

DATE 04/24/2003

Columbia County
Building Permit / Application

PERMIT

000020636

This Permit Expires One Year From Date of Issue

New Resident N

APPLICANT TERRY THRIFT PHONE 752.3743
ADDRESS _____ LAKE CITY _____ FL _____
OWNER CARSON & KATHLEEN MYERS PHONE 386.397.0725
ADDRESS 2477 SUWANNEE VALLEY ROAD LAKE CITY _____ FL 32052
CONTRACTOR TERRY THRIFT PHONE _____
LOCATION OF PROPERTY DRIVEWAY IS ON NORTHSIDE OF SUWANNEE VALLEY ROAD, 2337 FEET
WEST OF EVERETT ROAD. (41-N TO SUWANNEE VALLEY RD)
TYPE DEVELOPMENT M/H,SEPTIC,UTILITY ESTIMATED COST OF CONSTRUCTION .00
FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____ WALLS _____
FOUNDATION _____ ROOF (Type & Pitch) _____ FLOOR _____
LAND USE & ZONING ESA-2 MAX. HEIGHT _____
MINIMUM SET BACK: STREET-FRONT / SIDE 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE AE CERT. DATE _____ DEV. PERMIT 2303010

LEGAL DESCRIPTION

PARCEL ID 20-2S-16-01660-001 SUBDIVISION LEVINGS TRACT
BLOCK _____ LOT 1 UNIT _____ TOTAL ACRES 13.20

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

EXISTING _____ IH000036 _____
Driveway Connection _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
03-0289-N BLK HD
Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____
Under slab rough-in plumbing _____ slab _____ framing _____
date/app. by _____ date/app. by _____ date/app. by _____
Rough-in plumbing above slab and below wood floor _____
date/app. by _____
Electrical rough-in _____ Heat and Air Duct _____ Peri. beam _____
date/app. by _____ date/app. by _____ date/app. by _____
Permanent power _____ Final _____ Pool _____
date/app. by _____ date/app. by _____ date/app. by _____

COMMENTS: WASTE @ 91.50 & FIRE @ 34.02 10.00 D.P TOTALED 260.62 CK# 31452

OTHER TYPES OF INSPECTIONS

Culvert _____ M/H tie downs, blocking, electricity and plumbing _____
date/app. by _____ date/app. by _____
Utility Pole _____ Pump pole _____ Reconnection _____
date/app. by _____ date/app. by _____ date/app. by _____
BUILDING PERMIT FEE \$.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$.00 Surcharge \$.00
MISC. FEES \$ 100.00 CULVERT FEE \$ _____ TOTAL PERMIT FEE \$ 125.00
INSPECTORS OFFICE _____ CLERKS OFFICE CH

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

04/08/2003 13:11

3867582160

BLDG AND ZONING

PAGE 04

PERMIT APPLICATION

#20636

*** The well affidavit, from the well driller, is required before the permit can be issued.***
 This application must be completely filled out to be accepted. Incomplete applications will not be accepted.

For Office Use Only

Zoning Official BLK Building Official _____

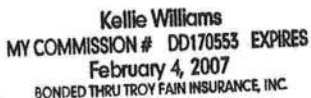
AP# 0304-32 Date Received 4-14-03 By ZM Permit # _____

Flood Zone AE Development Permit yes Zoning ESA-2 Land Use Plan Map Category ESA

Comments 8.8' NEED: 1' Rise and 1st Floor Elevation to be at 89'
Needs a 1ft. Rise Letter

- Property ID # 20-25-16-01660-001
~~12-5C-04-110-03-0289-11~~ (Must have a copy of the property deed)
- New Mobile Home Used Mobile Home Year 03
- Applicant Kathleen M Meyers Phone # 386-397-0725
- Address 2477 Suwannee Valley Rd Lake City, FL 32052
- Name of Property Owner Carson & Kathleen Meyers Phone # (386) 397-0725
- Address 2477 Suwannee Valley Road Lake City, FL 32052
- Name of Owner of Mobile Home Same as above Phone #
- Address
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 442' x 1300' Total Acreage 13.2 Acres
- Current Driveway connection is to Suwannee Valley Road (Existing)
- Is this Mobile Home Replacing an Existing Mobile Home No
- Name of Licensed Dealer/Installer TERRY L. THORP Phone # (886) 623-0115
- Installers Address P.O. Box 731 LAKE CITY, FL
- License Number TH-0000036 Installation Decal # 159434

The Permit Worksheet (2 pages) must be submitted with this application.
 Installers Affidavit and Letter of Authorization must be notarized when submitted.



app. ND
4-16-03**MOBILE HOME INSTALLER AFFIDAVIT**

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I, Terry L. Thrift, license number IH 0000036
Please Print
do hereby state that the installation of the manufactured home for Carson &
Kathleen Meyers at 2477 Suwanee Valley Road
applicant
911 Address
will be done under my supervision.

Terry L. Thrift
Signature

Sworn to and subscribed before me this 9 day of April,
2003

Notary Public: Kellie Williams
Signature

My Commission Expires: _____
Date



Kellie Williams
MY COMMISSION # DD170553 EXPIRES
February 4, 2007
BONDED THRU TROY FAIR INSURANCE, INC.

PERMIT WORKSHEET

page 1 of 2

PERMIT NUMBER

Trailer Terry L. Thiffa License # JH-0000036

Address of home being installed

2477 Swannee Valley Road

Manufacturer

Homes of Mass Length x width 71 x 32

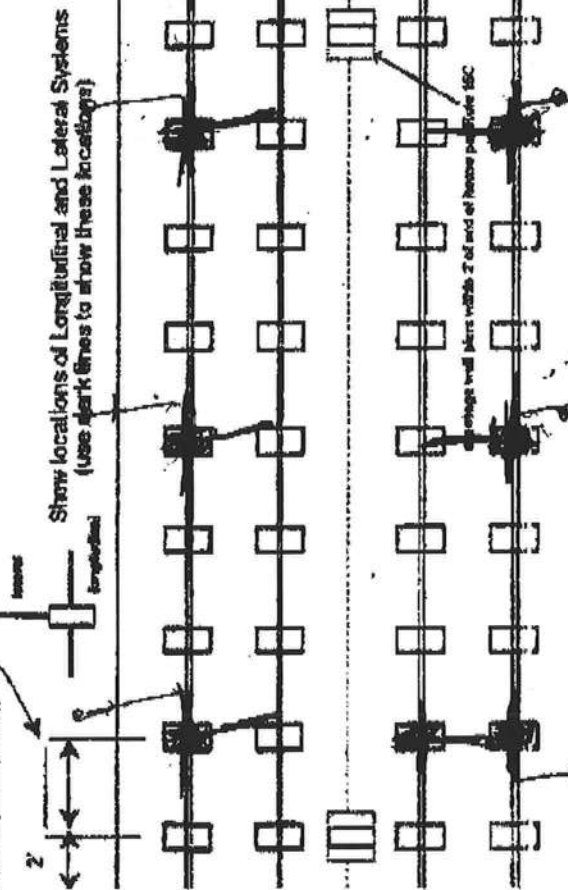
NOTE: If home is a single wide fill out one half of the blocking plan. If home is a triple or quad wide sketch in remainder of home.

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

TH

Typical pier spacing



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 Detail # 159434

Triple/Quad ☐ Serial # 27073 ANB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Feeder size (sq in)	16" x 16" (256)	18" 162" x 18" 12" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psf	3"	8'	8'	8'	8'	8'	8'
1500 psf	4"	8'	8'	8'	8'	8'	8'
2000 psf	5"	8'	8'	8'	8'	8'	8'
2500 psf	6"	8'	8'	8'	8'	8'	8'
3000 psf	7"	8'	8'	8'	8'	8'	8'
3500 psf	8"	8'	8'	8'	8'	8'	8'

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x22
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg.)

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 show pier pad sizes below.

Opening Pier pad size

13' 4" 17x22
6' 8" 17x22
5' 8" 8'4" 17x22

TIEDOWN COMPONENTS

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

5 ft

FRAME TIES

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

OTHER TIES

Number 28
Sidelap Longitudinal Marriage wall Shearwall

POPULAR PAD SIZES

Pad Size	Sq ft
10' x 16'	160
16' x 16'	256
18.5' x 18.5'	342
18' x 22.5'	400
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

PERMIT WORKSHEET

PERMIT NUMBER

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to the next whole number without testing.

x 2100 x 2200 x 2100

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the frame 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 2100 x 2100 x 2100

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

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

Installer's Initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

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

Electrical

Connect all sewer drains to an existing sewer line 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 _____ Other _____

Fastening multi-wire units

Floor: Type Fastener: 1/4" x 3" S&W Length: 6" 10" Spacing: 24" 0" 32" 0"
Wall: Type Fastener: Sinks Length: 20" Spacing: 32" 0"
Roof: Type Fastener: 1/4" x 3" S&W Length: 10" Spacing: 32" 0"
For used homes a min. 30 gauge, 8 wide, galvanized metal shiplap will be centered over the peak of the roof and fastened with plate roofing nails at 2' on center on both sides of the centerline.

Gas leak (pressure-testing trap assembly)

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

Installer's Initials

Type gasket Fan Tape

Installed: ☒ Between Floors ☒ Between Walls ☒ Bottom of Ridgebeam ☒

Weatherstripping

The bottomboard will be repaired and/or lapped. Yes ☒ No ☐
Sliding on units is installed to manufacturer's specifications. Yes ☒ No ☐
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒ No ☐

Waterproofing

Skirting to be installed. Yes ☒ No ☐
Dryer vent installed outside of skirting. Yes ☒ No ☐
Kerapac crossover vent (if required) installed. Yes ☒ No ☐
Drain lines supported at 4 foot intervals. Yes ☒ No ☐
Electrical crossovers protected. Yes ☒ No ☐
Other: _____

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

Installer Signature May L. May Date 4-8-03

32x71 BOX

Customer - MYERS

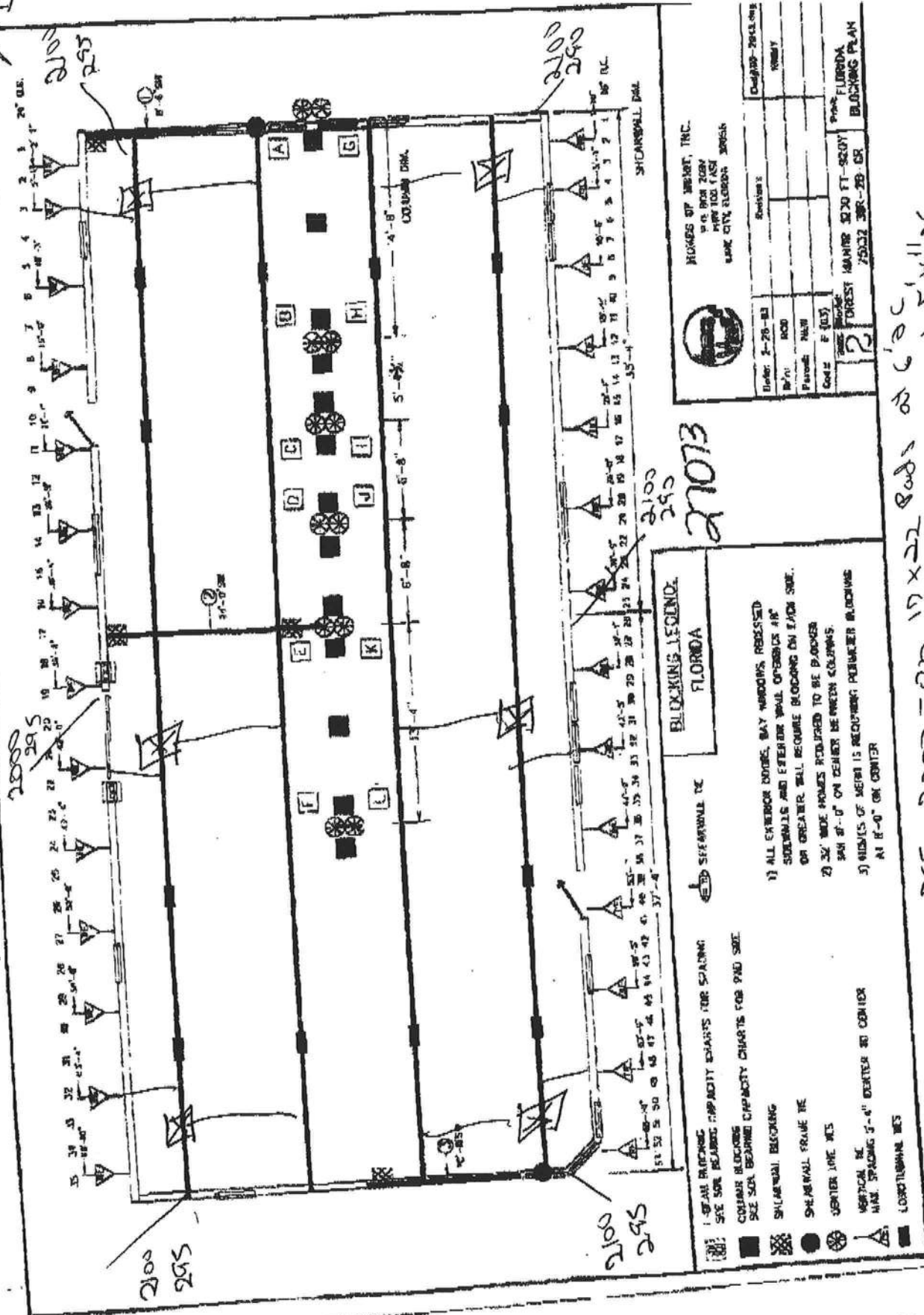
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IT-200036

0001/001

HONES OF MERIT

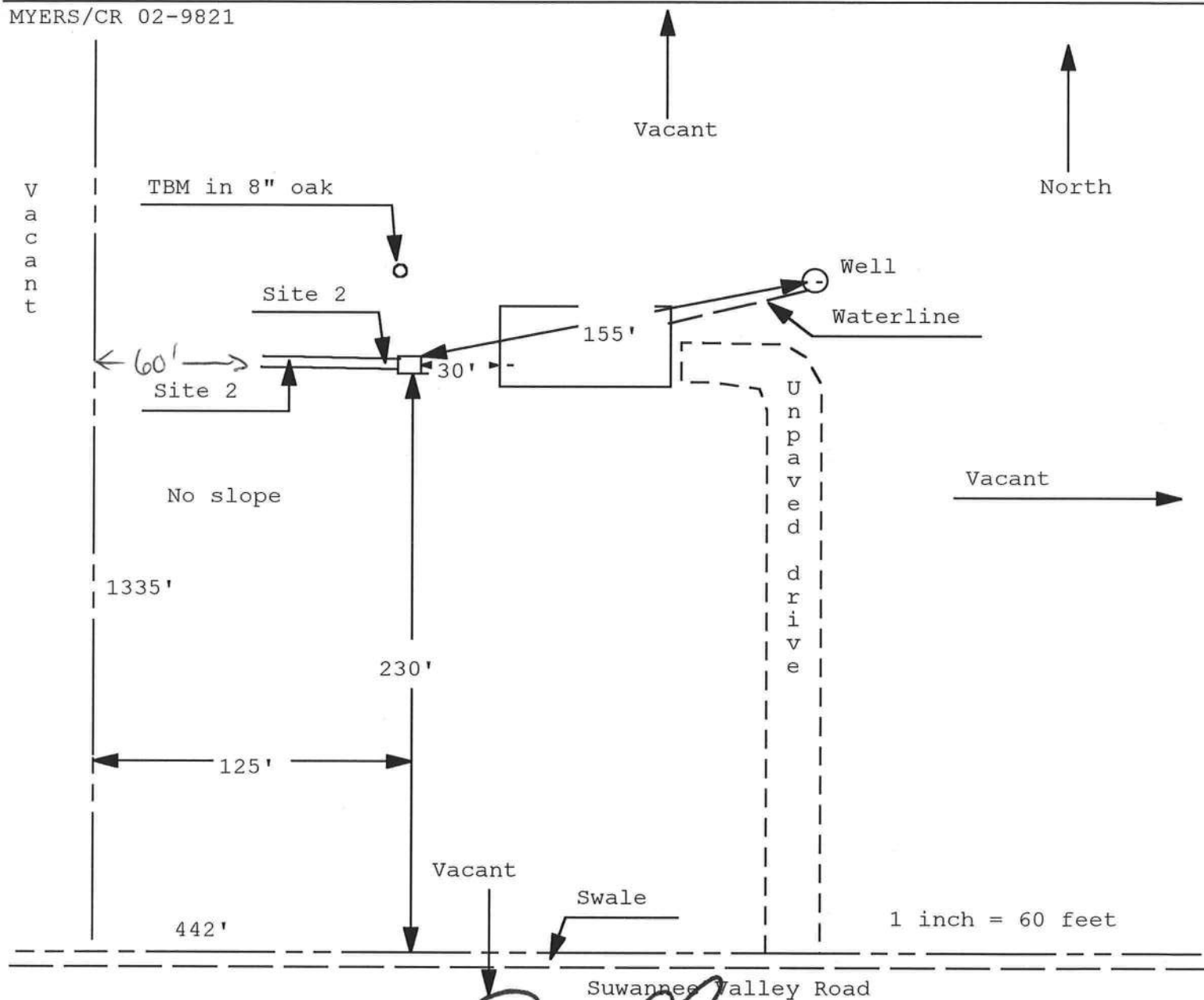
04/08/03 09:52 FAX 0047220660



PSF-2000 - on 17x22 Rods at 6" c/c
3000-290 with 4ft 3150 Above at 5' c/c

Permit Application Number: 03-0289N

MYERS/CR 02-9821



Site Plan Submitted By Paul Lopez Date 3/18/03
Plan Approved Not Approved Date 3/18/03

By Paul Hays / Ph. Hweeey ESH Columbia CPHU

Notes:

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
PHONE: (386) 752-8787 * FAX: (386) 758-1365 * Email: cc911add@isgroup.net

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 ISSUED: 3-17-03

ENHANCED 9-1-1 ADDRESS:

2477 NW Suwannee Valley Rd (Lake City, FL 32055)

Addressed Location 911 Phone Number: N/A

OCCUPANT NAME: Carson Meyers

OCCUPANT CURRENT MAILING ADDRESS: P.O. Box 434.
White Springs, FL, 32096.

PROPERTY APPRAISER MAP SHEET NUMBER: 18

PROPERTY APPRAISER PARCEL NUMBER: 20-25-16

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

ADDRESSING DEPARTMENT ID#: _____
(Addressing Department Use Only, THIS IS NOT AN ADDRESS)

Remarks: LOT 1, Unrecorded S/D

Address Issued By: 
Columbia County 9-1-1 Addressing Department

CONTRACT FOR SALE OF REAL ESTATE

2 / 24 2003

Chris A. Bullard As Seller, acknowledges receipt from
Carson S. Meyers and Kathleen M. Meyers Hereinafter called Buyer, the sum of
One Thousand (\$ 1,000.00) Dollars as deposit on account to purchase the
property of F. B. D. Incorporated Herein after called the Seller, and said property being
known as : Lot #1 of Levings Tract (13 acres) - See Schedule A for complete legal description
upon the conditions and terms as follows:

1. Full Purchase Price \$ 31,500.00 , payable \$ 31,500.00 , in cash, of which the above
deposit shall apply as part and shall be held by Seller pending closing of transaction, balance
payable in the following manner: Cash at closing. Closing to be on or before 4 / 24 / 03. Seller to
install a 4" well complete and ready to use, a septic tank and drain field suitable to handle a 3
bedroom 2 bath home and a 200 amp power pole with panel and meter can. Driveway culvert is
already installed and included in above price. Buyers to pay for any surveys required by lending
institution, all permits and hookups to the mobile home. Purchaser understands that portions of
this property are in Zone X and Zone AE as designated by FEMA's Flood Insurance Rate Maps.
Seller will pay for surveyor to establish a finished floor elevation for mobile home.

2. Seller agrees to provide Buyer, at Seller's expense, a title insurance policy binder in the
amount of the full purchase price mentioned herein. The binder will be delivered to Buyer within
10 days prior to closing.

In the event the title shall be proven to be unmerchantable, the Seller shall have 30 days after
notification thereof within which to cure defects in title. Upon Seller's failure to correct
unmerchantability within the time limit, the deposit shall be returned to the Buyer upon demand,
and all rights and liabilities arising hereunder shall terminate.

3. Seller agrees to convey title to the aforesaid property by Warranty Deed, free and clear of all
encumbrances or liens except easements of record.

4. The required documentary stamps shall be placed on the Warranty Deed by the Seller. The
Buyer shall properly execute any required notes and mortgages and place the required stamps
thereon.

5. All adjustments of taxes, insurance premiums, interest, property taxes and special
assessments or other items on the said property are to be made on a pro rata basis as of Closing.

6. This instrument shall become effective as a contract when signed by the Buyer and Seller.

7. No agreements, unless incorporated in this contract shall be binding upon the Buyer or
Seller.

Witnesses as to the signatures of Buyer

Above offer hereby confirmed by Buyer:

Carson S. Meyers

APPLICATION FOR DEVELOPMENT PERMIT

PERMIT NO. F-023-03-010
(COUNTY NO. & SEQUENCE)DATE: 4-24-03APPLICANT: Mike Collins
ADDRESS: Lake City, FL
TELEPHONE: (386) 752-3743
OWNER: Carson + Kathleen Meyers
ADDRESS: 2477 Suwannee Valley Rd, L.C. 32025
TELEPHONE: 397-0725

NEW SUBDIVISION _____

(YES/NO) (YES)IF YES, RECORD THE ENGINEER'S
REGISTRATION NO. P.E. NO. 56001Wm FreemanTRS 20-25-16ESUBDIVISION Levings Tract LOT/BLOCK: 1DU mobile home WORK _____RIVER: Suwannee River RIVER MILE _____

PLAN _____ (YES/NO) WELL PERMIT NO. _____

SUR-ELEVATION 87.5 SANITARY PERMIT NO. 03-0289-NSURVEYOR NO. ~~William Freeman~~ 5757 BUILDING PERMIT NO. 20636OFFICIAL 100-YEAR ELEVATION 88' MSL (SRWMD)REQUIRED LOWEST HABITABLE FLOOR ELEVATION 89' MSL (SRWMD)PERMIT APPROVED [Signature] 4-24-03
ADMINISTRATOR SIGNATURE DATEEXPIRATION DATE OF PERMIT 4-24-04

VIOLATIONS: _____ FINAL INSPECTION DATE: _____

COMMENTS: 1 ft. rise on site, Awaiting finished floor
Elevation Cert. before power.

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use
BUILDING OWNER'S NAME Carson Myers		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Company NAIC Number

CITY STATE ZIP CODE

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

A part of section 20, township 2 south, range 16 east, aka Lot 1 "Suwannee Valley Tracts"

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)

Residential

LATITUDE/LONGITUDE (OPTIONAL)
(##-##-##.## or ##.####)

HORIZONTAL DATUM:
☐ NAD 1927 ☐ NAD 1983

SOURCE: ☐ GPS (Type):
☐ USGS Quad Map ☐ Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 0270	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 69 ft

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

☐ FIS Profile ☐ FIRM ☒ Community Determined ☐ Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum _____ Conversion/Comments

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- ☐ a) Top of bottom floor (including basement or enclosure) 90.5 ft.(m)
- ☐ b) Top of next higher floor _____ ft.(m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
- ☐ d) Attached garage (top of slab) _____ ft.(m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) _____ ft.(m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 87.8 ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 87.9 ft.(m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade
- ☐ i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME L. Scott Britt LICENSE NUMBER P.S.M. #5757

TITLE Professional Surveyor and Mapper COMPANY NAME Britt Surveying

ADDRESS 830 W. Duval Street CITY Lake City STATE FL ZIP CODE 32055

SIGNATURE DATE 05/01/03 TELEPHONE (386) 752-7163

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

There is a mobile home on the property at this time.

Work Order# L13747

☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?

☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

____ ft.(m)

Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

____ ft.(m)

Datum:

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

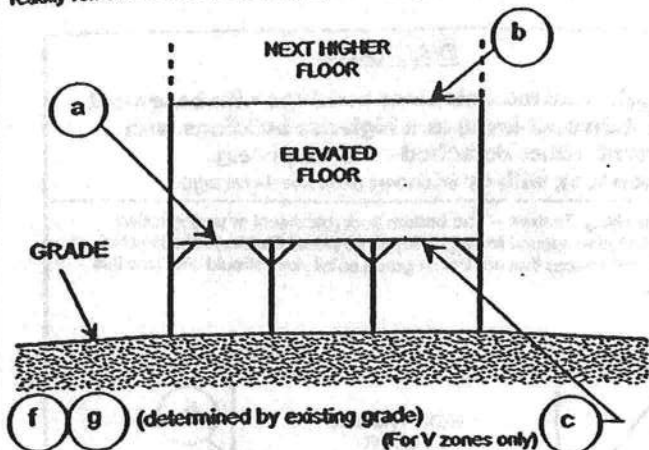
COMMENTS

☐ Check here if attachments

DIAGRAM 5

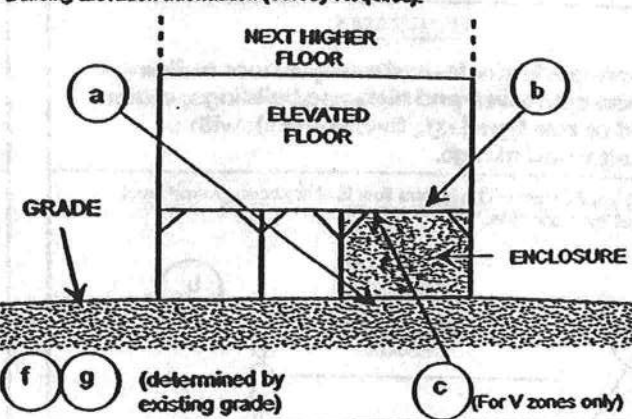
All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).

**DIAGRAM 6**

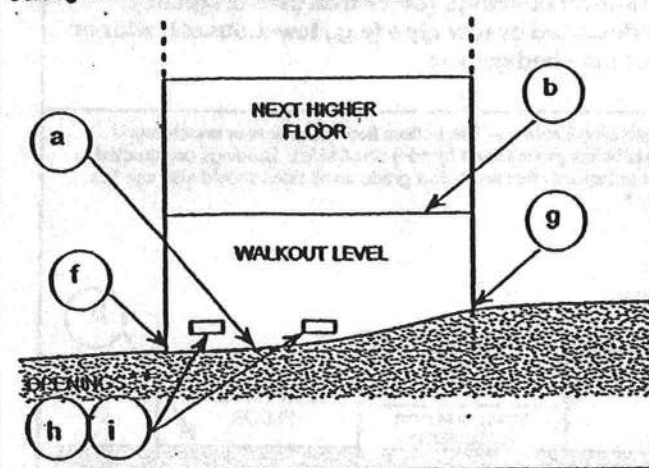
All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

**DIAGRAM 7**

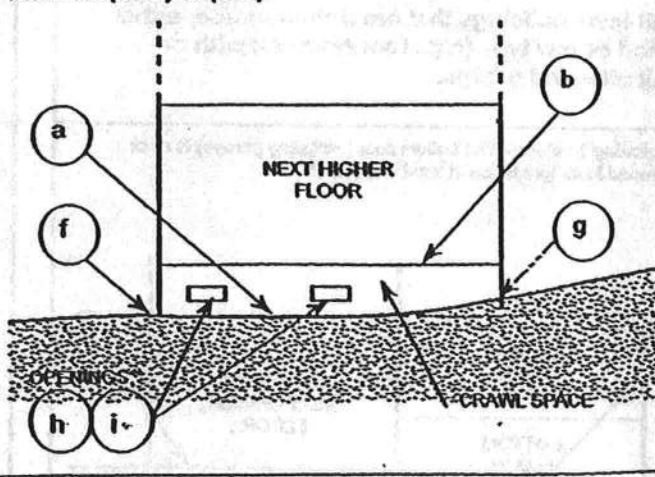
All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

**DIAGRAM 8**

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A Zones, the crawl space is with or without openings** present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



An "opening" (flood vent) is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered professional engineer or architect that the design will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening.



Engineers

Contractors

Designers

4/24/2003

Columbia County Building Department

To whom it may concern,

RE: Chris Bullard Properties

I have reviewed the conditions for Chris Bullard's property located on Suwannee Valley Road and have included calculations verifying that the placement of this mobile home will not cause the flood elevations to rise more than one foot. If you have any questions, please call me at (386) 758-4209.

Sincerely,

A handwritten signature in cursive script that reads "William H. Freeman".

William Freeman, P.E.

MOBILE HOME DIMENSIONS = 32 x 70

OF FRAME SUPPORT PIERS @ 6'-0" O.C. = 52

OF PERIMETER PIERS @ 8'-0" O.C. = 26

TOTAL PIERS = 78

SIZE OF PIERS 16" x 16"

BASE FLOOD ELEVATION = 28'-0"

AVERAGE HEIGHT OF PIERS TO BE
1'-0" ABOVE FLOOD ELEVATION = 32"

TOTAL VOLUME OF PIERS (1.78 x 78) = 139 CF

TOTAL AREA OF PROPERTY = 574838 SF

TOTAL RISE = $139 / 574838 = 0.000242$ SUMMARY

No appreciable impact on the property will occur

A RISE OF LESS THAN $1/32"$ IS EXPECTED

THIS IS NEGLIGIBLE

William H. Freeman
4/24/03

CONTRACT FOR SALE OF REAL ESTATE

2 / 24 2003

Chris A. Bullard As Seller, acknowledges receipt from
Carson S. Meyers and Kathleen M. Meyers Hereinafter called Buyer, the sum of
One Thousand (\$ 1,000.00) Dollars as deposit on account to purchase the
property of F. B. D. Incorporated Herein after called the Seller, and said property being
known as : Lot #1 of Levings Tract (13 acres) - See Schedule A for complete legal description
upon the conditions and terms as follows:

1. Full Purchase Price \$ 31,500.00 , payable \$ 31,500.00 , in cash, of which the above
deposit shall apply as part and shall be held by Seller pending closing of transaction, balance
payable in the following manner: Cash at closing. Closing to be on or before 4 / 24 / 03. Seller to
install a 4" well complete and ready to use, a septic tank and drain field suitable to handle a 3
bedroom 2 bath home and a 200 amp power pole with panel and meter can. Driveway culvert is
already installed and included in above price. Buyers to pay for any surveys required by lending
institution, all permits and hookups to the mobile home. Purchaser understands that portions of
this property are in Zone X and Zone AE as designated by FEMA's Flood Insurance Rate Maps.
Seller will pay for surveyor to establish a finished floor elevation for mobile home.

2. Seller agrees to provide Buyer, at Seller's expense, a title insurance policy binder in the
amount of the full purchase price mentioned herein. The binder will be delivered to Buyer within
10 days prior to closing.

In the event the title shall be proven to be unmerchantable, the Seller shall have 30 days after
notification thereof within which to cure defects in title. Upon Seller's failure to correct
unmerchantability within the time limit, the deposit shall be returned to the Buyer upon demand,
and all rights and liabilities arising hereunder shall terminate.

3. Seller agrees to convey title to the aforesaid property by Warranty Deed, free and clear of all
encumbrances or liens except easements of record.

4. The required documentary stamps shall be placed on the Warranty Deed by the Seller. The
Buyer shall properly execute any required notes and mortgages and place the required stamps
thereon.

5. All adjustments of taxes, insurance premiums, interest, property taxes and special
assessments or other items on the said property are to be made on a pro rata basis as of Closing.

6. This instrument shall become effective as a contract when signed by the Buyer and Seller.

7. No agreements, unless incorporated in this contract shall be binding upon the Buyer or
Seller.

Witnesses as to the signatures of Buyer

Witnesses as to the signatures of Seller

Above offer hereby confirmed by Buyer:

Carson S. Meyers
Kathleen M. Meyers

Accepted and approved this 24th day of
February, 2003.

Chris A. Bullard VP
Chris A. Bullard, Vice President

↳ 754-6699 - office
754-1389 - fax