

This Permit Expires One Year From the Date of Issue

APPLICANTJEFF HARDEE

PHONE352-949-0592

ADDRESS6450NW 72 LNC

CHIFLANDFL32626

OWNERMICHEAL HARDEE

PHONE904-463-2657

ADDRESS10148DEERWOOD CLUB RDC

JACKSONVILLEFL32256

CONTRACTOROWNER

PHONE

LOCATION OF PROPERTY441 N, L LASSIE BLACK, 1ST DRIVE ON RIGHT,  
THEN FOLLOW TREE LINE TO POLE

TYPE DEVELOPMENTRV PERMITESTIMATED COST OF CONSTRUCTION0.00

HEATED FLOOR AREATOTAL AREAHEIGHTSTORIES

FOUNDATIONWALLSROOF PITCHFLOOR

LAND USE & ZONINGA-3MAX. HEIGHT35

Minimum Set Back Requirments:STREET-FRONT30.00REAR25.00SIDE25.00

NO. EX.D.U.0FLOOD ZONEDEVELOPMENT PERMIT NO.

PARCEL ID17-2S-17-04723-008SUBDIVISION

LOTBLOCKPHASEUNITTOTAL ACRES9.80

Culvert Permit No.Culvert WaiverContractor's License NumberApplicant/Owner/Contractor

EXISTING06-0337-NBKLHY

Driveway ConnectionSeptic Tank NumberLU & Zoning checked byApproved for IssuanceNew Resident

COMMENTS: SIX MONTH TEMPORARY PERMIT ONLY, STUP APPROVED STUP 06-16 RV  
END OF 6 MONTHS RV MUST BE REMOVED FROM PROPERTY  
911 ADDRESS =217 NW LASSIE BLACK ST, WHITE SPRINGS, FL 32096Check # or Cash

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary PowerFoundationMonolithic

date/app. bydate/app. bydate/app. by

Under slab rough-in plumbingSlabSheathing/Nailing

date/app. bydate/app. bydate/app. by

FramingRough-in plumbing above slab and below wood floor

date/app. bydate/app. by

Electrical rough-inHeat & Air DuctPeri. beam (Lintel)

date/app. bydate/app. bydate/app. by

Permanent powerC.O. FinalCulvert

date/app. bydate/app. bydate/app. by

M/H tie downs, blocking, electricity and plumbingPool

date/app. bydate/app. by

ReconnectionPump poleUtility Pole

date/app. bydate/app. bydate/app. by

M/H PoleTravel TrailerRe-roof

date/app. bydate/app. bydate/app. by

BUILDING PERMIT FEE \$0.00CERTIFICATION FEE \$0.00SURCHARGE FEE \$0.00

MISC. FEES \$0.00ZONING CERT. FEE \$50.00FIRE FEE \$0.00WASTE FEE \$

FLOOD DEVELOPMENT FEE \$FLOOD ZONE FEE \$CULVERT FEE \$TOTAL FEE50.00

INSPECTORS OFFICECLERKS 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."

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.

24479

Temporary RV permits existing at the effective date of this amendment may be renewed for one (1) additional temporary permit in compliance with these land development regulations, as amended. Recreational vehicles as permitted in this section are not to include RV parks.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

1. Name of Title Holder(s) Michael Hardee

Address 10148 Deerwood Club RD City Jacksonville Zip Code 32256

Phone (904) 463-2657

**NOTE:** If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator **MUST** be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) Jeff Hardee

Address 6450 NW 72 Ln City Chicflaid Zip Code 32626

Phone (352) 949-0592

2. Size of Property 9.8 AC

3. Tax Parcel ID# 17-25-17-04723-008

4. Present Land Use Classification Agriculture #10

5. Present Zoning District A-g 3

MAY 03,2006 12:15A HARDEE ENVIRONMENTAL

3524906755

page 3

6. Proposed Temporary Use of Property RV

(Include the paragraph number the use applies under listed on Page 1 and 2)

7. Proposed Duration of Temporary Use 6 months

8. Attach Copy of Deed of Property.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

Michael A. Hardee  
Applicants Name (Print or Type)

M.A. Hardee  
Applicant Signature

5-3-06  
Date

Approved ✓ JA

OFFICIAL USE

Denied \_\_\_\_\_

06-16 RV

Reason for Denial \_\_\_\_\_

Conditions (if any) \_\_\_\_\_

PERMIT AUTHORIZATION

This is to certify that I, Michael A. Hardee, hereby give  
JEFF Hardee, dba Hardee Environmental & Permitting, permission  
to obtain permits for me including, but not limited to, building, septic and  
driveway permits, for my property located at parcel ID #

2006- R17-25-17-04723-008

M.A. Hardee  
Signature

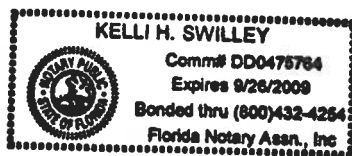
4-4-06  
Date

NOTARY

Before me personally appeared Michael A Hardee to be well known to  
me, to be the person described in and who executed the forgoing instrument, and  
acknowledged to and before me that he/she executed said instrument for the  
purpose therein this 8 day of may, 2006.

Kelli H. Swilley  
Notary Signature

SEAL ex. 9-26-07



           Presented ID  
           Drivers License #  
✓ Personally known

Property Control No.	148630 0540			DR-500AR R.01/93
		Tax Year <u>2005</u>		
Widow	Widower	Disability	Homestead GENERAL	Other

### Removal of Homestead Exemption(s)

☐ I no longer qualify for Homestead Exemption because the above property was not my permanent residence on January 1 of this year.

I no longer qualify for ☐ Widow ☐ Widower ☐ Disability Exemption(s)

**Do not return this form if you still qualify for the exemption(s)**

### Warning

Florida Law prescribes that it is the duty of the owner of any property to notify the property appraiser promptly whenever the use of the property or the status or condition of the owner changes so as to change the exempt status of the property. If any property owner fails to so notify the property appraiser and the property appraiser determines that for any year within the prior 10 years the owner was not entitled to receive such exemption, the property shall be subject to the taxes exempted as a result of such failure, plus 15 percent interest per annum and a penalty of 50 percent of the taxes exempted. Reference Sec. 196.131 and 196.161, F.S.

**Please remove the above exemption(s) from my property for the current year.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

JIM OVERTON  
DUVAL COUNTY PROPERTY APPRAISER  
231 E. FORSYTH STREET SUITE 270  
JACKSONVILLE, FL 32202-3361

PRESORTED  
FIRST-CLASS MAIL  
U.S. POSTAGE  
PAID  
JACKSONVILLE, FL  
PERMIT #1251

RECEIPT FOR 2005 TAX EXEMPTION RENEWAL RETURN SERVICE REQUESTED  
YEAR

Widow	Widower	Disability	Homestead GENERAL	Other
Legal Description	33-90 24-3S-27E DEERWOOD UNIT THREE LOT 6 BLK 15		Property Control No.	148630 0540

HARDEE, REILY & MICHAEL A 241 157619  
10148 DEERWOOD CLUB RD  
JACKSONVILLE FL 32256-7116



# 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: 4/20/2006 DATE ISSUED: 5/1/2006

### ENHANCED 9-1-1 ADDRESS:

217 NW LASSIE BLACK ST  
WHITE SPRINGS FL 32096  
PROPERTY APPRAISER PARCEL NUMBER:  
17-2S-17-04723-008

### Remarks:

441 N, (D) Lassie Black 1<sup>st</sup> Drive on (E)  
then follow tree line to pole.

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.**

213

COLUMBIA COUNTY  
9-1-1 ADDRESSING  
APPROVED



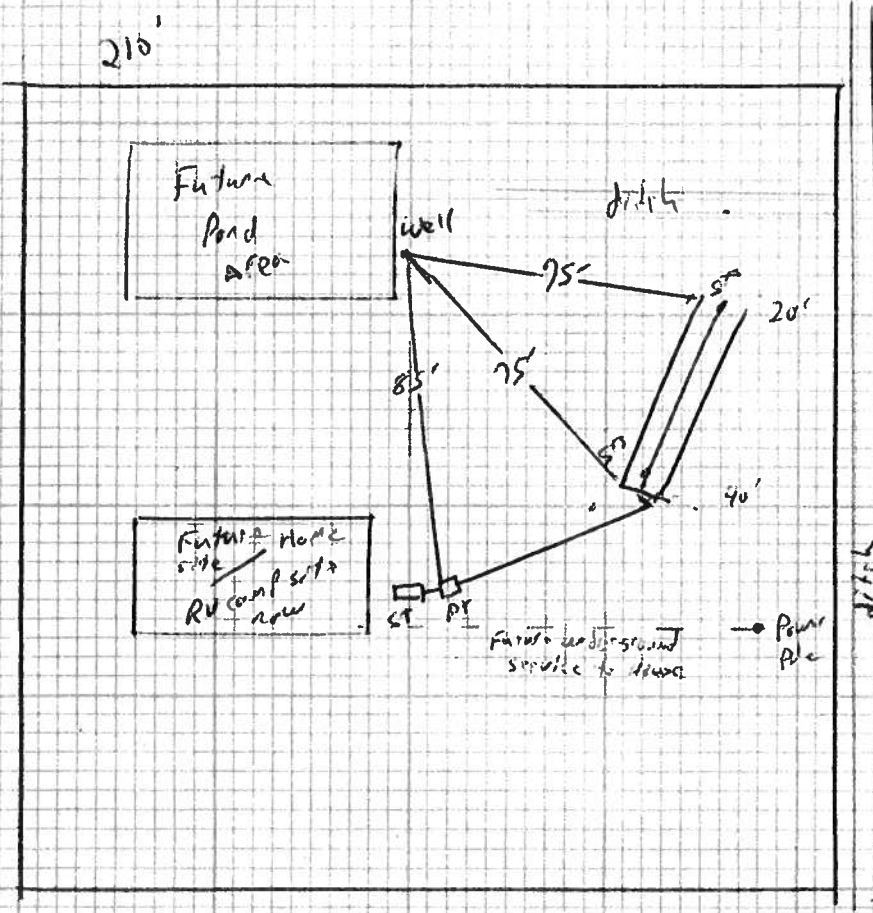
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-0337N

PART II - SITE PLAN

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



Notes:

Site Plan submitted by: M.A. Henderson Signature

Plan Approved ☒ Not Approved ☐

Title  
Date 4/14/07

By Mr. In Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT