District No. 1 - Ronald Williams

District No. 2 - Rocky Ford

District No. 3 - Robby Hollingsworth

District No. 4 - Toby Witt



### **Address Assignment and Maintenance Document**

To maintain the county wide 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 addressing 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 Services 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/Time Issued:

3/1/2021 6:40:55 PM

Address:

563 SW KENTUCKY St

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

01438-056

REMARKS: Address for proposed structure on parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125 Email: gis@columbiacountyfla.com

### STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number\_

| 1/6/   | PART II - SITEPLAN - FLRW | ent                      |
|--|---------------------------|--------------------------|
|  | (m) 100/                  |                          |
|  | 5 /7-36_                  |                          |
|  | Noot                      |                          |
|  | RPSB2 Pouse               |                          |
|  | 120 - 35' - 35' W R 11    |                          |
|  | 563 SW KRATUCK ST         |                          |
| Notes:   |                           |                          |
| 1720, C817 (1817) (1817 | N. A. H. L.               |                          |
| Site Plan submitted by:<br>Plan Approved   | Not Approved_             | Date                     |
| Rv   | tane cabbenane            | County Health Department |

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoleles previous editions which may not be used) incorporated: 64E-6.001, FAC (Slock Number: 5744-002-4015-6)

2021 Working Values updated: 4/8/2021

## Columbia County Property Appraiser

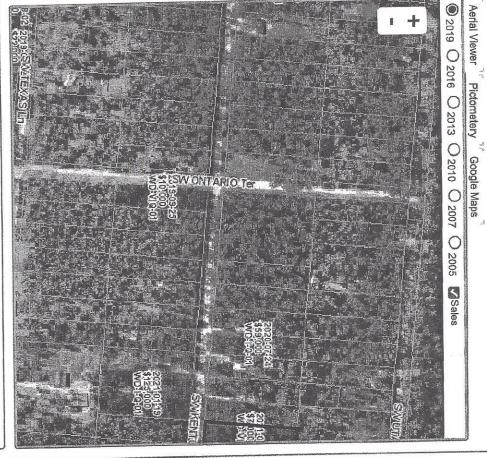
Jeff Hampton

Parcel: (<) 00-00-00-01438-056 (4247) (>>)

| Owner & Property Info   | perty Info  | Addition of Agreement Control of Addition | Result: 1 of 3  |
|---|---|---|---|
| annum de contra | HEWLETT CRYSTAL   |   |   |
| Owner   | 229 SW BRIGHTON CT  |   |   |
|   | FORT WHITE, FL 32038  |   |   |
| Site  | 563 KENTUCKY ST, FORT WHITE   |   | A deposit political de l'étre entre l'étre de l'étr |
| Description*  | LOT 56, BLOCK 4, UNIT 23, THREE RIVERS ESTATES. 715-891, 812-782, 813-19, WD 1188-319, WD 1430-2131, WD 1431-398, | VERS ESTATES<br>WD 1431-398,  | . 715-891, 812-782,   |
| Area  | 0.918 AC  |   | 24-6S-15  |
| Use Code**  | Use Code** VACANT (0000)  | Tax District 3  | 3   |
| *The Description  | *The Description above is not to be used as the Legal Description for this parcel in any legal transaction.       | n for this parcel in a  | ny legal transaction.   |

The <u>Description above is intributed and is not maintained</u> by the Property Appraiser's \*\*The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

| Total<br>Taxable   | Exempt | Assessed | SOH Cap [?] | Appraised | Class | Just    | XFOB | Building | Ag Land | Mkt Land | 2020                  | Property & A                 |
|--|--------|----------|-------------|-----------|-------|---------|------|----------|---------|----------|-----------------------|------------------------------|
| county:\$6,000 city:\$6,000 Total other:\$6,000 school:\$6,000 Taxable | \$0    | \$6,000  | \$0         | \$6,000   | \$0   | \$6,000 | \$0  | \$0      | \$0     | \$6,000  | 2020 Certified Values | Property & Assessment Values |
| Total<br>Taxable   | Exempt | Assessed | SOH Cap [?] | Appraised | Class | Just    | XFOB | Building | Ag Land | Mkt Land | 2021                  |                              |
| county:\$6,000 city:\$0<br>other:\$0 school:\$6,000                    | \$0    | \$6,000  | \$0         | \$6,000   | \$0   | \$6,000 | 80   | \$0      | \$0     | \$6,000  | 2021 Working Values   |                              |



| Blda Sketch  | ▼ Building Characteristics |  | 11/2/1980 | 1/20/2010  | 1/25/2010 | 1.2021/1./2 |           | 2/19/2021       | The second secon | Sale Date |                       | (2100                |
|--------------|----------------------------|--|-----------|--|-----------|-------------|-----------|-----------------|--|-----------|-----------------------|----------------------|
| Description* |                            |  | \$3,695   |  | \$100     | \$1,000     | 67 000    | <del>\$</del> C | 3  | Tica      | 200                   |                      |
|              | -                          |  | 0715/0891 | The state of the s | 1188/0310 |             | 1431/0398 | TOOK            | 1430/2131  |           | Book/Page             |                      |
| Year Bit     |                            |  | AG        |  | WD.       |             | ₩D        |                 | WD   |           | Deed                  |                      |
| Base SF      |                            | THE PARTY OF THE P | <         |  | <         |             | <         |                 | <  |           | <u> </u>              |                      |
| Actual ST    | Action on                  |  |           |  |           |             | E         |                 | Ċ  |           | Qualification (Codes) | O TELEVISION (O Land |
| Did Adiac    | Rida Value                 |  |           |  |           |             |           | 0.1             | -  | 11        | LCOde                 | 0000                 |

Deing installed

Manufacturer

NOBIL.TY

roll

WHITE-

NOTE

Typical pier spacking

NONGE USERN

where the sidewall lies exceed 5 ft 4 in.

Address of home

installer

ROY M. HARVEY

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| OMETER Its  |  |

or check here to decide 1000 lb. soul The pocket penetrometer tests are rounded down to Without Testing DST

X 1700

X 1700

X 1700

## POCKET PENETROMETER TESTING METHOD

- Test the perimeter of the home at 6 lecations
- Take the reading at the depth of the footer
- Using 500 ib increments, take the lowest reading and round down to that increment

300

×

### ORQUE PROBE TEST

here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot amonors The results of the torque probe test is each pounds or check A lest

Note: A state approved lateral arm system is being used and 4 ft anchors are allowed at the sidewall knowns in understand 5 ft reading is 275 or less and where the mobile home manufacturer may requires anchors with All Molding capacity. anchors are required at all centerline be points where the torque test trataller's metals

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER ROY M. HARVEY

Installer Name

Date Tested

6-15-31

(Wactrical

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

in the 2

S

paldaule

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pq. 44

Site Preparation

SWAG

Debrits and organic material removed

Water dramage: Natural

SHE

Fastering multi wide units

Type Fastener Type Fastener Type Fasterier: NAILS 500

ROOT

がる器の HOOP!

Length: Length Lengin:

lsi 8

Spacing FULL ROOF CAP Spacing Spacing 6 CVC

routing naits at 2" on center on both sides of the semestine. will be centered over the peak of the roof and fastened with galv For used homes a min. 30 gauge, 8" wide galvanized metal strip

Chips is the company of the second party of the second

a result of a poorly installed or no dasked being installed. homes and that condensation mold, meldew and buckled manage walls are of labe will not serve as a gasket understand a properly installed gasket is a requirement of all new and used lestaller's cuttais and a strip

PO FACTURY INSTALLED Type pasker FOAM

Between Walls Yes Between Fictors this latter

Bottom of ridgebears Yes. 103

Weather proofers.

Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or laped. Yes Freplace channey installed so as not to allow intrusion of rain water. Yes 50.58

Miscellancous

Range downflow vent installed outside of skirling Skirting to be installed. Yes Electrical crossovers protected. Yes Dryer yers installed outside of skirting. Yes CHAN. Dram lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes:

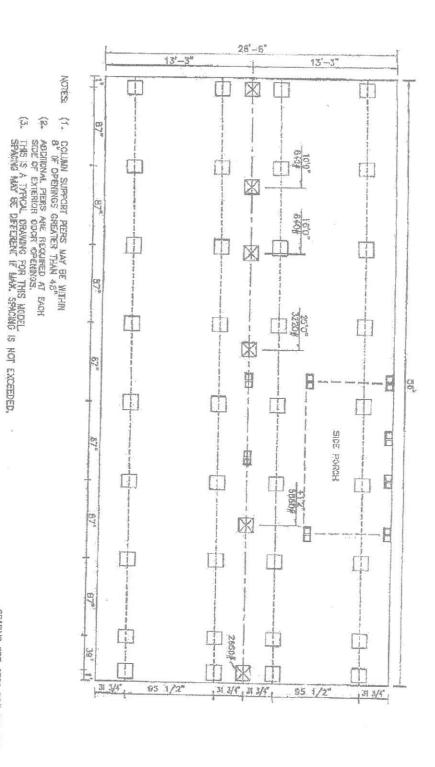
200

installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

Installer Signature

Date 6-15-2

4' ANCHORS @ 5'4" OR LESS MARRIAGE WALL... A PAD......29"X31" 1500 LB SOIL......28'X 56' VECTOR STABILIZING SYSTEM BEAM PADS......17"X 25" 7.....7°0/c



COLUMN SUPPORT PAERS

SPACING FOR 1500 PSF SOIL WIFE 17 1/2" X 25 1/2" BASE PAD WAXINUM SPACING FOR THE 1-BLAM PIERS" IS 87"

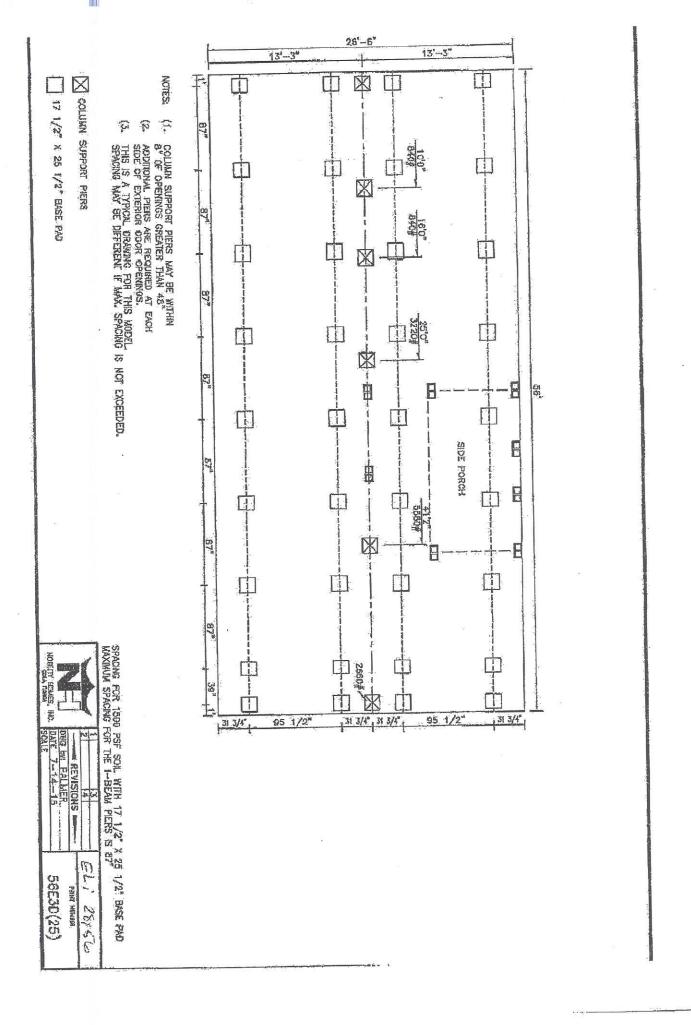
REVISIONS

EL 28/50

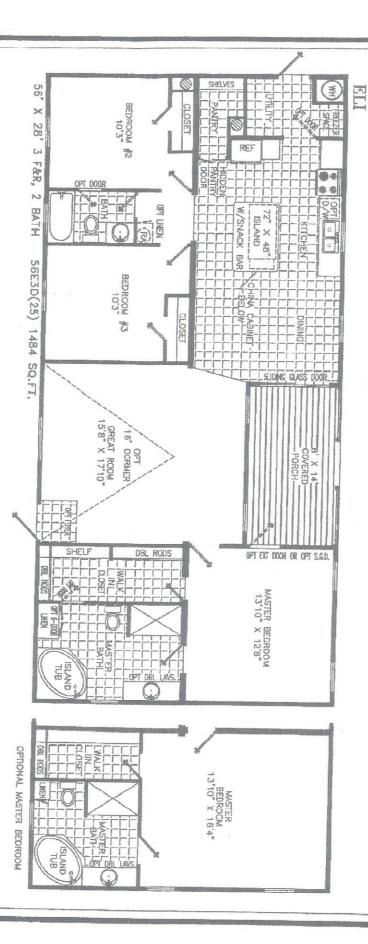
58E3D(25) PART WILLIAM 10

Pi

17 1/2" X 25 1/2" BASE PAD



# Prestige Home Centers





Homes Designed, Built & Serviced By NOBILITY HOMES

MANUFACTURED IN ACCORDANCE WITH STANDARDS DEVELOPED AND ENFORCED BY HUD, DUE TO OUR CONTRAUNG PROGRAM OF PRODUCT UPPROVINGENT. PROCES AND SPECIFICATIONS ARE SUBJECT TO CHANGE WITHOUT NOTICE. SOME ITEMS SUCH AS TRES, RIMS, AXLES AND HICHES MAY HAVE BEEN RECYCLED AFTER NESPECTION FOR SAFETY AND APPEARANCE. ALL DINDIGHONS ARE NOMINAL.

"The U.S. Department of Housing and Urban Development (HUD) Manufactured Home Dispute Resolution Program is available to resolve disputes among manufacturers, retailers, or installers concerning defects in manufactured homes. Many states also have a consumer assistance or dispute resolution program. For additional information about these programs, see sections titled "Dispute Resolution Process" and "Additional Information-HUD Manufactured Home Dispute Resolution Program" in the Consumer Manual required to be provided to the purchaser. These programs are not warranty programs and do not replace the manufacturer's or any other person's warranty program."

A. PARTIES:

|  | cturer's or any other person's warranty program  | 1."                      |   | DATE PREPARED: 4/9/2021   |                                  |   |  |                 |  |
|--|--|--------------------------|---|---|----------------------------------|---|--|-----------------|--|
|  | Prestige Home Centers, Inc. 13771 NW H   | wy 19 (                  | Chiefland FL 32626 Phone: 352 493-24  | 3-2492  |                                  |   |  |                 |  |
| 2  | Buyer: Crystal Hewlett   | , 10. 0                  | Phone:  | e: Alt Phone:   |                                  |   |  |                 |  |
|  | Buyer:   |                          | Email:  | 71  |                                  |   |  |                 |  |
|  | Buyers Address:  |                          | City:   |   | State.                           |   |  |                 |  |
| В.   | AGREEMENT TO PURCHASE  Buyer agrees to purchase from Seller under t  | ne terms                 | and conditions specified in this docume   | ent following the describ   | ed property                      |   |  | Tiolo O         |  |
| C.   | PROPERTY DESCRIPTION: New  | io torrito               | Used  | Diokeled  | Oli igio                         | Double Sec.   | THE RESERVE THE PERSON NAMED IN COLUMN   | Triple Sec.     |  |
|  | Make Nobility Model Eli  | Year                     | 2021  | Serial #  | \$ -                             | Floor L x W   | 28x5<br>Closing Date:                    | TBA             |  |
|  | Display Model Together with the furnishings, accessories an  |                          | L. F. stad basses Europ though the pro  | porty is identified by Se   | rial No. or as                   |   |  |                 |  |
|  | Together with the furnishings, accessories are<br>"factory order" the seller may substitute any con-               | d service                | e indicated hereon. Even though the pro-<br>perty which otherwise meets the descrip | ition and specifications s  | set forth hereon.                |   |  |                 |  |
|  | See also Part II, Paragraph 2 & 4d.  | uiei pioj                | ocity which outcomes  |   |                                  | 2112  |  |                 |  |
| D.   | RECORD OF TRANSACTION  |                          |   | LIST OF ADDITIO   | NS & DELETI                      | ONS   | heating skirting str                     | one & furniture |  |
| 1  | Price of home including additions and deletions  | \$                       | 95,720.00   | Home price excludes tin<br>unless listed here as ar   | res, wheels, axles<br>a addition | , air conditioning,                                     | nealing, skiring, si                     | sps & formore   |  |
|  | Processing Fee  Deliv. To home site & set up subject to Part   | \$                       | 287.00  | Standard Deliver  | ry and Set up                    |   |  |                 |  |
| 2  | II Paragraph 6 and Part IV of set up & site  |                          |   | Standard Wood   |                                  | 3 Sets Std  |  |                 |  |
|  | Requirements Agreement   | \$                       | 96,007.00   |   | Size:                            | 3.5 I on w/ 1:  | 5K heat strip                            |                 |  |
|  | SUB TOTAL Sales Tax: 6% (Excludes Gross Trade Value)   |                          | 5,760.42  | DI 1 (1   | Lap - Groun                      | d Skirting  |  |                 |  |
| 3  | Discretionary Sur Tax  | \$                       | 50.00   |   |                                  |   |  |                 |  |
|  | Total Improvements: (see adjacent column)  | \$                       | 13,750.00   |   | D                                | s Responsib   | ilitu                                    |                 |  |
|  | TOTAL PRICE OF HOME  | \$                       | 115,567.42  | Move on normits and fo  | es Homeowners                    | insurance, Elect  | rical Hook ups                           |                 |  |
| 4  | Cash Down Payment Date   CR #  | \$                       | 28,000.00   | Vent dover to outside of  | f skirting. All lot pi           | reparations - Site                                      | must be crowned                          |                 |  |
|  | Date CR#   | \$                       |   | Property improvements   | to be customers                  | responsibility unle                                     | ess allowances                           |                 |  |
|  | Date CR#   | \$                       |   | made below. Any amou  |                                  | e allowance state                                       | a Will be the                            |                 |  |
| 5  | Trade-In Allowance-Gross (see below)   | \$                       | 0.00  | customer's responsibili<br>ALLOWANCES FOR I   | IV.<br>PROPERTY IMPE             | ROVEMENTS:  |  |                 |  |
| 6  | Less Payoff Debt (balance owing)   | \$                       |   | Septic  | 2,600.00                         | Pad/Dozer   |  | 1,400.00        |  |
| 7  | Net Trade-In Allowance (Buyers Equity) TOTAL DOWN PAYMENT  | \$                       | 28,000.00   |   | 2,400.00                         | Clearing  |  | 0.00            |  |
|  | UNPAID BALANCE OF HOME PRICE   | \$                       | 87,567.42   | Culvert   |                                  | Apron   |  | 900.00          |  |
| 8  | M/H Insurance 12 mo Estimate   | \$                       | 1,200.00  |   | 2,000.00                         | Misc  |  | 0.00            |  |
| 9  | Title/License/Lien Fee   | \$                       | 350.00  | Impact Fees<br>Well   | 4.000.00                         |   |  | 0.00            |  |
| 10   | Misc Mtge Tax / Doc. Stamp Fee   | \$                       |   | Plumbing  | 450.00                           |   |  |                 |  |
| 11   | Flood Certification  | \$                       |   |   |                                  |   | l describe of                            |                 |  |
| 13   | Closing Costs / Points   | \$                       |   | When required standar<br>3000 pounds. Off-road  | rd delivery and se               | t up is based on y                                      | not the home shall                       |                 |  |
| 14   |  | \$                       |   | be at customers exper   |                                  | rther specification                                     | ns attached                              |                 |  |
|  | TOTAL UNPAID BALANCE DUE BEFORE  | \$                       | 89.117.42   | E. DELIVERY   |                                  |   |  |                 |  |
| Trade  | DELIVERY. Subject to Part II, 3 &12  In is: Manuf Home Other   |                          |   | 1. Proposed Delivery I  | Date                             |   |  |                 |  |
|  |  | ACC#                     |   | But no later than   |                                  | 16 1: 5   | II                                       |                 |  |
| _  | owed to: Phone#  | -                        |   | which is the absolute   | e delivery deadline              | e as defined in Pa                                      | art II,                                  |                 |  |
| Year:  | 2000 Model: #BR & BA   |                          | 1234  | Paragraph 3 2. Place of Delivery  |                                  |   |  |                 |  |
| Size:  | 20x30 Serial No. or Address:   | -                        | 1234  | Address:  |                                  |   |  |                 |  |
| Trade-   | e-In<br>ances Skirtings Drapes C   | arpets                   |   | Space No:   | County:                          |   | City:                                    |                 |  |
| Includ   | des: Furniture A/C Heat Por  |                          | d/or steps  | Park:  I. TRADE in: If on receiving   | State:                           | o trade in property h                                   | Zip:<br>by the Seller there has          |                 |  |
| F. ENT   | TIRE AGREEMENT CONTRACT PARTS: This Agree conditions on the reverse side of this sheet and all other.              | ment inc                 | udes Part II, Terms   | hear a material change i  | n ite furnishings ac             | cessories or physica                                    | al condition from initial                |                 |  |
| andun  | adorstandings accepted by the parties as part of this  | ransactio                | n which are   | appraisal, normal wear at<br>Said reappraisal then del  | nd toor excepted th              | en the Seller may n                                     | nake a reappraisal.                      |                 |  |
| doome  | ad to comprise a single contract document and const  | tute the e               | ntire agreement   | CUCH DEODERTY TO B  | RE HIS PROPERTY                  | FREE AND CLEAR  | K OF ALL LIENS AND                       |                 |  |
| of the p   | parties. Each paragraph and provision of this contract<br>able; If one portion thereof is invalid the remaining po | rtion shal               | I, nevertheless,  | LICENSE EEES AND AC   | COUNT SHORTAG                    | SES. EXCEPT AS C  | THERWISE NOTED                           |                 |  |
|  | n in full force and effect.  IOR AGREEMENTS, MODIFICATIONS: This Agreen  |                          |   | HERE, AND THE BUYER WARRANTS THE TOTAL AMOUNT THEREOF TO BE NO GREATER THAN STATED IN THIS AGREEMENT. Necessary connections and   |                                  |   |  |                 |  |
| - manatic  | elians orders offers agreements and representation   | is, either               | oral or written.  | adjustments concerning changes in net payoff on trade-in shall be made at the time of settlement. The values allowed herein for trade-in may be arbitrary and may differ  |                                  |   |  |                 |  |
| In Part  | ticular, this Agreement totality supersedes and replace  | es the si                | milar agreement of<br>greement may be modified                                      | of settlement. The values allowed herein for trade-in may be arbitrary and may differ from actual fair market value by mutual agreement for the purpose of this transaction.  |                                  |   |  |                 |  |
| or part  | rties dated ,20_<br>tly superseded by later written agreement of the parti   | os attach                | ed hereto   | from actual fair market value by intuiting agreement of the spatial so parties are not<br>Therefore in the event of reascission or cancellation of the sale the parties are not<br>bound be such allowance. If the trade-in consists of real estate, then details of the  |                                  |   |  |                 |  |
| anding   | corporated herein.  IALITY OF SALE CONDITIONS: The sale agreed up  |                          |   | trade-in transaction and  | an itemization and o             | calculation of allowa                                   | inces for same are set                   |                 |  |
| final ar   | and binding on the parties according to the terms state  | ed in the                | ranous parts hereor,  | forth on the attached Re-<br>is made a part of this Ag  | al Estate Trade-in A             | greement and Closi                                      | ing Statement, which                     |                 |  |
| EVCE   | DT FOR THE FOLLOWING CONDITIONS ONLY: If   | <ol><li>conten</li></ol> | nplated financing,  | or the title to any propert   | y traded in as partia            | I payment along wit                                     | th the delivery of said                  |                 |  |
| if any,  | is not obtainable by any means at a rate not greater the Seller is unable to deliver the property substan          | ally as s                | pecified, or if   | property and the keys for   | r same to Seller's pr            | remises.  |  |                 |  |
| (2)  | N/Δ  |                          | then in such  | J. In the event the Buyer<br>Buyer will pay the Seller  | has not paid in full             | by the mutually agr                                     | eed upon date, the<br>onth on the unpaid |                 |  |
| case o   | only, Buyer and Seller may elect to cancel the sale a  |                          |   | Balance until payment is  | made in full.                    | oga isto por me   | es e canada de Palabardo (2007)          |                 |  |
| entitled<br>by the   | d to a refund of payments made and/or the net true v<br>Seller less any direct costs incurred by Seller in proc    | essing th                | is order or in applying for financing.  |   |                                  | Minusha ka ina ana 1                                    | ad understand the                        |                 |  |
|  | SSENT:   |                          |   | Offer to Purchase by items and conditions on the conditions o | buyer. IWe agree to              | uns sare, naving read ar<br>and all other parts of this | s document .                             |                 |  |
| 1  | 1 Acceptance by Seller   |                          |   | and acknowledge receipt   | of a copy thereof.               | 10 (1)  | . 1.11                                   |                 |  |
| 1  | Salesperson Mary Harr  | s                        |   | _   | DAAM                             | TI LAH  | WH                                       |                 |  |
|  | 7  |                          |   | Buyer   | UVVV                             | MI  | NVWVI                                    |                 |  |
|  | Accepted 1/10 Land   | . 1                      |   | CON   | 1                                |   |  |                 |  |
|  | By: I flitty T COUL  | 60                       |   | SSN   |                                  |   |  | -               |  |
| - Control of the Cont | 2-1-1-11   |                          |   | Buyer   |                                  |   |  |                 |  |
|  | Title: Geńeral Manager   |                          | W ENE DW  |   |                                  |   |  | 7.55%           |  |
| N  | lot binding on Seller until signed by a  | n office                 | r or the management of Seller   | SSN   |                                  |   |  |                 |  |
|  | T <sub>i</sub>   |                          |   | Date Signed   |                                  |   |  |                 |  |
| 1  |  |                          |   |   |                                  |   |  |                 |  |

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| THIS FORM MUST BE SUBMITTED PRIOR TO THE  |   |
|---|---|
|   | HE ISSUANCE OF A PERMIT   |
| ty one permit will cover all trades doing work at the contractors who actually did the trade specific wo contractor shall require all subcontractors to proveral liability insurance and a valid Certificate of Compared to the contractor is responsible for the corrector tractor beginning any work. Violations will responsible for the corrector tractor beginning any work. | ide evidence of workers' compensation or betency license in Columbia County.  ted form being submitted to this office prior to the  |
| Print Name  | Signature   |
| Qualifier Form Attached   |   |
| Print Name Michael A Boland License #: CAC 181 7716   | Signature Mul A Beland Phone #: 352 274 9326  |
|   | ty one permit will cover all trades doing work at the contractors who actually did the trade specific wo contractor shall require all subcontractors to proval liability insurance and a valid Certificate of Compermitted contractor is responsible for the correct contractor beginning any work. Violations will restrict the contractor beginning any work. Violations will restrict the contractor beginning any work. |

**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.

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUME                                      | SER CONTRACTOR   | PHONE   |
|---|--|---|
|   | THIS FORM MUST BE SUBMITTED PRIOR TO T   | HE ISSUANCE OF A PERMIT   |
| records of the s<br>Ordinance 89-6,<br>exemption, gen | inty one permit will cover all trades doing work at the ubcontractors who actually did the trade specific wo a contractor shall require all subcontractors to prover all liability insurance and a valid Certificate of Commercial management of the correct permitted contractor is responsible for the correct becontractor beginning any work. Violations will response | ride evidence of workers' compensation or petency license in Columbia County. |
| ELECTRICAL  | Print Name GLENN Whilt: Ngton License #: EC 1300 29 57  Qualifier Form Attached  | Signature <b>28mm</b> Whittington  Phone #: 386972 1700                       |
| MECHANICAL/   | Print NameLicense #:Qualifier Form Attached  | Signature Phone #:  |

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.



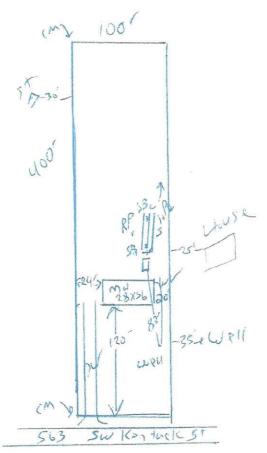
STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

| PERMIT NO.              | 21-05/04 |
|-------------------------|----------|
| DATE PAID:<br>FEE PAID: | 310:00   |
| RECEIPT #:              | 1482598  |

| APPEICATION FOR:  [ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Repair [ ] Abandonment [ ] Temporary [ ]  |
|--|
| APPLICANT: Crystal Hewlett  TELEPHONE: 352-949-0592  |
| ACENT: left Hardee (Hardee Environmental and Fernandia)  |
| MAILING ADDRESS: 6450 NW 72 Lane, Chiefland, FL 32626 EMAIL: JeffHardeeHEP@aol.com   |
| 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: 56 BLOCK: 4 SUBDIVISION: TYPE HIVES ESTATES PLATTED:  |
| ZONING: I/M OR EQUIVALENT: [ Y/N ]   |
| PROPERTY SIZE: 2000GPD   3>2000GPD   3>2000GPD   3>2000GPD   |
| IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y N ] DISTANCE TO SEWER: MFT   |
| PROPERTY ADDRESS: 563 Kentucky St Fort White FC  |
| DIRECTIONS TO PROPERTY: Head South on 247, Thon Sand Hill Bd   |
| DIRECTIONS TO PROPERTY: HINO SOUTH ON CONTROL OF THE CONTROL OF TH |
| Thon 5w niverside Aue, Thon Utan   |
| PKWY, Th on SW Newark Dr.TL on Kentucky St.  |
| BUILDING INFORMATION [ ] RESIDENTIAL [ ] COMMERCIAL  |
| Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC  |
| 1 mobileHome 3 1568  |
| 2  |
| 3  |
| 4  |
| [ ] Floor/Equipment Drains [ ] Other (Specify)   |
| SIGNATURE: DATE: 6-7/72(   |

### STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 31-05%
PART II-SITEPLAN- FLAW (24+



| Notes:   |       |      | lighter Guigen feathar i fan fan fan fall aguste stade fall ar stad feathar fan fan fan fan fan fan fan fan fa   |   |   |  |
|--|-------|------|--|---|---|--|
| Americkeurs in the second discontinuation in the control of the co |       |      |  | ten for spilled gette filt at til et en sock til som som men med som som som til en mega som til som som som s<br>Som som som som som som som som som som s |   |  |
| Site Plan submitted by:_   | 1 Nep | fort |  | Amerika estreti in-valdisi Poremisma ersantus kulpusettaja sida jaloksa k   | in Theory stadue is encountered by all styles of the state of the contraction |  |
| Plan Approved 8v   | 1/11. | 2    | Not Approved   | (d)   | Da  | Management of the Commission o |
| O.A.   | MUU   | -17  | A CONTRACTOR OF THE PARTY OF TH | - Court   | na Coun   | y Health Department  |

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

OH 4015, 09/09 (Obsoletes previous editions which may not be used). Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-5).



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

PERMIT #: 12-SC-2314813

APPLICATION #: AP1682598

DATE PAID: 9/23/2007

FEE PAID: 3/000

RECEIPT #: 12-010-50576/8

DOCUMENT #: PR1582976

| CONSTRUCTION PERMIT FOR: OSTDS New   |  |
|--|--|
| APPLICANT: CRYSTAL**21-0566 HEWLETT  |  |
| PROPERTY ADDRESS: 563 KENTUCKY Fort White, FL 32038  |  |
| LOT: 56 BLOCK: SUBDIVISION: 3 Rivers Est U-  | 14   |
| PROPERTY ID #: 01438-056 [SECTION, 1   | FOWNSHIP, RANGE, PARCEL NUMBER] NUMBER]  |
| SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATE 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIREMENT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.  | VAL OF SYSTEM DOES NOT GUARANTEE ANY CHANGE IN MATERIAL FACTS, VIRE THE APPLICANT TO MODIFY THE PERMIT BEING MADE NULL AND VOID. M COMPLIANCE WITH OTHER FEDERAL.  |
| SYSTEM DESIGN AND SPECIFICATIONS   |  |
| T [ 900 ] GALLONS / GPD New Septic CAPACITY A [ ] GALLONS / GPD N/A CAPACITY N [ ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SEPTION SEPTI | ]DOSES PER 24 HRS #Pumps [ ]   |
| N F LOCATION OF BENCHMARK: Nail in tree left side of DF  |  |
| I ELEVATION OF PROPOSED SYSTEM SITE [ 32.00 ] [ INCHES FT ] [ ABOVE  | A DET ON A DEDOCUMENT OF A DESCRIPTION O |
| E BOTTOM OF DRAINFIELD TO BE [ 62.00 ] [ INCHES   FT ] [ ABOVE   | BELOW BENCHMARK/REFERENCE POINT  |
| L  |  |
| The system is sized for 3 hodrooms with a maximum account of 6   | ] INCHES   |
| The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bed 300 gpd.   | froom), for a total estimated flow of  |
|  |  |
|  |  |
| R  |  |
| SPECIFICATIONS BY: Jeff Harde TITLE:   | PSE  |
| APPROVED BY: KULK TITLE: Environmental Special   | link TT  |
| DATE ISSUED: 06/23/2021  | EXPIRATION DATE: 12/24/2022  |
| OH 4016, 08/09 (Obsoletes all previous editions which may not be used) Incorporated: 64E-6.003, FAC  | Page 1 of 3  |