Columbia County Building Department 3595 Culvert Permit No. 000002498

000002498

DATE	10/25/2017	F	PARCEL ID#	24-4S-16-03	117-142			
APPLICAN	T JAMES	M. LIPSCOMB			PHONE	386.623.9141		
ADDRESS	331 SI	E WOODS TERRAC	Е	LAK	E CITY		FL 32025	
OWNER	DELTA OM	EGA PROPERTIES,	INC.		PHONE	386.397.5288		
ADDRESS	331 SE	WOODS TERRACE		LAK	E CITY		FL 32025	
CONTRACT	TOR JAME	S M. LIPSCOMB			PHONE	386.623.9141		
LOCATION	OF PROPI	ERTY 90-W TO	-341TL TO KIC	KLIGHTER,TL	TO CANNO	V.TL TO CHEST	ERFIELD.TR	
& TR @ "T" &	: IT'S 1/4 MIL	E ON L.						
SUBDIVISI	ON/LOT/B	LOCK/PHASE/U	INIT CROSSY	VINDS		42	1	
INSTALL	ATION INI	FORMATION	SIGN	ATURE A		0		
II (O I I I I I I		Old Hill Toly	bidiv	MIONE A	Conso C	Lipscomle		
permit being is Culvert installa Joint use culve The culvert sh	ssued, an inspect tion for commer orts will comply want before the comply and before the complete the complet	stallation for residential tion by the Public Work cial, industrial, and oth with Florida Departmen te installed in accordant ot shall be verified by a	s Department shall I er uses shall conforr t of Transportation s :e with Columbia Co	be required to de n to the approved pecifications. ounty Land Develo	termine the pro site plan or to oment Regulation	per size, length, an the specifications o	d location for ins f a registered en	tallation. gineer.
All culverts rec	quired by this po acilities being se	officy shall be installed provided by newly construction approval.	rior to the Building	Department grant	ing permission i	to connect nerman	ent electrical ser its, installation	vice to
) Mitered-end c (1) When the c has not reach	culverts shall be culvert is to be pered a "build out"	used in the following a placed giving access to a of fifty percent (50%) overt diameter and lengt	paved street.; (2) Vor more.; (3) In all no	ew subdivisions fo	r residential use	. New subdivisions	shall be required	l as nart
Culv	vert installat	tion shall conform	n to the appro	ved site plan	standards.			
Dep	artment of	Transportation P	ermit installati	ion approved	standards			
		Public Works D						
		11'N 32'X/						
		" WEIDED U			U/V8RT	BOTTS		_
P W Inspec	ctors Name	DAVID MS	CORMICK	D	ate: _/	130/17		
Final Inspe	ction Date:	Р	W Inspectors	s Name:		Signature:		
4-5-1	8		Slake Sm.			ML	_	
CONTAC	T FOR							
		REQUIREME PARTMENT	NIS AND	INSPECT		maura D	.:a = 25 M	n
Phone: 38						Amount Pa		
. Hone. 30	,0-1 00-10 1	•				Check No.	7019	