DATE 12/06/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029798

APPLICANT STEVEN BURNETTE PHONE 867-3143

ADDRESS 263 NE WINDALL LANE LAKE CITY FL 32055

OWNER STEVEN BURNETTE PHONE 867-3443

ADDRESS 263 NE WINDALL LANE LAKE CITY FL 32055

CONTRACTOR JERRY CORBETT PHONE 386 590-0470

LOCATION OF PROPERTY 441N, TR ON WINDALL LANE, 4TH LOT ON LEFT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES 1

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING RSF/MH2 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 20-3S-17-05253-000 SUBDIVISION PINE NEEDLES EST

LOT 9 BLOCK ____ PHASE ____ UNIT ____ TOTAL ACRES 68.00

		IH1025368	Steven L Burnette	
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
EXISTING	11-492	BK	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: NO CHARGE-BURN OUT, ONE FOOT ABOVE THE ROAD

FIRE REPORT IN FILE

Check # or Cash NO CHARGE

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power _____ date/app. by

Foundation _____ date/app. by

Monolithic (footer/Slab) _____ date/app. by

Under slab rough-in plumbing _____ date/app. by

Slab _____ date/app. by

Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by

Insulation _____ date/app. by

Rough-in plumbing above slab and below wood floor _____ date/app. by

Electrical rough-in _____ date/app. by

Heat & Air Duct _____ date/app. by

Peri. beam (Lintel) _____ date/app. by

Pool _____ date/app. by

Permanent power _____ date/app. by

C.O. Final _____ date/app. by

Culvert _____ date/app. by

Pump pole _____ date/app. by

Utility Pole _____ date/app. by

M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Reconnection _____ date/app. by

RV _____ date/app. by

Re-roof _____ date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 0.00 ZONING CERT. FEE $ ____ FIRE FEE $ 0.00 WASTE FEE $ _____

FLOOD DEVELOPMENT FEE $ _____ FLOOD ZONE FEE $ _____ CULVERT FEE $ _____ **TOTAL FEE** 0.00

INSPECTORS OFFICE Hale Tedder CLERKS OFFICE CH

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.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

$65.00 Pd by Steven FIRE REPORT * Burnt Out *

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BK 2 Dec 2011 Building Official J.C. 11-30-11

AP# 1111-36 Date Received 11/29 By JW Permit # 29798

Flood Zone X Development Permit N/A Zoning RSF/MH-2 Land Use Plan Map Category RES. Low Den.

Comments NO CHARGE for Service - BURN-OUT -

FEMA Map# N/A Elevation N/A Finished Floor Unknown River N/A In Floodway N/A

☐ Site Plan with Setbacks Shown ☐ EH # 11-0492-E ☐ EH Release ☒ Well letter ☐ Existing well

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

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☐ VF Form ☐ AC GRANT

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

Road/Code School = TOTAL Impact Fees Suspended March 2009 Pd 11-29-11

Property ID # 20-3S-17-05253-000 Subdivision Pine Needles Estates Lot #9

- New Mobile Home ~~SW~~ Used Mobile Home DW MH Size 28x76 Year 1999
- Applicant Gwen Walker / Treena Foster Phone # 386-362-1948 (Steven Burnette)
- Address 10314 US Hwy 90 E Live Oak, FL. 32060
- Name of Property Owner Steven Burnette Phone# 386-867-3143
- 911 Address 263 NE Windall Lane Lake City, FL 32055
- Circle the correct power company - (FL Power & Light) - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Steven Burnette Phone # 386-867-3143
  Address 263 N.E. Windall Lane Lake City, FL 32055
- Relationship to Property Owner owner
- Current Number of Dwellings on Property 0 Burnt Down
- Lot Size 170 x 200 Total Acreage 0.688
- 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 Site built (Burnt Down) Pd
- Driving Directions to the Property Turn Rt on Take N. Marion Ave (US 441) go 1.8 mile turn Rt on to NE Windall Lane go 0.2 mile (263 NE Windall Lane) spot on the left. 4th lot on left
- Name of Licensed Dealer/Installer Jerry Corbett Phone # 386-590-0470
- Installers Address 10314 US Hwy 90 E Live Oak, FL. 32060
- License Number IH-1025368 Installation Decal # 8693

Spoke to Steven - 12/2/11

PERMIT NUMBER

PERMIT WORKSHEET

Installer Jerry Corbett License # IH-1025368

Address of home being installed 263 N.E. Windall Lane, Lake City, FL 32055

Manufacturer Redman Length x width 76x28

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 JC

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 ☐

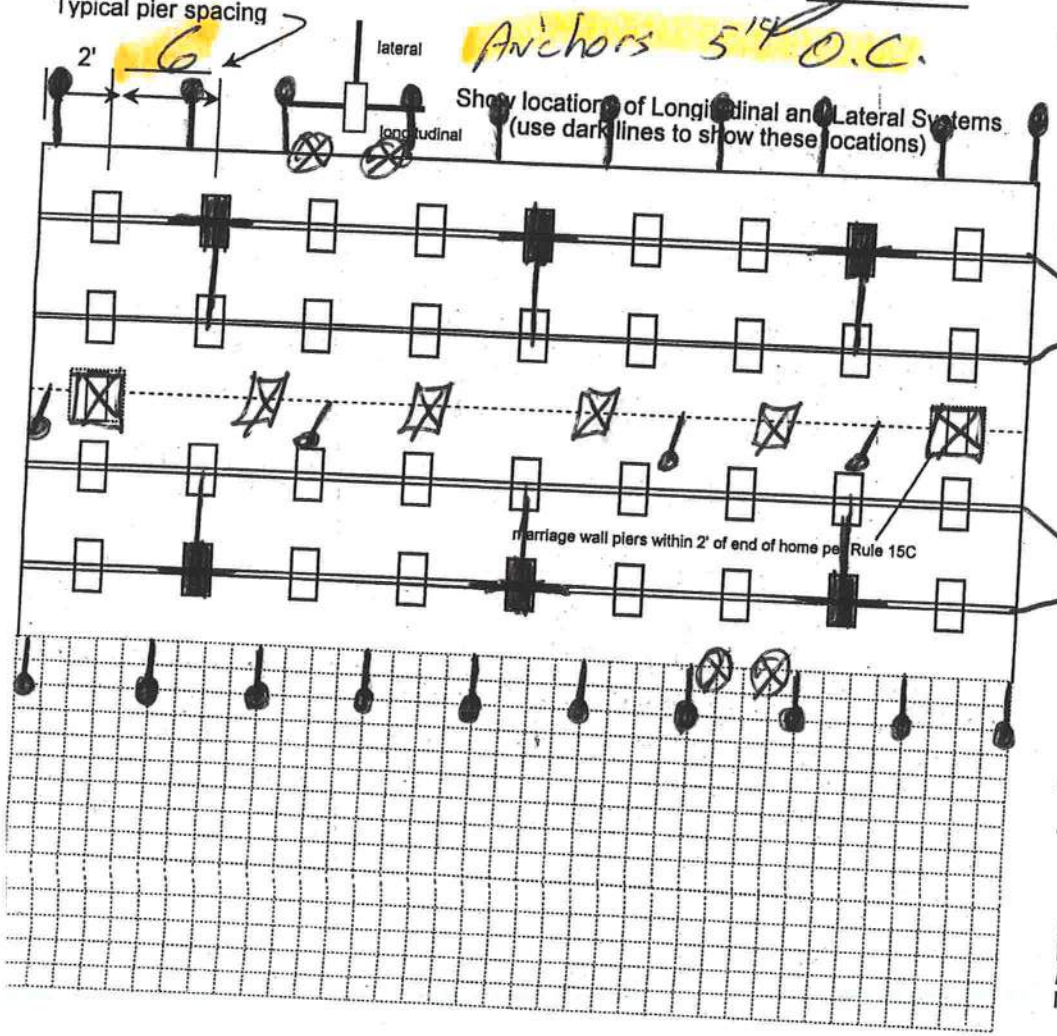
Double wide ☒ Installation Decal # 8693

Triple/Quad ☐ Serial # FLA1461429AB

(446)

Typical pier spacing 2' 6

Anchors 5'4" O.C.



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

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 17½x25½x1

Perimeter pier pad size 17½x25½x1

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
14 Ft.	26x26x1

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 Olivet Tech

OTHER TIES

	Number
Sidewall	30
Longitudinal	6
Marriage wall	
Shearwall	2

PERMIT NUMBER

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1,500 psf or check here to declare 1000 lb. soil _____ without testing.

x 1500 x 1600 x 1700

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 1600 x 1700 x 1600

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

JC Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Jerry Corbett

Date Tested 11-21-11

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. _____

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. _____

Site Preparation

Debris and organic material removed ✓

Water drainage: Natural _____ Swale _____ Pad ✓ Other _____.

Fastening multi wide units

Floor:	Type Fastener:	3/8	Length:	6	Spacing: 24"/1
Walls:	Type Fastener:		Length:		Spacing:
Roof:	Type Fastener:		Length:		Spacing:

For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

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

Pg. _____

Installer's initials JC

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 ✓

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

Installer Signature Jerry Corbett Date 11-21-11

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of $150.

I, Jerry Corbett (Please Print), license number IH - 1025368

do hereby state that the installation of the manufactured home for Steven Burnette (Applicant) at 263 N.E. Windall Lane Lake City, FL 32055 (911 Address)

will be done under my supervision.

Jerry Corbett
Signature

Sworn to and subscribed before me this 18th day of November, 2011.

Notary Public: Gwen H. Walker
Signature

My Commission Expires: _____
Date

GWEN H. WALKER
MY COMMISSION # DD 929542
EXPIRES: December 29, 2013
Bonded Thru Notary Public Underwriters

AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Steven Burnette

Property ID: Sec: 20 Twp: 3S Rge: 17 Tax Parcel No: 05253-000

Lot: 9 Block: _____ Subdivision: Pine Needle Estates

Mobile Home Year/Make: 99 - Redman Size: 28 x 76

Jerry Corbett
Signature of Mobile Home Installer

Sworn to and subscribed before me this 18th day of December, 2011

by Jerry Corbett.

GWEN H. WALKER
MY COMMISSION # DD 929542
EXPIRES. December 29, 2013
Bonded Thru Notary Public Underwriters

Notary's name printed/typed

Notary Public, State of Florida
Commission No. _____
Personally Known: ✓
Produced ID (type) _____

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1111-36 CONTRACTOR Jerry Corbett PHONE 386.590.0470

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 Steven Burnette (property owner) License #: X	Signature X Phone #: 386-867-3143
MECHANICAL/ A/C 701	Print Name Robert Grant License #: CAC 1814931	Signature X Phone # 800-800-5700
PLUMBING/ GAS ✓	Print Name Steven Burnette (property owner) License #: X	Signature Phone #: 386-867-3143

* NEED SIGNATURE FROM GRANT

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.

A FDID: 29012 | State: FL | Incident Date: 08/18/2011 | Station: 1 | Incident Number: 11-0001187 | Exposure: 000 | Change: [ ] | No Activity: [ ] | Basic

B Location*

[ ] Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires.

Census Tract: [ ] - [ ]

- [X] Street address
- [ ] Intersection
- [ ] In front of
- [ ] Rear of
- [ ] Adjacent to
- [ ] Directions

Number/Milepost: 263 | Prefix: NE | Street or Highway: Windall | Street Type: LN | Suffix:

Apt./Suite/Room: | City: Lake City | State: FL | Zip Code: 32055 -

Cross street or directions, as applicable:

C Incident Type*

111 | Building fire

Incident Type

D Aid Given or Received*

1 [ ] Mutual aid received
2 [ ] Automatic aid recv.
3 [ ] Mutual aid given
4 [X] Automatic aid given
5 [ ] Other aid given
N [ ] None

Their FDID: | Their State: | Their Incident Number:

E1 Date & Times Midnight is 0000

Check boxes if dates are the same as Alarm Date.		Month	Day	Year	Hr Min Sec
	ALARM always required. Alarm *	08	18	2011	15:21:00
	ARRIVAL required, unless canceled or did not arrive. Arrival *	08	18	2011	15:27:00
[ ]	CONTROLLED Optional, Except for wildland fires. Controlled				
[X]	LAST UNIT CLEARED, required except for wildland fires. Last Unit Cleared	08	18	2011	20:21:00

E2 Shift & Alarms

Local Option

Shift or Platoon: C | Alarms: 02 | District: 2

E3 Special Studies

Local Option

Special Study ID: | Special Study Value:

F Actions Taken*

11 | Extinguishment by fire

Primary Action Taken (1)

Additional Action Taken (2)

Additional Action Taken (3)

G1 Resources*

[X] Check this box and skip this section if an Apparatus or Personnel form is used.

	Apparatus	Personnel
Suppression	0004	0006
EMS		
Other		

[ ] Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values

LOSSES: Required for all fires if known. Optional for non fires.

		None
Property	$, 080 , 000	[ ]
Contents	$, 010 , 000	[ ]

PRE-INCIDENT VALUE: Optional

Property	$, 080 , 000	[ ]
Contents	$, 010 , 000	[ ]

Completed Modules

- [X] Fire-2
- [X] Structure-3
- [ ] Civil Fire Cas.-4
- [ ] Fire Serv. Cas.-5
- [ ] EMS-6
- [ ] HazMat-7
- [ ] Wildland Fire-8
- [X] Apparatus-9
- [X] Personnel-10
- [ ] Arson-11

H1 Casualties* [ ] None

	Deaths	Injuries
Fire Service		
Civilian		

H2 Detector

Required for Confined Fires.

1 [ ] Detector alerted occupants
2 [ ] Detector did not alert them
U [ ] Unknown

H3 Hazardous Materials Release

N [ ] None
1 [ ] Natural Gas: slow leak, no evacuation or HazMat actions
2 [ ] Propane gas: <21 lb. tank (as in home BBQ grill)
3 [ ] Gasoline: vehicle fuel tank or portable container
4 [ ] Kerosene: fuel burning equipment or portable storage
5 [ ] Diesel fuel/fuel oil: vehicle fuel tank or portable
6 [ ] Household solvents: home/office spill, cleanup only
7 [ ] Motor oil: from engine or portable container
8 [ ] Paint: from paint cans totaling < 55 gallons
0 [ ] Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form

I Mixed Use Property

NN	[ ] Not Mixed
10	[ ] Assembly use
20	[ ] Education use
33	[ ] Medical use
40	[ ] Residential use
51	[ ] Row of stores
53	[ ] Enclosed mall
58	[ ] Bus. & Residential
59	[ ] Office use
60	[ ] Industrial use
63	[ ] Military use
65	[ ] Farm use
00	[ ] Other mixed use

J Property Use* Structures

131	[ ] Church, place of worship	341	[ ] Clinic, clinic type infirmary
161	[ ] Restaurant or cafeteria	342	[ ] Doctor/dentist office
162	[ ] Bar/Tavern or nightclub	361	[ ] Prison or jail, not juvenile
213	[ ] Elementary school or kindergarten	419	[X] 1-or 2-family dwelling
215	[ ] High school or junior high	429	[ ] Multi-family dwelling
241	[ ] College, adult education	439	[ ] Rooming/boarding house
311	[ ] Care facility for the aged	449	[ ] Commercial hotel or motel
331	[ ] Hospital	459	[ ] Residential, board and care
		464	[ ] Dormitory/barracks
		519	[ ] Food and beverage sales
		539	[ ] Household goods, sales, repairs
		579	[ ] Motor vehicle/boat sales/repair
		571	[ ] Gas or service station
		599	[ ] Business office
		615	[ ] Electric generating plant
		629	[ ] Laboratory/science lab
		700	[ ] Manufacturing plant
		819	[ ] Livestock/poultry storage (barn)
		882	[ ] Non-residential parking garage
		891	[ ] Warehouse

Outside

124	[ ] Playground or park	936	[ ] Vacant lot
655	[ ] Crops or orchard	938	[ ] Graded/care for plot of land
669	[ ] Forest (timberland)	946	[ ] Lake, river, stream
807	[ ] Outdoor storage area	951	[ ] Railroad right of way
919	[ ] Dump or sanitary landfill	960	[ ] Other street
931	[ ] Open land or field	961	[ ] Highway/divided highway
		962	[ ] Residential street/driveway
		981	[ ] Construction site
		984	[ ] Industrial plant yard

Lookup And enter a Property Use code only if you have NOT checked a Property Use box:

Property Use: 419 | 1 or 2 family dwelling

NFIRS-1 Revision 03/11/99

K1 Person/Entity Involved (Local Option)

Business name (if applicable) | Area Code | Phone Number

☐ Check This Box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs. | First Name | MI | Last Name | Suffix

Number | Prefix | Street or Highway | Street Type | Suffix

Post Office Box | Apt./Suite/Room | City

State | Zip Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary

K2 Owner (Local Option) ☐ Same as person involved? Then check this box and skip the rest of this section.

Business name (if Applicable) | Area Code: 386 | Phone Number: 867-3141

☐ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs.: | First Name: Steven & Rebeca | MI | Last Name: Burnett | Suffix

Number: 263 | Prefix: NE | Street or Highway: Windall | Street Type: LN | Suffix

Post Office Box | Apt./Suite/Room | City: Lake City

State: FL | Zip Code: 32055

L Remarks (Local Option)

Station 1, Station 42, and Station 48 responded to a single story wood frame house, upon arrival the rear of the house was well involved. The main body of fire was extinguished quickly with a very extended over haul due to multiple roofs and multiple layers of shingles. The occupants were not home and the cause of the fire was undetermined due to the extensive damage in the area of origin, the North Laundry/ Dinning Room. State Fire Marshal Lofton was notified and determined it was not necessary to respond.

Equipment Used: 2 1/2" Blitz fire, 300' 2 1/2" hose, 2- 200' 1 3/4" pre connects, PPE, SCBA's, Pike poles, Vent saw, chain saw, vent fans, axes, ladders, hand lights, halogens, small Honda generator light combo, 2 1/2" smooth bore nozzle, floor runner, spare SCBA bottles
Lt. Boozer

L Authorization

Officer in charge ID	Signature	Position or rank	Assignment	Month	Day	Year
000102	Armijo, Frank E	AC		08	19	2011

Check Box if same as Officer in charge.

Member making report ID	Signature	Position or rank	Assignment	Month	Day	Year
000116	Boozer, Dwight	LT		08	19	2011

sales price 0
doc .70

This Instrument Prepared by & return to:
Name: *STEVEN LAVELLE BURNETTE*
Address: *263 NE WINDALL LANE*
LAKE CITY, FLORIDA 32055

Parcel I.D. #: ***05253-000***

SPACE ABOVE THIS LINE FOR PROCESSING DATA

Inst 201112009369 Date 6/21/2011 Time 2:43 PM
Dcb Stamp-Deed 0.70
DC,P DeWitt Cason,Columbia County Page 1 of 1 B 1216 P 1858

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED *Made the* ***21ST*** *day of* ***June****, A.D.* ***2011****, by* ***STEVEN BURNETTE*** *and* ***REBECCA BURNETTE, HIS WIFE****, hereinafter called the grantors, to* ***STEVEN BURNETTE, A MARRIED PERSON,*** *whose post office address is* ***263 NE WINDALL LANE, LAKE CITY, FLORIDA 32055,*** *hereinafter called the grantee:*

(Wherever used herein the terms "grantors" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: *That the grantors, for and in consideration of the sum of $10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in* ***Columbia County, State of Florida****, viz:*

SECTION 20, TOWNSHIP 3 SOUTH, RANGE 17 EAST

LOT 9, PINE NEEDLES ESTATES SUBDIVISION, EXCEPT 100 FEET OFF NORTH SIDE, LOCATED IN COLUMBIA COUNTY, FLORIDA.

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

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

And *the grantors hereby covenant with said grantee that they are lawfully seized of said land in fee simple; that they have good right and lawful authority to sell and convey said land, and hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2011.*

In Witness Whereof, *the said grantors have signed and sealed these presents, the day and year first above written.*

Signed, sealed and delivered in the presence of:

Johnathon Neal Slater
Witness Signature
Johnathon Neal Slater
Printed Name

Bonita Hadwin
Witness Signature
BONITA HADWIN
Printed Name

Steven Burnette L.S.
STEVEN BURNETTE
Address:
263 NE WINDALL LANE, LAKE CITY, FLORIDA 32055

Rebecca Lynn Burnett L.S.
REBECCA BURNETTE
Address:
263 NE WINDALL LANE, LAKE CITY, FLORIDA 32055

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this ***10th*** *day of* ***June, 2011****, by* ***STEVEN BURNETTE and REBECCA BURNETTE****, who are known to me or who have produced* Driver Licence *as identification.*

Bonita Hadwin
Notary Public
My commission expires _____

Notary Public State of Florida
Bonita Hadwin
My Commission DD700648
Expires 08/10/2011

Columbia County Property Appraiser

DB Last Updated: 11/15/2011

2011 Tax Year

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print

Parcel: 20-3S-17-05253-000

<< Next Lower Parcel | Next Higher Parcel >>

<< Prev Search Result: 12 of 13 Next >>

Owner & Property Info

Owner's Name	BURNETTE STEVEN		
Mailing Address	263 NE WINDALL LN LAKE CITY, FL 32055		
Site Address	263 NE WINDALL LN		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	2 (County)	**Neighborhood**	20317
Land Area	0.688 ACRES	**Market Area**	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		

LOT 9 PINE NEEDLES ESTATES S/D EX 100 FT OFF N SIDE. DC JOHNNIE L GARBETT 1006-1822 PROB#04-10-CP 1014-2734,PROB CASE#06-09-CP ORB 1073-573 THRU 587, WD 1191-974, WD 1216 1858,

Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	$15,000.00
Ag Land Value	cnt: (1)	$0.00
Building Value	cnt: (1)	$38,349.00
XFOB Value	cnt: (3)	$1,200.00
Total Appraised Value		$54,549.00
Just Value		$54,549.00
Class Value		$0.00
Assessed Value		$54,549.00
Exempt Value	(code: HX)	$29,549.00
Total Taxable Value		Cnty: $25,000 Other: $25,000 | Schl: $29,549

2012 Working Values

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/21/2011	1216/1858	WD	I	U	11	$100.00
3/15/2010	1191/974	WD	I	U	11	$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1950	AL SIDING (26)	1509	2024	$36,432.00
	Note: All S.F. calculations are based on exterior building dimensions.					

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	0	$100.00	0000001.000	8 x 20 x 0	(000.00)
0296	SHED METAL	0	$100.00	0000001.000	8 x 20 x 0	(000.00)
0011	BARN,BLK A	0	$1,000.00	0000001.000	20 x 20 x 0	(000.00)

Columbia County Tax Collector

generated on 11/29/2011 8:42:13 AM EST

Tax Record

Last Update: 11/29/2011 8:42:26 AM EST

Ad Valorem Taxes and Non-Ad Valorem Assessments

The information contained herein does not constitute a title search and should not be relied on as such.

Account Number	Tax Type	Tax Year
R05253-000	REAL ESTATE	2011

Mailing Address
BURNETTE STEVEN
263 NE WINDALL LN
LAKE CITY FL 32055

Property Address
263 WINDALL NE LAKE CITY

GEO Number
203S17-05253-000

Exempt Amount	Taxable Value
See Below	See Below

Exemption Detail
H3 4549
HX 25000

Millage Code
002

Escrow Code

Legal Description (click for full description)
17-3S-20 0100/0100 .69 Acres LOT 9 PINE NEEDLES ESTATES S/D EX 100 FT OFF N SIDE. DC JOHNNIE L GARBETT 1006-1822 PROB#04-10-CP 1014-2734,PROB CASE#06-09-CP ORB 1073-573 THRU 587, WD 1191-974, WD 1216 1858,

Ad Valorem Taxes

Taxing Authority	Rate	Assessed Value	Exemption Amount	Taxable Value	Taxes Levied
BOARD OF COUNTY COMMISSIONERS	8.0150	54,549	29,549	$25,000	$200.38
COLUMBIA COUNTY SCHOOL BOARD DISCRETIONARY	0.7480	54,549	25,000	$29,549	$22.11
LOCAL	5.3670	54,549	25,000	$29,549	$158.59
CAPITAL OUTLAY	1.5000	54,549	25,000	$29,549	$44.32
SUWANNEE RIVER WATER MGT DIST	0.4143	54,549	29,549	$25,000	$10.36
LAKE SHORE HOSPITAL AUTHORITY	0.9620	54,549	29,549	$25,000	$24.05

Total Millage	17.0063	Total Taxes	$459.81

Non-Ad Valorem Assessments

Code	Levying Authority	Amount
FFIR	FIRE ASSESSMENTS	$77.00
GGAR	SOLID WASTE - ANNUAL	$201.00

Total Assessments	$278.00

Taxes & Assessments	$737.81

If Paid By	Amount Due
	$0.00

#1608

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, Jerry Corbett (Installer License Holder Name), give this authority for the job address show below only, 263 N.E. Windall Lane Lake City, FL 32055 (Job Address), and I do certify that 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)
Gwen Walker	Gwen Walker	✓ Agent ___ Officer ___ Property Owner
Treea Foster	Treea Foster	✓ Agent ___ Officer ___ Property Owner
Steven Burnette	Steven Burnette	___ 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.

X Jerry Corbett
License Holders Signature (Notarized)

CCC 1025368
License Number

11/28/11
Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Jerry Corbett, personally appeared before me and is known by me or has produced identification (type of I.D.) Known Personally on this 28th day of November, 2011.

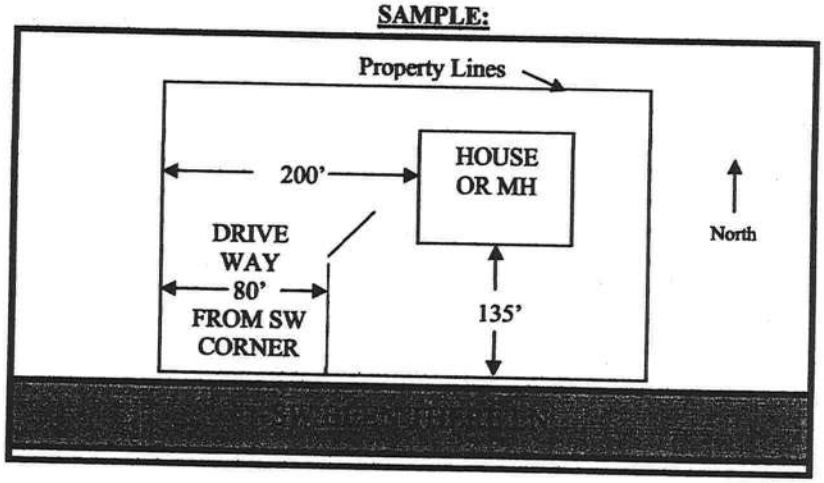
Gwen H. Walker
NOTARY'S SIGNATURE

(Seal/Stamp)

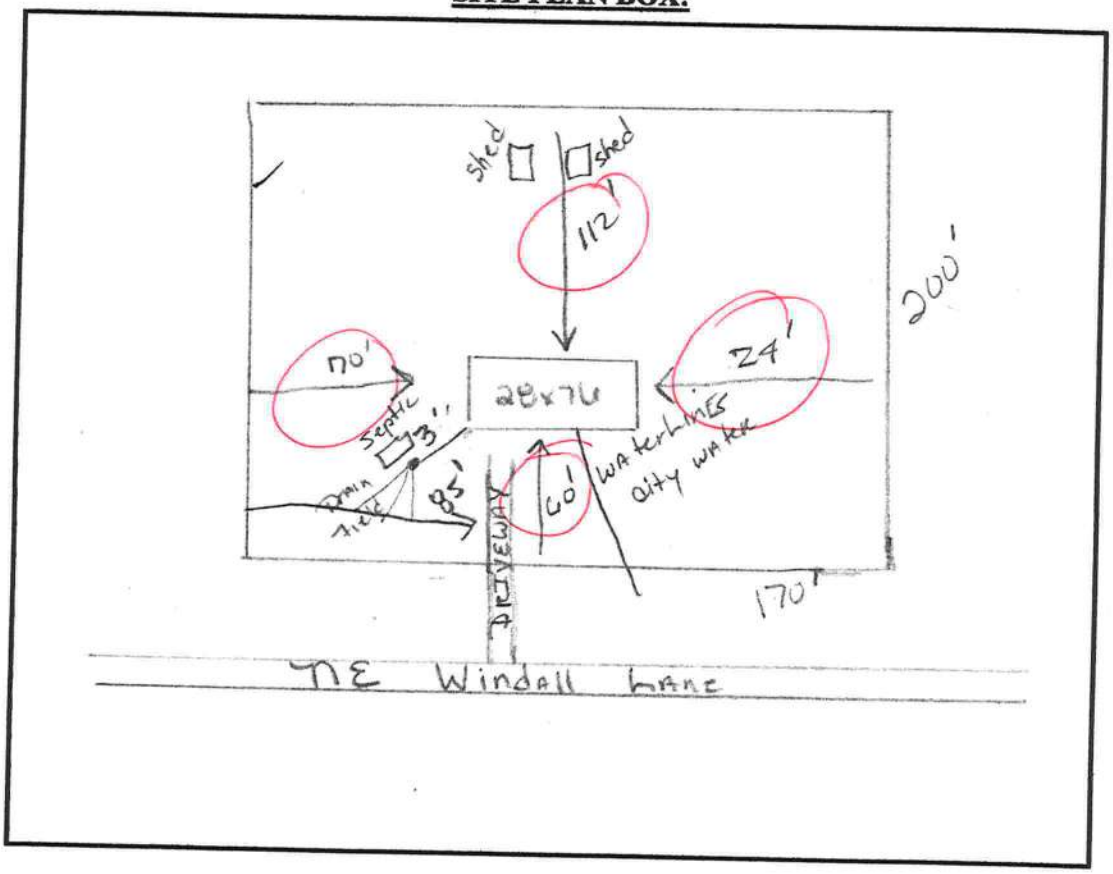
GWEN H. WALKER
MY COMMISSION # DD 929542
EXPIRES: December 29, 2013
Bonded Thru Notary Public Underwriters

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



11-0492-E

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

PERMIT NO. _____
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____

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

APPLICANT: Steven Burnette

AGENT: _____ TELEPHONE: 386-867-3143

MAILING ADDRESS: 263 N.E. Windall Lane 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: #9 BLOCK: _____ SUBDIVISION: Pine Needles Estates PLATTED: _____

PROPERTY ID #: 20-3S-17-05253-000 ZONING: _____ I/M OR EQUIVALENT: [(Y)/ N]

PROPERTY SIZE: 2.698 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [(Y)/ N] DISTANCE TO SEWER: 5' FT

PROPERTY ADDRESS: 263 N.E. Windall Lane Lake City, FL. 32055

DIRECTIONS TO PROPERTY: Turn RH on N. Marion Ave (US 441) go 1.8 miles turn RH on to NE Windall Lane go 0.2 miles (263 N.E. Windall Lane) spot on the 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	Residence	3	1976	mobile Home
2				
3				
4				

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

SIGNATURE: x Steven L Burnett DATE: 11-29-11

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

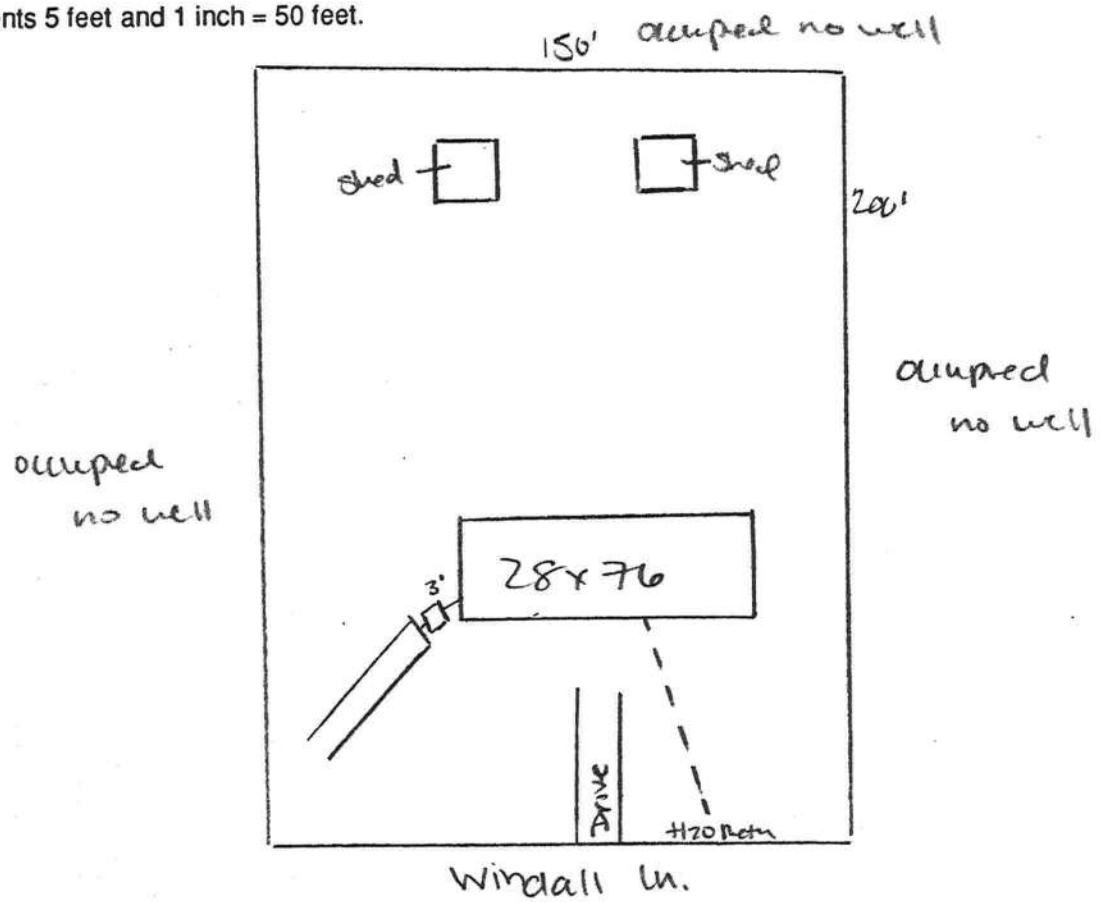
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-492

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: 0.68 acres Lot 9 Pine Needles Estates S/D

Site Plan submitted by: Steve L Smith
Signature

Title

Plan Approved X

Not Approved ____

Date 11/29/11

By [signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used)
Stock Number: 5744-002-4015-6)

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: 11/23/2011 **DATE ISSUED:** 11/30/2011

ENHANCED 9-1-1 ADDRESS:

263 NE WINDALL LN

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

20-3S-17-05253-000

Remarks:

RE-ISSUED OF EXISTING ADDRESS FOR NEW STRUCTURE 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.

2122

Sent

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12/5/11 BY G IS THE M/H ON IS PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Steven Durrette PHONE cell 386-867-3143

ADDRESS 263 N.E. Widell Lane Lake City, FL 32055

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Turn RH onto N. Marion Ave (US 441) go 1.8 mile turn RH onto NE Widell Lane go 0.2 miles "263 N.E. Widell Lane is on the left

MOBILE HOME INSTALLER Jerry Corbett PHONE 386-362-4918 cell 386-590-0470

MOBILE HOME INFORMATION

MAKE Redman YEAR 199? SIZE 28 x 76 COLOR yellow/burgundy

SERIAL No. FLA14614294AB _____

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

INSPECTION STANDARDS

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

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

P FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION _____

P DOORS ( ) OPERABLE ( ) DAMAGED

P WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS ( ) OPERABLE ( ) INOPERABLE

P PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

P CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

P ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREEN IS MISSING ( ) WEATHERTIGHT

P ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED P WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [signature] ID NUMBER 402 DATE 12-6-11

CERTIFICATE OF

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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

Parcel Number 20-3S-17-05253-000 Building permit No. 000029798

Permit Holder JERRY CORBETT

Owner of Building STEVEN BURNETTE

Location: 263 NE WINDALL LANE, LAKE CITY, FL 32055

Date: 07/16/2012

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)