

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

CK 8840

\$453.96

<i>For Office Use Only</i> (Revised 7-1-15)		Zoning Official <u>MA</u>	Building Official <u>MA</u>
AP# <u>1907-115</u>	Date Received <u>7-30-19</u>	By <u>UH</u>	Permit # <u>38519</u>
Flood Zone <u>X</u>	Development Permit _____	Zoning <u>A-3</u>	Land Use Plan Map Category <u>Ag</u>
Comments <u>Deeded through lineal descendant succession, floor one foot above the road</u>			
FEMA Map# _____	Elevation _____	Finished Floor <u>114 inches</u>	River _____ In Floodway _____
<input checked="" type="checkbox"/> Recorded Deed or <input type="checkbox"/> Property Appraiser PO		<input checked="" type="checkbox"/> Site Plan	<input type="checkbox"/> EH # <u>19-0578</u>
<input type="checkbox"/> Existing well		<input type="checkbox"/> Land Owner Affidavit	<input checked="" type="checkbox"/> Well letter OR
<input type="checkbox"/> DOT Approval		<input checked="" type="checkbox"/> Installer Authorization	<input type="checkbox"/> FW Comp. letter
<input type="checkbox"/> Parent Parcel # _____		<input type="checkbox"/> STUP-MH _____	<input checked="" type="checkbox"/> App Fee Paid
<input type="checkbox"/> Ellisville Water Sys		<input checked="" type="checkbox"/> Assessment <u>owed</u>	<input type="checkbox"/> Out County <input type="checkbox"/> In County <input checked="" type="checkbox"/> Sub VF Form

Property ID # 04-68-17-09597-007 Subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 28x72 Year 2019
- Applicant Sonya Crews Linda Craft Phone # 863-517-5701 5200
- Address 3311 SW State Road 247 Lake City FL 32024
- Name of Property Owner Cheryl Nicely Phone# 386-965-4044
- 911 Address 1873 SW Haltiwanger Rd Lake City 32024
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Cheryl Nicely Phone # 386-965-4044
 Address 1845 SW Haltiwanger Rd Lake City 32024
- Relationship to Property Owner _____
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage 15.1
- 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 NO
- Driving Directions to the Property I-75S to exit 414, take SW Howell Rd to SW Haltiwanger Rd, property on Right
- Name of Licensed Dealer/Installer Bonnie Norris Phone # 386-623-7714
- Installers Address 1004 SW Charles Terr Lake City, FL 32024
- License Number FL1025145/1 Installation Decal # 62579

UH - Emailed Sonya 8/6/19

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Rouice Nicks License # TH102514511

Address of home being installed: SW Halthammer Rd
Lake City FL 32024

Manufacturer: Sea-Bair Length x width: 32x72

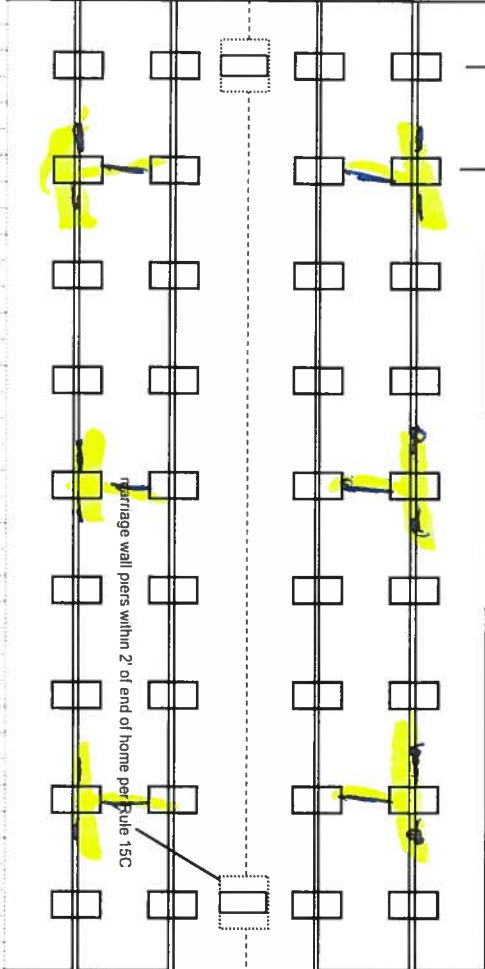
NOTE: if home is a single wide fill out one half of the blocking plan
if home is a triple or quad wide sketch in remainder of home
I understand Lateral Arm Systems cannot be used on any home (new or used)
where the sidewall ties exceed 5 ft 4 in.

Installer's initials: NR

Typical pier spacing



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 # 62579

Triple/Quad ☐ Serial # SBHGA11810754 AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 (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'	8'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7'6"	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

14

Other pier pad sizes (required by the mfg.)

16x16

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

8 17x25

4 17x25

4 16x16

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Manufacturer _____

Sidewall

Longitudinal

Marriage wall

Number 4

OTHER TIES

FRAME TIES

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

ANCHORS

Pad Size	Sq In
16" x 16"	256
18" x 18"	324
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
17.5" x 16" x 25 3/16"	441
17 1/2" x 25 1/2"	446
24" x 24"	576
26" x 26"	676

POPULAR PAD SIZES

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

POCKET PENETROMETER TEST

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

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing 4 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 7-16-01

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.

Plumbing

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.

Site Preparation

Debris and organic material removed Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 1/2" Length: 6" Spacing: 24"
Walls: Type Fastener: 3/4" Length: 8" Spacing: 24"
Roof: Type Fastener: 3/4" Length: 8" Spacing: 24"
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

Type gasket ✓
Pg. Installed: 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

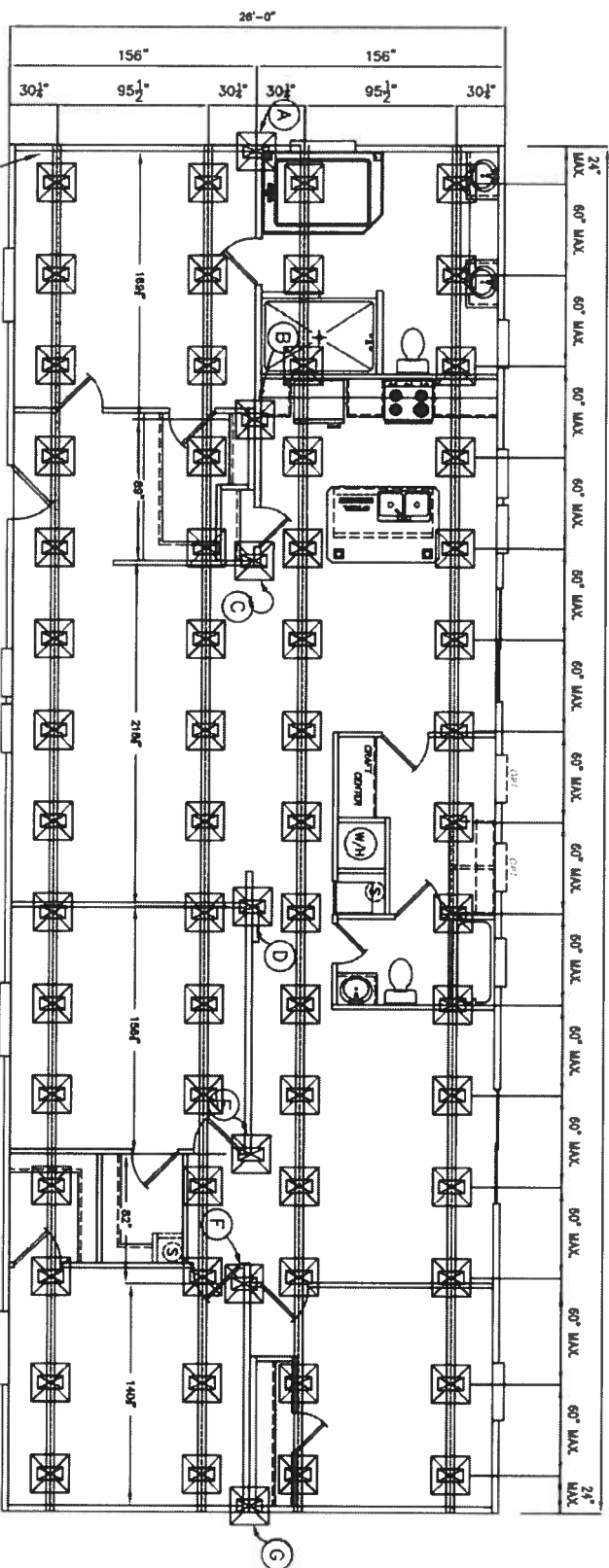
Installer Signature

7-16-01 Date

HITCH-END

FLORIDA MULTIWIDE PIERING DIAGRAM

72'-0"



TYPICAL PIER PAD
20' x 20' MIN. @ 60' O.C. MAX.

1" DOWNER (DOUBLE DOWNER EXTENSION)

1" DOWNER (SINGLE DOWNER EXTENSION)

1" DOWNER (DOUBLE DOWNER EXT.)
CHIT END DOWNER / SINGLE DOWNER EXTENSION

Pier Load (lbs.)	Required Loading Area (sq. ft.) per soil pressure specified	1000 PSF	1500 PSF	2000 PSF	2500 PSF	3000 PSF
A	2236	408	260	192	152	126
B	3862	618	398	293	232	192
C	5110	847	532	389	305	250
D	6116	1017	642	469	365	300
E	7330	1283	812	589	465	381
F	8694	1512	970	714	560	461
G	1113	227	146	108	85	71

DATE:	10/14/2016
VERSION:	C
REFERENCE:	M249
AREA:	
TOTAL:	1,872 ft ²
LIVING SPACE:	1,872 ft ²
PORCH:	0 ft ²

UNIT SPECIFICATIONS:

SCOTBILT SPECIAL

28' x 72'
4 BEDROOM / 2 BATH

DRAWING MODEL NUMBER:

2872249SBS

ScotBilt
HOMES, INC.

HITCH-END



ScotBilt

Legend

Addresses

2018Aerials



Parcels

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

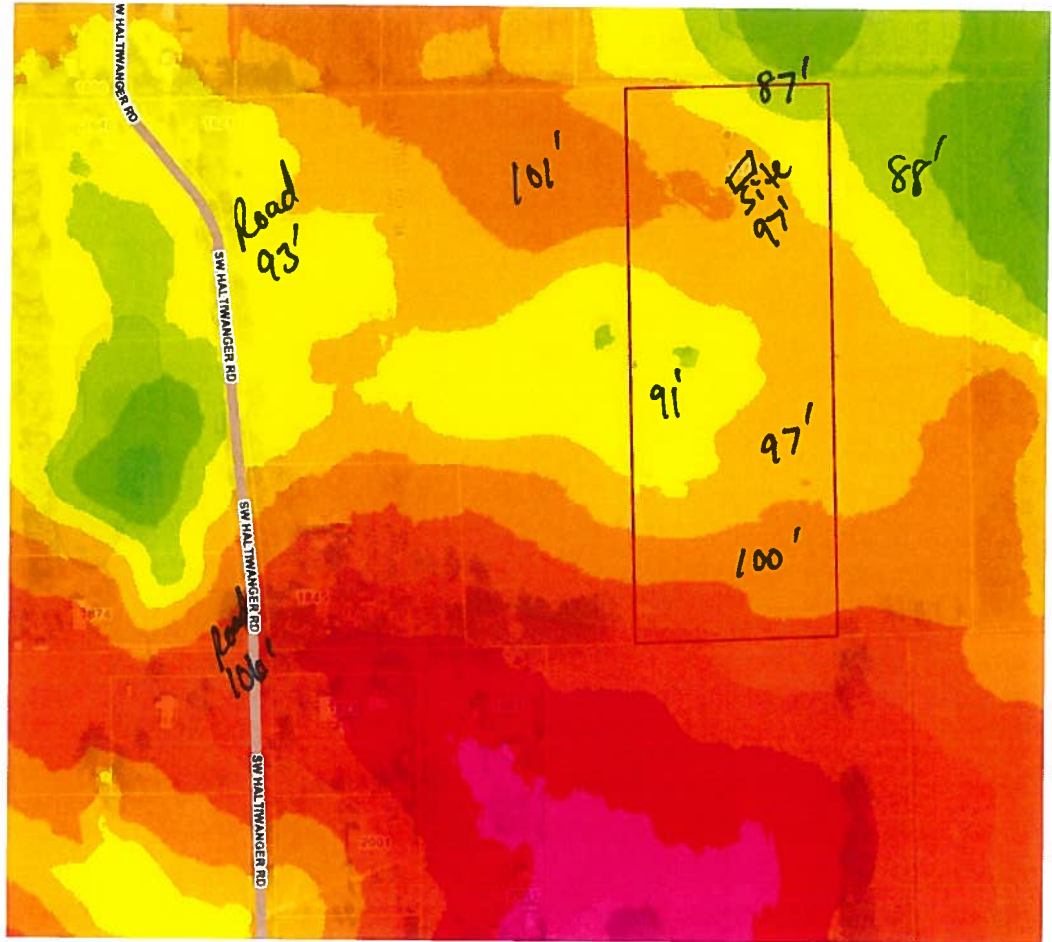
Private

LidarElevations



Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Aug 06 2019 18:06:30 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 04-6S-17-09597-007

Owner: NICELY JAY A

Subdivision:

Lot:

Acres: 15.1094809

Deed Acres: 15.1 Ac

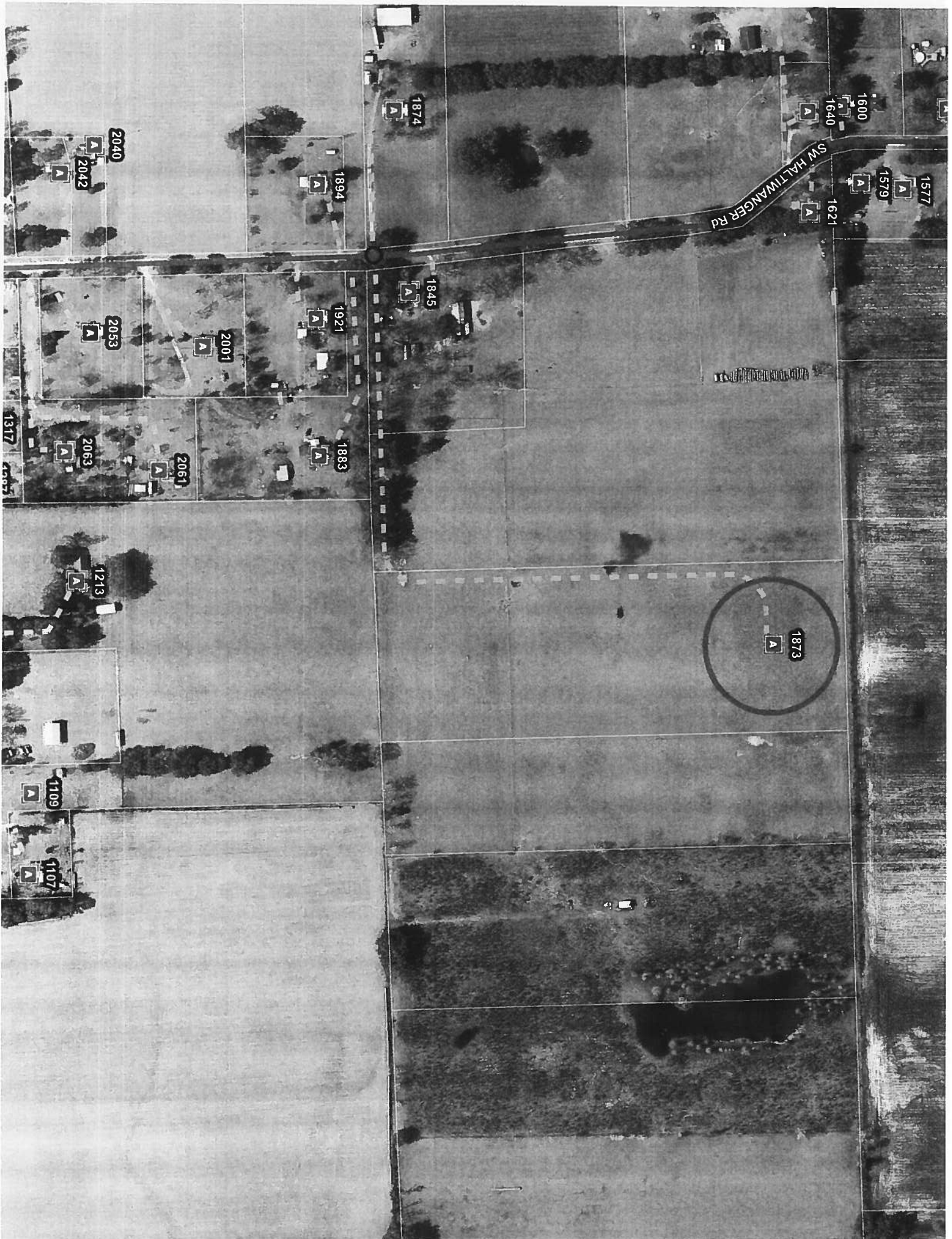
District: District 4 Toby Witt

Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

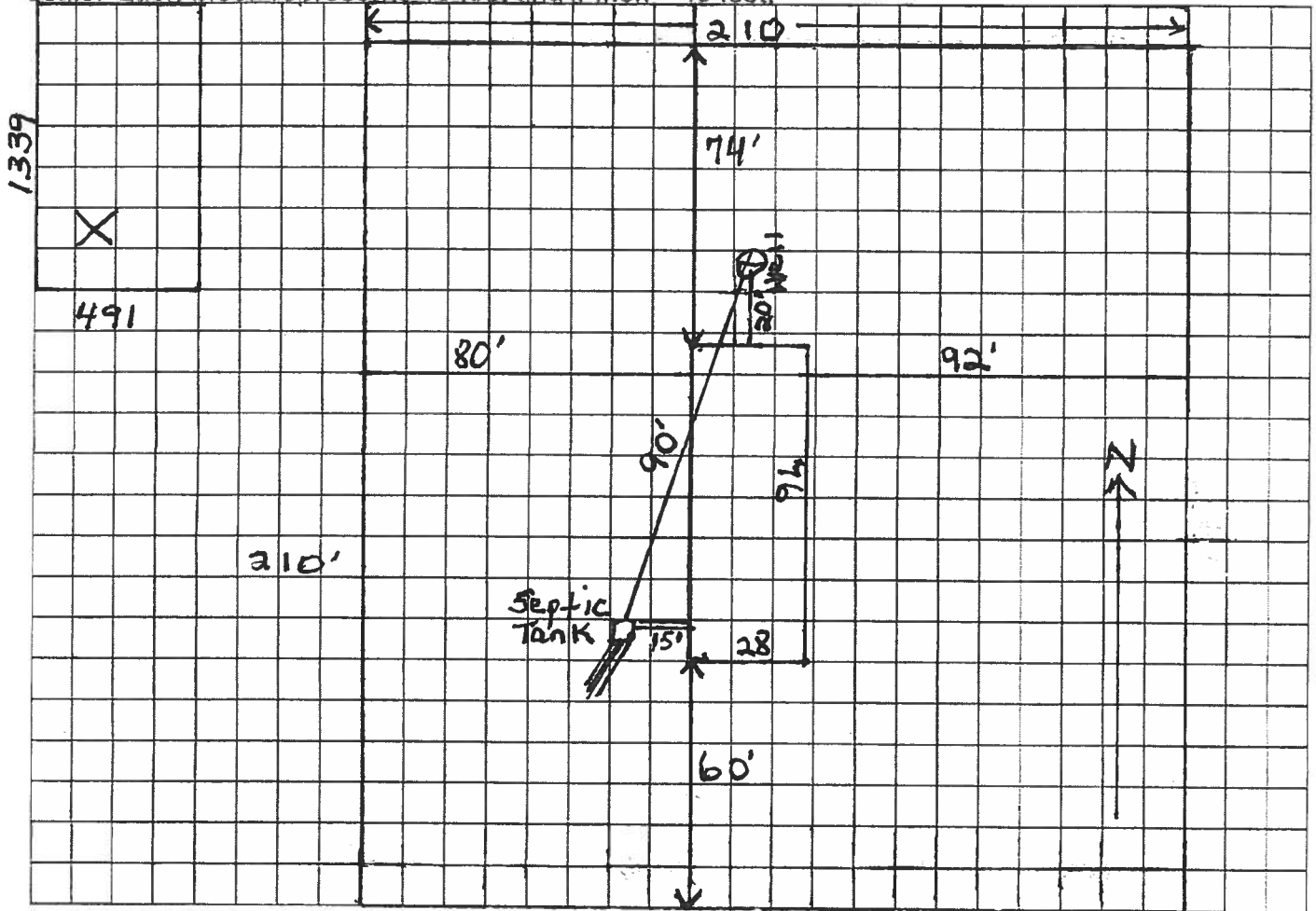


STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number _____

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

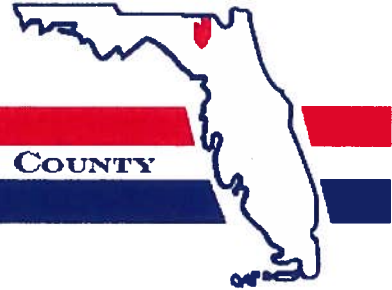
Site Plan submitted by: Scarp Crews

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
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: **7/31/2019 3:41:58 PM**
Address: **1873 SW HALTIWANGER Rd**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **09597-007**

REMARKS: Address for proposed structure on parcel.

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**

Prepared by:
Stephen M. Witt
PO Box 2064
Lake City, FL 32056-2064

When recorded return to:
Stephen M. Witt
PO Box 2064
Lake City, FL 32056-2064

Inst: 201912012448 Date: 06/03/2019 Time: 10:45AM
Page 1 of 4 B: 1385 P: 2014, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy ClerkDoc Stamp-Deed: 0.70

(Space above this line reserved for recording office use only)

PERSONAL REPRESENTATIVE'S DEED

STATEMENT OF FACTS:

- A. Jay Alan Nicely. ("Decedent"), a resident of Lake City, Florida, died on August 2, 2017.
- B. At the time of Decedent's death, Decedent was the owner of the Real Property described below.
- C. Grantor is the Personal Representative of the Estate of the Decedent pursuant to proceedings filed in the Circuit Court for Columbia County, Florida in Case No. 2018-160-CP.

CONVEYANCE:

1. IDENTIFICATION OF GRANTOR

Name and address of Grantor: Cheryl Nicely
as Personal Representative of the Estate of
Jay Alan Nicely, Deceased
1845 SW Haltiwanger Rd.
Lake City, FL 32024.

The word "I" or "me" as hereafter used means the Grantor.

2. IDENTIFICATION OF GRANTEE

Name and address of Grantee: Cheryl Nicely, the widow of Jay Alan Nicely,
1845 SW Haltiwanger Rd.
Lake City, FL 32024

The word "you" as hereafter used means the Grantee.

3. MEANINGS OF TERMS

The terms "I," "me," "you," "grantor," and "grantee," shall be non-gender specific ((i) masculine, (ii) feminine, or (iii) neuter, such as corporations, partnerships or trusts), singular or plural, as the context permits or requires, and include heirs, personal representatives, successors or assigns where applicable and permitted.

4. DESCRIPTION OF REAL PROPERTY CONVEYED

The property hereby conveyed (the "Real Property") is described as follows:

A portion of Section 4, South, Township 6, South, Range 17 East as more particularly described in attached Exhibit A (Parcel E).

The Property Appraiser's Parcel Identification Number is 04-6S-17-09597-007.

Consisting of 15.1 acres more or less.

5. CONSIDERATION

Good and valuable consideration plus 0.00 paid by you to me.

6. CONVEYANCE OF REAL PROPERTY

For the consideration described in Paragraph 5 which I have received, I have granted, bargained and sold to you the Real Property to have and to hold in fee simple (estate in property unlimited as to duration, disposition and descendability) forever.

7. REPRESENTATION OF PERSONAL REPRESENTATIVE

I represent to you that:

(a) I am duly appointed and qualified to act as Personal Representative of the Estate of the Decedent as identified in the Statement of Facts; and

(b) I have the power and authority to execute this Deed. Note: if the Property was the constitutional homestead of Decedent, and descended to heirs at law, such heirs at law must execute deeds conveying their interests in the subject property.

"EXHIBIT A"

Parcel "E"

A parcel of land containing a total of 15.1 acres, more or less, lying being and situate in Section 4, Township 6 South, Range 17 East, Columbia County, Florida. More particularly described as follows:

COMMENCE at the Southeast corner of the Northeast $\frac{1}{4}$ of Northeast $\frac{1}{4}$ of said Section 4, and run South 89 degrees 41 minutes 25 seconds West, along the South line of the North $\frac{1}{4}$ of said Section 4, a distance of 1582.60 feet to the POINT OF BEGINNING of the hereafter described parcel of land: Thence continue running South 89 degrees 41 minutes 25 seconds West, continuing along said South line of the North $\frac{1}{4}$ of Section 4, a distance of 491.34 feet; thence run North 00 degrees 14 minutes 30 seconds East a distance of 1339.35 feet to the intersection with the North line of Said Section 4, thence run North 89 degrees 37 minutes 25 seconds East, along said North line of Section 4, a distance of 491.35 feet; thence run South 00 degrees 14 minutes 30 seconds West a distance of 1339.92 feet to the POINT OF BEGINNING.

SUBJECT TO an easement or right-of-way of unknown width for a buried telephone cable over and across the westerly side thereof.

ALSO, SUBJECT TO a perpetual 30-foot road easement for ingress, egress and public utilities over, across and along the south 30 feet thereof. Attached hereto is the full legal.

LEGAL DESCRIPTION 30 FOOT EASEMENT

A 30-foot road easement for ingress, egress and public utilities, containing a total area of 1.5 acres, more or less, lying, being and situate in Section 4, Township 6 South, Range 17 East, Columbia County, Florida, more particularly described as follows:

COMMENCE at the Southeast corner of the Northeast $\frac{1}{4}$ of Northeast $\frac{1}{4}$ of said Section 4, and run South 89 degrees 41 minutes 25 seconds West, along the South line of the North $\frac{1}{4}$ of said Section 4, a distance of 796.83 feet to the POINT OF BEGINNING of the hereafter described 30 foot road easement: Thence continue running South 89 degrees 41 minutes 25 seconds West, continuing along said South line of the North $\frac{1}{4}$ of Section 4, a distance of 2191.17 feet; thence run North 02 degrees 40 minutes 36 seconds West a distance of 30.02 feet to a point lying 30.00 feet north of said South line when measured at right angles thereto; thence run North 89 degrees 41 minutes 25 seconds East, parallel with and 30.00 feet north of said South line of the North $\frac{1}{4}$ of Section 4 when measured at right angles thereto, a distance of 2192.70 feet; thence run South 00 degrees 14 minutes 30 seconds West a distance of 30.00 feet to the POINT OF BEGINNING.

