PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	For Office Use Only	(Revised 7-1-15)	Zoning Official	Build	ing Official
					t #
A THE REAL PROPERTY OF THE PARTY OF THE PART	Flood Zone Dev				Plan Map Category
					In Floodway
	□ Recorded Deed or □ P	roperty Appraiser	PO 🗆 Site Plan 🗆 E	H #	□ Well letter OR
	☐ Existing well ☐ Land			•	
	□ DOT Approval □ Pare	nt Parcel #	= STU	JP-MH	□ 911 App
	☐ Ellisville Water Sys	Assessment	Out Cou	nty 🗆 In County	□ Sub VF Form
P	roperty ID # 1 <u>2-45-15</u>	5-00347-007	Subdivision		Lot#
а					e <u>22 180</u> Year <u>2020</u>
	Applicant H&L (ustomer Se	ruice, LLC	_ Phone #(3	86) 984-9334
ш	Address 301 Sw	FAUL OT,	LAKE Cily	F1, 32024	
=		•			(386) 697-5186
	911 Address 1435				/
25	Circle the correct po		,		
			Suwannee Valley		
	Name of Owner of M			4	leman #(386) 697-5186
					,32024
ш	Relationship to Prop	erty Owner	son à dau	suter in la	ew
	Current Number of D	wellings on Prop	pertyl_old	d barn	
н	Lot Size 275 x	375	Total Acre	age5-0	ol acres.
	Do you : Have Existi	ng Drive or Private (Blue R	te Drive or need Cu	Ivert Permit or C	Culvert Waiver (Circle one) Not existing but do not need a Culvert)
	Is this Mobile Home	Replacing an Exi	sting Mobile Home	Yes	
н	Driving Directions to	the Property To	me on NE m	adison ST, To	orn Donto N Marion
					2B, Turn Wondo SW
					Turn Onto Sw Dell
			T, The desti		
			,		ne # (386) 623-2203
ш	Installers Address				
8	License Number	FH/1025380	eIns	stallation Decal #	3451

April 25, 2020

Alberta Coleman

Post Office Box 3381

Lake City, Florida 32056

RE: Parcel Number: 12-4S-1S-00347-007

Address: 1435 SW Brim Street Lake City, Florida 32024

To Whom it May Concern,

I, Alberta Coleman give permission for Lindsay Beach and Christopher Coleman to place a mobile home at the address above.

