

DATE 07/15/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023387

APPLICANT FAYE WILDER PHONE 386.365.2574
 ADDRESS POB 848 FT. WHITE FL 32038
 OWNER FAYE WILDER PHONE 365.2574
 ADDRESS 268 SW CALIFORNIA TERRACE FT. WHITE FL 32038
 CONTRACTOR JOSEPH CHATMAN PHONE 386.497.2277
 LOCATION OF PROPERTY 47-S TO WILSON SPRINGS RD,TR GO TO STOP,TL TO NEWARK,TR TO
1ST. L, BRIGE (L) TO CAL. TER,TR 3/4 WAY DOWN ON L (FENCED)
 TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00
 HEATED FLOOR AREA TOTAL AREA HEIGHT .00 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 AE DEVELOPMENT PERMIT NO. 05-011

PARCEL ID 36-6S-15-00865-012 SUBDIVISION 3 RIVERS ESTATES
 LOT 12 BLOCK PHASE UNIT 12 TOTAL ACRES 1.00

IH0000240
 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor Faye Wilder
 EXISTING 05-0699-N BLK HD Y
 Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FINISH FLOOR TO BE 36' & A FINISH FLOOR CERTIFICATE IS NEEDED BEFORE
FINAL POWER.1 UNIT CHARGED THRU TAX OFFICE.

Check # or Cash 1014

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 Rough-in plumbing above slab and below wood floor
 date/app. by date/app. by date/app. by
 Electrical rough-in Heat & Air Duct Peri. beam (Lintel)
 date/app. by date/app. by date/app. by
 Permanent power C.O. Final Culvert
 date/app. by date/app. by date/app. by
 M/H tie downs, blocking, electricity and plumbing Pool
 date/app. by date/app. by date/app. by
 Reconnection Pump pole Utility Pole
 date/app. by date/app. by date/app. by
 M/H Pole Travel Trailer Re-roof
 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
 FLOOD ZONE DEVELOPMENT FEE \$ 50.00 CULVERT FEE \$ TOTAL FEE 300.00

INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVINCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

AP# 050714

Flood Zone AE

Comments ~~1 foot rise levee needed~~

Date Received 7/6/05

Zoning Official BLK 18.07.05

Development Permit YES

Zoning ESA-2

Building Official HD 7-8-05

Permit # 23387

Land Use Plan Map Category ESA

FEMA Map # 0255

Elevation 35'

Finished Floor 36'

River Scale Fe

In Floodway NO

☒ Site Plan with Setbacks shown

☐ Environmental Health Signed Site Plan

☒ Env. Health Release

Revised 9-23-04

☒ Well letter provided

☒ Existing Well

- 10/4

Must have a copy of the property deed Year 1983

- Property ID 00865-012-00-00-00
- New Mobile Home Used Mobile Home
- Subdivision Information LOT 12 Unit 12 3RD NEW ESB.
- Applicant FAYE Milder
- Address PO BOX 848, FT WHITE, FL 32038
- Name of Property Owner FAYE Milder
- 911 Address 268 SW California Terrace
- Circle the correct power company - FL Power & Light
- (Circle One) - Suwannee Valley Electric
- Name of Owner of Mobile Home FAYE Milder
- Address PO BOX 848, FT WHITE, FL 32038
- Relationship to Property Owner SELF
- Current Number of Dwellings on Property 1 (ONE)
- Lot Size 200 X 200 150 X 273
- Total Acreage 1 ACRE +
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiv
- Driving Directions 47 to FT WHITE. THEN Light to Wilsons Springs Rd
- to stop (Left) still on Wilsons Springs Rd to Newark - by Popes Store (Right)
- 1st st on Left - Bridge (Left) to CALIFORNIA TERE (Right) about 3/4
- on Left - Chain Link Fence - this property is to the Left of the Chain Link Fence
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Name of Licensed Dealer/Installer: JOSEPH A. CHATMAN
- Installers Address 9241 SW US Hwy 27 FT. WHITE F
- License Number IA-00002410
- Installation Decal # 21

OS-0695-N

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

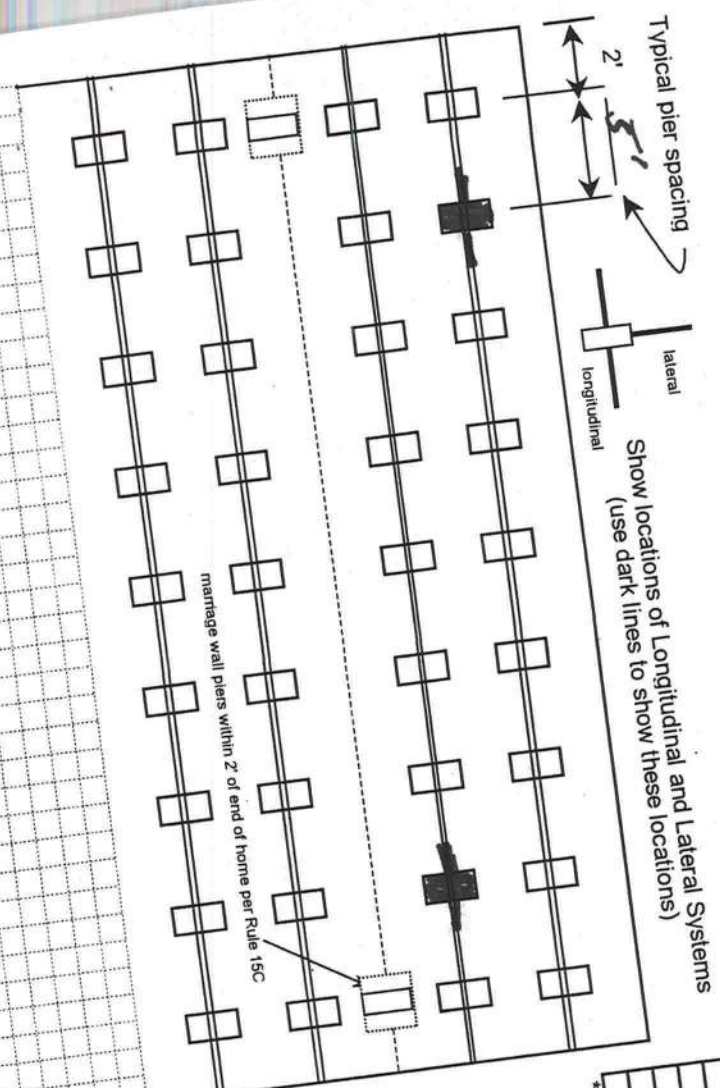
Installer Joseph R. Chalmers License # TH-0000240

311 Address where home is being installed: 6000 14th St NW

Manufacturer Homes of Meert Length x width per title - 60' x 14'

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 JRC



Home installed to the Manufacturer's specifications ☒ Home is installed in accordance with Rule 15-C ☐ Home is installed in accordance with Rule 15-C ☐ Single wide ☒ Wind Zone II ☐ Wind Zone III ☐ Double wide ☐ Installation Decal # 249525 ☐ Triple/Quad ☐ Serial # 526513367

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	6"	6"	6"	8"	8"	8"	8"
2000 psf	7' 6"	8"	8"	8"	8"	8"	8"
2500 psf	8"	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 20x20
Perimeter pier pad size 16x16
Other pier pad sizes 16x16
(required by the mfg.)
Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

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

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening

Pier pad size

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Living Tech 1101LV
Manufacturer Living Tech 1101LV
Longitudinal Stabilizing Device w/ Lateral Arms Living Tech 1101LV
Manufacturer Living Tech 1101LV

FRAME TIES

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

OTHER TIES

Sidewall Living Tech 1101LV
Longitudinal Living Tech 1101LV
Marriage wall Living Tech 1101LV
Shearwall Living Tech 1101LV

ANCHORS

4 ft 5 ft


LIMITED POWER OF ATTORNEY

I, JOSEPH A. CHATMAN, license # PA-000240 hereby
authorize FAYE AILDER to be my representative and act on my behalf
in all aspects of applying for a mobile home permit to be placed on the following
described property located in COLUMBIA ~~COLUMBIA~~ County, Florida.

Property owner: FAYE AILDER

Sec _____ Twp. _____ S Rge _____ E

Tax Parcel No. 00-00-00-00865-012


Mobile Home Installer

6-30-05

(Date)

Sworn to and subscribed before me this 30 day of June, 2005.


Notary Public



Sandra J. Chavez
Commission # DD298602
Expires March 9, 2008
Bonded-Troy-Fair-Insurance, Inc. 800-385-7019

My Commission expires.

Commission No. _____

Personally known: _____

Produced ID (Type) DL C355-481-60-0110

MOBILE HOME INSTALLER AFFIDAVIT

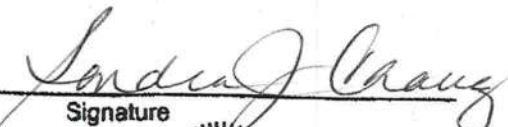
As per Florida Statutes Section 320.8249 Mobile Home Installers License:

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, JOSEPH A. CHATMAN, license number IH 0000240
Please Print
do hereby state that the installation of the manufactured home for FAYE Childer
Applicant
at SW California Terrace
911 Address
will be done under my supervision.


Signature

Sworn to and subscribed before me this 30 day of JUNE,
2005.

Notary Public: 
Signature

My Commission Expires: March 9, 2008

Sandra J. Chavez
Commission # DD298602
Expires March 9, 2008
Bonded Troy Fain - Insurance, Inc. 800-365-7019

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil 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 280 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.

SAZ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Joseph A. Cantor
Date Tested 6-30-05

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: Length: Spacing: Walls: Type Fastener: Length: Spacing: Roof: Type Fastener: Length: Spacing: 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.
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

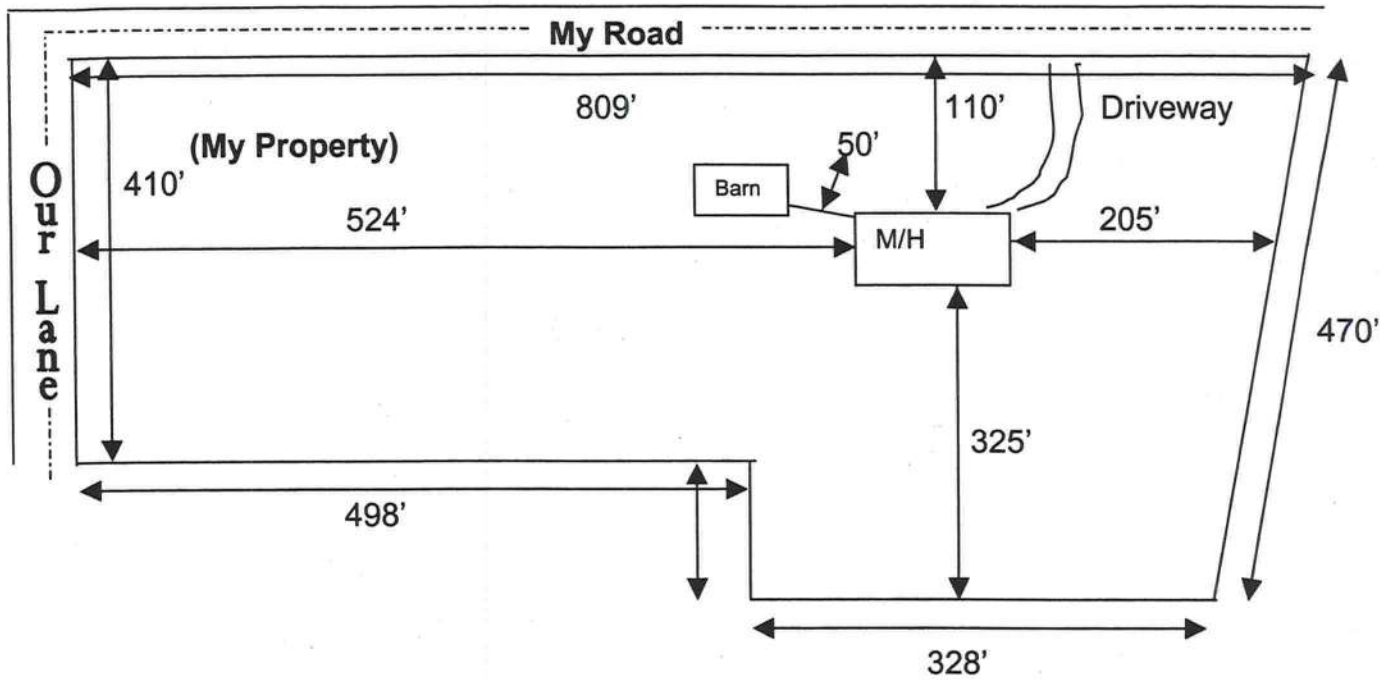
manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

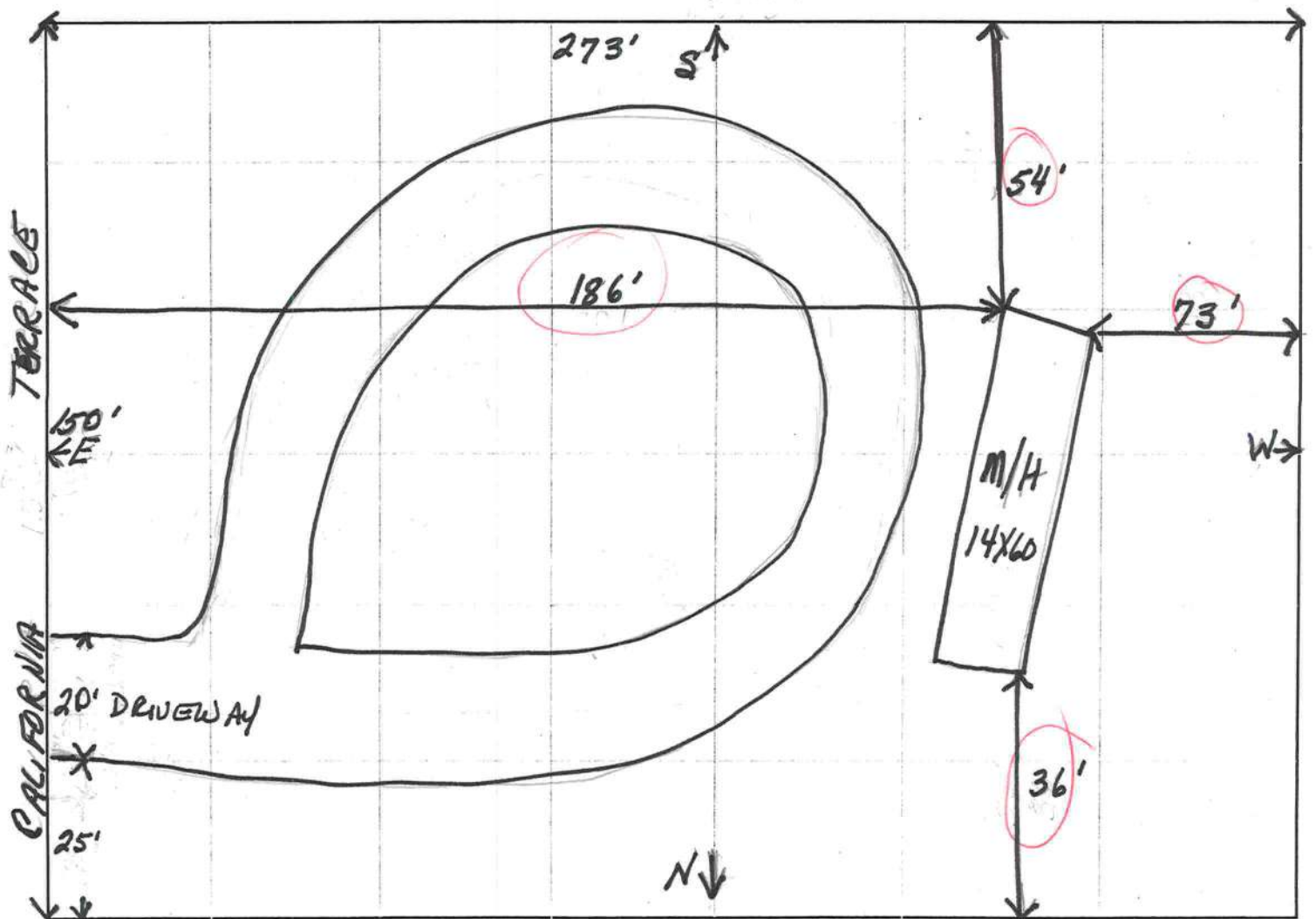
Date

6-30-05

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 road or roads are around your property.



HUGHES WELL DRILLING & PUMP SERVICE

12367 N US HWY 441
LAKE CITY, FLORIDA 32055

OFFICE: (386)752-1840
FAX: (386)755-2934

E-MAIL:HUGWELL1840@AOL.COM

July 05, 2005

Columbia County Building and Zoning
P.O. Box 1529
Lake City, Fl. 32056-1529

Attn: Gale Tedder/Janis

Subject: Requested Info: Faye Wilder

- 1- 4" Deep Well
- 2- 1-hp Pump-20gpm
- 3- 82 Gallon Eqv. Bladder Tank
- 4- 1-Cycle Stop Valve
- 5- 1&1/4" Drop Pipe

If you have any further questions, please feel free to phone me at the above number.

Sincerely,

Ronnie Hughes

WE DRILL THE BEST AND SERVICE THE REST

This Instrument Prepared by & return to:

Name: **Chris Travis, an employee of
TITLE OFFICES, LLC**
Address: **1089 SW MAIN BLVD.
LAKE CITY, FLORIDA 32025
File No. 05Y-06924CT**

Inst: 2005014623 Date: 06/22/2005 Time: 09:25
Doc Stamp-Deed : \$6.00

DC, P. Dewitt Cason, Columbia County B:1049 P:1877

Parcel I.D. #: 00865-012

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 14th day of June, A.D. 2005, by **JAMES E. DAVIS** and **NANCY SUE DAVIS, HIS WIFE**, hereinafter called the grantors, to **FAYE MARLENE WILDER, single** whose post office address is **P.O. BOX 848, FT WHITE, FL. 32038**, hereinafter called the grantee:

(Wherever used herein the terms "grantors" and "grantee" include all the parties to this instrument singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in Columbia County, State of FLORIDA, viz:

Lot 12, THREE RIVERS ESTATES, Unit 12, according to the map or plat thereof as recorded in Plat Book 4, Page 117-117A, of the Public Records of Columbia County, FLORIDA.

THIS IS TO STATE THAT JAMES E DAVIS AND NANCY SUE DAVIS WERE MARRIED CONTINUOUSLY AND WITHOUT INTERRUPTION BY DIVORCE BY DIVORCE FROM 10/3/88 TO 6/14/05.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

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

And the grantors hereby covenant with said grantee that they are lawfully seized of said land in fee simple; that they have good right and lawful authority to sell and convey said land, and hereby fully warrant the title to 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, 2004.

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

Signed, sealed and delivered in the presence of:

Robert P. Ross
Witness Signature
Robert P. Ross
Printed Name
Terefe Brookings
Witness Signature
TEREFE BROOKINGS
Printed Name

James E Davis L.S.
JAMES E. DAVIS
Address:
4107 LARCH AVE., PALM BEACH GARDENS,
FL 33418
Nancy Sue Davis L.S.
NANCY SUE DAVIS
Address:
4107 LARCH AVE., PALM BEACH GARDENS,
FL 33418

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 15th day of June, 2005, by **JAMES E. DAVIS** and **NANCY SUE DAVIS**, who are known to me or who have produced Fla. Driver License as identification.



Robert P. Ross
MY COMMISSION # DD188929 EXPIRES
May 15, 2006
BOARDED THROUGH FARM INSURANCE, INC.

Robert P. Ross
Notary Public
My commission expires _____

CODE ENFORCEMENT
COLUMBIA COUNTY, FLORIDA
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7/1/05 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES
OWNERS NAME Faye Wilder PHONE 386-365-2574 CELL _____
911 ADDRESS - UNK - _____
MOBILE HOME PARK _____ SUBDIVISION N/A
DRIVING DIRECTIONS TO MOBILE HOME 47-5 TO H. White TO US 27 - go turn it, TO
John Hall, TE TO Wilson Springs Rd TL go approx 3 to 5 miles TO
Pope's Store, TE, TO Bridge Rd, TL TO California Te, 3/4 mile to chainlinked fence
MOBILE HOME INSTALLER _____ PHONE _____ CELL PROPERTY NEXT DOOR

MOBILE HOME INFORMATION

MAKE Homes of merit YEAR 1983 SIZE 14 x 60 COLOR Light yellowish/brown
SERIAL No. 526513367 Shutters
WIND ZONE _____ Must be wind zone II or higher NO WIND ZONE I ALLOWED

INTERIOR:

(P or F) - P= PASS F= FAILED

INSPECTION STANDARDS

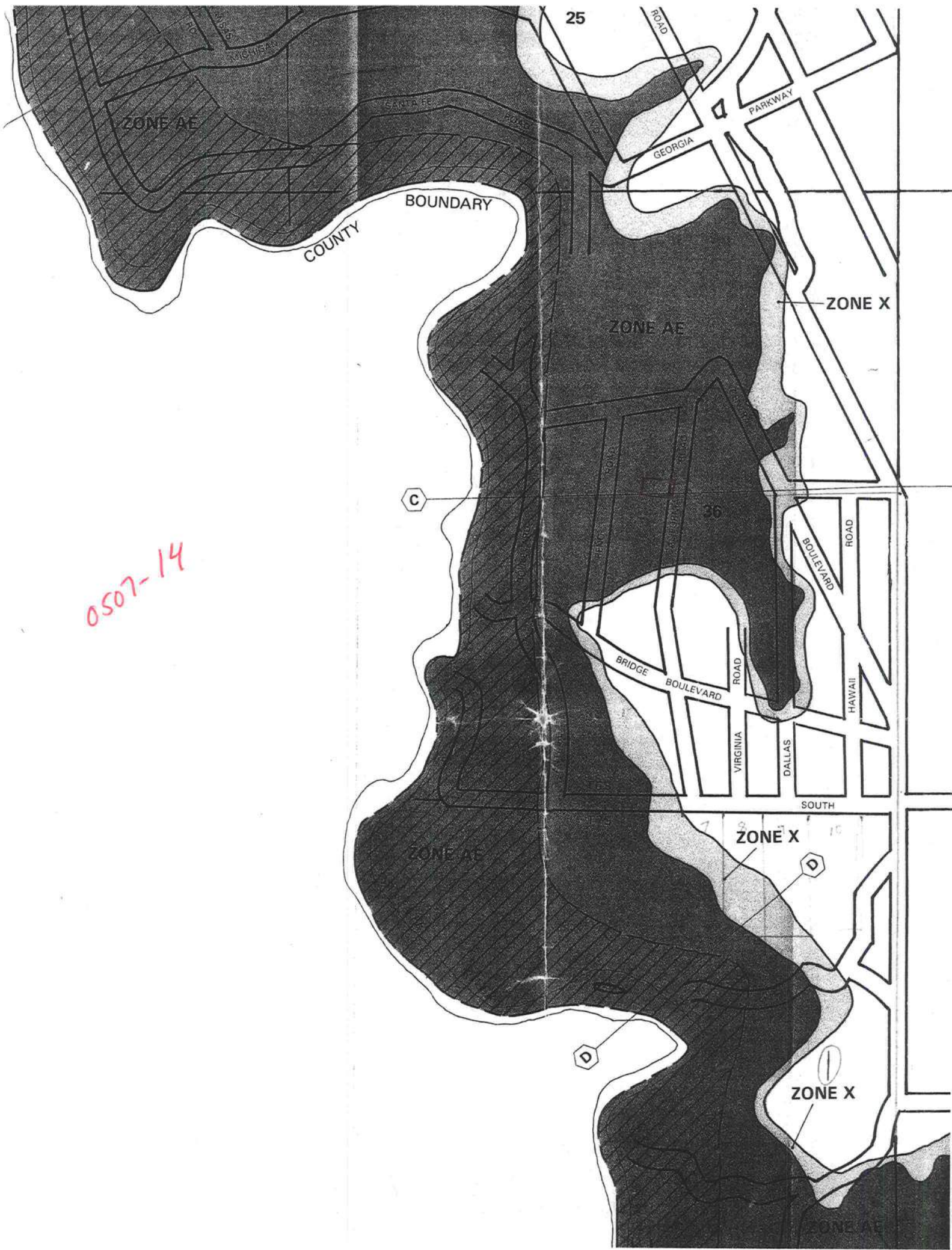
P SMOKE DETECTOR ☒ OPERATIONAL ☐ MISSING
F FLOORS ☒ SOLID ☐ WEAK ☐ HOLES DAMAGED LOCATION _____
F DOORS ☒ OPERABLE ☐ DAMAGED
F WALLS ☐ SOLID ☐ STRUCTURALLY UNSOUND
F WINDOWS ☐ OPERABLE ☐ INOPERABLE
F PLUMBING FIXTURES ☒ OPERABLE ☐ INOPERABLE ☐ MISSING
F CEILING ☒ SOLID ☐ HOLES ☐ LEAKS APPARENT
F ELECTRICAL (FIXTURES/OUTLETS) ☒ OPERABLE ☐ EXPOSED WIRING ☐ OUTLET COVERS MISSING ☐ LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING ☐ LOOSE SIDING ☐ STRUCTURALLY UNSOUND ☐ NOT WEATHERTIGHT ☐ NEEDS CLEANING
F WINDOWS ☐ CRACKED/ BROKEN GLASS ☐ SCREENS MISSING ☐ WEATHERTIGHT
F ROOF ☒ APPEARS SOLID ☐ DAMAGED

STATUS:
APPROVED ☒ WITH CONDITIONS: _____
NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

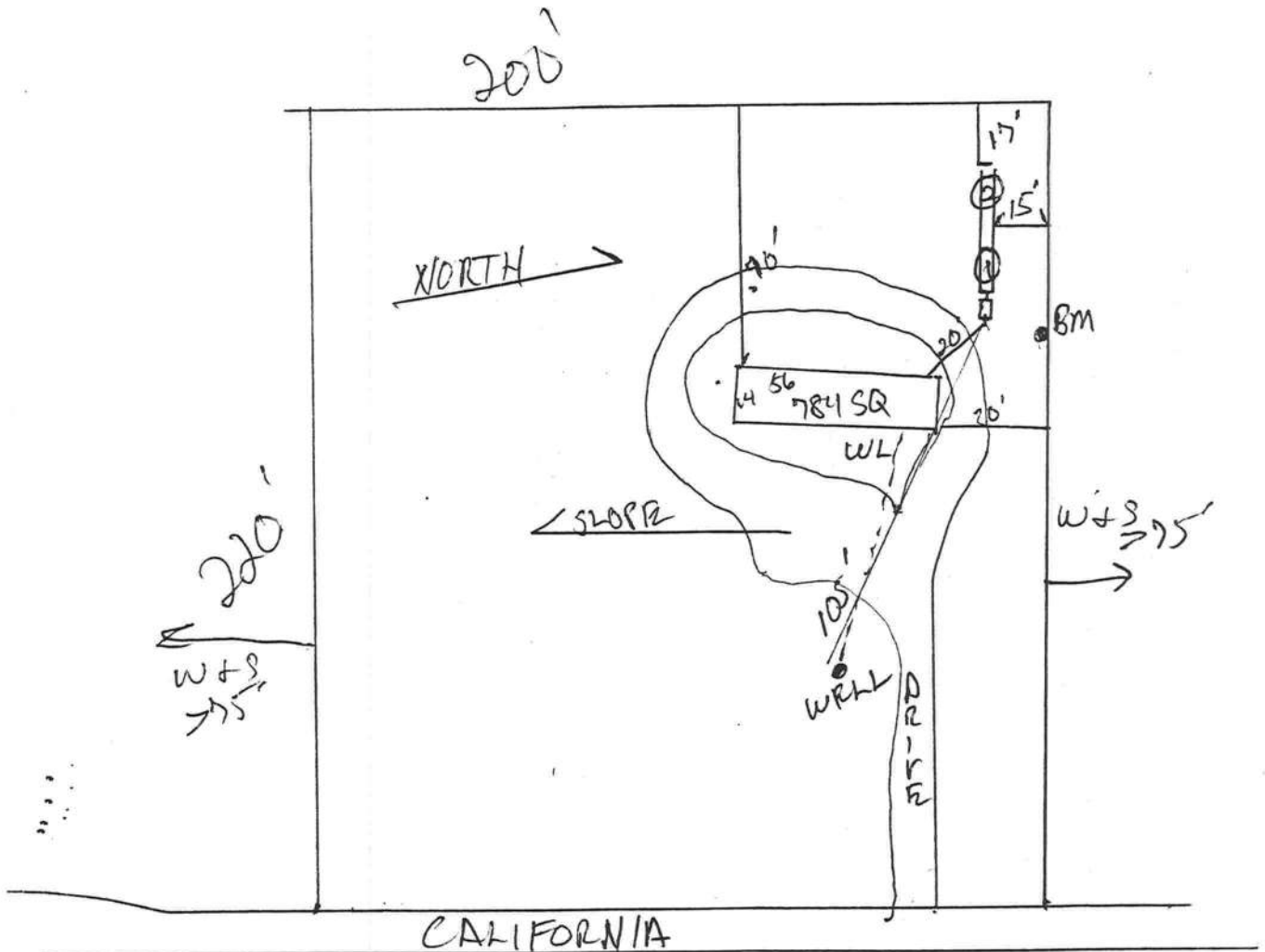
INSPECTOR SIGNATURE Dan [Signature] PRINT NAME _____ ID NUMBER 806 DATE 7-5-05
INSPECTION COMPANY _____ LICENSE # _____



APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Wilder

Scale: 1 inch = 50 feet.



Notes: _____

Site Plan submitted by:

Plan Approved

Not Approved

By Salli Maddy, ESI, Columbia

MASTER CONTRACTOR

Date JUN 23 2005

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

2 3389

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
APPLICATION

Permit No. 2 3389

Date 7/15/05

Fee 100.00

Receipt No. 3195

Env. Health site plan with SFD Permit 23278 - 05-0549-A

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government: provided such uses shall not be or include a residential use.
5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
6. In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.

7.

In agricultural districts: In addition to the principal residential dwelling, one (1) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements, and shall not be located within required yard areas. Such mobile homes shall not be located within twenty (20) feet of any building. A temporary use permit for such mobile homes may be granted for a time period up to one (1) year. When the temporary use permit expires, the applicant may invoke the provisions of Section 14.9, entitled Special Family Lot Permits.

8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
9. In any zoning district: A temporary business, as defined within these Land Development Regulations. At least sixty (60) days prior to the commencement date of the temporary permit, the applicant shall submit an application to the County, which shall include the following information.
 - a. the name and permanent address or headquarters of the person applying for the permit;
 - b. if the applicant is not an individual, the names and addresses of the business;
 - c. the names and addresses of the person or persons which will be in direct charge of conducting the temporary business;
 - d. the dates and time within which the temporary business will be operated;
 - e. the legal description and street address where the temporary business will be located;
 - f. the name of the owner or owners of the property upon which the temporary business will be located;
 - g. a written agreement containing the permission from the owner of the property for its use for a temporary business must be attached to and made a part of the application for the permit;

- h. a site plan showing display areas, plans for access and egress of vehicular traffic, any moveable interim structures, tents, sign and banner location and legal description of the property must accompany the application for the temporary use permit; and
- i. a public liability insurance policy, written by a company authorized to do business in the State of Florida, insuring the applicant for the temporary permit against any and all claims and demands made by persons for injuries or damages received by reason of or arising out of operating the temporary business. The insurance policy shall provide for coverage of not less than one million dollars (\$1,000,000.00) for damages incurred or claims by more than one person for bodily injury and not less than two million dollars (\$2,000,000.00) for damages incurred or claims by more than one person for bodily injury and fifty thousand dollars (\$50,000.00) for damages to property for one person and one hundred thousand dollars (\$100,000.00) for damages to property claimed by more than one person. The original or duplicate of such policy, fully executed by the insurer, shall be attached to the application for the temporary permit, together with adequate evidence that the premiums have been paid.

The sales permitted for a temporary business, as defined with these land development regulations, including, but not limited to, promotional sales such as characterized by the so-called "sidewalk "sale", "vehicle sale", or "tent sale", shall not exceed three (3) consecutive calendar days.

There must be located upon the site upon which the temporary business shall be conducted public toilet facilities which comply with the State of Florida code, potable drinking water for the public, approved containers for disposing of waste and garbage and adequate light to illuminate the site at night time to avoid theft and vandalism.

If the application is for the sale of automobiles or vehicles, the applicant shall provide with the application a copy of a valid Florida Department of Motor Vehicle Dealers license and Department of Motor Vehicle permit to conduct an "offsite" sale. If any new vehicles are to be displayed on the site, a copy of the factory authorization to do so will be required to be filed with the application.

No activities, such as rides, entertainment, food, or beverage services shall be permitted on the site in conjunction with the operation of the temporary business.

Not more than one (1) sign shall be located within or upon the property for which the temporary permits is issued, and shall not exceed sixteen (16) square feet in surface area. No additional signs, flags, banners, balloons or other forms of visual advertising shall be permitted. The official name of the applicant and its permanent location and street address, together

with its permanent telephone number, must be posted on the site of the property for which the temporary permit is issued and shall be clearly visible to the public.

Any applicant granted a temporary permit under these provisions shall also comply with and abide by all other applicable federal, State of Florida, and County laws, rules and regulations.

Only one (1) tent, not to exceed three hundred fifty (350) square feet in size shall be permitted to be placed on the site of the temporary business and such tent, if any, shall be properly and adequately anchored and secured to the ground or to the floor of the tent.

No person or entity shall be issued more than one (1) temporary permit during each calendar year.

The temporary permit requested by an applicant shall be issued or denied within sixty (60) days following the date of the application therefor is filed with the Land Development Regulation Administrator.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

1. Name of Title Holder(s) Mark Haddock

Address 372 SW Sunday City Lake City Zip Code 32024

Phone (386) 365-4981

NOTE: If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator MUST be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) _____

Address _____ City _____ Zip Code _____

Phone () _____

2. Size of Property 10.11 Acres
3. Tax Parcel ID# 34-45-16-03271-003
4. Present Land Use Classification #5
5. Present Zoning District A-3
6. Proposed Temporary Use of Property Temporary residence
while house is being built.

(Include the paragraph number the use applies under listed on Page 1 and 2)

7. Proposed Duration of Temporary Use 1 yr.
8. Attach Copy of Deed of Property.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

Mark Haddox
Applicants Name (Print or Type)

[Signature]
Applicant Signature

7-15-05
Date

Approved X 15-07-05
BLK

Denied _____

OFFICIAL USE

Permit # 23278

Reason for Denial _____

Conditions (if any) _____

**Columbia County Building Department
Flood Development Permit**

**Development Permit
F 023- 05-011**

DATE 07/15/2005 BUILDING PERMIT NUMBER 000023387
APPLICANT FAYE WILDER PHONE 386.365.2574
ADDRESS POB 848 FT. WHITE FL 32038
OWNER FAYE WILDER PHONE 365.2574
ADDRESS 268 SW CALIFORNIA TERRACE FT. WHITE FL 32038
CONTRACTOR JOSEPH CHATMAN PHONE 386.497.2277
ADDRESS 9241 SW US HWY 27 FT. WHITE FL 32038
SUBDIVISION 3 RIVERS ESTATES Lot 12 Block Unit 12 Phase
TYPE OF DEVELOPMENT M/H & UTILITY PARCEL ID NO. 36-6S-15-00865-012

FLOOD ZONE AE BY BLK 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 0255B
FIRM 100 YEAR ELEVATION 135.0' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 136.0'
IN THE REGULATORY FLOODWAY YES or NO RIVER VAITA FE
SURVEYOR / ENGINEER NAME DALE C. JONES LICENSE NUMBER 45263

☒ ONE FOOT RISE CERTIFICATION INCLUDED 7-15-05

☐ ZERO RISE CERTIFICATION INCLUDED

☐ SRWMD PERMIT NUMBER
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED 7-22-05 (JLW)

INSPECTED DATE BY

COMMENTS Spills Finish Floor. Certificate of 7000
Final Power. JLW

135 NE Hernando Ave., Suite B-21
Lake City, Florida 32055
Phone: 386-758-1008
Fax: 386-758-2160



PERMIT EXPIRES ONE YEAR FROM THE DATE OF ISSUANCE

ONE FOOT RISE CERTIFICATION

PROPERTY DESCRIPTION: LOT 12 UNIT 12 THREE RIVERS ESTATES

OWNER: Faye Wilder

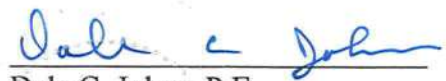
BASE FLOOD ELEVATION: 35.0

COMMUNITY-PANEL NUMBER: 120070 0225 B

PROJECT: Min. Finished Floor 36.0

Up to 14 X 60 mobile home located on piers in accordance with
current building code.

I hereby certify that construction of the proposed will cause less than one foot increase in flood
elevations of the Santa Fe River floodplain.



Dale C. Johns, P.E

Date: July 15, 2005

Ph 386-961-8903

PE # 45263

437 SW Thurman Terr

Lake City, Fl 32026

BASE FLOOD ELEVATION = 35.0

BASIN AREA AT 35' BASE FLOOD >2000 ACRES

PROPOSED BUILDING TYPE = MANUFACTURED HOME

PROPOSED BUILDING ENCROACHMENT = 60 PIERS (MAX) AT 12"X16"EA= 90 SQ. FT.

GROUND ELEVATION AT BUILDING = 34.0' AVE.

This project is in the staging area of the river and no step backwater calculations are necessary. This area would "back up" from the River without experiencing any horizontal movement of water. The calculations are based on the on the removal of floodplain volume due to construction of the foundation system.

$$\text{PERCENT FLOODPLAIN AREA REMOVED} = \frac{90/43560}{2000} = 0.00001\%$$

$$\text{FLOODPLAIN LEVEL INCREASE} = \frac{90 \times 1.0}{2000 \times 43560} = 0.0000001 \text{ FT.}$$

owner could fill entire lot area under home and still be below the minimum of a 1' rise

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

BUILDING OWNER'S NAME <u>FAY WILDER</u>		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>268 CALIFORNIA TERRACE</u>		Policy Number	
CITY <u>FT WHITE</u>	STATE <u>FL</u>	Company NAIC Number	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 12 UNIT 12 THREE RIVER EST, COLUMBIA CO.</u>		ZIP CODE <u>32068</u>	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>RESIDENTIAL</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.####)		HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	
		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>COLUMBIA CO. FL 120070</u>		B2. COUNTY NAME <u>COLUMBIA CO.</u>		B3. STATE <u>FL</u>	
B4. MAP AND PANEL NUMBER <u>120070 0255</u>	B5. SUFFIX <u>B</u>	B6. FIRM INDEX DATE <u>1-6-1988</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>1-6-1988</u>	B8. FLOOD ZONE(S) <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>3.5</u>

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
☐ FIS Profile ☐ FIRM ☒ Community Determined ☐ Other (Describe):
- B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
 Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
- C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
 Complete items C3.a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum NGVD 2 Conversion/Comments
- Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No
- ☐ a) Top of bottom floor (including basement or enclosure) 38.3 ft.(m)
- ☐ b) Top of next higher floor NA ft.(m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) NA ft.(m)
- ☐ d) Attached garage (top of slab) NA ft.(m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) NA ft.(m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 34.4 ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 35.6 ft.(m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- ☐ i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

William N. Kitchen
PSM 5490
7-21-2005

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
 I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
 I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME WILLIAM N. KITCHEN LICENSE NUMBER PSM 5490

TITLE PROFESSIONAL SURVEYOR & MAPPER COMPANY NAME WILLIAM N. KITCHEN PSM

ADDRESS 152 N MARION CITY LAKE CITY STATE FL ZIP CODE 32055

SIGNATURE William N. Kitchen DATE 7-21-2005 TELEPHONE 386-755-7686

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

268 SW CALIFORNIA TERRACE,

CITY

FT. WHITE

STATE
FL

ZIP CODE

32038

For Insurance Company Use:

Policy Number

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) ☐ Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft. (m) _____ in. (cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)

E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

SECTION G - COMMUNITY INFORMATION (OPTIONAL) ☐ Check here if attachments

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

_____ ft. (m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is:

_____ ft. (m) Datum: _____

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

DIAGRAM 5

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).

