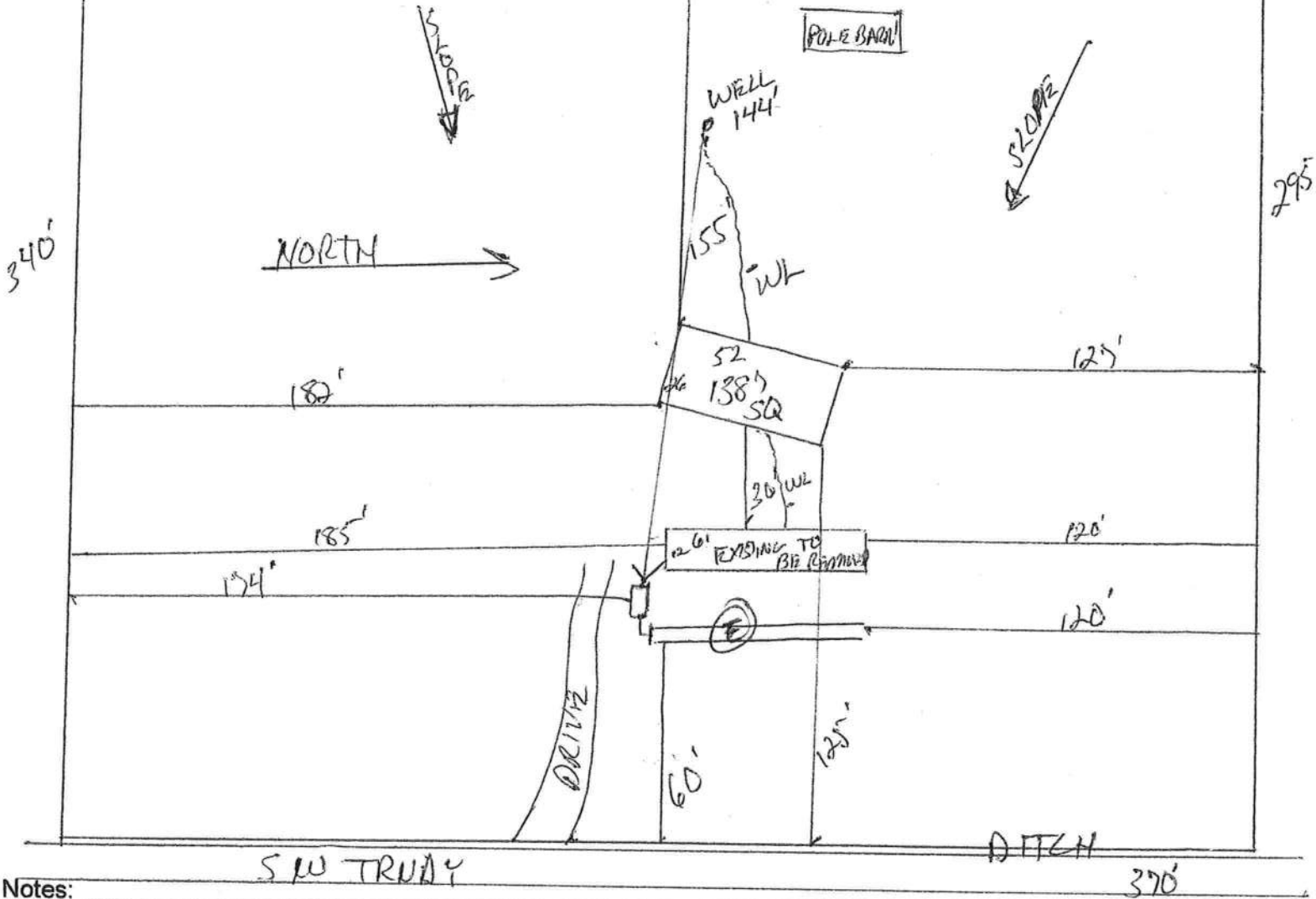
377'

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

Permit Application Number _____

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

Scale: 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Rock D [Signature]
 Plan Approved _____ Not Approved _____
 By _____

