Ch#1948

PERM	IT APPLICATION / MANL	FACTURED HOME INST	ALLATION APPLICATION	
	(D-100d 4.44)	Zoning Official	Building Official 7,0. /	0-22-12
For Office Use Only	- 29_ Date Receive	ed 10/16 By	Land Use Plan Nap Category  0-004	7
APP (LIC)	Development Permit_	W/A Zoning A-	Land Use Plan Map Category	4-3
4. 1	s hew Owed I	D#A 1931	0-004	
Comments New	s was proper 2			
	A Staumtion MA	Finished Floor	River N A In Floodway	1/A_
FEMA Map#	Elevation Bru # 1	12-04(3 AVEN	Release Well letter #Existi	ng well
Site Plan with Sett	Jacks Shown ( ) En *	to the Authorite	tion U State Road Access (2911	Sheet
D Recorded Deed or	Affidavit from land own	64 Distillibi various	□ F W Comp. letter □ V	F-Form
Parent Parcel #	21-35.71-01310	O STUP-MH	- Ded Bounty D In Cal	untv
IMPACT FEES: EMS_	Fire	Gorr	Out County D In Co	
Road/Code	School	TOTAL _ Impa	t Fees Suspended March 2009_	
		Subdivision	12. 712E	
Respective ID 46	1-55-17-093	Subdivision		
	1/		MH Size 32x60 Year_	2012
<ul> <li>New Mobile Hor</li> </ul>	meUsec	Mobile Mome	MIN SIZE	261
· Applicant	DEBORAH P. N	VARE Pho	ne# (384) 984 - 0	2301
12	62 SW	- anul	Pearce lane with	LUTYTU
Name of Brope	Dehov	ah Ware	Phone# (384) 984-	0381 3202
nad Address	1206 SIN Pall	IL PEARCE LN	L.C. 320	29
	ect power company -			1
. Circle the corre	(Circle One) -	Suwannee Valley Ele		
				. 01
- Nema of Owne	r of Mohile Home	Deborah Way	Phone # (380)98	54-0381
Address 12	62 SM Paul 7	EARCE LN. L.	1, CHL 32014	
Aggress		Sungic		
<ul> <li>Relationship to</li> </ul>	Property Owner	o corter.		To .
. Current Numb	er of Dwellings on Pro	pert,		
1 -4 Di		Total Acresg	10 acres	
Lot Size				lanta anal
<ul> <li>Do you : Have</li> </ul>	(Currently using) (Blue	ate <u>Drive</u> or need <u>Culve</u> Road Sign) (Putting	in a Culvert) or <u>Culvert Walver</u> (C	eed a Culvert)
			NO	
	Home Replacing an E	C- 131 (TUS)	ENUGGETTA, (D) 61	V
N - 1	ions to the Property_	O decid o	nci, property	
Paul				
ame of Licensed D	ealer/Installer <u>Xoo</u>	WILL NORKI'S	Phone # 752 3	84/
stallers Address_	1004 SW Chy	onles Ton la	la Costa De 220	2 2 1 1
License Numb	per the IHIO	25/4×1	nstallation Decal # 1317	76-1
	. 01		* 19/1	7
ed Change	d after pe	most was	sseeds Deine C	alled w
awarse.	She said Se	it up was di	ou . Ronnie Norn	s re-did
world and.	Turner Alas		sseed Devne Com. Ronnie Norn	,0
	enspection W	ias usnoved.	1.18	· · · · · · · · · · · · · · · · · · ·
			Ilu spu	bery Deasish
			Mon oth	62-041
			W.T. F	

# COLUMBIA COUNTY PERMIT WORKSHEET

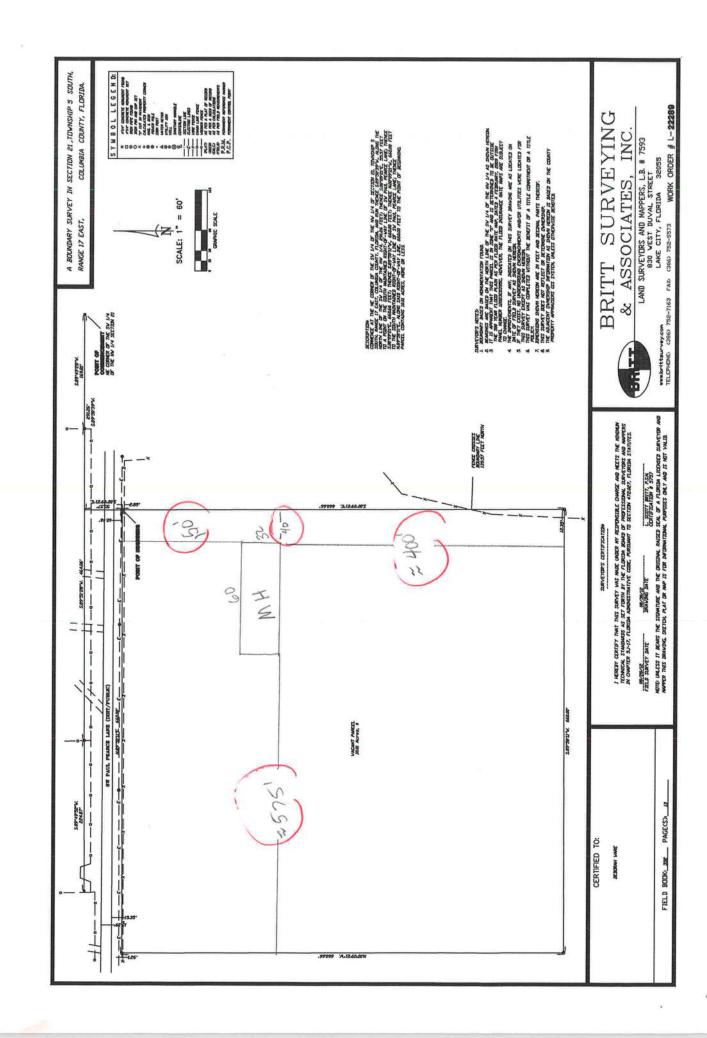
page 2 of 2

Installer Signature from posse Incl	Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems.
is accurate and true based on the	Connect all sewer drains to an existing sewer tap or septic tank. Pg.
Installer verifies all information given with this permit workshee	Plumbing
	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg
Other:	Electrical
7 0	Date Tested 4-25-0/2-
Miscellaneous	Installer Name
The bottomboard will be repaired and/or taped. Yes, Pg, Pg, Siding on units is installed to manufacturer's specifications. Yes, Fireplace chimney installed so as not to allow intrusion of rain water. Yes, Pg, Pg	requires anchors with 4000 bholding capacity.  Installer's initials
Weatherproofing	
Type gasket Installed: Pg Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	TORQUE PROBE TEST  The results of the torque probe test is 25 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 anexors.  Note: A state approved letters or several testing 4.
a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	* <u>1500</u> <u>* 1500</u> <u>* 1500</u>
Gasket (weatherproofing requirement)  I understand a properly installed gasket is a requirement of all new and used homes and that condensation mold meldew and broken.	<ol> <li>Using 500 lb. increments, take the lowest reading and round down to that increment.</li> </ol>
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.	<ol> <li>Take the reading at the depth of the footer.</li> </ol>
Walls: Type Fastener: 2 Length: Spacing: 2 Noof: Type Fastener: Length: Spacing: 16 Spacing: 17 Spacin	POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the home at 8 leading.
	x Soo x 1500 x 1500
Debris and organic material removed Water drainage: Natural Swale Pad Other	The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.
Site Preparation	POCKET PENETROMETER TEST

	OMDAD
E	Other:  Or Installed Outside of skirting. Yes N/ Range downflow vent installed outside of skirting. Yes N/ Prain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:
謹	vent vent e dov lines ical c
er ve	wnflo sup cross
rifie	w ver
is a	outsi outsi nt ins d at
Linfo	de of talle of tecte
Tage or ma	f skind out the integral of th
atior	ting.
true	Yes of sk
s all information given with this pe is accurate and true based on the	irting s
vith sed	1 6 7
on this	III SA
he per	
mit	
Wor	
Installer verifies all information given with this permit worksheet is accurate and true based on the	
et	

independent water supply systems. Pg.

Typical pier spacing 911 Address where home is being installed Manufacturer Installer These worksheets must be completed and signed by the installer. Submit the originals with the packet. I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 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 LOKNIZIVOKK, S LOWN longitudinal Home Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) riage wall piers within 2' of end of home per Installer's initials Length x width License # COLUMBIA COUNTY PERMIT WORKSHEET 1025/5/5 ule 15C 34 Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer List all marriage wall openings greater than 4 foot and their pier pad sizes below. Manufacturer Longitudinal Stabilizing Device (LSD) capacity (required by the mfg.) Other pier pad sizes Perimeter pier pad size bearing I-beam pier pad size interpolated from Rule 15C-1 pier spacing table. Load Triple/Quad Double wide Single wide Home is installed in accordance with Rule 15-C New Home 1500 psf 2000 psf 2500 psf Home installed to the Manufacturer's Installation Manual 000 ps 1000 psf Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS PIER PAD SIZES 16" x 16" PIER SPACING TABLE FOR USED HOMES (256)4 17XX Serial # Installation Decal # Pier pad size Wind Zone II Used Home 18 1/2" x 18 1/2" (342) 6416 20" x 20" (400) P Longitudinal Marriage wall Shearwall within 2' of end of home spaced at 5' 4" oc 4 ft Wind Zone III Sidewall 22" x 22" (484)\*POPULAR PAD SIZES C3/16 x 25 3/16) 16 x 16 16 x 18 18.5 x 18.5 OTHER TIES Pad Size 26 x 26 16 x 22.5 FRAME TIES ANCHORS 24" X 24" (576)\* 5ft page 1 of 2 Number 26" x 26" (676)676 288





## 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, YONN & WOST W- Installer License Holder Na	give this authority f	or the job address show below		
only, 1206 SW Pa	Job Address Lala C	لم و عدد عدد الله الله الله الله الله الله الله ال		
the below referenced person(s)	listed on this form is/are under m	v direct supervision and control		
	se permits, call for inspections an			
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)		
Deborah Ware	See Squate Sheet Signed by Owner	Agent Officer Property Owner		
	<i>p</i> 0	Agent Officer Property Owner		
		Agent Officer Property Owner		
I, the license holder, realize that	I am responsible for all permits p	urchased, and all work done		
under my license and I am fully	responsible for compliance with a	l Florida Statutes, Codes, and		
Local Ordinances.				
I understand that the State Licer	nsing Board has the power and au	thority to discipline a license		
document and that I have full rea	y him/her or by his/her authorized	person(s) through this		
assument and that I have full les	sponsibility for compliance granted	by issuance of such permits.		
~				
Kune summe	74/0	20140/1 11- 1 - 6		
License Holders Signature (Nota	rized) License Nu	25/45// 11-6-0/2 mber Date		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia				
The above license holder, whose	name is			
personally appeared before me a	and is known by me or has produc			
(type of 1.D.)	on this7 day or	<u>νδν</u> , 20 <u>(</u> <u>2</u> .		
NOTABVIS SIGNATURE				
NOTARY'S SIGNATURE	(Se	eal/Stamp) LAURIE HODSON		
		MY COMMISSION # EE 214728 EXPIRES: July 14, 2016 Bonded Thru Notary Public Underwriters		

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	PHONE
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMI	т

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name License #:	Selicit	Signature	Phone #:
MECHANICAL/ A/C	Print Name Alicense #:	Level 5	Signature_	Phone #:
PLUMBING/ GAS	Print Name Romie License #: THO2		Signature_	Phone #: 3/2 2 CT/

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			Sub-contractors signature
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.

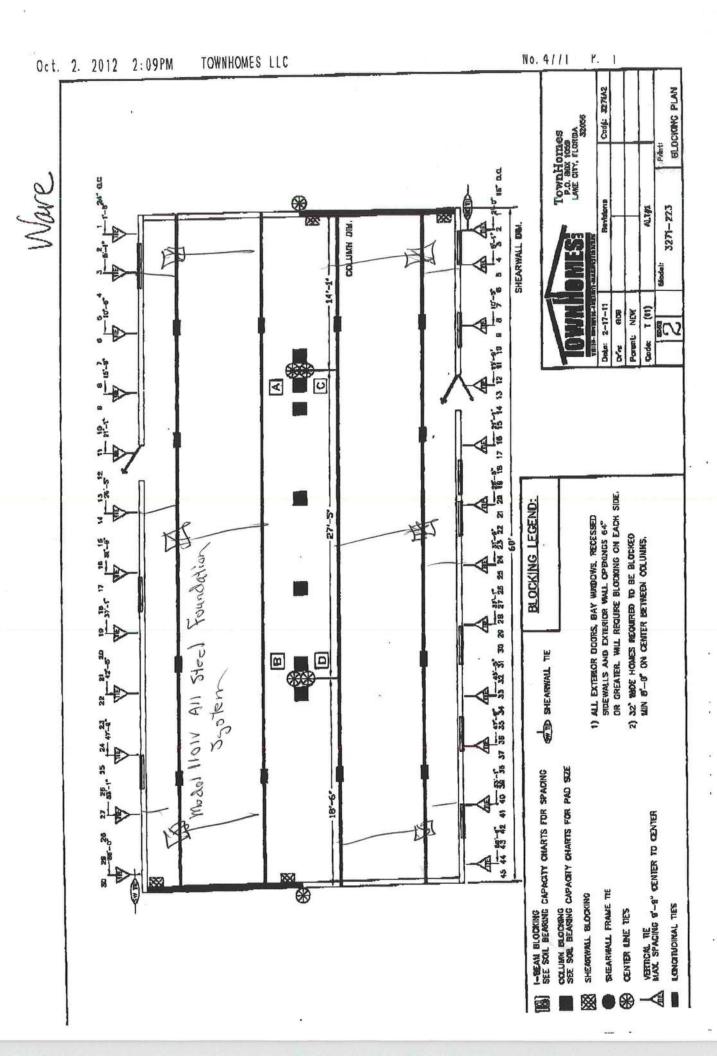
Contractor Forms: Subcontractor form: 1/11

## COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

Debnis and organic material removed Water drainage: Natural Swale  Swale  Pad  Other  Swale  Factoria multi wide units  Floor  Type Fastener  Roof: Type Fastener  For used homes a min. 30 gauge, 8" wide. galvanized metal strip  For used homes a min. 30 gauge, 8" wide. galvanized metal strip  For used homes a min. 30 gauge, 8" wide. galvanized metal strip  For used homes a min. 30 gauge, 9" wide. galvanized metal strip  For used homes a min. 30 gauge, 9" wide. galvanized metal strip  For used homes a min. 30 gauge, 9" wide. galvanized metal strip  For used homes a min. 30 gauge, 9" wide. galvanized metal strip  For used homes a min. 30 gauge, 9" wide. galvanized metal strip	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are a result of a poonty installed or mode, meldew and buckled marriage walls are a result of a poonty installed or modestand a strip of tage will not serve as a gasket.  Iype gasket DAM TAP Between Floors The Between Walts Yes Between of ridgateamn Yes.	The bottom board will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes Siding to be installed. Yes No	Installer verifies all information given with this permit worksheet is accurate and true based on the Installer Signature 100%
The pocket peretrometer bests are rounded down to 500 pel or check here to declare 1000 lb. soil without testing x/500 x	2. Take the reading at the depth of the foots?  3. Using 500 lb, increments, take the lowest reading and round down to that increment was discoursed from the foots?	Note: A state approved lateral arm system is being used and 4 it. anchors are allowed at the sidewal locations. I understand 5 it anchors are required at all centerine tie points where the torque test anchors are required at all centerine tie points where the torque test reading is 275 or tess and where the moting capacity.  Frequires anchors with 4000 by highing capacity.  Installer initials  ALL TESTS IMUST BE PERFORMED BY A LICENSED INSTALLER  Date Tested  LOVEL  Date Tested	Connect electrical conductors between multi-wide units, but not to the riain power saurce. This includes the bonding wire between multi-wide units. Pg.  Plumbing  Connect all sewer drains to an existing sewer to ar septic tank. Pg.  Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply sysfems. Pg.

RMIT WORKSHEET	ed to the Manufacturer's Installation Manual lalled in accordance with Rule 15-C	Single wide . II histallation Decal # 121009  Triple/Quad Serial # 2195 A 28	22° 24" X 24° 26° (6° 7° (6° 7° 6° 8° (6° 8° 6° 6° 8° (6° 8° 8° (6° 8° 8° 6° 8° 8° (6° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8°	7 6° 8' 8' 8' 6' 1 from Rule 16C-1 pier specing	Part Size So In 1-beam pier pad size Size So In 16 x 16	29 // 4ff 5ft FRAME TES	Longitudinal Stabilizing Device (L.SD)  Longitudinal Stabilizing Device (L.SD)  Longitudinal Stabilizing Device we Legangh Arms  Manufacturer  Longitudinal  Manufacturer  Longitudinal  Manufacturer  Sidewall  Longitudinal  Sidewall  Sidewall  Longitudinal  Sidewall  Sidewall  Longitudinal  Sidewall  Sidewall  Longitudinal  Sidewall  Longitudinal  Sidewall  Longitudinal
COLUMBIA COUNTY PERMIT WORKSHEET	These worksheets must be completed and signed by the installer. Submit the originals with the packet. Installer CRRC Thrift License # TH-1025139  811 Address where Nome is being installed.	Manufacturer TownHome Length x width 69 x 32.  NOTE: If home is a single wide fill out one half of the blocking plan.  If home is a triple or qued wide sketch in remainder of home.	sunderstand Lateral Arm Systems carnot be used on any frome (new or used) where the sidewall ties exceed 5 ft 4 in Installer's initials  Typical pier spacing	Langhtana (use dark lines to show these locations)	Ji> 11/		



This Instrument Prepared by & return to:

Name:

TRISH LANG, an employee of

NORTH CENTRAL FLORIDA TITLE,

LLC

Address:

343 NW COLE TERRACE, SUITE 101

LAKE CITY, FLORIDA 32055

File No. 12Y-09013TL

Parcel I.D. #: 09310-000

SPACE ABOVE THIS LINE FOR PROCESSING DATA

Inst:201212014693 Date:10/3/2012 Time:3:10 PM Stamp-Deed:0.00 DC;P.DeWitt Cason,Columbia County Page 1 of 2 B:1242 P:1461

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 3<sup>RD</sup> day of OCTOBER A.D.2012, by ANNIE LORETTA PEARCE,

AN UNREMARRIED WIDOW, hereinafter called the grantor, to DEBORAH P. WARE, whose post office address is 1262 SW PAUL PEARCE LANE, LAKE CITY, FL 32024, hereinafter called the grantee:

(Wherever used herein the terms "grantor" 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 grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does 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:

### SEE EXHIBIT "A" ATTACHED

THIS DEED IS BEING RECORDED TO CORRECT THAT CERTAIN INSTRUMENT RECORDED IN OFFICIAL RECORDS BOOK 1242, PAGE 1230, PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

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 grantor hereby covenants with said grantee that he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants 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, 2012.

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

Signed, s	ealed and delivered in	the presence of:
Witneks	Signature	
Printed	J. Howell	
Silled	Mame, Mame, Manual Color	27
Witness 5₩	Signature SARI	ER
Printed	Name	

ANNIE LORETTA PEARCE
Address:

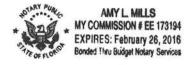
1280 SW PAUL PEARCE LANE, LAKE CITY, FLORIDA 32024



### 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 AGENT AUTHORIZATION

I, Terry Thrift Installers Name	give this authority a	nd I do certify that the below
referenced person(s) listed on t	his form is/are under my direct sup	pervision and control and
is/are authorized to purchase pe	ermits, call for inspections and sign	n on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Deborah Ware	Behovah Ware	homeowner
	t I am responsible for all permits p responsible for compliance with a	
I understand that the State Lice holder for violations committed	nsing Board has the power and auby him/her or by his/her authorized sponsibility for compliance grante	d person(s) through this
License Holders Signature (Not	The state of the s	1025139 10/15/1
NOTARY INFORMATION: STATE OF: Florida	county of: Colum	bich
The above license holder, whos personally appeared before me (type of I.D.)	se name ison this \sum_day	of 001. 20
NOTARY'S SIGNATURE		Seal/Stamp)



3867582160 07/18/2011 11:05

	MOBILE HOME INST	ALLATION SUBCONTRACTOR V	erification form	ſ
APPLICATION NUMBER	1210-29	CONTRACTOR TERRY	L. Thriff	_ PHONE (386) 623-0115

### THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PARMIT

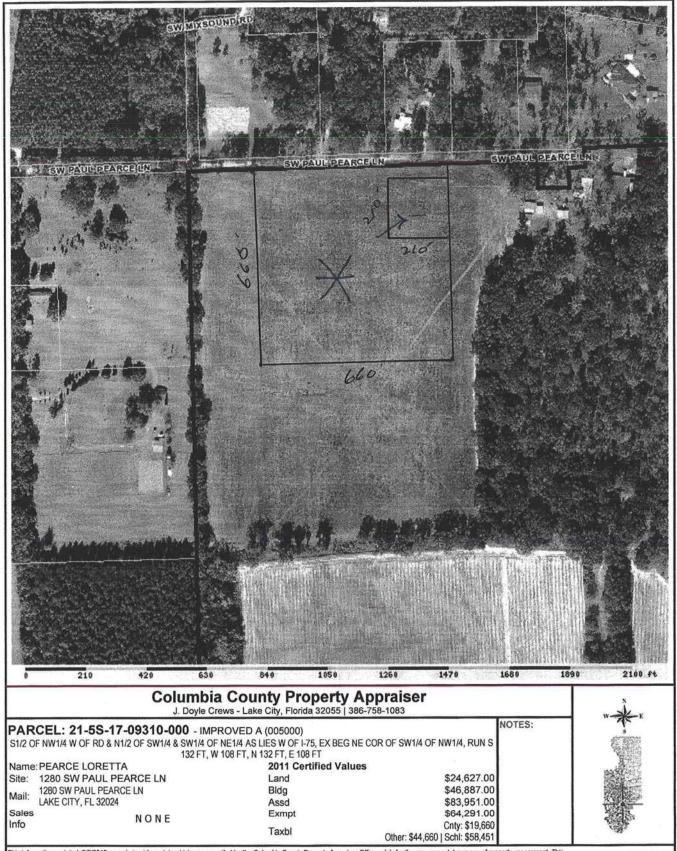
In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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.

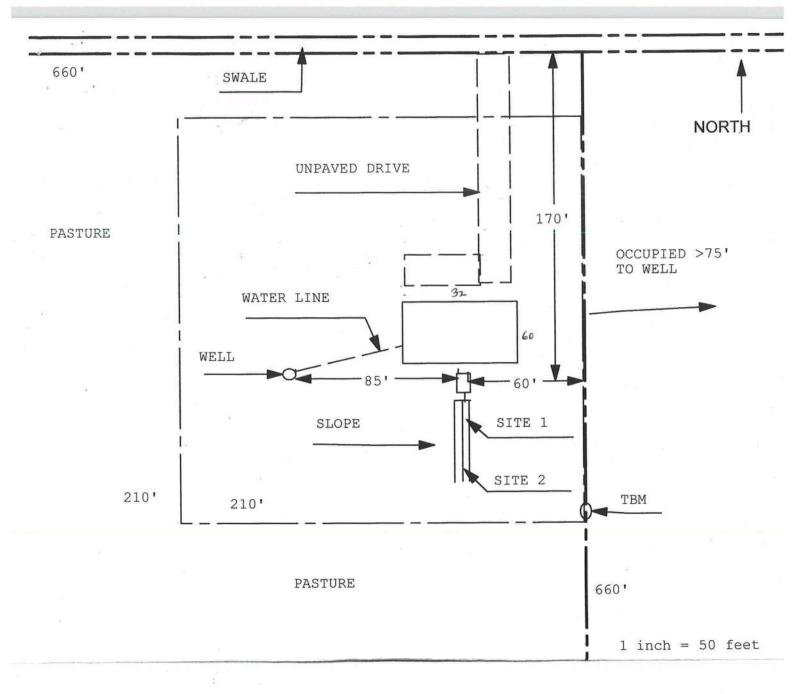
1	ELECTRICAL	Print Name_ ucense#:	Deborah Ware	Physical Signature Signature Signature Vellow Ward Physical (384) 984-0381
1	MECHANICAL/	Print Name_ Ucense #:	CACO 54424	Signature / Signat
1	PLUMBING/ GAS	Print Name License #:	TERRY L. THRIFT	Signature / 1111 / 1115

Specially License	License to indef	Sul-Longractors Control Name	Soft de itractors Signatura
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.



This information, updated: 8/2/2012, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.



Ware

Andrews Site Prep, Inc.
8230 SW State Rd. 121
Lake Butler, Fl. 32054
386-867-0323
Danielle Andrews License Number 2688

October 16, 2012
To Columbia County:

RE: AP # 1210-29

We will be drilling a well for Deborah Ware at Paul Pearce Rd. Lake City, Florida. The well should go approximately 180 feet with a casing depth of 120 feet. We will install a 1hp aermotor pump and a 32 gallon challenger bladder tank.

Thank You,

Danielle Andrews

Daniel Andrews

### 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\_croft@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:

10/15/2012

DATE ISSUED:

10/17/2012

**ENHANCED 9-1-1 ADDRESS:** 

1206

SW PAUL PEARCE

LN

LAKE CITY

FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

21-5S-17-09310-000

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT

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,



## STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL

PERMIT NO.	12-2463
DATE PAID:	10-110-12
FEE PAID:	311,00
RECEIPT #:	<del></del>

CR # 10-5526

ONSITE SEWAGE TREATMENT AND DISPOSAL  SYSTEM  APPLICATION FOR CONSTRUCTION PERMIT  FEE PAID: 3/3/50  RECEIPT #:
APPLICATION FOR CONSTRUCTION PERMIT  APPLICATION FOR:  [X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative  [ ] Repair [ ] Abandonment [ ] Temporary [ ]
APPLICANT: DEBORAH P. WARE
AGENT: C&G MOBILE HOME SALES TELEPHONE: (386) 752-3743
MAILING ADDRESS: PO BOX 2736 LAKE CITY FL 32056
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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED:
PROPERTY ID #: 21-5S-17-09310-000 ZONING: AG I/M OR EQUIVALENT: [ NO ]
PROPERTY SIZE: 10.000 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [ NO ] DISTANCE TO SEWER: N/A FT
PROPERTY ADDRESS: 1306 SV PAUL PEARCE RD.
DIRECTIONS TO PROPERTY: 41 SOUTH TURN RIGHT ON CR 131, PAST CR 240, TURN LEFT ON PAUL PEARCE RD. TO END ON RIGHT.
BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No. Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 MOBILE HOME 3 1,920 10/21/12
2
3
REVISED
[ ] Floor/Equipment Drains [ ] Other (Specify)
SIGNATURE: Delioiah Phare DATE: 10/16/12

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

Page 1 of 4

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT 660' SWALE NORTH UNPAVED DRIVE 170' PASTURE OCCUPIED >75' TO WELL WATER LINE SLOPE SITE 1 SITE 2 210' TBM 210' PASTURE 660' 1 inch = 50 feet

Site Plan Submitted By Roy Roy Date 10/10/12
Plan Approved Not Approved Date 10.1912

By Silly For Health Director Columba CPHU

Notes:

This Permit Must Be Prominently Posted on Premises During Construction	000030553
APPLICANT DEBORAH P. WARE PHONE 386.984.0381	0000000
ADDRESS 1262 SW PAUL PEARCE LN LAKE CITY	FL 32024
OWNER DEBORAH P. WARE PHONE 386.984.0381	
ADDRESS 1206 SW PAUL PEARCE LN LAKE CITY	FL 32024
CONTRACTOR TERRY L. THRIFT PHONE 386.623.0115	
LOCATION OF PROPERTY C-131-S TO PAUL PEARCE LN,TL @ DEAD END, PROPERTY	*
R.	
TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION	0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT	STORIES
FOUNDATION WALLS ROOF PITCH FLO	OOR
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 21-5S-17-09310-004 SUBDIVISION	
LOT BLOCK PHASE UNIT TOTAL ACRES 10.0	00
	7
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Ouver/	Jari
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/CEXISTING 12-0463 BLK TC	
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance	New Resident
COMMENTS: 1 FOOT ABOVE ROAD.	, itom restaem
Check # or Ca	sh 1948
Check # or Ca	
Check # or Ca  FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power	sh 1948 (footer/Slab)
Check # or Ca FOR BUILDING & ZONING DEPARTMENT ONLY	(footer/Slab)
Temporary Power Foundation Monolithic date/app. by  Check # or Ca  FOR BUILDING & ZONING DEPARTMENT ONLY  Foundation Monolithic date/app. by	(footer/Slab) date/app. by
Temporary Power Foundation Monolithic date/app. by  Under slab rough-in plumbing Slab Sheathing/Nodate/app. by  Check # or Ca  FOR BUILDING & ZONING DEPARTMENT ONLY  Foundation Monolithic date/app. by  Gate/app. by  Check # or Ca  Monolithic Monolithic date/app. by	(footer/Slab)
Temporary Power Foundation Monolithic date/app. by Under slab rough-in plumbing Slab Sheathing/Normality    Check # or Ca	(footer/Slab)  date/app. by  Vailing
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/Normality  Framing Insulation date/app. by date/app. by	(footer/Slab)  date/app. by  Vailing
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/Normal date/app. by  Framing Insulation date/app. by  Rough-in plumbing above slab and below wood floor Electrical rough-in	(footer/Slab)  date/app. by  Vailing  date/app. by
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by Gate/app. by  Under slab rough-in plumbing Slab Sheathing/Normality  Framing Insulation date/app. by date/app. by  Rough-in plumbing above slab and below wood floor Electrical rough-in date/app. by  Heat & Air Duct Peri. beam (Lintel)	(footer/Slab)  date/app. by  Vailing
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/N date/app. by  Framing Insulation date/app. by  Rough-in plumbing above slab and below wood floor Electrical rough-in date/app. by  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by	(footer/Slab)  date/app. by  Vailing  date/app. by
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/Normal date/app. by date/app. by  Framing Insulation date/app. by date/app. by  Rough-in plumbing above slab and below wood floor date/app. by  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by  Permanent power C.O. Final Culvert	(footer/Slab)  date/app. by  Nailing date/app. by  date/app. by  date/app. by
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/N 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  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by  Permanent power C.O. Final Culvert date/app. by  Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing.	(footer/Slab)  date/app. by  Jailing  date/app. by  date/app. by
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/Normality date/app. by date/app. by  Framing Insulation date/app. by Insulation date/app. by  Rough-in plumbing above slab and below wood floor date/app. by  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by  Permanent power C.O. Final Culvert date/app. by  Pump pole date/app. by date/app. by  Pump pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by	date/app. by Nailing
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/N date/app. by date/app. by  Framing Insulation date/app. by Insulation date/app. by  Rough-in plumbing above slab and below wood floor Electrical rough-in date/app. by  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by  Permanent power C.O. Final Culvert date/app. by  Pump pole date/app. by date/app. by  Reconnection RV Reproof	date/app. by  date/app. by  date/app. by  date/app. by  date/app. by  date/app. by
FOR BUILDING & ZONING DEPARTMENT ONLY  Temporary Power Foundation Monolithic date/app. by date/app. by  Under slab rough-in plumbing Slab Sheathing/N date/app. by date/app. by  Framing Insulation date/app. by Insulation date/app. by  Rough-in plumbing above slab and below wood floor date/app. by  Heat & Air Duct Peri. beam (Lintel) Pool date/app. by  Permanent power C.O. Final Culvert date/app. by  Pump pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by  Reconnection RV Re-roof	date/app. by  date/app. by

FOUNDATION	WALLS	ROO	OOF PITCH		FLOOR	
LAND USE & ZONING	A-3		MAX	K. HEIGHT		
Minimum Set Back Requirmen	sts: STREET-FRONT	30.00	REAR	25.00	SIDE 25.00	
NO. EX.D.U. 0	FLOOD ZONE X	DE	VELOPMENT PER	MIT NO.		
PARCEL ID 21-5S-17-093	10-004	SUBDIVISION				
LOT BLOCK	PHASE	UNIT		AL ACRES 10.0		
	IH102	25139	Dehr	ach Da	Pari	
Culvert Permit No. Cu	lvert Waiver Contractor	r's License Number		Applicant/Owner/C		
EXISTING 12-	-0463	BLK		ГС	N	
Driveway Connection Sep	otic Tank Number	LU & Zoning ch	necked by Apr	proved for Issuance		
COMMENTS: 1 FOOT ABO	VE ROAD.					
	0			Check # or Cas	sh 1948	
	FOR BUILDING	G & ZONING	DEPARTMENT	ONLY	70 (01.1)	
Temporary Power		ndation		Monolithic	(footer/Slab)	
da	nte/app. by	-	ite/app. by	_ Monontine	date/app. by	
Under slab rough-in plumbing	** *			Sheathing/N		
	date/app. by		date/app. by	Silvatinig/14	date/app. by	
Framing	Insulation					
date/app. by	y	date/ap				
Rough-in plumbing above slab	and below wood floor		El	ectrical rough-in		
Heat & Air Duct			pp. by		date/app. by	
date/a	Per Per	ri. beam (Lintel)	401-7	Pool		
Permanent power	С.О. I	Sinal	date/app. by		date/app. by	
date/ap			app. by	Culvert	date/app. by	
	Utility Pole		, blocking, electricit	y and plumbing	date/app. by	
date/app. by	date/app. by				date/app. by	
Reconnection	L	RV	.,	Re-roof _		
date/a	pp. by	d	ate/app. by		date/app. by	
BUILDING PERMIT FEE \$	CERTIF	TICATION FEE \$	0.00	SURCHARGE F	EE \$ 0.00	
MISC. FEES \$ 300.00	ZONING CERT. FI	EE \$ 50.00	FIRE FEE \$ 146.5	58 WASTE	FEE \$ 201.00	
FLOOD DEVELOPMENT FEE	FLOOD ZONI	E FEE \$ 25.00	CULVERT FEE \$	ТОТА	L FEE 722.58	
INSPECTORS OFFICE	10 V		CLERKS OFFICE	*		
NOTICE: IN ADDITION TO THE	HE REQUIREMENTS OF	THIS PERMIT, TH	ERE MAY BE ADD	TIONAL RESTRIC	TIONS APPLICABLE TO	
THIS PROPERTY TH	IAT MAY BE FOUND IN	THE PUBLIC RECO	ORDS OF THIS COL	INTY		
PERIVITIED DEVEL	JPIVIFIVI			The second secon		
WARNING TO OWNER: YOUR MPROVEMENTS TO YOUR PR	UPERIT. IF YOU INTEND	JIUUBIAIN FIN	MMENCEMENT MA ANCING, CONSUL	Y RESULT IN YOUR LE	JR PAYING TWICE FOR	
SET ONE RECORDING TOUR IN	O HOL OF COMMENCE	IENI.				
EVERY PERMIT ISSUED SH	ALL BECOME INVALID	UNLESS THE WO	ORK AUTHORIZE	BY SUCH PERM	AIT IS COMMENCED	

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.

### **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. Terry Thrift , license number IH 10 2-313 1
	do hereby state that the installation of the manufactured home for Debovah Wave
	at 1204 SW Paul Pearce LN.
,	will be done under my supervision. Lake City, FL 32024
<u></u>	Juny Signature Signature
	Sworn to and subscribed before me this 29 day of October,
	20 <u>12</u> .
1	Notary Public: Signature
	My Commission Expires:  Date  L HOWELL MY COMMISSION & EE 182186 EXPIRES: January 22, 2016 Booked Thru Budget Motory Services
To	6 BLDG + Zoning,
	PLEASE CHANGE DEBORAH WARE
1/EX	emit, to RONNIE NOCKIS SET-UP, HE
WIL 62	L BE SETTING THIS HOME, 10/29/12