

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

\$155.59

For Office Use Only

(Revised 7-1-15)

Zoning Official

Building Official

AP# 44522

Date Received 2/12/20

By MG

Permit # 39331

Flood Zone X

Development Permit

Zoning A-3

Land Use Plan Map Category Ag

Comments

1' above road

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH# 20-0120 ☒ Well letter OR

☒ Existing well ☒ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # ☐ STUP-MH ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment on Property ☐ Out County ☐ In County ☒ Sub VF Form

owed

Property ID # 11-5S-15-00439-106 Subdivision Siloam Crossing, Blk A Lot# 6

New Mobile Home X Used Mobile Home MH Size 32 x 76 Year 2020

Applicant Dale Burd Phone # 386-365-7674

Address 20619 County Road 137, Lake City, FL, 32024

Name of Property Owner North Florida Land Group Inc Phone# 386-755-4050

911 Address 530 SW Siloam St LC, FL 32024

Circle the correct power company - FL Power & Light - (Clay Electric)
(Circle One) - Suwannee Valley Electric - Duke Energy

Name of Owner of Mobile Home Krystal Craig Phone # 386-628-1493

Address 201 SE Kiwi Way, Lake City, FL, 32024

Relationship to Property Owner Contract for Deed

Current Number of Dwellings on Property 0

Lot Size 330 x 660 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 SR 247 South, TR Siloam St, 3/10ths mile on left

Name of Licensed Dealer/Installer Robert Sheppard # 2163 Phone # 386-623-2203

Installers Address 6355 SE CR 245, Lake City, FL, 32025

License Number IH-1025386 Installation Decal # 65476

Parcel: 11-5S-15-00439-106

Owner & Property Info

Result: 1 of 0

Owner	NORTH FLORIDA LAND GROUP INC P O BOX 1432 LAKE CITY, FL 32056		
Site	,		
Description*	LOT 6 BLOCK A SILOAM CROSSING S/D.		
Area	5.01 AC	S/T/R	11-5S-15
Use Code**	VACANT (000000)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2019 Certified Values	2020 Working Values	
There are no 2019 Certified Values for this parcel	Mkt Land (1)	\$27,000
	Ag Land (0)	\$0
	Building (0)	\$0
	XFOB (0)	\$0
	Just	\$27,000
	Class	\$0
	Appraised	\$27,000
	SOH Cap [?]	\$0
	Assessed	\$27,000
	Exempt	\$0
Total Taxable	county:\$27,000 city:\$27,000 other:\$27,000 school:\$27,000	

2019 2016 2013 2010 2007 2005 Sales [\(zoom parcel\)](#) [click](#) [hover](#)

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Audrey Bullard North Florida Land Group Inc
as the owner of the below described property:

Property tax Parcel ID number 11-5S-15-00439-106

Subdivision (Name, lot, Block, Phase) Siloam Crossing, Lot 6, Blk A

Give my permission for Krystal Craig to place a

Circle one ☒ Mobile Home ☐ Travel Trailer / Utility Pole Only / Single Family Home /
☐ Barn - Shed - Garage / Culvert / Other _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

x Audrey Bullard
Owner Signature

2/12/20
Date

Owner Signature

Date

Owner Signature

Date

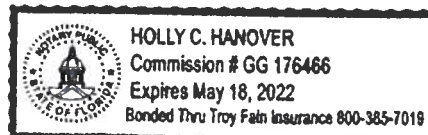
Sworn to and subscribed before me this 12 day of February, 20 20 This

(These) person(s) are personally known to me or produced ID _____ (Type)

Holly C Hanover
Notary Public Signature

Holly C Hanover
Notary Printed Name

Notary Stamp/



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE 386-623-2203

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

Krystal Craig

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 1074 ✓	Print Name <u>Glenn Whittington</u> License #: <u>EC 13002957</u>	Signature <u>[Signature]</u> Phone #: <u>386-972-1700</u> Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/A/C 11669 ✓	Print Name <u>Ronald Bonds Sr.</u> License #: <u>CAC1817658</u>	Signature <u>[Signature]</u> Phone #: <u>800-259-3470</u> Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015



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

LICENSED QUALIFIER AUTHORIZATION

I, Ronald E Bonds Sr (license holder name), licensed qualifier for STYLE CREST ENTERPRISES, INC (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burd	1.
2. Rocky Ford	2.
3. Kelly Bishop	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized) License Number CRC 1817658 Date 2-16-14

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Bay

The above license holder, whose name is Ronald Edward Bonds Sr personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 16th day of FEB, 20 14.

Stacey Ann Hopkins
NOTARY'S SIGNATURE

(Seal/Stamp)





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

LICENSED QUALIFIER AUTHORIZATION

I, Glen Whittington (license holder name), licensed qualifier
for Whittington Electric Inc (company name), do certify that
the below referenced person(s) listed on this form is/are contracted/hired by me, the license
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said
person(s) is/are under my direct supervision and control and is/are authorized to purchase and
sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Walter Ford</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or
officer(s), you must notify this department in writing of the changes and submit a new letter of
authorization form, which will supersede all previous lists. Failure to do so may allow
unauthorized persons to use your name and/or license number to obtain permits.

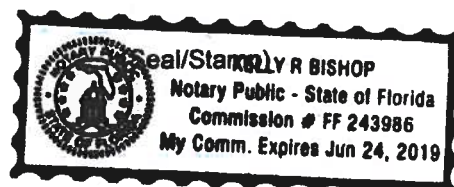
[Signature] License Qualifiers Signature (Notarized) EL13002957 License Number 3/7/16 Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL DL on this 7 day of MARCH, 20 16.

[Signature]
NOTARY'S SIGNATURE



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

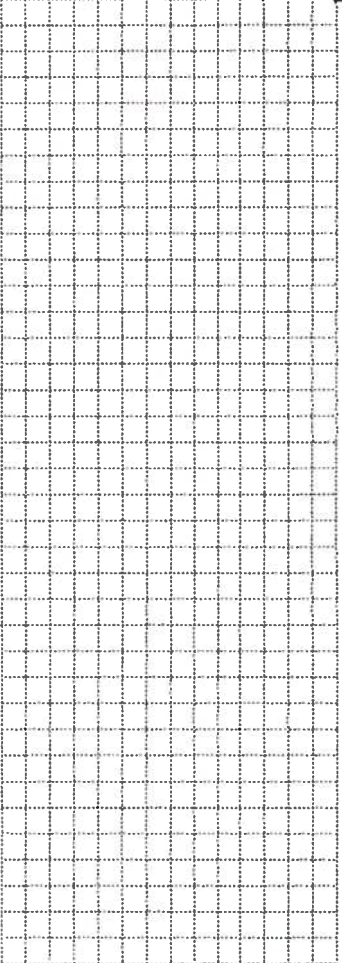
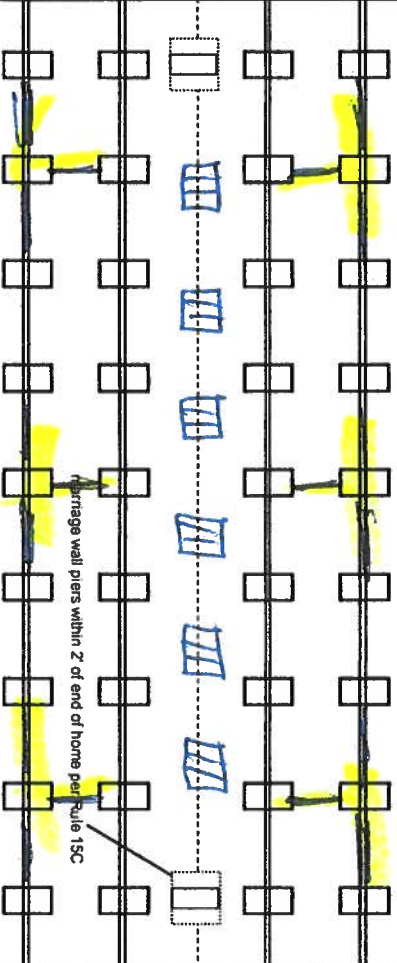
Installer: Robert Sheppard License # IH 1025386

Address of home being installed 305 S. 1st St

Manufacturer LIVE DAK Length x width 80 x 32

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 R.S.