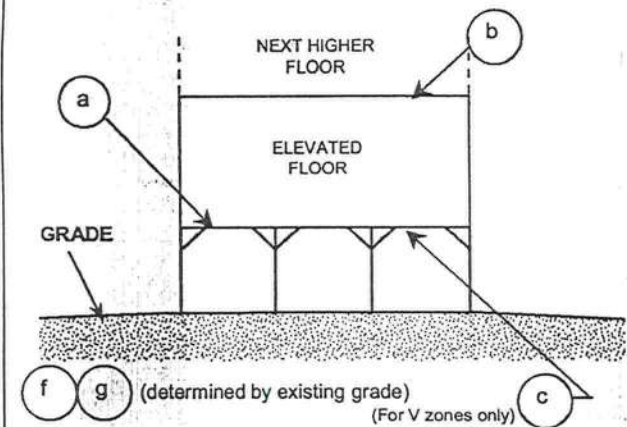


DIAGRAM 6

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

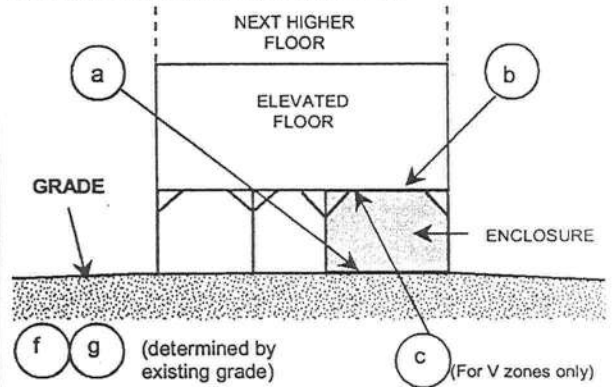


DIAGRAM 7

All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

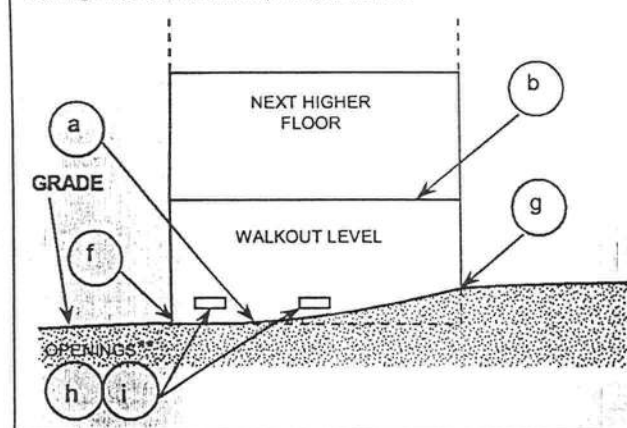
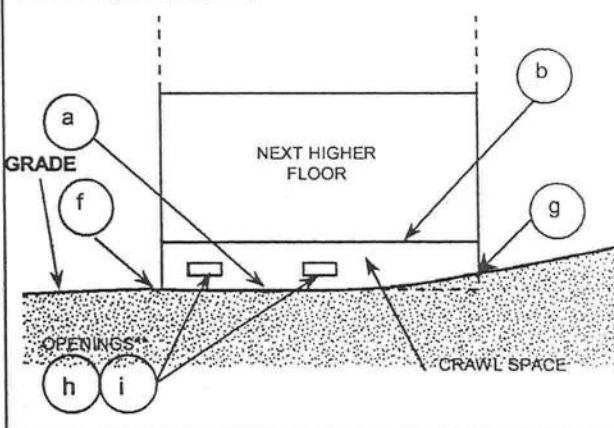


DIAGRAM 8

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side, with or without an attached garage.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A zones, the crawl space is with or without openings** present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



** An "opening" (flood vent) is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered professional engineer or architect that the design will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening.

23387

District No. 1 - Ronald Williams
 District No. 2 - Dewey Weaver
 District No. 3 - Jody DuPree
 District No. 4 - Stephen E. Bailey
 District No. 5 - Scarlet P. Frisina



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- _____ The attached elevation certificate requires corrections by the surveyor of section(s) _____ prior to acceptance by the community.
 _____ The attached elevation certificated is complete and correct.
 X Minor corrections have been made in the below marked sections by the authorized Community Official.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name	FAY WILDER	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	268 CALIFORNIA TERR.	Policy Number
City	Ft. White	Company NAIC Number
	FL State	ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	Lot 12 Unit 12 Three Rivers Est.	# 00865-012
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	Residential	
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number	5	
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	B2. County Name	B3. State
120070	Columbia County	FL
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date
1200700255	B	1-6-88
B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
1-6-88	AE	35
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____		
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

COMMENTS: C3e - A/C unit located on a 16" slab on grade at 35 feet.

Date of Review: 8-28-09

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.

AND THIRD THURSDAY AT 7:00 P.M.

Community Official: *Lai Hobson*

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.
 P. O. BOX 1529 LAKE CITY, FLORIDA 32056-1529 PHONE (386) 755-4100

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME FAY WILDER		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 268 CAUFORNIA TERRACE		Company NAIC Number
CITY FT WHITE	STATE FL	ZIP CODE 32068
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 12 UNIT 12 THREE RIVER EST, COLUMBIA CO.		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ###.####")		
HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		
SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER COLUMBIA CO. FL 120070	B2. COUNTY NAME COLUMBIA CO.	B3. STATE FL
B4. MAP AND PANEL NUMBER 120070 0255	B5. SUFFIX B	B6. FIRM INDEX DATE 1-6-1988
B7. FIRM PANEL EFFECTIVE/REVISED DATE 1-6-1988	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 35

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
☐ FIS Profile ☒ FIRM ☒ Community Determined ☐ Other (Describe):
- B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date: **CORRECT BFE ON FIRM**

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings ☐ Building Under Construction ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Building Diagram Number **5** (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete items C3.a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum **NGVD 2** Conversion/Comments
- Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No
- | | |
|--|----------------------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | 38.3 ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | NA ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | NA ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | NA ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | NA ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | 34.4 ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | 35.6 ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | NA |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h | NA sq. in. (sq. cm) |

William Kitchen
PSM 5490
A/C on 6" Pad
Complete
C3e
elevation
7-21-2005

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME WILLIAM N. KITCHEN	LICENSE NUMBER PSM 5490
TITLE PROFESSIONAL SURVEY & MAPPER	COMPANY NAME WILLIAM N. KITCHEN PSM
ADDRESS 152 N MARION	CITY LAKE CITY
SIGNATURE <i>William N. Kitchen</i>	STATE FL
DATE 7-21-2005	ZIP CODE 32055
TELEPHONE 386-755-7686	

CARRINGTON
OF
COLUMBIA

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 12-4S-16-02939-140 Building permit No. 000023378

Use Classification SFD, UTILITY

Fire: 29.60

Permit Holder BEN MARTIN

Waste: 61.25

Owner of Building TIMOTHY CARRENDER

Total: 90.85

Location: 283 SW INWOOD CT(CREEKSIDE, LOT 40)

Date: 05/08/2006



Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

