# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

| For Office Use Only (Revised 7-AP# 43962 Di | ate Received 11 5 19 By   | H Building Official 3 F 500                                      |               |
|---|---|--|---------------|
|   | t PermitZoning_A-2  |  | la            |
| Comments                                    | See Compute Not   | es   | 3             |
|   |   |  |               |
| FEMA Map#Elevation                          | Finished Floor  | River In Floodway  |               |
| Recorded Deed or Property A                 | ppraiser PO Site Plan EH#_  | 9-08/2 □ Well letter 0   | )R_           |
| Existing well                               | ffidavit Nataller Authorization   | □ FW Comp. letter □ App Fee Pai                                  | id            |
| □ DOT Approval □ Parent Parcel              | #STUP-MH  | 5TUP 1911-63 10911 AF  | p             |
| □ Ellisville Water Sys Assessi              | mentawed for Out County   | In County \$20b VF Form  |               |
| Property ID # 20-35-19-                     | 05583-000 Subdivision   | Lot  | t#            |
|   | Used Mobile Home  |  |               |
| Applicant him hom                           | Pho   | one # <u>386689 2345</u>   |               |
|   | ogel Rd lahe city II  | 0  |               |
| Name of Property Owner                      | huby Williams   | _ Phone#_ 386688 3345  |               |
| 911 Address 119 NE Roy                      | man Terr Lake City +  | 2 32055  | 10            |
| Circle the correct power com                | pany - <u>FL Power &amp; Light</u>                                      | - Clay Electric  | 1             |
| (Circle (                                   | One) - Suwannee Valley Elect  | ric - <u>Duke Energy</u>   |               |
| Name of Owner of Mahile Ha                  | me Betty Jacobs + Bult  | COCOL  |               |
|   | wood Cir. Talke City 71   |  | Í             |
| Relationship to Property Own                | ner Batty Jacobs is The   | daughter of Ruby   | 1 C           |
| <b>Current Number of Dwellings</b>          | on Property   | O.   |               |
| Lot Size                                    | Total Acreage_  | 291ac  |               |
| Do you : Have Existing Drive                | or Private Drive or need Culvert (Blue Road Sign) Culvert (Putting in a | Permit Or Culvert Waiver (Circle (Not existing but do not need a | one) Culvert) |
| Is this Mobile Home Replacin                | g an Existing Mobile Home   | 10   |               |
| Driving Directions to the Proj              | perty TL anto US-96   | E Sharp I onto   |               |
| Bascom Morris Dr<br>On Right 150 to         | Th anto NE Roo  | on Terrace. proper   | ty_           |
| Name of Licensed Dealer/Inst                | taller Errest "Scott" Thiso   | nPhone #_ 352 -494-8   | 099           |
| Installers Address <u>22204</u>             | SE US Hwy 301 Mas   | thorne 51 32640  |               |
| License Number TH-10                        | 35349 installat   | ion Decal # 66212  |               |

LH-Emailed Kina 11/13/19

#### **Columbia County Property Appraiser** Jeff Hampton

#### **2019 Preliminary Certified Values**

updated: 8/14/2019

Parcel: << 27-3S-17-05583-000 >>>

| 1.000        |   |  |   |
|--------------|---|--|---|
| Owner & Pi   | operty Info   | Result   | 1 of 2  |
| Owner        | WILLIAMS RUE<br>113 NE ROMAN<br>LAKE CITY, FL   | TER  |   |
| Site         | 113 ROMAN TE  | R, LAKE CITY   | ,   |
| Description* | COMM SW COR,<br>FOR POB, RUN E<br>NW ALONG R/W<br>129.51 FT, E 373.<br>FT, S 178.62 FT, V<br>220.33 FT TO PO<br>419.12 FT, N 21.2 | E 90 FT TO E R.<br>213.58 FT, E 78<br>82 FT, S 46.32<br>N 30 FT, S 72.8<br>B & COMM SW | W SR-25A,<br>3.91 FT, NE<br>FT, W 105<br>6 FT, W<br>COR RUN E |
| Area         | 2.91 AC   | S/T/R  | 27-3S-17  |
| Use Code**   | SINGLE FAM<br>(000100)  | Tax District   | 3   |

<sup>\*</sup>The Description above is not to be used as the Legal Description for this

| Aerial Viewer | Pictometery |
|---------------|-------------|
|---------------|-------------|

Google Maps

|            | THE PERSON NAMED IN | Na indason   |             |                  | 27                         |
|------------|---------------------|--|-------------|------------------|----------------------------|
| Najoranger |                     | TEALPHA Ter  | TO NEVENDEN | R WILL           | 27<br>WI<br>11<br>27<br>Tx |
| RMULAYO    |                     | The Control of the Co | REWAY       | NE EIZINASIKSWID |                            |
|            |                     | 2.00   | SEYMOR      |                  | 4                          |

