Serial# Freul #
PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only AP#(Revised 7-1-15)Zoning Official $M_{4}$ $7-15-17$ Building Official $T_{7}$ $7/20/17$ AP# $1707-52$ Date Received $7-19-17$ By $M_{4}$ Permit # $35631$
Flood Zone <u>X</u> Development Permit <u>Zoning AF</u> Land Use Plan Map Category <u>AF</u> Comments <u>Dedication IV Acres to Mon's MIH from the Sons</u> <u>YO AC parcel / End Unit on Property</u>
FEMA Map# Elevation Finished Floor River In Floodway
Recorded Deed or Property Appraiser PO Site Plan EH # 17-0729 Well letter OR
Existing well Land Owner Affidavit Installer Authorization F <del>W Comp. lette</del> r App Fee Paid Vz Wurd offur Broffin DOT Approval Parent Parcel # STUP-MH TOP 11 App Ellisville Water Sys Assessment fruid Out County In County Sub VF Form
3/35/6 Property ID # Lot# Subdivision Lot#
New Mobile Home Used Mobile Home MH Size 14156 Year
<ul> <li>Applicant <u>Rebecch Eolenfield</u> Phone # <u>386 397 0656</u></li> </ul>
Address 4533 SE High FAlls Rol Lake (ity 71 32025
<ul> <li>Name of Property Owner <u>Joshua Thovn Hs</u> Phone# <u>386 544 1827</u></li> </ul>
· 911 Address 159 5W Bunther Court Labe City 71 32024
<ul> <li>Circle the correct power company - <u>FL Power &amp; Light</u> - <u>Clay Electric</u></li> </ul>
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home Joshua Thomas Phone # 3863441829 Address 261.56 Guinther Court - Lake City 71 32024
<ul> <li>Relationship to Property Owner <u>SAMC</u></li> </ul>
Current Number of Dwellings on Property
Lot Size <u>40</u> Total Acreage <u>40 ACRES</u>
<ul> <li>Do you : Have <u>Existing Drive</u> or <u>Private Drive</u> or need <u>Culvert Permit</u> (Currently using)</li> <li>(Blue Road Sign)</li> <li>(Blue Road Sign)</li> <li>(Putting in a Culvert)</li> <li>(Not existing but do not need a Culvert)</li> </ul>
Is this Mobile Home Replacing an Existing Mobile Home <u>NO</u>
<ul> <li>Driving Directions to the Property FROM West USGO TURN onto Thomas Road,</li> <li>Turn Right active Mahar Lange Trans 1 1th active Read,</li> </ul>
Turn Right onto Arbor LANE, TURN Left onto Bunther Court 1st site on Bunther.
Name of Licensed Dealer/Installer_ROWNIT_NORRISPhone # 386 623 7716
<ul> <li>Installers Address 100 4 50 Chut TK.</li> </ul>
License Number $\underline{THI02SI45/n}$ Installation Decal # $\underline{45020}$
\$ 00000 4396170

Mobile Home Permit Worksheet	Application Number: Date:
00	New Home 🔲 Used Home
Installer TONNI'E NORS License # I H/WS/45/1	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C
Address of nome being installed	Single wide Wind Zone II Wind Zone III
Manufacturer Fred word Length x width 14 561	Double wide Installation Decal # 9502.0
f home is a single wide fill out one half of the blocki	Triple/Quad Serial # Guilt GA 204 0024950
NOTE: If nome is a single wide fill out one nair 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)	PIER SPACING TABLE FOR USED HOMES
where the sidewall ties exceed 5 ft 4 in. Installer's initials	Footer 16" x 16" 1
Typical pier spacing	(576)*
2' Show locations of Longitudinal and Lateral Systems	2 4'6" 4' 5' 6' 7' 8'
Inngitudinal (use dark lines to show these locations)	2000 psf 6' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'
	<u>8</u> <u>8</u>
	* interpolated from Rule 15C-1 pier spacing table
] ] ] ] ]	I-beam pier pad size
	Perimeter pier pad size $1000000000000000000000000000000000000$
	16 x 22.5 17 x 22 17 x 22
	age 20 x 20 1/1
marnage wall piers within 2' of end of home per Rule 15C	to show the piers. $\frac{17}{24 \times 24}$
	and their pier pad sizes below. ANCHORS
	Opening Pier pad size $S = \frac{4}{10}$ 5 ft
	SU SW FRAME TIES
	Si Si Si Spaced at 5' 4" oc
	TIEDOWN COMPONENTS OTHER TIES
	Longitudinal Stabilizing Device (LSD) Sidewall Annufacturer Longitudinal Stabilizing Device w/Lateral Arms Marriage woll

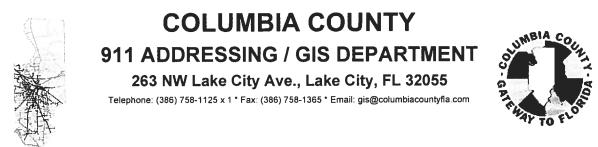
Page 1 of 2

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Connect all sewer drains to an existing sewer tap or septic tank. Pg.	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.	Electrical	Date Tested	ALL TESTS MUST BE DERFORMED BY A LICENSED INSTALLER	Installer's initials	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 requires anchors with 400000 holding capacity.		TORQUE PROBE TEST The results of the torque probe test is 255 inchorunds or check here if you are declaring 5' anchors without testing A test showing 275 inch bounds or less will require 5 foot anchors		3. Using 500 lb, increments, take the lowest	<b>POCKET PENETROMETER TESTING METHOD</b> <ol> <li>Test the perimeter of the home at 6 locations.</li> <li>Take the reading at the depth of the footer.</li> </ol>	x /Sw x /Sw x /Sw	The pocket penetrometer tests are rounded down to set psf or check here to declare 1000 lb, soil without testing.	POCKET PENETROMETER TEST	Mobile Home Permit Worksheet
Installer Signature June School Date 7-19 011		is accurate and true based on the	Installer verifies all information given with this permit worksheet		Urain lines supported at 4 toot intervals. Yes Electrical crossovers protected. Yes Other :	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	Miscellaneous	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	Weatherproofing	Type gasket Set Installed: Pg. Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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.	Gasket (weatherproofing requirement)	Roof: Type Fastener Length: Spacing: 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.	Type Fastener	Water drainage: Natural Swale Pad V Other	Site Preparation	Application Number: Date:

## 1707-52 CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

<

MOBILE HO	ME PARKSUBDIVISION
DRIVING	An 1st Rd, so past D/13 to s/12 to back light.
MOBILE HO	ME INSTALLER RONNic Norris PHONE CELL 623-7716
	OME INFORMATION
MAKE	fleetwood year size 14 x 56 color Grey
SERIAL No.	>
WIND ZONE	Must be wind zone II or higher NO WIND ZONE   ALLOWED
	ON STANDARDS
NTERIOR: P or F) - I	P= PASS F= FAILED
P	SMOKE DETECTOR () OPERATIONAL () MISSING
P	FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION
P	DOORS () OPERABLE () DAMAGED
p	WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND
ρ	WINDOWS () OPERABLE () INOPERABLE
P	PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING
·ρ	CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT
p	ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING
EXTERIOR:	WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
P	WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT
P	ROOF ( ) APPEARS SOLID ( ) DAMAGED
STATU	S /
APPROVED	



#### 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:	7/24/2017 3:24:45 PM
Address:	159 SW GUNTHER Ct
City:	LAKE CITY
State:	FL
Zip Code	32024
Pracel ID	02414-002

REMARKS: Address for proposed structure on parcel. 2nd location on parcel.

Address Issued By:

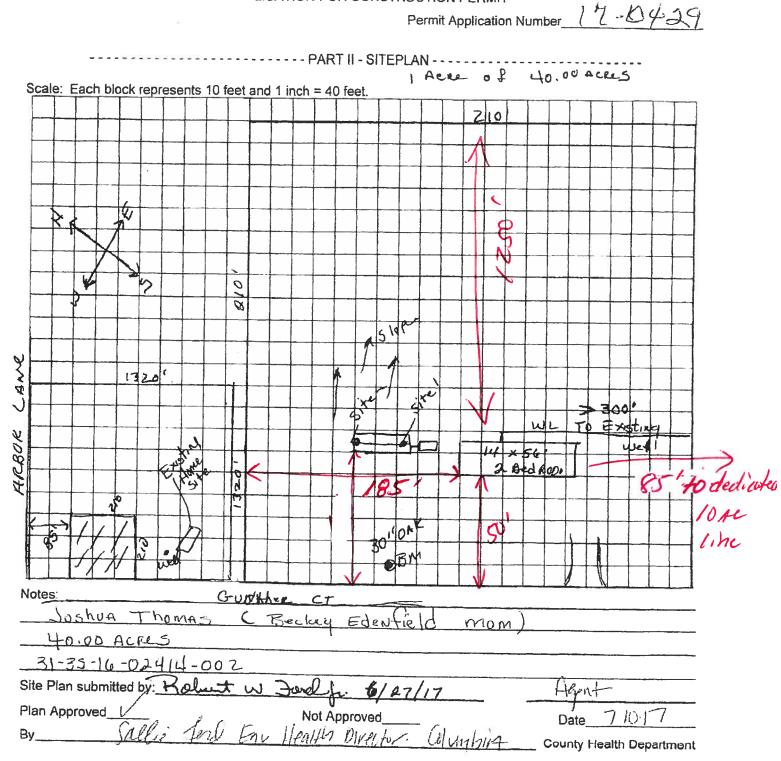
Signed:/ Ronal N. Croft

Columbia County GIS/911 Addressing Department

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

Jos mans

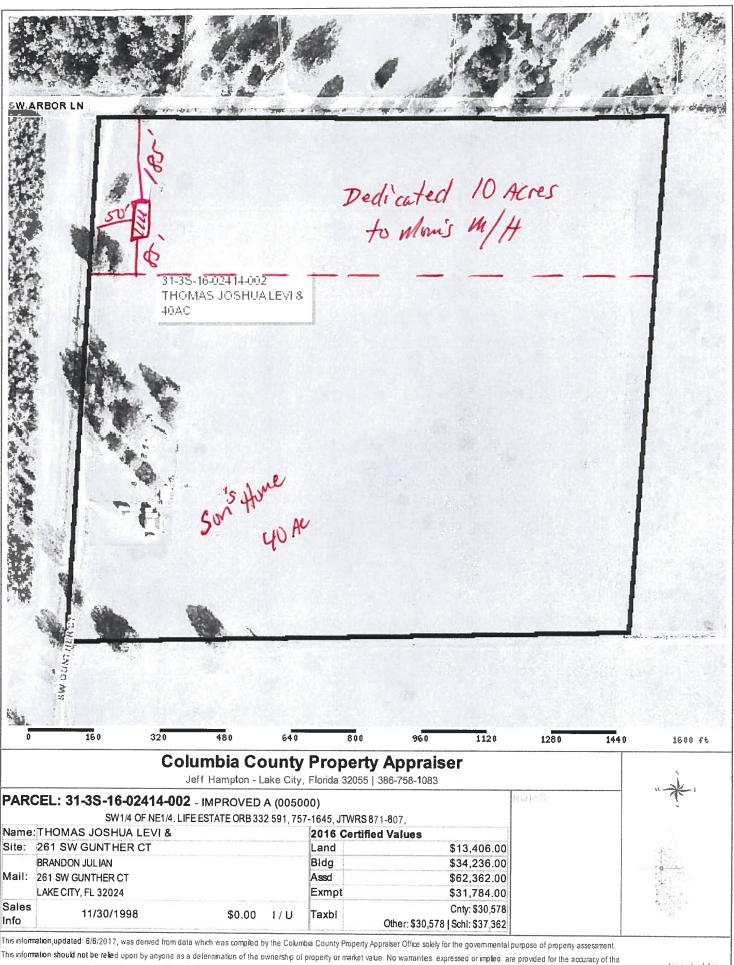




# ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4



data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes. posecerne GrizzlyLogic.com

### STATE OF FLORIDA COUNTY OF COLUMBIA

This is to certify that I. (We). Joshua L. Thomas & Brandon J. Thomas
as the owner of the below described property:
Property tax Parcel ID number 31-35-16-02414-002
Subdivision (Name, lot, Block, Phase)
Give my permission for Rebecca Edenfield 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.

<u>7-19-17</u> Date - x Joshua F Homan (Miner Signature Tostura Owner Signature Date Owner Signature Date

Sworn to and subscribed before me this 19 day of July . 2017.	This
(These) person(s) are personally known to me or produced ID <u>ftbL</u> Joshua L, Thomas (Type)	
Notary Public Signature Notary Printed Name	
Notary Stamp LAURIE HODSON MY COMMISSION # FF 976102 EXPIRES: July 14, 2020	

Bonded Thru Notary Public Underwriters

### STATE OF FLORIDA COUNTY OF COLUMBLA

as the owner of the below describe	ed property	
Property tax Parcel ID number	31-35-16-02414-	502
Subdivision (Name, lot, Block, Phase)		
Give my permission for Ret	and the set of the	to place a
Circle one Mobile Home Trave Barn Shed Garage	l Trailer Unitry Pole Only Su Culvert Other	
I (We) understand that the named permit on the property number I (v assessment for solid waste and fire	ve) have listed above and this co	ould result in an
Hlino	> 7-27-6	2017
Orner Signature	Date	(
Owner Signature	Date	JÆ
Owner Signature	Date	
Sworn to and subscribed before m	ethis 27th day of July	. 20 17 Thi
(These) person(s) are personally kr		(Type)
otary Public Signature	John PFJah Notary Printed Name	
Notary Stamp		
SOTNEY PUBLICING		
JOHN P. FLAHERTY IV		
MCS Contrigion Status		
THE CAROLINE		
AND A THE A		

\_\_\_\_\_, Lake City, Florida 32025, party of the second part.

### WITNESSETH:

That the said party of the first part, for and in consideration of the sum of **TEN AND NO/100** (\$10.00) **DOLLARS** in hand paid by the said party of the second part, the receipt whereof is hereby acknowledged, has remised, released and quitclaimed, and by these presents does remise, release and quitclaim unto the said party of the second part all the right, title and interest claim and demand which the said party of the first part has in and to the following described lot, piece or parcel of land, situate lying and being in the County of Columbia, State of Florida, to wit:

Prepared by Martin M. Feagle Altonuy at: Law Post Office 80x 1653 Lake City. Florida 32055 (as to form only)

The SW 1/4 of NE 1/4 of Section 31, Township 3 South, Range 16 East, Columbia County, Florida.

Tax Parcel No.: \_\_\_\_\_

TO HAVE AND TO HOLD the same, together with all and singular the

appurtenances thereunto belonging or in anywise appertaining, and all the estate, right,

· title, interest and claim whatsoever of the said party of the first part, either in law or

equity, to the only proper use, benefit and behoof of the said party of the second part.

IN WITNESS WHEREOF, the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the first part has herein the said party of the sa

hand and seal the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness

TIANE S. EDENFIELD (Print or type name)

Witness Tom. Los

(Print or type name)

(SEAL)

E. D. THOMAS, JR., by and through his Attomey-in-Fact, Velma Dortch Thomas

mak 1h (SEAL)

#### STATE OF FLORIDA **COUNTY OF COLUMBIA**

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared VELMA DORTCH THOMAS a/k/a VELMA B. THOMAS, individually and as Attorney-in-Fact for E. D. THOMAS, JR., who is personally known to me.

Diane S. Edenfield

WITNESS my hand and official seal this 30th day of Avenue, 1998.

