For Office Use Only (Revised 7-1-15) Zoning Official Building Official AP# 1806-14 Date Received 6/6/18 By Fermit # 36863
Flood Zon X :velopment Permit Zoning A Land Use Plan Map Category A
Comments Comments
FEMA Map# Elevation Finished Floor River In Floodway
© Recorded Deed or □ Property Appraiser PO
Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
□ DOT Approval Z Parent Parcel # 00330 - 007 □ STUP-MH _ 911 App
□ Ellisville Water Sys Assessment <u>Owês</u> □ Out County □ to County
□ Out County □ th County □ Sub VF Form
Property ID # <u>02- 45-15-00330-007</u> Subdivision <u>N/A</u> . Lot#_^
New Mobile Home Used Mobile Home MH Size 28156 Year 2018
Applicant Paul BARNEY Phone # 386 - 209 - 0906
Address 466 SW DEP. J. DAVIS LN, LAKE CITY, FL 32024
Name of Property Owner MILLER, EmmA Phone# 386-752-5786
911 Address 2307 &W. KOONFILLE AVE, LAKE CITY, FL 32024
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home MILLER、Emma Phone # 386 - 75コー5フ 86
Address 2397 S.W. KOONVILLE AVE, LAKE CITY, FL 32024
Relationship to Property Owner SELF
Current Number of Dwellings on Property
Lot Size 1041 X 210' Total Acreage 5.02
Do you : Have Existing Drive or private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home <i>No</i>
Driving Directions to the Property US-90 WEST TO KOON VILLE AUE T/L 6
SOUTH ON KOONVILLE AVE APPROX 3 MILES TO SITE ON LEFT, NEX
DOOR (NORTH OF) 2397 S.W. KOONVILLE AVE.
Name of Licensed Dealer/Installer PAUL E ALBRIGHT Phone # 386-365-5314
Installers Address 199 SW THOMAS TERR. LAKE CITY, FL 32024
Installers Address 199 SW THOMAS TERR. LAKE C.TY, FL 32024 License Number 1 H - 1025239 Installation Decal # 48895
- 10(1 440 1 1 1 D M)

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

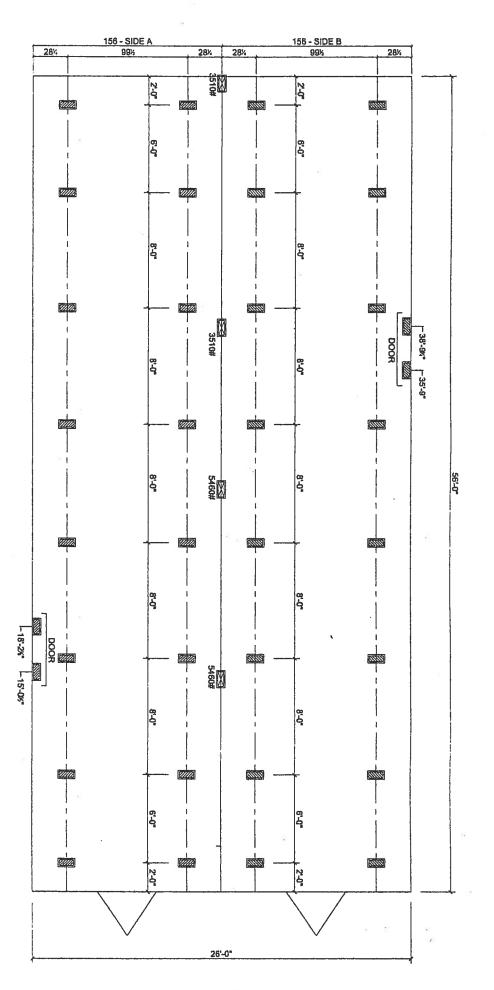
	Parriage wall piers within 2" of end of home ped Rule 15C	Jutor Dagram in Jacket	Typical pier spacing lateral Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. Installer's initials		32024	Installer FAUL E. ALBRIGHT License # 141035339
Opening Pier pad size 4 ft EXT 5 ft Confidence of the spaced at 5 ft congitudinal Stabilizing Device (LSD) Anchors Anchors Anchors FRAME TIES within 2' of end of home spaced at 5' 4" oc OTHER TIES Number Number Sidewall Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Manufacturer Manufacturer Manufacturer	26	5C-1 pier spacing table. PAD SIZES 16 x 16 x 16 x 18 16 x 27 5 5	16" 18 1/2" x 18 20' 3) 1/2" (342) (4' 6' 8'	PIER SPACING TABLE FOR USED HOMES	Double wide Wind Zone Wind Zone	lled to the Manufacturer's Insta	New Home Used Home

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Plumbing Connect all sewer drains to an existing sewer tap or septic tank - Po	Electrical Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.	Date Tested	ALL TESTS MUST BE PERFORMED BY A LIGHTS INSTALLER	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 the points where the torque test reading is 275 or less and where the mobile home manufacturer.	TORQUE PROBE TEST The results of the torque probe test is 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.	× 1560 × 1560 × 1500	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. 	or check here to declare 1000 lb. soil without testing. x 1500 x 1500 x 1500 x 1500	NETROMETER
Installer Signature	Installer verifies all information given with this permit worksheet is accurate and true based on the	Other:	Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossover protected.	The bottomboard will be repaired and/or taped. Yes Pq Pq Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	1 49	Type gasket L. R. Installed: Pg Installed: Between Floors Yes Between Walls Yes	homes and that condensation, mold, meldew 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.	Gasket (weatherproofing requirement)	Walls: Type Fastener: Lay Length: Spacing: 16th Spacing: Type Fastener: Lay Length: Spacing: 15th Sp	drainage: Natural Swale Fastening multi wid	Site Preparation

SPRINTER



Live Oak Homes

MODEL: L-2563G - 28 X 56 3-BEDROOM / 2-BATH

FOUNDATION NOTES:

SUPPORT PIER/TYP

MARRIAGE LINE OPENING SUPPORT PIER/TYP

1-9-2014

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS. FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC. FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

- (A) MAIN ELECTRICAL
 (B) ELECTRICAL CROSS
 (C) WATER INLET
 (D) WATER CROSSOVER
 (E) GAS INLET (IF ANY)
 (F) GAS CROSSOVER (II

 - MAIN ELECTRICAL

 (G) DUCT CROSSOVER

 ELECTRICAL CROSSOVER

 (H) SEWER DROPS

 WATER INLET

 (I) RETURN AIR (WIOPT. HEAT PUMP OH DUCT)

 WATER CROSSOVER (IF ANY)

 (J) SUPPLY AIR (WIOPT. HEAT PUMP OH DUCT)

GAS INLET (IF ANY) GAS CROSSOVER (IF ANY)

L-2563G 11111111

².DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.70

THIS INSTRUMENT PREPARED BY AND RETURN TO:

MARLIN M. FEAGLE, ESQUIRE MARLIN M. FEAGLE, ATTORNEY AT LAW, P.A. 153 NE Madison Street Post Office Box 1653 Lake City, Florida 32056-1653 Florida Bar No. 0173248

The preparer of this instrument has performed no title examination nor has the preparer issued any title insurance or furnished any opinion regarding the title, existence of liens, the quantity of lands included, or the location of the boundaries. The names, addresses, tax identification numbers and legal description were furnished by the parties to this instrument.

Inst: 201812011566 Date: 06/06/2018 Time: 1:30PM Page 1 of 2 B: 1361 P: 2395, P.DeWitt Cason, Clerk of Court Columbia, County, By: BD Deputy ClerkDoc Stamp Deed: 0.70

WARRANTY DEED

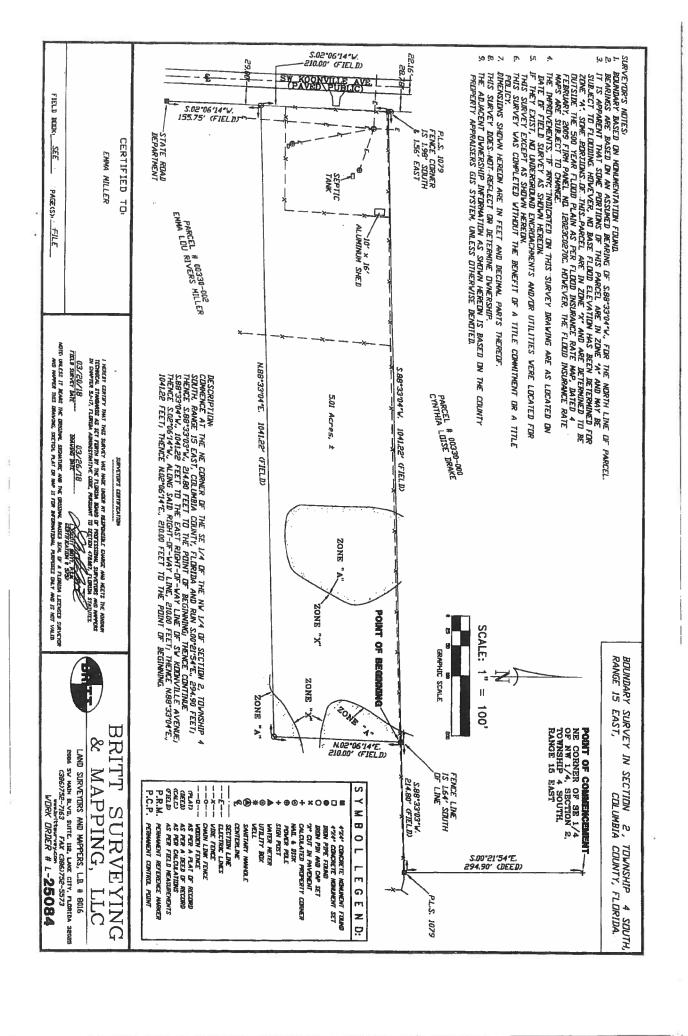
WITNESSETH:

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

Commence at the NE Corner of the SE 1/4 of the NW 1/4 of Section 2, Township 4 South, Range 15 East, Columbia County, Florida, and run S 00°21'54" E, 294.90 feet; thence S 88°33'03" W, 214.80 feet to the **POINT OF BEGINNING**; thence continue S 88°33'04" W, 1041.22 feet to the East right-of-way line of SW Koonville Avenue; thence S 02°06'14" W, along said right-of-way line, 210.00 feet; thence N 88°33'04" E, 1041.22 feet; thence N 02°06'14" E, 210.00 feet to the **POINT OF BEGINNING**.

Tax Parcel No.: 02-4S-15-00330-002 (parent parcel)

N.B. Grantor acknowledges her intent to terminate the remainder interest and all right, title and interest in the property of Jimmie Donald Willis, including his heirs, successors and assigns, which was granted to him, as Grantee, in that Enhanced Life Estate Deed dated April 9, 2018 and recorded April 11, 2018 in Official Records Book 1357, Page 1443, public records, Columbia County, Florida. Further, Grantor is exercising her right to cancel said Enhanced Life Estate Deed by further conveyance to the Grantee of this deed and destroy any and all rights which the Grantee of the Enhanced Life Estate Deed dated April 9, 2018 may possess under that deed or any other claim. This conveyance will specifically divest Jimmie Donald



Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year updated: 6/4/2018

Parcel: << 02-4S-15-00330-007 >>

Owner & Pi	roperty Info	Result: 27 of 74			
Owner	MILLER EMMA LOU RIVERS 2397 SW KOONVILLE AVE LAKE CITY, FL 32024				
Site	KOONVILLE AVE, LAKE CITY				
Description*	COMM NE COR OF SE1/4 OF NW1/4, S 294.90 FT, W 214.80 FT FOR POB, CONT W 1041.22 FT TO E R/W OF SW KOONVILLE AVE, S ALONG R/W 210 FT, E 1041.22 FT N 210 FT TO POB. LE 1357-1443				
Area	5.02 AC	S/T/R	02-4S-15		
Use Code**	PASTURELAN (006200)	Tax District	3		

Property & Assessment Values

2017 Certified Values	2018 Working Values				
There are no 2017 Certified	Mkt Land (1)	\$2,000			
Values for this parcel	Ag Land (1)	\$1,204			
	Building (0)	\$0			
	XFOB (1)	\$800			
	Just	\$23,075			
	Class	\$4,004			
	Appraised	\$4,004			
	SOH Cap [?]	\$0			
	Assessed	\$4,004			
	Exempt	\$0			
		county:\$4,004			
	Total	city:\$4,004			
	Taxable	other:\$4,004			
		school:\$4.004			



▼ Sales History								
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode		
4/9/2018	\$100	1357/1443	LE	V	U	14		

▼ Building Characteristics								
Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value		
	NONE							

▼ Extra	▼ Extra Features & Out Buildings (Codes)								
Code	Desc	Year Bit	Value	Units	Dims	Condition (% Good)			
0296	SHED METAL	2017	\$800.00	1.000	0 × 0 × 0	(000.00)			

Land Breakdown

^{*}The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.
**The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.



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 AGENT AUTHORIZATION

1, YAUL E ALBA Installers Name	give this authority a	nd I do certify that the below
referenced person(s) listed on the	his form is/are under my direct sup	pervision and control and
is/are authorized to purchase pe	ermits, call for inspections and sig	n on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
PAUL BARNEY	Von abanas	FREEDOM HOMES
INDA PENHALIGON	Sindaterhaligon	FREE Som / bones
	0	
	t I am responsible for all permits p	
Local Ordinances.		
I understand that the State Lice	nsing Board has the power and a	uthority to discipline a license
holder for violations committed	by him/her or by his/her authorize	d person(s) through this
document and that I have full re	sponsibility for compliance grante	d by issuance of such permits.
License Holders Signature Not		5 <i>J</i> 3 <i>9</i> //- 8-/7 umber Date
NOTARY INFORMATION:		_
STATE OF: Florida	COUNTY OF: SUWANNE	
The above license holder, whose	se name is	ALBRIGHT .
personally appeared before me (type of LD.)	and is known by me or has produ	ced identification of <i>NouEmBER</i> , 20 17.

(Seal/Stamp)

PAUL A BARNEY

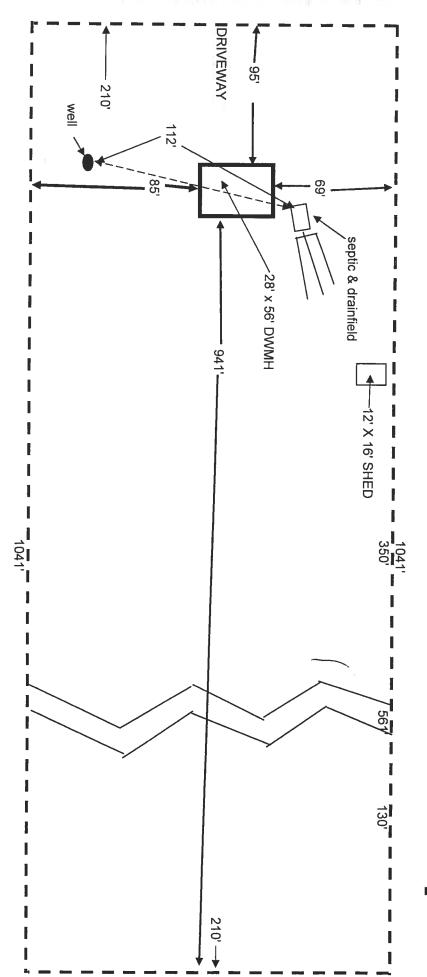
MY COMMISSION # GG 040180

EXPIRES: October 19, 2020

Bonded Thru Budget Notary Services

SITE PLAN FOR EMMA MILLER

PARCEL ID # 02-4S-15-00330-007





MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1806-14	CONTRACTOR PAUL	Albrish	PHONE	386.36S.531	y
--------------------	---------	-----------------	---------	-------	-------------	---

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 <u>REQUIRED</u> 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
1079
MECHANICAL
/
A/C 1(00°)
0.00
1079 MECHANICAL/

Qualifier Forms cannot be submitted for any Specialty License.

specialty License	cense Number Sub-Contracto	ors Printed Name Sub-Contr	
MASON			arrais signature 1
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.

Revised 10/30/2015

Order #: 3173	Label #: 48895	Manufacturer: Live CAK	(Check Size of Home)	
Homeowner:		Year Model: 2018	Single	
Address:		.1 0 12 2.4	Double •	
		Length & Width: 28 NGO	Triple	
City/State/Zip:	Ville Lake	Type Longitudinal System:	HUD Label #:	
Phone #:		Type Lateral Arm System:	Soil Bearing / PSF: 1500.	
Date Installed:		New Home: Used Home:	Torque Probe / in-lbs: 285	
installed Wind Zone:	Z	Data Plate Wind Zone: 2	Permit #:	
Note:				

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL 48895

70075

LABEL#

DATE OF INSTALLATION

PAUL E. ALBRIGHT

NAME

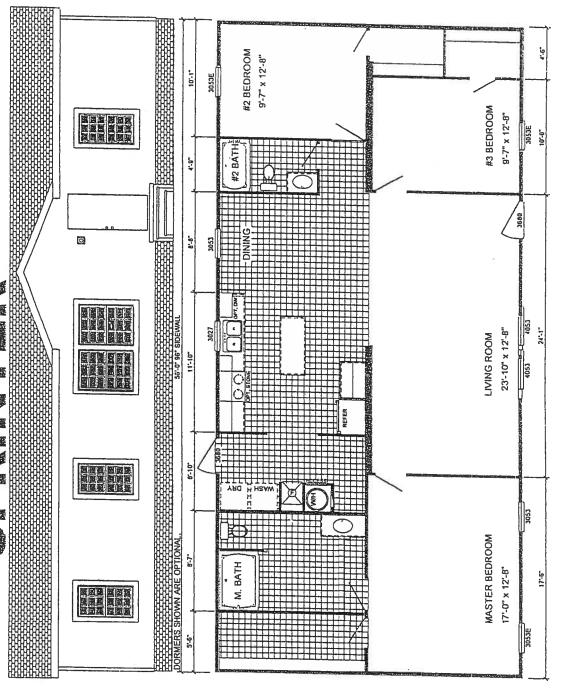
IH / 1025239 / 1

3173

LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

ALEASE WRITE DATE OF ANSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.



L-2563G

3-BEDROOM / 2-BATH

28 x 60 - Approx. 1456 Sq. Ft.

Date: 10-30-2013

All month dinner letons findlade closeris and square footbaje injuries are signer about to Esperagn injuriese non-mendation regiment of the elempse hower custo. District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:

6/7/2018 2:20:39 PM

Address:

2307 SW KOONVILLE Ave

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

00330-007

REMARKS: Address Verification.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125 Email: gis@columbiacountyfla.com

12:44:21 06-15-2018

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 8-04-64 Each block represents 10 feet and 1 inch = 40 feet. Ц m Ŋ Hew House न IN PLACE OF 120 Home 28/56 210 Notes: Konjulle Rd. EMMA Miller Site Plan submitted by Robert W. Ford L DATE 4 10/18 Plan Approved Not Approved Date__ County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

3867582187

10:40:52 06-15-2018

2/3-----



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL

, 02/	
PERMIT NO / 0- 04/	1
DATE PAID :	
FRE PAID:	C
RECEIPT #= 210 O DO	0

The state of the s	System	TENTRAL .	HIND DISE	OSAL .	FEE PAID	8-111-4 Em
	APPLICATION	FOR CONSTRUC	fitor		RECEIPT	(34405
APPLICATION :			LTOM PERM	MIT		200.00
[] New Sys [] Repair	• • •	Existing System	[]	Holding m		
APPLICANT:	mm i	Abandonment	ίí	Holding Tank Temporary	[]	Innovative
	TITIN I	MIET			-	
AGENT: ROBER FO	ord Jr. North Florida S	eptic Tank Inc;				
MAILING ADDRE	ss: 741 SE State	Road 100 Lake City F	la 32025	TB	Lephone : 3	386-755-6372
770 pp.						
TO BE COMPLETE	ED BY APPLICANT	OR APPLICANTILO				
APPLICANT'S DE	CENSED PURSUAN	OR APPLICANT'S T TO 489.105(3)(O PROVIDE DOCUME	AUTHORIZED	AGENT. SYST	EMS MUST	BR CONSTRUCTION
PLATTED (MM/DD	(AV) IF REQUES	T TO 489.105(3)(O PROVIDE DOCUME TING CONSIDERATION	NTATION OF	THE DATE THE	STATUTES. LOT WAS	IT IS THE
PROPERTY INFOR	MATION		ON OF STAT	UTORY GRANDEA	THER PROV	TSIONS.
LOT:						
E01: E	LOCK:	SUBDIVISION: M	eets	1 hono	LS _	
PROPERTY ID #:	02-AS-15	10220-	- A		PLA	ATTED:
PROPERTY GTOP	MW	-00330- 002	ZONING: A	G I/M OR	EQUIVALE	ENT: I YN]
•	CETTYNAMES	WATER SUPPLY: 1	יייי וכדום ו		<= 2000 <i>cm</i>	V
		.0065, ES? [Y]	N. 1	• •	-coooggg	0 []>2000GPD
PROPERTY ADDRES	is: all	OW KNY	11/1/1/	2 Alla		ER: NA FT
DIRECTIONS TO P	ROPERTY:	1 00 . 1 =		AVE		
Follow 4	7 e . i a	4 90 W-	TO K	sowulle f	54 7	
	SIFE	on left	Appey	5 miles		
BUILDING INFORM	ation	[V] RESIDENTIAL		1		
Unit Type of		4.	·] COMMERCIAI		
No Establish		No. of Build: Bedrooms Area		ercial/Institu	tional St	Vstem Dool-
1 01ml	Plamilia		Like	FOR UKE	4E-6, FAC	CDesign
3	21111111	3 145	4	3 Bed 180 m	ta 2 m	
2				1	10 3 B	ed room
3						
4						
[] Floor/Fore	3					
1 12001/2441]	pment Drains	[] Other (Spe	cify)		原河	6/8//8/7
SIGNATURE: Rol	wet w Jun	Q.A.			7 J	1 (2
DR 4015, 08/09 (C Incorporated 64E-	bsoletes pravi	ous adition		DAS	re: 410	5/18
incorporated 648-	6.001, FAC	eurlions whi	ch may not	be used)	•	100
						Page 1 of 4