

DATE 03/23/2011

Columbia County Building Permit**PERMIT**

This Permit Must Be Prominently Posted on Premises During Construction

000029261

APPLICANT WENDY GRENNELL PHONE 386.288.2428

ADDRESS 3104 SW OLD WIRE ROAD FT. WHITE FL 32038

OWNER LARRY & MARY PITTS PHONE 813.935.4969

ADDRESS 313 SW FOXBORO PLACE LAKE CITY FL 32024

CONTRACTOR ROBERT SHEPPARD PHONE 386.623.220

LOCATION OF PROPERTY 47-S TO KING STREET,TR AROUND CURVE TO L, IT TURNS INTO MAULDIN TO FOXBORO PL,TR AND IT'S THE 3RD LOT ON R CORNER.

TYPE DEVELOPMENT M/H/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. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 33-4S-16-03265-228 SUBDIVISION MAULDIN WOODLANDS

LOT 28 BLOCK B PHASE 2 UNIT TOTAL ACRES 5.01

IH1025386 Wendy Grennell

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

EXISTING 11-0126-E BLK TC N

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

COMMENTS: 1 FOOT ABOVE ROAD.Check # or Cash 1189**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

Permanent power C.O. Final Culvert

 date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing

 date/app. by date/app. by

Reconnection RV Re-roof

 date/app. by date/app. by

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

MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 44.94 WASTE FEE \$ 117.25

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ **TOTAL FEE** 487.19

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.

Ck # 1189

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 21.03.11 Building Official J.C. 3-17-11

AP# 1103-13 Date Received 3/11 By JW Permit # 29261

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 11.0/26-E River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 11-0126-E ☒ EH Release ☒ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☐ State Road Access ☒ 911 Sheet

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

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☐ Out County ☒ In County

Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 _____

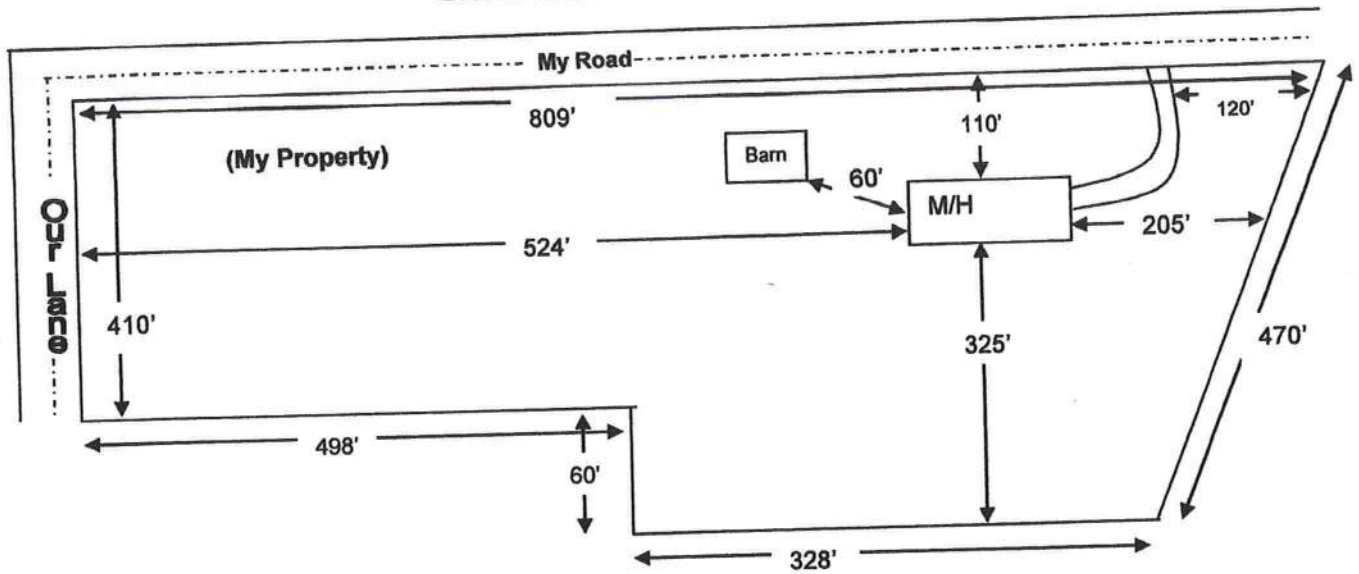
Property ID # 33-45-16-03265-228 Subdivision Mauldin Woodland Lot 28 BIKB Plus E

- New Mobile Home ☒ Used Mobile Home _____ MH Size 14x64 Year 2010
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner Larry + Mary Pitts Phone # 813-935-4969
- 911 Address 313 SW Foxboro Pl, Lake City, FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Larry + Mary Pitts Phone # 813-935-4969
- Address 812 West Linedbrough Avenue Apt B111 Tampa FL 3361
- Relationship to Property Owner same
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage 5.01 Dues
- 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 - home removed 2008
- Driving Directions to the Property Hwy 47 South to King Street turn (R), around curve to (L) becomes Mauldin to Foxboro Place, TR to 3rd lot on (R) including curve
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 S.E. CR 245 Lake City FL 32025
 - License Number TH1025386/1 Installation Decal # 4921

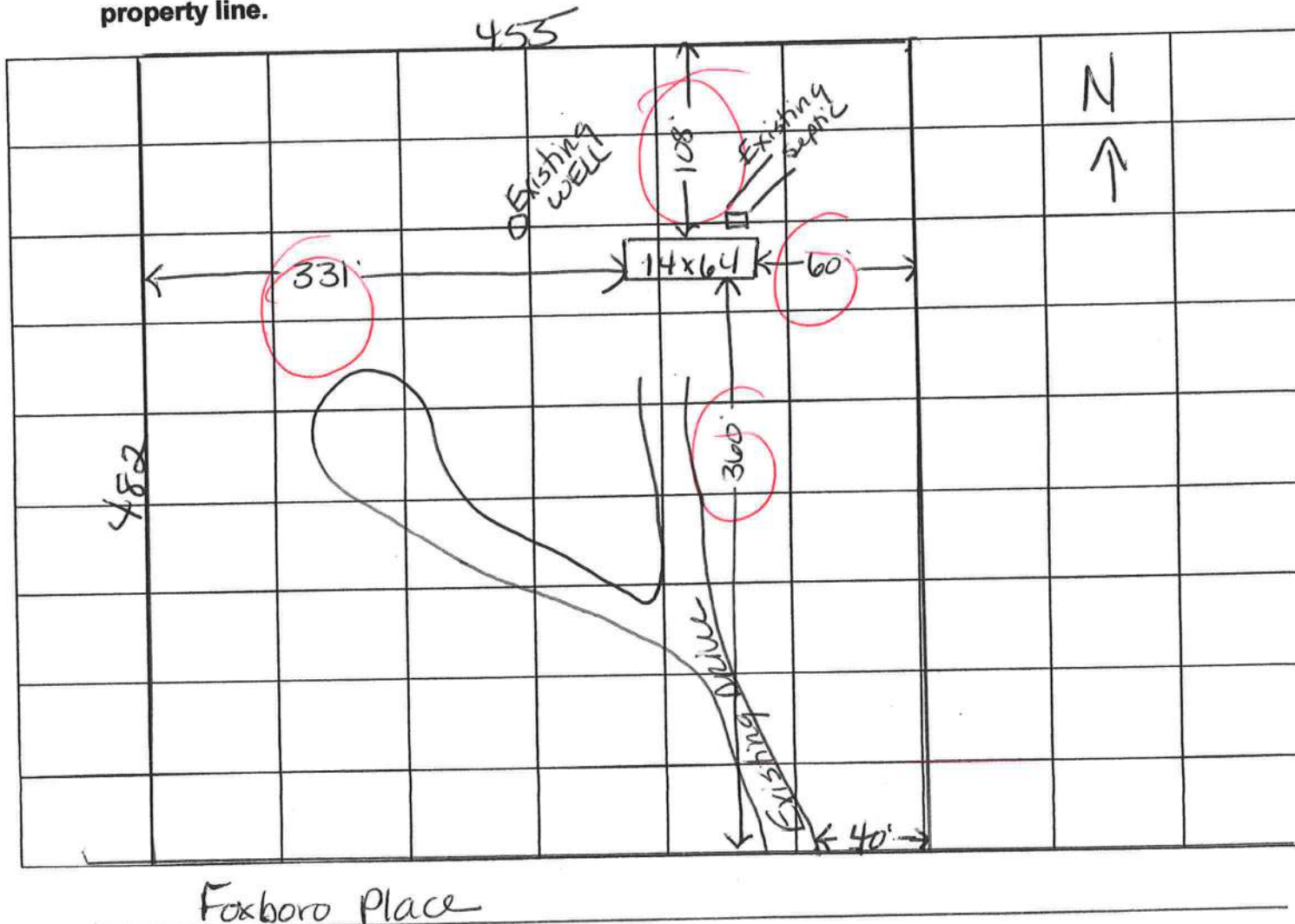
Spoke to Wendy
3-21-11

\$ 487.19

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.



COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Robert Sheppard License # 7H1025386

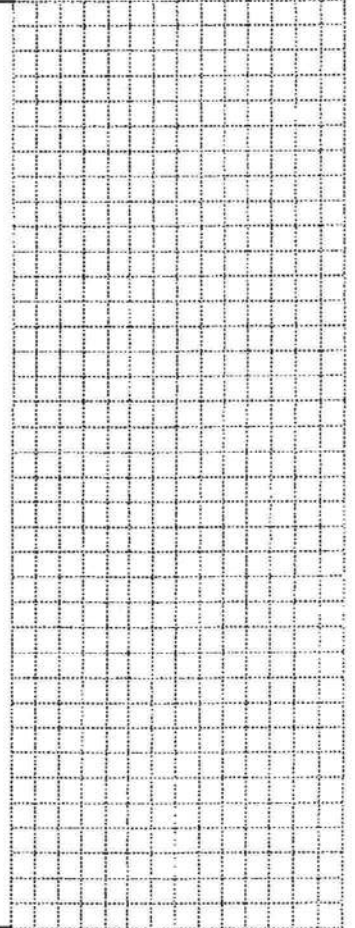
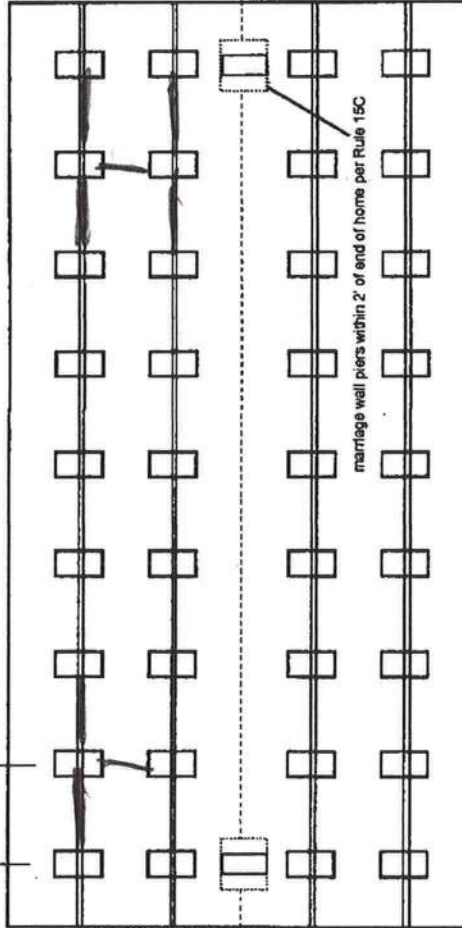
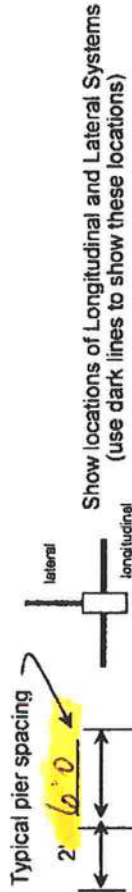
911 Address where home is being installed. Foxboro Place

Manufacturer Live oak Length x width 14x64

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. RS

Installer's initials



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 # 4921

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'	6'	7'	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 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 Oliver-Holtz

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver-Holtz

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall

Number 22
3
4

342
Reg.
425
provided

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

x 1600 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 1600 x 1700 x 1700

TORQUE PROBE TEST

The results of the torque probe test is 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

Robert Sheppard

Date Tested

3-6-11

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: 5 Spacing: 16"
Walls: Type Fastener: Screws Length: 4 Spacing: 16"
Roof: Type Fastener: lags Length: 6 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

Type gasket

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 22
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

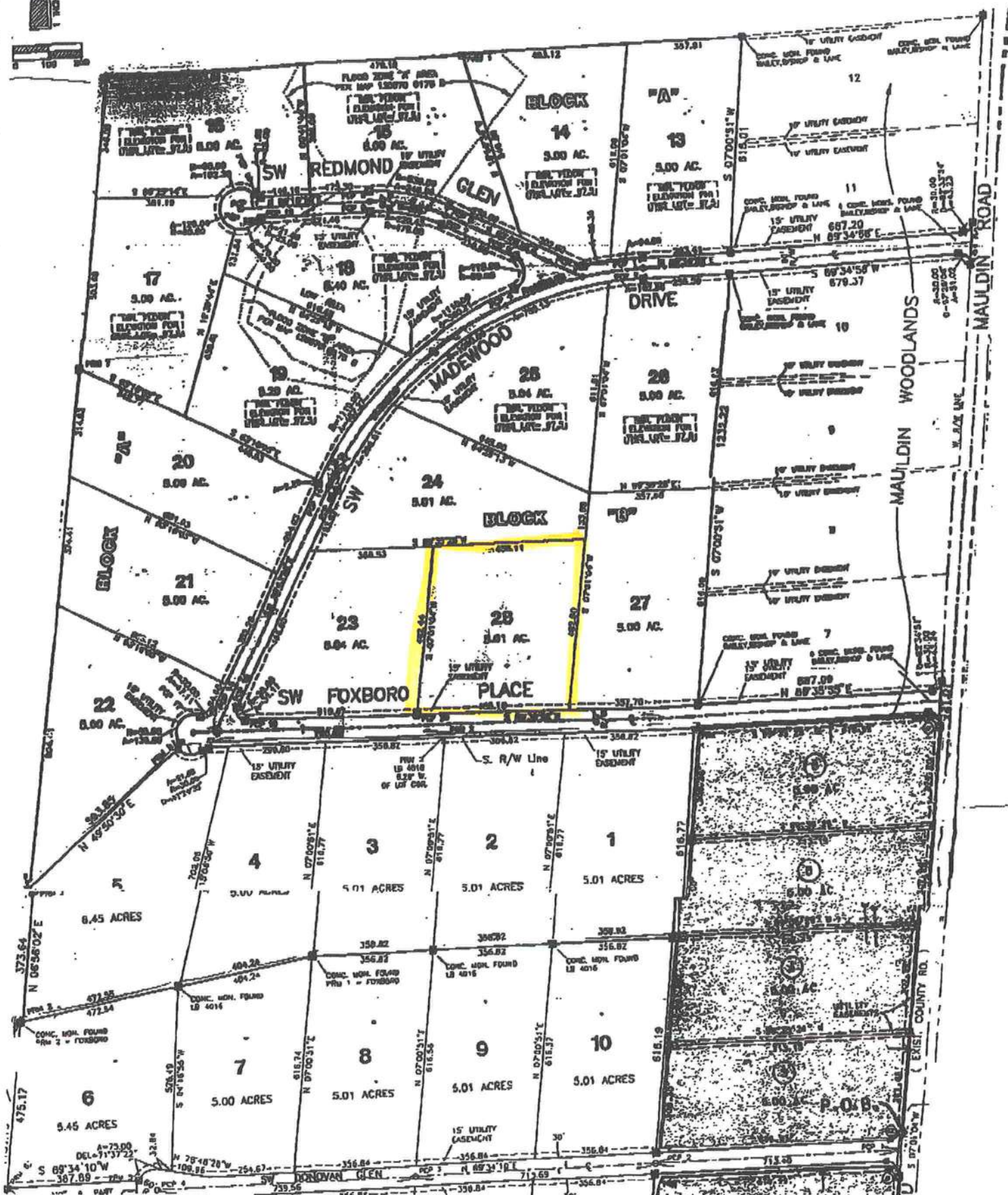
Installer Signature

Robert Sheppard

Date

3-6-11

MAULDIN WOODLANDS



>> [Print as PDF](#) <<*Previous Owner - See Deed*

LOT 28 BLOCK B MAULDIN WOODLANDS S/D PHASE 2. ORB 833-164,896-066,WD 1003- 1568,DC 1181-1323(RAYMOND ARTZ				SUBRANDY LIMITED PARTNERSHIP P O BOX 513 LAKE CITY, FL 32056				33-4S-16-03265-228				Columbia County 2011 R CARD 001 of 001 BY JEFF			
				PRINTED 2/17/2011 14:17 APPR 9/05/2007 DFDB											
BUSE				AE?				HTD AREA .000 INDEX 33416.01 MAULDIN WD				PUSE 000700 MISC RES			
MOD				BATH				EFF AREA 51.973 E-RATE .000 INDX				STR 33- 4S- 16			
EXW				FIXT				RCN				AYB			
%				BDRM				%GOOD				BLDG VAL			
RSTR				RMS								EYB			
RCVR				UNTS				FIELD CK:				AC			
%				C-W%				LOC: 313 FOXBORRO PL SW LAKE CITY				NTCD			
INTW				HGHT								APPR CD			
%				PMTR								CNDO			
FLOR				STYS								SUBD			
%				ECON								BLK			
HTTP				FUNC								LOT			
A/C				SPCD								MAP#			
QUAL				DEPR								TXDT 003			
FNDN				UD-1											
SIZE				UD-2								BLDG TRAVERSE			
CEIL				UD-3											
ARCH				UD-4											
FRME				UD-5											
KTCH				UD-6											
WNDO				UD-7											
CLAS				UD-8											
OCC				UD-9											
COND				%											
SUB				A-AREA % E-AREA SUB VALUE								PERMITS			
												NUMBER DESC AMT ISSUED			
												17750 M H 125 12/14/2000			
												16720 M H 125 3/09/2000			
												SALE			
												BOOK PAGE DATE PRICE			
												1191 817 3/10/2010 U I 100			
												GRANTOR CLERK OF COURT			
												GRANTEE SUBRANDY LIMITED PARTNERSHIP			
												1003 1568 10/05/2003 U V 29500			
												GRANTOR SUBRANDY LIMITED PARTNERSHIP			
												GRANTEE RAYMOND E ARTZ			
TOTAL								FIELD CK:							
AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE															
Y 0294 SHED WOOD/VI 12 20 1 2006 1.00 240.000 SF 14.000 14.000 100.00 3,360															

LAND	DESC	ZONE	ROAD	{UD1	{UD3	FRONT	DEPTH	FIELD CK:				UNITS	UT	PRICE	ADJ	UT	PR	LAND	VALUE
AE	CODE	TOPO	UTIL	{UD2	{UD4	BACK	DT	ADJUSTMENTS				1.00	LT	30780.000		30780.00		30,780	
Y	000700	MISC RES	A-1	0002				1.00	1.00	1.00	1.00	1.00	LT	2000.000		2000.00		2,000	
Y	009945	WELL/SEPT		0002				1.00	1.00	1.00	1.00	1.00	LT	750.000		750.00		750	
N	009947	SEPTIC		0002				1.00	1.00	1.00	1.00	1.00	UT						

449

WARRANTY DEED

This Warranty Deed made and executed the 3rd day of February A.D. 2011, by **SUBRANDY LIMITED PARTNERSHIP**, a Florida limited partnership, hereinafter called the grantor, to **LARRY H. PITTS AND MARY J. PITTS**, his wife, Whose post office address is 812 WEST LINEDBROUGH AVENUE, APT. B111, TAMPA, FL 33612, hereinafter called the grantee:

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for the consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

LOT 28, BLOCK B, MAULDIN WOODLANDS PHASE 2, a subdivision as recorded in Plat Book 6, Page 202, Columbia County, Florida, subject to Restrictions recorded in O.R. Book 0860, Pages 2055-2056, Columbia County, Florida, and subject to Power Line Easement. Includes improvements located on property.

Together with all the tenements, hereditaments and appurtenances thereto belong or in any-wise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple: that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2010.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Nanci Brinkley
Signature of Witness

Nanci Brinkley
Print name of Witness

Shirley Hilson
Signature of witness

Shirley Hilson
Print name of Witness

Bradley N. Dicks
Bradley N. Dicks, General Partner
Subrandy Limited Partnership

Inst: 201112002752 Date: 2/22/2011 Time: 1:25 PM
Doc Stamp-Deed: 314.30
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1210 P: 655

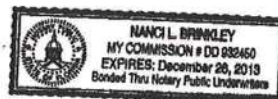
State of Florida
County of Columbia

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Bradley N. Dicks, who is personally known to me to be the person described in and who executed the foregoing instrument, who was not required to furnish identification, and he acknowledged before me that he executed the same and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 3rd day of February, A.D. 2011

Nanci Brinkley
Notary Public, State of Florida

This instrument prepared by: Bradley N. Dicks
Address: P.O. Box 513 Lake City, FL 32056



MOBILE HOME INSTALLATION 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 <u>OTB</u>	Print Name <u>Robert Sheppard</u> License #: <u>TH 1025386</u>	Signature <u>Robert Sheppard</u> Phone #: <u>386-623-2203</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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.

03-10-'11 15:49 FROM-Atlantic / Prime
mar 03 11 09:26 Wendy Grennell

1-800-859-3709
386/551031

T-164 P002/002 F-909
P. 0

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ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name <u>Robert Grant</u> License #: <u>CAC1814031</u>	Signature <u>[Signature]</u> Phone #: <u>200 859 3708</u>
PLUMBING/ GAS	Print Name <u>Robert Sheppard</u> License #: <u>TH 1025386</u>	Signature <u>[Signature]</u> Phone #: <u>386 623 2203</u>

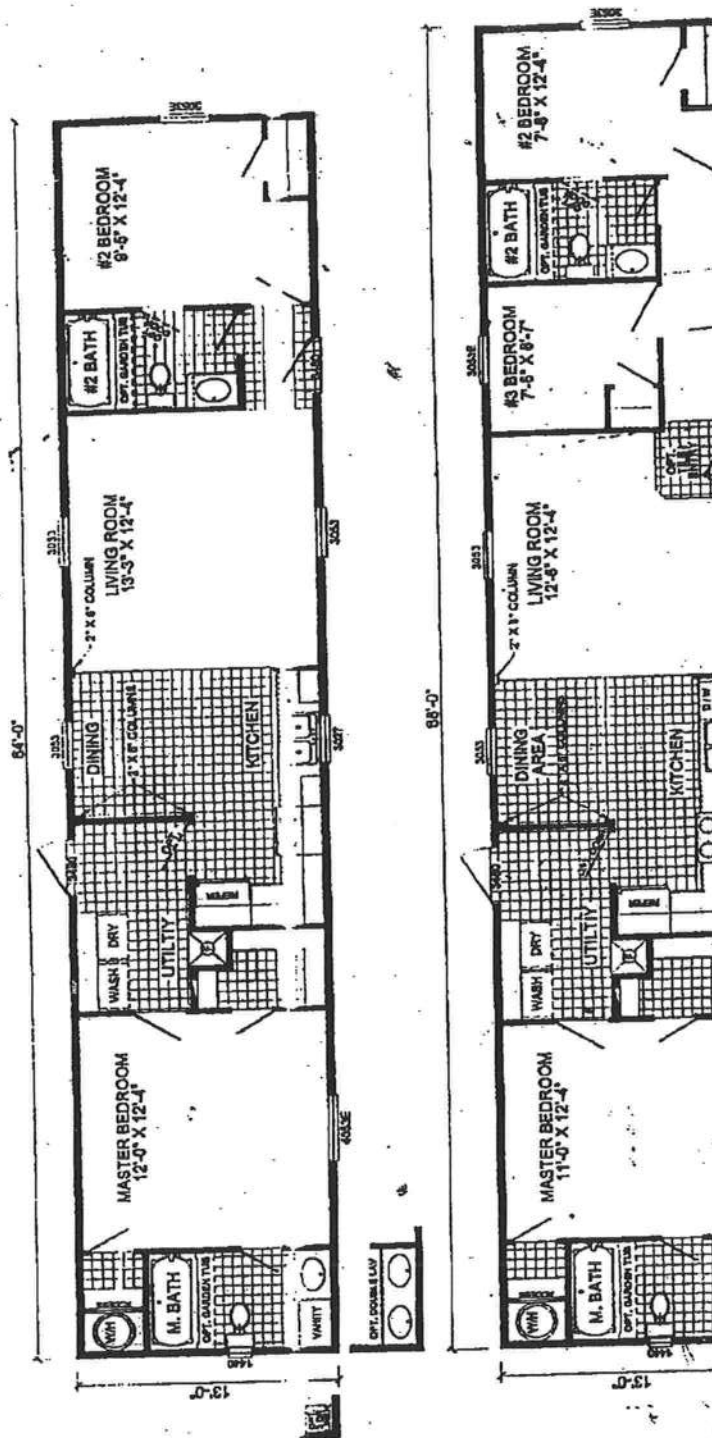
Subcontractor Name	Subcontractor License #	Subcontractor Phone #	Subcontractor Signature
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Subcontractor Name _____ Subcontractor License # _____ Subcontractor Phone # _____ Subcontractor Signature _____

Subcontractor Name _____ Subcontractor License # _____ Subcontractor Phone # _____ Subcontractor Signature _____

Subcontractor Name _____ Subcontractor License # _____ Subcontractor Phone # _____ Subcontractor Signature _____

Subcontractor Name _____ Subcontractor License # _____ Subcontractor Phone # _____ Subcontractor Signature _____



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 Sheppard, license number FH1025386

state that the installation of the manufactured home for owner

Larry + Mary Pitts

at 911 Address: Foxboro Place City Lake City

will be done under my supervision.

Signed: Robert Sheppard
Mobile Home Installer

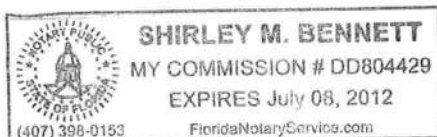
Sworn to and described before me this 6 day of March 2011

Shirley M Bennett
Notary public

Shirley M Bennett
Notary Name

Personally known ✓

DL ID _____



Pitts
App# 1103-13**COLUMBIA COUNTY 9-1-1 ADDRESSING**

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_craft@columbiacountyfla.com

Addressing Maintenance

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

DATE REQUESTED: 3/10/2011 DATE ISSUED: 3/10/2011

ENHANCED 9-1-1 ADDRESS:

313 SW FOXBORO PL

LAKE CITY FL 32024

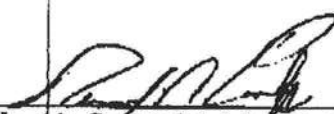
PROPERTY APPRAISER PARCEL NUMBER:

33-4S-16-03265-228

Remarks:

RE-ISSUE OF EXISTING ADDRESS TO NEW STRUCTURE.

Address Issued By:


Columbia County 9-1-1 Addressing / GIS Department

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

Mar 14 11 06:19p
Mar 11 11 09:30a
Mar 03 11 05:43a

Wendy Grennell
Wendy Grennell
wendy grennell

3867551031
3867551031
3867551031

p. 2
p. 1

Pitts

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1103-13 CONTRACTOR Robert Stepp PHONE 386-623-2203

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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 89-8, 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 <u>John M Courson</u> License #: <u>EK0002038</u>	Signature <u>[Signature]</u> Phone #: <u>386-752-8575</u>
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name <u>Robert Stepp</u> License #: <u>IH 1025386</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-2203</u>

Subcontractor Name	License Number	Signature	Phone Number
MASON			
CONCRETE FINISHER			

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

Contractor Form Subcontractor form 2/11

Mar 14 11 06:20p
Mar 11 11 09:32a
Mar 03 11 09:49a

Wendy Grennell
Wendy Grennell
Wendy Grennell

3867551031
3867551031
3867551031

p.3
p.6
p.7

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1103-13 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 <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature <u>[Signature]</u> Phone #: <u>850-859-3208</u>
PLUMBING/ GAS	Print Name <u>Robert Sheppard</u> License #: <u>JH 1025386</u>	Signature <u>[Signature]</u> Phone #: <u>386-623-2203</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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

Contractor form: Subcontractor form: M11

Pitts

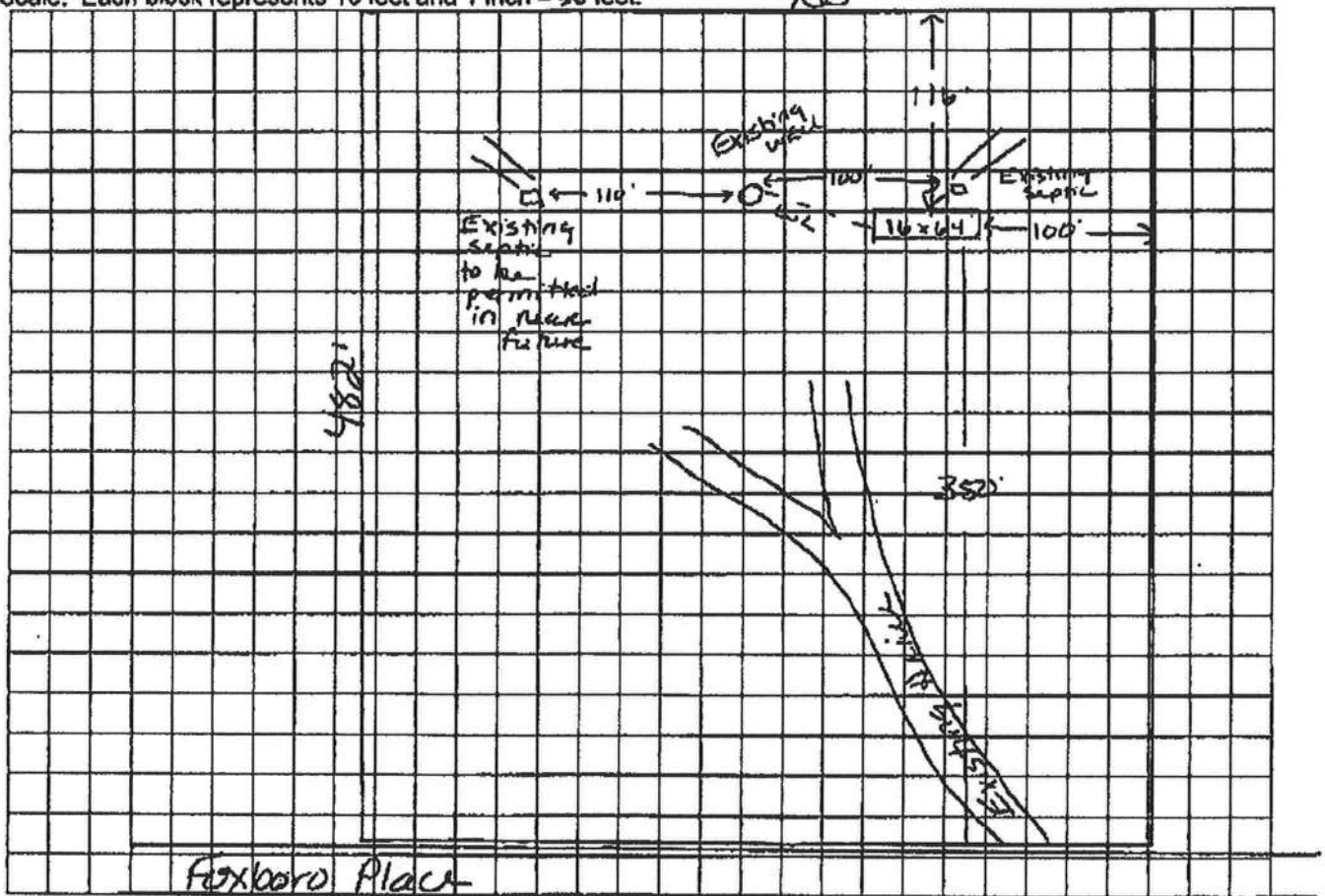
App # 1103-13

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 11-0126E

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 30 feet.



Notes:

Site Plan submitted by:

Wendy Grennell

Plan Approved ☒

Not Approved ☐

Agent

Date 3/22/11

By [Signature]

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SF

**CERTIFICATE OF
M/H OCCUPANCY**

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 33-4S-16-03265-228

Building permit No. 000029261

Permit Holder ROBERT SHEPPARD

Owner of Building LARRY & MARY PITTS

Location: 313 SW FOXBORO PLACE, LAKE CITY, FL 32024

Date: 04/05/2011

Joy Ann

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

