| DATE . 02/25/2009 | Columbia County Bu This Permit Must Be Prominently Posted | | struction | PERMIT 000027661 |
|----------------------------|---|---|----------------------|--|
| APPLICANT LOIS BIF | RENBAUM | PHONE | 386.462.4993 | |
| ADDRESS 5414 | NW CR 241 | | FL | 32615 |
| OWNER LOIS BIF | RENBAUM | PHONE | 352.462.4993 | |
| ADDRESS 307 | SW ALPINE PLACE | HIGH SPRINGS | FL | 32643 |
| CONTRACTOR STI | EVEN COX | PHONE | 352.472.6598 | |
| LOCATION OF PROPER | RTY 441-S TO ALPINE PL,TR KEEP S | STRAIGHT & IT'S THE | EMPTY LOT NEX | |
| | LAST LOT ON R. | | | |
| TYPE DEVELOPMENT | M/H/UTILITY EST | TIMATED COST OF CO | NSTRUCTION | 0.00 |
| HEATED FLOOR AREA | TOTAL ARE | | HEIGHT | STORIES |
| FOUNDATION | WALLS | OOF PITCH | FLOOR | |
| LAND USE & ZONING | A-3 | MAX | . HEIGHT | |
| Minimum Set Back Requi | rments: STREET-FRONT 30.00 | REAR | 25.00 SID | E 25.00 |
| NO. EX.D.U. 0 | FLOOD ZONE X | DEVELOPMENT PERM | MIT NO. | |
| PARCEL ID 09-7S-17 | -09957-033 SUBDIVISION | N SOUTHLAND | | MINISTERNATION OF THE PROPERTY |
| LOT 8 BLOCK | PHASE UNIT _ | TOTA | L ACRES 0.57 | |
| 000001714 | IH0000875 | | 8511 | 3. 4. 45 mm () 1 mm |
| Culvert Permit No. | Culvert Waiver Contractor's License Num | nber | Applicant/Owner/Cont | ractor |
| 18"X32'MITERED | 09-0091 CFS | | D | <u>Y</u> |
| Driveway Connection | Septic Tank Number LU & Zonin | ng checked by App | roved for Issuance | New Resident |
| COMMENTS: 1 FOOT | ABOVE ROAD. | | | |
| | 3 | | | |
| | | | Check # or Cash | 150 |
| | FOR BUILDING & ZONIN | G DEPARTMENT | ONLY | (footer/Slab) |
| Temporary Power | Foundation | | Monolithic | |
| | date/app. by | date/app. by | | date/app. by |
| Under slab rough-in plum | | | Sheathing/Naili | |
| Framing | date/app. by | date/app. by | - | date/app. by |
| date/ar | Rough-in plumbing ab | ove slab and below wood | floor | date/app. by |
| District 1 | Heat & Air Duct | , | D : 1 //: / 1 | date/app. by |
| 0000 | date/app. by | date/app. by | Peri. beam (Lintel) | date/app. by |
| Permanent power | C.O. Final | A | Culvert | 5005. (159) |
| | | ate/app. by | | date/app. by |
| M/H tie downs, blocking, e | date/app. | . by | Poold | ate/app. by |
| Reconnection | • | * 1 · · · · · · · · · · · · · · · · · · | e | аке/арр. бу |
| M/H Pole | date/app. by date/ Travel Trailer | app. by | date/app. by | |
| date/app. by | de | ate/app. by | dat | e/app. by |
| BUILDING PERMIT FEE | \$ 0.00 CERTIFICATION FEE | E \$0.00 | SURCHARGE FEE | 0.00 |
| MISC. FEES \$ 300.0 | 0 ZONING CERT. FEE \$ 50.00 | FIRE FEE \$ 51.36 | WASTE FE | E \$ 134.00 |
| FLOOD DEVELOPMENT | 6/ | | | |
| INSPECTORS OFFICE | 101 | CLERKS OFFICE | (11/ | |

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

| School | □ Parent Parcel # | Recorded Deed or | Site Plan with Setbacks Shown (EH# 99-089/ | FEMA Map# | Comments | Flood Zone | AP# 0902-18 | For Office Use Only |
|---|-------------------|--|--|----------------|----------|---|---|---|
| 1500.00 | 29.88 Fire | Affidavit from land ow | acks Shown (FEH# | Elevation | | Development Permit | Date Rece | (Revised 1-10-08) |
| = TOTAL 3097.4 | TS.63 COT | Recorded Deed or Affidavit from land owner Letter of Auth. from installer Astate Road Access | | Finished Floor | | 1 | ived Z-16-09 | Zoning Official |
| D 12 0 | 142.89 | . from installer | EH Release | River | | A · 3 Land Us | By LH Per | 11101B1 |
| School 1500.00 = TOTAL 3097.40 199 DON'TO COUNTY SANT 2/24/69 | F W Comp. letter | State Road Access | _□ EH Release | In Floodway | | Zoning A · 3 Land Use Plan Map Category A · 3 | Date Received Z-16-05 By LA Permit # 1714 27661 | Zoning Official 4 /11/0 Building Official 2-/7-09 |



| - 7 | | |
|-----|--|-------------|
| | Property ID Number 09-75-17-09957-033 Septic Permit No. 09-009/ | |
| | Subdivision Name Southland Lot 8 Block Unit Phase | |
| | Construction of Cost of Construction | |
| | Mobile Home Permit - New or Used Circle One) Year 2001 Length 48 Width 28 | |
| | Name of the Authorized Person Signing the Permit Lois Birrhaum 386-462-4980 Phone 386-462-4983 Fax 386-462-4983 Address 25414 NW CR-241 Alachua, Fl 32615 Owners Name Lois Birrhaum (ell 352 339-4633 Phone 386-462-4983 Phone 386-462-4983 Relationship to Property Owner Self-owner Is this Home Replacing an Existing Home NO Owledge Contractors Name Steven Cox Phone 352-472-6562 Company Name Cox Mobile Home Moving +Sct-up Fax 352-472-6598 | •) |
| | Address 600 S.E. 43 to Ave. Trenton, Fl 32693 | |
| | Fee Simple Owner Name & Address | |
| | Bonding Co. Name & Address | |
| | Architect/Engineer Name & Address | |
| - | Mortgage Lenders Name & Address | |
| 4 | Driving Directions to the Property 4415 fut N 19ht on 6W Alpine Place - 90 straight it is the empty traced Lot Next to the Last on the Right Side | |
| | Lot Size 200'X125' Total Acreage Building across lot numbers | |
| | Actual Distance of Structure from Property Lines - Front/Road 40 Left Side 38 Right Side 38 Rear 56 | |
| L | Number of Stories Heated Floor Area Heated Floor Area | |
| | Circle the correct power company - FL Power & Light - Clay Elec Suwannee Valley Elec. Progress Energy - Slash Pine Electric | |
| | Do you currently have an: Existing Drive or Private Drive or need a Culvert Permit or Culvert Waiver (Currently using) (Blue Road Sign) (Putting in a Culvert) (No Culvert but do not need a Culvert) | |
| | SPORE FOLDIC LANG | Page 1 of 2 |

Both Pages Must be Submitted to obtain a Building Permit.

7.-15-09

Revised 12-30-08



Columbia County Building Permits Application

Application # 0902 - 18

TIME LIMITATIONS OF APPLICATIONS: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: 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 work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not pald-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: YOU ARE HEREBY NOTIFIED: as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractors, agents or representatives in the construction and/or improvement of the building and lot for which this been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Owners Signature

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

Contractor's License Number THO000875

Contractor's Signature (Permitee)

Contractor's License Number THO000875

Columbia County

Competency Card Number

Affirmed under penalty of perjury to by the Contractor and subscribed before me this Hay day of Pouline Parliam MY COMMISSION # DD 638161

EXPIRES: February 8, 2011

Bonded Thru Notary Public Underwriters

Both Pages Must be Submitted to obtain a Building Permit.

000001120000

Page 2 of 2

Revised 12-30-08

Prepared by and return to: Susan Shattler

Home Town Title of North Florida 2744 US Highway 90 West Lake City, FL 32055 386-754-7175

File Number: 2005-865

Parcel Identification No. R09957-033

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 9th day of March, 2005 between Cynthia S. Brochu, f/k/a Cynthia S. Langston, a married woman, who does not reside on the property conveyed herein, whose post office address is 2506 S.W. 14th Drive, Gainesville, FL 32608 of the County of Alachua, State of Florida, grantor, and Lois Birenbaum, a married person whose post office address is 25414 NW CR 241, Alachua, FL 32615 of the County of Alachua_______, State of Florida, grantee,

Witnesseth that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Lot 8, SOUTHLAND SUBDIVISION, a subdivision according to the Plat thereof recorded in Plat Book 5, Page 47, Public Records of Columbia County, Florida.

Grantor warrants that at the time of this conveyance, the subject property is not the Grantor's homestead within the meaning set forth in the constitution of the state of Florida, nor is it contiguous to or a part of homestead property. Grantor's residence and homestead address is: 2506 S.W. 14th Drive, Gainesville, FL 32608.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

* "Grantor" and "Grantee" are used for singular or plural, as context requires.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

| Signed, sealed and delivered in our presence: | |
|---|--|
| Hudrak. Rogers Witness Nama: LANDRAK. ROGERS | Conthia S. Brochu |
| Witness Name: | \ |
| State of Florida | |
| County of Alachua | |
| The foregoing instrument was acknowledged before me the Langston, who is personally known or [] has produced | his Huday of March, 2005 by Cynthia S. Brochu, f/k/a Cynthia S. d a driver's license as identification |
| [Notary Seal] | Notary Public |
| Landra K Rogers My Commission DD116000 | Printed Name: |
| Expires May 10, 2006 | My Commission Expires: |



SitePlan

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 Plan Approved_ **Not Approved** By_ County Health Depart

Cox Mobile Home Moving and Set-up

600 S.E. 43 rd Ave. Trenton, Fla 32693 Phone (352)472-6562 Fax (352)472-6598 coxmhmoving@aol.com

February 14, 2009

To Whom It May Concern:

I, Steven Cox, give 1015 BICNBAUM permission to pull permit under my Mobile home installer license no. IH0000875.

Thanks,

Steven Cox

PAULINE PARHAM
MY COMMISSION # DD 638161
EXPIRES: February 8, 2011
Bonded Thru Notary Public Underwriters

PERMIT NUMBER

| Section of the second | TEST | 2 |
|--|--------|-------|
| Company of the Compan | OMETE | I I I |
| The second secon | DENETO | |
| CONTRACTOR SECTION SEC | CKET | |
| The second secon | 0 | |
| | | |

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

0007×

000/×

POCKET PENETROMETER TESTING METHOD

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

2001

001 ×

X (60t

TORQUE PROBE TEST

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

reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft A state approved lateral arm system is being used and 4 ft. requires anchors with 4000 by holding capacity Note:

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.

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.

Gasket (weatherproofing requirement

a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are understand a properly installed gasket is a requirement of all new and used of tape will not serve as a gasket.

Installer's initials

Type gasket

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

Weatherproofing

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

Miscellaneous

Range downflow vent installed outside of skirting. Drain lines supported at 4 foot intervals. Yes Dryer vent installed outside of skirting. Yes å Electrical crossovers protected. Yes, Skirting to be installed. Yes Other:

¥

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

PEKMII WORKSHEEI

| | New Home Used Home | Home installed to the Manufacturer's Installation Manual | Home is installed in accordance with Rule 15-C | Single wide | Double wide Installation Decal # 3007 73 | Triple/Quad | PIER SPACING TABLE FOR USED HOMES | Load Footer 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" X 24" 26" x 26" capacity (sq in) | Def 3' 4' 5' 6' 7' 8' 8' 8' 8' | 05 05 05 05 05 05 05 05 05 05 05 05 05 0 | PIER PAD SIZES POPULAR PAD SIZES | | 16 x 18 18.5 x 18.5 | 16 x 22.5 17 x 22 13 1/4 x 26 1/4 | Draw the approximate locations of marriage 20 x 20 400 wall openings 4 foot or greater. Use this 17 3/16 x 25 3/16 441 symbol to show the piers. | + | Opening Pier pad size 4ft 5ft | FRAME TIES | within 2' of end of home spaced at 5' 4" oc | TIEDOWN COMPONENTS OTHER TIES | Longitudinal Stabilizing-Device w/ Lateral Arms Marriage wall | |
|----------------------|--------------------|--|--|---------------|--|---|--|---|---|--|----------------------------------|---|------------------------|---|--|------|-------------------------------|------------|---|-------------------------------|---|--|
| | Hrmr& D | | | | 28×48 | ng plan of home | lew or used) | | I locations of Longitudinal and Lateral Systems (use dark lines to show these locations) | | | |] | | of home per Rule 15C | - 11 | | | | | | |
| | M | 1 | 1 | | | e blocki nainder | home (r | itials | gitudinal show th | | P | q |] | [| hin 2' of end | 7 | | | | | | |
| | # double | | 1 | | Length x width | alf of th | d on any | Installer's initials | is of Lon k lines to | | þ | 4 | | [| marriage wall piers within 2' of end of home | 中 | | | | | | |
| | - | | | | <u> </u> | 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 | ot be | <u>su</u> | Show locations of Longitudinal and use dark lines to show these learns | | | 4 | | [| marriage | + | | | | | | |
| | 2 | ļ. | 1 | | 7 | e wide fi | stems ca ed 5 ft 4 |))) = | steral S longitudinal | | þ | 4 | | [| # | 中 | | | | | | |
| 3ER | Thund | | | | PAPA | e is a single e is a triple | I understand Lateral Arm Systems cann where the sidewall ties exceed 5 ft 4 in. | ^ | 宁 | | þ | 4 | | [| + | + | | | | | | |
| NOME | 3 | | home | | TO ē | if hom | and Late e sidewa | r spacing | 1 | ┼┖ | þ | 4 | | [| + | + | | | | | | |
| PERMIT NUMBER | Installer | | Address of home | Dellig Illota | Manufacturer | NOTE: | I unders where th | Typical pier spacing | ,z | - | b | 4 | <u></u> | | + | + | | | | | | |

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

300773

LABEL #

DATE OF INSTALLATION

Steven E. Cox

NAME

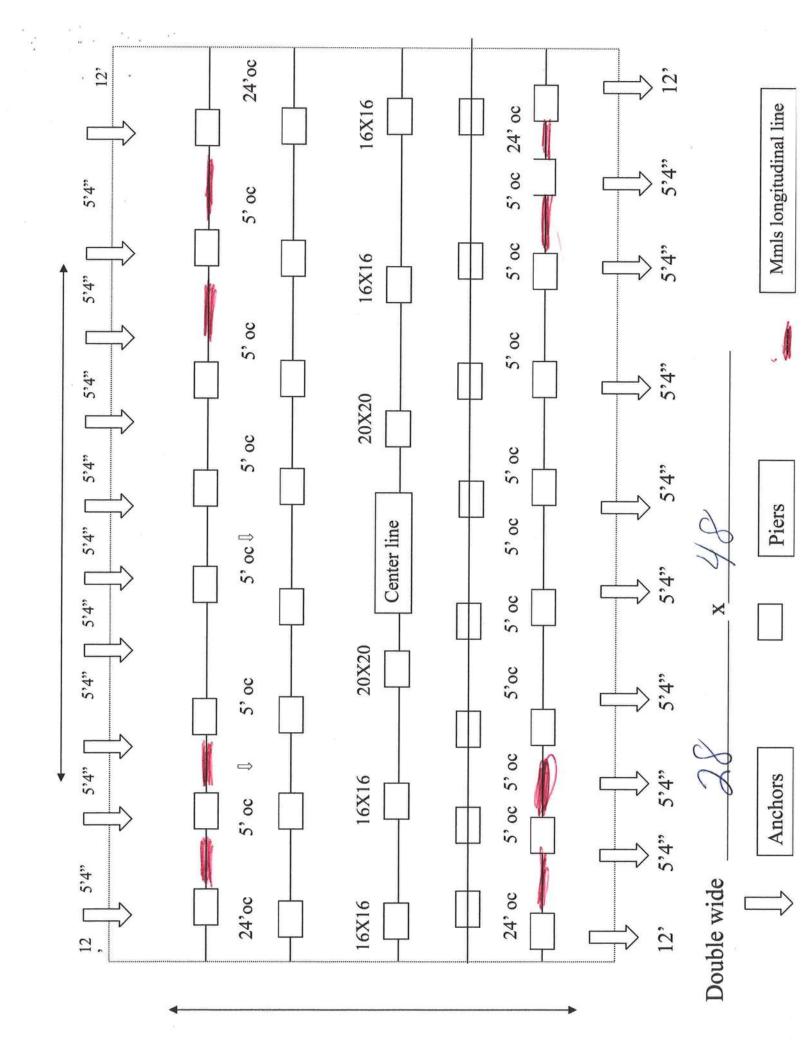
IH0000875

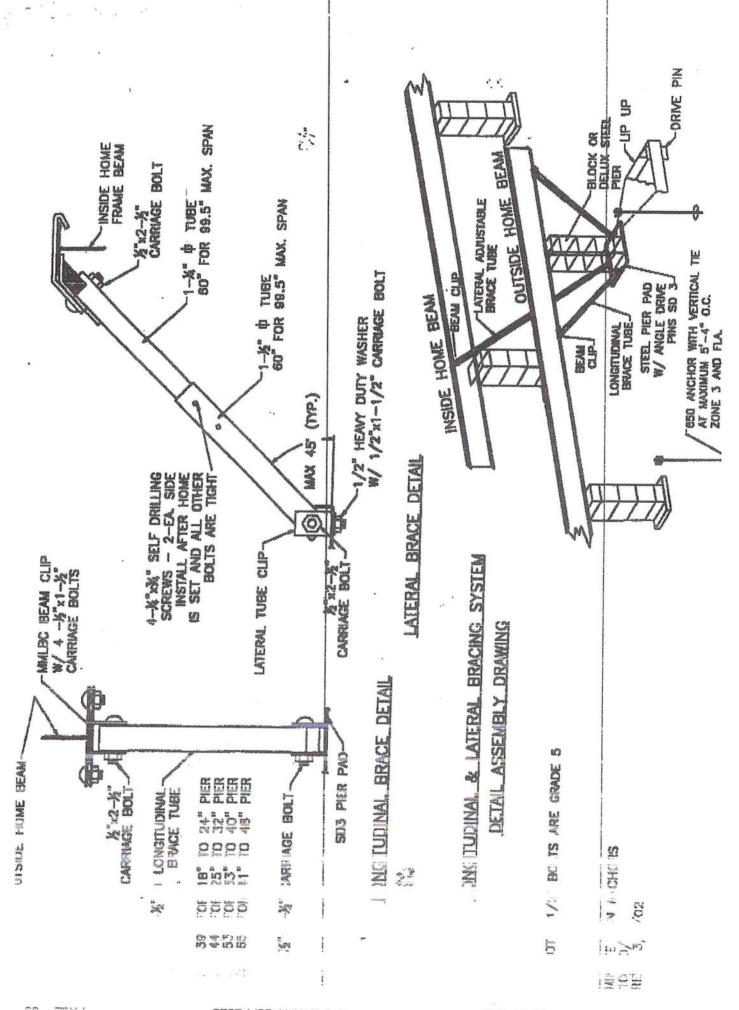
13282

LICENSE #

ORDER#

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF HIGHWAY SAFETY AND MOTOR VEHICLES, BUREAU OF MOBILE HOME AND RECREATIONAL VEHICLE CONSTRUCTION.





FLORIDA ZONE II AND III LONGITUDINAL AND LATERAL BRACING SYSTEMS PLACEMENT

For 5/12 Roof Pitch

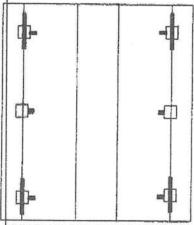
Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. Systems must be as evenly spaced as possible.

Revised: 6/17/2002

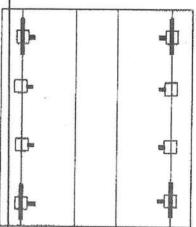
HOME DIMENSIONS REPRESENT BOX SIZE

LEGEND

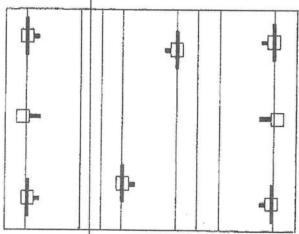
Longitudinal Bracing Systemonly Longitudinal and Lateral Bracing System Lateral Bracing System only



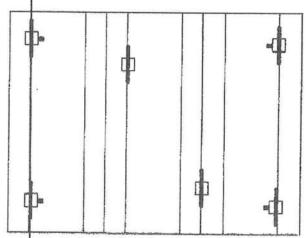
SINGLE AND DOUBLE WIDE UP TO 32' WIDE AND 52'LONG 6 SYSTEMS 56' INCLUDING HITCH



SINGLE AND DOUBLE WIDE UP TO 32' WIDE AND 76' LONG 8 SYSTEMS 80' INCLUDING HITCH



FOR TRIPLE WIDE OR TAG UNITS-8 SYSTEMS OVER 52' BOX/ 56' INCLUDING HITCH



FOR TRIPLE WIDE OR TAG UNITS-6 SYSTEMS- UP TO 52' BOX/ 56'INCLUDING HITCH Minute Man

May 2002

anchors, inc.

Installation Instructions for Model LLBS Longitudinal and Lateral Bracing System Approved for Florida Revised: 6/17/02

Note: Your set must be designed by a Registered Professional Engineer if all or one of the following conditions occur:

Location is within 1,500 feet of Coast Pier Height exceeds 48" Sidewall height exceeds 96"

Roof eaves exceeds 16" Main beam spacing exceeds 99.5"

- Refer to the Home Manufacturer Installation Instructions for pier locations. 6" Disc anchors 48" long with vertical ties are required at maximum 5'-4" center along both sidewalls starting a maximum of 2'-0" in from each end of the home. Vertical ties must be used at all connection points furnished by the home manufacturer. Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs require a 5' anchor.
- Refer to the Foundation Plans for the location of Longitudinal Lateral Bracing System..
 (See Attached). Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.
- Remove turf to expose firm soil at each SD3 pad location.
- Attach tube clip to SD3 pier pads (see Detail Assembly Drawing) center pad under beam, level pad. Angle Drive Pins may be driven vertically through four (4) slots in SD3 pier pad now or after home is totally set. Angle drive pins may be driven up to ten degrees (10) off of vertical. If you choose to drive pins after home is set, do not cover slots in pier pad.
- 5 Level home on concrete blocks or deluxe steel pier by Minute Man.
- Install Longitudinal and Lateral Bracing in accordance with Foundation Plan and Detail
 Assembly Drawing.
- 7. Install vertical anchors, frame ties and stabilizers at each lateral arm system location..

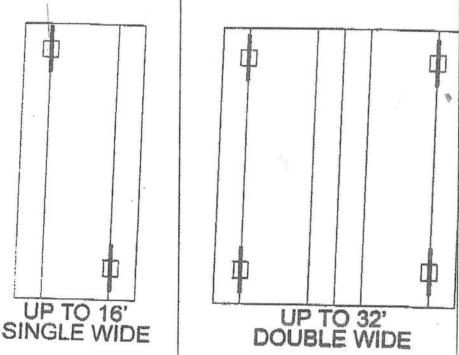
Thank you for using Minute Man Products, Inc. If you have any questions, please call Toll Free at (800) 438-7277.

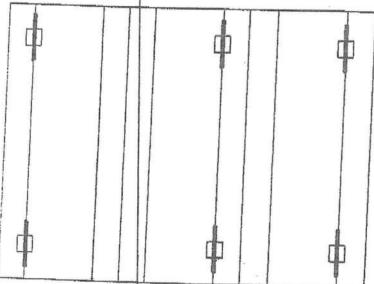
305 West King St. East Flat Rock, North Carolina 28726

LONGITUDINAL BRACING SYSTEMS PLACEMENT FOR FLORIDA

Use 650 anchors and 180 square inch stabilizers with frame ties and vertical ties at maximum 5' -4" centers. Vertical ties must be used at all connection points furnished by the home manufacturer. Marriage wall anchors must be used in accordance with the home manufacturers instructions.

For Roof slopes up to 5/12 pitch
Systems must be placed no more than 16' from end of home





UP TO 48' TRIPLE WIDE OR DOUBLE WIDE WITH TAG

See Longitudinal and Lateral Bracing System detail assembly drawing.

2

Dependable Well Drilling, Inc. 2139 NW 50th St Bell, Fl. 32619 Phone 386-935-3042 Fax 386-935-0087

Property ID # 09-7S-17-09951-033 Appl. # 09-0091 0218

February 17th, 2009

We have been hired to drill a well for Lois Birenbaum, on Alpine St. It will have a 1HP pump, cycle stop valve & tank.

Thank You Mandy Smith

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:

2/13/2009

DATE ISSUED:

2/17/2009

ENHANCED 9-1-1 ADDRESS:

307

SW ALPINE

PL

HIGH SPRINGS

L 32643

PROPERTY APPRAISER PARCEL NUMBER:

09-7\$-17-09957-033

Remarks:

LOT 8 SOUTHLAND S/D

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.

1382

02-17-2009 20:10 COX 3524726595

PAGE2

4×41.0902-18

780 -768 4160

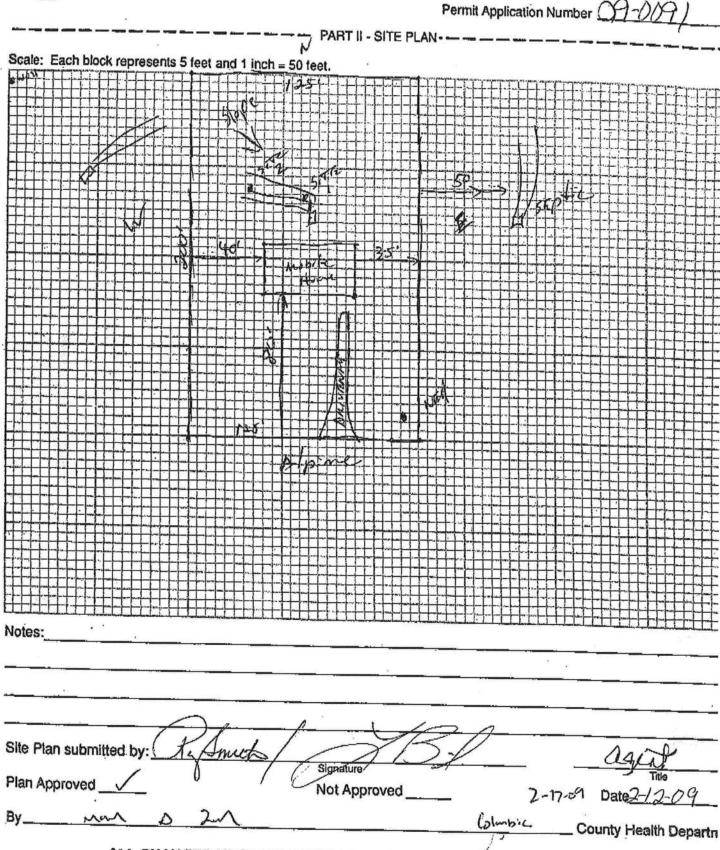
CODE ENFORCEMENT DEPARTMENT COLUMBIA COUNTY, FLORIDA OUT OF COUNTY MOBILE HOME INSPECTION REPORT

| COUNTY THE MOBILE HOME IS BEING MOVED FROM | - |
|---|---------------|
| PHONE 3 46-46 2-4 973 CELL 352-337-6 | 3.3 |
| PHONESS2-4726S62 CELLSS2-4-4-1 | 150 |
| INSTALLIRS ADDRESS 600 S.E. 43" Aug. Treaten, Fl 32693 | _ |
| INSTALL IRS ADDRESS 600 SE. 43 AND THE | |
| MOBILE HOME REPORMATION | |
| YEAR 2001 SIZE 28 X 44 | |
| COLOR White SERIAL NO. GMHGA1220027049AB | |
| WIND ZC NE TO SMOKE DETECTOR YES | |
| | |
| FLOORS Good (Plywood) | |
| 1000 | - |
| WALLS MANUAGE TO SheetRock Sereral Roses | and the |
| CABINETS GOO'S | Second |
| ELECTRICAL (FIXTURES/OUTLETS) GOAL | *** |
| EXTERIOR: WALLS / STODING GOOD | - |
| WINDON'S GOOD | - |
| DOORS BACK DAKE KEELE OF REPAIR | - |
| APPROVEDNOT APPROVED | |
| NOTES: | multe |
| INSTALL IR OR INSPECTORS PRINTED NAME STEVEN COX | |
| Installer/A Ripector SignatureLicense No. I HOOOU 875 Once | |
| ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS POR | f. |
| NO WINE ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD. THE WIND ZONE MUST BE PROVEN TO BE PERMITTED. | 1D |
| MEPORS THE MORH E HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED. AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT. | |
| A BOOK WALLES OF THE PROPERTY OF THE A BOOK WALLES OF THE PECTION ! | ! |
| ONCE M SVED INTO COLUMBIA COUNTY AN INSPECTION WAS PEGTION, NO PERMIT WILL BE ISSUED BEFORE THE MOUNTE HOME. CALL SME-T13-2038 TO SET UP THIS INSPECTION, NO PERMIT WILL BE ISSUED BEFORE THIS IS I ONE. 2-/9-09 | |
| 600 | |



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT



ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

09-0091

Page 1 of 3

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

| PERNIT NO. | 911.359 |
|-------------------------|---------|
| DATE PAID: FEE PAID: | 211307 |
| RECEIPT #: | 7098993 |

| 606 | WE TO | | | | | | | | |
|-------------------------------|--|--------------------------|------------------------|-----------------------|--------------------|------------|----------|---------------|--|
| [] ; | ATION FOR: New System Repair | [] 4k | arting sy andonment | etem | [] | Holding Ta | mje [| 3 | Innovative |
| APPLIC | ANT: <u>2015</u> | Biren | baum | | | _ | | | |
| AGENT: | | NIA | | | | | PET.EDHO | | 86-462-4993 |
| MAILING | address: 2 | 5414 1 | U.W. C | ounty | Rd- ¿ | 241 Ala | chaa, | £1_ | <u>326/5</u> |
| 22222 | | | | | | | | | |
| TO BE C | COMPLETED BY A ERSON LICENSED | PPLICANT (PURSUANT | R APPLICATION 489.10 | ANT'S AUC 05(3)(m) | CHORIZEI OR 489 | AGENT. S | (STEMS) | NUST UTES, | BE CONSTRUCTED |
| PROPERT | Y INFORMATION | | | | | | | ==== | • |
| LOT: | BLOCK: | 7.5 - 1 d | BDIVISION | 1. Sout | hlan | <u> </u> | | PL | 184 ATTED: B <u>KS pg 47</u> LENT: [Y / N] |
| PROPERT | Y ID #1 R09 | 957-03 | 3 | 20 | NING: | 5FA 1/1 | OR EQ | JIVAI | CENT: [Y/N] |
| TWO DILL | PIEE: 101 | ACRES WA | TER SUPPL | X: [] | PRIVATE | PUBLIC r | 1 <= 200 | 10000 | |
| TO DENE | R AVAILABLE AS | FER 381. | 0065, FS? | TY/N | 7 1 | · | | | |
| PAOPERT | ADDRESS: | | S.W. | Alpine. | Place | Cal | 1: 1 | - 1 | - 1 |
| | TA THOUGHT | Ti From C | K-236 A | read N c | on 441 | goroxuetal | . 2′ | 1 . | 1 A1 . NI |
| turn h | eft go st | raight a | nd it is | Lot n | et to | Last on t | he Ri | 561 | TO Alpina Place |
| | | | | | | | 140 | (KE | |
| BUILDING | 3 INFORMATION | | (X) RESI | DENTIAL | | [] COMME | RCIAL | | |
| Unit Ty | ype of Stablishment | | | Buildi | ng cor | | | onal -6,) | System Design |
| 2 | 001 Mobile t | i de | 3 | | | | | | |
| 2 | 1 200100 | pixt | | 1344 | <u> </u> | | | | |
| 3 - | | | | | | | | | |
| 4 | <u> </u> | | | - | | | | | |
| | Jan-17: : | | | | | | | | |
| | loor/Equipment | Drains | Oth | er (Spec | cify) | | N | | |
| SIGNATUR | | 1 | | | | | DATE | 2- | 12-09 |
| DH 40 ² Stock N | 15, 10/97 – Page 1 Number: 5744-001 | l (Previous e -4015-1 | ditions may | be used) | | · | | | Page 1 of 2 |

. . .

| Sent CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT |
|--|
| |
| DATE RECEIVED 2/2 9109 BYCT IS THE MIH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? 405 |
| OWNERS NAME LOIS BIREN BAUM PHONE 462-4993 CELL 352 339-6633 |
| ADDRESS 307 SW Alpine Place High Springs FC 32643 |
| MOBILE HOME PARK NIA SUBDIVISION SOUTH / And Lot & |
| DRIVING DIRECTIONS TO MOBILE HOME 4415, TR Alpine Place, |
| Dext to last on right, Emply tree'd lot |
| MOBILE HOME INSTALLER Steven COX PHONE 352 472 4562 CELL |
| MOBILE HOME INFORMATION |
| MAKE (-TOMELA) YEAR 2001 SIZE 28x 44 COLOR While SERVAL NO GMHGA 1220027049 AB |
| WIND ZONE I ALLOWED |
| INSPECTION STANDARDS |
| INTERIOR: (P of F) - P= PASS F= PAILED |
| SMOKE DETECTOR () OPERATIONAL () INIBBING |
| FLOORS () BOLID () WEAK () HOLES DAMAGED LOCATION |
| DOORS () OPERABLE () DAMAGED |
| - WALLS () SOLID () STRUCTURALLY UNSOUND |
| WINDOWS () OPERABLE () MOPERABLE |
| PLUMBING FIXTURES () OPERABLE () MISSING |
| CEILING () SOLID () HOLES () LEAKS APPARENT |
| ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT |
| EXTERIOR: |
| WALLS / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING |
| WINDOWS () CRACKEDI BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT |
| ROOF () APPEARS SOLID () DAMAGED |
| STATUS |
| APPROVED _ WITH CONDITIONS: Replace or repair glass on rear door- |
| NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS |
| The state of the s |
| SIGNATURE ALD SOUTH SOUTH ON SOUTH S |

SIGN PAGE 01/01

Columbia County Building Department Culvert Permit

Culvert Permit No.

000001714

| DATE $02/2$: | 5/2009 PARCEL ID # 09- | 7S-17-09957-033 | | | | | | |
|----------------|--|--|---|--|--|--|--|--|
| APPLICANT | LOIS BIRENBAUM | PHONE 38 | 6.462.4993 | | | | | |
| ADDRESS 25 | 5414 NW CR 241 | ALACHUA | FL 32615 | | | | | |
| OWNER LO | IS BIRENBAUM | PHONE 386 | 5.462.4993 | | | | | |
| ADDRESS 30 | 77 SW ALPINE PLACE | HIGH SPRINGS | FL 32643 | | | | | |
| CONTRACTO | R STEVEN COX | PHONE 35 | 2.472.6598 | | | | | |
| LOCATION OF | F PROPERTY 441-S TO ALPINE PL,TR KEEP | STRAIGHT & IT'S THE E | MPTY LOT NEXT TO | | | | | |
| LAST LOT ON R. | | | | | | | | |
| , | | | | | | | | |
| SUBDIVISION | LOT/BLOCK/PHASE/UNIT SOUTHLAND | | 8 | | | | | |
| CICNATURE | | | | | | | | |
| SIGNATURE | | | | | | | | |
| | INSTALLATION REQUIREMENTS | | | | | | | |
| X | Culvert size will be 18 inches in diameter widriving surface. Both ends will be mitered 4 thick reinforced concrete slab. | ith a total lenght of 32 fe foot with a 4 : 1 slope a | eet, leaving 24 feet of and poured with a 4 inch | | | | | |
| | INSTALLATION NOTE: Turnouts will be required as follows: a) a majority of the current and existing driveway turnouts are paved, or; b) the driveway to be served will be paved or formed with concrete. Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts. | | | | | | | |
| | Culvert installation shall conform to the ap | proved site plan standa | rds. | | | | | |
| | Department of Transportation Permit instal | llation approved standa | rds. | | | | | |
| | Other | | 2 | | | | | |
| | | | | | | | | |
| | FETY REQUIREMENTS SHOULD BE FOLLOW STALATION OF THE CULVERT. | ED | A COM | | | | | |

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

Amount Paid 25.00

