



ENGINEERING • INSPECTIONS
CERTIFICATIONS • TESTING

July 26, 2011

TownHomes, LLC
133 S.E. Newell Drive
Lake City, FL 32056



RE: Manufacturer: TownHomes, LLC
S/N Size & Occupancy: TH-70FL; 2944-1083; 29'-0" x 76'-0"; R-3
HWC Plan#: 2198-0161F

To Whom It May Concern:

This is to certify that the plans for the referenced manufactured building have been reviewed and approved as being in compliance with the 2007 Florida Codes and Standards, with 2009 supplements, as noted on the approved drawings, subject to the following limitations:

1. Approval covers factory-built structure only. (Note: Any alterations to factory built structure on site voids state approval)
2. Items installed at the site are subject to review, approval, and inspection by the local authority having jurisdiction.
3. The Chapter 633 Plan Review and Inspection shall be conducted by the local fire safety inspector.
4. Signed and sealed plans shall be on file with HWC Engineering.
5. NOT Approved for High Velocity Hurricane Zone (i.e. Broward and Dade Counties)

Sincerely,
HILBORN, WERNER, CARTER & ASSOCIATES, INC.


Plan Reviewer

HILBORN, WERNER, CARTER AND ASSOCIATES, INC.
1627 SOUTH MYRTLE AVENUE CLEARWATER, FLORIDA 33756
(727) 584-8151
FAX: (727) 586-3343 / (727) 585-2392 / (727) 587-0447
Modular / Dapla / Inspection

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A



Project Name: TH-70FL
 Street: TH-70FL
 City, State, Zip: JACKSONVILLE, FL,
 Owner:
 Design Location: FL, Jacksonville

Builder Name:
 Permit Office:
 Permit Number:
 Jurisdiction:

1. New construction or existing	New (From Plans)	
2. Single family or multiple family	Single-family	
3. Number of units, if multiple family	1	
4. Number of Bedrooms	4	
5. Is this a worst case?	Yes	
6. Conditioned floor area (ft ²)	2204	
7. Windows	Description	Area
a. U-Factor:	DbI, U=0.35	203.69 ft ²
SHGC:	SHGC=0.33	
b. U-Factor:	N/A	ft ²
SHGC:		
c. U-Factor:	N/A	ft ²
SHGC:		
d. U-Factor:	N/A	ft ²
SHGC:		
e. U-Factor:	N/A	ft ²
SHGC:		
8. Floor Types	Insulation	Area
a. Crawlspace	R=11.0	2204.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²

9. Wall Types	Insulation	Area
a. Frame - Wood, Exterior	R=19.0	1680.00 ft ²
b. N/A		ft ²
c. N/A	R=	ft ²
d. N/A	R=	ft ²
10. Ceiling Types	Insulation	Area
a. Under Attic (Vented)	R=30.0	2204.00 ft ²
b. N/A	R=	ft ²
c. N/A	R=	ft ²
11. Ducts		
a. Sup: Interior Ret: Interior AH: Interior Sup. R= 6,	150 ft ²	
12. Cooling systems		
a. Central Unit	Cap: 60.0 kBtu/hr	
	SEER: 13	
13. Heating systems		
a. Electric Heat Pump	Cap: 60.0 kBtu/hr	
	HSPF: 7.7	
14. Hot water systems		
a. Electric	Cap: 50 gallons	
	EF: 0.9	
b. Conservation features		
None		
15. Credits		Pstat

Glass/Floor Area: 0.092

Total As-Built Modified Loads: 43.45

Total Baseline Loads: 57.78

PASS

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: [Signature]
 DATE: 7/21/11

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: _____
 DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL: [Signature] Date: _____ Plan No: _____
 Approved By SCOTT S. FRANCIS
 DATE: _____

**SEE MANUFACTURER'S CONTRACT
 WITH FLORIDA DCA.**

[Signature]
 Modular Building Plans Examiner
 Florida License No. SMP-42

PROJECT										
Title:	TH-70FL	Bedrooms:	4	Adress Type:	Street Address					
Building Type:	FLAsBuilt	Bathrooms:	0	Lot #						
Owner:		Conditioned Area:	2204	SubDivision:						
# of Units:	1	Total Stories:	1	PlatBook:						
Builder Name:		Worst Case:	Yes	Street:	TH-70FL					
Permit Office:		Rotate Angle:	90	County:	DUVAL					
Jurisdiction:		Cross Ventilation:	No	City, State, Zip:	JACKSONVILLE ,					
Family Type:	Single-family	Whole House Fan:	No		FL ,					
New/Existing:	New (From Plans)									
Comment:										

CLIMATE										
✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	2.5 %	Int Design Temp Winter	Summer	Heating Degree Days	Design Moisture	Daily Temp Range
_____	FL, Jacksonville	FL_JACKSONVILLE_INT	2	32	93	75	70	1281	49	Medium

FLOORS									
✓	#	Floor Type	Exposed Perimeter	Wall Ins. R-Value	Area	Floor Joist R-Value	Tile	Wood	Carpet
_____	1	Crawlspace	210 ft	0	2204 ft²	11	0	0	1

ROOF										
✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
_____	1	Gable or shed	Composition shingles	2271 ft²	274 ft²	Medium	0.96	No	0	14 deg

ATTIC							
✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	300	2204 ft²	N	N

CEILING						
✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	30	2204 ft²	0.11	Wood

WALLS									
✓	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
_____	1	N	Exterior	Frame - Wood	19	608 ft²	0	0.23	0.75
_____	2	E	Exterior	Frame - Wood	19	232 ft²	0	0.23	0.75
_____	3	S	Exterior	Frame - Wood	19	608 ft²	0	0.23	0.75
_____	4	W	Exterior	Frame - Wood	19	232 ft²	0	0.23	0.75

DOORS													
✓	#	Omt	Door Type		Storms		U-Value		Area				
—	1	S	Insulated		None		0.52		21.11 ft²				
—	2	E	Insulated		None		0.52		21.11 ft²				

WINDOWS													
Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.													
✓	#	Omt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang Depth Separation		Int Shade	Screening
—	1	N	Vinyl	Low-E Double	Yes	0.35	0.33	N	30 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
—	2	N	Vinyl	Low-E Double	Yes	0.35	0.33	N	40 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
—	3	S	Vinyl	Low-E Double	Yes	0.35	0.33	N	119 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
—	4	W	Vinyl	Low-E Double	Yes	0.35	0.33	N	14.69 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None

INFILTRATION & VENTING										
✓	Method	SLA	CFM 50	ACH 50	ELA	EqlA	— Forced Ventilation — Supply CFM Exhaust CFM		Run Time Fraction	Fan Watts
—	Default	0.00036	2081	7.08	114.3	214.9	0 cfm 0 cfm		0	0

COOLING SYSTEM								
✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
—	1	Central Unit	None	SEER: 13	60 kBtu/hr	1800 cfm	0.75	

HEATING SYSTEM								
✓	#	System Type	Subtype	Efficiency	Capacity	Ductless		
—	1	Electric Heat Pump	None	HSPF: 7.7	60 kBtu/hr			

HOT WATER SYSTEM							
✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
—	1	Electric	0.9	50 gal	70 gal	120 deg	None

SOLAR HOT WATER SYSTEM							
✓	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
—	None	None			ft²		

DUCTS												
✓	#	— Supply — Location R-Value Area			— Return — Location Area		Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
—	1	Interior	6	150 ft²	Interior	75 ft²	Default Leakage	Interior				

TEMPERATURES													
Programable Thermostat: Y					Ceiling Fans:								
Cooling	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Heating	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Venting	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Thermostat Schedule: HERS 2006 Reference													
Schedule Type		1	2	3	4	5	Hours						
							6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80
	PM	80	80	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	66	66
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	66	66

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: TH-70FL

PERMIT #:

JACKSONVILLE, FL,

INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	N1106.AB.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	N1106.AB.1.2.2	Penetrations/openings > 1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	N1106.AB.1.2.3	Between walls & ceilings; penetrations of ceiling plane to top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	N1106.AB.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	N1112.AB.2.3	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%. Heat pump pool heaters shall have a minimum COP of 4.0.	
Shower heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section N1110.AB. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	N1104.AB.1 N1102.B.1.1	Ceilings-Min. R-19. Common walls-frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 75
The lower the EnergyPerformance Index, the more efficient the home.

TH-70FL, JACKSONVILLE, FL,

1. New construction or existing	New (From Plans)		9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family		a. Frame - Wood, Exterior	R=19.0	1680.00 ft²
3. Number of units, if multiple family	1		b. N/A	R=	ft²
4. Number of Bedrooms	4		c. N/A	R=	ft²
5. Is this a worst case?	Yes		d. N/A	R=	ft²
6. Conditioned floor area (ft²)	2204		10. Ceiling Types	Insulation	Area
7. Windows**	Description	Area	a. Under Attic (Vented)	R=30.0	2204.00 ft²
a. U-Factor:	Dbl, U=0.35	203.69 ft²	b. N/A	R=	ft²
SHGC:	SHGC=0.33		c. N/A	R=	ft²
b. U-Factor:	N/A	ft²	11. Ducts		
SHGC:			a. Sup: Interior Ret: Interior AH: Interior	Sup. R= 6,	150 ft²
c. U-Factor:	N/A	ft²	12. Cooling systems		
SHGC:			a. Central Unit	Cap: 60.0 kBtu/hr	SEER: 13
d. U-Factor:	N/A	ft²	13. Heating systems		
SHGC:			a. Electric Heat Pump	Cap: 60.0 kBtu/hr	HSPF: 7.7
e. U-Factor:	N/A	ft²	14. Hot water systems		
SHGC:			a. Electric	Cap: 50 gallons	EF: 0.9
8. Floor Types	Insulation	Area	b. Conservation features		
a. Crawlspace	R=11.0	2204.00 ft²	None		
b. N/A	R=	ft²	15. Credits		Pstat
c. N/A	R=	ft²			

I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____
Address of New Home: _____ City/FL Zip: _____



*Note: The home's estimated Energy Performance Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at (321) 638-1492 or see the Energy Gauge web site at energygauge.com for information and a list of certified Raters. For information about Florida's Energy Efficiency Code for Building Construction, contact the Department of Community Affairs at (850) 487-1824.

**Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.

William J. Kalker, Jr., P.E.
Consulting Engineer
33 Rockwood Lane
Monroe, Connecticut 06468
203/261-1167

JUL 28, 2008
REV 2/23/11



Town Homes
133 SE Newell Drive
Lake City, FL 32056

SUB: Substitution Of Simpson Anchors
For 26 Ga x 1-1/2" Steel (Fy=
44 KSI Min) Uplift Straps

To Whom It May Concern:

This letter certifies that the Simpson anchors referenced below may be used in lieu of the subject 26 Ga x 1-1/2" steel straps when the straps are specified on the approved modular building drawings prepared by this office and the Simpson anchors are installed as noted below:

Steel Strap To Be Replaced:

26 Ga x 1-1/2" Steel Strap With Fy=44 ksi (Min)
(Strap specified on the approved modular building drawings prepared by this office)

Simpson Anchors Which May Be Used:

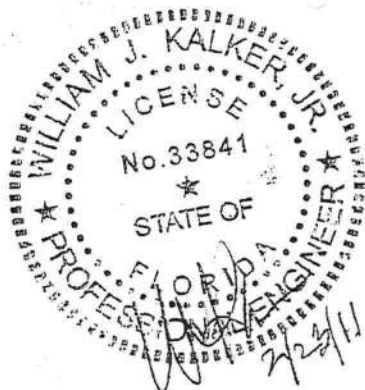
(A) Simpson LSTA9 Installed with 4-.148"x1-1/2" nails each end may be used in lieu of 26 Ga x 1-1/2" steel straps on a one to one basis (Replace each 26 Ga x 1-1/2" strap with one LSTA9 anchor)

(B) Simpson LSTA12 Installed with 5-.148"x1-1/2" nails each end may be used in lieu of 26 Ga x 1-1/2" steel straps as noted below:

No. of 26 Ga Straps Specified	No. of LSTA12 Anchors Required
1	1
2	2
3	3
4	4
5	5
6	5

(C) Simpson LSTA15 Installed with 6-.148"x1-1/2" nails each end may be used in lieu of 26 Ga x 1-1/2" steel straps as noted below:

No. of 26 Ga Straps Specified	No. of LSTA15 Anchors Required
1	1
2	2
3	3
4	3
5	4
6	5





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

PERMIT NO. 1044086
DATE PAID: 8/10/11
FEE PAID: 205.00
RECEIPT #: 1688146

APPLICATION FOR:

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

APPLICANT: Fredrick Keiser

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: 9 BLOCK: na SUB: Cypress Creek S/D PLATTED: _____

PROPERTY ID #: 03-4S-16-02739-109 ZONING: _____ I/M OR EQUIVALENT: [Y] [N]

PROPERTY SIZE: .50 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 374 SW Aloe Court, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: 90 West, TL on CR 252B, TL on Merrimack Place, TR on Aloe Court, 6th lot on right

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	2204	
---	----------------	---	------	--

2				
---	--	--	--	--

3				
---	--	--	--	--

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

SIGNATURE: Rocky D Ford DATE: 8/9/2011

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

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

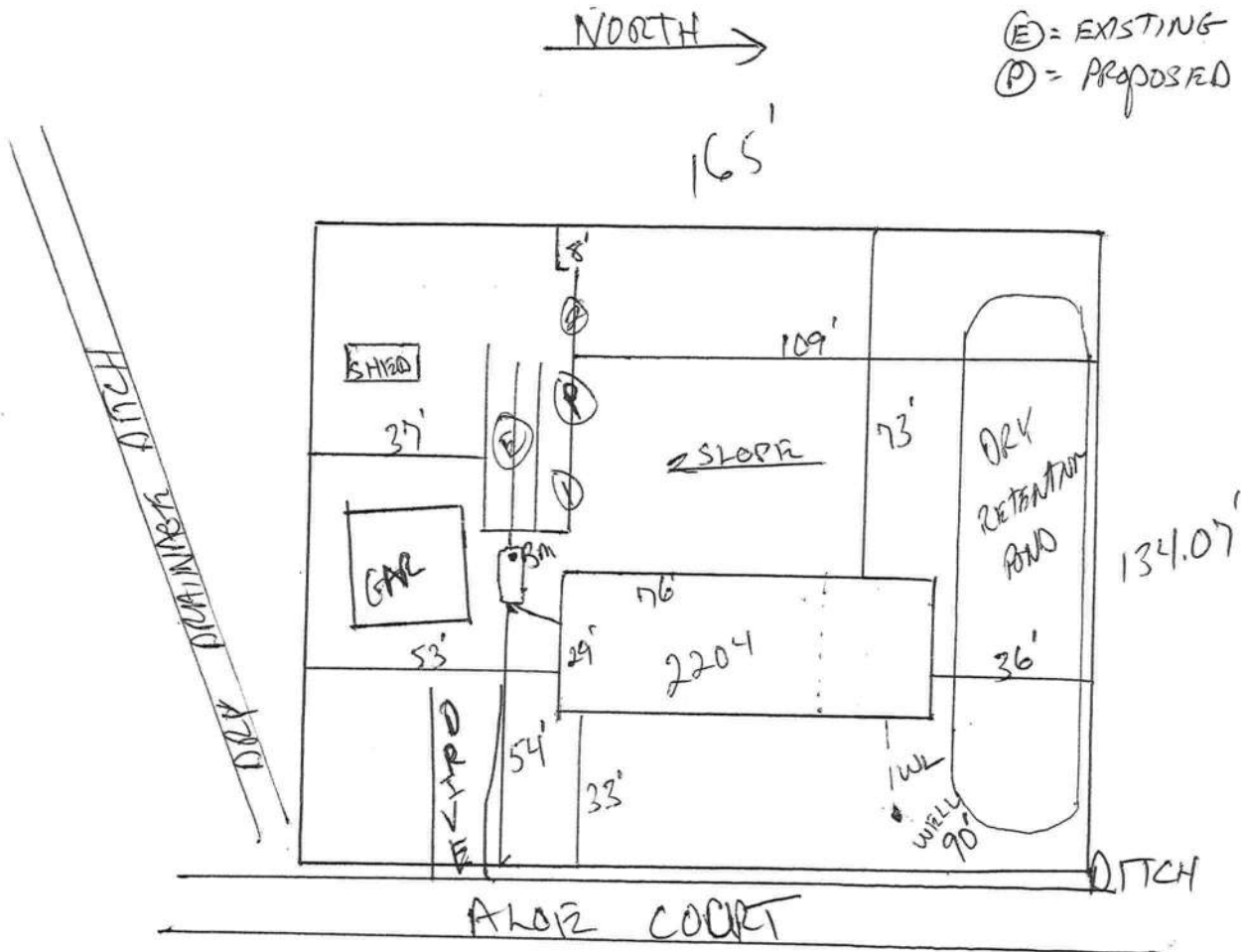
Permit Application Number

11-0343M

KRISER

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

Site Plan submitted by Rocky D F

Plan Approved X

By

Not Approved

Columbia

MASTER CONTRACTOR

Date 8/15/11

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Christopher Collos

PHONE _____

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 117	Print Name	<u>Dale Williams</u>	Signature	<u>Dale Williams</u>
	License #:	<u>ER13012627</u>	Phone #:	<u>386-362-2035</u>
MECHANICAL/ A/C <u>568</u>	Print Name	<u>DAVID HALL</u>	Signature	<u>D Hall</u>
	License #:	<u>CACO 57424</u>	Phone #:	<u>386-755-9792</u>
PLUMBING/ GAS <u>1018</u>	Print Name	<u>George Degler</u>	Signature	<u>George Degler</u>
	License #:	<u>CSC 1427133</u>	Phone #:	<u>386-438-9635</u>
ROOFING	Print Name		Signature	
	License #:		Phone #:	
SHEET METAL	Print Name		Signature	
	License #:		Phone #:	
FIRE SYSTEM/ SPRINKLER	Print Name		Signature	
	License #:		Phone #:	
SOLAR	Print Name		Signature	
	License #:		Phone #:	

Specialty License	License Number	Sub-Contractor Printed Name	Sub-Contractor Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

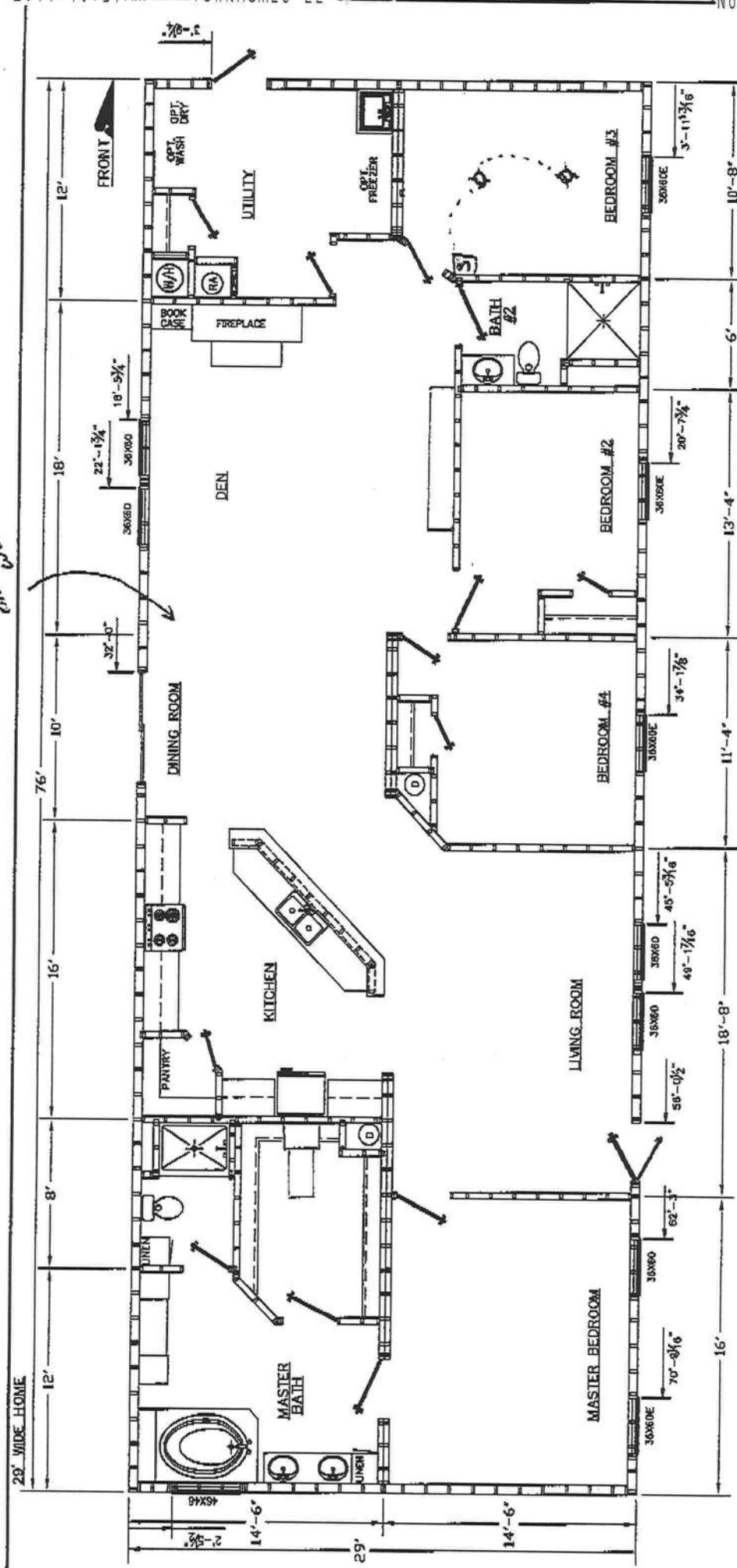
F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Form Subcontractor Form 5/01

JAMEY, I need physical address where home is going.

plank vinyl

omit wall



TownHomes
P.O. BOX 1059
LAKE CITY, FLORIDA 32056

Model: 2944-1083

Price: 220K SQ. FT. SALES

Date:	Revisions	Code:
6-30-11		2944A
Dr'n: ROB		
Scale: 3/16"=1'		
Code: T (11)		

PLEASE CONFIRM ORDER
AND PRINT. SIGN BELOW.

Dealer: _____

Customer: _____

PURCHASE AGREEMENT

DATE OF BIRTH
HIM:
HER:



Hwy. 90 West
Lake City, Florida

752-3743 or
753-3744

DRIVER'S LICENSE
HIM:
HER:

C & G MANUFACTURED HOMES, INC.

Locally Owned and Operated

SOLD TO <u>Frederick Keiser</u>		PHONE <u>386 209 0741</u>		DATE <u>10 Aug 2011</u>	
ADDRESS <u>374 S.W Aloe ct Lake City FL 32044</u>		COUNTY <u>Columbia</u>		SALESMAN <u>Jamen</u>	
Subject to the Terms and Conditions Stated on Both Sides of this Agreement Seller Agreement Seller Agrees to Sell and the Purchaser Agrees to Purchase the Following Described Property					
MAKE	<u>Townhomes on Frame Mod.</u>	MODEL	<u>T3203C</u>	B. ROOMS	<u>4</u>
SERIAL NUMBER	<u>ordered Home</u>	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED	COLOR	FLOOR SIZE	<u>L76 W32</u>
				HITCH SIZE	<u>L80 W32</u>
				PROPOSED DELIVERY DATE	<u>ASAP</u>
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES				PRICE OF UNIT	<u>\$ 126 800</u>
<u>Set up Delivery to state & County code</u>				OPTIONAL EQUIPMENT	
<u>A/C Heat pump 135ccr</u>				COST OF SET-UP PARTS	
<u>Standard white skirting</u>				SUB-TOTAL	<u>126800</u>
<u>2 code steps</u>				SALES TAX	
<u>on Frame Modular</u>				NON-TAXABLE ITEMS	
<u>Dirt Pad Permits</u>				VARIOUS FEES	<u>450</u>
<u>Hookups Included</u>				1. CASH PRICE	<u>\$ 127250</u>
<u>FHA Fees Included</u>				TRADE-IN ALLOWANCE	\$
				LESS BAL. DUE ON ABOVE	\$
				NET ALLOWANCE	
				CASH DOWN PAYMENT	<u>1000.00</u>
				2. LESS TOTAL CREDITS	
				3. UNPAID BALANCE OF CASH SALE PRICE	<u>\$ 126250</u>
Title to said equipment shall remain in the Seller until the agreed purchase price therefor is paid in full in cash or by the execution of a Retail Installment Contract, or a Security Agreement and its acceptance by a financing agency; thereupon title to the within described unit passes to the buyer as of the date of either full cash payment or on the signing of said credit instruments even though the actual physical delivery may not be made until a later date.					
IT IS MUTUALLY UNDERSTOOD THAT THIS AGREEMENT IS SUBJECT TO NECESSARY CORRECTIONS, AND ADJUSTMENTS CONCERNING CHANGES IN NET PAYOFF ON TRADE-IN TO BE MADE AT THE TIME OF SETTLEMENT.					
Purchaser represents he/she examined the product and found it suitable for his/her particular needs, and that it is of acceptable quality and that purchaser relied upon his/her judgement and inspection in making this determination.					
There is no assurance a mobile home can remain level when placed, upon any surface other than of blacktop or concrete.					
Purchasers certify that the matter printed on the back hereof has been read and agreed to as a part of this agreement the same as though it were printed above the signatures; that buyers are of statutory age or older; or have been legally emancipated; that the within described merchandise, the optional equipment and accessories thereon and, insurance if included, has been voluntarily purchased. The property being traded in is free from all encumbrances whatsoever, except as noted above. Purchaser agrees each paragraph and provision of this contract on both front and back is severable; if one portion thereof is invalid the remaining portion shall, nevertheless, remain in full force and effect.					
Seller is not permitted to make plumbing or electrical connections, or connecting of certain natural gas or propane appliances where state or local ordinances require a licensed plumber or electrician so to do. Special building ordinances or laws requiring plumbing, electrical or construction changes are not the responsibility of Seller or the manufacturer. Seller is not responsible for obtaining health or sanitation permits, nor for local, county or state permits involving restrictive zoning. Cost of changes needed for compliance must be borne by Buyer. It is solely the Buyers responsibility to assure their chosen home site is acceptable for home placement without violation of any local, state, or federal guidelines.					
Seller is not responsible or liable for any delays caused by the manufacturer, accidents, strikes, fires, Acts of God or any other cause beyond Seller's control.					
TRADE-IN DEBT TO BE PAID BY <input type="checkbox"/> DEALER <input type="checkbox"/> CUSTOMER					
C & G MANUFACTURED HOMES, INC. DEALER Net Valid Unless Signed and Accepted by an officer of the Company				I, OR WE, HEREBY ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER	
By _____				SIGNED X <u>Frederick Keiser</u> PURCHASER	
Approved, Subject to acceptance of financing by bank or finance company.				SIGNED X _____ PURCHASER	

Columbia County Property Appraiser

DB Last Updated: 6/22/2011

2010 Tax Year

Parcel: 03-4S-16-02739-109

Owner & Property Info

Owner's Name	KEISER FREDERICK JR & SHERRY		
Mailing Address	374 SW ALOE CT LAKE CITY,, FL 32024		
Site Address	374 SW ALOE CT		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	2 (County)	Neighborhood	3416
Land Area	0.000 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 9 CYPRESS CREEK S/D. ORB 832-969, WD 1073-1122 QCD 1076-906.			

Search Result: 1 of 1

Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$24,250.00
Ag Land Value	cnt: (3)	\$0.00
Building Value	cnt: (1)	\$24,049.00
XFOB Value	cnt: (3)	\$2,500.00
Total Appraised Value		\$50,799.00
Just Value		\$50,799.00
Class Value		\$0.00
Assessed Value		\$50,799.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$50,799 Other: \$50,799 Schl: \$50,799	

2011 Working Values

NOTE:
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
3/1/2006	1076/906	QC	I	U	04	\$10,500.00
1/30/2006	1073/1122	WD	I	U	04	\$100.00
1/15/1996	832/969	CD	V	U	13	\$13,900.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1996	(31)	1248	1428	\$23,033.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0060	CARPORT F	1996	\$1,200.00	0000001.000	20 x 20 x 0	(000.00)
0190	FPLC PF	1996	\$1,200.00	0000001.000	0 x 0 x 0	(000.00)
0169	FENCE/WOOD	2007	\$100.00	0000001.000	0 x 0 x 0	(000.00)

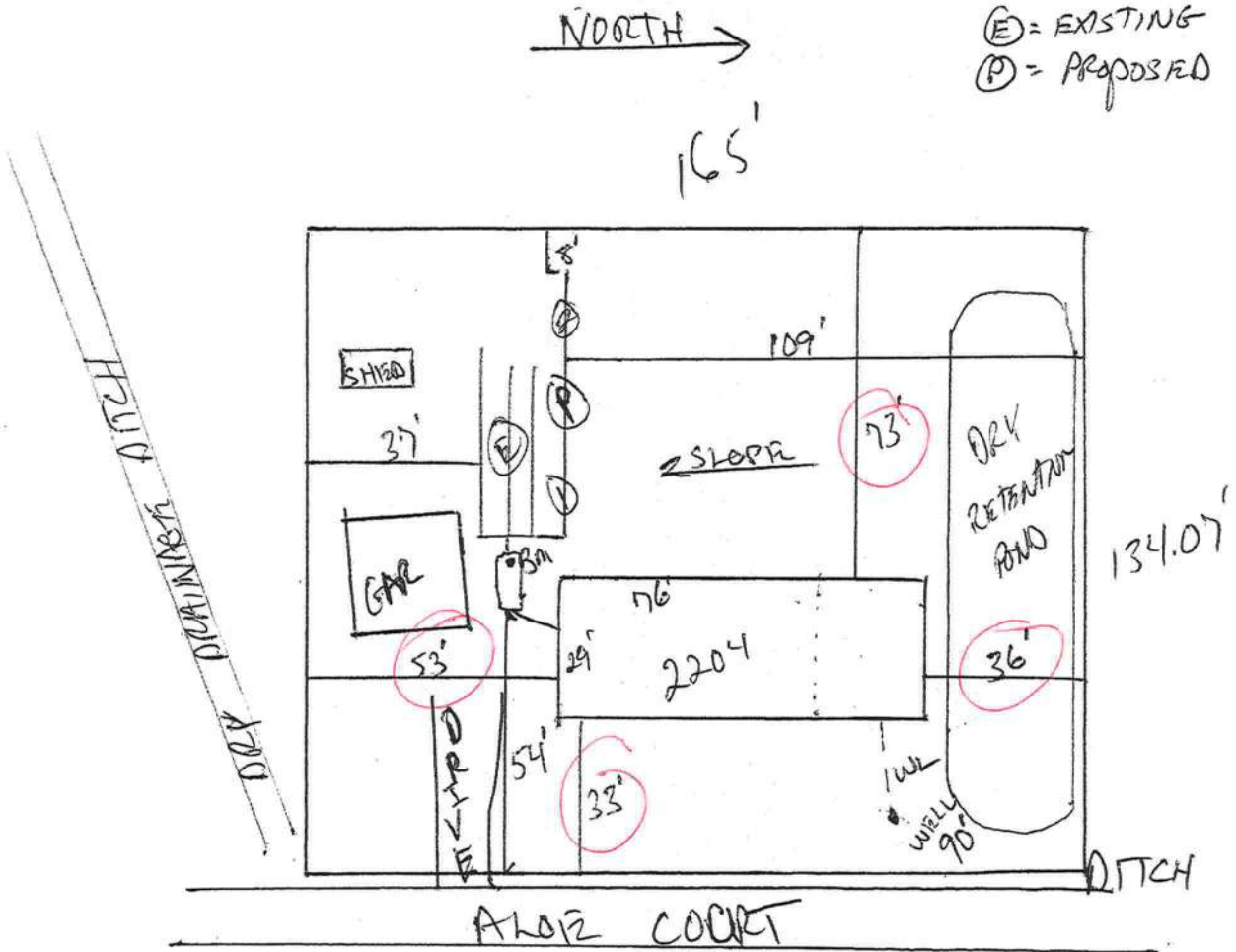
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

KEISER

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by Rocky D F

Plan Approved _____

Not Approved _____

By _____

MASTER CONTRACTOR

Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

96-17919

1996 DEC 18 PM 12:17

Prepared By & Return To:
Chris A. Bullard
P.O. Box 1432
Lake City, FL 32056-1432

Property Appraiser's Identification No.:
03-45-16-02739-109

Purchaser(s) S.S. #(s):
[REDACTED]
[REDACTED]

ADJUTANT CLERK
9730
RECEIVED TAX
- ADJUTANT CLERK OF
COUNTY, FLORIDA
BY HRK DB

ADJUTANT CLERK
4760
RECEIVED TAX
2719
- ADJUTANT CLERK OF
COUNTY, FLORIDA
BY HRK DB

THIS CONTRACT FOR DEED made this 15th day of January A.D. 19 96, between
Bullard Properties, Inc. a Florida Corporation, whose mailing address is P.O. Box 1432, Lake City, Florida 32056,
hereinafter referred to as "Seller", and Fred Keiser Sr. & Barbara Keiser, his wife
whose mailing address is 2537 Hickoc Place, Kissimmee, FL 34741 hereinafter
referred to as "Purchaser(s)".

WITNESSETH, that if the Purchaser(s) shall first make payments and perform the covenants hereinafter
mentioned on their part to be made and performed, the Seller hereby covenants and agrees to convey and
assure to said Purchaser(s) their heirs, executors, administrators or assigns, in fee simple, clear of all
encumbrances whatever, by a good and sufficient Warranty Deed, the following described property, situated in the
County of Columbia, State of Florida, known and described as follows, to wit:

Lot # 9 CYPRESS CREEK SUBDIVISION. Being a portion of the South East Quarter of Section 3,
Township 4 South, Range 16 East, Columbia County, Florida. This Contract for Deed is given subject to the
Deed Restrictions recorded at the Columbia County Clerk's Office, Official Records Book 810, Pages 608 &
609, and Utility Easement of Record.

The total agreed upon purchase price of the property shall be Thirteen Thousand Eight Hundred
Ninety Dollar (\$ 13,890.00) Dollars, payable at the times and in the manner following:
Two Hundred Ninety Five Dollars (\$ 295.00) Dollars down, receipt of which is hereby
acknowledged, and the balance of \$ 13,595.00 shall be paid over a period of 240 months with the
sum of \$ 149.85 beginning due on February 15 19 96 and a like sum of \$ 149.85
shall be due on the 15th day of each month thereafter until principal and interest are paid in
full with interest at the rate of 12 per centum per annum. Purchaser(s) shall have the right to make
prepayment at any time without penalty.

At such time as the Purchaser(s) shall have paid the full amount due and payable under this Contract, or at
such other times as provided herein, the Seller promises and agrees to convey the above described property to the
Purchaser(s) by good and sufficient Warranty Deed, subject to restrictions as set forth above.

The Seller warrants that the title to the property can be fully insured by the title insurance company authorized
to do business in the State of Florida.

Purchaser(s) shall be permitted to go into possession of the property covered by this Contract immediately, and
shall assume all liability for taxes from and after that date. Purchaser(s) acknowledges receipt of this Contract.

Purchaser(s) may not cut or remove any merchantable timber from the property without written consent of the
Seller during the term of this Contract or during the term of any mortgage given to Seller as provided herein. In the
event Seller grants permission to cut or remove timber, all money derived from the sale thereof shall be applied against
remaining balance in inverse order.

The time of payment shall be of the essence, and in the event of any default of payment of any of the
purchase money as and when it becomes due, or in performance of any other obligations assumed by Purchaser(s) in
this Contract, including the payment of taxes, and in the event that the default shall continue for a period of Thirty (30)
days, then the Seller may consider the whole of the balance due under this Contract immediately due and payable and

EX 0832 PG 0969

OFFICIAL RECORDS

collectable, or the Seller may rescind this Contract, retaining the cash consideration paid for it as liquidated damages, and this Contract then shall become null and void and the Seller shall have the right to re-enter and immediately take possession of the property covered by this Contract. In the event that it is necessary for the Seller to enforce this Contract by foreclosure proceedings, or otherwise, all costs of the proceedings, including a reasonable attorney's fee, shall be paid by the Purchaser(s). Installments not paid within Ten (10) days after becoming due under the terms of this Contract shall be subject to, and it is agreed Seller shall collect a late charge in the amount of Ten Percent (10%) of the monthly payment per month upon such delinquent installments. ANY PAYMENT MADE BY CHECK AND WHICH IS RETURNED UNPAID BY THE BANK WILL REQUIRE PURCHASER(S) TO PAY A \$20.00 PENALTY FOR SUCH DISHONORED CHECK.

In the event this Contract is assigned, sold, devised, transferred, quit-claimed or in any way conveyed to another by the Purchaser(s), then, in that event, all of the then remaining balance shall become immediately due and payable and collectable.

Purchaser(s) acknowledge that they have personally inspected subject property and found it to be as represented. Purchaser(s) further agrees that the property is suitable for the purpose for which it is being purchased.

IT IS MUTUALLY AGREED, by and between the parties hereto, that the time of each payment shall be an essential part of this Contract, and that all covenants and agreements herein contained shall extend to and be obligatory upon the heirs, executors, administrators and assigns of the respective parties.

IN WITNESS WHEREOF, the parties of these presents have hereunto set their hands and seals the day and year first above written. Before I (we) signed this Contract, I (we) received a copy of the restrictions and I (we) personally inspected the above referenced property.

Catherine Williams
WITNESS Catherine Williams

Jennifer K. Tucker
WITNESS Jennifer K. Tucker

Catherine Williams
WITNESS Catherine Williams

Jennifer K. Tucker
WITNESS Jennifer K. Tucker

PURCHASER (s):
Fred Keiser
Fred Keiser Sr.

Barbara Keiser
Barbara Keiser

SELLER: Bullard Properties, Inc.
Chris A. Bullard
Chris A. Bullard, President

STATE OF FLORIDA
COUNTY OF COLUMBIA

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared Fred Keiser, Sr. & Barbara Keiser, his wife

Chris A. Bullard

well known to me to be the President respectively of the corporation named as party of the first part in the foregoing instrument, and that they severally acknowledge executing the same in the presence of two subscribing witnesses freely and voluntarily under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 15th day of January, A.D. 19 96



JENNIFER K. TUCKER
My Commission C.C. 441878
Expires Feb 27, 1998
Phone (313) 1161
800 422-1161

Jennifer K. Tucker
Notary

EX 0832 PG 0970

OFFICIAL RECORDS

FREDERICK
KEISER

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: 8/10/2011 DATE ISSUED: 8/10/2011

ENHANCED 9-1-1 ADDRESS:

374 SW ALOE CT
LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

03-4S-16-02739-109

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

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

7:38:03 AM 8/12/2011

Licensee Details**Licensee Information**

Name: **WOOD, LEONARD GEOFFREY** (Primary Name)
(DBA Name)
Main Address: **4034 THE FENWAY
MULBERRY Florida 33860**
County: **POLK**
License Mailing: **4034 THE FENWAY
MULBERRY FL 33860**
County: **POLK**
LicenseLocation:

License Information

License Type: **Professional Engineer**
Rank: **Prof Engineer**
License Number: **47377**
Status: **Current,Active**
Licensure Date: **11/03/1993**
Expires: **02/28/2013**

Special Qualifications **Qualification Effective**
Building Code Core
Course Credit **05/30/2003**

[View Related License Information](#)[View License Complaint](#)

Contact Us :: [1940 North Monroe Street, Tallahassee FL 32399](#) :: Call.Center@dbpr.state.fl.us :: Customer Contact Center:
850.487.1395

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<https://www.myfloridalicense.com/LicenseDetail.asp?SID=&id=6DC8694C86D882A534...> 8/12/2011

7:39:19 AM 8/12/2011

Licensee Details**Licensee Information**

Name: **KALKER, WILLIAM JACK JR** (Primary Name)
(DBA Name)
Main Address: **33 Rockwood Lane**
MONROE Connecticut 064680000
County: **OUT OF STATE**
License Mailing:
LicenseLocation:

License Information

License Type: **Professional Engineer**
Rank: **Prof Engineer**
License Number: **33841**
Status: **Current,Active**
Licensure Date: **10/12/1983**
Expires: **02/28/2013**

Special Qualifications **Qualification Effective**
Building Code Core
Course Credit **12/29/2003**

[View Related License Information](#)[View License Complaint](#)

Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 :: Call.Center@dbpr.state.fl.us :: Customer Contact Center:
850.487.1395

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<https://www.myfloridalicense.com/LicenseDetail.asp?SID=&id=A31CD6EC702E62FC22...> 8/12/2011

Columbia County Building Permit Application

For Office Use Only Application # 1108-17 Date Received 8-10-11 By LH Permit # 29634
 Zoning Official BLK Date 12 Aug 2011 Flood Zone X Land Use RES-Low Density Zoning RSF-2
 FEMA Map # N/A Elevation N/A MFE 1 1/2 inch River N/A Plans Examiner J.C. Date 8-12-11
 Comments Replacing Existing MH
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter
 IMPACT FEES: EMS _____ Fire In Fire Corr _____ ☒ Sub VF Form
 Road/Code _____ School _____ = TOTAL (Suspended) ☒ App Fee Paid

Septic Permit No. 11-0343-M

Fax _____

Name Authorized Person Signing Permit Tara Howell Phone 984-7976/208-0500Address 8383 150th St. Live Oak, FL 32060Owners Name Frederick Heiser Phone 386-209-0741911 Address 374 S.W. Aloe Ct. Lake City, FL 32024Contractors Name Christopher Scott Collins Phone 386-4106-9105Address 406 NW Old Mill Rd Lake City, Fla 32025

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address Huckleberry Sibley & Harvey 1020 N. Orlando Ave. Suite 200 Maitland, FL 32751Architect/Engineer Name & Address Synb Services 4300 Dinner Lake Dr. Lake Wales 3385Mortgage Lenders Name & Address First Federal 4705 W. US Hwy 90 Lake City, FL 32056

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 03-45-16-02739-109 Estimated Cost of Construction \$ 124,000Subdivision Name Cypress Creek Lot 9 Block _____ Unit _____ Phase _____Driving Directions 252B to Macinack Place take (L) go to stop sign turn (R) on SW Aloe Ct. to property on (R)Number of Existing Dwellings on Property 1Construction of On-frame modular home Total Acreage _____ Lot Size _____Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height _____Actual Distance of Structure from Property Lines - Front 33 Side 53 Side 36 Rear 73Number of Stories 1 Heated Floor Area 2280 Total Floor Area 2280 Roof Pitch 3-12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.**

Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11

Replacing Existing

spoke to Janice 8/16/11

TIME LIMITATIONS OF APPLICATION: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: 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 work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

(Owners Must Sign All Applications Before Permit Issuance.)

[Signature]
Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

[Signature]
Contractor's Signature (Permitee)

Contractor's License Number CBC 1252863
Columbia County
Competency Card Number 1043

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 10 day of Aug 2011.
Personally known ✓ or Produced Identification _____

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:



J. HOWELL
MY COMMISSION # DD 750213
EXPIRES: January 17, 2012
Bonded Thru Budget Notary Services

DATE 08/16/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029634

APPLICANT TARA HOWELL PHONE 984-7976
ADDRESS 8383 150TH STREET LIVE OAK FL 32060
OWNER FREDERICK KEISER PHONE 386-209-0741
ADDRESS 374 SW ALOE CT LAKE CITY FL 32024
CONTRACTOR SCOTT COLLINS PHONE 386-466-9615
LOCATION OF PROPERTY 90 W, L 252-B, L MARIMACK PL, R ALOE CT, 6TH ON RIGHT

TYPE DEVELOPMENT MODULAR, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES 1
FOUNDATION PIERS WALLS FRAMED ROOF PITCH 3/12 FLOOR PADS
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 03-4S-16-02739-109 SUBDIVISION CYPRESS CREEK
LOT 9 BLOCK PHASE UNIT TOTAL ACRES

CBC1252863
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTNG 11-0343-M BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REPLACING EXISTING MH
FLOOR ONE FOOT ABOVE THE ROAD

Check # or Cash 49206

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 \$ 350.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 425.00
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.

COLUMBIA COUNTY FLORIDA

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 03-S-16-02739-109

Building permit No. 000029634

Use Classification MODULAR/UTILITY

Fire: 0.00

Permit Holder SCOTT COLLINS

Waste:

Owner of Building FREDERICK KEISER

Total: 0.00

Location: 374 SW ALOE COURT, LAKE CITY, FL 32024



Date: 09/08/2011

Ray Cur

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)