

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

2751

For Office Use Only (Revised 7-1-15)

Zoning Official LC Building Official TM 3/21/18

AP# 1803-58 Date Received 3/21 By JTW Permit # 36548

Flood Zone X Development Permit _____ Zoning A3 Land Use Plan Map Category _____

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor 11' above road River _____ In Floodway _____

☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 18-0259 ☐ Wet letter OR

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

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

☐ Ellisville Water Sys ☒ Assessment pd ☒ Out County ☒ In County ☒ Sub VF Form Supp ☒ We LC

32648

Property ID # 14-25-15-00062-008 Subdivision Shadow wood estates Lot# 8

- New Mobile Home _____ Used Mobile Home ☒ MH Size 32x56 Year 2014
- Applicant TREEA Foster Phone # 386-590-4207
- Address _____ 10314 US Hwy 90 E
LIVE OAK, FL 32060
- Name of Property Owner Patience Eddings Phone# 386-586-9184
- 911 Address 786 NW Suntilt Ct. White Springs, FL 32096
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Patience Eddings Phone # 386-586-9184
- Address 786 NW Suntilt Ct. White Springs, FL 32096
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 4.65
- 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
- Driving Directions to the Property 4 MI TO I 10 W TO E 75 N TO
Exit 439 Keep (R) onto 136 E go to Suntilt on (R) go
0.7 miles on (R) 786 Suntilt
TO END
- Name of Licensed Dealer/Installer JERRY Cochette Phone # 386-362-4948
- Installers Address 10314 US Hwy 90 E LIVE OAK FL 32060
- License Number 2025368 Installation Decal # 23921

SCANNED

Treen is aware of what's needed \$375.00
 LH spoke to Treen 3/29/18 JTW spoke w JRECS 4.9.18

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

#7C185

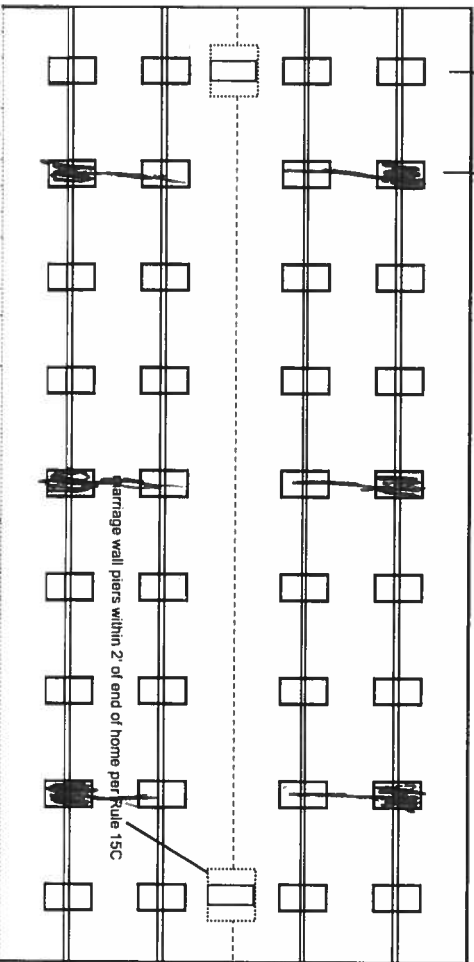
Installer: JERRY CORNETT License # TH1025318
Address of home 786 NW Sunlit Court
being installed White Springs, FL

Manufacturer Palmarco Length x width 56x32

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.

Typical pier spacing 2' 5"
lateral
longitudinal
Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)

Installer's Initials JK



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 # 23421
Triple/Quad ☐ Serial # PH09189108ABFL

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'	5'	6'	7'	8'	8'
1500 psf	4' 6"	6'	7'	8'	9'	10'	11'
2000 psf	6'	8'	9'	10'	11'	12'	13'
2500 psf	7' 6"	9'	10'	11'	12'	13'	14'
3000 psf	8'	10'	11'	12'	13'	14'	15'
3500 psf	8'	10'	11'	12'	13'	14'	15'

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

PIER PAD SIZES

I-beam pier pad size 20x20
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg.) 24x24

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

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 26x22 Pier pad size 26x26

ANCHORS

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 _____

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 410 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested _____