MASTER CONTRACTOR
 Date _____
 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Prepared by and return to:
Law Office of Carl L. Johnson
4421 N.W. 39th Avenue Bldg. 1, Suite 2
Gainesville, FL 32606
352-377-7444
File Number: 07-179
Grantee S.S. No.

inst:200712016543 Date:7/24/2007 Time:2:41 PM
Doc Stamp-Deed:486.50
DC, P. DeWitt Cason Columbia County Page 1 of 1

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 30th day of June, 2007 between DONALD J. BENSON whose post office address is 3636 N.W. 33rd Terr., Gainesville, FL 32605, grantor, and AMY TERRELL, a married person whose post office address is 232 SW Trudy Way, Fort White, FL 32638, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof 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 ~~Alachua~~ ^{Columbia} County, Florida to-wit:

Lot 3, GOLDEN FARMETTES, according to the map or plat thereof as recorded in Plat Book 4, Page 17, Public Records of Columbia County, Florida.

Parcel Identification Number: 12-7S-16-04190-003

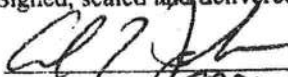
Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

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

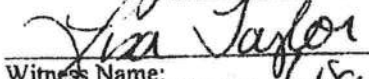
And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2006.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:


Witness Name: CARL L. JOHNSON

 (Seal)
DONALD J. BENSON


Witness Name: LISA TAYLOR

State of Florida
County of Alachua

The foregoing instrument was acknowledged before me this 30th day of June, 2007 by DONALD J. BENSON, who is personally known or has produced a driver's license as identification.

[Notary Seal]


Notary Public

Printed Name: _____

My Commission Expires: _____



Columbia County Property Appraiser

DB Last Updated: 4/27/2009

Parcel: 12-7S-16-04190-003

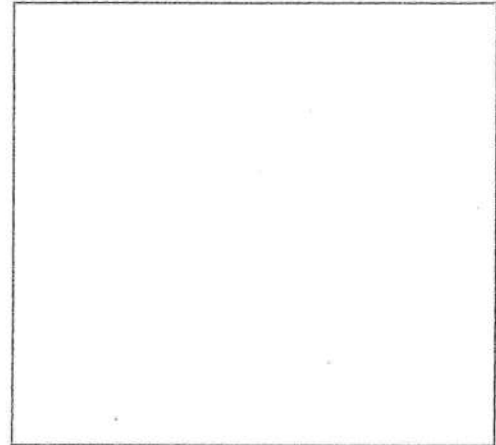
2009 Preliminary Values

Owner & Property Info

<< Prev Search Result: 3 of 18 Next >>

Owner's Name	TERRELL AMY		
Site Address	TRUDY		
Mailing Address	PO BOX 2524 HIGH SPRINGS, FL 32655		
Use Desc. (code)	MOBILE HOM (000200)		
Neighborhood	012716.03	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	2.710 ACRES		
Description	LOT 3 GOLDEN FARMETTES S/D. UNREC DC, ORB 789-897, 877-616, WD 1126-264.		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (2)	\$32,585.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$14,002.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$46,587.00

Just Value	\$46,587.00
Class Value	\$0.00
Assessed Value	\$46,587.00
Exemptions	\$0.00
Total Taxable Value	County: \$46,587.00 City: \$46,587.00 Other: \$46,587.00 School: \$46,587.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
6/30/2007	1126/264	WD	I	Q		\$69,500.00
3/22/1999	877/616	WD	I	Q		\$25,000.00
3/1/1984	534/264	AG	V	Q		\$8,100.00
5/1/1981	467/772	WD	V	Q		\$6,000.00
5/1/1981	467/772	WD	V	Q		\$6,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1973	Average (05)	732	732	\$14,002.00



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

PERMIT NO. _____
 DATE PAID: _____
 FEE PAID: _____
 RECEIPT #: _____

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary _____

APPLICANT: Amy Terrell

AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) 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: 3 BLOCK: na SUB: Golden Farnettes PLATTED: _____