My commission & commission & cristing Edites My commission & cristing Edites My 24, 2002 My Commission Expires:

2

Notary Public, State of Florida

(NOTARIAL SEAL)

98-2027 

# Columbia County Property Appraiser

updated: 6/6/2017

### Parcel: 31-3S-16-02414-002

<< Next Lower Parcel Next Higher Parcel >>

#### **Owner & Property Info**

Owner's Name	THOMAS JOSHUA LEVI	&					
Mailing Address	BRANDON JULIAN 261 SW GUNTHER CT LAKE CITY, FL 32024						
Site Address	261 SW GUNTHER CT						
Use Desc. (code)	IMPROVED A (005000)						
Tax District	3 (County)	Neighborhood	31316				
Land Area	40.000 ACRES Market Area 01						
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.						
SW1/4 OF NE1/4. LIFE	ESTATE ORB 332 591, 757-164	5, JTWRS 871-807,					

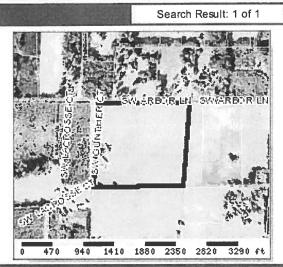
#### Property & Assessment Values

2016 Certified Values								
Mkt Land Value	cnt: (1)	\$13,406.00						
Ag Land Value	cnt: (4)	\$8,970.00						
Building Value	cnt: (1)	\$34,236.00						
XFOB Value	cnt: (5)	\$5,750.00						
Total Appraised Value		\$62,362.00						
Just Value		\$194,003.00						
Class Value		\$62,362.00						
Assessed Value		\$62,362.00						
Exempt Value	(code: HA H3)	\$31,784.00						
Total Taxable Value	Other: \$30,578	Cnty: \$30,578   Schl: \$37,362						

2017 Working Values		(Hide Values)
Mkt Land Value	cnt: (1)	\$13,406.00
Ag Land Value	cnt: (4)	\$9,165.00
Building Value	cnt: (1)	\$33,376.00
XFOB Value	cnt: (5)	\$5,750.00
Total Appraised Value		\$61,697.00
Just Value		\$193,143.00
Class Value		\$61,697.00
Assessed Value		\$61,697.00
Exempt Value	(code: HA H3)	\$31,119.00
Total Taxable Value	Other: \$30,57	Cnty: \$30,578 8   Schl: \$36,697

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History Show Similar Sales within 1/2 mile												
Sale Date OR Book			ge OR	OR Code Vacant / Improved			Qual	ified Sale	Sale RCo	de	Sale Price	
11/30/1998 8		871/807	Q	QC		I	U		01		\$0.00	
Building Characteristics												
Bidg Item Bidg Desc Year Bit Ext. Walls Heated S.F. Actual S.F. E							Bldg Value					
1	SF	SFR MANUF (0002			2003	(31)		512	1512		\$33,376.00	
Note: All S.F. calculations are based on exterior building dimensions.												
Extra Fea	atures &	Out Build	ings							Tank		
Code Desc Year Blt Value Units Dims Condition (% Good)									(% Good)			
0030	BARN, N	1T	0	\$25	0.00	0000001.000	2	0 x 30 x 0	(000.00)		.00)	
0070 CARPORT UF		TUF	2014	\$40	0.00	0000001.000		0 x 0 x 0	(000.00)		.00)	
0261 PRCH, UOP		IOP	2014	\$60	0.00	0000001.000		0 x 0 x 0		(000.0		
0296 SHED METAL		TAL	2014	\$3,24	40.00	0000360.000	1	2 x 30 x 0	(000.00)		00)	
0296	SHED ME	TAL	2014	\$1,20	60.00	0000140.000	1	0 x 14 x 0	[	(000.	00)	



## 2016 Tax Year

Tax Collector Tax Estimator Property Card Parcel List Generator

#### 2016 TRIM (pdf)

Interactive GIS Map Print

Legend

County Districts

Flood Zones 0.2 PCT ANNUAL CHANCE DA DAE AH Official Zoning Atlas Dothers **D**A-1 **D**A-2 **D**A-3 DCG CHI **C**N CSV DESA-2 DILW MUD-I

**D**PRD **PRRD DRMF-1 RMF-2 D**RO **RSF-1 RSF-2 RSF-3** RSF/MH-1 RSF/MH-2 RSF/MH-3 DEFAULT Roads Private / Dirt Other // Paved Main Interstates

# Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Jul 19 2017 16:12:54 GMT-0400 (Eastern Daylight Time)



### **Parcel Information**

Parcel No: 31-3S-16-02414-002 Owner: THOMAS JOSHUA LEVI & Subdivision: Lot: Acres: 40.2172 Deed Acres: 40 Ac District: 2 Rusty DePratter (386)-623-3320 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 implies 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.

	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
	z Nakow , give this authority for the job address show below taller License Holder Name
only	and I do certify that

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.

Job Address

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Rebecca Eden Rield	Relecca Edenfield	AgentOfficer Property Owner
	· · · · · · · · · · · · · · · · · · ·	Agent Officer Property Owner
		Agent Officer 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.

<u>145/1 7-14-</u> Der Date License Holders Signature (Notarized) License Number **NOTARY INFORMATION:** COUNTY OF: Columbia STATE OF: Florida Runnie Norris The above license holder, whose name is personally appeared before me and is known by me or has produced identification TULY , 20 / 7 (type of I.D.) on this 15 day of LAURIE HODSON MY COMMISSION # FF 976102 EXPIRES: July 14, 2020 Bondies Zhan Notery Public Underwriters NOTARY'S SIGNATURE

#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

Ronnie Norris PHONE 1707-52 CONTRACTOR APPLICATION NUMBER

#### 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 <u>REQUIRED</u> 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 Joshua L. Thomas License #: 50000	Signature The flower Phone #:
	Qualifier Form Attached	
MECHANICAL/ A/C	Print Name Joshua L. Thomas License #:	Signature for forman fo
	Qualifier Form Attached	]

**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.

Permit Application Number 12-04-29

----- PART II - SITEPLAN ------40.00 ACRES Acre of Scale: Each block represents 10 feet and 1 inch = 40 feet. 210 V R V 0 Ø 510 ANG ť 1720 æ ጭ ŧ xet 4RBUK Je 2 Bed Ron 2.0 3 ÷ 0 80 9 GUNHALL CT Notes: Joshua Thomas C Beclay Edentiel mom 40.00 ACRES 31-35-16-02414-002 Not Approved\_\_\_\_\_ When Divertor. Column Site Plan submitted by: Robert W Hernt Plan Approved 710.17 Date By County Health Department

# ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4

	STATE OF FLORIDA DEPARTMENT OF HEALTH DNSITE SEWAGE TREATH SYSTEM		APPLICATION #: DATE PAID: L FEE PAID: RECEIPT #:	12-SC-1773411 AP1297072 とたまれつ 310,30 しんらつのこ PR1068241
CONSTRUCTION PER	MIT FOR: OSTDS New			
APPLICANT: JOS	HUA**17-0429 THOMAS			
PROPERTY ADDRESS	261 SW GUNTHER Ct	Lake City, FL 32024		
LOT:	BLOCK:	SUBDIVISION:		
PROPERTY ID #:			[SECTION, TOWNSHIP, RANGE, PAR [OR TAX ID NUMBER]	CEL NUMBER]
381.0065, F.S., SATISFACTORY PE WHICH SERVED A PERMIT APPLICAT ISSUANCE OF TH	RFORMANCE FOR ANY S LS A BASIS FOR ISSU	F.A.C. DEPART SPECIFIC PERIOD ( ANCE OF THIS PE IONS MAY RESULT EXEMPT THE APP.	GENT APPROVAL OF SYSTEM DO OF TIME. ANY CHANGE IN RMIT, REQUIRE THE APPLICAN IN THIS PERMIT BEING MADE LICANT FROM COMPLIANCE WIT	MATERIAL FACTS, F TO MODIFY THE NULL AND VOID.
A [ ] GJ N [ ] GAL K [ ] GAL D [ 375] SQU R [ ] SQU A TYPE SYSTEM:	ALLONS / GPD ALLONS / GPD LONS GREASE INTERCEPTOR LONS DOSING TANK CAPACI ARE FEET ARE FEET <u>N/A</u> [*] STANDARD [	N/A CAPACITY {MAXIMUN TY [ ]GAL SYSTEM ] FILLED [ ] M	CAPACITY 1 CAPACITY SINGLE TANK:1250 GAI LONS @[ ]DOSES PER 24 HRS	#Pumps ( )
N	CHMARK: Nail in 30" oak	· 555 [ ]		
I ELEVATION OF PR E BOTTOM OF DRAIN L D FILL REQUIRED: The system is size 200 gpd. T The licensed cont B <u>5.64E-6.013(3)(f)</u>	REFIELD TO BE ( 0.00 ) INCHES and for 2 bedrooms with a maximation ractor installing the system is n	[ 66.00 ] [ <u>INCHES</u> EXCAVATION REQU num occupancy of 4 pers	FT ] [ ABOVE (BELOW) BENCHMARK/ FT ] [ ABOVE (BELOW) BENCHMARK/ IRED: [ ] INCHES sons (2 per bedroom), for a total estimation he minimum category of tank in accorda	REFERENCE POINT
SPECIFICATIONS BY	• _ •			
	Robert W Ford		ITLE: Master Contractor	·····
APPROVED BY:	Paul O Huller	TITLE: <u>US Î</u>		Columbia CHD
DATE ISSUED:	07/10/2017		EXPIRATION DATE:	01/10/2019
Incorporated: 64	bsolates all previous e E-6.003, FAC v 1.1.4	ditions which may r AD1297072	not be used) S%1040168	Page 1 of 3
			1. Alert	

380 758 2187 ENVI	ROMENTAL HEALTH			13:29:54 p.m. 07-10- New	-2017 System Colu	1/3 IMBI4
	TATE OF FLORID EPARTMENT OF H NSITE SENAGE T ISTEM PPLICATION FOR	Balte Reatment and		PERMIT NO.	1-04)	.9N
Application for [9] New System [] Repair Applicant:	: [] Exist [] Aband IShua Thom:	ing System onmant	1) Holding Tan 1) Temporary <u>MC:</u>	(man)		,
MAILING ADDRESS:	741 38	STAte Rd	100 LALLE C	ity Fl. 320.	25	
Applicant's resp platted (NM/DD/Y	ONSIBILITY TO PRO Y) IF REQUESTING		KORIZED AGENT. SYS DR 489.552, FLORIDA TION OF THE DATE TH DF STATUTORY GRANDE	STATUTES, IT I	IS THR	
PROPERTY INFORMA	TION					
LOT: BLO		VISION: 31-1	3-16	PLATTED:		
PROPERTY ID #:	02414-002	ZON	ING: TMPA I/M C	R EQUIVALENT: [	¥ /(N)	
IS SEVER MURITARY	ACRES WATE	R SUPPLY: [9]	PRIVATE PUBLIC [	]<=2000GPD [ ];	>2000GPD	
PROPERTY ADDRESS:		Gunther	CT	NCE TO SEWER: <u>N</u>		
DIRECTIONS TO PRO	PERTY: HWY	90 we	st to Thom	IAS Rd T	· 1_	
Ct TL	to SW A	RBOR LN.	TR Folla left	u to Gunt	ther	
BUILDING INFORMATI	ION [7]	RESIDENTIAL	[ ] COMMERCI			
Unit Type of <u>No Establishmer</u> 1	No. Bedr		Commercial/Insti Table 1, Chapter		Design	
2 mlH	2	784	14' × 56'			
3						
4						
	Jut with	Other (Specify		ATE: 6/27/1		
DH 4015, 08/09 (Obs Incorporated 645-6.	oletes previous ( 001, FAC	ditions which a	may not be used)		-b	

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