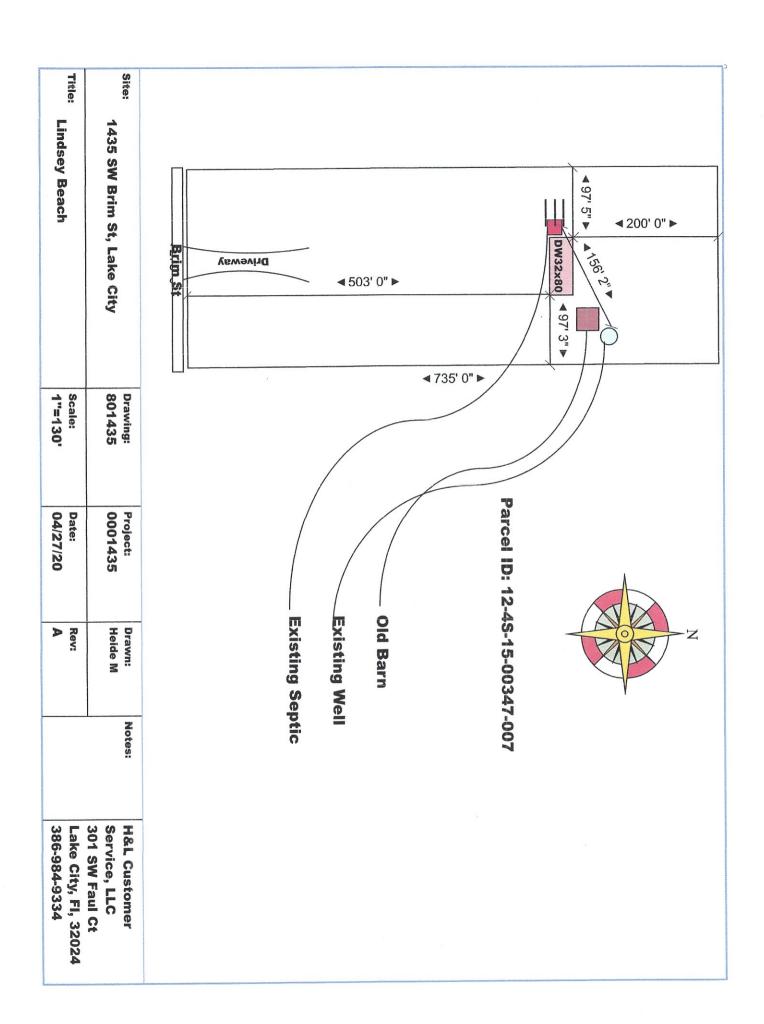
Thank you,

Alberta Coleman

Notary Public State of Florida Lamanda Mote My Commission GG 363938 Expires 08/08/2023

H&L Customer Service, LLC 301 SW Faul Court, Lake City, Florida 32024 LIMITED POWER OF ATTORNEY

Lindsau Beach	, do hereby authorize H&L
Customer Service, LLC and it's members, Heide Mo	
behalf in all aspects of applying for permits, pulling	permits, and picking up permits as needed for the
installation of a new mobile home located at the be	elow address;
1435 SW Brims	trect
Lake City FL 32	024
In <u>COlumbia</u> cou	nty, Florida.
1 .	
Mula Baril	4/26/20
XMUSHY Each	9/24/20
Signature	Date
State of Florida	The second secon
County of Columbia	situ.
This Instrument was signed or acknowledged before	ore me on this de day of
provided personally knows	a CL . If ID provided, type of state issued ID
provided personned	
Kanado Wate	Notary Public State of Florida
Notary Public	Seal: Lamanda Mote My Commission GG 363938
	Expires 08/08/2023
My Commission Expires: D8/08/2023	
My Commission Expires: D8 08 202 3	
	.7



Mobile Home Permit Worksheet

Wind Zone III

3451

24" X 24"

26" x 26" (676)

(576)*

∞ ∞ ∞ ∞ ∞ ∞

USED HOMES 20" 22" x 22" 7 (484)* (484)* (7) (484)* (6) (8) (8) (8) (8) (8) (10) (10) (10) (10) (10) (10) (10) (10	Triple/Quad	PIER SPACING TABLE Footer 16" x 16" 18 1/2" x 18 size (256) (256) 1/2" (342) psf 4'6" 6'8 8'8 8'8 8'9 sf 6'8 8'8 8'9 sf 6'8 8'9 sf 7'6" 8'9 sf 8'' sf 8'' sf 8'' s	St St III page the page of t	Triple/Quad PIER Load size capacity (sq in) 1000 psf (256) 2500 psf (7'6') 2500 psf (7'6') 3500 psf (8'7'6') 2500 psf (8'7'6') 3500 psf (8'7'6') (PIER Interpolated from Rule 18' PIER Interpolated from Rule 18' I	* Cap beg Cap T	fill out one half of the blocking plan ad wide sketch in remainder of home annot be used on any home (new or used) 4 in. Installer's initials	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 Show locations of Longitudinal and Lateral Sy (use dark lines to show these locations) Imprinciple or quad wide sketch in remainder of home (new or used) where the sidewall ties exceed 5 ft 4 in. Installer's initials Where the sidewall ties exceed 5 ft 4 in. Installer's initials Provided the sidewall state of the side	linstaller's initials from the blue tetch in remains ased on any hom installer's initials from the fro	out one wide sket not be used in the used and the sket and the used and the sket an	lde wide fill e or quad in stems can ged 5 ft 4 in longitudinal	NOTE: if home is a single wide fill if home is a triple or quad value or	NOTE: if home if home I understand Late; where the sidewal Typical pier spacing 2' \$\frac{2}{2} \rightarrow \frac{1}{2} \right	NOTE: I unders where t
(N	Installation Decal#	Installat	P	Double wide	D	32×20		Length x width	E -	Her	tomes of	-	Manufacturer
		Serial #		riple/Quad	=	lan me	blocking painder of ho	half of the	out one vide sket	e wide fill or quad	is a singl	if home if home	NOTE:
USED HOMES	TABLE FOR L	SPACING	\dashv		_	me r used)	nome (new o	ch in rema	vide sket	or quad in stems can ad 5 ft 4 in	is a triple ral Arm Sy:	if home stand Later he sidewal	I unders
					hea	S.	lals X	staller's init		1	ביומים מאכים	. old dwg	
					cap						\ 	er spacing	Typical pie
O <u>'</u>		4	\vdash	6-						ateral	\ 	103	12
. ω		6	4'6"	1500 psf		Lateral Systems	itudinal and	ns of Long	ow locatio	Sh		<u> </u>	^
ω ω <u></u>		200	7.6.	2000 psf	T	ocations)	show these I	rk lines to	(use da	longitudinal			
Φ.	+	00 0	8	3000 psf									
ω_				3500 psf	*								
POPL									-				
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1-40	SCXEI		sizes ne mfg.))ther pier pac equired by th	(F) (O)	担							
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17 1/	eater. Ose this	the piers.	oeiliigs 4	symbo		e perRule 15C	n 2' of end of hom	e wall piers with	marriag				
oot	eater than 4 fo	penings gra below.	ge wall op pad sizes	ist all marriac nd their pier i	a [:			#		#	#	+	
. [ad size	Pier p		Opening									
, 4 7													
within 2					1								
spaced					1								
	STN	COMPONE	TIEDOWN										
Sidewa	(LSD)	ng Device	Stabilizii	-	3.5								
	w/ Lateral Ar.	ng Device	Stabilizi	_	373								
	2	ver !	ファ										

POPULAR PAD SIZES

Pad Size
16 x 16
16 x 18
18.5 x 18.5
16 x 22.5
17 x 22
13 1/4 x 26 1/4
20 x 20
17 3/16 x 25 3/16
17 1/2 x 25 1/2
24 x 24
26 x 26

288 342

Sidewall Longitudinal Marriage wall Shearwall

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

FRAME TIES

OTHER TIES

5ft

ANCHORS

676

441 400 348

Mobile Home Permit Worksheet

POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations.	x1500 x 1600 x 1600	The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST
	1600	Sf	

TORQUE PROBE TES

300

130

ω N

Using 500 lb. increments, take the lowest Take the reading at the depth of the footer

reading and round down to that increment

showing 275 inch pounds or less will require 5 foot anchors The results of the torque probe test is $\frac{995}{}$ here if you are declaring 5' anchors without testing inch pounds or check

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-b holding capacity

Installer's initials

Installer Name

Date Tested

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER 40 reppore

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. 99

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

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

oplicati	
on N	
plication Number:	
And the second of the second o	
Date	

≥

a result of a poorly installed or no gasket being installed. I understand a strip 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 of tape will not serve as a gasket

Installer's initials

Type gasket

Between Walls Bottom of ridgebeam Yes Between Floors Installed Yes

Weatherproofing

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

Miscellaneous

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

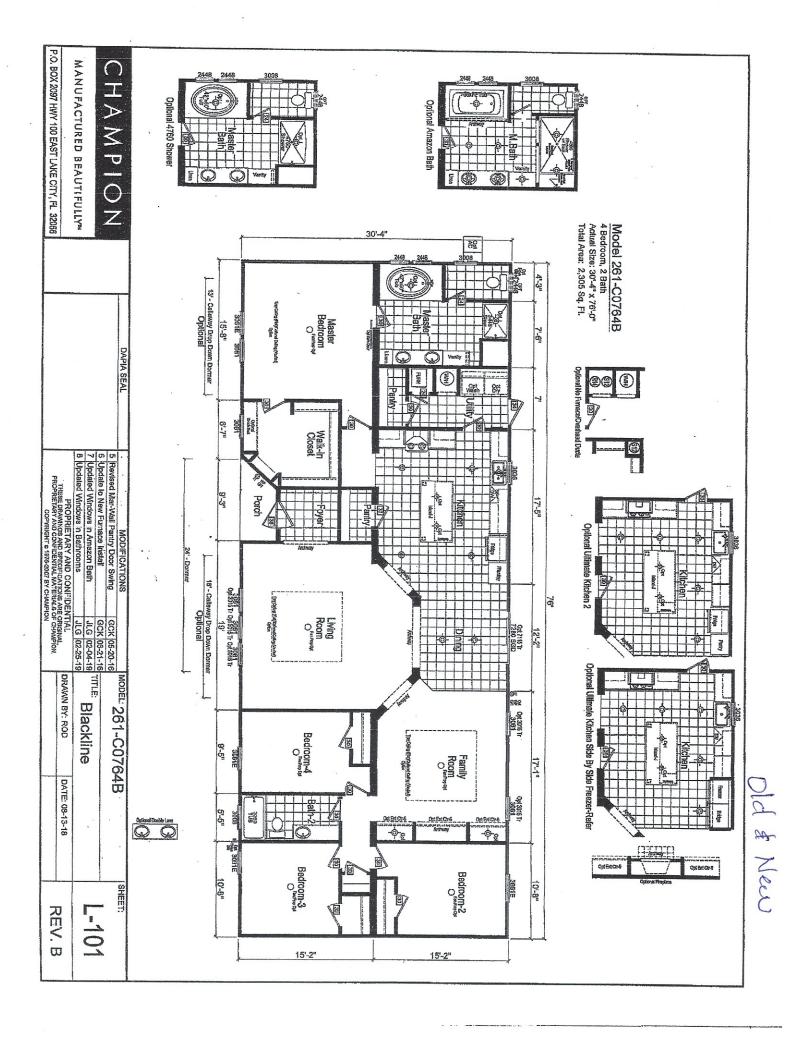
Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

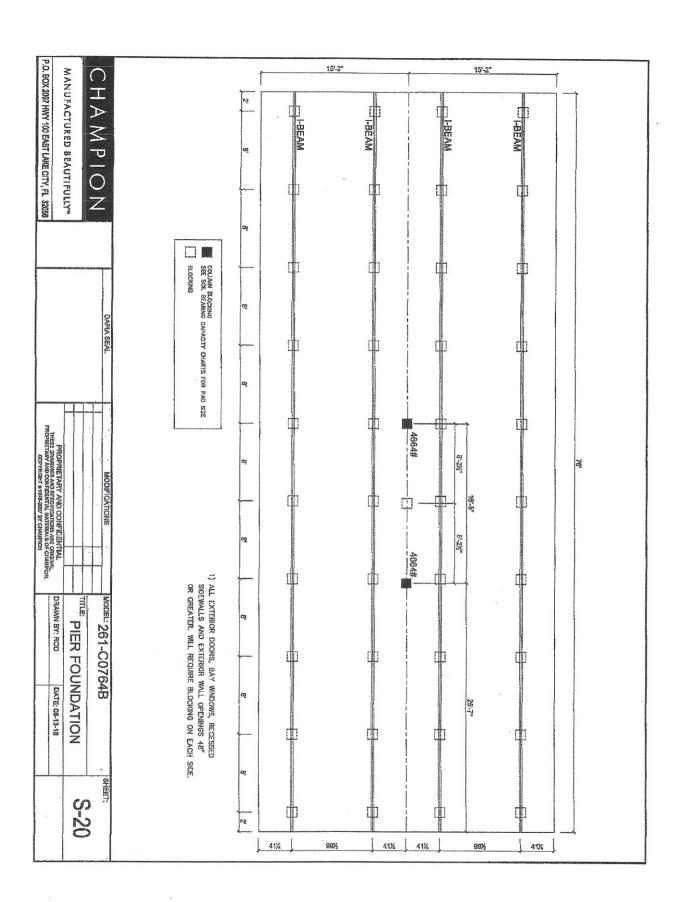
Installer Signature

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	application number Contractor Robert Sheppard PHONE IH/1005381									
	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 Glenn Whittington License #: EC13002957 Signature Glenn Whittington Phone #: (386) 972-1701 Qualifier Form Attached									
MECHANICAL/	Print Name Charles Thomas Signature Charles Thomas License #: CAC 1817820 Phone #: (419) 630-2023 Qualifier Form Attached									
	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.





CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED BY IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME L'indsey Beach Christopher coleman CELL (386) 697-5188 ADDRESS 1435 SW Brim ST, LAKE City, F1, 32024
ADDRESS 1435 SW Brim ST, LAKE City, F1, 32024
MOBILE HOME PARKSUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME TURN DONTO NE MADISON ST, TURNED ONTO N. MARON Ave,
DRIVING DIRECTIONS TO MOBILE HOME TURN DONALO NE MADISON ST, TURN D ONTO N. MANON Ave, TURN D ONTO W DUVAL ST, TURN D ONTO SW CR-252B, TURN D ONTO SW DEPUTY J DAG TURN D ONTO PROGRAMMENT Rd, TURN D ONTO DEXLERD, TURN DONTO SW Brim ST, destinx
MOBILE HOME INSTALLER Robert Sheppard PHONE CELL (386) 623-2203
MOBILE HOME INFORMATION MAKE Homes of Alerit YEAR 2000 SIZE 32 x 80 COLOR Grey
MAKE POMES OF MERIT YEAR 2000 SIZE 32 X 80 COLOR CITO
SERIAL No.
WIND ZONE
INSPECTION STANDARDS INTERIOR:
(P or F) - P= PASS F= FAILED
SMOKE DETECTOR () OPERATIONAL () MISSING
FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION
DOORS () OPERABLE () DAMAGED
WALLS () SOLID () STRUCTURALLY UNSOUND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
CEILING () SOLID () HOLES () LEAKS APPARENT
ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS
SIGNATURE ID NUMBER DATE



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

Installer License Holder Nai		nis authority fo	or the job address show below					
only, 1435 Sw Basa	Street Job Address		, 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 purcha	se permits, call for in	spections and	l sign on my behalf.					
Printed Name of Authorized Person	Signature of Author Person	orized	Authorized Person is (Check one)					
HAL Customer Service	If nfarise	×^	Agent Officer 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.								
Robert She	sponsibility for compl	ı	d by issuance of such permits. $5386 \qquad 64/27/20$					
License Holders Signature (Not	arized)	License Nu	mber Date					
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF:	Columb						
The above license holder, whos personally appeared before me (type of I.D.) personally		or has produc	ced identification of April , 2020.					
Hamanda Motary's Signature		~~ 	Notary Public State of Florida Beal State My Commission GG 363938 Expires 08/08/2023					

Ironwood Homes

DATE OF BIRTH			4109 US HWY.	on WEST			, is
BUYER 1251	an						
CO-BUYER /	70		Lake City. FL	_ 32024			
07/05/8	36.	OFFICE [38	36]754-8844 FAX	[386]754-0190	· ·		
BUYER(S) LINUSAY.S	immer Pro	ch and a	mskoperteytev	Coleman	386-697-5	186	DATE
133 NG	Nikita	Place. 1	LAKE CH 71	30055			SALES PERSON CINDY
DELIVERY ADDRES	SID Re	im Stra	of LAKE CITY	171 320	a4.		BICKEL
MAKE & MODEL	mari	YEAR	BEDROOMS	FLOORSIZE	HITCHSIZE		
Homesoff	BANDE	2020	4	76 32	80 30		
SERIAL NUMBER	HET ST W. CO.			COLOR	PROPOSED DELIVERY	DATE	KEY NUMBERS
					5105551000		1.00000
LOCATION	R-VALUE	THICKNESS	TYPE OF INSUI	LATION	BASE PRICE O	F UNII	145,000
CEILING	-				OPTIONAL EQUIPMENT (Taxable)		
EXTERIOR					Other (taxable)	CUD TOTAL	ICE DOD
FLOORS	<u> </u>					SUB-TOTAL	H45,000
ł .			nufacturer and is disclose		SALES TAX	6%	8700
in compliance with	the Federal tra	de Commission R	ule 16CFR, Sec. 460.16.		SALES TAX	070	0100
		NON-TAXA	RIFITEMS		NON-TAXABLE ITEMS		5300
			The state of the s	4 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	TAG & TITLE FEES		7550
			DEL/FREIGHT		COUNTY SURTAX		50
	·.	•	STATECODESET			1	
	,		2CODESTEPS In	cludoch	1.CASH PURCHAS	E PRICES	159,300
2/10 Warranty			3RDSTEP		TRADE IN ALLOWANCE	\$	The Late of the Control of the Contr
Extended Serv	ice Anmt		A/CINSTALLED I	cluded	LESS BAL. DUE ON ABOVE	\$	
Bird Dog Fee	;		UCATOUME		NET ALLOWANCE	\$	
1/7/10WARRA	NTY .		STD.SKIRTING	neluded	CASH DOWN PAYMENT	\$9,300	
Land Improve			UPGRADESKIRT		CASH AS AGREED	\$.	
Well Replace		600	APPLIANCES		2. LESS TOTAL C	REDITS	\$ 9300
SepticSTDING			FOOTERS			SUB-TOTAL	
ELEVATEDSE			SHED		SALES TAX(not included a	above)	(
Power Pole/SL	IBFEED.		PORCHES/DECKS		3. UNPAID BAL OF CASH SA	LE PRICE	\$ 150 000
Sewer/WATER	CON20FT T	neluded	GUTTERPACK :	_	REMARKS:		
ELECTRICAL			DistPAd	2000	NO VERBAL AGREEMEN	ITS WILL BE HO	NORED.
Land Clearing		- 5	1YRINSURANCE		Initial:		AND THE PROPERTY OF THE PROPER
PERMITS/SITI	EPLAN /	500	CLOSINGCOST				
IMPACTFEE			FHA FEES		Connect water & sewer wit		
			TOTAL	5300	Customer responsible for a		
		USIONS AND LIMITATION	ONS OF DAMAGES ON THE REV	VERSE SIDE.	Wheels & Axiles deleted from a local move	om sale price of	home. Will lend for
DESCRIPTION OF MAKE	11/06/2011		MODEL	BEDROUMS	•	-love" - C	a offer i-U-I
			SERIAL	COLOR	Customer responsible for Cannot be responsible for	~	e aiter inital setup.
AMOUNT OWING	TO WHOM	<u> </u>	NO.	-	Carrier of responsible for	- July of Idild.	
		1		DIVED I			
		RADE-IN IS TO BE I			R REPRESENTATION OR INDUCE	MENT, VERBAL OR W	VRITTEN, HAS BEEN
MADE WHICH IS N	OT CONTAINED	IN THIS CONTRACT	. Dealer and Buyer certify the	at the additional terms and	conditions printed on the other side	of this contract are ago	reed to as a part of this
agreement, the san	ne as if printed abo	ove the signatures.Bu	yer is purchasing the above from all claims whatsoever,	described trailer, manufact except as noted.	tured home or vehicle: the optional e	quipment and acessor	les, the insurance as
					UNDERSTANDS THE BACK OF T	HIS AGREEMENT.	
,		Ironwood	Homes		SIGNED X LUD MAL	Beach	BUYER
		11 OTTWOOD	Tivilles	DEALER	SOCIAL SECURITY NO	1594-96	-7340
Not Valid U	Inless Signed and	Accepted by an Offic	er of the Company or an Aut	horized Agent	SIGNED X	2	BUYER
Ву					11	rais r	2 72 2 3
		APPRO	OVED		SOCIAL SECURITY NO.	544-7	6-701

Columbia County Property Appraiser

Jeff Hampton

Use Code**

Parcel: << 12-4S-15-00347-007 >>>

Tax District

3

Owner & Pr	operty Info	Result: 1	of 38				
Owner	COLEMAN ALBERTA P O BOX 3381 LAKE CITY, FL 3205633	381					
Site	1435 BRIM ST, LAKE C	ITY					
Description*	COMM SE COR OF SEC, TOMPKINS RD FOR POB 298.08 FT, S 732.22 FT, E 815-1837 818-020, WD 11 DEED), MODIF AFD 1198 BARRY COLEMAN), COR	8, CONT N 732. 298.08 FT TO 67-1052(TRUS -2376, (DC 119	22 FT, W POB. ORB TEES 8-2375;				
Area	5.01 AC	S/T/R	12-45-15				

MISC RES (000700)

^{*}The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.

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

Property & A	Property & Assessment Values								
2019 Cert	tified Values	2020 Wo	rking Values						
Mkt Land (2)	\$34,246	Mkt Land (2)	\$34,246						
Ag Land (0)	\$0	Ag Land (0)	\$0						
Building (0)	\$0	Building (0)	\$0						
XFOB (1)	\$2,160	XFOB (1)	\$2,160						
Just	\$36,406	Just	\$36,406						
Class	\$0	Class	\$0						
Appraised	\$36,406	Appraised	\$36,406						
SOH Cap [?]	\$0	SOH Cap [?]	\$0						
Assessed	\$36,406	Assessed	\$36,406						
Exempt	\$0	Exempt	\$0						
Total Taxable	county:\$36,406 city:\$36,406 other:\$36,406 school:\$36,406		county:\$36,406 city:\$36,406 other:\$36,406 school:\$36,406						



Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
1/27/2014	\$100	1268/1853	WD	V	U	11
5/19/2011	\$100	1218/1812	WD	V	U	11
8/3/2010	\$0	1198/2376	AG	V	U	11
2/16/2009	\$100	1167/1052	WD	V	U	11
2/23/1996	\$8,750	818/0020	AG	V	U	01
1/2/1996	\$20,000	815/1837	WD	V	Q	

	cteristics					
Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value

Extra Features & Out Buildings (Codes)						
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2010	\$2,160.00	240.000	10 x 24 x 0	(000.00)

1/2 columbia.floridapa.com/gis/

Land Brea	akdown				
Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000700	MISC RES (MKT)	5.010 AC	1.00/1.00 1.00/1.00	\$6,187	\$30,996
009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$3,250	\$3,250

Search Result: 1 of 38 © Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis Governor

Scott A. Rivkees, MD State Surgeon General

Vision: To be the Healthiest State in the Nation

May 12, 2020

(H and L Customer Service LLC) 301 SW Faul Court Lake City, FL 32024

RE: Contingency Letter

Application Document No: AP1482954 Centrax Permit Number: 12-SC-2061187

OSTDS Number: 1435 SW Brim St Lake City, FL 32024

Lot:

Block:

Subdivision:

Dear Applicant:

This will acknowledge receipt of an application dated 05/06/2020 for a permit to use an existing onsite sewage treatment and disposal system located on the above referenced property.

From a review of your completed application, it has been determined that your existing system appears to meet the minimum standards of F.A.C. 64E-6 for the proposed use. It is approved for use with the plans submitted to this office. If this system should fail, causing an unsanitary condition to exist, steps must be taken to bring the system into compliance immediately. Department approval of the system does not guarantee satisfactory performance for any specific period of time. Any change in material facts which served as a basis for issuance of this approval requires the applicant to modify the permit application. Such modification may result in this approval being made null and void. Issuance of this approval does not exempt the applicant from compliance with other Federal, State, or Local Permitting required for development of this property.

If you have any questions on this matter, please call our office at (386) 785-1058.

Sincerely

Dustin Jones, Environmental Specialist II

Enclosures

CC:

R