34

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BK 7 Aug 2012 Building Official T.C. 8-7-12

AP# 1207-54 Date Received 7/27 By LW Permit # 30353

Flood Zone X Development Permit N/A Zoning A3 Land Use Plan Map Category A-3

Comments

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 # 12-351-N ☐ EH Release ☒ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Installer Authorization ☐ State Rd Access ☑ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☐ App Fee Pd ☑ VF Form

IMPACT FEES: EMS Fire Corr ☑ Out County ☑ In County

Road/Code School = TOTAL Suspended March 2009 ☒ Ellisville Water Sys

Property ID # 33-3S-16-01822-001 Subdivision N/A

- New Mobile Home Used Mobile Home X MH Size 16X56 Year 2008
- Applicant Roland Innis Phone # 386.365.8533
- Address 4078 SE COUNTY CLUB ROAD, L.C., FL 32025
- Name of Property Owner Donald HALL Phone# 386-623-7123
- 911 Address 146 NW Carrie Ct Lake City, Fla 32055
- Circle the correct power company - FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy

Ron Called Roland 8-1-12

- Name of Owner of Mobile Home Same as applicant Phone #
  Address Same as app
- Relationship to Property Owner
- Current Number of Dwellings on Property 2
- Lot Size 36 acres Total Acreage 36 Acres
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO (will be 3rd)
- Driving Directions to the Property GO 41 N. Turn left on Winfield RD. left onto NW Chambira Way Right onto NW Queen RD. to Carrie ct Property on corner of Carrie & Queen (1st on Left)
- Name of Licensed Dealer/Installer Bernie Thrift Phone # 386 623 0046
- Installers Address 5557 NW Falling creek rd White Springs
  - License Number IH1025155 Installation Decal # 11402

Cash

371.34

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Bernie Thrift License # IH1025158

911 Address where home is being installed. _____

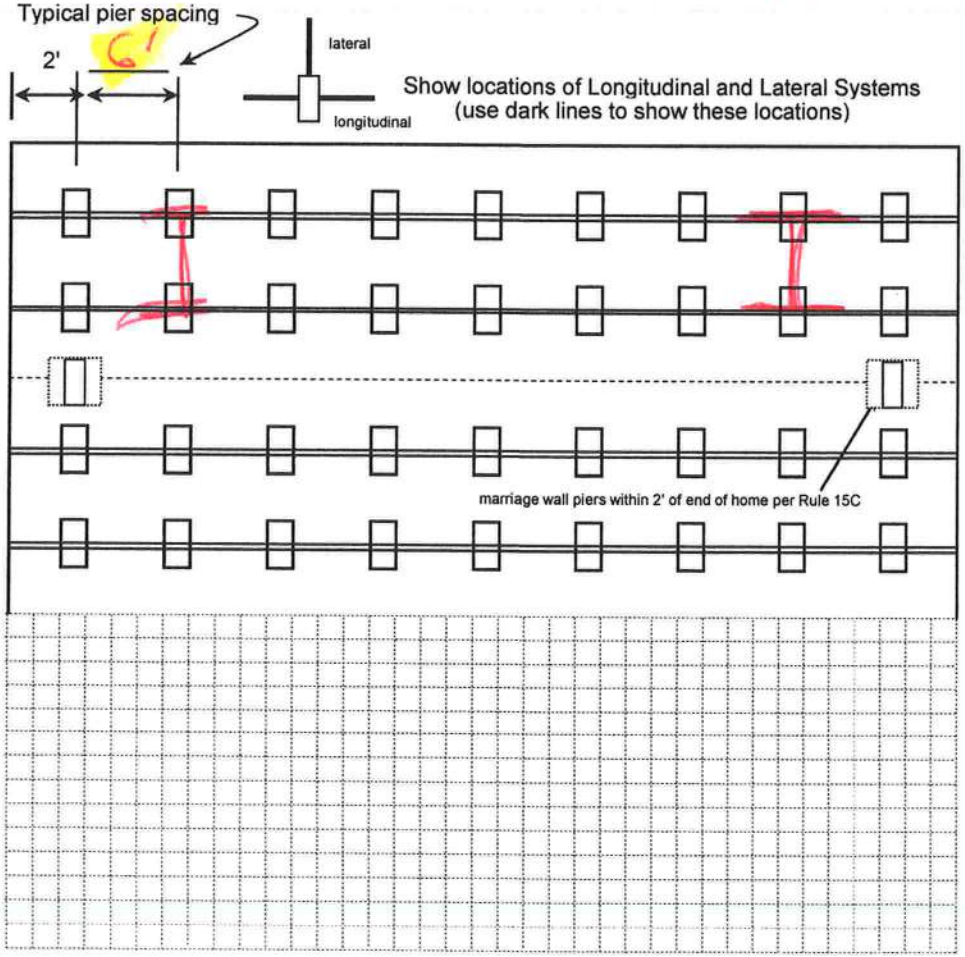
Manufacturer Horton Length x width 16X56

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 BT

Typical pier spacing



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 # 11402

Triple/Quad ☐ Serial # _____

(374)

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'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17 X 22

Perimeter pier pad size 16 X 16

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 their pier pad sizes below.

Opening	Pier pad size
NA	

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 _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer model 110LLV Oliver Systems

OTHER TIES

	Number
Sidewall	20
Longitudinal	4
Marriage wall	NA
Shearwall	2

COLUMBIA COUNTY PERMIT WORKSHEET

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil _____ without testing.

X 2000 X 2500 X 2500

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 2000 X 2000 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 290 ft 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 4000 lb holding capacity.

BT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Bernie Thrift

Date Tested 7-24-12

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. 5

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5

Site Preparation

Debris and organic material removed _____.
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____.

Fastening multi wide units

Floor: Type Fastener: NA Length: _____ Spacing: _____
Walls: Type Fastener: NA 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, 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.

Installer's initials _____

Type gasket NA
Pg. _____

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

Weatherproofing

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

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 Bernie Thrift **Date** 7-25-12

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Bernie Thrift PHONE 623 00 46

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.

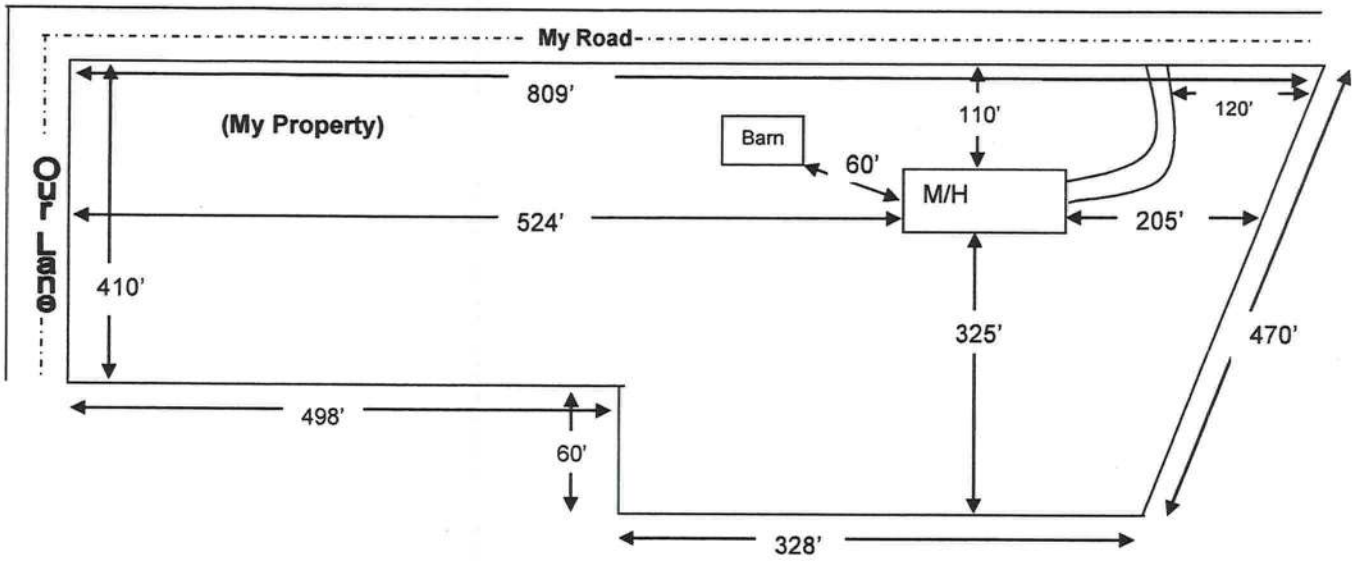
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

✓ **ELECTRICAL**	Print Name Donald Hall License #:	Signature Donald Hall Phone #: 386-623-7123
✓ **MECHANICAL/ A/C** _____	Print Name Donald Hall License #:	Signature Donald Hall Phone #: 623-7123
✓ **PLUMBING/ GAS**	Print Name Donald Hall License #:	Signature Donald Hall Phone #: 623-7123

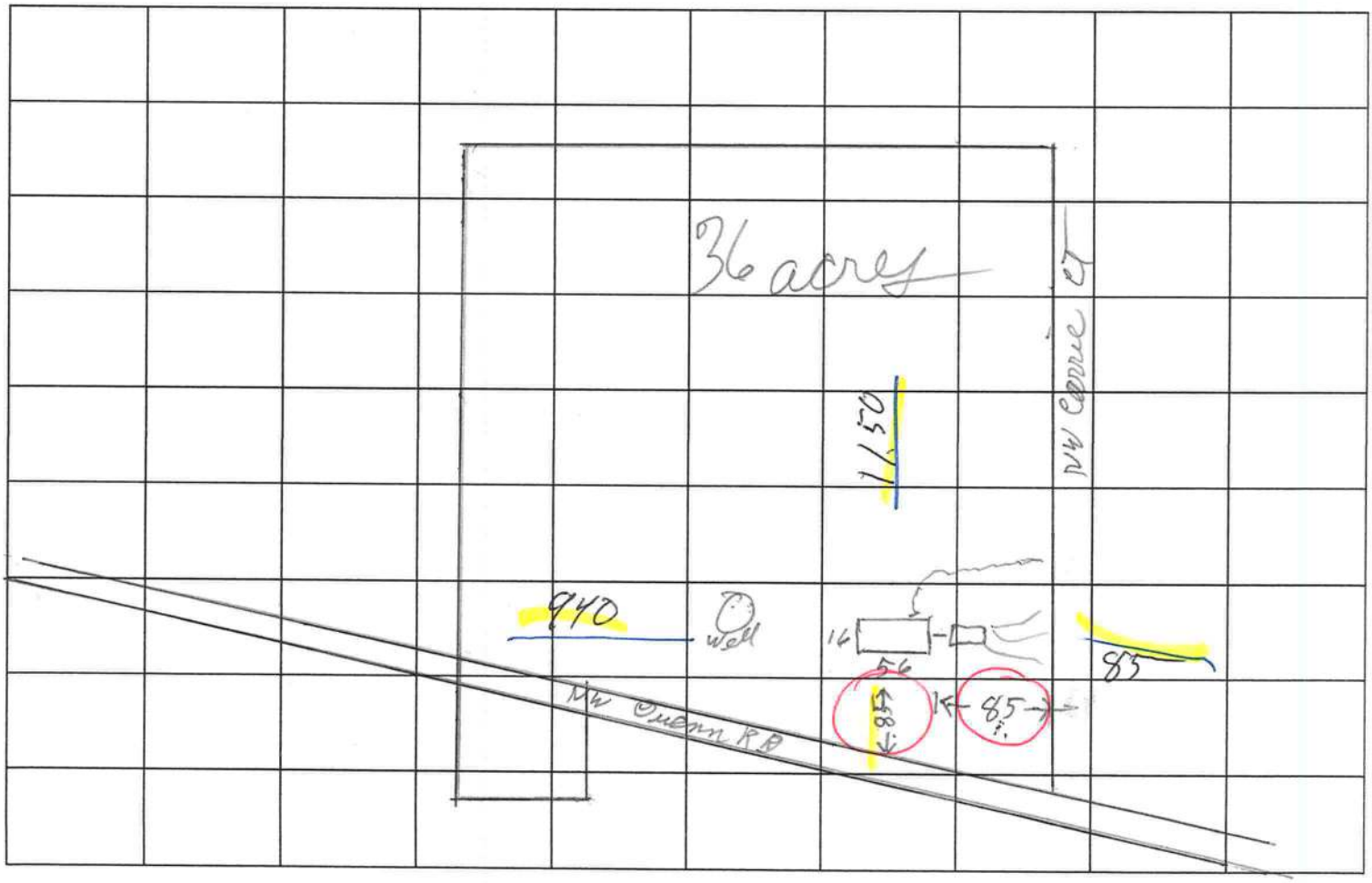
Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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.

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



THAT PART OF SW1/4 OF SE1/4 AS LIES N OF CO RD, BEING 1.5 AC & NW1/4 OF SE1/4, EX 4.5 AC OFF W SIDE & EX THAT PART OF

HALL DONALD D & M F
318 NW CARRIE CT
LAKE CITY, FL 32055

33-2S-16-01822-001

Columbia County 2012 R
CARD 001 of 002

PRINTED 6/05/2012 14:45 BY JEFF
APPR 11/05/2008 RP

BUSE 000100 SINGLE FAM AE? Y
MOD 1 SFR BATH 2.00
EXW 19 COMMON BRK FIXT
% 0000000000 BDRM 3
RSTR 03 GABLE/HIP RMS
RCVR 03 COMP SHNGL UNTS
% N/A C-W%
INTW 05 DRYWALL HGHT
% N/A PMTR
FLOR 14 CARPET STYS 1.0
10% 06 VINYL ASB ECON
HTTP 04 AIR DUCTED FUNC
A/C 01 NONE SPCD
QUAL 05 05 DEPR 52
FNDN N/A UD-1 N/A
SIZE 03 RECTANGLE UD-2 N/A
CEIL N/A UD-3 N/A
ARCH N/A UD-4 N/A
FRME 01 NONE UD-5 N/A
KTCH 01 01 UD-6 N/A
WNDO N/A UD-7 N/A
CLAS N/A UD-8 N/A
OCC N/A UD-9 N/A
COND 03 03 % N/A

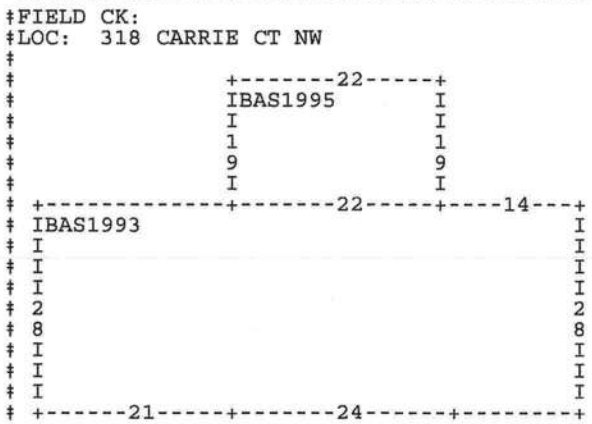
2014 HTD AREA 102.335 INDEX 33216.00 DIST 3
2100 EFF AREA 48.097 E-RATE 100.000 INDX
101004 RCN 1972 AYB
61.00 %GOOD 61,612 B BLDG VAL 1972 EYB

PUSE 005000 IMPROVED AG
STR 33- 2S- 16
MKT AREA 03
(PUD1
AC 36.500

BLDG	61,612
XFOB	13,646
LAND	23,324
CLAS	6,775
MKTUSE	70,900
JUST	169,482
APPR	105,357
SOHD	0
ASSD	0
EXPT	0
COTXBL	0

NTCD
APPR CD
CNDO
SUBD
BLK
LOT
MAP#
HX
TXDT 003

FIELD CK:
LOC: 318 CARRIE CT NW



BLDG TRAVERSE
BAS1993=W14 BAS1995=N19 W22 S19 E22$ W43 S28 E21 FOP1993= S12 E24N12 W24$ E36 N28$
.

SUB	A-AREA	%	E-AREA	SUB VALUE
BAS93	1596	100	1596	46825
FOP93	288	30	86	2523
BAS95	418	100	418	12264
TOTAL	2302		2100	61612

PERMITS

NUMBER	DESC	AMT	ISSUED
14372	M H	125	8/07/1998

SALE

BOOK	PAGE	DATE	PRICE
GRANTOR			
GRANTEE			
GRANTOR			
GRANTEE			

EXTRA FEATURES

AE	BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UNITS	UT	PRICE	ADJ UT PR	SPCD %	%GOOD	XFOB VALUE
Y	1	0190	FPLC PF				1		1996	1.00	1.000	UT	1200.000	1200.000		100.00	1,200
Y		0166	CONC,PAVMT				1		1995	1.00	1.000	UT	300.000	300.000		100.00	300
Y		0040	BARN,POLE	8	20		1		1995	1.00	1.000	UT	100.000	100.000		100.00	100
Y		0040	BARN,POLE				1		1995	1.00	1.000	UT	250.000	250.000		100.00	250
Y		0294	SHED WOOD/VI				1		1993	1.00	1.000	UT	400.000	400.000		100.00	400
Y		0294	SHED WOOD/VI	12	24		1		2008	1.00	288.000	SF	14.000	14.000		100.00	4,032

FIELD CK:

AE	LAND CODE	DESC	ZONE TOPO	ROAD UTIL	UD1 UD2	UD3 UD4	FRONT BACK	DEPTH DT	ADJUSTMENTS	UNITS	UT	PRICE	ADJ UT PR	LAND VALUE
N	006200	PASTURE 3	00						1.00 1.00 1.00 1.00	21.500	AC	200.000	200.00	4,300AG
N	005200	CROPLAND 2							1.00 1.00 1.00 1.00	11.000	AC	225.000	225.00	2,475AG
Y	000100	SFR	A-1						1.00 1.00 1.00 1.00	1.000	AC	4456.570	4456.57	4,456
N	009910	MKT.VAL.AG	A-1						1.00 1.00 1.00 1.00	32.500	AC	2181.540	2181.54	70,900MK
Y	009947	SEPTIC	00						1.00 1.00 1.00 1.00	2.000	UT	750.000	750.00	1,500

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, Bernie Thrift, give this authority for the job address show below
Installer License Holder Name

only, _____, 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)
ROLAND L TARDIF	Roland L Tardif	✓ 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.

Bernie Thrift — IH1025155 — 7-25-12
License Holders Signature (Notarized) — License Number — Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Roland L TARDIF, personally appeared before me and is known by me or has produced identification (type of I.D.)_____ on this 27 day of July, 2012.

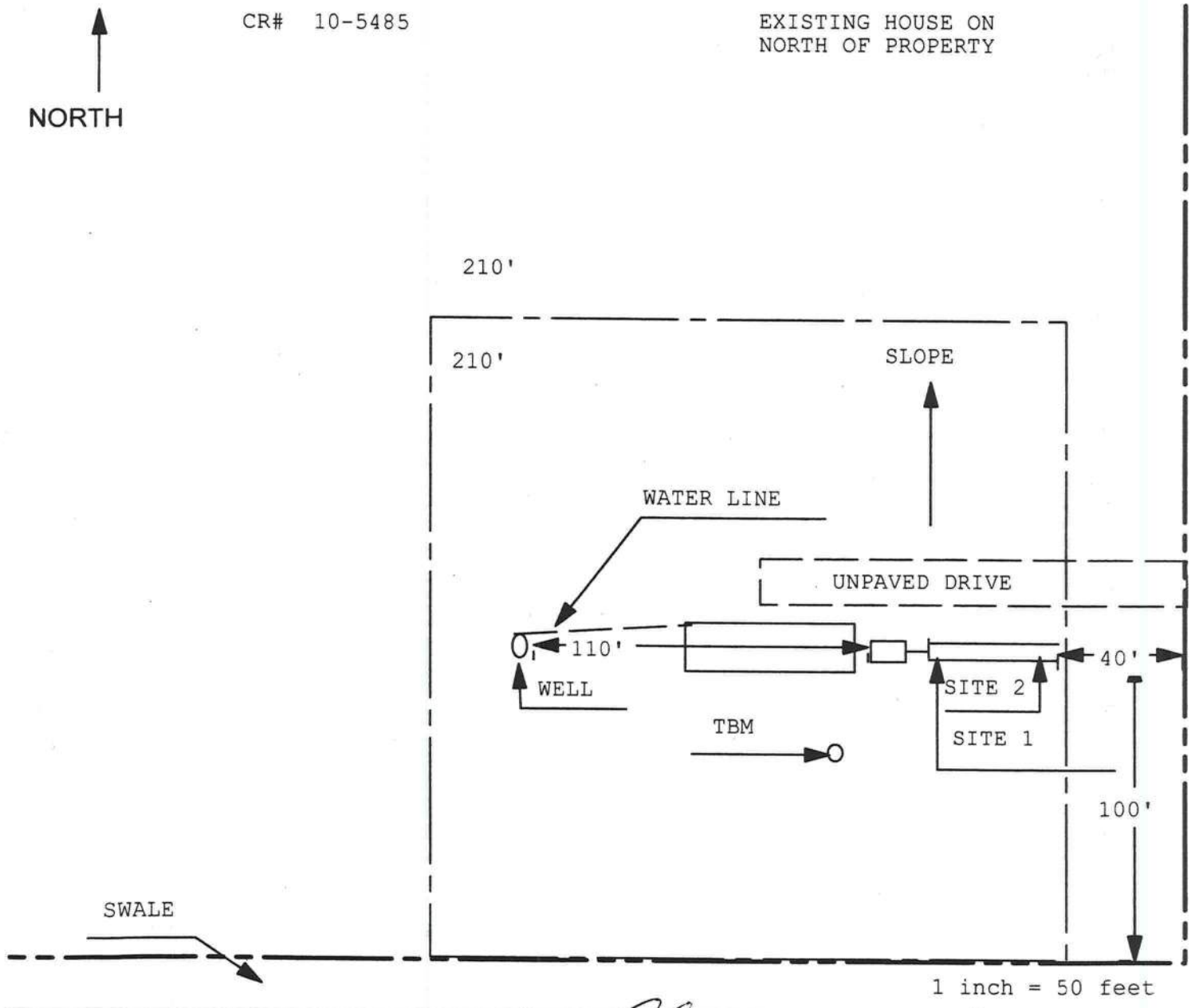
F Voncile Dow
NOTARY'S SIGNATURE

F VONCILE DOW
Notary Public - State of Florida
My Comm. Expires Oct 3, 2014
Commission # EE 27026
Bonded Through National Notary Assn.
(Seal/Stamp)

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 12-351 N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul Lloyd **Date** 7/25/12

Plan Approved X **Not Approved** ____ **Date** 7/26/12

By _____ Cdunbig **CPHU**

Notes:

CR # 10-5485

PERMIT NO. 12-351N
DATE PAID:
FEE PAID:
RECEIPT #:

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

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ]

APPLICANT: DONALD HALL

AGENT: ROLAND TARDIF TELEPHONE: (386) 755-0927

MAILING ADDRESS: 318 NW CARRIE CT. LAKE CITY FL 32055

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED:

PROPERTY ID #: 33-2S-16-01822-001 ZONING: AG I/M OR EQUIVALENT: [NO]

PROPERTY SIZE: 36.500 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [NO] DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 318 NE CARRIE CT. LAKE CITY

DIRECTIONS TO PROPERTY: 41 NORTH, TURN LEFT ON WINFIELD GO TRU 90 AT RECK DEPT. TURN RIGHT ON QUEEN, TURN LEFT ON CARRIE, 1ST ON LEFT.

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	MOBILE HOME	2	896	
2				
3				
4				

[ ] Floor Equipment Drains [ ] Other (Specify)

SIGNATURE: Roland L Tardif agent DATE: 7/26/2012

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

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

#1207-54

COUNTY THE MOBILE HOME IS BEING MOVED FROM Putnam

OWNERS NAME Craig Hall PHONE _____ CELL 386-623-7123

INSTALLER Bernie Thrift PHONE _____ CELL 386-623-0046

INSTALLERS ADDRESS _____

MOBILE HOME INFORMATION

MAKE HORTON YEAR 2008 SIZE 56 X 16

COLOR Grey SERIAL No. GAFL807A57847WE21

WIND ZONE 2 SMOKE DETECTOR 2

INTERIOR:
FLOORS Plywood Vinyl Good Cond.

DOORS House Type Good Cond.

WALLS Drywall Good Cond.

CABINETS Wood Good Cond.

ELECTRICAL (FIXTURES/OUTLETS) all Working

EXTERIOR:
WALLS / SIDDING Vinyl

WINDOWS Vinyl

DOORS Cottage & Storm Good Cond.

INSTALLER: APPROVED X NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Bernie Thrift

Installer/Inspector Signature Bernie Thrift License No. IH1025155 Date 7/20/2012

NOTES: I Find this home to be in very Good Condition

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 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature Jay Crew Date 7-27-12

called Bernie 7-27-12

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1207-54

DATE RECEIVED 7-30-12 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Craig Hall PHONE _____ CELL 623-7123

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 41 N, (L) Winfield, (L) Chambers, (R) Queen, (L) Carrie, 1st on (L)

MOBILE HOME INSTALLER Bernie Thrift PHONE _____ CELL 623-0046

MOBILE HOME INFORMATION

MAKE Horton YEAR 08 SIZE 16 x 56 COLOR Grey

SERIAL No. GAFL807A5 7847WE21

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

_____ 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: 7/27/12

Paid By: Roland

Notes: #1643

EXTERIOR:

_____ WALLS / SIDDING ( ) 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 _____ ID NUMBER 302 DATE 7.31.12

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: 7/30/2012 **DATE ISSUED:** 8/1/2012

ENHANCED 9-1-1 ADDRESS:

146 NW CARRIE CT

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

33-2S-16-01822-001

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCE. 5TH LOCATION ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT
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.

2324