#### Property & Assessment Values

| 2018 Cert    | ified Values           | 2019 Preliminary Certified |                        |  |  |  |
|--------------|------------------------|----------------------------|------------------------|--|--|--|
| Mkt Land (4) | \$19,547               | Mkt Land (4)               | \$20,04                |  |  |  |
| Ag Land (0)  | \$0                    | Ag Land (0)                | \$(                    |  |  |  |
| Building (1) | \$48,987               | Building (1)               | \$57,98                |  |  |  |
| XFOB (8)     | \$5,800                | XFOB (8)                   | \$5,800                |  |  |  |
| Just         | \$74,334               | Just                       | \$83,82                |  |  |  |
| Class        | \$0                    | Class                      | \$(                    |  |  |  |
| Appraised    | \$74,334               | Appraised                  | \$83,829               |  |  |  |
| SOH Cap [?]  | \$39,549               | SOH Cap [?]                | \$48,360               |  |  |  |
| Assessed     | \$34,331               | Assessed                   | \$35,46                |  |  |  |
| Exempt       | HX H3<br>OTHER\$25,500 | Exempt                     | HX H3<br>OTHER\$25,500 |  |  |  |
|              | county:\$8,831         |                            | county:\$9,54          |  |  |  |
| Total        |                        | Total                      | city:\$9,54            |  |  |  |
| Taxable      | other:\$8,831          | Taxable                    | other:\$9,54           |  |  |  |
|              | school:\$8,831         |                            | school:\$9,969         |  |  |  |

#### Sales History

| Sale Date | Sale Price | Book/Page | Deed | V/I | Quality (Codes) | RCode |
|-----------|------------|-----------|------|-----|-----------------|-------|
| 9/26/2011 | \$100      | 1222/0401 | QC   | ٧   | U               | 11    |

#### **▼** Building Characteristics

| Bldg Sketch | Bldg Item | Bldg Desc*          | Year Blt | Base SF | Actual SF | Bldg Value |
|-------------|-----------|---------------------|----------|---------|-----------|------------|
| Sketch      | 1         | SINGLE FAM (000100) | 1959     | 1250    | 1851      | \$57.982   |

<sup>\*</sup>Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

| ~ | Extra | <b>Features</b> | & | Out | Buildings | (Codes) |
|---|-------|-----------------|---|-----|-----------|---------|
|---|-------|-----------------|---|-----|-----------|---------|

| l    |      | ····     |       |       |      |                    |
|------|------|----------|-------|-------|------|--------------------|
| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |

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.

#### Legend

#### 2018Aerials

SRWMD Wetlands

#### Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

Private2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A D

■ AE

AH

LidarElevations

### Columbia County, FLA - Building & Zoning Property Map

Printed: Fri Nov 08 2019 15:48:09 GMT-0500 (Eastern Standard Time)



#### Parcel Information

Parcel No. 27-3S-17-05583-000

Owner: WILLIAMS RUBY

Subdivision:

Lot:

Acres: 2.711286

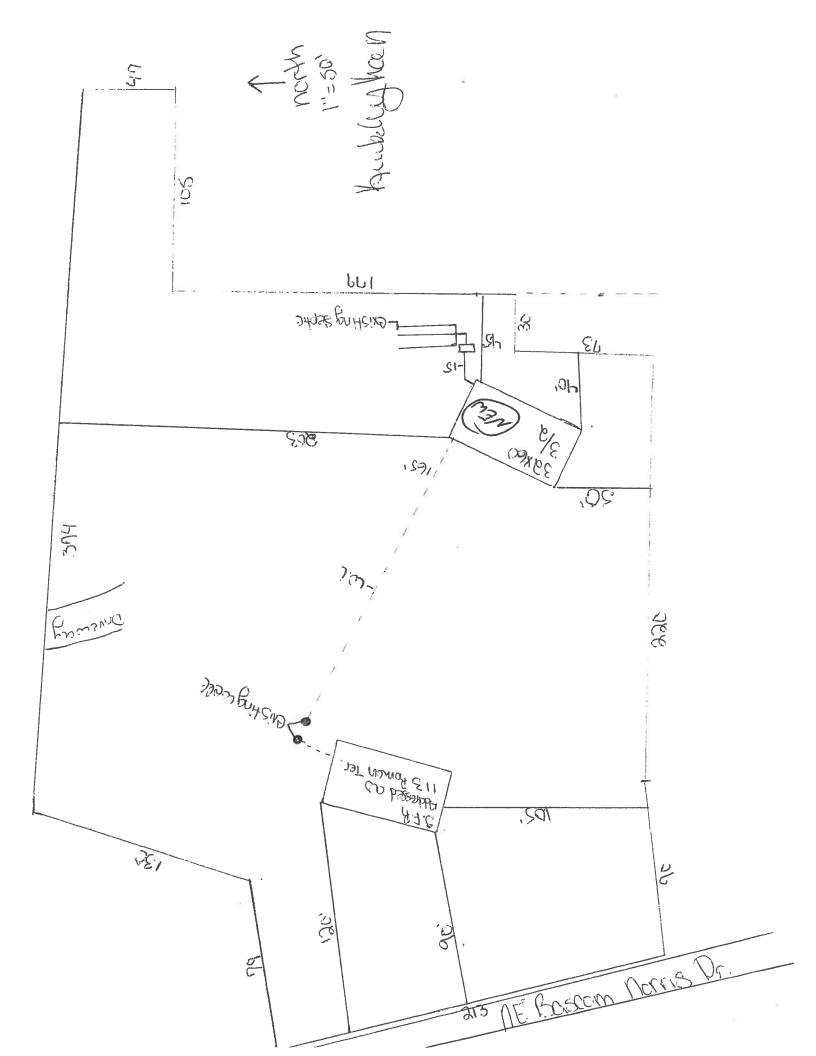
Deed Acres: 2.91 Ac

District: District 4 Toby Witt

Future Land Uses: Agriculture - 2

Flood Zones:

Official Zoning Atlas: A-2, CSV



#### POPULAR PAD SIZES 24" X 24" (576)\* Pad Size 16 x 16 16 x 18 18.5 x 18.5 16 x 22.5 SBHGA11911159AB Wind Zone III 3 Date: PIER SPACING TABLE FOR USED HOMES 22" x 22" (484)\* Home installed to the Manufacturer's Installation Manual 20" x 20" (400) 23x31 7'0C Home is installed in accordance with Rule 15-C 7.5 x 25.5 Installation Decal # interpolated from Rule 15C-1 pier spacing table l Wind Zone II 18 1/2" x 18 **Used Home** 1/2" (342) Serial # PIER PAD SIZES 16" x 16" Perimeter pier pad size (256)Other pier pad sizes I-beam pier pad size Application Number: (sq in) Footer size Double wide Triple/Quad New Home Single wide 2000 psf 2500 psf 3000 psf 1500 ps 3500 ps bearing capacity Load Show locations of Longitudinal and Lateral Systems Johnson License # IH 1025249 (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. 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 parriage wall piers within 2' of end of home Mobile Home Permit Worksheet Installer's initials Length x width 32055 NE ROMON ICT 引 longitudinal そう 200 180 Installer: Ecoco Typical pier spacing -Address of home being installed Manufacturer Ō

26" x 26" (9/9)

| 13 1/4 x 26 1/4 348    | 20 × 20<br>17 3/16 × 25 3/16   | 17 1/2 x 25 1/2 446<br>24 x 24 576 | 26 x 26   | ANCHORS                           |                 | 4 H 5 H     | FRAMETIES | within 2' of end of home<br>spaced at 5' 4" oc | OTHER TIES         |                                       | ateral Arms Marriage wall (A                                    |
|------------------------|--|------------------------------------|---|-----------------------------------|-----------------|-------------|-----------|--|--------------------|---------------------------------------|---|
| the mig.)              | 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 | alla tileli piet pad sizes below. | g Pier pad size | 17.5 x 25.5 | (         |  | TIEDOWN COMPONENTS | Longitudinal Stabilizing Device (LSD) | Manufacturer<br>Longitudinal Stabilizing Device w/ Lateral Arms |
| (reduired by the mig.) | Draw   | symt                               | List all marrie                                     | allo meii pie                     | Opening         | Living Rm   | 1         | )  |                    | Longitudina                           | Longitudinal  |

# **Mobile Home Permit Worksheet**

Date:

Application Number:

|   | <b>≤</b> ử  |  | <u></u>       |                   |   | d 5 ft The orgue test Sit Cturer may Fig.  |
|---|---|--|---------------|-------------------|---|--|
| The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing. | POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the home at 6 locations. | Take the reading at the depth of the footer.     Using 500 lb. increments, take the lowest reading and round down to that increment. | QOOL X DOOL X | 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. | 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 contentine tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4600 to holding capacity. |

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER HER Name  $E_{CA}$  S  $\int_{a} h s \omega \Lambda$ 

Installer Name CCOR

Uses 45 5 44 Anchore

# 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.

Installer verifies all information given with this permit worksheet

is accurate and true based on the

manufacturer's installation instructions and or Rule 15C-1 & 2

# Plumbing

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

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

| Debris and organic material removed Water drainage: Natural Swale Pad Other  Fastening multi wide units  Floor: Type Fastener: 12,5 Length: 4" Spacing: 10  Roof: Type Fastener: 14,5 Length: 4" Spacing: 10  For used homes 4 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.   | Site Preparation   |
|---|--|
| Type Fastener: // Type Fastener: // Type Fastener: // For used homes will be centered or  | srial removed<br>Swale Pad   |
| Type Fastener: // Type Fastener: // Type Fastener: // For used homes will be centered or  | Fastening multi wide units   |
|   | Type Fastener: [Independent of Independent of Indep |
|   | l 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. Lupderstand a strip of tape will not serve as a gasket.  Type gasket  Type gasket  Pg.  Between Walls Yes  Bottom of ridgebeam Yes   |
| derstand a properly installed gasket is a requirement es and that condensation, mold, meldew and bucklec sult of a poorly installed or no gasket being installed.  pe will not serve as a gasket.  Installer's initials  Between Floors  Between Walls  Rethes Walls  | Weatherproofing  |
| derstand a properly installed gasket is a requirement es and that condensation, mold, meldew and bucklec sult of a poorly installed or no gasket being installed.  pe will not serve as a gasket.  Installer's initials  Between Floors Y  Between Walls Y  Bottom of ridgebea  | 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  |
| derstand a properly installed gasket is a requirement es and that condensation, mold, meldew and bucklec sult of a poorly installed on no gasket being installed.  Installer's initials  Between Floors Y Between Valls Y Bottom of ridgebee was postomerated and/or taped.  Weatherproofing  Weatherproofing  Dottomboard will be repaired and/or taped. Yes ng on units is installed to manufacturer's specification of olace chimney installed so as not to allow intrusion of | Miscellaneous  |
| derstand a properly installed gasket is a requirement es and that condensation, mold, meldew and bucklec sult of a poorly installed on o gasket being installed.  Pe will not serve as a gasket.  Installer's initials  Between Floors Y  Between Walls Y  Bottom of ridgebea  Weatherproofing  Weatherproofing  Description of specification of on units is installed to manufacturer's specification of on units is installed so as not to allow intrusion of Miscellaneous     | 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 crossovers protected. Yes Other:   |

Installer Signature

#### STATE OF FLORIDA COUNTY OF COLUMBIA

#### LAND OWNER AFFIDAVIT

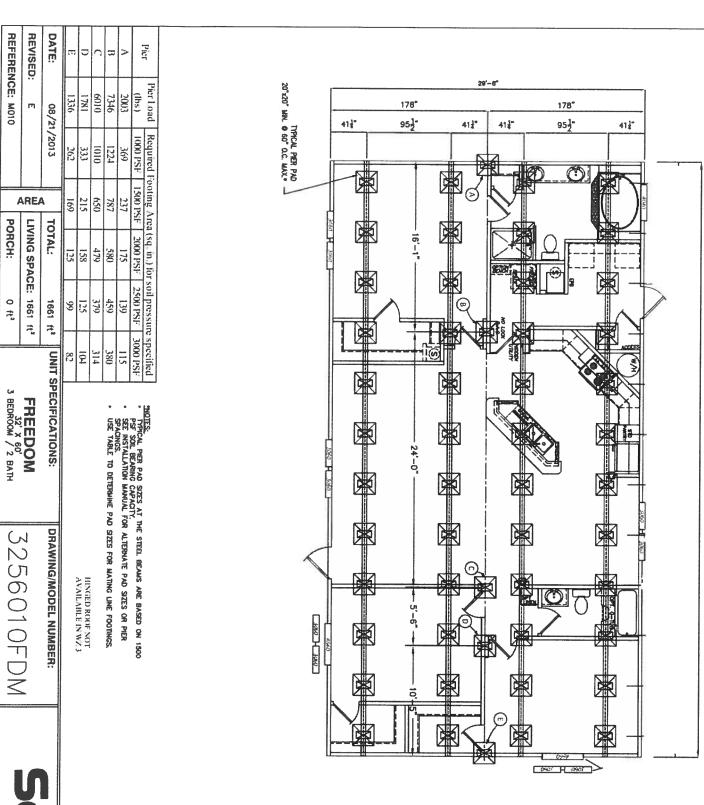
| This is to certify that I, (We), Puby  | Villiams.   |
|--|---|
| as the owner of the below described property:  |   |
| Property tax Parcel ID number 35   | -17-05583-000   |
| Subdivision (Name, lot, Block, Phase)  |   |
| Give my permission for Bolly Jacobs +  | Paul Foster to place a  |
| <u>Circle one</u> - <u>Mobile Home</u> / Travel Trailer / Util<br>Barn – Shed – Garage / Culvert / O   |   |
| I (We) understand that the named person(s) abore permit on the property number I (we) have listed assessment for solid waste and fire protection see   | d above and this could result in an                                     |
| Owner Signature Da   | 10 28 19<br>te  |
| Owner Signature Date   | te  |
| Owner Signature Date   | te  |
| <b>Sworn</b> to and subscribed before me this $28$ c   |   |
| Athese) person(s) are personally known to me or help the large and hel | produced ID <u>Drivers</u> License (Type)  Dicca L Arnau y Printed Name |
| Notary Stamp  REBECCA L. ARNAU  MY COMMISSION # GG 346128  EXPIRES: October 18, 2023   |   |



#### COLUMBIA COUNTY BUILDING DEPARTMENT 135 NF Hernando Ave. Suite B-21. Lake City. FL 32055 Phone: 386-758-1008 Law 386-758-2160

## LETTER OF AUTHORIZATION TO SIGN FOR FERMITS

| - 112 day - 1  |
|--|
| Lawst Solt stanson (license holder name) licensed qualifier  |
| for Dependence mobile Home Service (Company name), do certify that   |
| the below referenced person(s) listed on this form is/are contracted/nired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement, or is an officer of the corporation, or, partner as defined in Florida Statutes Chapter 458, and the said person(s) 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 Person Authorized   Signature of Authorized Person   |
| 1 himberly harm 1 knowled Vecon  |
| 2  |
| 3  |
|  |
| 5  |
| Secretary of the secret |
| the intense of the creatize that I am responsible to all permits purchased and all work done that my lives as and fully responsible for compliance with all Florida Statutes. Codes and cool Ordinant is I understand that the State and County liberasing Boards have the power and authority to distribute a I cense holder for violations committed by him/her, insider agents, officers for emphysics and that I have full responsibility for compliance with all statutes, codes and circlinance, therent in the privilege granted by issuance of such permits.   |
| if at any time the person(si you have authorized is/are no longer agents, encloyee(s), or office (s), you thus notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.  |
| License Holders Signature (Notarized) Libense Number Date  |
| NOTARY INFORMATION STATE OF Florida COUNTY OF COlumbia   |
| personally appeared before me and is known by me or has produced identification (type of I.D.)   |
|  |
| NOTARY'S SIGNATURE REDECCY L'ANNUM   |
| MY COMMISSION # GG 346128 EXPIRES: October 18, 2023 Bonded Thru Notary Public Its  |



FLORIDA MULTIWIDE PIERING DIAGRAM



# HITCH-END

BEDROON AS 10'-6" X 14'-6"



3256010FDM

UNIT SPECIFICATIONS:

1661 ftª LIVING SPACE: 1661 ft 0 #4 PORCH:

I

REVISED: DATE:

REFERENCE: MOTO

08/21/2013

TOTAL:

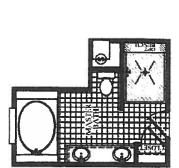
ABRA

WAIKIN WALKIN BEDROOM#2 10'-0' K 14'-2' DRAWING/MODEL NUMBER: HINGED ROOF NOT AVAILABLE IN WZ 3

LIVING ROOM 20"6" X 14"-8"

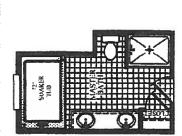
WALK 4N

MASTER BEDROOM 14"-6" X 14"-8"



26'-0"

O PENDENT
LIGHTING
RECUSSIND
LIGHTING



#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NU                  | MBER CONTRACTOR   | PHONE  |
|---------------------------------|---|--|
|                                 | THIS FORM MUST BE SUBMITTED PRIOR TO TH   | E ISSUANCE OF A PERMIT   |
| records of the<br>Ordinance 89- | ounty one permit will cover all trades doing work at the<br>subcontractors who actually did the trade specific work<br>6, a contractor shall require all subcontractors to provic<br>neral liability insurance and a valid Certificate of Compe | k under the permit. Per Florida Statute 440 and<br>de evidence of workers' compensation or |
|                                 | the permitted contractor is responsible for the correcter is beginning any work. Violations will result   |  |
| ELECTRICAL                      | License #: <u>FC 13003951</u> P   | ignature <u>Elenn Mustingtan Kinka</u> r<br>hone #: 386 684 460                            |
|                                 | Qualifier Form Attached   |  |
| MECHANICAL/                     | ONAA (DBac  | ignature Line Hey Shalle Killer<br>Phone #: 386 496 8224                                   |
|                                 | Qualifier Form Attached   |  |

**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.

## LIMITED POWER OF ATTORNEY

| I, Both Janbs + Paul Fosts (do hereby authorize Limberly han to be                      |
|---|
| my representative and act on my behalf in all aspects of applying for a mobile + Septic |
| permit to be placed on my property described as: Sec <u>37</u> Twp. <u>3</u> S          |
| RgeE Tax Parcel No  |
| (Property Owner Signature)  10-28-2019 (Date)   |
| Sworn to and subscribed before me this 28th day of Cotober, 20 19                       |
| Rebecca h arnau  Notary Public  REBECCA L ARNAU   |
| My Commission expires: EXPIRES: October 18, 2023 Commission No. Personally known:       |
| Produced ID (Type)  |



## SHATTO HEATING & AIR, INC. 595 WEST MAIN STREET LAKE BUTLER, FL 32054

Office (386)496-8224 Fax (386)496-9065 service@shattoair.com

| Contractor A  | ffidavit for Agency:  |
|---|---|
| DATE: 10 31 2019  |   |
| I hereby authorize: Kumberly Koon   | . to be my  |
|   | EATING & AIR, INC. ne of Company)   |
| This authorization becomes effective of the date this aff   | idavit is notarized.  |
| This authorization acts a Durable Power of Attorne HVAC (Mechanical) permit for:                                    | y ONLY for the purpose of applying and signing for the  |
| The undersigned understands the liabilities involved in and all of the actions of the agent named related to this a | the granting of this agency and accepts full responsibility for any acquisition for the aforementioned company. |
| Timothy D. Shatto (Print Name)  Limothy D. Shatto (Qualifier's Signature)   |   |
| STATE OF FLORIDA COUNTY OF: UNION  The foregoing instrument was acknowledged before me                              | e this  |
| as identif  Motary Signature  Pamela G Williams  Notary Printed Signature   | PAMELA G WILLIAMS Notary Public-State of Florida Commission # GG 363303 My Commission Expires August 07, 2023   |

## WHITTINGTON ELECTRIC INC

164 QUEENS COUNTRY RD, INTERLACHEN FLORIDA 32148

PHONE: 386-684-4601 CELL: 386-972-1700 OR 1701

FAX: 386-684-3906 E-FAX#:866-496-3066 EMAIL:-whitt1954@gmail.com

This letter is to state that I,Glenn Whittington, state certified electrical contractor #EC13002957 authorize Kimberly koon to act on my behalf in obtaining permits in any county or city in the state of florida.

| This authorization is to remain in effect indefinitely,                 | unless cancelled by me in writing.                   |
|---|--|
| Sworn to and subscribed to before me this 19 of personally known to me. | day of عدام 201 <b>9</b> by Glenn Whittington who is |
| Notary public  My commission expires 11 - 30 - 21.                      |  |
|   | CHICANIAL DAID                                       |

Notary Public - State of Florica Commission # GG 131159 My Comm, Expires Nov 30, 2021 District No. 1 - Ronald Williams District No. 2 - Rocky Ford



#### **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:

11/6/2019 8:35:27 PM

Address:

119 NE ROMAN Ter

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

05583-000

REMARKS: Address for proposed structure on parcel. 2nd address for this parcel.

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

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

This Instrument Prepared By:

A. Wayne Church 2179 NE Bascom Norris Drive Lake City, FL. 32055

PARCEL NO: A part of: 27-3s-17-05589-000

Inst 201112014930 Date 9/30/2011 Time 10 59 AM

(Picc Startip-Deed 0 70

DC,P DeWitt Cason,Columbia County Page 1 of 2 8 1222 P 401

#### **QUIT CLAIM DEED**

This Quit-Claim Deed, made the 26th day of Softmer 2011, by A. Wayne Church, an unremarried widower, whose post office address is: 2179 NE Bascom Norris Drive, I ake City, Florida 32055, hereinafter called the Grantor, to Ruby Williams a single woman, whose post office address is 113 NE Roman Terrace, Lake City, Florida 32055, hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH: That the Grantor, for and in consideration of the sum of TEN DOLLARS (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the Grantee all that certain land situate, lying and being in COLUMBIA County, State of Florida, viz:

#### Schedule "A" attached

To Have and to Hold The same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity to the only proper use, benefit and behoof of the said second party forever.

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

Signed, sealed and delivered in the presence of:

Printed Name

| Dinger Charterroad   |   |
|--|---|
| Witness Signature  |   |
| Ginger Cheatwood   | a. Wayne Church   |
| Printed Name   | A. Wayne Study  |
| 17 Marie   | A. Wayne Charen   |
| Uncela COX   |   |
| Witness Signature  |   |
| Angela Cax   |   |
| Printed Name   |   |
| STATE OF FLORIDA<br>COUNTY OF COLUMBIA   |   |
| I hereby certify that on this day, before me, an officer duly aut acknowledgments, personally appeared A. Wayne Church kt and who executed the foregoing instrument, who acknowledg oath was not taken. (Check one:) Said person(s) is personally provided the following type of identification: December 2. | nown to me to be the persons described in<br>ed before me that executed the same, and an<br>ally known to me.  Said person(s) |
| Witness my hand and official seal in the County and State last   | aforesaid   |
| This day of Sephrater, 2011.   | ANGELA COX  |
| aucela Cox   | V COMMUSSION # DD 911648<br>CXPRES: August 3, 2013<br>dt Thru Notary Addic Underwriters                                       |
| Notary Signature   |   |
| Angela Cox   |   |

Inst. Number: 201112014930 Book: 1222 Page: 402 Date: 9/30/2011 Time: 10:59:03 AM Page 2 of 2

#### **SCHEDULE "A"**

#### **Description:**

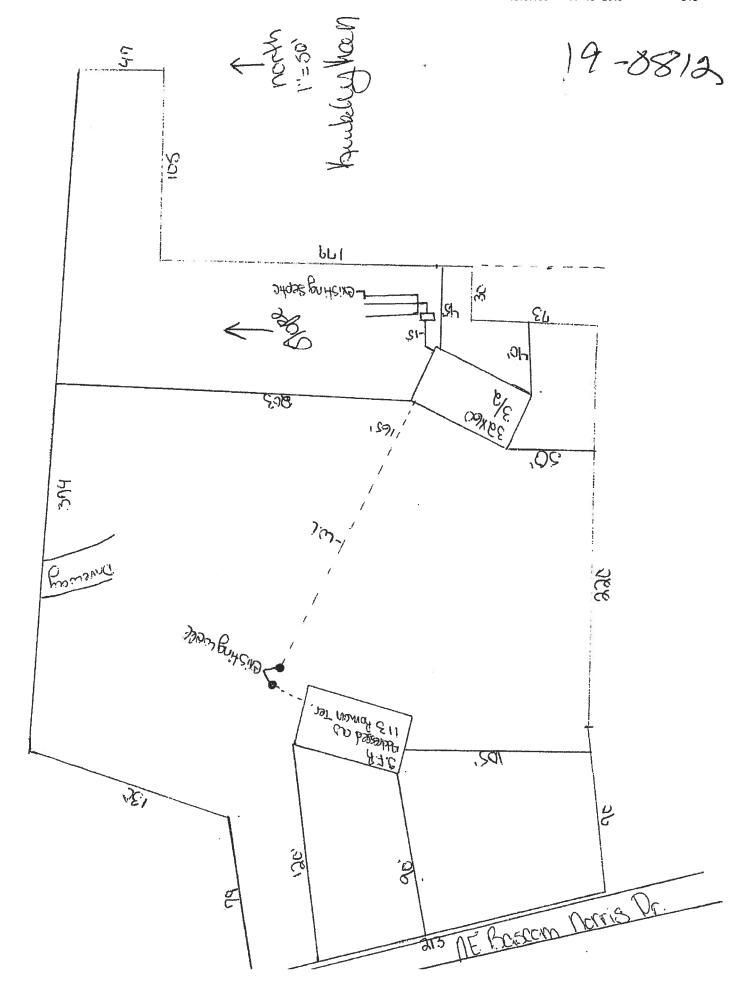
COMMENCE AT THE SW CORNER OF THE SW1/4 OF THE SW1/4 OF SECTION 27, TOWNSHIP 3 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AND RUN N 88° 01' 00" E, 419.12 FEET, THENCE N 00° 44' 43" W, 21.23 FEET, THENCE N 88° 52' 26" W, 9.51 FEET TO THE EASTERLY RIGHT-OF-WAY LINE OF NE BASCOM NORRIS ROAD, THENCE N 25° 45' 05" W, ALONG SAID RIGHT-OF-WAY LINE 202.72 FEET TO THE POINT OF BEGINNING: THENCE N 79° 34' 19" E, 96.57 FEET, THENCE S 88° 25' 55" W, 102.09 FEET TO THE AFOREMENTIONED RIGHT-OF-WAY LINE, THENCE S 25° 45' 05" E, ALONG SAID RIGHT-OF-WAY LINE 16.30 FEET TO THE POINT OF BEGINNING, CONTAINING 0.02 ACRES MORE OR LESS.



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

| PERMIT NO.              | 19-1812  |
|-------------------------|--|
| DATE PAID:<br>FEE PAID: | 1118180  |
| RECEIPT #:              | 1452556  |
|                         | The state of the s |

|                             |   |   |  | •  |   |
|-----------------------------|---|---|--|--|---|
| [ ]                         | ATION FOR:<br>New System [ \sqrt{1} E:<br>Repair [ ] A  | xisting Syst  | tem [  | Holding Tank Temporary                                     | [] Introvative                          |
| APPLIC                      | ANT: Belly Joseph   | s of Pau  | il Asser   | Ruhy 1   | Williams                                |
| AGENT:                      | DIMORIY K   | wn  |  | TE:  | LEPHONE: DECOME 431)                    |
| MAILIN                      | g address: 1154 No  | w noog  | el hd k  | who city *1  | 39022                                   |
| TO BE BY A P APPLIC. PLATTE | COMPLETED BY APPLICANT ERSON LICENSED PURSUANT ANT'S RESPONSIBILITY TO (MM/DD/YY) IF REQUEST TY INFORMATION | OR APPLICAI<br>T TO 489.10:<br>D PROVIDE DO<br>FING CONSIDI | NT'S AUTHOR<br>5(3)(m) OR<br>DCUMENTATIO<br>ERATION OF | 489.552, FLORIDA<br>N OF THE DATE THE<br>STATUTORY GRANDFA | LOT WAS CREATED OR                      |
| LOT:                        | BLOCK:  | SUBDIVISION   | :  |  | PLATTED:                                |
| PROPER'                     | TY ID #: 27-35-17   | -05583-0  | SCC ZONIN  | 3: I/M OI  | R EQUIVALENT: [ Y/N ]                   |
| PROPER'                     | TY SIZE: 291 ACRES  | WATER SUPPI   | Y: [ // PR   | IVATE PUBLIC [   | ]<=2000GPD [ ]>2000GPD                  |
| IS SEW                      | ER AVAILABLE AS PER 381   | 1.0065, FS?   | [ Y/N ]  | DISTA  | NCE TO SEWER: FT                        |
| PROPER                      | TY ADDRESS: 119NER  | man '   | Terr.  |  |   |
| DIRECT:                     | IONS TO PROPERTY:   | - onto (  | 13-90E   | . Shorp I c  | ento Bascom                             |
|                             | 3 Pr, TB onto   |   |  |  |   |
|                             |   |   |  |  |   |
| BUILDIN                     | NG INFORMATION  | [ ] RESID   | ENTIAL   | [ ] COMMERCI   | AL                                      |
|                             | Type of<br>Establishment  | No. of<br>Bedrooms  | Building<br>Area Sqft                                  | Commercial/Insti<br>Table 1, Chapter                       | tutional System Design<br>64E-6, FAC    |
| 1                           |   |   |  |  |   |
| 2                           | S.F.O.MH  | 3   | 1661   |  | [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] |
| 3                           |   |   |  |  | IDECE I VENI                            |
| 4 _                         |   | Annihilit Assal delikinissilasida saharak saha              |  | ***************************************                    | NOV 1 2 2019                            |
| [ ] F                       | Floor/Equipment Drains  | [ ] Oth   | er (Specify  | ")   | By                                      |
| SIGNATU                     | TRE: Gulely   | 1 hour  |  | and a contract of the second                               | DATE:   -    9                          |
|                             | o, 08/09 (Obsoletes pre<br>prated 64E-6.001, FAC  | vious editi   | ons which r  | may not be used)   | Page 1 of 4                             |



# STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-3813

------PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet, Notes: \_ Not Approved\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

STATE OF FLORIDA COUNTY OF COLUMBIA Inst: 201912026517 Date: 11/14/2019 Time: 12:52PM Page 1 of 2 B: 1398 P: 2298, P.DeWitt Cason, Clerk of Court Columbia, County, By: PT Deputy Clerk

| the Fa | BEFORE ME the undersigned Notary Public personally appeared, head to family from the Owner of the parcel which is being used to place an additional dwelling (mobile) as a primary residence for a family member of the Owner, which is place a mobile home as the family member's ary residence as a temporarily use. The Family Member is related to the Owner as bottof and both individuals being first duly sworn according to law, depose 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  |
| 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 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.         |
| 6.     | This Special Temporary Use Permit on Parcel No   |

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.

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.

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 this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it. Kubye Williams Better (Owner) who is personally known to me or has produced Jacobas identification. REBECCA L ARNAU MY COMMISSION # GG 346128 EXPIRES: October 18, 2023 **Notary Public Bonded Thru Notary Public Underwriters** Subscribed and sworn to (or affirmed) before me this day of , 20 , by (Family Member) who is personally known to me or has produced as identification. COLUMBIA COUNTY, FLORIDA Notary Public

Planning Techn