PROPERTY ID #: 12-7S-16-04190-003 ZONING: _____ I/M OR EQUIVALENT: [Y N]

PROPERTY SIZE: 2.71 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 232 SW Trudy Way, Fort White, FL, 32038

DIRECTIONS TO PROPERTY: 47 South, TL on US 27, TL on Colgate Loop, Stay left at fork onto Trudy, 2nd house on left

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	DW Mobile Home	3	1387	
2				
3				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Rocky Ford DATE: 6/10/2009

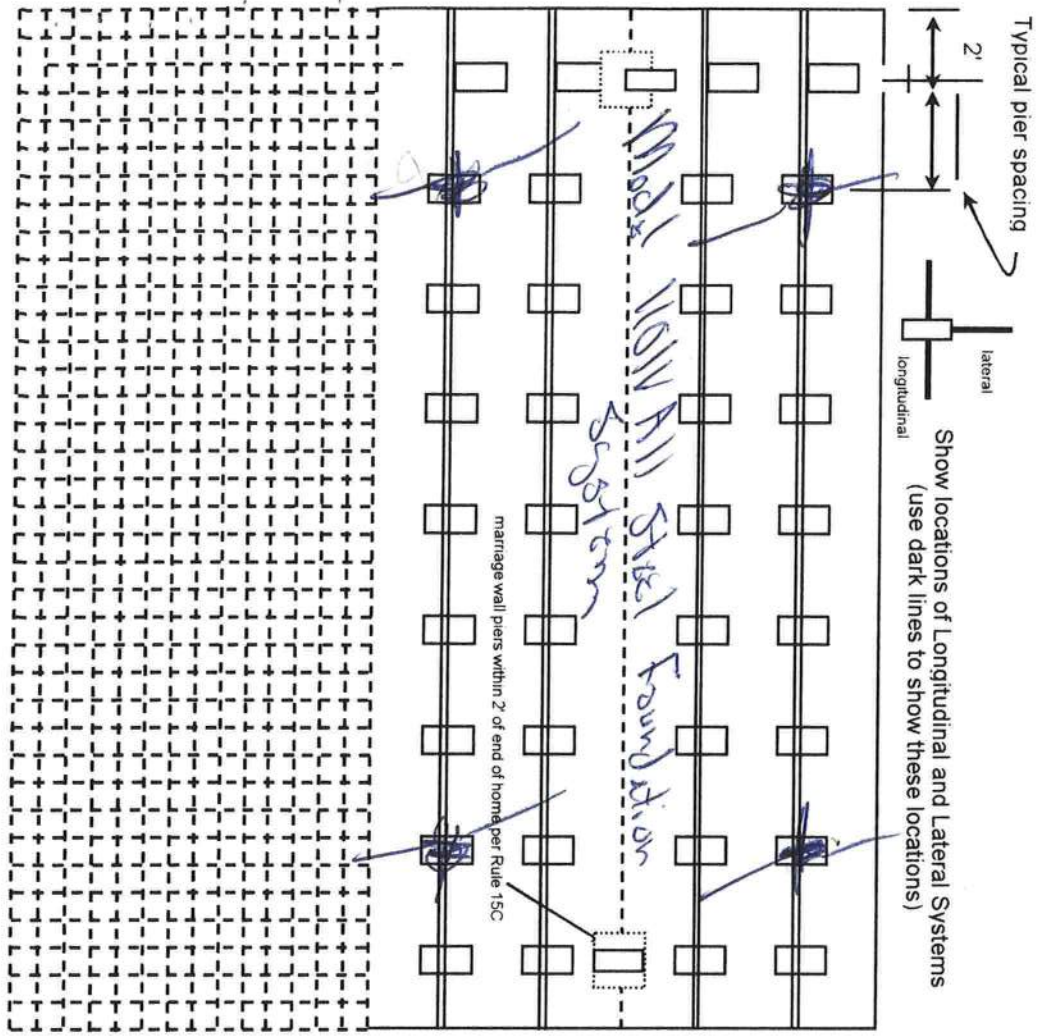
PERMIT WORKSHEET

Installer Teerys L Thrift License # TH-0000036
 Manufacturer Lovon Home Length x Width 52' x 28'
 Name of Owner of this Mobile Home 2828-183 Model 1
 Phone (386) 623-0115
 Address 448 NW rugy Hurston Dr. Lak. City Fla

