DATE 05/20/2010

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000028585

APPLICANT ROBERT MINNELLA PHONE 352 472-6010

ADDRESS 5743 SW 22ND PLACE NEWBERRY FL 32669

OWNER BRYAN CASON PHONE 365-1016

ADDRESS 226 SE LEE DRIVE LULU FL 32061

CONTRACTOR ERNEST JOHNSON PHONE 352 494-8099

LOCATION OF PROPERTY 90E, TR SR 100, TL LEE DRIVE, TO NEXT DRIVE, PROPERTY ON RIG

TYPE DEVELOPMENT MH,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 27-4S-18-10450-000 SUBDIVISION TOWN OF LULU

LOT ____ BLOCK 5 PHASE ____ UNIT ____ TOTAL ACRES 1.44

000001817		IH0000359	Robert Minnella	
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
WAIVER	10-228	BK	HD	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 5211

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ date/app. by Foundation _____ date/app. by Monolithic _____ date/app. by

Under slab rough-in plumbing _____ date/app. by Slab _____ date/app. by Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by Insulation _____ date/app. by

Rough-in plumbing above slab and below wood floor _____ date/app. by Electrical rough-in _____ date/app. by

Heat & Air Duct _____ date/app. by Peri. beam (Lintel) _____ date/app. by Pool _____ date/app. by

Permanent power _____ date/app. by C.O. Final _____ date/app. by Culvert _____ date/app. by

Pump pole _____ date/app. by Utility Pole _____ date/app. by M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Reconnection _____ date/app. by RV _____ date/app. by Re-roof _____ date/app. by

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

MISC. FEES $ 300.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 32.10 WASTE FEE $ 83.75

FLOOD DEVELOPMENT FEE $ _____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ _____ **TOTAL FEE** 490.85

INSPECTORS OFFICE _____ CLERKS OFFICE CH

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION 5210 5211

For Office Use Only (Revised 1-10-08) Zoning Official BLK 11.05.10 Building Official HD 5-10-10

AP# 1005-02 Date Received 5/3/10 By G Permit # 1817 / 28585

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 18 Inches River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☐ EH # 10-0228 ☐ EH Release ☑ Well letter ☐ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter

IMPACT FEES: EMS Fire Corr Road/Code

School = TOTAL N/A Suspended ☑ UF ☑ 911

Property ID # 26-27-4-18-10450-000 Subdivision Town of Lulu

- New Mobile Home ✓ Used Mobile Home MH Size 32X76 Year 2010
- Applicant Robert Minnella Phone # (352)472-6010
- Address 25743 SW 22 PL Newberry FL 32669
- Name of Property Owner Bryan Cason Phone# (386) 365-1016
- 911 Address 226 SE ~~LEE~~ Dave, Lulu, FL 32061
- Circle the correct power company - FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Bryan Cason Phone # (386)365-1016
  Address 281 SW Petunia PL, Lake City, FL 32025
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 158 X 400 Total Acreage 1.44
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home no (OWES)
- Driving Directions to the Property 90 to SR 100 (TR) Go 8.3 miles to SE LEE Dr. (TL) to next street (TR) Property on right

✓

- Name of Licensed Dealer/Installer Ernest S. Johnson Phone # (352)494-8099
- Installers Address 22204 SE US Hwy 301, Hawthorne FL 32640
- License Number IH0000359 Installation Decal # 691

#125

Spoke to Nancy 5/11/10

PERMIT WORKSHEET

Installer Ernest S Johnson License # ITH0000359

Manufacturer Live Oak Length x Width 32X76

Name of Owner of this Mobile Home Bryan Cason

Phone _____

Address _____

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 SSJ

New Home ☒ Used Home ☐ Year 2010

Home installed to the Manufacturer's Installation Manual ☒

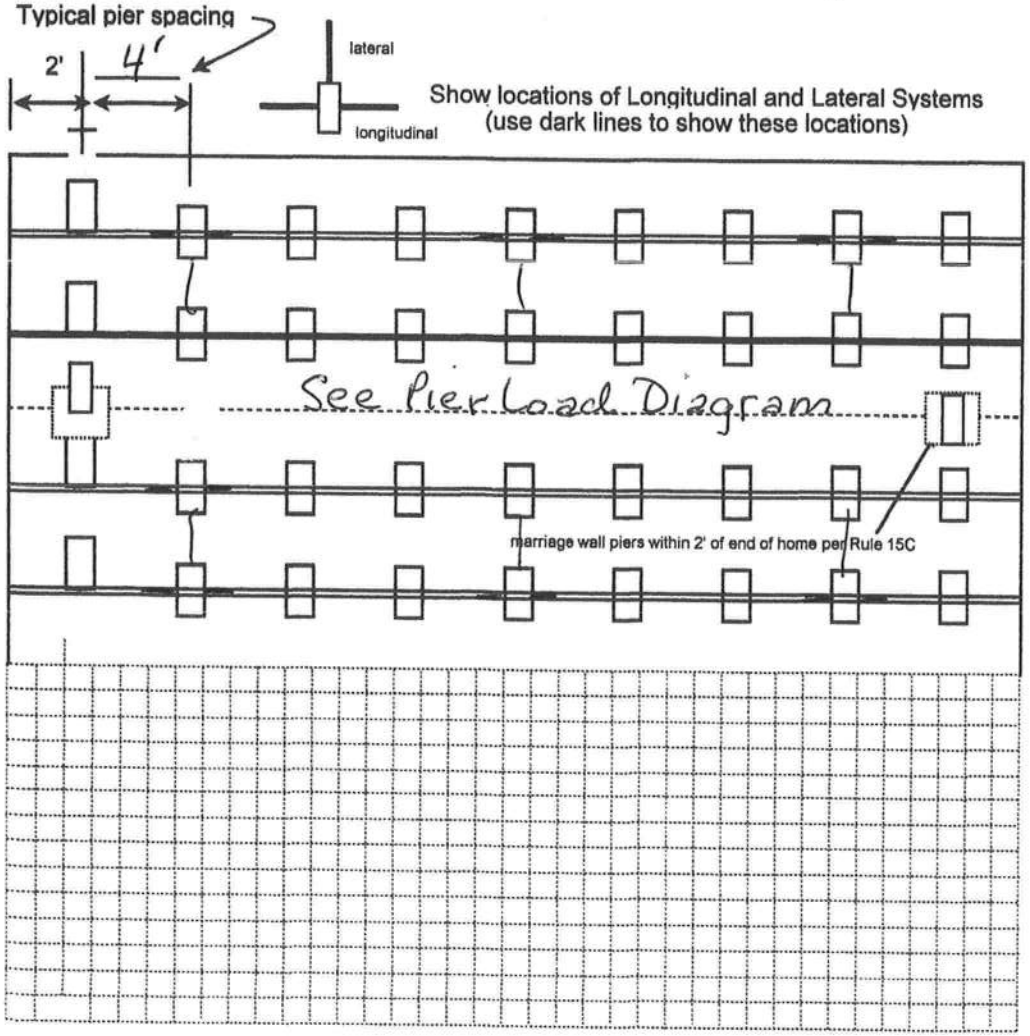
Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # _____

Triple/Quad ☐ Serial # Special Ordered

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17½ x 25½

Perimeter pier pad size NA

Other pier pad sizes (required by the mfg.) 16" x 16" (Doors)

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
See Pier	Load Diagram

POPULAR PAD SIZES

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

ANCHORS

(4 ft) (5 ft)

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver 1101V

OTHER TIES

	Number
Sidewall	28
Longitudinal	—
Marriage wall	6
Shearwall	—

PERMIT WORKSHEET

PERMIT NUMBER _____

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.

Assume 1000 lb.

X___ X___ X___

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 4 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.

Assume 1000 lb. ____cg____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 45-47

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 42

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 4

Site Preparation

Debris and organic material removed Yes

Water drainage: Natural ✓ Swale ___ Pad ✓ Other ___

Fastening multi wide units

Floor:	Type Fastener: Lag	Length: 6"	Spacing: 2'
Walls:	Type Fastener: Lag	Length: 6"	Spacing: 2'
Roof:	Type Fastener: Lag	Length: 6"	Spacing: 2'

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, meldew 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 cg

Type gasket Foam
Pg. Not in manual

Installed:
Between Floors (Yes)
Between Walls (Yes)
Bottom of ridgebeam (Yes)

Weatherproofing

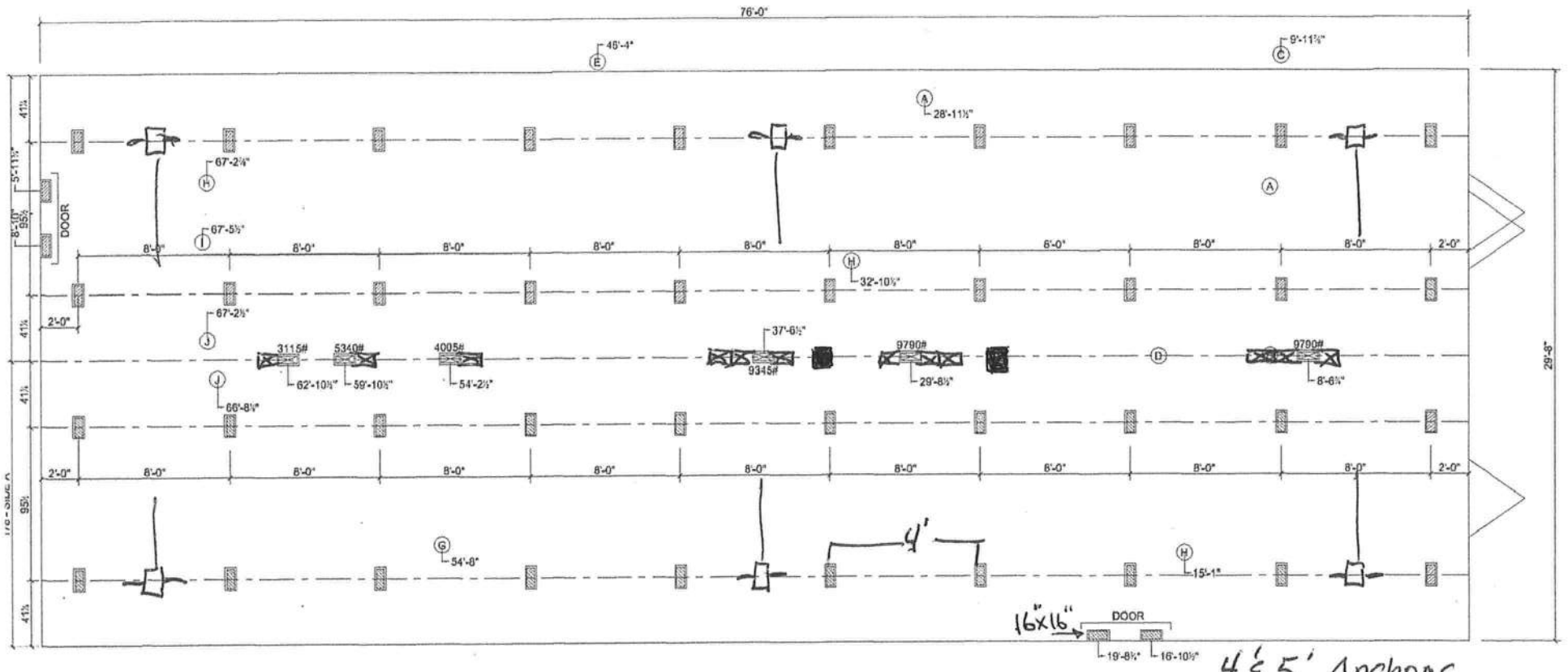
The bottomboard will be repaired and/or taped. Yes ✓ Pg. 5, 41
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

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 Ernest S Johnson **Date** 5-30-10



4 & 5' Anchors

Support Footer And Pier

MARRIAGE LINE OPENING SUPPORT PIER/TYP.

SUPPORT PIER/TYP

11/29/07

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS. SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: L-3764A - 32 X 76
4-BEDROOM / 2-BATH

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (W/OPT. HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)

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, Ernest S Johnson, (Installer License Holder Name) ,give this authority for the job address show below only, SW Petunia PL (Job Address), and I do certify that the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Robert Minnella	Robert Minnella	✓ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Ernest S Johnson — License Holders Signature (Notarized)
FH0000359 — License Number
3-30-10 — Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ernest S Johnson, personally appeared before me and is known by me or has produced identification (type of I.D.) ___ on this 30 day of March, 2010.

NOTARY'S SIGNATURE

NANCY S. PHELPS
NOTARY PUBLIC - STATE OF FLORIDA
Commission # DD666995
EXPIRES 5/10/2011
BONDED THRU 1-888-NOTARY1

(Seal/Stamp)

Prepared by and Return to:
P.D. Cason
Post Office Box 1133
Lake City, Florida 32056

Inst:200912016721 Date:11/6/2009 Time:3:23 PM
Doc Stamp-Deed:0.70
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1163 P:2328

Warranty Deed

Made this November 6th, 2009 A.D.

By P.D. Cason, Post Office Box 1133, Lake City, Florida 32056, hereinafter called the grantor, to

Bryan Dowitt Cason, whose post office address is: 281 SW Petunia Place, Lake City, Florida 32025 , hereinafter called the grantee:

(Whenever used herein the term "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 corporations)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, ($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:

In the Town of Lulu in Sections 26, and 27, Township 4 South, Range 18 East, and more particularly described as follows: Lots 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, and 16, in Block 5 according to the original survey of said Town formally called the Town of Hagen.

LESS AND EXCEPT any and all road rights of way.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: R10450-000

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 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 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, 2008.

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:

Megan M. Harrell
Witness Printed Name Megan M. Harrell

P.D. Cason (Seal)
P. D. Cason
Address: Post Office Box 1133, Lake City, Florida 32056

Elaine R. Davis
Witness Printed Name Elaine R Davis

_____ (Seal)
Address:

State of Florida
County of Columbia

The foregoing instrument was acknowledged before me this 6th day of November, 2009, by P.D. Cason, who is/are personally known to me or who has produced Drivers License as identification.

Megan M. Harrell
Notary Public
Print Name: _____
My Commission Expires: _____

MEGAN M. HARRELL
MY COMMISSION # DD 842045
EXPIRES: March 30, 2013
Bonded Thru Notary Public Underwriters

DEED Individual Warranty Deed With Non-Homestead-Legal on Face

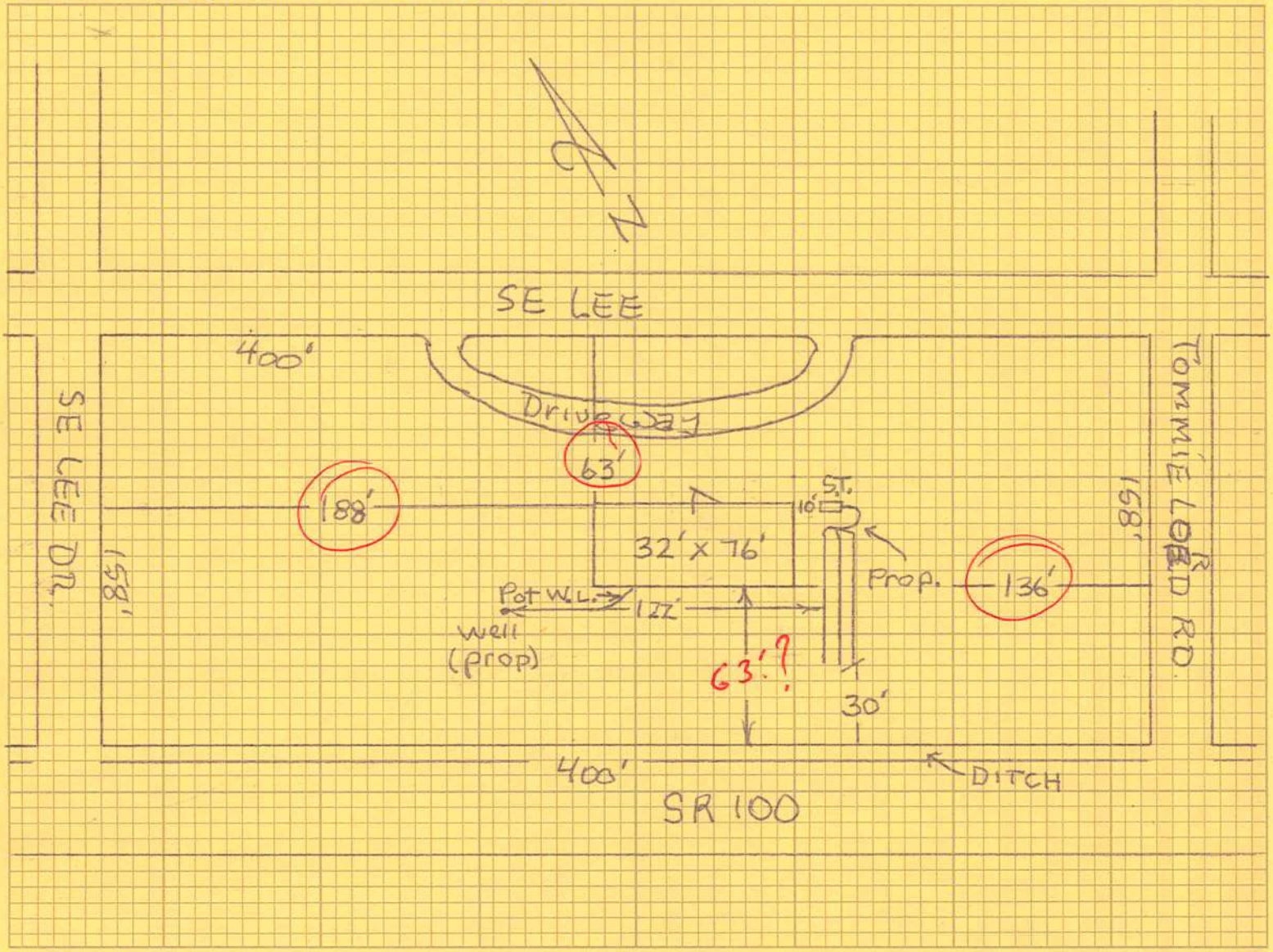
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: _____ _____
Signature Title

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

App # 1005-02

Robert Stofel Well Drillling Lic. # 2901

Andrews Site Prep, Inc.

8230 SW State Rd. 121

Lake Butler, Fl. 32054

386-867-0323

May 3, 2010

To Columbia County Environmental Health:

We will be drilling a well for Bryan Cason on Lee Dr in Lulu, Florida. The well should go approximately 180 feet with a casing depth of 150 feet. We will install a 1hp aermotor pump and a 33 gallon challenger tank.

Thank You,

Robert Stofel

App# 1005-02

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: 5/3/2010 **DATE ISSUED:** 5/5/2010

ENHANCED 9-1-1 ADDRESS:

226 SE LEE DR

LULU FL 32061

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-10450-000

Remarks:

ALL BLK 5 INCLUDING ALLEY

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.

1723

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1065.02 CONTRACTOR Ernest S. Johnson PHONE (352) 494-8099

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 684	Print Name Wayne J Placona License #: EC 0002157	Signature Wayne J Placona Phone #: 386-325-1335
MECHANICAL/ A/C B	Print Name Robert Grant License #: CAC1814931	Signature Phone #: 800-859-3708
PLUMBING/ GAS 725	Print Name Ernest S Johnson License #: IH0000359	Signature Ernest S Johnson Phone #: (352) 494-8099
ROOFING	Print Name License #:	Signature Phone #:
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature Phone #:
SOLAR	Print Name License #:	Signature Phone #:

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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 / Owner / Subcontractor Initials

STATE OF FLORIDA
DEPARTMENT OF HEALTH

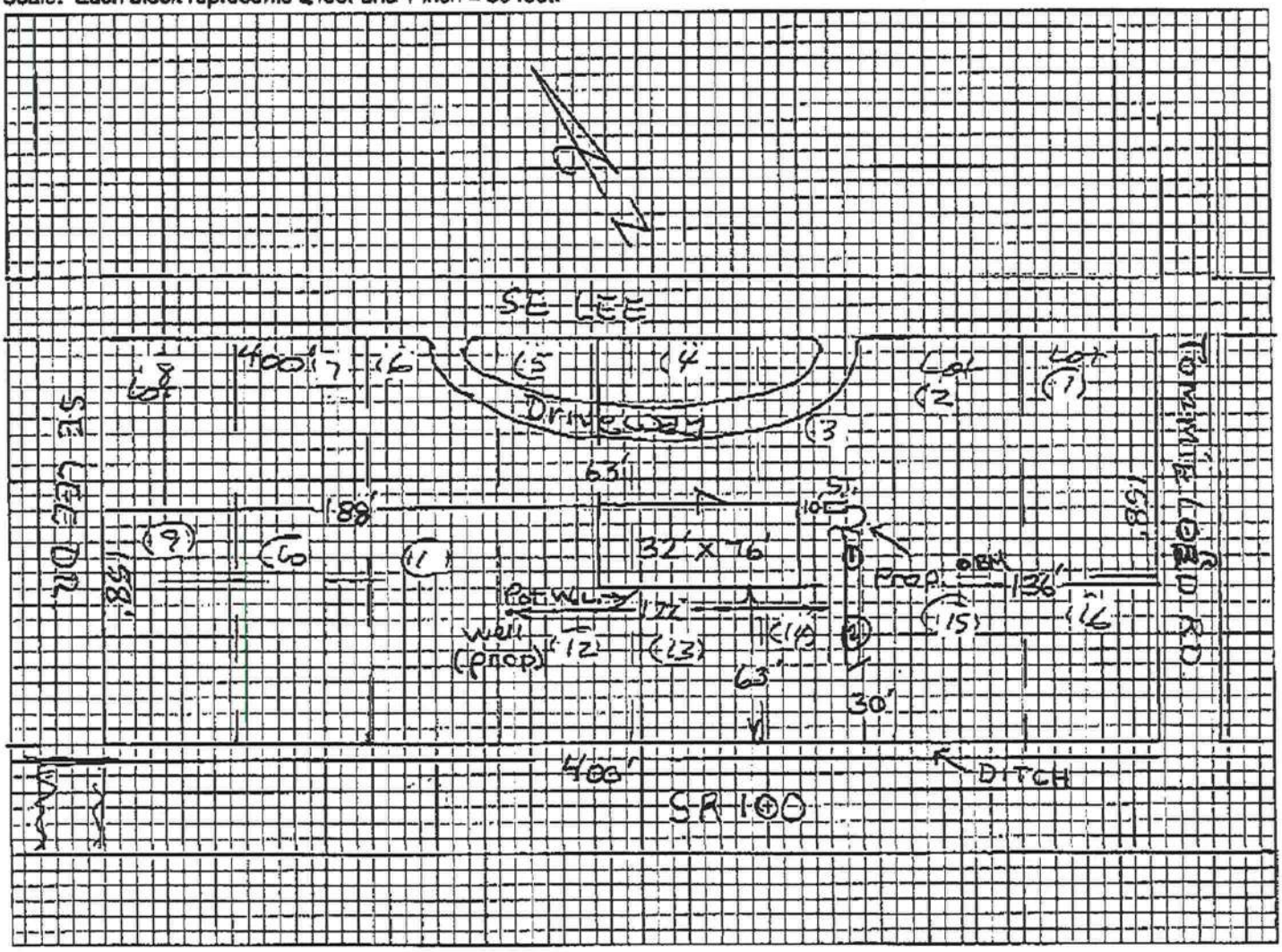
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

APP# 1005-~~07~~02 Permit Application Number 10-0328

Bryan Cason

PART II - SITE PLAN

Scale: Each block represents 6 feet and 1 inch = 50 feet. (60')



Notes: All new systems

Site Plan submitted by: [signature] 5-3-10
Signature

Agent
Title

Plan Approved X Not Approved ____ Date 5/19/10

By [signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/98 (Replaces HRS-H-Form 4015 which may be used)
(Stock Number: 5744-002-4015-6)

CERTIFICATE OF

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 27-4S-18-10450-000 **Building permit No.** 000028585

Permit Holder ERNEST JOHNSON

Owner of Building BRYAN CASON

Location: 226 SE LEE DRIVE, LULU, FL

Date: 06/10/2010

Harry Dicks

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

Atn: Weggie

Columbia County Building Department
Culvert Waiver

Culvert Waiver No. 000001817

DATE: 05/20/2010 BUILDING PERMIT NO. 28585

APPLICANT ROBERT MINNELLA PHONE 352 472-6010

ADDRESS 25743 SW 22ND PLACE NEWBERRY FL 32669

OWNER BRYAN CASON PHONE 365-1016

ADDRESS 226 SE LEE DRIVE LULU FL 32061

CONTRACTOR ERNEST JOHNSON PHONE 352 494-8099

LOCATION OF PROPERTY 90E, TR SR 100, TL LEE DRIVE, TO NEXT DRIVE, PROPERTY ON RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT TOWN OF LULU 5

PARCEL ID # 27-4S-18-10450-000

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: X Robert Minnella

A SEPARATE CHECK IS REQUIRED
MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE CULVERT WAIVER IS:

✓ APPROVED _____ NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: _____

SIGNED: Jan. Mccoy Jr. DATE: 1 June 2010

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

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

COLUMBIA COUNTY GATEWAY TO FLORIDA