Page: 4 of 5

From: Town of Fort White

Town of Fort White P.O. Box 129 Fort White, FL 32038 386-497-2321 Fax: 386-4974946

APPLICATION FOR BUILDING PERMIT/COMPLIANCE
\$50.00 FEE FILE No. RECPT No. 100. al. # 12 2-24-2021
2:24-2021
and the company of the control of th
Applicant's Name: Lisn's LANG LLC Phone: 386-623-3396
Address: 194 sw Dortch st Ft While Fla.
Owner's Name: Lisa FOED Lisa's Land Llephone: Same
Address: SAME
Comractor's Name: 6 +N C0154.
Address: 3792 NW Hwy 41 Jennings Fla. 32053
Q.al. ol
*****Location of property: Paisley CH.
PROPERTY OF THE PROPERTY OF TH
****Type of development: Residutial
Phys (Charles and All Charles
Land use & zoning: KST-2
Minimum set-back: Street-front/side ZS rear IS side IO
Land use & zoning: KSF-2 Minimum set-back: Street-front/side ZS rear IS side IO Legal Description (acres): O4060-133
Land use & zoning: Minimum set-back: Street-front/side to rear 15 side Legal Description (acres): O+O60-133
Land use & zoning: Minimum set-back: Street-front/side tear side Legal Description (acres): 04060=133
Legal Description (acres): 04060-133
Legal Description (acres): 04060-133 I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning.
Legal Description (acres): 04060-133 I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning. W.S. CBC 12-50 895 Red D 7-9
Legal Description (acres): 04060-133 I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning. Ast. CBC 1250 875 Contractor's License Number Applicant/Owner Contractor
Legal Description (acres): 04060-133 I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning. AST. CBC 12-50 895 Contractor's License Number Applicant/Owner Contractor

PROPERTY FOR THE TYPE OF DEVELOPMENT STATED ON THIS APPLICATION WILL BE REQUIRED.

o: 13867582160	Page: 5 of 5	2021-02-24 17:06:36 GMT	13862006203	From: Town of Fort White
	File No.	В	Town of Fort uilding Compliance Che	
	Name of Applicant Lisa's LAND LUC			
	Address 494 sw Doctch St Ft White			
	Phone 316-623-3396			
	Physical location of site and current zoning F1. White PSF-2.			
	Type of Construction (New () remodel/renovation/fire damage			
	Describe Construction	SFR	a comit of works you by the graph and an arranged a commendation and arranged to a secure of the secure of the	
	Mauthorized owner or but (YZoning is appropriate for	ilder signs compliance application.		
	() Property will () will no () Property will require cur	ot require application to SRWMD for the cut or access/culvert over road rigi lumbia County Town of F	ht of way from:	
	(Property will () will no	ot require Health Dept. Sanitary Wast of require penable fresh water supply Town of Fort White municipal	from:	
	(Property will () will no	b to be at least 1 foot above elevation of require approval of solid waste rem of require permit for infill or land rem	oval facilities.	
		Tartesian water the and the transfer of the state of the		
	must be taken to Colum	hat a copy of the Town of Fort White bia County Building Department for tification of land use or zoning by the it.	application and issuance	
	Other steps required f	or Building Compliance: Propert	tv Owner will be	
	responsible for submi	itting a copy of the Columbia		mit
	to the Town of Fort W	Vhite.		
	The applicant and Town of Fort White Clerk's Office have reviewed the foregoing information and the information is true and correct.			
			2	
	Signature of Applicant	_ <u>C</u> Sign	ature of Reviewing Clerk	-
	8-28-21	Con	npliance given to applicant on	
	Date	Date	2-24-202	21
* 1 to 11 11 months	na talina na ma			Constitution of the second