NOTE: If home is a single wide fill out one half of the blocking plan 32065
 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 IT



New Home Used Home Year 09

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 # 303154

Triple/Quad Serial # 1998 A4B

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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'
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 10" x 25"
 Perimeter pier pad size 16" x 16"

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

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 19'-6" Pier pad size 10" x 25"

4 ft 5 ft

ANCHORS

FRAME TIES

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

OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____
 Manufacturer _____
 Longitudinal Stabilizing Device w/ Lateral Arms _____
 Manufacturer Over Tech

Sidewall _____
 Longitudinal Marriage wall _____
 Shearwall _____

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 285 X 1600 285 X 1500 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.

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 4 foot anchors.

X 1500 285 X 1500 285 X 1500 285

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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name TERRY L. THIRIFT
 Date Tested 6/5/09

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
 Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: LAGS & STUDS Length: 6" 10" Spacing: 24" 32" 00
 Walls: Type Fastener: SCREWS Length: 4" 5" 5" Spacing: 24" 00
 Roof: Type Fastener: SCREWS Length: 4" 5" 10" Spacing: 24" 00
 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 THT

Type gasket Form
 Pg. Tape
 Installed: Between Floors
 Between Walls
 Bottom of ridgebeam

Weatherproofing

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

Miscellaneous

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

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

Installer Signature Terry L. Thirift Date 6/5/09

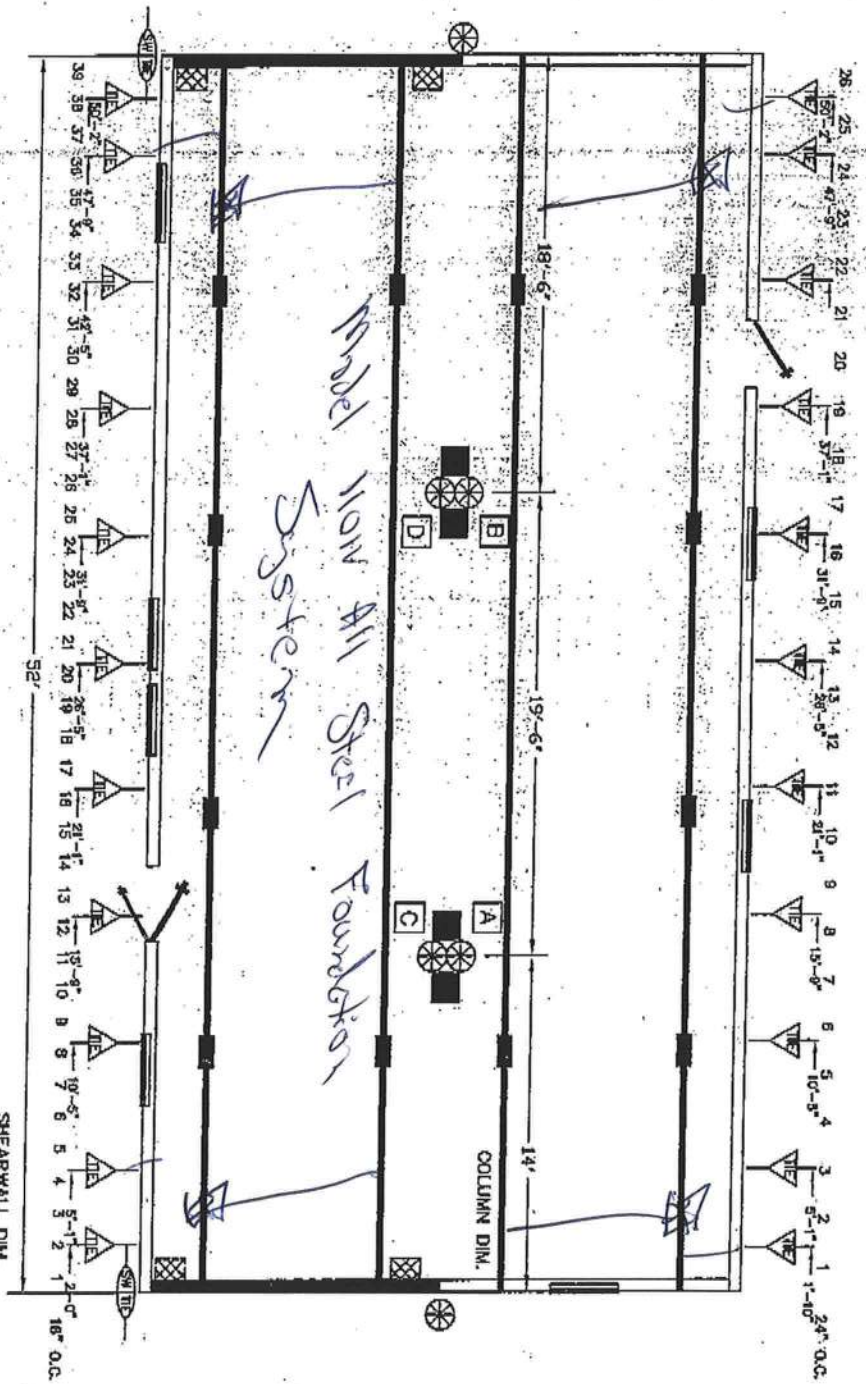
- I-BEAM BLOCKING
- SHEARWALL FRAME TIE
- CENTER LINE TIES
- VERTICAL TIE
- LONGITUDINAL TIES

SEE SOLE BEARING CAPACITY CHARTS FOR SPACING
 COLUMN BLOCKING
 SEE SOLE BEARING CAPACITY CHARTS FOR PAD SIZE
 SHEARWALL BLOCKING

SHEARWALL TIE

BLOCKING LEGEND:

- 1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS 48" OR GREATER, WILL REQUIRE BLOCKING ON EACH SIDE.
- 2) 32" WIDE HOMES REQUIRED TO BE BLOCKED MAIN 8'-0" ON CENTER BETWEEN COLUMNS.



Correll 28x52'

TownHomes
 P.O. BOX 1059
 LAKE CITY, FLORIDA
 32058

Revisions

Date:	10-2-07	Code:	2828A
Drawn:	ROB	Parent:	NEW
Code:	T (07)	Model:	2828-183
Zone:	2	Print:	BLOCKING PLAN

LIMITED POWER OF ATTORNEY

I, TERRY L. THRIFT, LICENSE #1H-0000036 EXPIRING 09-30-2009. DO HEREBY AUTHORIZE Amy Terrell TO BE MY REPRESENTATIVE AND ACT ON MY BE HALF IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME MOVE ON PERMIT TO BE INSTALLED IN Columbia COUNTY, FLORIDA.

Terry L. Thrift
TERRY L. THRIFT

6-8-09
DATE

SWORN TO AND SUBSCRIBED BEFORE ME THIS 8 DAY OF June 2009.

Rebecca L. Arnau
NOTARY PUBLIC



PERSONALLY KNOWN:

PRODUCED ID: _____

YEAR _____ MAKE _____ SN# _____

PROPERTY ID/LOCATION _____

MOBILE HOME INSTALLERS AFFIDAVIT

Florida Statue Section 320.8249 Requires Mobile Home Installers to be Licensed:

Any person who engages in mobile home installation shall obtain a mobile home installers license from the Bureau of Mobile Home and Recreational Vehicle construction of the Department of Highway Safety and Motor Vehicles Pursuant to this section.

I, Terry Thrift, License No. IH0000036 do hereby state that the installation of the manufactured home at:

232 Sw Trudy way Ft. white FL 32038
(911 Address of the Job Site)

Will be done under my supervision.

Terry Thrift
Terry Thrift - Signature

Sworn to and subscribed before me this 8 day of June, 2009.

Notary Public: Rebecca L. Arnan

(Seal)

