

DATE 03/17/2011

## Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029244

APPLICANT NATHAN SHEPHERD PHONE 386.935.1119  
ADDRESS 3729 NW 77TH PLACE BELL FL 32619  
OWNER NATHAN & BETTY SHEPHERD PHONE 386.935.1119  
ADDRESS 22243 SW SR 47 FT. WHITE FL 32038  
CONTRACTOR THOMAS BUTLER PHONE 352.258.0871  
LOCATION OF PROPERTY 47-S THRU FT. WHITE.....IT'LL BE THE 1ST. DRIVE N OF  
CORNERSTONE BAPTIST CHURCH ON THE L...BEFORE C-138.  
TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00  
HEATED FLOOR AREA                      TOTAL AREA                      HEIGHT                      STORIES                       
FOUNDATION                      WALLS                      ROOF PITCH                      FLOOR                       
LAND USE & ZONING                      MAX. HEIGHT                       
Minimum Set Back Requirments: STREET-FRONT                      REAR                      SIDE                       
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.                     

PARCEL ID 17-7S-16-04232-016 SUBDIVISION                       
LOT                      BLOCK                      PHASE                      UNIT                      TOTAL ACRES 2.00

IH1026502  
Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor                       
EXISTING                      11-100 BLK TC N  
Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                     

COMMENTS: SECTION 2.3.1 LEGAL LOT OF RECORD..REPLACING M/H.  
1 FOOT ABOVE ROAD.

Check # or Cash 3231

## FOR BUILDING &amp; ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power                      Foundation                      Monolithic                       
                     date/app. by                      date/app. by                      date/app. by                       
Under slab rough-in plumbing                      Slab                      Sheathing/Nailing                       
                     date/app. by                      date/app. by                      date/app. by                       
Framing                      Insulation                       
                     date/app. by                      date/app. by                       
Rough-in plumbing above slab and below wood floor                      Electrical rough-in                       
                     date/app. by                      date/app. by                       
Heat & Air Duct                      Peri. beam (Lintel)                      Pool                       
                     date/app. by                      date/app. by                      date/app. by                       
Permanent power                      C.O. Final                      Culvert                       
                     date/app. by                      date/app. by                      date/app. by                       
Pump pole                      Utility Pole                      M/H tie downs, blocking, electricity and plumbing                       
                     date/app. by                      date/app. by                      date/app. by                       
Reconnection                      RV                      Re-roof                       
                     date/app. by                      date/app. by                      date/app. by                     

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00  
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$                       
FLOOD DEVELOPMENT FEE \$                      FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$                      TOTAL FEE 325.00  
INSPECTORS OFFICE                      CLERKS OFFICE                     

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

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

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

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



**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

*For Office Use Only* (Revised 1-11) Zoning Official BK 2.03.11 Building Official T.C. 2-25-11

AP# 1102-49 Date Received 2/24 By JW Permit # 29244

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Section 2.3.1 legal lot & Record Replacing existing MH

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FEMA Map# N/A Elevation N/A Finished Floor 1' above Rd River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 11-100 ☒ EH Release ☒ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☒ State Road Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☒ VF Form

IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ ☒ Out County ☒ In County (N)

Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL \_\_\_\_\_ Impact Fees Suspended March 2009 \_\_\_\_\_

*Mr. Shepherd  
Has to sign  
August 5th*

Property ID # 17-75-16 04232-016 Subdivision \_\_\_\_\_

- New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 16x76 Year 1997
- Applicant NATHAN & BETTY SHEPHERD Phone # 386.935.1119 386-208-1204
- Address 3729 NW 77th PL, BELL, FL 32619
- Name of Property Owner Same as above Phone# 386.935.1119
- 911 Address 22243 SW SR 47, St. White, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Nathan & Betty Shepherd Phone # 386.935.1119  
Address 3729 NW 77th PL, BELL, FL 32619
- Relationship to Property Owner OWNERS
- Current Number of Dwellings on Property 1
- Lot Size \_\_\_\_\_ Total Acreage 2 Acres
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)  
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home YES
- Driving Directions to the Property 47-5 turn left white. APPROX 600 to 700 ft on before C-138 (1/2 mile North of Panola Ste River)  
1st DRIVE North of CORNELIUS BAPTIST CHURCH of 47-5 + C-138 on the
- Name of Licensed Dealer/Installer Thomas Butler Phone # 352.258.0871
- Installers Address 9709 SE 70th AVENUE, LANTANA, FL 32693
  - License Number TH 1026502 Installation Decal # 3326

Call 3231 \$325.00

left message 3-2-11  
Spoke to Nathan on 3-2-11

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to \_\_\_\_\_ psi or check here to declare 1000 lb. soil X without testing.

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

## POCKET PENETROMETER TESTING METHOD

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

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

## TORQUE PROBE TEST

The results of the torque probe test is ~~280~~ 280 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 6 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 understand 5 ft. anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

TR Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Thomas E Butler

Date Tested

2-11-11

## Electrical

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

## Plumbing

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

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

## Site Preparation

Debris and organic material removed ✓  
Water drainage: Natural ✓ Swale ✓ Pad X Other \_\_\_\_\_

## Fastening multi wide units

Floor: Type Fastener: NA Length: NA Spacing: NA  
Walls: Type Fastener: NA Length: NA Spacing: NA  
Roof: Type Fastener: NA Length: NA Spacing: NA  
For used homes: a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

## Gasket (weatherstripping mechanism)

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

Installer's initials TR

Type gasket NA

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

## Weatherproofing

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

## Miscellaneous

Skirting to be installed. Yes X No NA  
Dryer vent installed outside of skirting. Yes X N/A \_\_\_\_\_  
Range downflow vent installed outside of skirting. Yes X N/A X  
Drain lines supported at 4 foot intervals. Yes X  
Electrical crossovers protected. Yes X  
Other: \_\_\_\_\_

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

Installer Signature Thomas E Butler Date 2-11-11



## COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.  
Submit the originals with the packet.

Installer Shamey Butler License # IN 1026502

911 Address where home is being installed 8843 SW 5847  
Ft. White, FL 32038

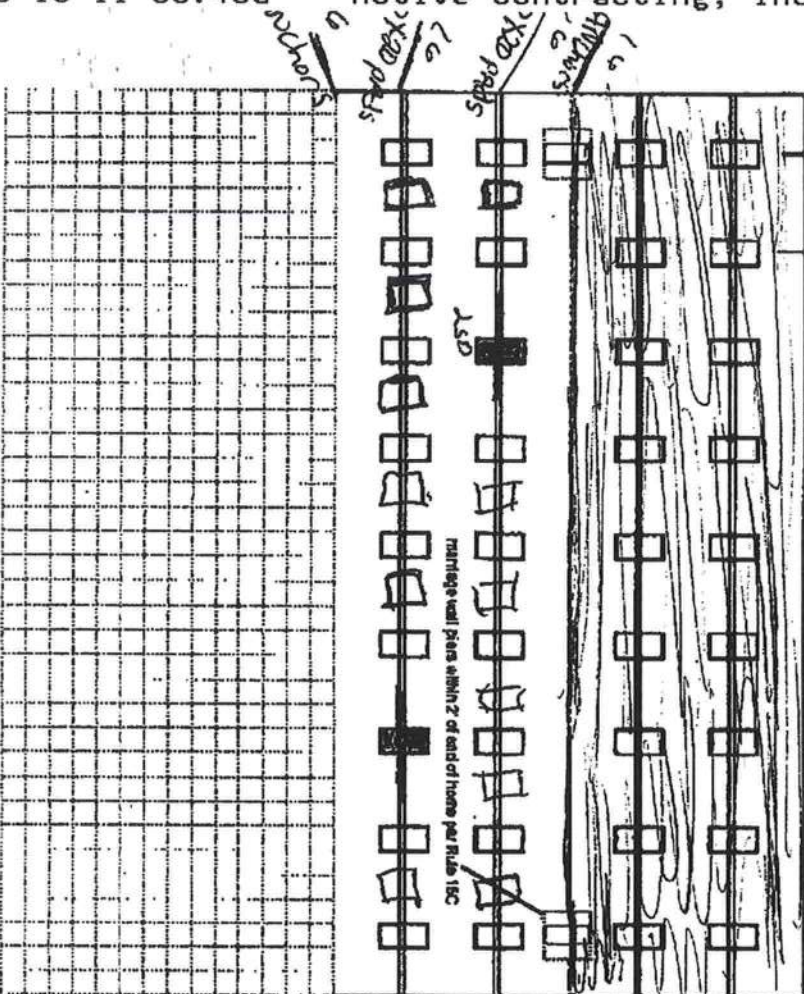
Manufacturer Bile Length x width 16x16

NOTE: If home is a single wide fill out one half of the blocking plan  
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used)  
where the sidewall ties exceed 5 ft 4 in.

Installer's Initials SB

Typical pier spacing 5'  
2'  
longitudinal  
lateral  
Show locations of Longitudinal and Lateral Systems  
(use dark lines to show these locations)



New Home ☐ Used Home ☒  
Home installed to the Manufacturer's Installation Manual ☐  
Home is installed in accordance with Rule 15-C ☐  
Single wide ☒ Wind Zone II ☒ Wind Zone III ☐  
Double wide ☐ Installation Decal # 3326  
Triple/Quad ☐ Serial # 496102205

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	18" x 18" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 sq ft	3"	4"	5"	6"	7"	8"
1500 sq ft	4" 8"	6"	7"	8"	9"	10"
2000 sq ft	6"	8"	9"	10"	11"	12"
2500 sq ft	7" 6"	9"	10"	11"	12"	13"
3000 sq ft	8"	10"	11"	12"	13"	14"
3500 sq ft	8"	10"	11"	12"	13"	14"

\* Interpolated from Rule 15C-1 pier spacing table.

## PIER PAD SIZES

20x20

Pad Size  
16 x 16 256  
16 x 18 288  
18.5 x 18.5 342  
16 x 22.5 360  
17 x 22 374  
13 1/4 x 26 1/4 348  
20 x 20 400  
17 3/16 x 25 3/16 441  
17 1/2 x 25 1/2 446  
24 x 24 576  
26 x 26 676

I-beam pier pad size  
Perimeter pier pad size  
Other pier pad sizes (required by the mfg.)

16x16  
X

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

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

Opening

Pier pad size

4 ft X 5 ft

FRAME TIES

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

## TIEDOWN COMPONENTS

OTHER TIES

Number

Longitudinal Stabilizing Device (LSD)  
Manufacturer Chuc Tech  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer Chuc Tech

Sidewall  
Longitudinal  
Marriage wall  
Shawwall

28  
LSD  
28  
28

**FAX  
MEMORANDUM****MEMORANDUM****FLORIDA DEPARTMENT OF TRANSPORTATION**

**To:** Mr. Randy Jones, Dept. Director  
Columbia Co. Building & Zoning Dept.  
**Fax No:** 386-758-2160

**From:** Dale L. Cray, FDOT Permits Insp.  
**Date:** 2-14-2010 **Fax No.** 386-961-7183  
**Attention:** Col Co. Building Zoning Dept.

☐ Sign and return. ☒ For your files. ☐ Please call me. ☒ FYI ☐ For Review

**REF:** Existing Driveway

**PROJECT:** Nathan & Betty J. Shepherd

**PARCEL ID No:** 17-7s-16-04232-016 **Permit No :** N/A **Sec No :** N/A

**MILE POST:** N/A

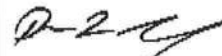
**Mr. Jones**

Please accept this as our legal notice of final passing inspection for Nathan & Betty J. Shepherd for an existing residential driveway. The project address is, 22343 SW State Rd 47 Ft. White.

The existing residential Access has been inspected and (Approved) and, meets FDOT Standard Requirements for a residential driveway.

If further information is required on this project please do not hesitate to contact this office for additional access permitting information details. My office number is 961-7193 or 961-7146.

Sincerely,



Dale L. Cray  
Access Permits Inspector





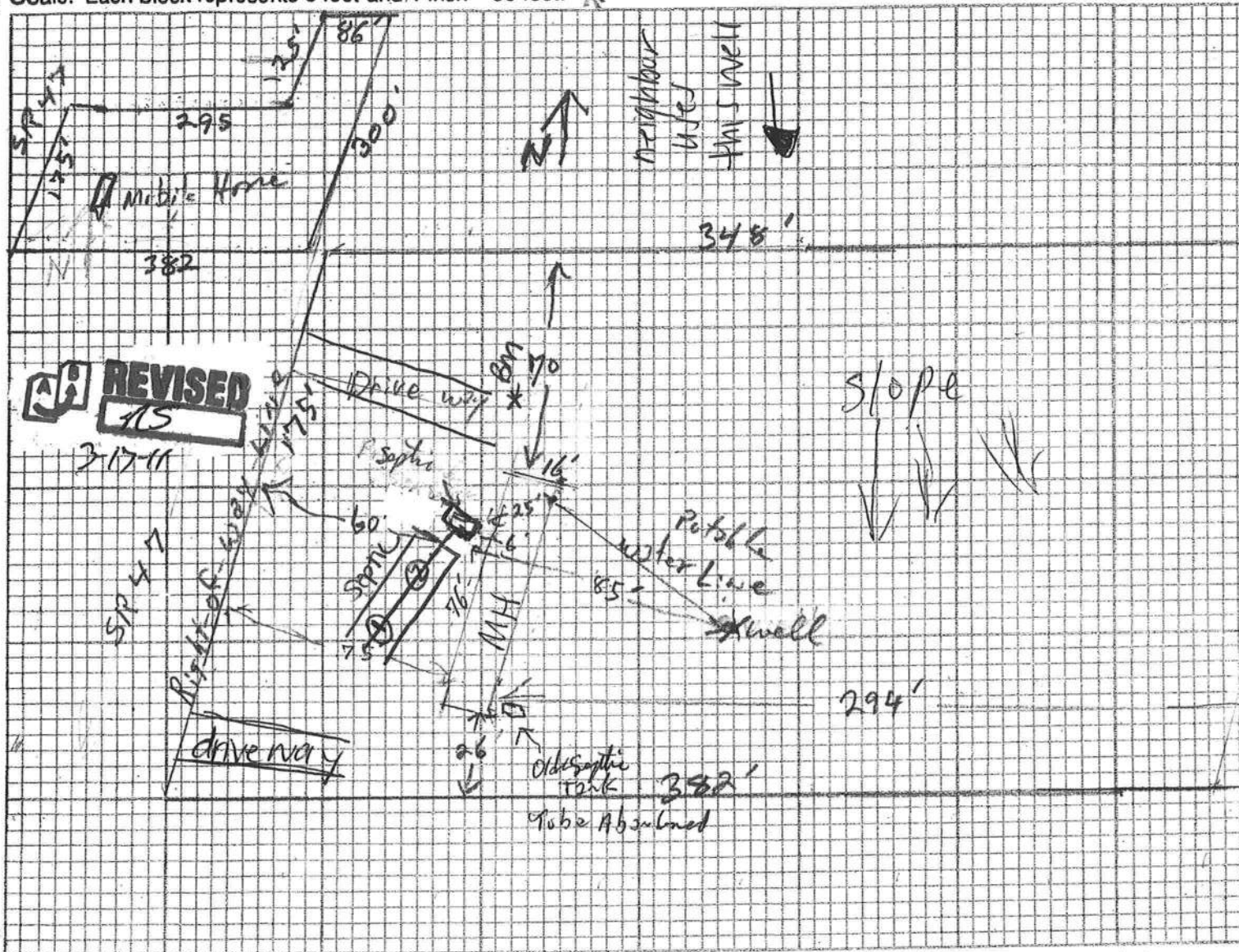
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-2100

PART II - SITE PLAN

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



Notes: Replacing 2 Bedroom mobile Home with 3 Bedroom mobile Home  
Installing new septic system.

Site Plan submitted by: Nathan Shepherd Duxon Feb. 24, 2011  
Signature Title  
Plan Approved X Not Approved \_\_\_\_\_  
Date 3-16-11  
By Salli Ford EH Director Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Thomas Butler PHONE 352-258-087

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

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

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

<b>ELECTRICAL</b>	Print Name <u>Nathan Shepherd</u> License #:	Signature <u>Nathan Shepherd</u> Phone #: <u>386.935.1119</u>
<b>MECHANICAL/ A/C</b>	Print Name <u>Nathan Shepherd</u> License #:	Signature <u>Nathan Shepherd</u> Phone #: <u>386.935.1119</u>
<b>PLUMBING/ GAS</b>	Print Name <u>Nathan Shepherd</u> License #:	Signature <u>Nathan Shepherd</u> Phone #: <u>386.935.1119</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE 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.



## Columbia County Property Appraiser

DB Last Updated: 1/6/2011

2010 Tax Year

Parcel: 17-7S-16-04232-016

&lt;&lt; Next Lower Parcel Next Higher Parcel &gt;&gt;

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

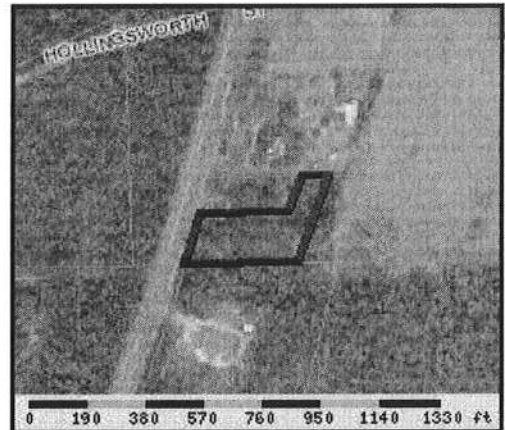
Interactive GIS Map

Print

### Owner & Property Info

Search Result: 1 of 1

<b>Owner's Name</b>	SHEPHERD NATHAN & BETTY J		
<b>Mailing Address</b>	3729 NW 77TH PLACE BELL, FL 32619		
<b>Site Address</b>	22243 SW STATE ROAD 47		
<b>Use Desc. (code)</b>	MOBILE HOM (000200)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	17716
<b>Land Area</b>	2.000 ACRES	<b>Market Area</b>	02
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM INTERS OF S LINE OF SEC & C/L OF SR-47 FOR POB, RUN N 175 FT, E 348.48 FT, N 125 FT, E 86.52 FT, S 300 FT, W 435 FT TO POB. ORB 438-221, LIFE EST ORB 772-1257, DC 1156-85 WD 1160-2277		



### Property & Assessment Values

2010 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$22,314.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (1)	\$2,278.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$24,592.00
<b>Just Value</b>		\$24,592.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$24,592.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$24,592 Other: \$24,592   Schl: \$24,592	

### 2011 Working Values

**NOTE:**  
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

### Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
10/16/2008	1160/2277	WD	I	U	03	\$15,000.00

### Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1970	BELOW AVG. (03)	672	672	\$2,278.00
<b>Note:</b> All S.F. calculations are based on exterior building dimensions.						

### Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

### Land Breakdown

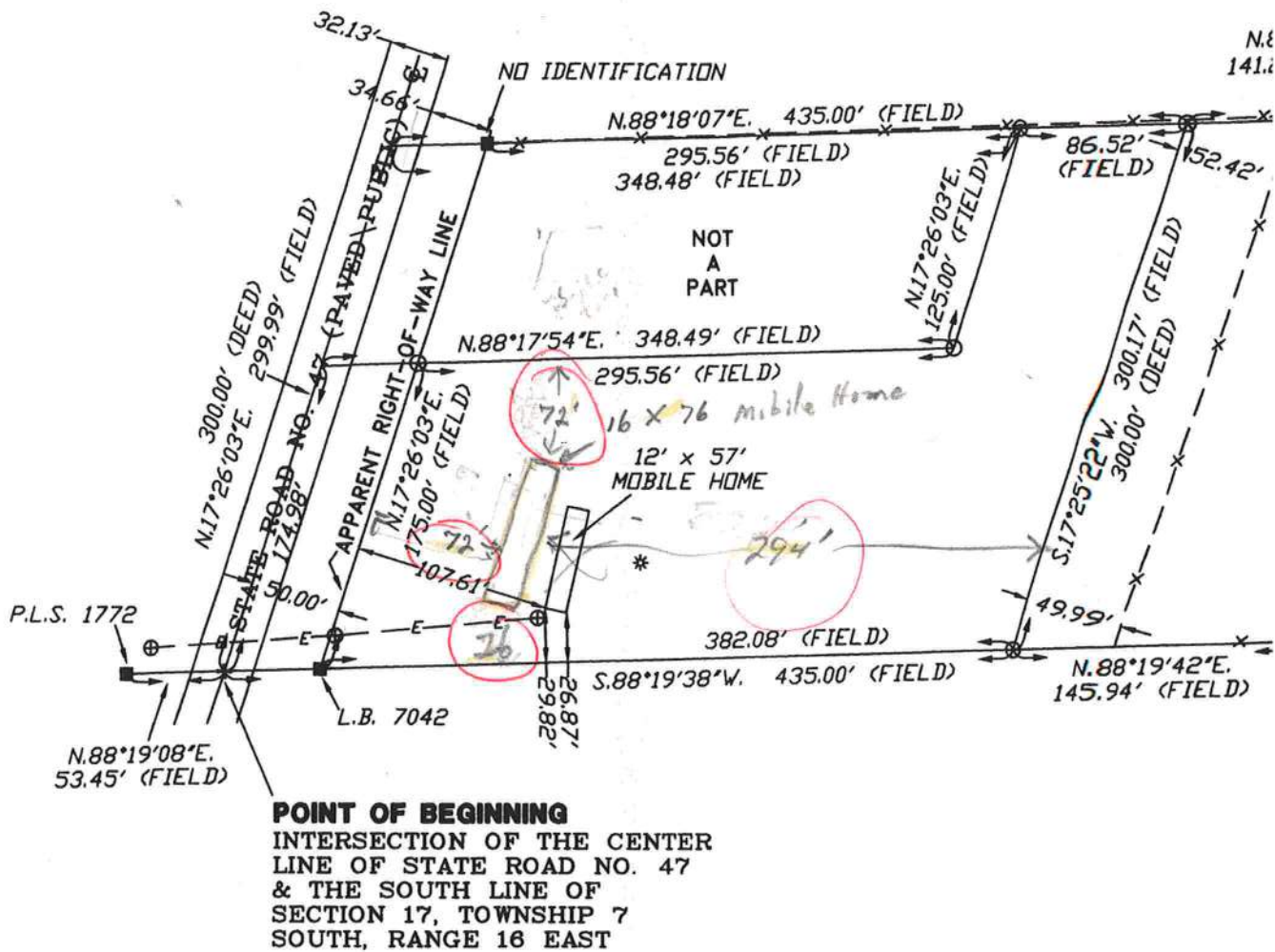
Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000102	SFR/MH (MKT)	2 AC	1.00/1.00/1.00/1.00	\$9,141.66	\$18,283.00



**SURVEYORS DESCRIPTION: (SEE NOTE # 7)**

BEGIN AT THE INTERSECTION OF THE CENTERLINE OF STATE ROAD NO. 47 AND THE SOUTH LINE OF SECTION 17, TOWNSHIP 7 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN N.17°26'03"E., ALONG SAID CENTERLINE, 174.98 FEET; THENCE N.88°17'54"E., 348.49 FEET; THENCE N.17°26'03"E., 125.00 FEET; THENCE N.88°18'07"E., 86.52 FEET; THENCE S.17°25'22"W., 300.17 FEET TO THE AFOREMENTIONED SOUTH LINE OF SECTION 17; THENCE S.88°19'38"W., ALONG SAID SOUTH LINE, 435.00 FEET TO THE POINT OF BEGINNING. CONTAINING 1.89 ACRES, MORE OR LESS.

SUBJECT TO EXISTING ROAD RIGHT-OF-WAY.



CERTIFIED TO:  
JOSEPH MARK WILLIAMS  
CAPITAL CITY BANK  
US TITLE  
FIDELITY NATIONAL TITLE INSURANCE COMPANY  
UNITED GENERAL TITLE INSURANCE COMPANY

FIELD BOOK: 307 PAGE(S): 06

SURVEYOR

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE IN ACCORDANCE WITH THE  
TECHNICAL STANDARDS AS SET FORTH BY THE BOARD OF SURVEYING AND MAPPING  
IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE.

07/10/08 07/29/08  
FIELD SURVEY DATE DRAWING DATE

NOTE: UNLESS IT BEARS THE SIGNATURE AND THE SEAL OF A LICENSED SURVEYOR, THIS DRAWING, SKETCH, PLAT OR MAP IS NOT VALID.

- NATHAN SHEPHERD -

---

**From:** Ron Croft  
**Sent:** Monday, February 14, 2011 11:05 AM  
**To:** Janice Williams  
**Subject:** RE: VERIFICATION ADDRESS

2/14/11

Waiting  
on JAL

22243 SW STATE ROAD 47, FORT WHITE, FL 32038 IS A VALID ADDRESS FOR A STRUCTURE ON PARCEL 04232-016.

*Ronal N. Croft*

Columbia County 911 Addressing / GIS Department  
P.O. Box 1787  
Lake City, FL 32056-1787  
Phone: 386-758-1125  
Fax: 386-758-1365  
E-Mail: [ron\\_croft@columbiacountyfla.com](mailto:ron_croft@columbiacountyfla.com)



D\_SearchResults

Page 1 of 2

## Columbia County Property Appraiser

DB Last Updated: 1/8/2011

**2010 Tax Year**

Parcel: 17-7S-16-04232-016

&lt;&lt; Next Lower Parcel Next Higher Parcel &gt;&gt;

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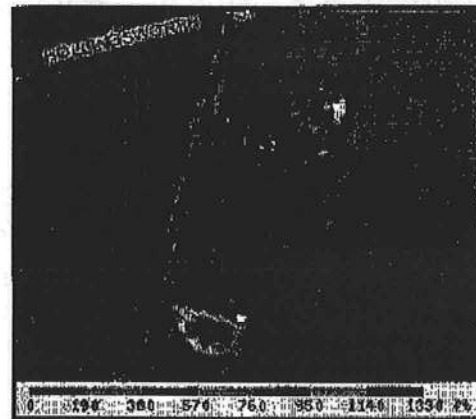
Interactive GIS Map

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NONE						

### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000102	SFR/MH (MKT)	2 AC	1.00/1.00/1.00/1.00	\$9,141.66	\$18,283.00

1102-49

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

COUNTY THE MOBILE HOME IS BEING MOVED FROM Nachua  
OWNERS NAME NATHAN Sheppard PHONE 386-935-1119 CELL  
INSTALLER Thomas Butler PHONE 352-258-0871 CELL 386-336-261  
INSTALLERS ADDRESS 9709 SE 70th Ave Timber FL 32693

MOBILE HOME INFORMATION

MAKE Bied YEAR 1997 SIZE 16 x 76  
COLOR Light Yellow/Blue SERIAL No. 4'610220J  
WIND ZONE 11 SMOKE DETECTOR X

INTERIOR:  
FLOORS good  
DOORS good  
WALLS good  
CABINETS good  
ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:  
WALLS / SIDING good  
WINDOWS good  
DOORS good

STATUS:  
APPROVED X NOT APPROVED

NOTES: Home is very good condition

INSTALLER OR INSPECTORS PRINTED NAME Thomas E. Butler

Installer/Inspector Signature Thomas E. Butler License No. TH-1026502 Date 2-14-11

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

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

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

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-712-2020 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature] Date 2-28-11





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, Thomas E Butler, give this authority for the job address show below  
Installer License Holder Name

only, 22243 SW Se 47th Way Ft 32039, and I do certify that  
Job Address

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

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

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

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

Thomas E Butler  
License Holders Signature (Notarized)

1H-1026502  
License Number

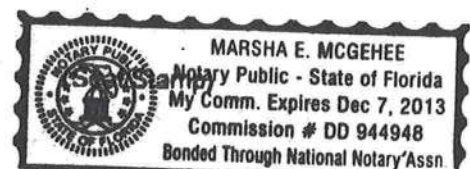
2/18/11  
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Alachua

The above license holder, whose name is Thomas E Butler,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) FDL B346-825-70-088 on this 18 day of February, 2011.

Marsha E McGehee  
NOTARY'S SIGNATURE





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

PERMIT NO. 995902  
DATE PAID: 3/04/11  
FEE PAID: 425.00  
RECEIPT #: 1563385  
11-100N

APPLICATION FOR:

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

APPLICANT: NATHAN SHEPHERD

AGENT: Owner

TELEPHONE: 386-208-1204

MAILING ADDRESS: 3729 NW 77 Place, Bell, FL. 32619

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: ☒ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 17-075-16-04232-016 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 2 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 22243 SW SR47, Fort white, FL. 32038

DIRECTIONS TO PROPERTY: SR 47 South thru Fort white. Approx 1/2 mile North of Seatelec River - on East side of Road - (1st drive way north of Corner Stone Baptist Church at Intersection of CR138 & SR47)

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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1	<u>Mobile Home</u>	<u>3</u>	<u>1200</u>	<u>Held for</u>
2				<u>Sunshine One, clear</u>
3				<u>3-3-11</u>
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: Nathan Shepherd DATE: 2-24-11



CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

1102.49

DATE RECEIVED 3/24 BY JW IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes  
OWNERS NAME Nathan Shepherd PHONE 829 351 1119 CELL \_\_\_\_\_  
ADDRESS 3729 SW St 47, Ft. White, FL 32038  
MOBILE HOME PARK \_\_\_\_\_ SUB DIVISION \_\_\_\_\_  
DRIVING DIRECTIONS TO MOBILE HOME 47.5 then turn right on 47th St. go to 700 ft. before  
C-138. -) 1st Drive North of Bangorstone Baptist Church.  
MOBILE HOME INSTALLER Thomas Butler PHONE 352 258 0871 CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE Bree YEAR 1997 SIZE 16 x 76 COLOR Light Yellow, Brown  
SERIAL No. 456102205  
WIND ZONE II Must be wind zone II or higher in WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P=PASS F=FAILED

☒ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING  
☒ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION  
☒ DOORS ( ) OPERABLE ( ) DAMAGED  
☒ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND  
☒ WINDOWS ( ) OPERABLE ( ) INOPERABLE  
☒ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING  
☒ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT  
☒ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT  
FIXTURES MISSING

\$50.00

Date of Payment: 2.29.11

Paid By: Nathan Shepherd

Notes: Unit 175 in County

THE SHOP

EXTERIOR:

☒ WALLS/SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING  
☒ WINDOWS ( ) CRACKED/BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT  
☒ ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS: \_\_\_\_\_

SIGNATURE Andy P. Powell ID NUMBER 402 DATE 3-14-11