DATE 04/11/2011 Columbia County B This Permit Must Be Prominently Posted	uilding Permit on Premises During Construction PERMIT 000029304
APPLICANT FRANK MOORE	PHONE 352-542-2584
ADDRESS 418 SW CHARLES TERR	LAKE CITY FL 32024
OWNER FRANK MOORE	PHONE 352-542-2584
ADDRESS 418 SW CHARLES TERR	LAKE CITY FL 32024
CONTRACTOR TERRY THRIFT	PHONE 623-0115
LOCATION OF PROPERTY 90 W, L 247 S, R 242, L CHARL	ES TERR, 3RD DRIVE ON
RIGHT	
TYPE DEVELOPMENT MH, UTILITY ES	STIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AR	EA HEIGHT STORIES
FOUNDATION WALLS	ROOF PITCH FLOOR
LAND USE & ZONING AG-3	MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00	REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 25-4S-15-00392-002 SUBDIVISIO	ON
LOT BLOCK PHASE UNIT	TOTAL ACRES 5.04
IH1025139	Man & Mann
Culvert Permit No. Culvert Waiver Contractor's License Nu	Applicant/Owner/Contractor
EXISTING	N
,	ing checked by Approved for Issuance New Resident
COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD	
RPLACING EXISTING MH, SEE AFFIDAVIT, MADE INTO STORA	
ALDEADY CHADCED EITH EIDE DUT MOT WACTE	Chaols # on Cosh 0413
ALREADY CHARGED FULL FIRE BUT NOT WASTE	Check # or Cash 6415
FOR BUILDING & ZONI	NG DEPARTMENT ONLY (footer/Slab)
Temporary Power Foundation	NG DEPARTMENT ONLY (footer/Slab) Monolithic
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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.

+42: * VEE NOTE OF VENIFICATION FOIL

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	24.04.11
877	For Office Use Only (Revised 1-11) Zoning Official WK 04.04.11 Building Official 16.3-30-11
	AP# 1103-49 Date Received 3/29 By JW Permit # 2930 4
	Flood Zone X Development Permit NA Zoning A - 3 Land Use Plan Map Category A - 3 Comments Replacing Existing MH, see attacked additional
	Comments Replacing L. Sty Mit, See attack assistant
- 1	EMA Map# River In Floodway In Floodway
	Site Plan with Setbacks Shown FH # 11-0 66-E DEH Release DWell letter Existing well
1 - 400	Recorded Deed or Affidavit from land owner Installer Authorization I State Road Access 911 Sheet
	Parent Parcel # □ STUP-MH □ F W Comp. letter ☑-VF Form
	PACT FEES: EMS Fire Corr Out County In County
	pad/CodeSchool= TOTAL Impact Fees Suspended March 2009_
20	Signed as for Bac office Theresa- operty ID# -25-45-15-00392-002 Subdivision
Pro	operty ID #25 - 45 -15 - 00392 - 002 Subdivision
	New Mobile Home MH Size State Year 2011
	Applicant FRANK JOANN MORE Phone # 352-542-2584 Address & BOY 254 SUVRINGE, FI 32692 352-356-1212(Call
•	Address & Boy 294 SUVRINGE, F1 32692 352-356-1212(CDE
	Name of Property Owner FRANK and on JOANN MORPHONE 352-352-2584 911 Address 4/8 5W CHARLOS TOT (C. 4/ 37024 352-356-12/2 (Cell
	911 Address 4/8 5W CHARLES TET, C. 41 32024 352-356-1212 (Cel
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progress Energy
(152)	Was a second sec
•	Name of Owner of Mobile Home [RAVH and a John Markone # 352-542-2584] Address 418510 [HARIOS TEST LC 4] 32014 352-356-1212(C
	Relationship to Property Owner SamE
•	Current Number of Dwellings on Property Non E
	Lot Size Total AcreageTotal Acreage
	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) Or Culvert Waiver (Circle one) (Rote Road Sign) (Rote existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home
	Driving Directions to the Property 90 in > 242 5 242 tum Kt april 2
	miles - Charles Tren ten Ut 30 driveway on right
	Name of Licensed Dealer/Installer Terry L. Thr. Ft Phone # 386 - 623 - D115
	Installers Address 448 NW nye Hunter Dr. haxe City Fla 32055
	■ License Number <u>TH-1025139</u> Installation Decal # <u>1762</u>
	47550
	Ju orpole by Mr. Moore 4.4.11
	244600 67 1"

COLUMBIA COUNTY PERMIT WORKSHEET

911 Address where home is being installed. Typical pier spacing Manufacturer These worksheets must be completed and signed by the installer. Submit the originals with the packet. Installer NOTE: I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 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 RARU Jawa Mome lateral longitudinal 15003 Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) かだけ marriage wall piers within 2' of end of hor Installer's initials Length x width License # 1 1- 1025 139 8 per Rule 15C Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer List all marriage wall openings greater than 4 foot and their pier pad sizes below. capacity Longitudinal Stabilizing Device (LSD) bearing Other pier pad sizes (required by the mfg.) Perimeter pier pad size I-beam pier pad size interpolated from Rule 15C-1 pier spacing table. Triple/Quad Single wide Double wide -Home is installed in accordance with Rule 15-C Home installed to the Manufacturer's Installation Manual 19 -1 New Home 1000 pst 2000 ps 000 ps 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 4' 6" Serial # Installation Decal # Wind Zone II Used Home Pier pad size 18 1/2" x 18 1/2" (342) 16"×16" ワカメる5 20" x 20" (400) ニュム Longitudinal Marriage wall Shearwall 4#/ 22" x 22" Wind Zone III within 2' of end of home spaced at 5' 4" oc (484)* POPULAR PAD SIZES œ 7 3/16 x 25 3/16 OTHER TIES 26 x 6 x 22.5 Pad Size FRAME TIES 24" X 24" ANCHORS (576)* 5# page 1 of 2 26" x 26" (676)

source.

Date Tested Installer Name

ALL TESTS MUST BE PERFORMED BY A LICENSED INS

Note:

A state approved lateral arm system is being used and 4 is anchors are allowed at the sidewall locations. I understar

reading is 275 or less and where the mobile home manufarequires anchors with 4000 lb holding capacity. anchors are required at all centerline tie points where the

Installer's initials

The results of the torque probe test is 285 inch poun here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot anchors.

TORQUE PROBE TEST

× 1500

× 1500

Using 500 lb. increments, take the lowest reading and round down to that increment.

Take the reading at the depth of the footer. Test the perimeter of the home at 6 locations. POCKET PENETROMETER TESTING METHO

Connect electrical conductors between multi-wide units, but not to the

Electrical

This includes the bonding wire between mult-wide units. Pg.

The packet penetrometer tests are rounded down to 1500 or check here to declare 1000 ib. soil ______ without testing.

without testing.

POCKET PENETROMETER TEST

COLUMBIA COUNTY PERMIT WORKSHEET

page

2 of 2

Debris and organic material removed Other Other
Fastening multi wide units
Floor: Type Fastener: LASS Length: 64 Spacing: 24 oc.
Spacing: 37
ror used nomes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv.
יייייי פייייי אייייי איייייי איייייייייי
I understand a properly installed gasket is a requirement of all new and used
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 to am lapeInstalled: Pg. Between Floors
Weatherproofing
The bottomboard 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
Miscellaneous
Skirting to be installed. Yes No Dryer vent installed outside erskirting. Yes NI/A Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:

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

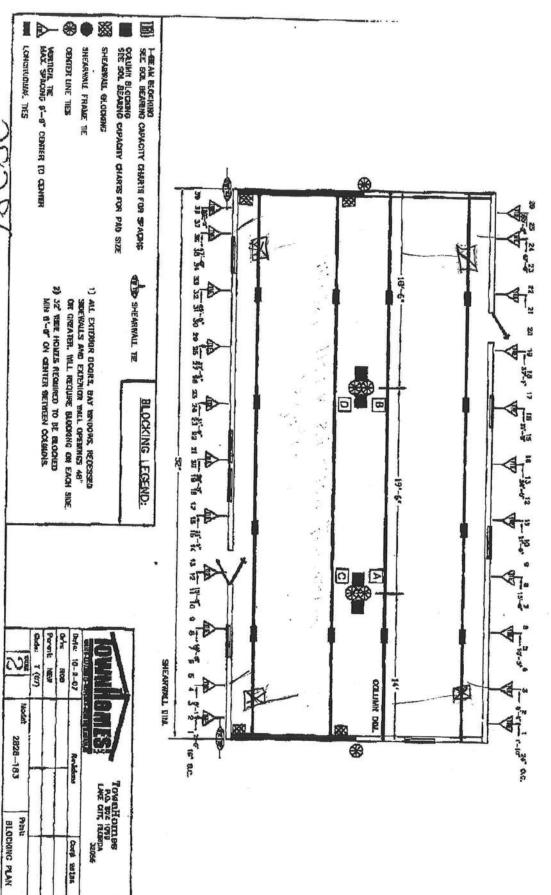
Installer Signature

Date 3

Installer verifles all information given with this permit worksheet is accurate and true based on the

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

D\$686



- OMNHOWES LLC

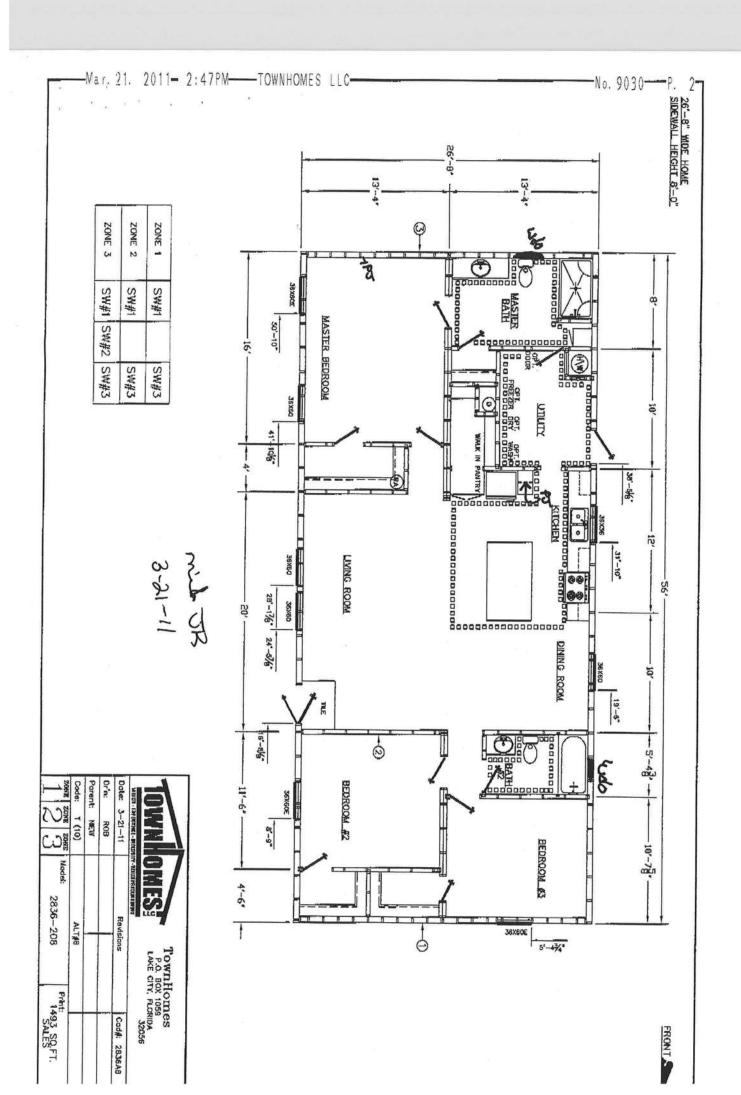
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SITE PHAN BE DRIVE WAY

CHARLES TER.



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, Terra Lioense Holder Na	heif	for the job address show below
only,		
	Job Address	, and I do certify that
the below referenced person(s)	listed on this form is/are under m	ov direct cure - del-
and is/are authorized to purcha	se permits, call for inspections an	nd sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Frank MOORE	Thanh Manne	Agent Officer Property Owner
	/ /	Agent Officer Property Owner
		AgentOfficer Property Owner
Local Ordinances. I understand that the State Licer holder for violations committed by	I am responsible for all permits presponsible for compliance with a sing Board has the power and act by him/her or by his/her authorized sponsibility for compliance granter	uthority to discipline a license
License Holders Signature (Nota NOTARY INFORMATION: STATE OF: Florida	J	1025/39 3-25-// Imber Date
The above license holder, whose personally appeared before me a type of I.D.)		ed identification

141	LU	TT	UT.	JON

MOBILE	HOME	INSTALLATION	SUBCONT	RACTOR	VERIEICATIO	N CODS

APPLICATION NUMBER _	1103-48	CONTRACTOR_	Jerry	Shrift	PHONE 623-015
		CONTRACTOR_	VERRY	thrift	PHONE (23-015

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 <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 stap work orders and/or fines.

ELECTRICAL	Print Name FRANK MODRE License #:	Signature 1504 Moore Phone #: 352-542-2584
MECHANICAL/ A/C <u>SC8</u>	Print Name David Hall License #: Caco 57424	Signature
PLUMBING/ GAS	Print Name FRANK MOORE License #:	Phone #: 755 - 9792 Signature Furth 10 June Phone #: 352-542-2584

		Cell# 35.	2-356-12/2
Specialty License MASON	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
CONCRETE FINISHER			
CONTENE 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.

Inst. Number: 201112004401 Book: 1211 Page: 2359 Date: 3/25/2011 Time: 9:41:09 AM Page 1 of 2

QUIT CLAIR	Recurs to: (conclose self-addressed stumped conclose) Recurs to: (conclose self-addressed stumped conclose) Recurs to: (conclose self-addressed stumped conclose)	OLUMBIA e and foregoing
Name:	is a true copy of the original filed	in this office.
Address:	P. DeWITT CASON, CLERK OF CO	WRTS)
	By Sornic N	Low
	n Prepared by: Deputy Clerk	
Name:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5,2011
Address	Date: // /// /	3,
Property Appra	isers Parcel Identification	
Folio Numberts	S. W.	
Granteejs] 5.8.	Inst 201112004401 Date 3/25/2011 Time 9:41 AM	
	Opc Stamp-Deed 0 70 C.P.DeWitt Cason, Columbia County Page 1 of 2 8 1211 P 2359	
	Z'	
	SPACE ABOVE THIS LINE FOR PROCESSING DATA SPACE ABOVE THIS LINE FOR RECORDING DATA	
	This Quit Claim Beed, Executed the 25TH day of MARCH 2011 by WILLIAM K. LEE OR BARBARA J. LEE	
	first party, to FRANK R. MOORE OR JOANN MOORE	
	whose post office address is P.O. BOX 298 SINANNER, W.A. 32692	
	second party.	
	(Wherever used herein the terms "first parry" and "second party" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals and the successors and assigns of corporations, wherever the content so admits or requires.)	
		5
	intresseth, That the first party, for and in consideration of the sum of \$10.00 AND OTHER CONSIDERATION	
	in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release, and quit claim unto the second party forever, all the right, title, interest, claim and demand which the said first	
	party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of COLUMBIA State of FLORIDA to-wit:	
	State of FLORIDA , to-wit:	
	SEE EXHIBIT A ATTACHED	
	To Habe and to Hold The same together with all and singular the appurtenances thereunto belonging	
	or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said	
5	first party, either in law or equity to the only proper use, benefit and behoof of the said second party jorever.	
	In Mitness Ahereof, the said first party has signed and sealed these presents the day and year first	
	above written.	
	Signed, sealed and delivered in the presence of:	
	Jody M. GOOLE WILLIAM K LCC	
	Carrande a Nous 398 3w Charles ter Lake City F1	
	Witness Signature (as to first Grantor) CGSCGCXCVQ L. NOVVIS Post Office Address 7 7202 4	
	Printed Name	
9	Radium. Eddle Barbara (Ree	
	Wildes Signature (as to Co-Crantor, if any) Co-Crantor Signature, (if any) Co-Crantor Signature, (if any) Co-Crantor Signature, (if any) Co-Crantor Signature, (if any)	
	Printed Name	
	Whose Signature (as to Co-Orangor, If any) 748 SW Charles On Hade Col Of Post Office Address Post Office Address	
	* <u>Cassanda</u> L. Novis	
	Printed Name	
	STATE OF Florida)	
	COUNTY OF Columbia) I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared	
	a culture R lee will British & lee -	
	known to me to be the person	
	executed the same, and an oath was not taken. (Check one:) Or Said person(s) is/are personally known to me. O Said person(s) provided the following type of identification:	
	6	
	NOTARY RUBBER STAMP SEAL Witness my hand and official seal in the County and State last aforesaid this 25 15 day of	
	Dele	
02 95	OFETHA N. MURTINY MY COMMISSION & EC03547 EXPRESS, but a con-	
95	EXPIRES July 6, 2014 Bonded That Natury Public Underwriters Printed Nature	100

EXHIBIT A

DESCRIPTION:

COMMENCE at the Southeast corner of the Southeast 1/4 of the Northeast 1/4 of Section 25, Township 4 South, Range 15 East, Columbia County, Florida and run North 01"15'40" East along the East line of said Southeast 1/4 of the Northeast 1/4 of Section 25 a distance of 667.04 feet; thence South 89'52'05" West a distance of 50.00 feet to a point on the Westerly maintained Right-of-Way line of SW Charles Terrace (formerly known as Parker Road) and the POINT OF BEGINNING; thence continue South 89'52'05" West a distance of 655.10 feet; thence North 00°27'59" West a distance of 332.29 feet; thence North 89'51'30" East a distance of 665.10 feet to a point on the Westerly maintained Right-of-Way line of SW Charles Terrace (formerly known as Parker Road); thence South 01"15'26" West along said Westerly maintained Right-of-Way line of SW Charles Terrace (formerly known as Parker Road) a distance of 332.49 feet to the POINT OF BEGINNING. Containing 5.04 acres, more or less.

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:

3/25/2011

DATE ISSUED:

3/25/2011

ENHANCED 9-1-1 ADDRESS:

418

SW CHARLES

TER

LAKE CITY

FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

25-48-15-00392-001

Remarks:

READDRESS FOR NEW LOCATION BASED ON CURRENT ACCESS

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.



STATE OF FLORIDA

DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT, Permit Application Number -- PART II - SITE PLAN-K Scale: Each block represents 5 feet and 1 inch = 50 feet. * Site Plan submitted by: Signature Plan Approved X Not Approved _____

CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

County Health Departm





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

PERMIT NO.	999807
DATE PAID:	312914
FEE PAID:	125.00
RECEIPT #:	158977

APPLICAT	TION FOR CONSTRUCTION	ON PERMIT	
APPLICATION FOR: [] New System [] Repair [Existing System Abandonment	[] Holding Tan	nk [] Innovative
APPLICANT: KANK	MOORE	con	betwe gaing: 1 352-3
A CENTER.			TELEPHONE: 15 2
MAILING ADDRESS:	Box 298 5	UWANNE, 1	E1 32692
BY A PERSON LICENSED PU APPLICANT'S RESPONSIBII PLATTED (MM/DD/YY) IF F	RSUANT TO 489.105(3)(m) LITY TO PROVIDE DOCUMENT EQUESTING CONSIDERATION	OR 489.552, FLORING OR THE DATE ! N OF STATUTORY GRANN	THE LOT WAS CREATED OR
PROPERTY INFORMATION			
LOT: BLOCK:	SUBDIVISION:		PLATTED:
PROPERTY ID #: R25-	15-15-00372-00/2	CONING: I/N	OR EQUIVALENT: [Y / (N)]
PROPERTY SIZE: 5.03	CRES WATER SUPPLY: 🎾	4 PRIVATE PUBLIC	[]<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PROPERTY ADDRESS: 4/			STANCE TO SEWER: _50_FT
DIRECTIONS TO PROPERTY:	9000 9 242-to	un stright	prox 2 min Charles
BUILDING INFORMATION	[X RESIDENTIAL	L [] COMME	RCIAL
Unit Type of No Establishment		ling Commercial/In Sqft Table 1, Chap	stitutional System Design ter 64E-6, FAC
1 Mobile Home	3 149	13 H2 ORIG	GINAL ATTACHED
3			
4			
[] Floor/Equipment D	Orains [] Other (Sp	pecify)	DATE: 3/28/11
DH 4015 08/09 (Obsolet	res previous editions w	hich may not be use	

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

Page 1 of 4

RESIDENTIAL DWELLING AGREEMENT

STATE OF FLORIDA COUNTY OF COLUMBIA

Notary Public

BEFORE ME the undersigned Notary Public personally appeared.

The undersigned, Frank R. Moore and Joann Moore, (herein "Owners"), whose physical 911 address on property is 418 SW Charles Terrace, Lake City, FL 32024, hereby understands by executing this Agreement, that within 30 days after the issuance of a Certificate of Occupancy for a new residential dwelling (mobile home), the existing residential dwelling (mobile home) shall have all cooking facilities removed and be disconnected from sanitary sewer (septic tank) in order to comply with density requirements of the Columbia County Comprehensive Plan and Land Development Regulations (LDR's) on Owner's property, particularly described by reference with Columbia County Property Appraiser Tax Parcel No. 25-4S-15-00392-002.

Owners have made application to COLUMBIA COUNTY, FLORIDA for a permit which as by definition in the Columbia County LDR's is a residential dwelling to replace the existing residential dwelling on the above reference property. Owners are aware and have been advised that any other uses shall comply with the LDR's and shall obtain any additional permitting or approval as required by the LDR's for such uses. This Agreement is made and given by Affiants with full knowledge and accept the terms of the Agreement and agree to comply with it.

Owner and any future transferee of the property will at all times comply with this agreement and the Columbia County Comprehensive Plan and Land Development Regulations regarding any development upon the property. Joann Moore Frank R. Moore Typed or Printed Name Typed or Printed Name Subscribed and sworn to (or affirmed) before me this ____// day of _______, 20__//, by frank Morre (Owner) who is personally known to me or has produced FLOL as identification LAURIE HODSON MY COMMISSION # DD 805657 EXPIRES: July 14, 2012 Notary Public (Owner) who is personally known to me or has produced Joann Morre as identification.

> LAURIE HODSON MY COMMISSION # DD 805657

EXPIRES: July 14, 2012 ded Thru Notary Public Underwr



MH OCCUPANC

COLUMBIA COUNTY, FLORIDA

epartment of Building and Zoning nspection

and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code. This Certificate of Occupancy is issued to the below named permit holder for the building

Building permit No. 000029304

Parcel Number 25-4S-15-00392-002

Permit Holder TERRY THRIFT

Owner of Building FRANK MOORE

Location: 418 SW CHARLES TERR, LAKE CITY, FL 32024

Date: 05/10/2011

my Diche 4 MM

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)