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 # 65476

Triple/Quad ☐ Serial # 1016A12020928 AB

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 17x25
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg.) 17x25

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

4 ft ☒ 5 ft ☐

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer Claver Hill

Longitudinal Marriage wall Shearwall Number 26

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X 1500 X 1600 X 1600

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 1500 X 1600

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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

2-11-2020

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. 29

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 ☒ Swale ☒ Pad ☒ Other _____

Fastening multi wide units

Floor: Type Fastener: legs Length: 5 Spacing: 16"
Walls: Type Fastener: straps Length: 4 Spacing: 16"
Roof: Type Fastener: lags Length: 6 Spacing: 16"

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 RS

Type gasket Pg. 22 Foam

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

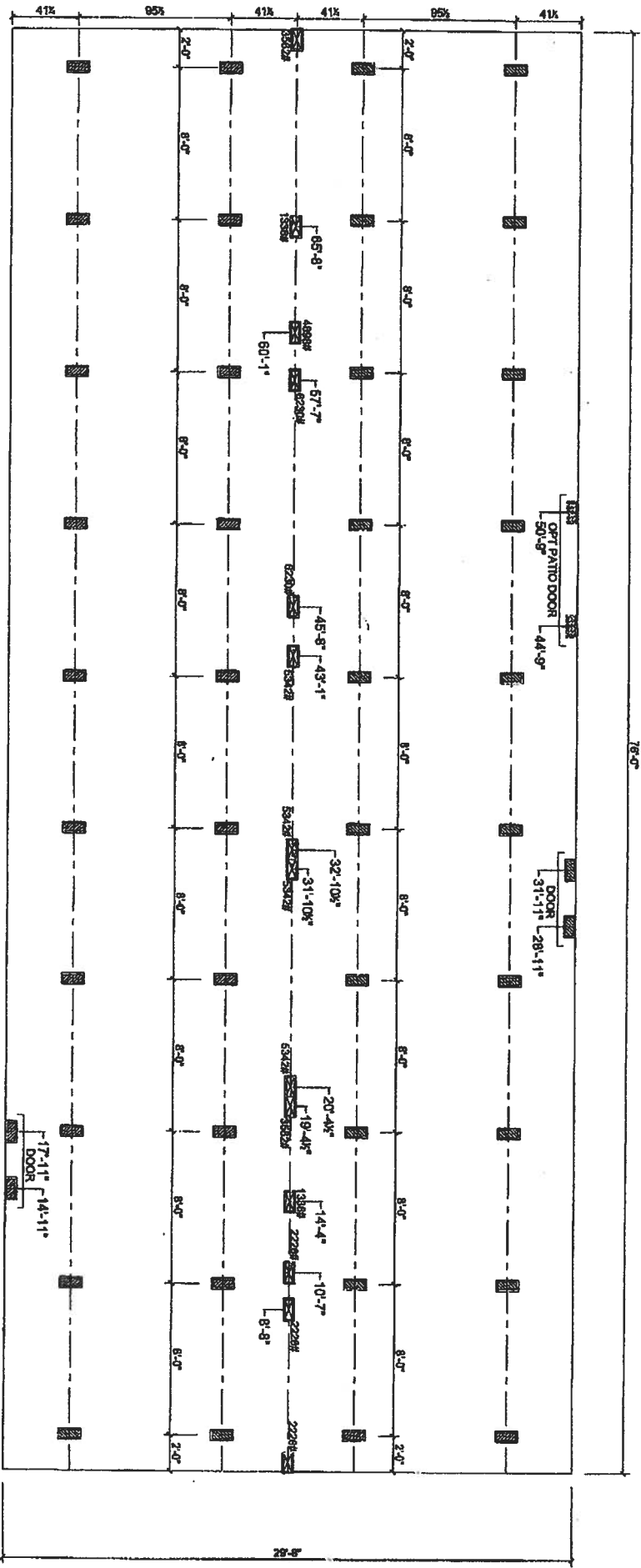
Miscellaneous

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 _____

Date 2-11-2020



● TIEDOWN LOCATIONS (FOR CONCRETE SLAB SET)
 ■ MARRIAGE LINE OPENING SUPPORT PIER/TYP.
 ■ SUPPORT PIER/TYP.
 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.

Live Oak Homes
MODEL: P-3764N - 32 X 80
4-BEDROOM / 2-BATH

Legend

Parcels

2018Aerials



Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

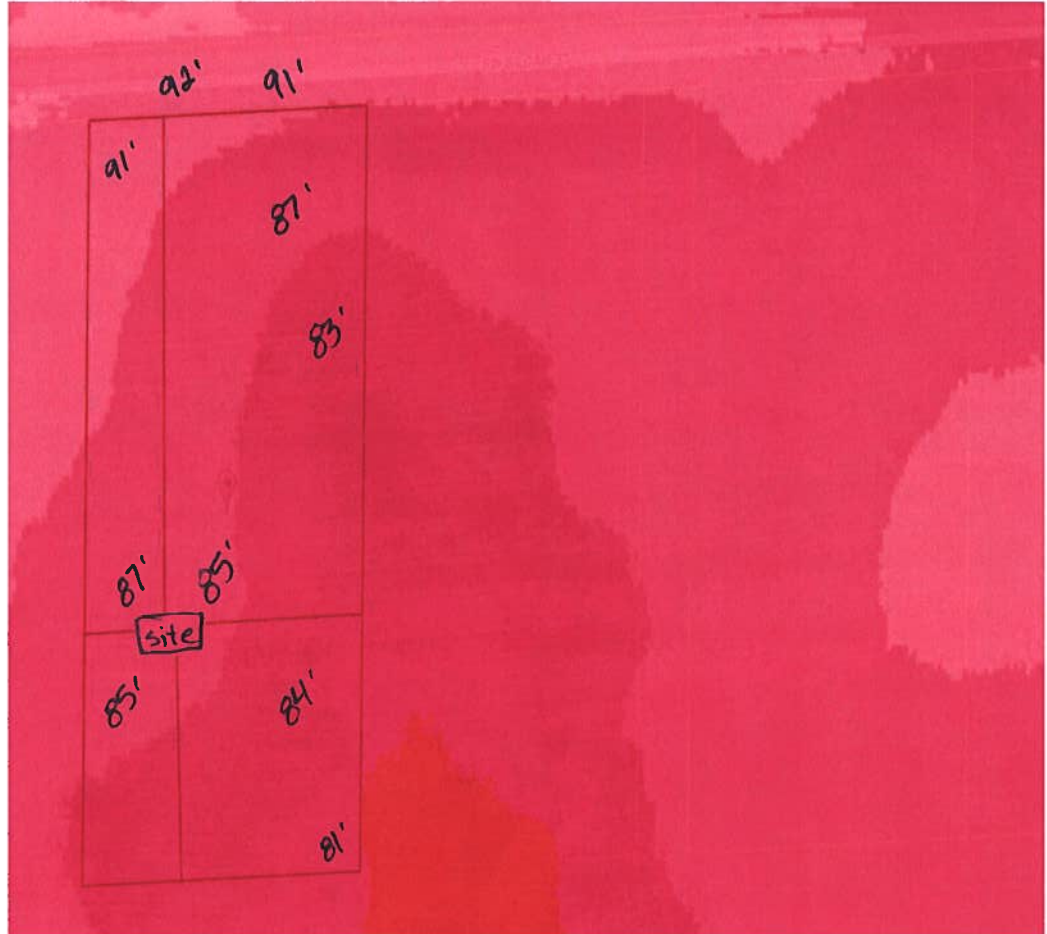
Private

LidarElevations



Columbia County, FLA - Building & Zoning Property Map

Printed: Fri Feb 21 2020 08:38:02 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 11-5S-15-00439-106

Owner: NORTH FLORIDA LAND GROUP INC

Subdivision: SILOAM CROSSING

Lot:

Acres: 4.998981

Deed Acres: 5.01 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

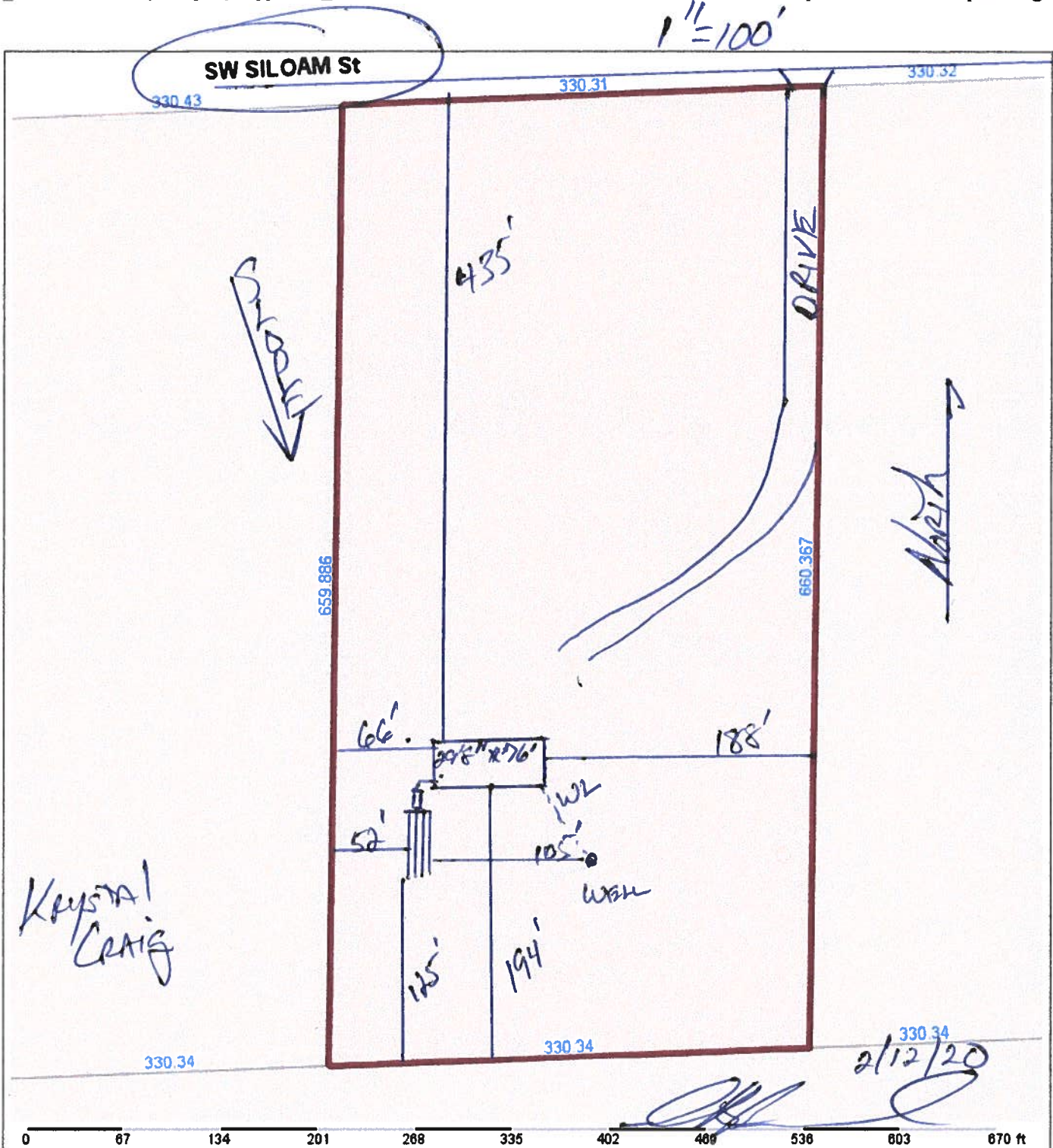
Flood Zones:


Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

SRWMD Wetlands

2018 Flood Zones



Columbia County Property Appraiser Jeff Hampton Lake City, Florida 386-758-1083		
PARCEL: 11-5S-15-00439-106 VACANT (000000) 5.01 AC LOT 6 BLOCK A SILOAM CROSSING S/D.		
NORTH FLORIDA LAND GROUP INC Owner: P O BOX 1432 LAKE CITY, FL 32056 Site: Sales Info	2020 Working Values Mkt Lnd \$27,000 Appraised \$27,000 Ag Lnd \$0 Assessed \$27,000 Bldg \$0 Exempt \$0 XFOB \$0 county:\$27,000 Just \$27,000 Total city:\$27,000 Taxable other:\$27,000 school:\$27,000	NOTES:  Columbia County, FL
This information,, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com		

A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

(O) 386-758-3409

(F) 386-758-3410

(C) 386-623-3151

2/12/2020

To: Columbia County Building Department

Description of well to be installed for Customer:

Located at Address:

KRYSTAL CRAIG
SW 5100th ST, LC, FL, 32024

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park
Sincerely
Bruce Park
President



Detail by Officer/Registered Agent Name

Florida Profit Corporation

NORTH FLORIDA LAND GROUP, INC

Filing Information

Document Number P06000007703 FEI/EIN Number 20-4193802 Date Filed 01/19/2006 State FL
Status ACTIVE Last Event AMENDMENT Event Date Filed 08/02/2019 Event Effective
Date NONE

Principal Address

2753 E. US HWY 90
LAKE CITY, FL 32055

Mailing Address

P.O. BOX 1733
LAKE CITY, FL 32056-1733

Changed: 02/13/2007

Registered Agent Name & Address BULLARD, AUDREY S.

2753 E. US HWY 90
LAKE CITY, FL 32055

Officer/Director Detail Name & Address

Title DVST

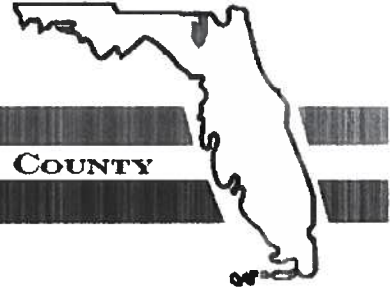
BULLARD, AUDREY S
P.O. BOX 766
LAKE CITY, FL 32056

Title DP

BULLARD, CHRIS A
PO BOX 1432
LAKE CITY, FL 32056

44522

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy

**BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY****Address Assignment and Maintenance Document**

To maintain the county wide 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 addressing 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 Services 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/Time Issued: 2/13/2020 6:57:44 PM

Address: 530 SW SILOAM St

City: LAKE CITY

State: FL

Zip Code 32024

Parcel ID 00439-106

REMARKS: Address for proposed structure on parcel.

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

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com



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

App# 44522

PERMIT NO. 28-0120
DATE PAID: 2/17/50
FEE PAID: 310.00
RECEIPT #: 468105

APPLICATION FOR:

[X] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: North Florida Land Group Inc - Crarg

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, 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: 6 BLOCK: A SUB: Siloam Crossing PLATTED:

PROPERTY ID #: 11-5S-15-00439-106 ZONING: I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: SW Siloam St Lake City FL 32038

DIRECTIONS TO PROPERTY: 247 South Right on Siloam St to lot on Left

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	4	2560	
2				
3				

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

SIGNATURE: William D. Bishop II

DATE: 2-12-20

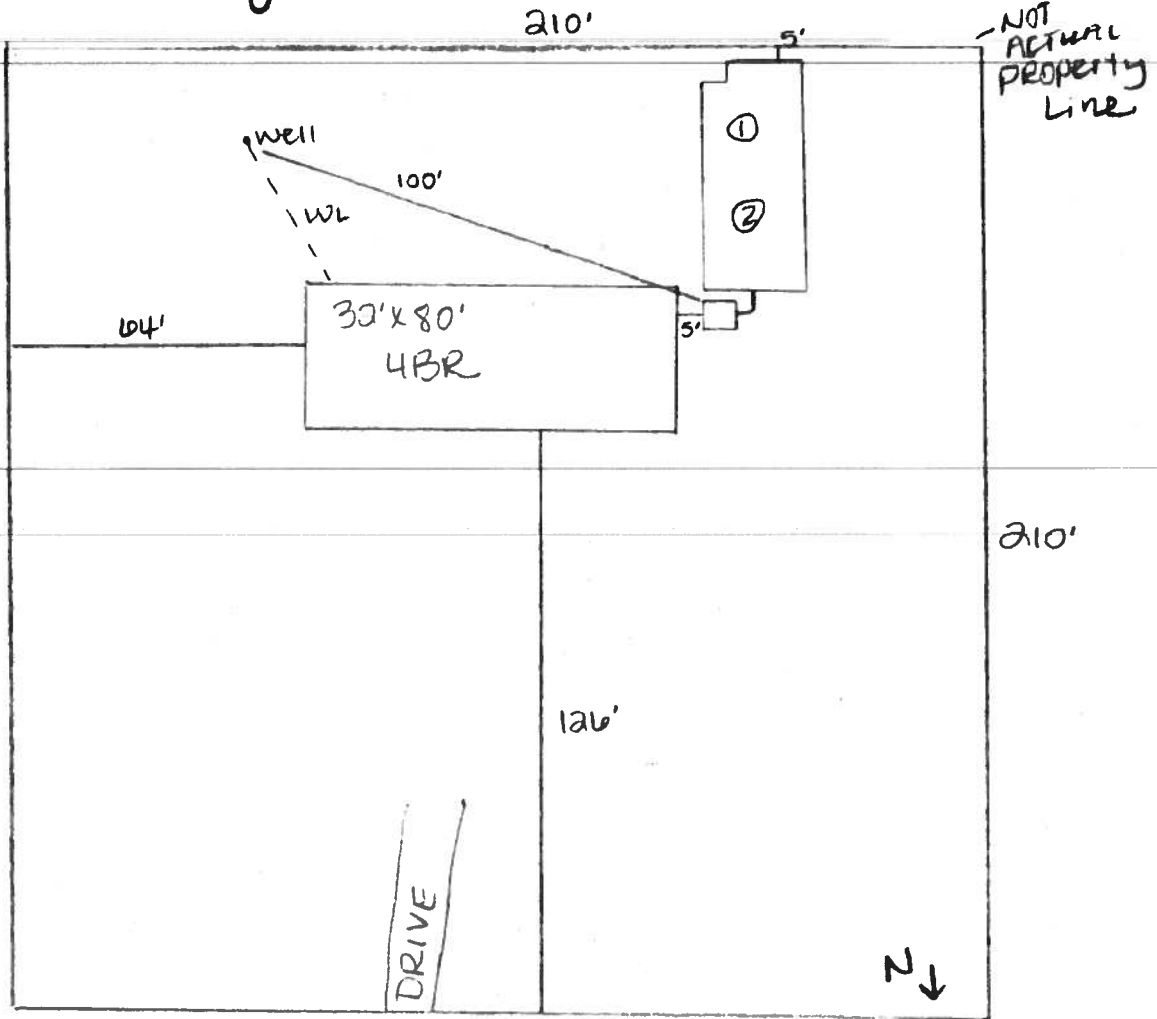
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 20-0120

No. Fla. Land Group / Craig

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

1 ACRE OF 5.01

Site Plan submitted by William D. Bishop II

Plan Approved X

Not Approved

By [Signature]

MASTER CONTRACTOR

Date 2-12-20

County Health Department

2/20/20

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT