

DATE 10/28/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028176

APPLICANT WENDY GRENNELL PHONE 497-2311

ADDRESS P.O. BOX 39 FT. WHITE FL 32038

OWNER WOODROW LYNCH PHONE 288-5975

ADDRESS 1186 SW TUSTENUGEE AVE LAKE CITY FL 32025

CONTRACTOR ROBERT SHEPPARD PHONE 623-2203

LOCATION OF PROPERTY 41S, TR ON CR 131, AFTER LYNCH'S WELL DRILLING SIGN,
TURN RIGHT JUST BEFORE MAILBOXES ON RIGHT, GO TO THE BACK

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 20-4S-17-08586-008 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 2.04

IH0000833 Wendy Grennell

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

EXISTING 09-535 BK WR N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROADCheck # or Cash 5616

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by

Framing Insulation
date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by

Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 375.00

INSPECTORS OFFICE 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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-10-08) Zoning Official OK 26.10.07 Building Official 10/23/09 WD

AP# 0910-53 Date Received 10/22/09 By GT Permit # 28176

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments _____

FEMA Map# N/A Elevation N/A Finished Floor 1st fl River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # _____ ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL N/A Impact Fees Suspended March 2009

Property ID # 20-45-17-08586-008 Subdivision N/A

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32x76 Year 2010
- Applicant Wendy Grennell or Dale Beard Phone # 386-497-2311
- Address PO Box 39 Ft White FL 32038
- Name of Property Owner Woodrow Lynch Phone# 386-288-5975
- 911 Address 1186 SW Tustenuggee Ave Lake City 32025
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Woodrow Lynch Phone # 386-288-5975
 Address 1186 SW Tustenuggee Ave Lake City FL 32025
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1 to be replaced
- Lot Size _____ Total Acreage 2.04
- 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 Yes (pd)
- Driving Directions to the Property 41 South to CR 131 (Tustenuggee)
turn (R), BEFORE caution light (see Lynch well drill sign)
turn before group of mailboxes (R) follow drive
all the back
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 CR 245 Lake City FL 32055
- License Number IH0000833 Installation Decal # 305376

(EH)

left message
w/ Wendy 10/27/09

PERMIT WORKSHEET

PERMIT NUMBER

Installer

Robert Sheppard License # IH0000833

Address of home being installed

1186 SW Tuskenuse Ave
Lake City FL 32025

Manufacturer

Live Oak Length x width 32 x 76

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

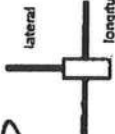
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials

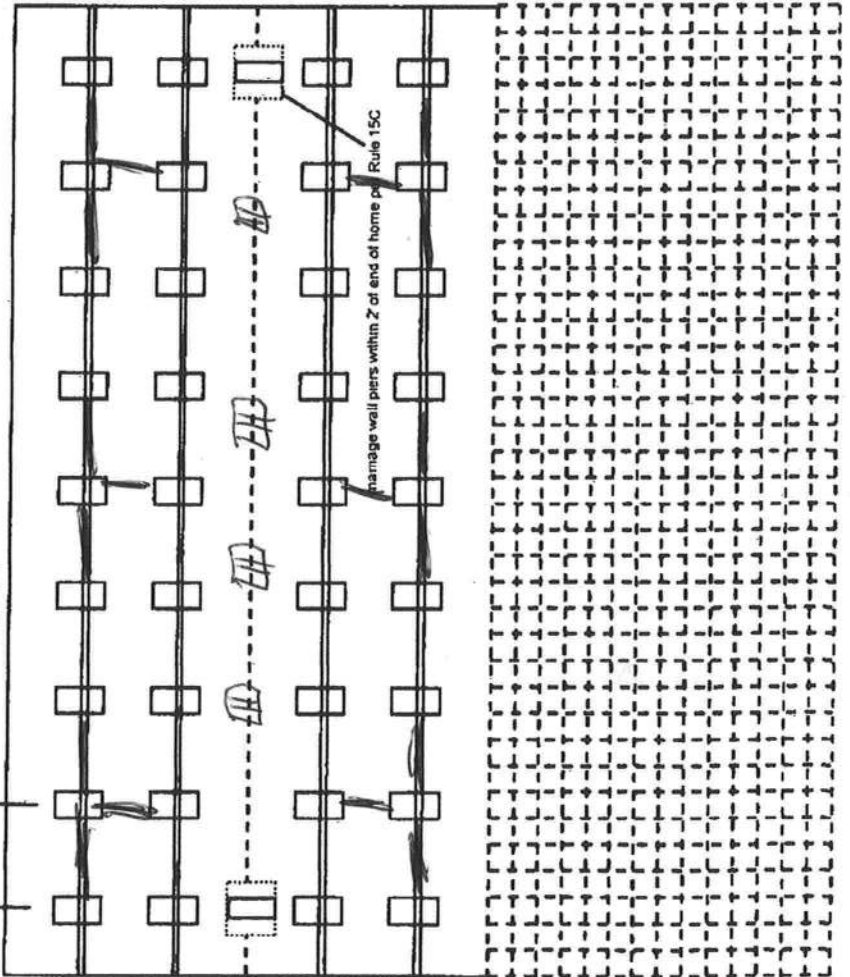
RS

Typical pier spacing

2' 6" 0



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



New Home



Used Home



Home installed to the Manufacturer's Installation Manual



Home is installed in accordance with Rule 15-C



Single wide



Wind Zone II



Wind Zone III



Double wide



Installation Decal #

305376

Triple/Quad



Serial #

Ordered

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16' x 16" (256)	18 1/2" x 18 1/2" (342)	20' x 20" (400)	22' x 22" (484)	24' x 24" (576)	26' x 26" (676)
1000 psf	3'	4'	4'	5'	6'	7'	8'
1500 psf	4'	6'	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7'	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 17x25

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

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Oliver 1101V

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

26

26

26

26

PERMIT WORKSHEET

PERMIT NUMBER

POCKET PENETROMETER TEST

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

x 1800 x 1700 x 1700

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 1800 x 1800 x 1800

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 4 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 requires anchors with 4000 lb holding capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Sheppard

Date Tested 10-18-09

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 28

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

Site Preparation

Debris and organic material removed Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: lags Length: 6 Spacing: 16
Walls: Type Fastener: screws Length: 6 Spacing: 16
Roof: Type Fastener: lags Length: 5 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

Form

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

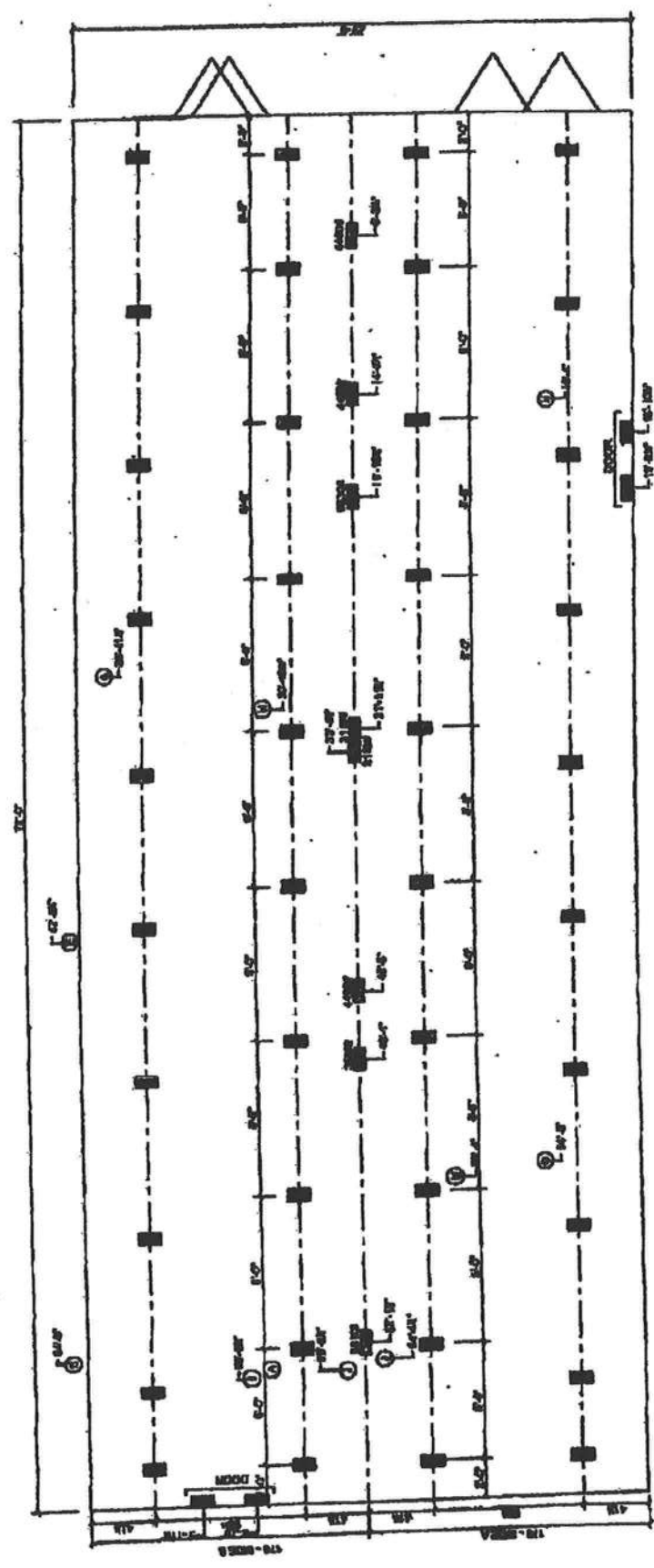
The bottomboard will be repaired and/or taped. Yes
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

Skirting to be installed. Yes
Dryer vent installed outside of skirting. Yes
Range downflow vent installed outside of skirting. Yes
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

Installer Signature Robert Sheppard Date 10-19-09



SEE MARRIAGE LINE OPENING SUPPORT PIER/TYP.
 SEE SUPPORT PIER/TYP.

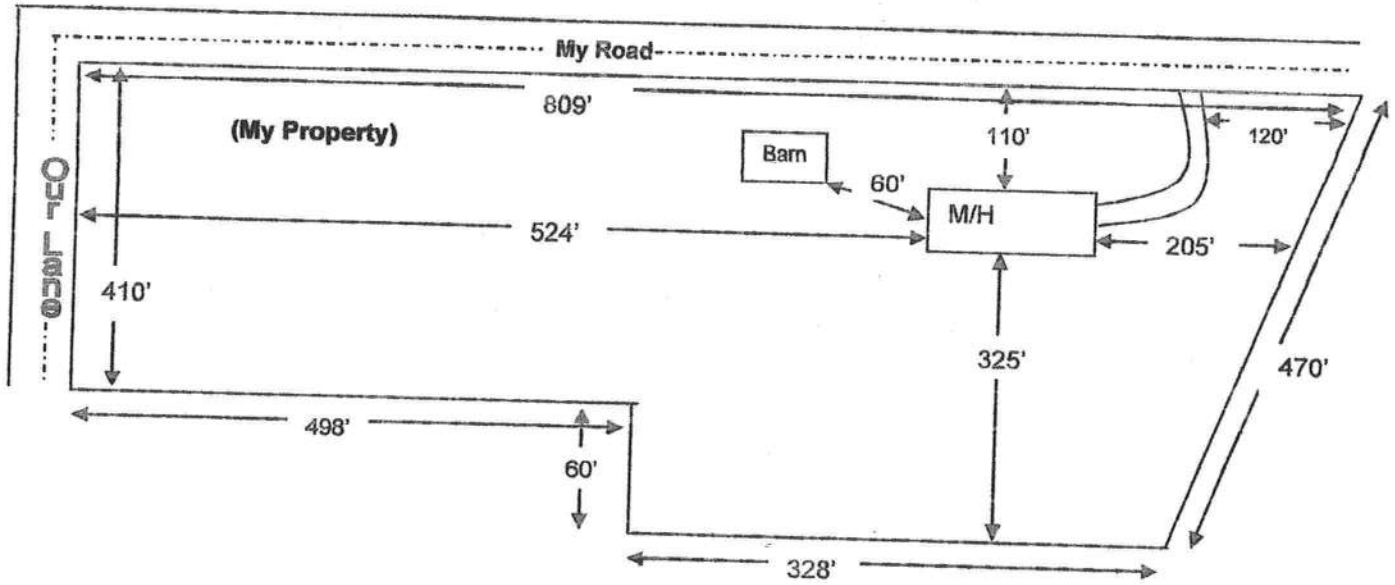
EXPLANATION: THIS PLAN IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
 - THIS DRAWING IS CONTAINED FOR THE STANDARD TWO ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
 - FLOORING ARE SHOWN FOR EXAMPLE ONLY. CLIMATE AND LOCAL CODES MAY VARY BASED ON FLOOR TYPE, AREA, CONNECTION, ETC.
 - FLOORING ARE SHOWN AT SUPPORT POSTS. SEE INSTALLATION MANUAL FOR REQUIREMENTS.

- ① BATH ELECTRICAL
- ② ELECTRICAL CROSSOVER
- ③ WATER PUMP
- ④ WATER CROSSOVER (IF ANY)
- ⑤ GAS INLET (IF ANY)
- ⑥ GAS CROSSOVER (IF ANY)
- ⑦ BATH CROSSOVER
- ⑧ BATH CROSSOVER
- ⑨ SUPPLY AIR (DUCT, HEAT PUMP ON BATH)
- ⑩ SUPPLY AIR (DUCT, HEAT PUMP ON BATH)
- ⑪ SUPPLY AIR (DUCT, HEAT PUMP ON BATH)
- ⑫ SUPPLY AIR (DUCT, HEAT PUMP ON BATH)

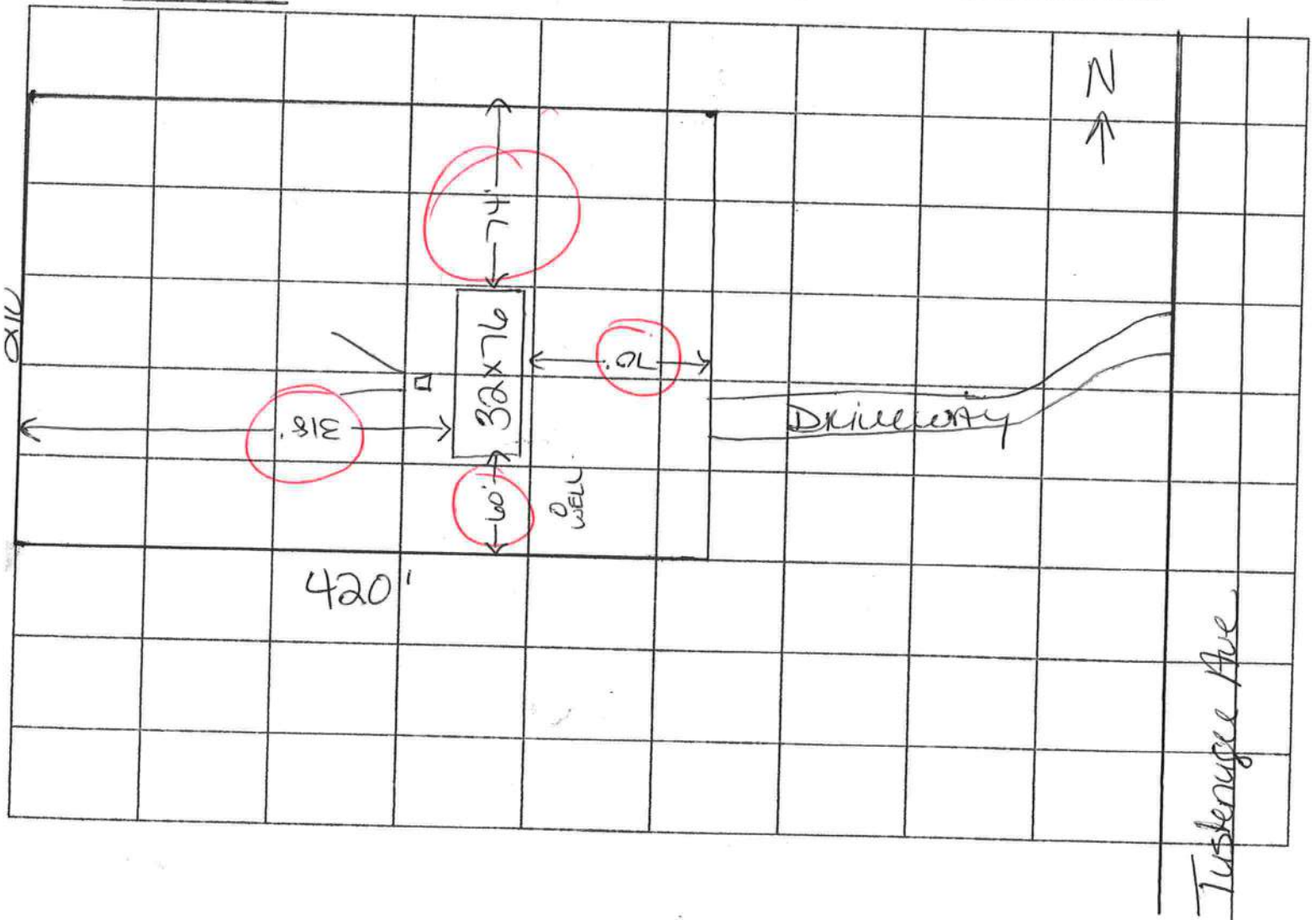
Live Oak Homes
 MODEL: L-3724A - 32 X 76
 4-BEDROOM / 2-BATH

L-3724A

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



EX 0889 PG 1044

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Recording Fee \$ 15.00
Documentary Stamp \$ 70
RECORDS OF COLUMBIA COUNTY

OCT -4 PM 4:05

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Grantee S.S. No.

Property Appraiser's
Parcel Identification No.
08586-001

Documentary Stamp 70
Intangible Tax 6
P. DeWitt Lason
Clerk of Court
By MLK D.C.

WARRANTY DEED

THIS INDENTURE, made this 4th day of October, 1999,
BETWEEN W.P. LYNCH, SR., and his wife, ANNA Y. LYNCH, whose post
office address is Route 6, Box 464, Lake City, Florida 32025, of
the County of Columbia, State of Florida, grantor*, and WOODROW P.
LYNCH, III, whose post office address is Route 6, Box 30463, Lake
City, Florida 32025, of the County of Columbia, State of Florida,
grantee*.

WITNESSETH: that said grantor, for and in consideration of
LOVE AND AFFECTION, and other good and valuable considerations to
said grantor in hand paid by said grantee, the receipt whereof is
hereby acknowledged, has granted, bargained and sold to the said
grantee, and grantee's heirs and assigns forever, the following
described land, situate, lying and being in Columbia County,
Florida, to-wit:

SEE EXHIBIT "A" ATTACHED HERETO.

SUBJECT TO: Restrictions, easements and outstanding
mineral rights of record, if any, and taxes for the
current year.

N.B. Grantors reserve a life estate in the herein
described property.

and said grantor does hereby fully warrant the title to said land,
and will defend the same against the lawful claims of all persons
whomsoever.

*"Grantor" and "grantee" are used for singular or plural, as
context requires.

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand
and seal the day and year first above written.

Signed, sealed and delivered
in our presence:

EX 0889 PG1045

DeEtte F. Brown
(First Witness)

DeEtte F. Brown
Printed Name

W.P. LYNCH, SR. (SEAL)
W.P. LYNCH, SR. OFFICIAL RECORDS

Lisa C. Ogburn
(Second Witness)

Lisa C. Ogburn
Printed Name

Anna Y. Lynch (SEAL)
ANNA Y. LYNCH

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 4th
day of October, 1999, by W.P. LYNCH, SR., and his wife,
ANNA Y. LYNCH, who are personally known to me and who did not take
an oath.

My Commission Expires:

DeEtte F. Brown
Notary Public
Printed, typed, or stamped name:



EXHIBIT "A"

CK 0889 PG 1046

OFFICIAL RECORDS

COMMENCE at the Southwest corner of the Northeast 1/4 of the Southwest 1/4 of Section 20, Township 4 South, Range 17 East, Columbia County, Florida and run N.88°33'37"E. along the South line of said Northeast 1/4 of the Southwest 1/4 a distance of 420.01 feet; thence N.01°01'02"W. parallel to the West line of said Northeast 1/4 of the Southwest 1/4 a distance of 199.30 feet to the POINT OF BEGINNING; thence S.88°52'53"W. 420.00 feet to a point on the West line of said Northeast 1/4 of the Southwest 1/4; thence N.01°01'02"W. along said West line 210.00 feet; thence N.88°33'37"E. parallel to the South line of said Northeast 1/4 of the Southwest 1/4 a distance of 420.00 feet; thence S.01°01'02"E. parallel to the West line of said Northeast 1/4 of the Southwest 1/4 a distance of 212.35 feet to the POINT OF BEGINNING. Containing 2.04 acres, more or less.

Columbia County Property Appraiser

DB Last Updated: 10/9/2009

Parcel: 20-4S-17-08586-008 HX

2009 Preliminary Values

Tax Record

Property Card

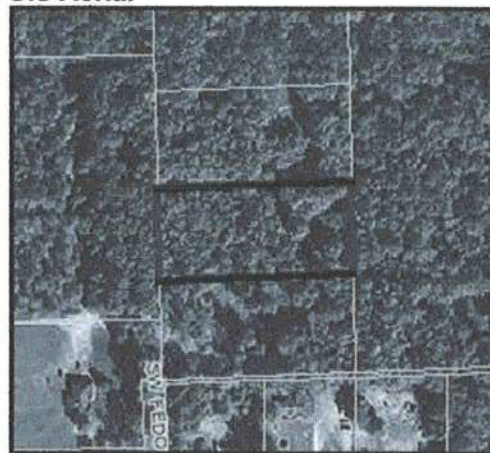
Interactive GIS Map

Print

Owner & Property Info

<< Prev Search Result: 18 of 18

Owner's Name	LYNCH WOODROW O III		
Site Address	TUSTENUGGEE		
Mailing Address	1186 SW TUSTENUGGEE AVE LAKE CITY, FL 32025		
Use Desc. (code)	MOBILE HOM (000200)		
Neighborhood	020417.01	Tax District	2
UD Codes	MKTA02	Market Area	02
Total Land Area	2.040 ACRES		
Description	COMM SW COR OF NE1/4 OF SW1/4, RUN E 420.01 FT, N 199.30 FT FOR POB, RUN W 420 FT, N 210 FT, E 420 FT, S 212.35 FT TO POB. ORB 889-1044,		

GIS Aerial**Property & Assessment Values**

Mkt Land Value	cnt: (2)	\$25,023.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$25,419.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$50,442.00

Just Value	\$50,442.00
Class Value	\$0.00
Assessed Value	\$42,078.00
Exemptions	(code: HX) \$25,000.00
Total Taxable Value	County: \$17,078.00 City: \$17,078.00 Other: \$17,078.00 School: \$17,078.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
10/4/1999	889/1044	WD	V	U	01	\$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SFR MANUF (000200)	1999	Vinyl Side (31)	960	1152	\$25,419.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	0000002.040 AC	1.00/1.00/1.00/1.00	\$11,286.00	\$23,023.00
009945	WELL/SEPT (MKT)	0000001.000 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 10/9/2009

<< Prev

18 of 18

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Robert Sheppard

PHONE

386-623-2203

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	Print Name _____ License #: _____	Signature _____ Phone #: _____
☒ MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
☒ PLUMBING/ GAS	Print Name <u>Robert Sheppard</u> License #: <u>TH0000833</u>	Signature <u>Robert Sheppard</u> Phone #: <u>386-623-2203</u>
☐ ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
☐ SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
☐ FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
☐ SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors 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.

Woodrow Lynch

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE 386-623-2203
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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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 _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature <u>[Signature]</u> Phone #: <u>800-859-3768</u>
PLUMBING/ GAS	Print Name <u>Robert Sheppard</u> License #: <u>TH0000833</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-2203</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors 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			

§. 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.

Woodrow Lynch

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APPLICATION NUMBER _____

CONTRACTOR

Robert Sheppard

PHONE 386-623-2203

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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 <u>John M. Carlson</u>	Signature <u>[Signature]</u>
	License #: <u>ER0002038</u>	Phone #: <u>386-752-8575</u>
☒ MECHANICAL/A/C	Print Name <u>Robert Grant</u>	Signature <u>[Signature]</u>
	License #: <u>CAC1814931</u>	Phone #: <u>800-859-3768</u>
☒ PLUMBING/GAS	Print Name <u>Robert Sheppard</u>	Signature <u>[Signature]</u>
	License #: <u>IT0000833</u>	Phone #: <u>386-623-2203</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 #: _____
☐ 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		

§ 440.105 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 440.20, and shall be presented each time the employer applies for a building permit.

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, Robert D. Shepard, license number IH 0000833 state that the installation of the manufactured home for owner Woodrow Lynch at

911 Address: 1186 SW Tuskenigle Ave City Lake City

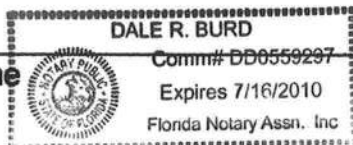
will be done under my supervision.

Signed: Robert Shepard
Mobile Home Installer

Sworn to and described before me this 20 day of October 2009

[Signature]
Notary public

Notary Name



Personally known ✓

DL ID _____

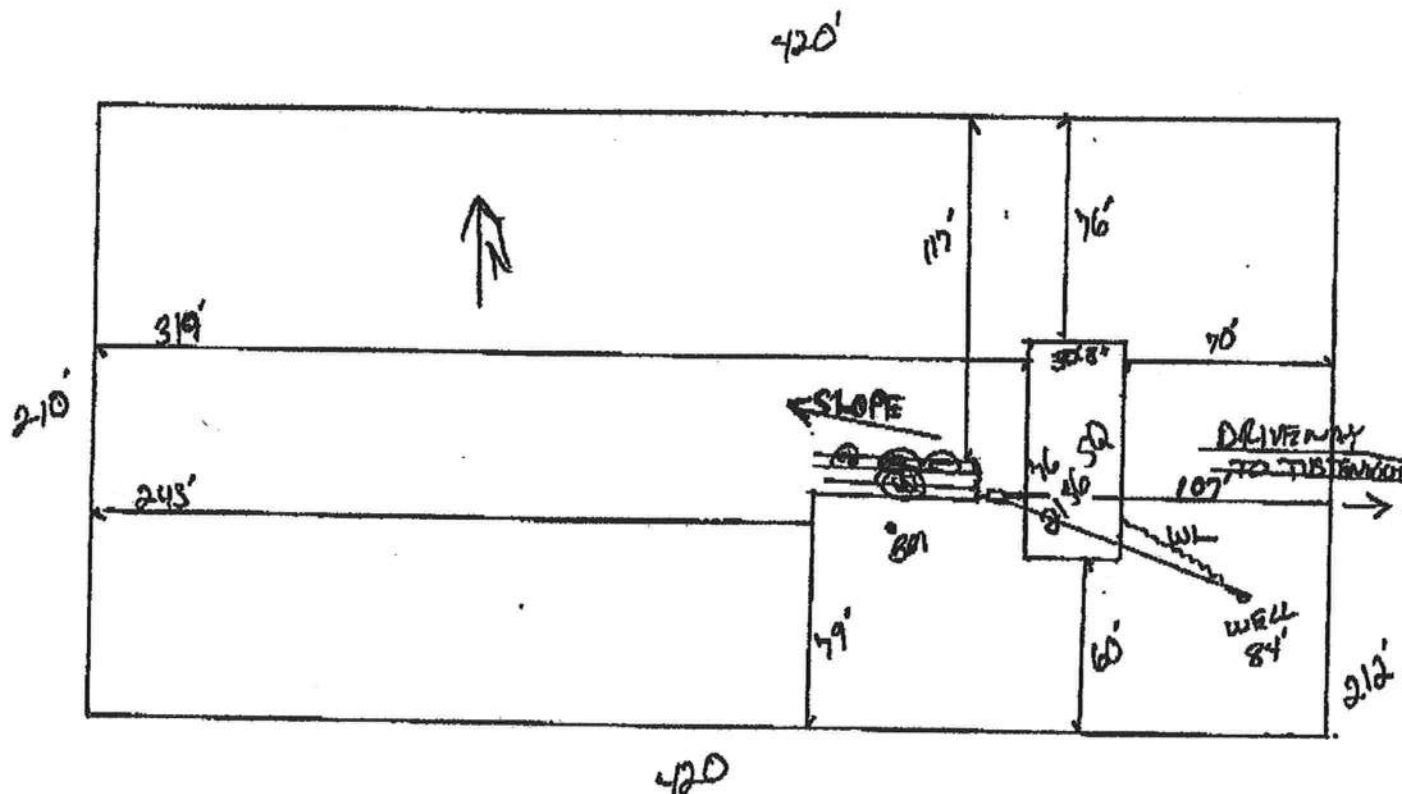
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Lynch App 0910-53

Permit Application Number 09-05354

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

Scale: 1 inch = ⁶⁰50 feet.



Notes:

Site Plan submitted by: Robert D. Ford

Plan Approved ✓

Not Approved

By Julie Ford, EHP Director Columbia

MASTER CONTRACTOR

Date 10/26/09

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA AVENUE
OPEN

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 20-4S-17-08586-008

Building permit No. 000028176

Permit Holder ROBERT SHEPPARD

Owner of Building WOODROW LYNCH

Location: 1186 SW TUSTENUGGEE AVENUE

Date: 11/10/2009



Harry Dicks

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)