Executed on this 30 day of May, 2019.

Cheryl A. Nicely
Cheryl Nicely

as Personal Representative of the Estate of
Jay Alan Nicely, Deceased

Signed in the presence of:

Tyler Utley
Printed Witness: Tyler Utley
Address: 20420 47th DR
Lake City, FL 32024

[Signature]
Printed Witness: Dustin Taylor
Address: 610 SW Sebastian Cir.
Lake City, FL 32024

STATE OF FLORIDA
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 30 day of May, 2019, by Cheryl Nicely, who is personally known to me or has produced _____ as identification.



CAREY F CHANDLER
MY COMMISSION # GG 070813
EXPIRES: May 22, 2021
BONDED THRU Budget Notary Services

Carey F Chandler
Notary Public - State of Florida



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, Ronnie Norris, give this authority for the job address show below
Installer License Holder Name
only, 1873 SW Haltiwanger Rd Lake City 32024, 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)
Songp Crews	Songp Crews	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
Linda Craft	Linda Craft	<input checked="" 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.

Ronnie Norris

License Holders Signature (Notarized)

1H1025145/1

License Number

7-16-019

Date

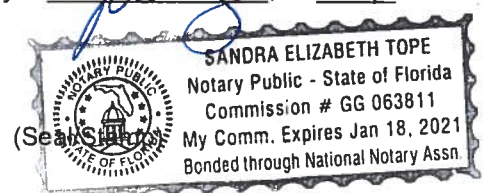
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 16 day of July, 20 19.

Sandra Elizabeth Tope

NOTARY'S SIGNATURE



A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

August 7, 2019

To: Columbia County Building Department

Description of Well to be installed for Customer _____ **Cheryl Nicely** _____

Located @ Address: _____ **1873 SW HALTIWANGER Rd**

1 HP 15 GPM submersible pump, 1" drop pipe, 35 gallon captive tank, and backflow prevention. With SRWMD permit.

_____**Bruce Park**_____

Sincerely,
Bruce N. Park
President

550 214909515



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

PERMIT NO. 19-2528
DATE PAID: 8/3/19
FEE PAID: 205.00
RECEIPT #: 1424902

APPLICATION FOR:

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

APPLICANT: Cheryl Nicely

AGENT: Sonja Crews / Linda Craft

TELEPHONE: 386-965-4044
863-517-5701

MAILING ADDRESS: 1845 SW Haltiwanger Rd Lake City 32024

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 04-68-17-09597-007 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 15.1 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 1813 SW Haltiwanger Rd Lake City 32024

DIRECTIONS TO PROPERTY: I-75 S to exit 414 take SW
Howell Rd to SW Haltiwanger Rd, property
on right

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

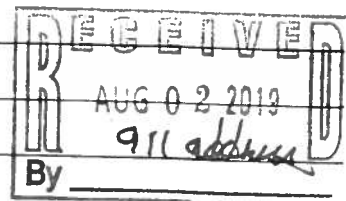
Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
---------	-----------------------	-----------------	--------------------	--

1	<u>mobile Home</u>	<u>4</u>	<u>2,016</u>	
---	--------------------	----------	--------------	--

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

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

4				
---	--	--	--	--



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

SIGNATURE: Sonja Crews Linda Craft

DATE: 7-29-19

Permit Application Number:

19-2528

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Q 132

1 AC OF 15

Typical: 8/20/19
x Chris Nicely

Site Plan submitted by: Sonja Crews

Plan Approved

Not Approved

Date 8/20/19

By _____

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT