

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>BLK</u> <u>06 DEC 2013</u>		Building Official <u>TM</u> <u>12/4/13</u>	
AP# <u>1312-03</u>	Date Received <u>12/2</u>	By <u>SW</u>	Permit # <u>31643</u>		
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>		
Comments <u>Previous MH was located on the property for this location as indicated by original septic tank permit in 1989 / replacing grandfathered in MH</u>					
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>above</u>	River <u>N/A</u>	In Floodway <u>N/A</u>	
☒ Site Plan with Setbacks Shown	☒ EH # <u>13-0573-E</u>	☐ EH-Release	☒ Well letter	☐ Existing well	
☒ Recorded Deed or Affidavit from land owner	☒ Installer Authorization	☐ State Rd Access	☐ 44-Sheet		
☐ Parent Parcel # _____	☐ STUP-MH _____	☐ F W Comp. letter	☒ App Fee Pd	☒ VE Form	
IMPACT FEES: EMS _____		Fire _____	Corr _____	☐ Out-County	☒ In County
Road/Code _____	School _____	= TOTAL	Suspended March 2009	☐ Ellisville Water Sys	

Property ID # 26-65-16-03943-002 Subdivision _____

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x60' Year 1987
- Applicant Jimmy Pease Phone # 352-727-1947
- Address 622 SW SHERRI CIRCLE, LAKE CITY, FL 32024
- Name of Property Owner Bruce Pease Phone# (386) 495-2017
- 911 Address 282 SW NEVERLAND WAY, FL 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 Barbara Pease Phone # (352) 478-5711
 Address 622 SW SHERRI CIRCLE, LAKE CITY FL 32024
- Relationship to Property Owner Niece
- Current Number of Dwellings on Property 1
- Lot Size 1 acre Total Acreage 10500
- 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 NO (owed)
- Driving Directions to the Property 475 to ELM CUREN Rd. TL
it's approx. 2 miles down on the R. - NEVERLAND way
- Name of Licensed Dealer/Installer FERNON JONES Phone # 352-318-4711
- Installers Address 6795 SW 71st AVENUE, LAKE BUTCH, FL 32054
 - License Number IA1025478 Installation Decal # 15489

12-6-13 Per Randy - Only the contractor can pick up this permit or he must meet with Randy before we issue the permit. \$1638.70

Sent 12-2-13 / T

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 Fern Jones License # IA1025418

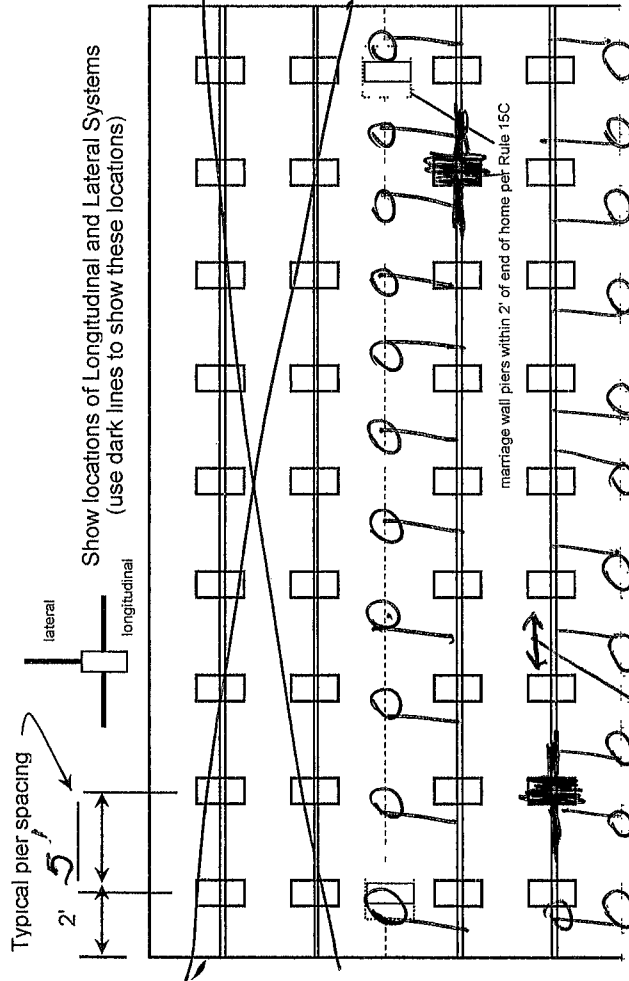
911 Address where home is being installed 282 SW NEVADA way
LA WILKES JR 30038

Manufacturer West Length x width 19x60

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 FJ



Pads 5' o.c.
Anchors 5'4 o.c.

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 # 15489
Triple/Quad ☐ Serial # AFLWFLAH15013735

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (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 psf	3'	4'	4'	5'	6'	7'	8'
1500 psf	4'	6'	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7'	8'	8'	8'	8'	8'	8'
3000 psf	8'	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 20x20
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg) N/A

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
<u>N/A</u>	
<u>N/A</u>	
<u>N/A</u>	

TIEDOWN COMPONENTS

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

POPULAR PAD SIZES

Pad Size	Sq In
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

ANCHORS

4 ft ☒ 5 ft

FRAME TIES

within 2' of end of home spaced at 5' 4" oc ☒

OTHER TIES

Number
3

Sidewall
Longitudinal
Marriage wall
Shearwall

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

X/500 X/500 X/500

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/500 X/500 X/2000

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 5 foot anchors

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I 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 requires anchors with 4000lb holding capacity

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 multi-wide units Pg 15

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg 15

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems Pg 15

Site Preparation

Debris and organic material removed _____
Water drainage Natural ☒ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor Type Fastener n/a Length _____ Spacing _____
Walls Type Fastener _____ Length _____ Spacing _____
Roof Type Fastener _____ Length _____ Spacing _____
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 (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled mamage 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

Type gasket n/a

Installed

Between Floors Yes n/a
Between Walls Yes n/a
Bottom of ridgebeam Yes n/a

Weatherproofing

The bottomboard will be repaired and/or taped Yes n/a Pg 17
Siding on units is installed to manufacturer's specifications Yes _____
Fireplace chimney installed so as not to allow intrusion of rain water Yes _____

Miscellaneous

Skirting to be installed Yes ☒ No _____
Dryer vent installed outside of skirting Yes ☒ N/A _____
Range downflow vent installed outside of skirting Yes _____ N/A _____
Drain lines supported at 4 foot intervals Yes ☒
Electrical crossovers protected Yes ☒
Other _____

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

Installer Signature

Date

This Warranty Deed Made the 3rd day of November A.D. 1997 by
BRYAN K HAYES AND WIFE CHERYL D HAYES

hereinafter called the grantor, to

BRUCE A PEASE

whose postoffice address is RT. 3, BOX 5585

FORT WHITE, FL 32038

hereinafter called the grantee;

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$ 10 00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida, viz. R03943-002 & R03949-003

SEE EXHIBIT 'A' ATTACHED HERETO AND BY REFERENCE MADE A PART HEREOF.

Documentary Tax \$ 280.00
Intangible Tax \$
P DeWitt Cas.
Clerk of Court
By *MLK*

97-16105

FILED AND RECORDED
1997 NOV -5 AM 11:52

CLERK OF COURT
COLUMBIA COUNTY, FLORIDA
BY *MLK*

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple, that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 1996

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence

Katherine Raymond
KATHERINE RAYMOND
STATE OF FLORIDA
COUNTY OF COLUMBIA

Bryan K Hayes
BRYAN K HAYES
Cheryl D Hayes
CHERYL D HAYES
RT 5, BOX 7888
STARKE, FL 32091

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared
BRYAN K HAYES AND WIFE CHERYL D. HAYES

to me known to be the person described in and who executed the foregoing instrument and
THEY acknowledged before me that THEY executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 3rd day of November A.D. 1997

MICHAEL H HARRELL
ABSTRACT & TITLE SERVICES, INC.
420 WEST BAY AVENUE
LAKE CITY, FL 32025
PURSUANT TO ISSUANCE OF TITLE INSURANCE



JOY C. NAPIER
COMMISSION # CC 659658
EXPIRES JUL 30, 2001
BONDED \$10,000
JOY C. NAPIER & COMPANY, INC.

Joy C. Napier
NOTARY PUBLIC
PERSONALLY KNOWN TO ME
PRODUCED IDENTIFICATION
FLORIDA DRIVER'S LICENSE

Exhibit "A"

BK 0848 PG 0896

TOWNSHIP 6 SOUTH, RANGE 16 EAST, SECTION 26: Commence at the NW corner of Section 26, Township 6 South, Range 16 East, Columbia County, Florida and run thence S 0°12'29" E along the West line of said Section 26, 408.33 feet to the Southwesterly right of way line of County Road C238, thence S 51°44'50" E along said right of way line, 125.86 feet to the POINT OF BEGINNING; thence continue S 51°44'50" E along said right of way line, 274.75 feet to the Point of Curve, thence Southeasterly along said curve concave to the right having a radius of 34,337.47 feet along a chord bearing S 51°37'50" E, 139.61 feet, thence S 0°12'29" E, 1213.87 feet; thence S 89°47'31" W, 324.28 feet; thence N 0°12'29" W, 1471.82 feet to the POINT OF BEGINNING.

Columbia County Property Appraiser

CAMA updated 9/23/2013

2013 Tax Year

Parcel: 26-6S-16-03943-002

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Owner & Property Info

<< Prev

Search Result 2 of 3

Next >>

Owner's Name	PEASE BRUCE A		
Mailing Address	3124 SW ELIM CHURCH RD FT WHITE, FL 32038		
Site Address	3124 SW ELIM CHURCH RD		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	26616
Land Area	10.000 ACRES	Market Area	02
Description	NOTE This description is not to be used as the Legal Description for this parcel in any legal transaction		
COMM NW COR OF SEC, RUN S 408.33 FT TO SWRLY R/W OF CR-238 RUN S 51 DEG E ALONG R/W 125.86 FT FOR POB CONT SE 414.36 FT S 1213.87 FT W 324.28 FT N 1471.82 FT TO POB ORB 848-895			



Property & Assessment Values

2013 Certified Values		
Mkt Land Value	cnt (0)	\$46,505.00
Ag Land Value	cnt (3)	\$0.00
Building Value	cnt (1)	\$4,734.00
XFOB Value	cnt. (3)	\$850.00
Total Appraised Value		\$52,089.00
Just Value		\$52,089.00
Class Value		\$0.00
Assessed Value		\$46,951.00
Exempt Value	(code HX H3)	\$25,000.00
Total Taxable Value		Cnty. \$21,951 Other: \$21,951 Schl: \$21,951

2014 Working Values

NOTE:

2014 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
11/3/1997	848/895	WD	I	Q		\$40,000.00
12/1/1986	609/59	AD	V	U	01	\$27,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1974	BELOW AVG. (03)	1288	1288	\$4,734.00
Note: All S F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	1993	\$300.00	0000001.000	0 x 0 x 0	(000.00)
0285	SALVAGE	1993	\$500.00	0000001.000	0 x 0 x 0	(000.00)
0169	FENCE/WOOD	2010	\$50.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	10 AC	1.00/1.00/1.00/1.00	\$4,375.54	\$43,755.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00
009947	SEPTIC (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$750.00	\$750.00

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: 11/5/2013 DATE ISSUED: 11/7/2013

ENHANCED 9-1-1 ADDRESS:

282 SW NEVERLAND WAY

FORT WHITE FL 32038

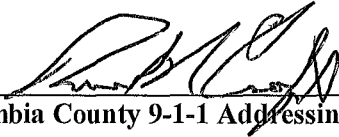
PROPERTY APPRAISER PARCEL NUMBER:

26-6S-16-03943-002

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL. 2ND LOCATION ON PARCEL.

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.



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

PERMIT NO. 13-8573E
DATE PAID: 11/4/13
FEE PAID: 60.00
RECEIPT #: _____

APPLICATION FOR:

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

WNER APPLICANT: Grace Pease

AGENT: Jimmy Pease

TELEPHONE: _____

MAILING ADDRESS: 622 SW Sherris St Lake City FL 32024

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: 11A BLOCK: 11A SUBDIVISION: 11A PLATTED: _____

PROPERTY ID #: 26-65-16 03943-002 ZONING: Ag I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 10 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] ≤ 2000 GPD [] > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: 11A FT

PROPERTY ADDRESS: 3124 SW Elm Church Rd. Fort White FL 32038

DIRECTIONS TO PROPERTY: Hwy 47 South to Elm Church Road. Take left to property on Right

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
1	<u>SFR</u>	<u>2</u>	<u>840 ft²</u>	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: [Signature]

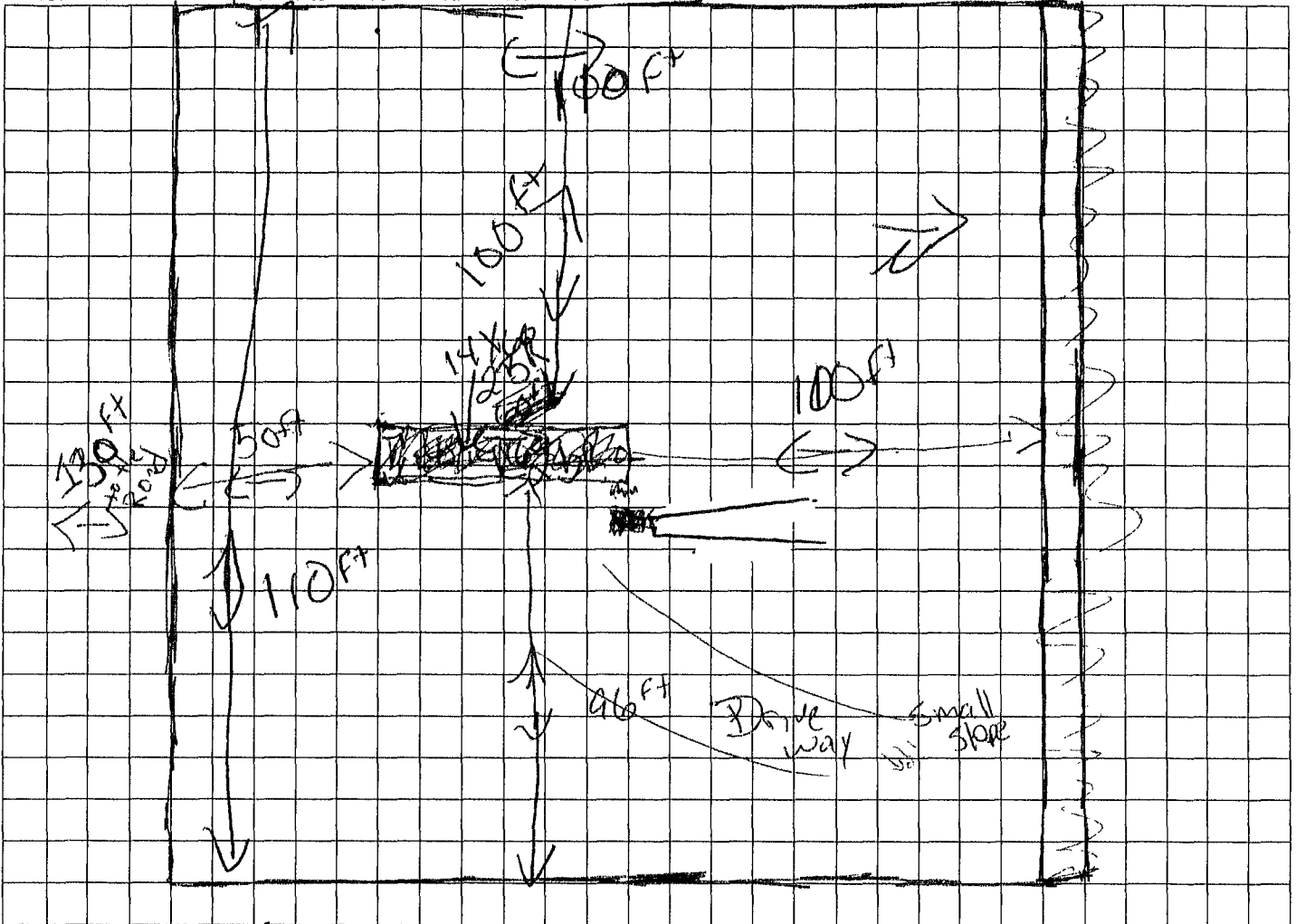
DATE: 11/4/13

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-8573E

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes 14' x 20' to be 14' x 70'

Site Plan submitted by X Agent
Plan Approved X Not Approved _____
By Columbia Date 11/4/13
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 131205 CONTRACTOR FEMON STORES PHONE 352.318.4711

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.

ELECTRICAL	Print Name <u>Jimmy Pease</u> License #:	Signature <u>[Signature]</u> Phone #: <u>352 727 1947</u>
MECHANICAL/ A/C	Print Name <u>Jimmy Pease</u> License #:	Signature <u>[Signature]</u> Phone #: <u>352 727 1947</u>
PLUMBING/ GAS	Print Name <u>Jimmy Pease</u> License #:	Signature <u>[Signature]</u> Phone #: <u>352 727 1947</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.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1312-03

DATE RECEIVED 12/2 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES
OWNERS NAME Barbara PEASE PHONE _____ CELL 352-478-5711
ADDRESS 282 SW NEVERLAND WAY, Ft. WALES, FL 32038

MOBILE HOME PARK _____ SUBDIVISION _____
DRIVING DIRECTIONS TO MOBILE HOME 47.5 TO ELM CHURCH RD, TL AND IT'S
APPROX. 2 MILES DOWN ON THE R - (NEW PRIVATE ROAD JUST APPROVED) -

MOBILE HOME INSTALLER FERNON JONES PHONE _____ CELL 352-316-4711

MOBILE HOME INFORMATION

MAKE WEST YEAR 1987 SIZE 14 x 60 COLOR LAN
SERIAL No. AFLWFIAH150713735

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

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

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

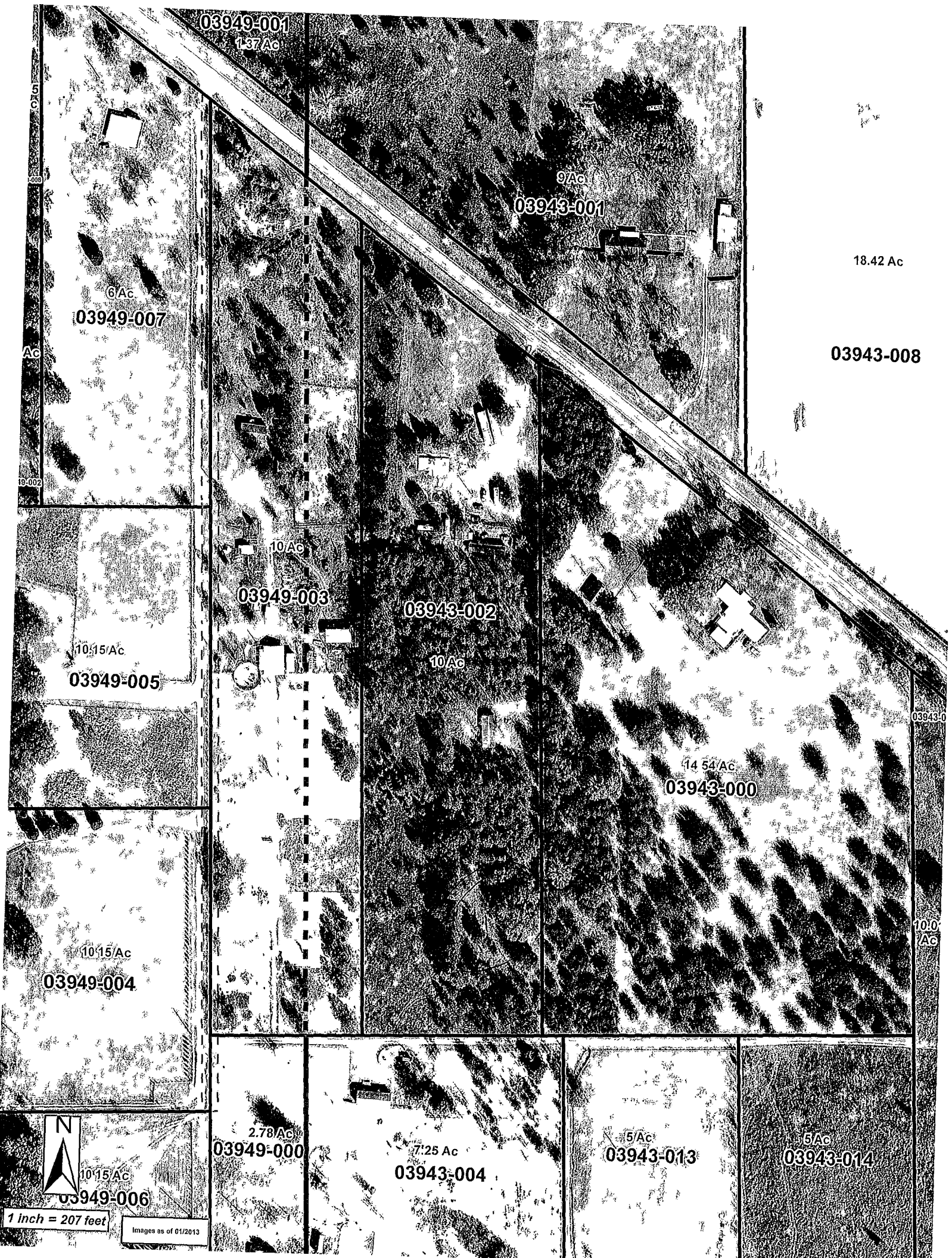
EXTERIOR:

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

STATUS

APPROVED ☒ WITH CONDITIONS: Make necessary repairs.
NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE J. Jones ID NUMBER _____ DATE _____



1 inch = 207 feet

Images as of 01/2013

03949-001

1.37 Ac

9 Ac

03943-001

18.42 Ac

03943-008

6 Ac

03949-007

10 Ac

03949-003

10.15 Ac

03949-005

03943-002

10 Ac

14.54 Ac

03943-000

03943-0

10.15 Ac

03949-004

10.0' Ac

2.78 Ac

03949-000

7.25 Ac

03943-004

5 Ac

03943-013

5 Ac

03943-014

10.15 Ac

03949-006



1 inch = 207 feet

Images as of 01/2013



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, Fernon Jones, give this authority for the job address show below
Installer License Holder Name

only, 282 SW Neverland Way Ft White, FL 32038, 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)
Jimmy Pease		☒ Agent ☐ Officer ☒ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ 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.

Fernon Jones 1H1025418 12-12-13
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is _____, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 12 day of 12, 20 13.

L. H.
NOTARY'S SIGNATURE

