| DATE 11/18/2010 Columbia County This Permit Must Be Prominently Post | |
|----------------------------------------------------------------------|--------------------------------------------------------|
| APPLICANT TARA HOWELL | PHONE 386.208.0509 |
| ADDRESS 278 SW DEPUTY J. DAVIS LN. | LAKE CITY FL 32024 |
| OWNER JOE LUCAS (BRIAN LUCAS M/H) | PHONE 758.758.9678 |
| ADDRESS 278 SW J. DAVIS LANE | LAKE CITY FL 32024 |
| CONTRACTOR TERRY L. THRIFT | PHONE 386.623.0115 |
| LOCATION OF PROPERTY 90-W TO C135(NOEGEL) RD | ,TR TO BROWN RD,TL TO LAKE JEFFERY,TR |
| | AND IT'S THE 5TH PLACE ON L |
| TYPE DEVELOPMENT M/H/UTILITY | ESTIMATED COST OF CONSTRUCTION 0.00 |
| HEATED FLOOR AREA TOTAL A | REA HEIGHT STORIES |
| FOUNDATION WALLS | ROOF PITCH FLOOR |
| LAND USE & ZONING A-3 | MAX. HEIGHT |
| Minimum Set Back Requirments: STREET-FRONT 30. | 00 REAR 25.00 SIDE 25.00 |
| NO. EX.D.U. 1 FLOOD ZONE X | DEVELOPMENT PERMIT NO. |
| PARCEL ID 36-2S-15-00118-001 SUBDIVIS | ION |
| LOT BLOCK PHASE UNIT | TOTAL ACRES 3.69 |
| IH1025139 | Sava & Harrell |
| Culvert Permit No. Culvert Waiver Contractor's License N | Tumber Applicant/Owner/Contractor |
| EXISTING 10-0505 BLK | TC N |
| Driveway Connection Septic Tank Number LU & Zo | ning checked by Approved for Issuance New Resident |
| COMMENTS: 1 FOOT ABOVE ROAD. STUP/MH 1011-38 | |
| | |
| | Check # or Cash 620 |
| FOR BUILDING & ZON | ING DEPARTMENT ONLY |
| Temporary Power Foundation | (Tooter/Stab) |
| date/app. by | date/app. by Monolithic date/app. by |
| Under slab rough-in plumbing Slab | dutc/app. by |
| date/app. by | date/app. by date/app. by |
| Framing Insulation | |
| date/app. by | ate/app. by |
| Rough-in plumbing above slab and below wood floor | Electrical rough-in |
| Heat & Air Duct | date/app. by date/app. by |
| Peri. beam (Lin | 1 |
| Permanent power C.O. Final | date/app. by Culvert |
| date/app. by Pump pole Utility Pole | date/app. by |
| date/app. by Utility Pole date/app. by M/H tie | downs, blocking, electricity and plumbing date/app. by |
| Reconnection RV | Re-roof |
| date/app. by | date/app. by date/app. by |
| BUILDING PERMIT FEE \$ CERTIFICATION FI | EE \$ SURCHARGE FEE \$ |
| MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 | 0 FIRE FEE \$70.62 |
| LOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25. | 00 CULVERT FEE \$ TOTAL FEE 629.87 |
| NSPECTORS OFFICE U | CLERKS 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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

| Site Plan with Setbacks Shown DEH # 10 - 050 4 Detter of Auth. from installer Detter Deter Detter Deter |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FEMA Map# |
| FEMA Map# N/A Elevation N/A Finished Floor River N/A In Floodway N/A Site Plan with Setbacks Shown PEH # 10 - 050 9 |
| Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access Parent Parcel # STUP-MH /011-38 F W Comp. letter IMPACT FEES: EMS Fire Corr Road/Code School = TOTAL Impact Fees Suspended March 2009 36 - 75-15 Property ID # ROO 118-001 Subdivision NIA New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tara towell Phone # 386-208-0509 Address 278 SW J. |
| Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access Parent Parcel # STUP-MH /011-38 F W Comp. letter MPACT FEES: EMS Fire Corr Road/Code School = TOTAL Impact Fees Suspended March 2009 36 - 75-15 roperty ID # ROO 118-001 Subdivision NIA New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Taratowell Phone # 386-208-0509 Address 278 SW J. |
| Parent Parcel # STUP-MH /011-38 FW Comp. letter MPACT FEES: EMS Fire Corr Road/Code School = TOTAL Impact Fees Suspended March 2009 36 - 75-15/ roperty ID # ROO 118-001 Subdivision NIA New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tara towell Phone # 386-208-0509 Address 178 SW January Cr. 3200 |
| MPACT FEES: EMS Fire Corr Road/Code School = TOTAL Impact Fees Suspended March 2009 36 - 75-15 roperty ID # ROO 118-001 Subdivision NIA New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tara towell Phone # 386-208-0509 Address 278 SW J. January Co. 3200 |
| School = TOTAL Impact Fees Suspended March 2009 36 - 75-15/ roperty ID # ROO 118-001 Subdivision NIA New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tara towell Phone # 386-208-0509 Address 278 SW J. |
| School |
| New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tara towell Phone 386-208-0509 Address 278 SW J. Language Control of Section 18 19 19 19 19 19 19 19 19 19 19 19 19 19 |
| New Mobile Home Used Mobile Home MH Size 28x44 Year 2011 Applicant Tarantowell Phone # 386-208-0509 Address 278 SW J. Land Corty-Ct. 3200 |
| Applicant Tara thought Phone # 386-208-0509 Address 278 SW J. Land Land Corty-Ct. 3200 |
| Address 278 SW J. Phone # 386-208-0509 |
| Address 278 SW J. Phone # 386-208-0509 |
| PAR 23 27 1 1 1 1 1 1 1 1 2 1 2 200 |
| 4.0. Box 273/ 1:6 3 300/ |
| Name of Property Owner Joseph 2 11 11 27 37056 |
| Name of Property Owner Joseph R. and Loretta A. Lucas Phone# 386 758 9678 911 Address 34 N.W. ILUCY GILV Lake City FL 32055 |
| The state of the s |
| (Circle One) - Supranno Volley El Vol |
| |
| Name of Owner of Mobile Home Brian and Elizabeth Lucas Phone # 386 3650739 |
| Address 972 N. W. Love: Jornes Rd. Lake C.L. Ft 32055 |
| Relationship to Property Owner Son and Naughter in law |
| Current Number of Dwellings on Property 2 1 |
| Provid Grack |
| Lot Size 634 353 81 236 30 309./ Total Acreage 3,69 Acres |
| Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one) |
| Is this Mobile Home Penlasing on Said to the State of the Penlasing of Said to Not need a Culvert) |
| Driving Directions to the Day |
| to brown Rd take 10th 10 101 Tes 1 1 100 gel Rd (135) |
| Lower Soc - Di late () |
| approximation to the Left. It home on heft. |
| Name of Licensed Dealer/Installer Teak 1 17 Phone # 364.7 623-671 |
| Installers Address 448 NW Das Hander De Hander De Hander De Hander Hander De |
| License Number TH-10 25 130 Installation Decal # 3335 |
| Spoler to Tora 11-16-10 |

page 1 of 2

COLUMBIA COUNTY PERMIT WORKSHEET

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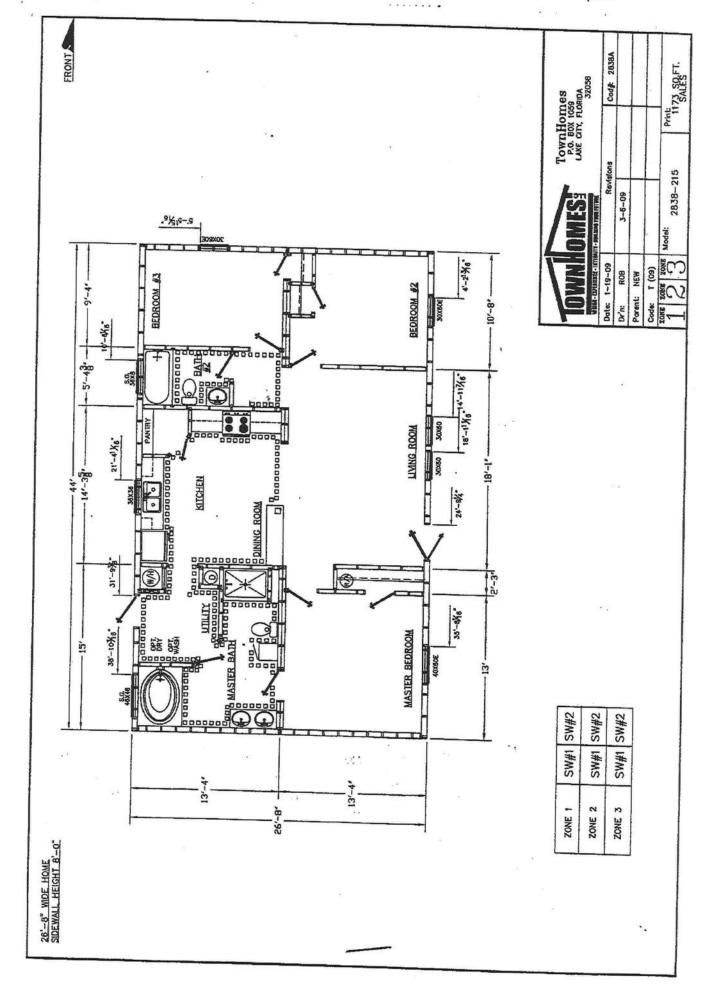
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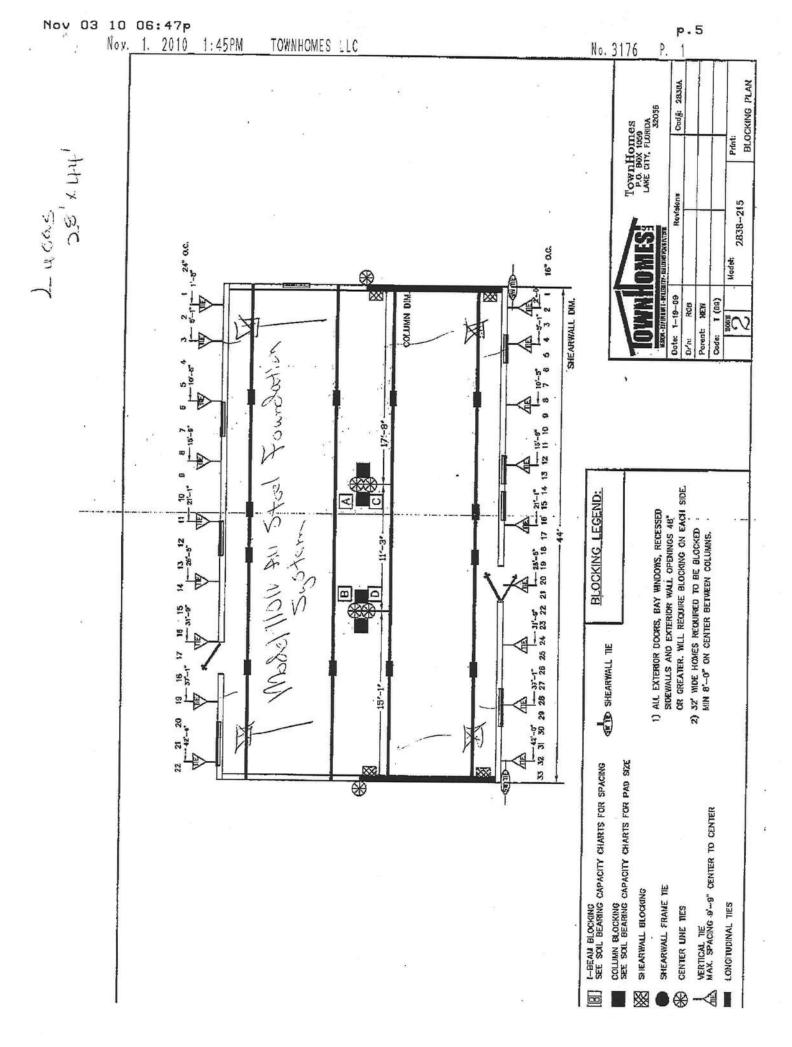
3

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

| Debris and organic material removed Water drainage: Natural Fastening multi wide units Floor: Type Fastener: And Swale Roof: Type Fastener: And Swale Roof: Type Fastener: And Swale 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 (weathstproofing requirement) I understand a property 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. | Type gaskeh Shin Tay Installed: Between Floors Yes Between Walls Yes Between Walls Ass | Weatherproofing The bottomboard will be repaired and/or taped, Yes Siding on units is installed to manufacturer's specifications! Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes | Skirting to be installed. Yes Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. Yes 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 1000 Date 11 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| The pocket penetrometer tests are rounded down to 1500 pst or check here to declare 1000 lb. soil without testing. | 3. Using 500 lb. increments, take the lowest reading and round down to that increment. | The results of the torque probe test is 2500 inch pounds or check here if you are declaring 5' anchors without testing 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. | ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name | Electrical conductors between multi-wide units, but not to the grain power | rce. This includes the bonding wire between mult-wide units. Pg. Plumbing nect all sewer drains to an existing sewer tap or septic tank. Pg. | nnect all potable water supply piping to be existing water meter, water tap, or other spendent water supply systems. Pg. |





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

Permit Application Number_ - PART II - SITEPLAN -----Scale: 1 inch = 40 feet. alo slope Lower springs 30 1210 204 210 Notes: Site Plan submitted by: Pock MASTER CONTRACTOR Plan Approved Not Approved Date By_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4

Nov 08 10 09:45p

P . 1

| SUBCONTRACYOR | VERNICATION COMM |
|---------------|---------------------------|
| 1 | G CHUNILAN I MIND NA MINA |

| Ordinance 89 exemption, gr | County one permits and contractors of contractors on the contractor of the contracto | it will cover all trades del who actually did the trad hall require all subcentra urance and a valid Certif | ctors to provide evidence of | i. It is <u>REQUIRED</u> that we have mit. Per Florida Statute 440 and workers' compensation or | | |
|--------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--|--|
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| ELECTRICAL | Print Name / | 13013192_ | Signature Muse | Le Com | | |
| MECHANICAL/ | Print Name Ucense 9: | phert Gran | Signature Ko | NENT | | |
| C PLUMBING! Print Name TERRYT GAS Uconso 4: TH-0 | | | Signature /u | my Johns | | |
| RELOPING | Print Name License #: | | Signature Phone (| | | |
| SHEET METAD | Print Name | | Signature Phone # | | | |
| FIRE SYSTEM/ SPRINCLER | | | Signature Phone#: | | | |
| SOLAR | Print Name_ License #: | | Signature Phope's | | | |
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| METAL BLOG ER | | | | | | |

F. S. 449.103 Building parmits; 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.

3867582160

COLUMBIA COUNTY, FLORIDA LAND DEVELOPMENT REGULATION ADMINISTRATOR SPECIAL PERMIT FOR TEMPORARY USE APPLICATION

| Permit No. STUP - 1011-38 | Date |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Fee 450, 00 Receipt No. 4113 | Building Permit No. |
| Name of Title Holder(s) Joseph and LoreHA | Lucas |
| Address 972 NW Lower Springs Rd | |
| Zip Code 320 55 | |
| Phone (386) 758 9678 | - 3 |
| NOTE: If the title holder(s) of the subject property are appointing a title holder(s) addressed to the Land Development Regulation Admi application at the time of submittal stating such appointment. | in agent to represent them, a letter from the nistrator MUST be attached to this |
| Title Holder(s) Representative Agent(s) | - |
| Address | City _ |
| Zip Code | |
| Phone () | |
| Paragraph Number Applying for | |
| Proposed Temporary Use of Property Add. Lond | Manufactured Home |
| Proposed Duration of Temporary Use 54ec/s | an . |
| Tax Parcel ID# R00118-001 | |
| Size of Property 3.69 Acres | |
| Present Land Use Classification Arc. 3 | |
| Present Zoning District Arg 3 | · · · · · · · · · · · · · · · · · · · |
| · · · · · · · · · · · · · · · · · · · | |

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

- 1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
- 2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
- In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
- 4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
- 5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
- In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
- 7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;

- c. Site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building;
- d. Responsibility for non ad-valorem assessments;
- e. Inspection with right of entry onto the property by the County to verify compliance with this section. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section and;
- f. Shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- g. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- h. Requirements upon expiration of permit. Unless extended as herein provided, once a permit expires the mobile home shall be removed from the property within six (6) months of the date of expiration.

The property owner may apply for one or more extensions for up to two (2) years by submitting a new application, appropriate fees and family relationship residence affidavit agreement to be approved by the Land Development Regulations Administrator.

Previously approved temporary use permits would be eligible for extensions as amended in this section.

- 8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
- 9. In agriculture and environmentally sensitive area districts: a single recreational vehicle as described on permit for living, sleeping, or housekeeping purposes for one-hundred eighty (180) consecutive days from date that permit is issued, subject to the following conditions:
 - Demonstrate a permanent residence in another location.
 - Meet setback requirements.

c. Shall be hooked up to or have access to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.

Upon expiration of the permit the recreational vehicle shall not remain on property parked or stored and shall be removed from the property for 180 consecutive days.

Temporary RV permits are renewable only after one (1) year from issuance date of any prior temporary permit.

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.

| I (we) hereby certify that all of the above statements and the statement plans submitted herewith are true and correct to the best of my (our) is | nts contained in any papers or knowledge and belief. |
|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Applicants Name (Print or Type) | |
| Applicant Signature | 11/15/16 |
| | Date |
| Approved X BLK OFFICIAL USE Denied | |
| Reason for Denial | |
| | - |
| | E) |
| Conditions (if any) | in the second se |

Inst: 2002024573 Date: 12/11/2002 Time: 15:46

Doc Stamp-Deed : 119.00

DC, P. DeWitt Cason, Columbia County B: 969 P:1740

WARRANTY DEED

THIS INDENTURE, made this III day of December, 2002, between ELIZABETH SLAUGHTER, unmarried, whose address is Route 11, Box 342, Lake City, Florida 32024, Grantor, and JOSEPH R. LUCAS and LORETTA Florida 32055, Grantees.

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 Grantees, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantees, and Grantees' heirs, successors and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

TOWNSHIP 2 SOUTH, RANGE 15 EAST

Section 36:

Begin at the Southeast corner of the SW¼ of SW¼ of said Section 36, Columbia County, Florida and run S 88°06′01" W along the South line of said Section 36 a distance of 437.94 feet; thence N 01°53′59" W 203.10 feet; thence N 48°19′06" E 450.47 feet to a concrete monument at the Southwesterly maintained right of way line of Lower Springs Road (a county graded road); thence Southeasterly along said Southwesterly maintained right of way line 634.00 feet more or less to a concrete monument on the South line of Section 36; thence S 88°06′01" W along said South line of Section 36 a distance of 309.31 feet to the point of beginning.

TAX PARCEL NUMBER: R00118-001

SUBJECT TO:

Taxes for 2002 and subsequent years; restrictions and easements of record; and easements shown by the plat of said property.

And said Grantor does hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor has hereunto set her hand and seal the day and year first above written.

Signed, sealed and delivered

in the presence of:

Print Namo: Eddin M. Wasa

ELIZABETH SLAUGHTER

Print Name: Michelle Ugucaho

Witnesses as to Grantor

STATE OF FLORIDA COUNTY OF COLUMBIA

of Decombo, 2002, by ELIZABETH SLAUGHTER. She is personally known to me or has produced Church Hame as identification.

(Notary Seal

Michelle Vaughn
Commission # CC 956240
Expires Aug. 17, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

Print Name Michelle Vaughn
Notary Public/ My Commission Expires:

This Instrument Prepared E; EDDIE M. ANDERSON, P.A. P. O. Box 1179 Lake City Florida 32056-1179 . 08/05/2309 09:42

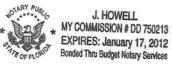
3867582160



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 I FITTER OF AUTHORIZATE

| MOBILE HOME INSTALLI | ERS LETTER OF AUTHORIZATION | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--|
| | | |
| Installer License Holder Name | _ ,give this authority for the job address show below | |
| only, | | |
| Job Address | , and I do certify that | |
| the below referenced person(s) listed on this | s form is/are under my direct supervision and control | |
| and is/are authorized to purchase permits, c | all for inspections and sign on my behalf | |
| Printed Name of Authorized Signature | | |
| Person Person | of Authorized Person is (Check one) | |
| TAIA E. Howell Java & | Howell Agent Officer Property Owner | |
| | Agent Officer Property Owner | |
| | Agent Officer Property Owner | |
| License Holders Signature (Notarized) License Holders Signature (Notarized) License Holders Signature (Notarized) License Holders Signature (Notarized) The above license holder, whose name is Terry Third The personally appeared before me and is known by me or has produced identification (type of I.D.) OTARY'S SIGNATURE | | |
| NOVARY'S SIGNATURE | (Seal/Stamp) | |



AFFIDAVIT AND AGREEMENT OF SPECIAL TEMPORARY USE FOR IMMEDIATE **FAMILY MEMBERS FOR** PRIMARY RESIDENCE

STATE OF FLORIDA COUNTY OF COLUMBIA

| | BEFORE ME the undersigned Notary Public personally appeared. |
|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| mobil to the | onal dwelling (mobile home) as a primary residence for a family member of the Owner, and the Family Member of the Owner, who intends to place a e home as the family member's primary residence as a temporarily use. The Family Member is related Owner as the family Member is related, and both individuals being first duly sworn according to law, e and say: |
| 1. | Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild. |
| 2. | Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement. |
| 3. | The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. Roolls - 001 36-28-15 |
| 4. | No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property. |
| 5. | This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for |
| 6. | This Special Temporary Use Permit on Parcel No. Rooll8-001 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations. |
| 7. | The site location of mobile home on property and compliance with all other conditions not conflicting |

- with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.
- 8. The parent parcel owner shall be responsible for non ad-valorem assessments.

- 9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.
- 10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- 11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- 12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).
- 13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

| We Hereby Certify that the facts represented by us in the terms of the Agreement and agree to comply with it. | is Affidavit are true and correct and we accept the |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Seph R. Lucas III. Owner | Son Brin Lucis Family Member |
| Typed or Printed Name | Typed or Printed Name |
| Subscribed and sworn to (or affirmed) before me this | ersonally known to me or has produced |
| Subscribed and sworn to (or affirmed) before me this Brian E. Lucas (Family Member) Driver License as identification. | 15 day of November, 2010, by who is personally known to me or has produced |
| Notary Public | COLUMBIA COUNTY, FLORIDA |
| J. HOWELL MY COMMISSION # DD 750213 EXPIRES: January 17, 2012 Roaded Tay Burket Notary Services | By: BRIAN. L. KEPNER Title: Land Development Regulation Administrate |

STATE OF FLORIDA DEPARTMENT OF HEALTH

| ADDITION FOR ONSITE SE | WAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT |
|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Att: Janice | Permit Application Number 10-0557 |
| | AND |
| Lucas | PART II - SITEPLAN |
| Scale: 1 inch = 40 feet. | |
| LACRE of 3.69 | A glo |
| Lower Springs 2011 150 2011 201 | Slope Signary of State of Stat |
| | 210 |
| | |
| Notes: | |
| | • |
| | |
| 20d: 7 7 | MASTER CONTRACTOR |
| Site Plan submitted by: Rocky 0 ? | Not Approved Date//- [5] |
| Plan Approved X | Not Approved Columbia CHD County Health Department |
| By Salle 40 42 67 1 | 70. COLORD THE DEPARTMENT |

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 645-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4

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:

11/12/2010

DATE ISSUED:

11/18/2010

ENHANCED 9-1-1 ADDRESS:

134

NW LUCY

GLN

LAKE CITY

FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

36-2S-15-00118-001

Remarks:

PARENT PARCEL (NEW PRIVATE ROAD NAME REQUIRED)

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.



MI OCCUPANO

COLUMBIA COUNTY, FLORIDA

partment of Building and Zoning nspection

and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code. This Certificate of Occupancy is issued to the below named permit holder for the building

Building permit No. 000029013

Parcel Number 36-2S-15-00118-001

Permit Holder TERRY L. THRIFT

Owner of Building JOE LUCAS (BRIAN LUCAS M/H)

Location: 134 NW LUCY GLN, LAKE CITY, FL 32055

Date: 11/30/2010

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)