DATE 12/18/2009 Columbia County Building Permit This Permit Must Be Prominently Posted on Premises During Construction					PERMIT 000028282	
APPLICANT	GLEN WI		be I rommently I used	PHO:	Armen Carlot at the Carlo	000020202
ADDRESS	619	SE COUNTRY CI	LUB RD	- LAKE CITY	023-1912	FL 32025
OWNER		MICKLER		PHO	NE 215 457-9198	
ADDRESS	372	NW MICKLER G	LEN	LAKE CITY	-	FL 32055
CONTRACTO		EN WILLIAMS		PHO	NE 623-1912	
LOCATION O	F PROPER	TY 41N, TR	FALLEN CREEK RD.,	TR MICKLER, TO	THE END	
TYPE DEVEL	OPMENT	MH,UTILITY	ES	TIMATED COST O	F CONSTRUCTION	0.00
HEATED FLO	OR AREA	%	TOTAL AR	EA	HEIGHT _	STORIES
FOUNDATIO	N	WA	LLS	ROOF PITCH	FI	OOR
LAND USE &	ZONING	A-3			MAX. HEIGHT	
Minimum Set I	Back Requi	rments: STREE	T-FRONT 30.00	REA	R 25.00	SIDE 25.00
NO. EX.D.U.	0	FLOOD ZONE		DEVELOPMENT	PERMIT NO.	AT
	-) COMPANIE SCORE SI POSSOCIONES				
PARCEL ID	-	-04809-000	SUBDIVISIO			
LOT	BLOCK	PHASE	UNIT		TOTAL ACRES 5.	.00
4			IH0000972	Ger.	WILL	
Culvert Permit	No.	Culvert Waiver	Contractor's License Nu	mber	Applicant/Owner	-/Contractor
PRIVATE		09-69	BK		WR	<u>Y</u>
Driveway Con		Septic Tank Numb		ng checked by	Approved for Issuand	ce New Resident
COMMENTS: PARCEL	ONE FOO	OT ABOVE THE RO	OAD, 5 ACRES BEING I	DEDICATED OUT C	OF THE 80 ACRE	
TARCEL					Check # or C	Cash 963
		FOD 5	NIII DING 8 ZONII	IC DEDARTM	_	
T P		FORE	BUILDING & ZONII	NG DEPARTIVI		(footer/Slab)
Temporary Pov	wer	date/app. by	Foundation	date/app. by	Monolithic _	date/app. by
Under slab rou	gh-in pluml	5.5 5	Slab		Sheathing	/Nailing
	S P		app. by	date/app. by		date/app. by
Framing	21.7.2	I	Insulation		_	
	date/ap	p. by	da	te/app. by		
Rough-in plum	bing above	slab and below wood	2.23.53.55		Electrical rough-in	
Heat & Air Du	ct		Peri. beam (Lint	date/app. by	Pool	date/app. by
		late/app. by	ren. ocam (Em	date/app.	The state of the s	date/app. by
Permanent pow		ate/app. by	C.O. Final	1-1-1 L	Culvert	1.4/
Pump pole		Utility Pole		date/app. by lowns, blocking, elec	ctricity and plumbing	date/app. by
	late/app. by		late/app. by	,		date/app. by
Reconnection		date/app. by	RV	date/app. by	Re-roof	date/app. by
BUILDING PE	han estimate		CERTIFICATION FE	0.00	SURCHARG	A STATE OF THE STA
MISC. FEES \$		-	G CERT. FEE \$ 50.00			TE FEE \$ 167.50
FLOOD DEVE	LOPMENT	FEE ST.	OOD ZONE FEE \$ 25.0		7///	FAL FEE 606.70
INSPECTORS	OFFICE	- Julo 18	1/0/1	CLERKS OFF	ICE / //	

PERMIT

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
For Office Use Only (Revised 1-10-08) Zoning Official SLK 16 10-09 Building Official We 12-15-0
AP# 0912 24 Date Received 12/15/09 By 4 Permit # 28282
Flood Zone X Development Permit NA Zoning A-3 Land Use Plan Map Category A-3
Comments 5 ACRES being dedicated out at the 80 arece parce
FEMA Map# Elevation Finished Floor Stabuld River In Floodway In Floodway Finished Floor
Site Plan with Setbacks Shown EH# EH Release Well letter Existing well
Recorded Deed or Affidavit from land owner
□ Parent Parcel # □ STUP-MH □ F W Comp. letter IMPACT FEES: EMS Fire Corr
School_ = TOTAL N/A Suspended (I) 911 ShEET
DRe-Inspection
Property ID # 3 - 25 - 17 - 04809 - 000 Subdivision
New Mobile Home Used Mobile Home MH Size Year S
01 1) 11:
- Applicant (Ne) 1 1 1 1 1 1 1 1 1
* Name of Property Owner Chamie micklen Phone# 386-719-4464 5 37 911 Address 373 NW Micklen Calv, Lake (14, 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 Boeen Mickler Phone #215-457-9198
2 rd for Address 372 NW mickler GIN, LAte City, FL 32055
Relationship to Property Owner Ante Durtey Wilson
Current Number of Dwellings on Property/
■ Lot Size Total Acreage & AC
Do you : Have Existing Drive Of Private Drive Of Need Culvert Permit (Currently using) Or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) Or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home
Driving Directions to the Property 41 to faller Crock Rd to
TRIMICKER Gla to the end.
Name of Licensed Dealer/Installer Colon Williams Phone # 386 623=1912
I Installars Address 1019 STIGOCE C. J. Clip RI Lb. Col H 3628
License Number 400 972 Installation Decal # 303626
License Number 140 000 972 Installation Decal # 303826 Call if you can't Radcliff At Micklen 719-4464 Me

Shearwall	Manufacturer	
Longitudinal Marriage wall	Manufacturer (5) Way- Longitudinal Stabilizing Device w/ Lateral Arms	
Number	Longitudinal Stabilizing Device (I SD)	
OTHER TIES		
within 2' of end of home spaced at 5' 4" oc		
FRAME TIES		
4 n 5 n 1 − 5 n 1 − − − − − − − − − − − − − − − − − −	Opening Pier pad size	
ANCHORS	pad sizes belo	
26 x 26 676	List all marriage wall openings greater than 4 foot	
126	wall openings 4 foot or greater. Use this symbol to show the piers.	marriage wall piers within 2 of end of home per Rule 15C
13 1/4 × 26 1/4 348 20 × 20 400	Praw the approximate locations of marriage	
\prod	Other pier pad sizes (required by the mfg.)	
	Perimeter pier pad size	
Pad Size Sq In 16 x 16 256	I-beam pier pad size /5 1/2 X/5/2	
POPULAR PAD SIZES	PIER PAD SIZES	
<u>ω</u> ω	cing table.	
	7.6	longitudinal (use daix illies to show these locations)
\parallel	4'6	\$ Show
(576)*	ze (256) 1/2" (342) (400)	'ypical pier spacing lateral
22" x 22" 24" X 24" 26" x 26"	Footer 16" x 16" 18 1/2" x 18 20" x 20"	Installer's initials
HOMES	PIER SPACING TABLE FOR USED HOMES	I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.
51819	Triple/Quad Serial # 32	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
363626	Double wide Installation Decal # 3	-
Wind Zone III	Single wide	Thome 366-714 - 4464
ą	Home is installed in accordance with Rule 15-C	obile
nual	Home installed to the Manufacturer's Installation Manual	Manufacturer Kletusond Length x Width 14 X bb
Year SS	New Home ☐ Used Home ☐ Y	nstaller (License # 3H CRX) 472
page 1 of 2	KKSHEET	

or check here to-declare 1000 lb. soil without testing. ***TCU*** ***TCU**** ***TCU*** ***TCU**** ***TCU**** ***TCU*** ***TCU	Floor: Type Fastener: Walls: Type Fastener: Will be centered overofing nails at 2" or of tape will not serve as a gasl understand a properly installed or of tape will not serve as a gasl of tape will be repair siding on units is installed to repair siding on units is installed to repair siding to be installed. Yes Dryer vent installed outside of Range downflow vent installed Drain lines supported at 4 foo Electrical crossovers protected.
Section of the second section of the second	
without testing.	
×/ce ×/20	
POCKET PENETROMETER TESTING METHOD	
 Test the perimeter of the home at 6 locations. 	will be centered ov
	rooting nails at 2" of
_	I understand a properly insta homes and that condensation
\$700 ×/200 ×/200	a result of a poorly installed of tape will not serve as a ga
TORQUE PROBE TEST	Tono analysis has a live
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 4 foot anchors.	Pg. /S
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. Installer's initials	The bottomboard will be repained to Siding on units is installed to Fireplace chimney installed to
ALL TESTS MUST BE PERFORMED BY A MICENSED INSTALLER Installer Name	Skirting to be installed. Yes
11- 2	Dryer vent installed outside Range downflow vent install Drain lines supported at 4 fc
	Electrical crossovers protect
Electrical	

Plumbing	nulti-wide units, but not to the main-power etween multi-wide units. Pg. / S Installar verifies all
io	r varifies al

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

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

nd organic material removed	
moved .	Site Preparation

Swale

Pad

Other

Fastening multi wide units

Type Fastener: Lange Length: Spacing: Ly S roofing nails at 2" on center on both sides of the centerline. will be centered over the peak of the roof and fastened with galv.

Gasket (weatherproofing requirement)

of a poorly installed or no gasket being installed. I understand a strip ind that condensation, mold, meldew and buckled marriage walls are tand a properly installed gasket is a requirement of all new and used vill not serve as a gasket.

Installer's initials CW Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes

Weatherproofing

in units is installed to manufacturer's specifications. Yes e chimney installed so as not to allow intrusion of rain water. omboard will be repaired and/or taped. Yes Pg. Yes

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les supported at 4 foot intervals. Yes to be installed. Yes
ent installed outside of skirting. Yes
downflow vent installed outside of skirting. to be installed. Yes al crossovers protected. Yes N

is accurate and true based on the I information given with this permit worksheet

Installer Signature L Date 12-15-04

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number C

- - PART II - SITEPLAN Scale: 1 inch = 50 feet. 660 WELL 1001 1320 MANMADE POND 660 120 1320 1320 1 08 60 Acres Notes: Site Plan submitted by: MASTER CONTRACTOR Plan Approved > Date 2-9-09 Not Approved By_ County Health Department



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

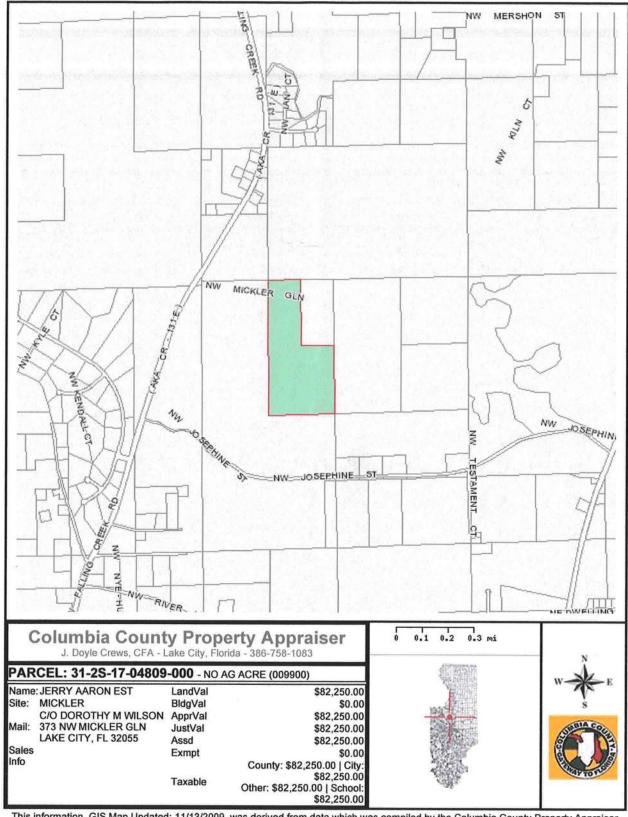
FEE PAID: 3 RECEIPT #:

12-PSD-1096594

APPLI	CATION FOR:							L	e15/09 t	Measux
[X]	New System Repair	[] E	xisting Sys bandonment	stem []	Holding Ta	ank]] Innova	tive
APPLI	CANT: Jerry Aa	ron Est								
AGENT	: ROCKY FORD,	A&B	CONSTRUCT	ION			TELE	PHO	NE: 386-4	197-2311
MAILI	NG ADDRESS: P.O	O. BOX	39 FT. WH	ITE, FL,	320	38			· ·	TORTOCOCO CO CONTRARA
A PER APPLI	COMPLETED BY A SON LICENSED PU CANT'S RESPONSI D/YY) IF REQUES	RSUANT T	0 489.105(3 0 PROVIDE D	(m) OR 489 OCUMENTATIO	.55 N O	2, FLORIDA F THE DATE	STATU	TES COT	S. IT IS WAS CREAT	THE
PROPE	RTY INFORMATION	г								
LOT:	na BLOCK:	<u>na</u>	SUB: na			Secretaria de Contra de Co			PLATTED:	NA
PROPE	RTY ID #: 31-2	S-17-04	809-000	ZONIN	G: _	AS 1/	M OR	EQU	IVALENT:	Y /N
PROPE	RTY SIZE: 60	ACRES	WATER SUPP	LY: [X] PR	IVA!	TE PUBLIC	[]<	=20	000GPD []>2000GPD
IS SET	WER AVAILABLE A	S PER 38	1.0065, FS?	[Y N]		DI	STANC	E T	O SEWER:	FT
PROPE	RTY ADDRESS:	372 NV	Wickler	Glen, Lak	ee	City, FL	, 320	055	5	
DIREC!	TIONS TO PROPER	TY: 41 1	North, TR	on CR 131	. (I	alling C	reek),	TR on M	ckler
Glen	At end addr	ess 373	Mickler	go right	400) feet to	site	9		
						· · · · · · · · · · · · · · · · · · ·			No.	
BUILD	ING INFORMATION		resi	DENTIAL		[] COMME	RCIAL			
Unit No	Type of Establishment		No. of Bedrooms	Building Area Sqft		nmercial/In ole 1, Chap				m Design
1	DW Mobile H	lome	3	1584		*				
3										
[[]] SIGNAT	Floor/Equipment	Drains	TAL OUR	ner (Specify	<i>(</i>) _				2/2/2009	
	NA CO	-						TE.	2/2/2009	

DH 4015, 10/97 (Previous Editions May Be Used)

Page 1 of 4



This information, GIS Map Updated: 11/13/2009, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

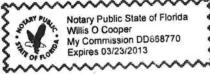
This is to certify that I, (We), Radel: If Mickler, Sr. owner of the below described property:
Tax Parcel No. 31-25-17-04809-000
Subdivision (name, lot, block, phase) $N/4$
Give my permission to Queen M. Risson to place a mobile home travel trailer/single family home (circle one) on the above mentioned property.
I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property. Rackly Magain
Owner
SWORN AND SUBSCRIBED before me this 14th day of December, 2009. This (these) person(s) are personally known to me or produced ID
Willis O. Louge Notary Signature

Notary Public State of Florida Willis O Cooper My Commission DD868770 Expires 03/23/2013

AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

This is to certify that I, (We), Oorothy M. Wilson owner of the below described property:
Tax Parcel No. 31-25-17 - 04809-000
Subdivision (name, lot, block, phase)
Give my permission to Queen M. Grinson to place a mobile home travel trailer/single family home (circle one) on the above mentioned property.
I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property.
Dorothy M. Wilson Owner
SWORN AND SUBSCRIBED before me this 14th day of December 2009. This (these) person(s) are personally known to me or produced ID
With O Confer Notary Signature



DARBY, PEELE, BOWDOIN & PAYNE

A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

HERBERT F. DARBY, P.A.
S. AUSTIN PEELE, P.A.
M. BLAIR PAYNE

W. RODERICK BOWDOIN (1949-2008) ATTORNEYS AT LAW

285 N.E. HERNANDO AVENUE
POST OFFICE DRAWER 1707

LAKE CITY, FLORIDA 32056
TELEPHONE (386) 752-4120

FACSIMILE (386) 755-4569

December 14, 2009

7720.03-09-099

HAND DELIVERED

Mr. Brian Kepner County Planner 135 Northeast Hernando Avenue, Suite B-21 Lake City, Florida 32055

Dear Mr. Kepner:

I represent Dorothy M. Wilson, Queen M. Brinson and Radcliff Mickler, Jr. who are all of the heirs at law and beneficiaries of the estates of Aaron Jerry and Channie Mickler, both deceased. As such, our clients are the owners of land in Columbia County, Florida as described as follows: Township 2 South, Range 17 East, Section 31: East 1/2 of the NW 1/4. The property is presently occupied by Radcliff Mickler, Jr., and Queen M. Brinson (his sister) who has or proposes to have a mobile home located on the property.

According to our research the last record title holders of the property were Channie Mickler and Aaron Jerry and there has been no probate with respect to their estates. Both of them have been deceased for many years and we have been authorized by our clients to file appropriate petitions for summary administration with respect to both estates to confirm on record their interest in the property. This proceeding should be concluded within the next six (6) months.

I understand that this information is sufficient for your purposes in having Columbia County issue a building permit to Ms. Brinson in order that she may place the mobile home on the property and obtain electric and other utilities services.

Should you require additional information, please contact me.

Thank you.

Ven truly yours,

6/ Austin Peel

SAP/csw

cc: Ms. Queen M. Brinson

June // , 2009

Suwannee Valley Electric Cooperative, Inc. Post Office Box 160 Live Oak, Florida 32064

Gentlemen:

The undersigned are all of the heirs at law and beneficiaries of Aaron Jerry and Channie Mickler, both of whom are deceased, who together owned land in Columbia County, Florida described as follows:

Township 2 South, Range 17 East

Section 31: East 1/2 of NW 1/4

The property is presently occupied by Radcliff Mickler, Jr., who is an existing customer and member of Suwannee Valley Electric Cooperative, Inc. and Queen M. Brinson (his sister) who has a mobile home located on the property and has applied for membership in the Cooperative and for electrical service to her mobile home.

The last record title holders of the property were Channie Mickler and Aaron Jerry and there has been no probate with regard to their estates.

In consideration of your agreement to provide electrical service to Queen M. Brinson, the undersigned, jointly and severally, agree to indemnify and hold you harmless from any and all loss, costs or expenses arising out of any claims which may be asserted by any persons, other than the undersigned, to any interest in the above described property. We represent to you, under penalties of perjury, that we are the only persons having an ownership interest in the property. At the present time we do not have the funds to enable us to file petitions for summary administration regarding the two (2) estates. If in the future we are able to do so, we will provide you with a copy of the orders of summary administration which will confirm the facts stated herein.

Thank you.

Very truly yours,

Dorothy M. Wilson

11720 Biscayne Boulevard Jacksonville, Florida 32218

Dotatly Mr. Wills

Queen M. Brinson

372 Northwest Mickler Glen

Lake City, Florida 32055

Radcliff Mickler, Jr.

373 Northwest Mickler Glen

Lake City, Florida 32055

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

CONTRACTOR _____ PHONE__

		THIS FORM MU	ST BE SUBMITTED PRIC	R TO THE ISSUANCE O	F A PERMIT			
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.								
					ng submitted to this office prior to the rk orders and/or fines.			
ELECTRICAL	Print Name License #:	: Gueen	milken		Signature fueca briansas Phone #:			
MECHANICAL/ A/C	Print Name License #:)		Signature Pho	ne #:			
PLUMBING/ GAS	Print Name License #:	: Bueen	m. Ker	SignaturePho	View Miller			
ROOFING	Print Name License #:	9		Signature Pho	one #:			
SHEET METAL	Print Name Dicense #:	1		Signature Pho	one #:			
FIRE SYSTEM/ SPRINKLER	Print Name License#:		t ^o .	SignaturePho	one #:			
SOLAR	Print Name License #:			SignaturePho	one #:			
SOLAR Specialty Lice	License #:	License Number	Sub-Contracto		one #: Sub-Contractors Signature			
	License #:		Sub-Contracto	Pho				
Specialty Lic	License #:		Sub-Contracto	Pho				
Specialty Lic MASON	License #:		Sub-Contracto	Pho				
Specialty Lic MASON CONCRETE FIN	License #:		Sub-Contracto	Pho				
Specialty Lice MASON CONCRETE FIN FRAMING	License #:		Sub-Contracto	Pho				
Specialty Lice MASON CONCRETE FIN FRAMING INSULATION	License #:		Sub-Contracto	Pho				
Specialty LiconASON CONCRETE FIN FRAMING INSULATION STUCCO	License #:		Sub-Contracto	Pho				
Specialty Lice MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL	License #:		Sub-Contracto	Pho				
Specialty LiconASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER	License #:		Sub-Contracto	Pho				
Specialty Licon MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	License #: Cense ISHER		Sub-Contracto	Pho				
Specialty Lice MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	License #: Cense ISHER		Sub-Contracto	Pho				
Specialty Licon MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO	License #: Cense ISHER		Sub-Contracto	Pho				
Specialty Lic MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO GLASS CERAMIC TILE FLOOR COVERA	License #: Cense ISHER ALLER EILING		Sub-Contracto	Pho				
Specialty Lic MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO GLASS CERAMIC TILE	License #: Cense ISHER ALLER EILING		Sub-Contracto	Pho				
Specialty Lic MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO GLASS CERAMIC TILE FLOOR COVERA	License #: Cense ISHER ALLER EILING NG IDING		Sub-Contracto	Pho				

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 & B Well Drilling, Inc.

5673 NW Lake Jeffery Road Lake City, FL, 32055

- (O) 386-758-3409
- (F) 386-758-3410
- (C) 386-623-3151

12/15/2009

To: Columbia Cou	nte Duilding Donautma	.mf	
the same of the sa			0 1
Description of well to be in Located at Address: 37	stalled for Customer:_	GUBEN	DRINSON
Located at Address: 37	2 n.w. m	ickles	Glen
1 hp 15 GPM Submersible flow prevention, With SRV		, 86 gallon capti	ve tank and back
Drivelas	٨		
Sincerely			
Bruce Park			

Faxed on 12-15-09

President

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:

6/3/2009

DATE ISSUED:

6/5/2009

ENHANCED 9-1-1 ADDRESS:

372

NW MICKLER

GLN

LAKE CITY

FL

32055

PROPERTY APPRAISER PARCEL NUMBER:

31-2S-17-04809-000

Remarks:

2ND LOC

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.

COL E ENFORCEMENT PRELIMINARY ME BILE HOME INSPECTION REPORT

11.
DATE RECEIVED 12/15/09 BY STEE MIN C NTHE PROPERTY WHERE THE PERMIT WILL BE ISSUED? 485
OWNERS NAME Overn Micklen HONE CELL 623.1912
ADDRESS 372 NW Mickler Sten, L.C.
MOBILE HOME PARK SUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME 41N . TR FAllen Creek, TR
Micklen, to the end
MOBILE HOME INSTALLER Jen William'S PHONE 623-1912 CELL
MOBILE HOME INFORMATION
MAKE Flestwood YEAR 1985 SIZE 24 x GO COLOR Brown / Peach
SERIAL NO. FC 326 4819
WIND ZONE Must be wind zone or higher NO WIND ZONE ! ALLOWED
INSPECTION STANDARDS
(Porf) - P= PASS F= FALED
SMOKE DETECTOR () OPERATIONAL () I ISSING
FLOORS () SOLID () WEAK () HOLES AMAGED LOCATION
DOORS () OPERABLE () DAMAGED
WALLS () SOLID () STRUCTURALLY UNS UND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES () OPERABLE () INO ERABLE () MISSING
CEILING () SOLID () HOLES () LEAKS APF ARENT
ELECTRICAL (FIXTURES/OUTLETS) () OPERA ILE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING () LOOSE SIDING () STRU(FURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
WINDOWS () CRACKED! BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS .
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLL >WING CONDITIONS
SIGNATURE At D. P. U ID NUMBER 402 DATE 12-16-09
TS/TE/S003 TI:22 3867682168 BULL SING AND ZONING PAGE 01/01