3-9-18

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. 7

Plumbing _____

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 7

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 8

Site Preparation

Debris and organic material removed _____
Water drainage: Natural _____ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: 401 Length: 5 Spacing: 2
Walls: Type Fastener: 401 Length: 5 Spacing: 2
Roof: Type Fastener: 401 Length: 5 Spacing: 2
For used homes a 1/2" 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 _____

Type gasket Sen1 Sen1 Installed: _____
Pg. 12 Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

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

Miscellaneous

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

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

Installer Signature _____

Date _____

3-13-18

**THIS INSTRUMENT PREPARED BY
AND SHOULD BE RETURNED TO:**

Rose M. Decker, Jr., Esquire
The Decker Law Firm, P. A.
Post Office Drawer 1288
Live Oak, Florida 32064

Inst:201212002850 Date:2/24/2012 Time:11:10 AM
Doc Stamp-Deed:128.00
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B:1230 P:741

The Preparer of this Instrument has Performed No Title Examination nor has the Preparer Issued any Title Insurance or Furnished any Opinion Regarding the Title, Existence of Liens, the Quantity of Lands included, or the Location of the Boundaries. The Names, Addresses, Tax Identification Numbers and Legal Description Furnished by Parties to this Instrument.

WARRANTY DEED

THIS INDENTURE, made this 23 day of February, 2012, by and between William Burke and Carol B. Burke, husband and wife, whose post office address is 786 NW Suntilt Court, White Springs, Florida 32096, hereinafter referred to as Grantors, and Patience Marie Eddings, whose post office address is 786 NW Suntilt Court, White Springs, Florida 32096, hereinafter referred to as Grantee,

WITNESSETH:

THAT THE GRANTOR, for and in consideration of the sum of Ten and 00/100 Dollars (\$10.00) to her in hand paid by the Grantees, the receipt and sufficiency whereof are hereby acknowledged, has granted, conveyed, transferred, bargained and sold unto the Grantees, their successors and assigns forever, the following described land situate, lying and being in Columbia County, Florida:

PARCEL IDENTIFICATION NUMBER: 14-2S-15-00062-008

Lot 8, SHADOW WOOD ESTATES, a Subdivision according to the plat thereof recorded in Plat Book 4, Page 113 of the Public Records of Columbia County, Florida.

SUBJECT TO: Restrictions shown in Agreement for deed recorded in Official Record Book 551, Pages 630-633 of the Public Records of Columbia County, Florida.

Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year

updated: 3/7/2018

Parcel: << 14-2S-15-00062-008 >>

Owner & Property Info

Owner	EDDINGS PATIENCE MARIE 786 NW SUNTILT CT WHITE SPRINGS, FL 32096		
Site	786 SUNTILT CT, WHITE SPRINGS		
Description*	LOT 8 SHADOWWOOD ESTATES S/D. ORB 551-630, WD 1230-741,		
Area	4.65 AC	S/T/R	14-2S-15
Use Code**	MOBILE HOM (000200)	Tax District	3

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

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

Property & Assessment Values

2017 Certified Values		2018 Working Values	
Mkt Land (2)	\$16,423	Mkt Land (2)	\$17,423
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$6,433	Building (1)	\$6,938
XFOB (2)	\$1,300	XFOB (2)	\$1,300
Just	\$24,156	Just	\$25,661
Class	\$0	Class	\$0
Appraised	\$24,156	Appraised	\$25,661
Assessed	\$24,156	Assessed	\$25,661
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$24,156 city:\$24,156 other:\$24,156 school:\$24,156	Total Taxable	county:\$25,661 city:\$25,661 other:\$25,661 school:\$25,661

Aerial Viewer Pictometry Google Maps



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
2/23/2012	\$18,000	1239/0741	WD	V	Q	01
2/1/1984	\$7,200	551/0630	WD	V	Q	

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1974	1440	1968	\$6,938

*Bldg_Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra Features & Out Buildings (Codes)

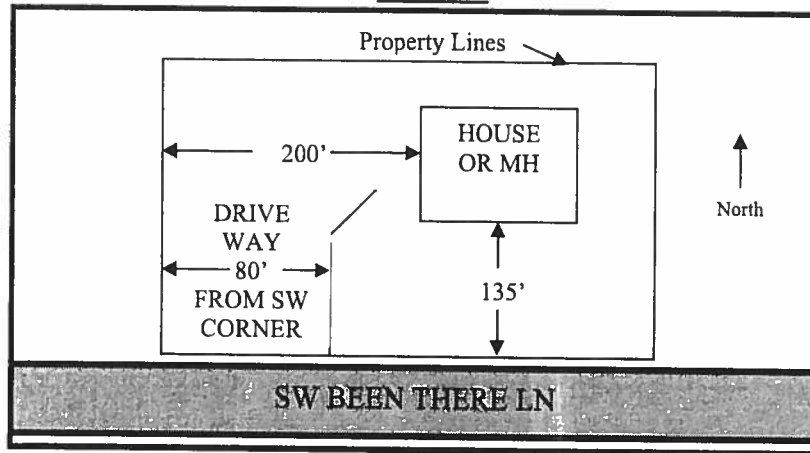
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0190	FPLC PF	0	\$1,200.00	1.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2015	\$100.00	1.000	0 x 0 x 0	(000.00)

Land Breakdown

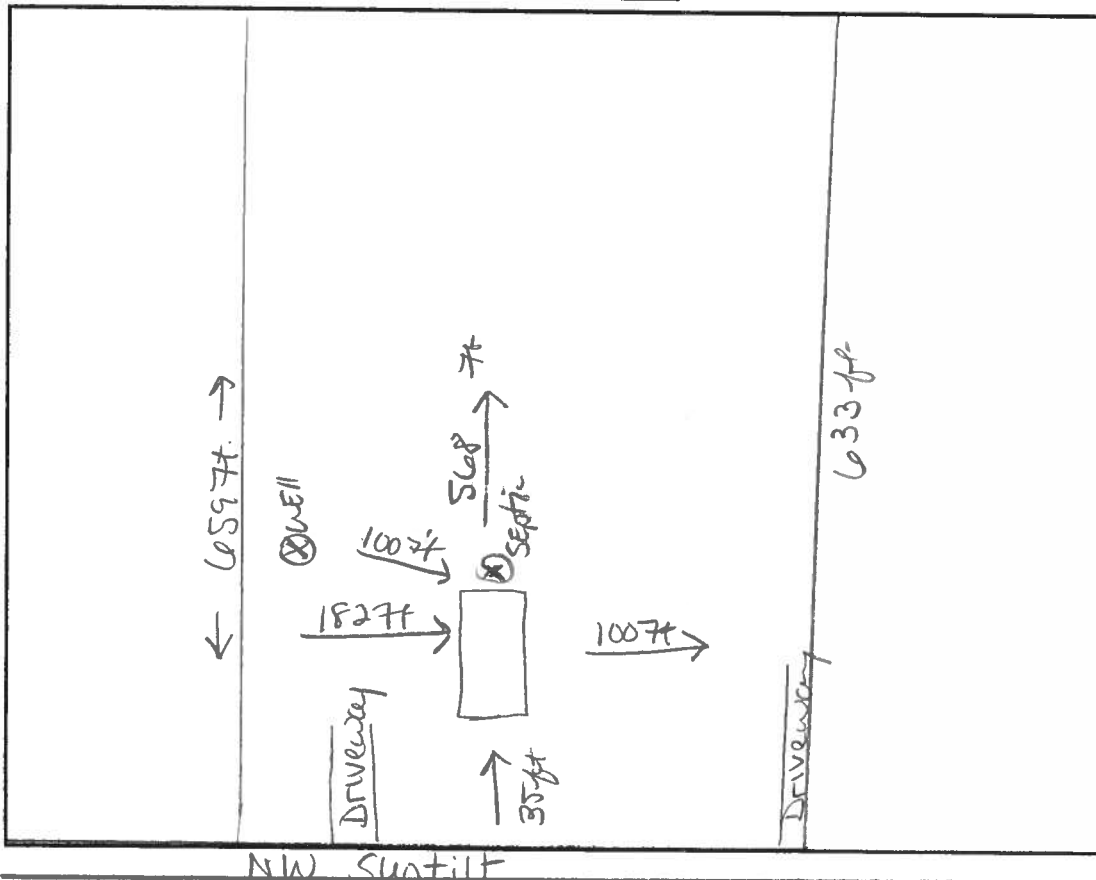
Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000102	SFR/MH (MKT)	1.000 LT - (4.650 AC)	1.00/1.00 1.00/1.00	\$15,424	\$15,423
009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$2,000	\$2,000

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:

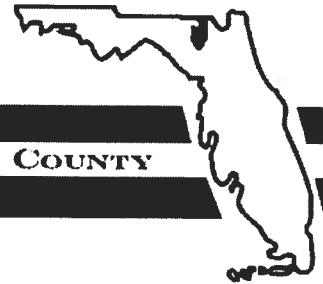


SITE PLAN BOX:



District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **3/20/2018 11:14:03 AM**
Address: **786 NW SUNTILT Ct**
City: **WHITE SPRINGS**
State: **FL**
Zip Code **32096**

Parcel ID **00062-008**

REMARKS: Address Verification.

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

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

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

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

3/26/18

Completed Inspections

Images

Passed: Mobile Home - In County Pre-Mobile Home before set-up
3/26/2018 by TROY CREWS

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwanee
OWNERS NAME Patience Eddings PHONE 386-580-9184 CELL _____
INSTALLER Jerry Corbett PHONE 386-362-4948 CELL 386-590-0470
INSTALLERS ADDRESS 10314 US Hwy 90 E Live Oak, FL

MOBILE HOME INFORMATION

MAKE Palm Harbor YEAR 2014 SIZE 32 x 56
COLOR White SERIAL No. PH0918968ABFL
WIND ZONE II SMOKE DETECTOR ☒

INTERIOR:

FLOORS ///

DOORS ///

WALLS ///

CABINETS ///

ELECTRICAL (FIXTURES/OUTLETS) ///

EXTERIOR:

WALLS / SIDING ///

WINDOWS ///

DOORS ///

INSTALLER: APPROVED /// NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Jerry Corbett
Installer/Inspector Signature Jerry Corbett License No. 1025368 Date 3/20/18

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature] Date 3/21/18



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

I, Jerry Corbett, give this authority for the job address show below
Installer License Holder Name
only, 780 NW Sunlit Ct. White Springs and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control
and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
<u>TIGER Foster</u>	<u>[Signature]</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

Jerry Corbett 1025368 3-13-18
License Holders Signature (Notarized) License Number Date

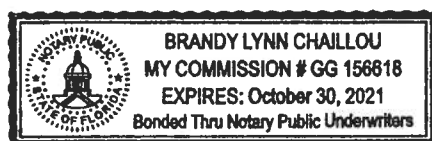
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Jerry Corbett,
personally appeared before me and is known by me or has produced identification
(type of I.D.) Personally Known on this 13th day of March, 20 18.

Brandy Chailou
NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 180358 CONTRACTOR Donbetti, Jerry PHONE 386 362 4948

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 <u>351</u>	Print Name <u>Richard H. SAPP</u> License #: <u>13006007</u>	Signature <u>Richard H. Sapp</u> Phone #: <u>386-362-4058</u> Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ <u>A/C 1669</u>	Print Name <u>Ronald E Bonds Sr.</u> License #: <u>CAC1817658</u>	Signature <u>Ronald E Bonds Sr.</u> Phone #: <u>850-872-8339</u> Qualifier Form Attached <input type="checkbox"/>

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

Revised 4/27/2017



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

PERMIT NO. 18-0259
DATE PAID: 5/23/18
FEE PAID: 310.00
RECEIPT #: AP1335331

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Patience Eddings

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 8 BLOCK: na SUB: Shadowwood Estates PLATTED: 2/23/90

PROPERTY ID #: 14-2S-15-00062-008 ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 4.65 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

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

PROPERTY ADDRESS: NW Suntilt Court, White Springs

DIRECTIONS TO PROPERTY: I-75 North, East on CR 136, TR Suntilt Court, To end on right

BUILDING INFORMATION

☒ 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	3	1698	Out of Flood
2				
3				

☒ Floor/Equipment Drains ☒ Other (Specify) _____

SIGNATURE: Rocky Ford DATE: 3/23/2018

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

Permit Application Number _____

EDINGS

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

Scale: 1 inch = 40 feet.

PLEASE
SEE
ATTACHED

Notes: _____

Site Plan submitted by: Rocky D 7-10

MASTER CONTRACTOR

Plan Approved ☒ Not Approved _____

Date 4/4/18

By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT