

DATE 09/17/2010

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028867

APPLICANT MYRON K. JACOBS PHONE 386.984.0759
ADDRESS 184 SE HANOVER PL., #103 LAKE CITY FL 32025
OWNER MYRON K. JACOBS PHONE 386.984.0759
ADDRESS 220 SE BEAR RUN STREET LAKE CITY FL 32025
CONTRACTOR RONNIE NORRIS PHONE 386.623.7716
LOCATION OF PROPERTY E. BAYA TO SR. 100, TR TO POUNDS HAMMOCK, TL TO BEAR RUN, TR
AND IT'S TH 1ST. PARCEL ON L. (CLEARED LOT FAR TO R)
TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 12-4S-17-08332-066 SUBDIVISION PRICE CREEK ACRES UNRC.
LOT 6 BLOCK PHASE UNIT 3 TOTAL ACRES 1.00

000001849 IH1025145
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
WAIVER 10-0419 BLK TC Y
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD. PROPOSED # FROM PA OFFICE. PRE/MH VERBAL OK BY
G. PARNELL.

Check # or Cash CASH REC'D.

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 \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 6.42 WASTE FEE \$ 16.75
FLOOD DEVELOPMENT FEES \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 348.17
INSPECTORS OFFICE CLERKS OFFICE

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

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

Prepared by & Return to:
Matthew D. Rocco
Sierra Title, LLC
419 SW SR 247, Suite 109
Lake City, Florida 32025

File Number: 10-0552

Inst:201012014322 Date:9/3/2010 Time:4:12 PM
Doc Stamp-Deed:108.50
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B:1200 P:2280

General Warranty Deed

Made this August 31, 2010 A.D. By **Sherry Rawson and Rose Teetsell**, whose post office address is: 11035 Old Dixie Highway, St. Augustine, FL 32095, hereinafter called the grantor, to **Myron K. Jacobs**, whose post office address is: 184 SE Hanover Place, #103, Lake City, FL 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)

Witneseth, 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:

See Attached Schedule "A"

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: **12-4S-17-08332-064**

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, 2009.

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:



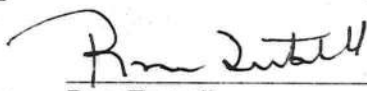
Witness Printed Name _____



Sherry Rawson

(Seal)

Address: 11035 Old Dixie Highway, St. Augustine, FL 32095



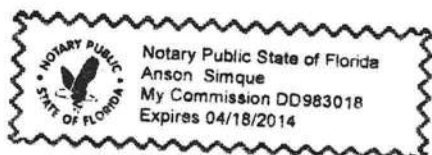
Rose Teetsell

(Seal)

Address: 11035 Old Dixie Highway, St. Augustine, FL 32095

State of Florida
County of Columbia

The foregoing instrument was acknowledged before me this 31st day of August, 2010, by Sherry Rawson and Rose Teetsell, who is/are personally known to me or who has produced FL DL as identification.




Notary Public
Print Name: **Anson Simque**

My Commission Expires: _____

Prepared by & Return to:
Matthew D. Rocco
Sierra Title, LLC
419 SW SR 247, Suite 109
Lake City, Florida 32025

File Number: 10-0552

Schedule "A"

Lot 6, Unit 3, Price Creek Acres, an unrecorded subdivision, more particularly described as follows:

Commence at the NW corner of the NE 1/4 of the SW 1/4 and run S 01°39'42" E, along the West line of said NE 1/4 of SW 1/4 a distance of 311.78 feet to the South right of way line of SE Bear Run Street; thence N 87°58'25" E, 1334.86 feet to the Point of Beginning; said Point being on the South right of way line of a 50.00 foot road; thence continue N 87°58'25" E, still along said South right of way line a distance of 210.00 feet; thence S 01°39'42" E, a distance of 210.00 feet; thence S 87°58'25" W, a distance of 210.00 feet; thence N 01°39'42" W, a distance of 210.00 feet to the Point of Beginning, situated, lying and being in Section 12, Township 4 South, Range 17 East, Columbia County, Florida.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 1-10-08)

Zoning Official BLK 20-08-10

Building Official LC 8-19-10

AP# 1008-28

Date Received 8/17

By JW

Permit # 28867/1849

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 1' above Rd River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-0919 ☒ 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 0

(VERBAL)

IC ☒ PD ☒ Faxed 8-16-10 LHA

☒ W.C. Certificate expired 7.24.10 - see update

AKA:

UNIT 3

Proposed

Property ID # 12-45-17-08332-1

Subdivision

Pace Creek Acres Lot 6 U-3

▪ New Mobile Home _____ Used Mobile Home ☒ MH Size 14 x 70 Year 1995

▪ Applicant Myron K. Jacobs Phone # 386-984-0759

▪ Address 189 SE HANOVER PL #103, L.C. FL 32025

▪ Name of Property Owner Myron Jacobs Phone# 386-984-0759

▪ 911 Address 220 SE BEAR RUN STREET, L.C. FL 32025

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home Sherri Harden Phone # 386-365-7327

Address 184 SE HANOVER PL #103, L.C. FL 32025

▪ Relationship to Property Owner Fiancee

▪ Current Number of Dwellings on Property 0

▪ Lot Size 210' x 210' Total Acreage 1 acre

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home No

▪ Driving Directions to the Property From Baya take Hwy 100 East to
Powder Hammock Rd. Follow Rd @ 1 mile to Bear Run St. (R).
Parcel is on left. Lot #6. Farthest Vacant area to the right.

▪ Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716

▪ Installers Address 1004 S.W. Charles Terrace Lake City Florida 32024

▪ License Number TH/1025145/1 Installation Decal # 1389

JW Spoke w Myron 8.20.10

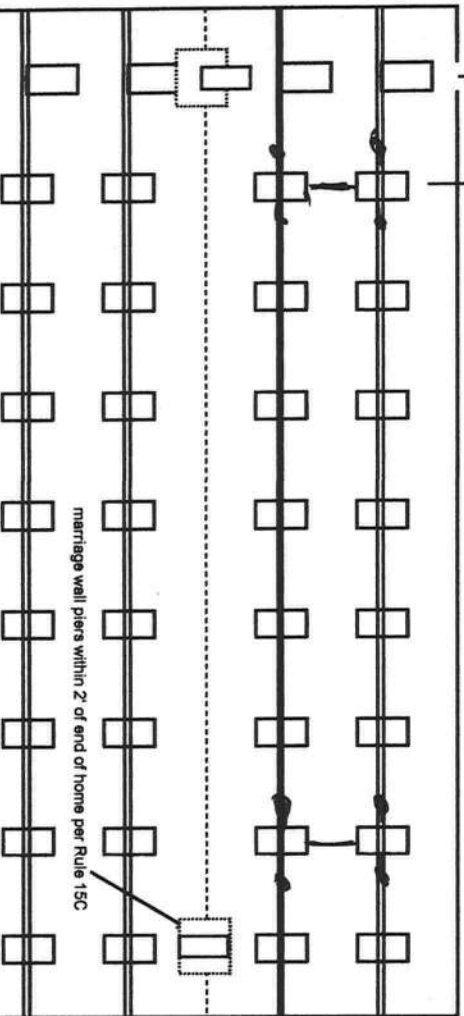
PERMIT WORKSHEET

Installer Kenzie Norris License # IT10251451
 Manufacturer RADCO Length x Width 14X20
 Name of Owner of this Mobile Home Retard
 Phone 386.384.0759
 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 KV



New Home ☐ Used Home ☒ Year _____
 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 # 2378
 Triple/Quad ☐ Serial # 67AFLE75AC155SUC

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17X25
 Perimeter pier pad size 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.

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

Opening Pier pad size
SW SW
SW SW

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer _____
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer _____

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 1/2 x 25 1/2	441
24 x 24	576
26 x 26	676

ANCHORS

FRAME TIES

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

OTHER TIES

Number
 Sidewall _____
 Longitudinal _____
 Marriage wall _____
 Shearwall _____

342
 Req.
 425
 provided

POCKET PENETROMETER TEST

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

x 1500 x 1500 x 1500

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 1500 x 1500 x 1500

TORQUE PROBE TEST

The results of the torque probe test is 885 inch pounds or check here if you are declaring 5' anchors without testing 4. 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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

James Paul

Date Tested

8-20-010

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 _____
Water drainage: Natural _____ Swale ☒ Pad ☒ Other _____

Fastening multi wide units

Floor: Type Fastener: _____ Length: SV Spacing: SV
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 SV

Type gasket _____

Installed: _____
Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes SV

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

Installer Signature

Paul Paul

Date

8-20-010

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1008-28

CONTRACTOR

Ronnie Norris

PHONE

386 984-0759

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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

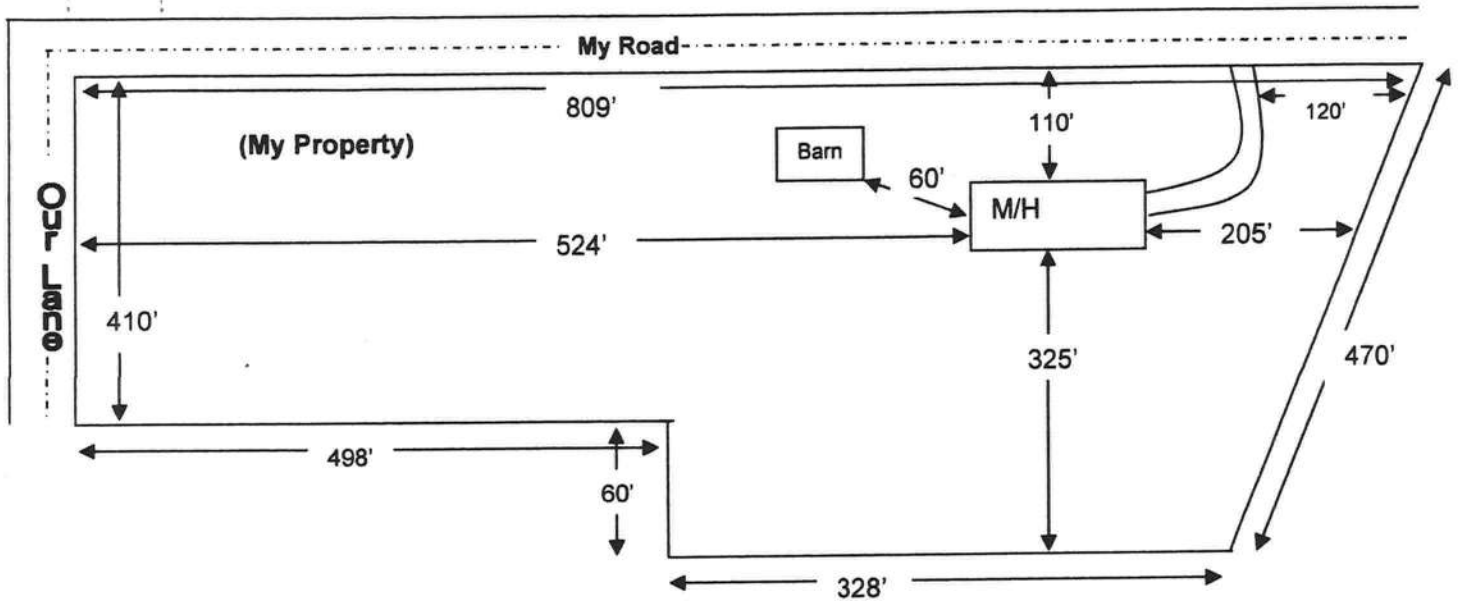
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Myron Jacobs</u>	Signature <u>Myron Jacobs</u>	Phone #: <u>386-984-0759</u>
	License #:		
MECHANICAL/A/C	Print Name <u>Myron Jacobs</u>	Signature <u>Myron Jacobs</u>	Phone #: <u>386-984-0759</u>
	License #:		
PLUMBING/GAS	Print Name <u>Myron Jacobs</u>	Signature <u>Myron Jacobs</u>	Phone #: <u>386-984-0759</u>
	License #:		
ROOFING	Print Name _____	Signature _____	Phone #: _____
	License #:		
SHEET METAL	Print Name _____	Signature _____	Phone #: _____
	License #:		
FIRE SYSTEM/SPRINKLER	Print Name _____	Signature _____	Phone #: _____
	License #:		
SOLAR	Print Name _____	Signature _____	Phone #: _____
	License #:		

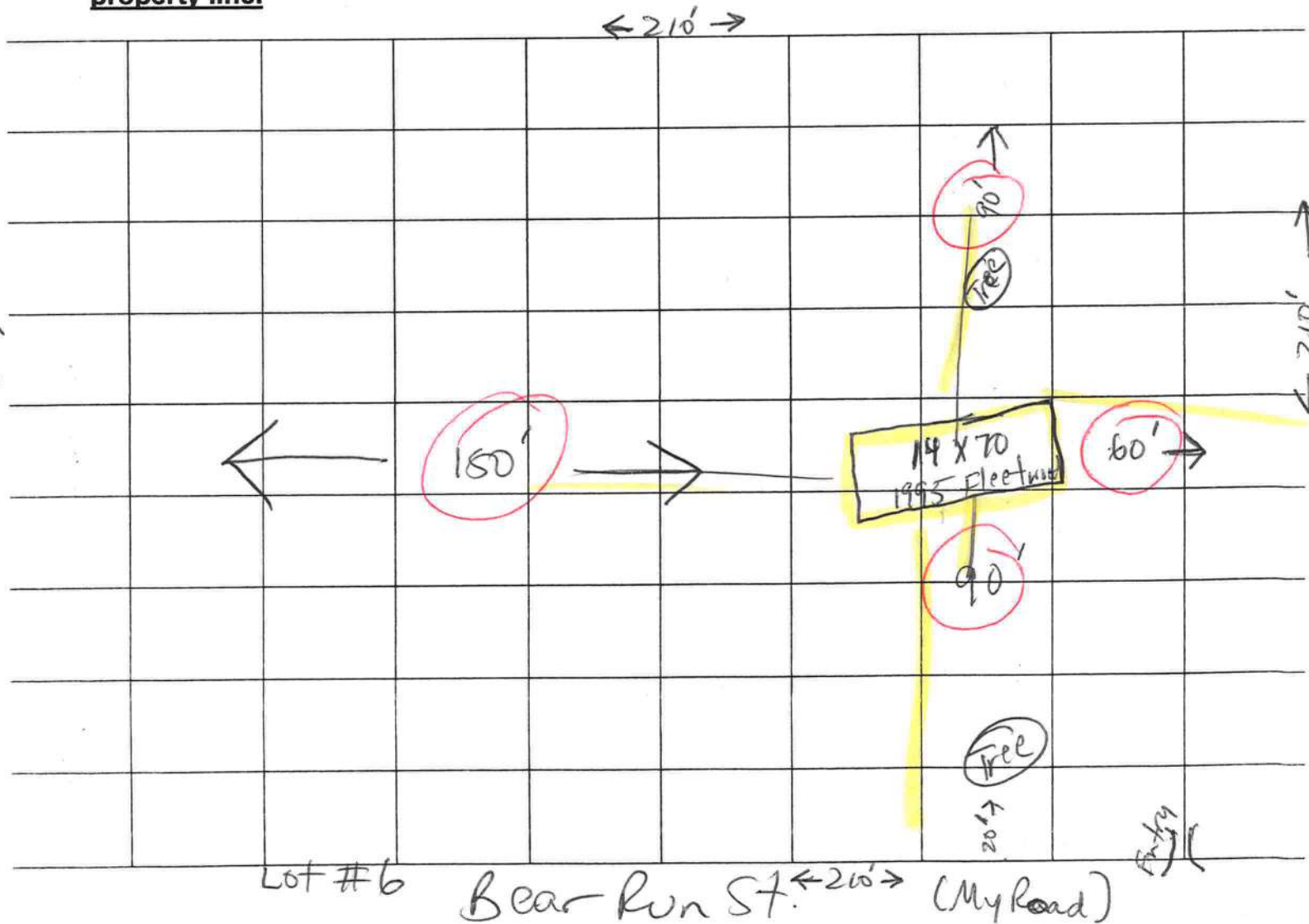
Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE 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.

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.





1008-28

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: run_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: 8/17/2010 DATE ISSUED: 8/19/2010

ENHANCED 9-1-1 ADDRESS:

220 SE BEAR RUN ST
LAKE CITY FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

12-4S-17-08332-064

Remarks:

AKA LOT 6 PRICE CREEK ACRES S/D UNIT 3 UNREC

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.

1802



*Hall's Pump & Well Service, Inc.
904 NW Main Blvd
Lake City, FL. 32055*

Date: 08/19/2010

Notice to All Contractors:

Attn: Myron Jacobs

Please be advised that due to the new building codes we will use a large capacity diaphragm tank on all new wells. This will insure a minimum of one (1) minute draw down or one (1) minute refill. If a smaller diaphragm tank is used then we will install a cycle stop valve which will produce the same results. All wells will have a pump & tank combination that will be sufficient enough for each situation.

If you have any questions please feel free to call our office.

Thank You,

Russell E Davis

Russell Davis



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

1. RONNIE NORRIS give this authority for the job address show below
Installer License Holder Name

only, 220 SE BEAR RUN and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
<u>MYRON JACOBS</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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

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

[Signature]

License Holders Signature (Notarized)

LH102514511

License Number

8-25-010

Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: COLUMBIA

The above license holder, whose name is RONNIE NORRIS, personally appeared before me and is known by me or has produced identification (type of I.D.) 25th day of August, 2010

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM SWANER
 OWNERS NAME Sherrri Harder PHONE 386-985-7327 CELL 386-989-0259
 INSTALLER Ronnie Norris PHONE 752-3571 CELL 6419
 INSTALLERS ADDRESS 1004 SW Chenix 9616419 961

MOBILE HOME INFORMATION

MAKE Fleetwood / Weston YEAR 95 SIZE 14 x 70
 COLOR gray SERIAL No. GAF LR75A6155WE
 WIND ZONE II SMOKE DETECTOR 2

INTERIOR:
 FLOORS OK Bottom Board. Need to be seal. up.
 DOORS OK
 WALLS OK
 CABINETS OK
 ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:
 WALLS / SIDING OK
 WINDOWS OK
 DOORS OK

STATUS:
 APPROVED ✓ NOT APPROVED

NOTES:

INSTALLER OR INSPECTORS PRINTED NAME Ronnie Norris

Installer/Inspector Signature Ronnie Norris License No. TH10291451 Date 9-1-10

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. IF THE INSPECTION IS NOT COMPLETED, NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature

Steve S. Smith

Date 9-7-10



STATE OF FLORIDA
DEPARTMENT OF HEALTH

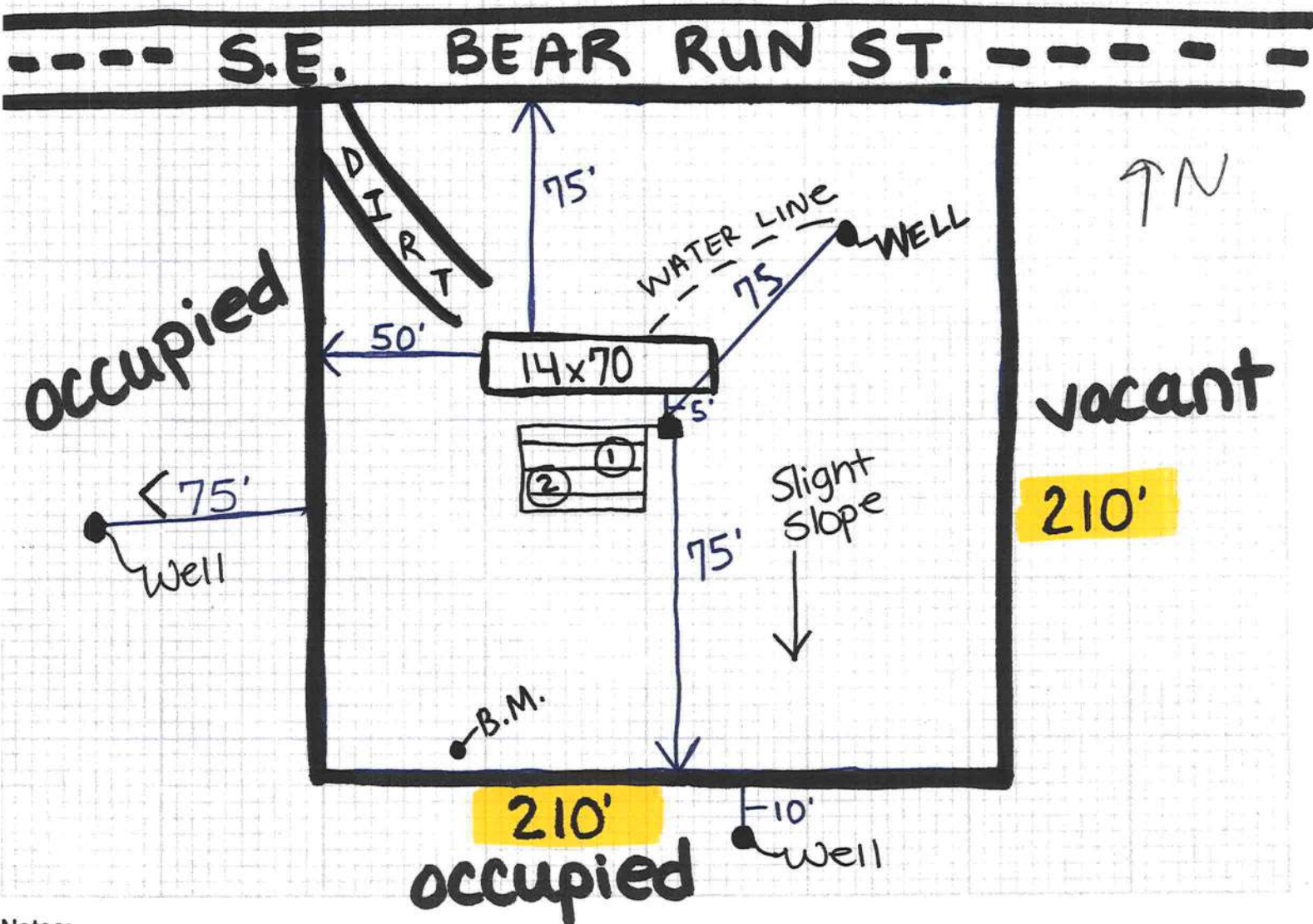
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

18-5419

PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

R C Ford

Signature

Plan Approved

✓

Not Approved

By Salhi Ford EHD Director

Columbia CHD

Agent

Date 9-2-10

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 10-0419
DATE PAID: 9771049
FEE PAID: 913110
RECEIPT #: 3009
147129

APPLICATION FOR:

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

APPLICANT: Sherry Rawson + Rose Teetsell (Myron Jacobs)

AGENT: Ronald Ford - Ford's Septic TELEPHONE: 755-6288

MAILING ADDRESS: 116 NW Lawley Way
Lake City, FL 32055

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.

PROPERTY INFORMATION

LOT: 6 BLOCK: _____ SUBDIVISION: Price Creek Acres PLATTED: Unit: 3
Unsub

PROPERTY ID #: 12-45-17-08332-066 ZONING: Res. I/M OR EQUIVALENT: (Y (N))

PROPERTY SIZE: 1.0 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y (N) DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 220 SE Bear Run St. Lake City, Florida 32025

DIRECTIONS TO PROPERTY: 100 East. (R) on Pounds Hammock.

(R) on Bear Run. House #220 on Left.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sq Ft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>Mobile Home</u>	<u>3</u>	<u>980</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: RC Ford DATE: 9-2-10

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 9-16-10 BY UH IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
OWNERS NAME Sherry Rawson / Rose PHONE 365-7327
Sherry Harden
ADDRESS 220 SE Bear Run Lake City FL 32025
MOBILE HOME PARK Price Creek Acres Lot 6 SUB VISION Price Creek Acres Lot 6
DRIVING DIRECTIONS TO MOBILE HOME East 100, R Pounds Hammock, R
Bear Run, Property on (L), farthest vacant lot to the right

MOBILE HOME INSTALLER Ronnie Norris PHONE 623-7716

MOBILE HOME INFORMATION

MAKE TRADCO YEAR 95 SIZE 14 X 70 COLOR

SERIAL No. BAFLR75A61555WE

WIND ZONE II Must be wind zone II or higher NK WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) P=PASS F=FAILED

☒ SMOKE DETECTOR () OPERATIONAL () MISSING

☒ FLOORS () SOLID ☒ WEAK () HOLES DAMAGED LOCATION

☒ DOORS () OPERABLE () DAMAGED

☒ WALLS () SOLID () STRUCTURALLY UNSOUND

☒ WINDOWS () OPERABLE () INOPERABLE

☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

☒ CEILING () SOLID () HOLES () LEAKS APPARENT

☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

☒ WINDOWS () CRACKED / BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: Repair weak Floor In Utility Room

NOT APPROVED ☐ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS

SIGNATURE John A. Powell ID NUMBER 402 DATE 9-17-10

\$50.00

Date of Payment: 8-17-10

Paid By: Myron Jacobs

Notes: Receipt #

648550

