

Need original Affidavit to
Sign to be recorded
MH #2
ck# 2120
erika.livemobilehomes@gmail.com

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official JWA Building Official JWA
AP# 1905-92 Date Received 5/20/19 By WA Permit # 38179
Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category Ar
Comments Replacing existing MH, 2nd unit on property - 5yr
Temp use permit for sister
FEMA Map# _____ Elevation _____ Finished Floor 1st floor River _____ In Floodway _____
☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0346 ☐ Well letter OR
☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid
☐ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH 19-0530 ☒ 911 App
☐ Ellisville Water Sys ☒ Assessment Owed for ☐ Out County ☐ In County ☒ Sub VF Form

13-75-16 2nd unit
Property ID # 04193-003 Subdivision _____ Lot# _____
▪ New Mobile Home X Used Mobile Home _____ MH Size 28x76 Year 2018
▪ Applicant JB Wainwright Phone # 386-418-0424
▪ Address 12426 NW US Hwy 441 Alachua FL 32615
▪ Name of Property Owner Marcela Viana Phone# 954-706-9311
▪ 911 Address 3094 SW CR 778 Fortwhite FL 32038
▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
▪ Name of Owner of Mobile Home Andreina Madrid Phone # 954-706-9311
* Address 3094 SW CR 778 Fortwhite FL 32038
▪ Relationship to Property Owner Sister
▪ Current Number of Dwellings on Property 0
▪ Lot Size _____ Total Acreage 9.4
▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
▪ Is this Mobile Home Replacing an Existing Mobile Home yes
▪ Driving Directions to the Property from 27 go W to
CR 778 6 mi then turn onto
Lawless Ct. R then property on left.
to 2nd MH
▪ Name of Licensed Dealer/Installer Brandy Hall Phone # 352-595-8339
▪ Installers Address PO Box 345 Lowell, FL 32663
▪ License Number IH1124663 Installation Decal # 60692

SCANNED

WA - Spoke to Erika 5/20/19
ERILCA called 5.13.19 - JW Faxed Email from Laurie
ERILCA called 5.14.19

572.39 + 15.00 +
450.00 = 1037.39

Mobile Home Permit Worksheet

Installer: Brandy Hall License # 3094 SW CR 778
 Address of home being installed: FL White FL 32038
 Manufacturer: LIVE OAK Length x width: 28X76

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: BH

Typical pier spacing: 5'
 Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

SEE Blocking

marriage wall piers within 2' of end of home per Rule 15C

Application Number: _____ Date: _____

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 # _____
 Triple/Quad ☐ Serial # 33585

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 psi		3'	4'	5'	6'	7'	8'
1500 psi		4' 6"	6'	7'	8'	9'	10'
2000 psi		6'	8'	9'	10'	11'	12'
2500 psi		7' 6"	9'	10'	11'	12'	13'
3000 psi		8'	10'	11'	12'	13'	14'
3500 psi		8'	10'	11'	12'	13'	14'

* interpolated from Rule 15C-1 pier spacing table

PIER PAD SIZES

I-beam pier pad size: 17X25
 Perimeter pier pad size: 11
 Other pier pad sizes (required by the mfg): 11

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: 17X25 Pier pad size: SEE Blocking
11
11

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer: _____
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer: X-IS Systems

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
18 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 3/8 x 25 3/8	441
17 1/2 x 25 1/2	448
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 ☒

OTHER TIES

Number: _____
 Sidewall: _____
 Longitudinal: 6
 Marriage wall: _____
 Shearwall: _____

Mobile Home Permit Worksheet

Application Number: _____ Date: 3/28/19

POCKET PENETROMETER TEST

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

X Asume 1000

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 ✓ X ✓ 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 centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 1000 lb. holding capacity.

Installer's initials DA

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name: Brandy Hall
Date Tested: 3/28/19

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-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:	Length:	Spacing:
	<u>1/4"</u>	<u>3/8"</u>	<u>24"</u>
Walls:	Type Fastener <u>1/4"</u>	Length: <u>2 1/2"</u>	Spacing: <u>16"</u>
Roof:	Type Fastener <u>1/4"</u>	Length: <u>3/8"</u>	Spacing: <u>24"</u>

For used homes: a min. 30 gauge, 6" wide, galvanized metal strip will be centered over the peak of the roof and fastened with gal. roofing nails at 2" on center on both sides of the centerline.

Gasket weatherproofing requirements

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

Installer's initials DA

Type gasket R-11
Pg. 41

Installed	Between Floors	Between Walls	Bottom of ridgebeam
<input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. B-15
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

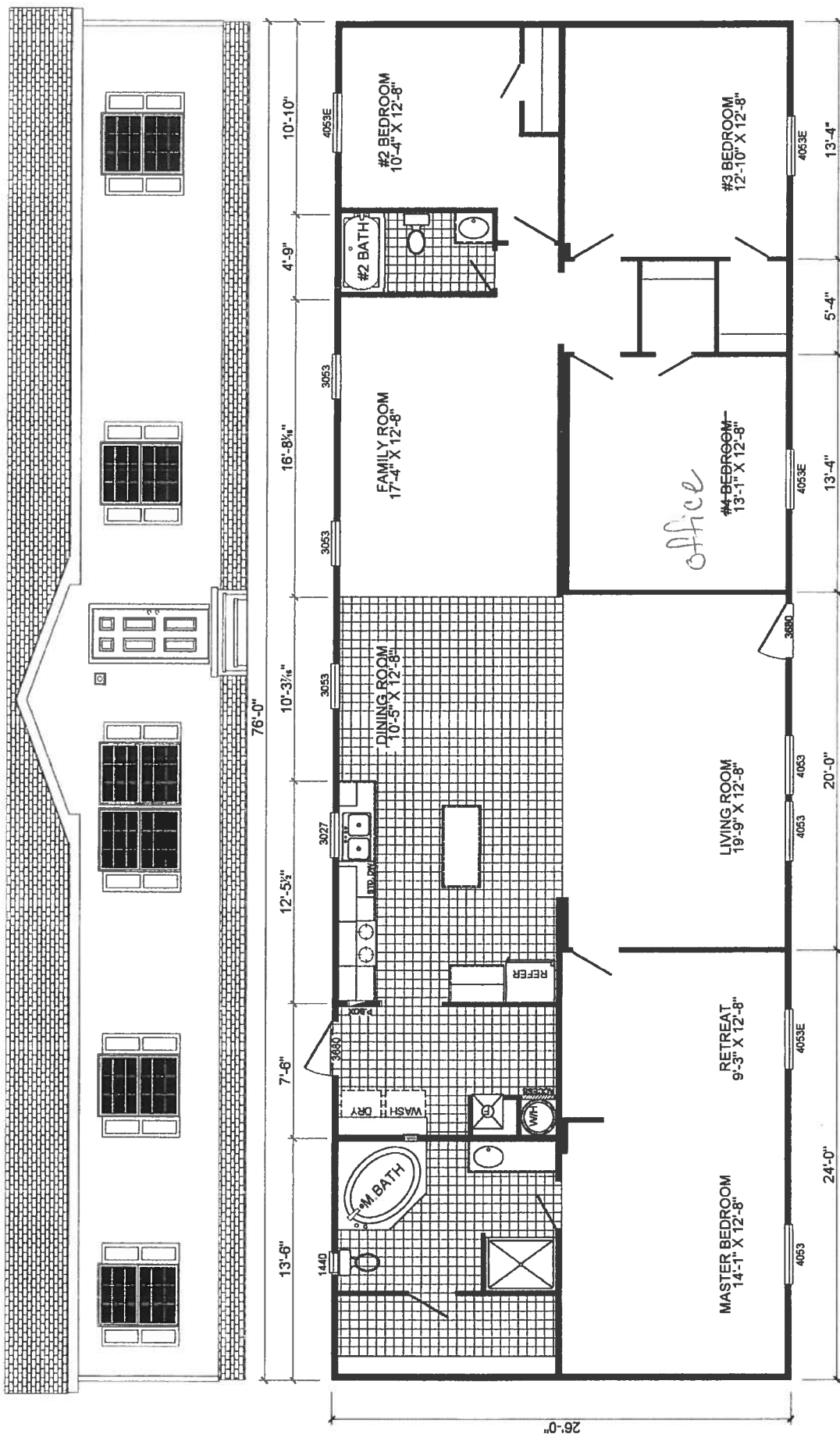
Miscellaneous

Skirting to be installed. Yes ☒ No ☐
Crew 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: Brandy Hall Date: 3/28/19

SPARTAN



6-3-2013 76

• All room dimensions include closets and square footage figures are approximate.

• Transom windows are available on optional 9'-0" sidewall houses only.

• Underpinning shown is optional.



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, Brandy Hall, give this authority for the job address show below
Installer License Holder Name

only, 3094 SW CR 778, and I do certify that
Job Address

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)
ERIKA Ashley		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
JB Wainwright		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

License Holders Signature (Notarized)

TH112663 3/29/19
License Number Date

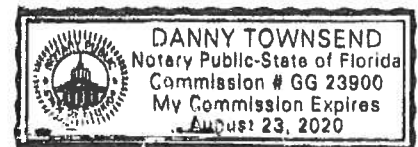
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Alachua

The above license holder, whose name is Brandy Hall, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 29th day of March, 2019.

NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR Brady HallPHONE 352-595-8339

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

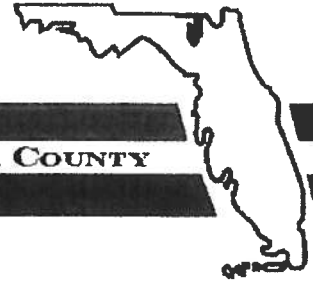
In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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 ✓ 10741	Print Name <u>Whittington Electric</u> License #: <u>EC1302957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386-972-1700</u>
MECHANICAL/A/C ✓ 1766	Print Name <u>Duane West</u> License #: <u>CAC1818176</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>352-317-0176</u>

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.

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

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:	4/23/2019 9:14:51 AM
Address:	3094 SW COUNTY ROAD 778
City:	FORT WHITE
State:	FL
Zip Code	32038
Parcel ID	04193-003

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**

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

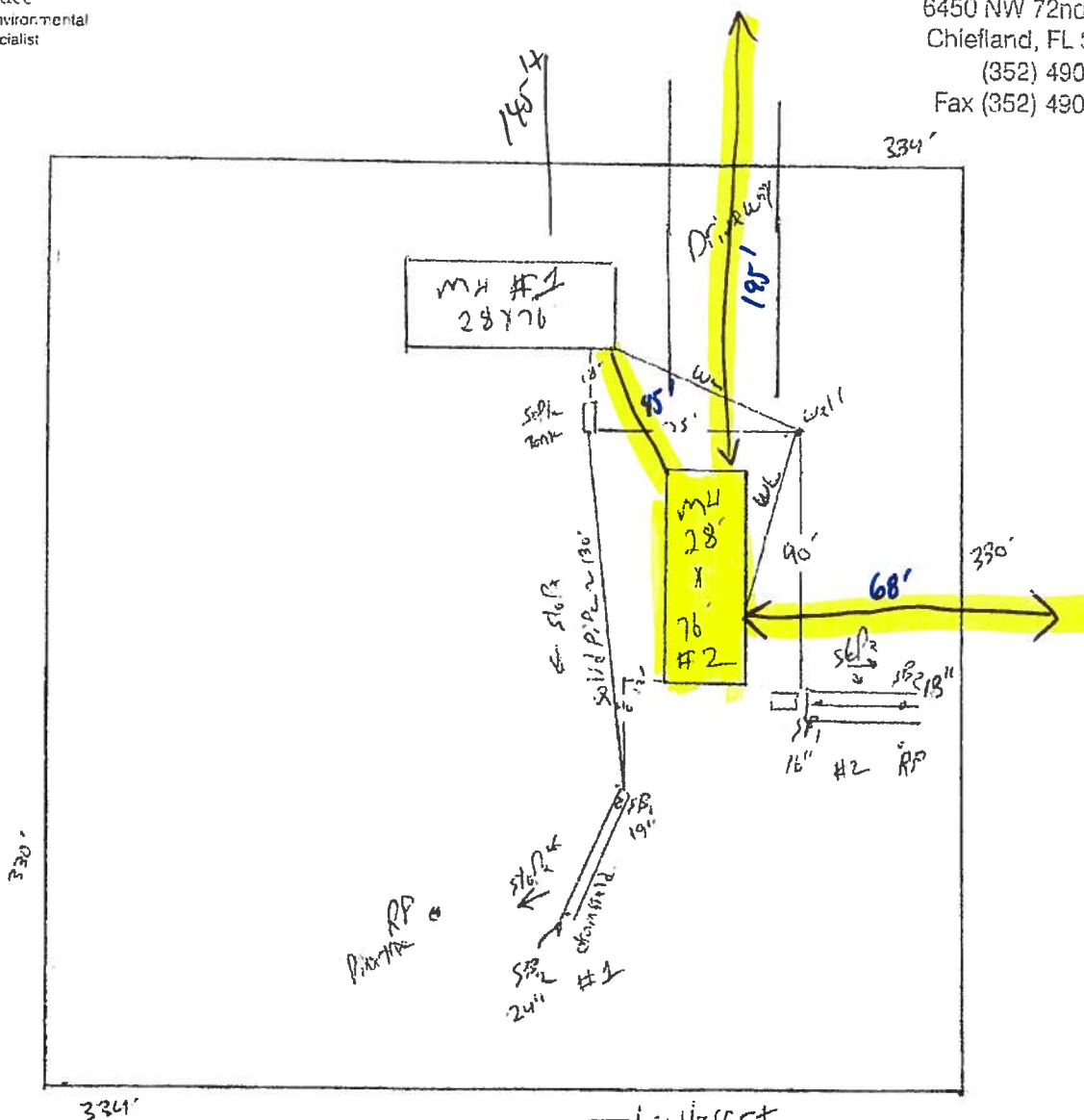
#2



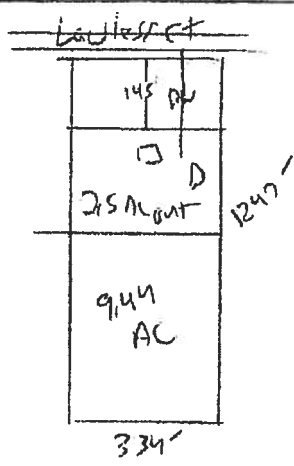
HARDEE ENVIRONMENTAL AND PERMITTING

Jeff Hardee
Certified Environmental
Health Specialist

6450 NW 72nd Lane
Chiefland, FL 32626
(352) 490-5418
Fax (352) 490-6755



Jeff Hardee
4-17-19



Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated 3/29/2019

Parcel: << **13-7S-16-04193-003** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

Owner	TEW DOUGLAS 470 PALM ISLE SE CLEARWATER, FL 33767 <i>See deed</i>		
Site	155 LAWLESS CT, FORT WHITE		
Description*	BEG SE COR OF NE1/4 OF NE1/4, RUN N 1260.33 FT TO S R/W OF CR-778, RUN W ALONG R/W 107.06 FT, CONT W 217.62 FT, S 1264.51 FT, E 326.13 FT TO POB. 848-2385, 852-46, QC 1162-1837, DC 1163-482, WD 1187-2455, WD 1227-639,641, WD 1296-983, DC 1299-512, PB 1347 . more>>>		
Area	9.44 AC	S/T/R	13-7S-16
Use Code**	MISC RES (000700)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code 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.

Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (3)	\$45,618	Mkt Land (3)	\$47,868
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (2)	\$12,975	XFOB (2)	\$12,975
Just	\$58,593	Just	\$60,843
Class	\$0	Class	\$0
Appraised	\$58,593	Appraised	\$60,843
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$58,593	Assessed	\$60,843
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$58,593 city:\$58,593 other:\$58,593 school:\$58,593	Total Taxable	county:\$60,843 city:\$60,843 other:\$60,843 school:\$60,843

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
3/9/2018	\$0	1355/1493	PB	I	U	18
11/13/2017	\$54,800	1347/2655	WD	I	U	30
11/7/2017	\$0	1347/2652	PB	I	U	18
6/12/2015	\$68,500	1296/0983	WD	I	Q	01
12/29/2011	\$100	1227/0641	WD	I	U	16
12/29/2011	\$100	1227/0639	WD	I	U	16
1/22/2010	\$8,000	1187/2455	WD	I	V	30
10/31/2008	\$100	1162/1837	QC	I	U	01
11/19/1997	\$12,500	848/2385	WD	V	Q	

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

Quitclaim Deed

RECORDING REQUESTED BY Marcela Viana

AND WHEN RECORDED MAIL TO:

Marcela Viana, Grantee(s)

2517 Provence Circle

Weston, FL 33327

Consideration: \$ 10.00

Property Transfer Tax: \$ _____

Assessor's Parcel No.: 13-75-16-04193-003

PREPARED BY: Erika Ashley certifies herein that he or she has prepared this Deed.

Signature of Preparer

4/16/2019
Date of Preparation

Printed Name of Preparer

THIS QUITCLAIM DEED, executed on April 16, 2019 in the County of Columbia, State of Florida

by Grantor(s), Lilac Operations LLC A Florida Limited Liability Company
whose post office address is 2665 South Bayshore Drive, 703mm, FL 33133
to Grantee(s), Marcela Viana, a married woman
whose post office address is 2517 Provence Circle Weston, FL 33327

WITNESSETH, that the said Grantor(s), Lilac Operations LLC A Florida Limited Liability Company
for good consideration and for the sum of ten dollars
(\$ 10.00) paid by the said Grantee(s), the receipt whereof is hereby acknowledged,
does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title

interest and claim which the said Grantor(s) have in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Columbia, State of Florida and more specifically described as set forth in EXHIBIT "A" to this Quitclaim Deed, which is attached hereto and incorporated herein by reference.

IN WITNESS WHEREOF, the said Grantor(s) has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:


GRANTOR(S): Lilar Operations LLC, A Florida Limited Liability Company



Signature of Grantor

Marcela Viana, Manager

Print Name of Grantor



Signature of First Witness to Grantor(s)

Robert Wainwright

Print Name of First Witness to Grantor(s)

Signature of Second Grantor (if applicable)

Print Name of Second Grantor (if applicable)



Signature of Second Witness to Grantor(s)

Jeffrey Lea

Print Name of Second Witness to Grantor(s)


GRANTEE(S):



Signature of Grantee

Marcela Viana

Print Name of Grantee



Signature of First Witness to Grantee(s)

Robert Wainwright

Print Name of First Witness to Grantee(s)

Signature of Second Grantee (if applicable)

Print Name of Second Grantee (if applicable)



Signature of Second Witness to Grantee(s)

Jeffrey Lea

Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT

State of Florida

County of Alachua

On April 16, 2019, before me, J. Brent Wainwright, a notary public in and for said state, personally appeared, Marcela Viana

who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.


Signature of Notary

Affiant Known _____ Produced ID X

Type of ID Drivers License

(Seal)

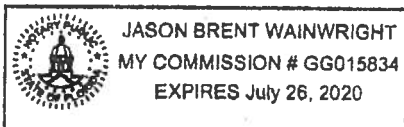


Exhibit "A"

Begin at the Southeast corner of the NE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 13, Township 7 South, Range 16 East, Columbia County, Florida and run thence N 12 degrees 32'05" W along the East line of Section 13, 1260.33 feet to the South Right of Way line of State Road No. 778 and a point on a curve concave to the North, thence West along said right of way line along said curve having a radius of 2904.79 feet and a central angle of 2 degrees 06'42", an arc distance of 107.06 feet to the end of said curve, thence S 89 degrees 24'23" W, along said right of way line, 217.62 feet to the West line of the E $\frac{1}{4}$ of NE $\frac{1}{4}$ of NE $\frac{1}{4}$, thence S 1 degrees 28'03" E, along said West line, 1264.51 feet to the South line of the NE $\frac{1}{4}$ of NE $\frac{1}{4}$, thence N 88 degrees 19-56" E, along said South line, 326.13 feet to the Point of Beginning.

Account Number
GEO Number
Owner Name
Property Address
Mailing Address

470 PALM ISLE SE
CLEARWATER FL 33760

GEO Number
121514-04193-001

Site Functions

Pay Search
Local Business Tax
Contact Us
County Login
Home

Exempt Amount		Taxable Value			
See Below		See Below			
Exemption Detail		Millage Code	Escrow Code		
NO EXEMPTIONS		003			
<u>Legal Description (click for full description)</u>					
13-78-16 0700/02800.44 Acres BEG SE COR OF NE1/4 OF NE1/4, RUN N 1280.13 FT TO S E/W OF CR-778, RUN N ALONG E/W 107.08 FT, CORN W 217.62 FT, S 1264.51 FT, S 326.13 FT TO POB. 248-7386, 452-46, 60 1162-1937, 60 1163-452, WD 1187-2455, WD 1227-634, 641, See Tax Roll For Extra Legal					
Ad Valorem Taxes					
Taxing Authority	Rate	Assessed Value	Exemption Amount	Taxable Value	Taxes Levied
SCHOOL DISTRICT 13	4.2500	58,440	0	58,440	247.36
COLUMBIA COUNTY SCHOOL BOARD	4.2500	58,440	0	58,440	247.36
LOCAL	4.2500	58,440	0	58,440	247.36
CAPITAL FUND	1.5000	58,440	0	58,440	237.66
COUNTY - AD VALOR	4.3648	58,440	0	58,440	254.13
COUNTY - AD VALOR	4.3648	58,440	0	58,440	254.13
Total Millage		15.6208	Total Taxes		986.99
Non-Ad Valorem Assessments					
Code	Levying Authority	Amount			
FFIP	FIRE ASSESSMENTS	2287.76			
SSAR	SOLID WASTE - ANNUAL	5193.76			
Total Assessments		5473.76			
Taxes & Assessments		51,130.75			
If Paid By		Amount Due			
		\$0.00			

Date Paid	Transaction	Receipt	Item	Amount Paid
1/29/2019	PAYMENT	1202422.0001	2019	51,172.73

[Prior Years Payment History](#)

Prior Year Taxes Due	
NO DELINQUENT TAXES	

[Print](#) << First < Previous Next > Last >>



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

PERMIT NO. 19-0346
DATE PAID: 5/8/19
FEE PAID: \$10.00
RECEIPT #: 1415975

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Marcela Viana

AGENT: Erika Ashley TELEPHONE: 384-1111

MAILING ADDRESS: 12426 NW US Hwy 441 Newberry FL 32579

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(a) 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: --- BLOCK: --- SUBDIVISION: --- PLATTED: ---

PROPERTY ID #: 13-75-16-04193-003 ZONING: --- I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 9.4 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y / ☐ N DISTANCE TO SEWER: 114 FT

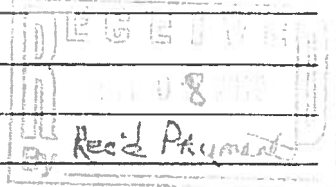
PROPERTY ADDRESS: 3094 SW CR 778 ST White FL 32088

DIRECTIONS TO PROPERTY: From 27 go west to CR 778 then 6.1 mi turn right on landowner's property is on left.

BUILDING INFORMATION

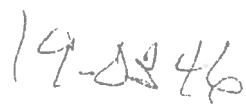
☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>new dw m/h</u>	<u>3</u>	<u>2128</u>	
2				
3				
4				



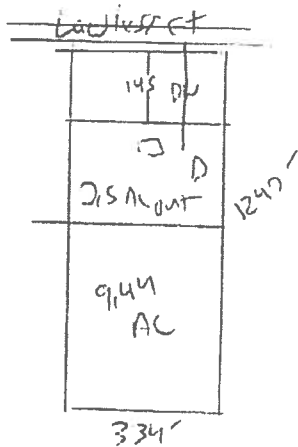
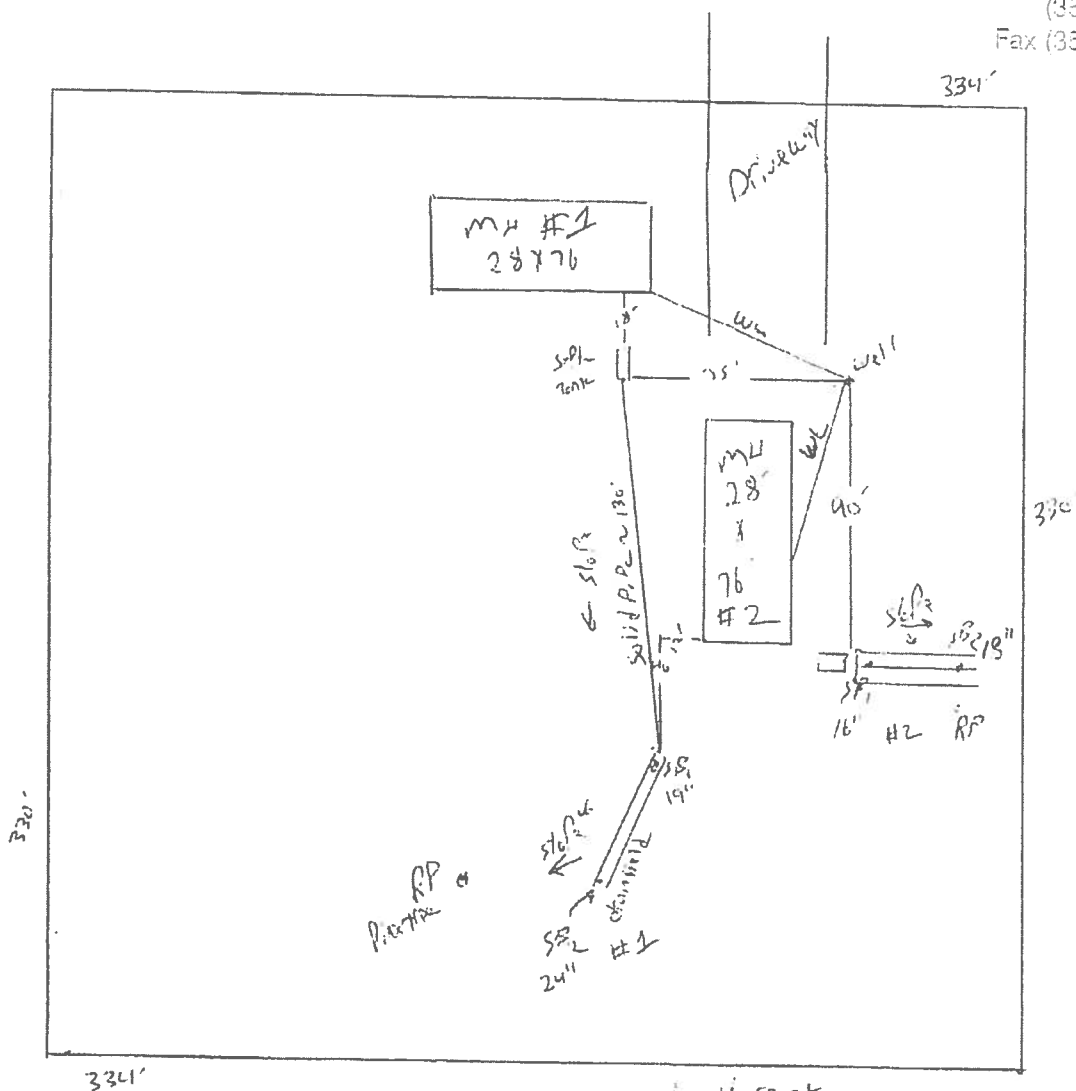
☐ Floor/Equipment Drains ☐ Other (Specify) ---

SIGNATURE: [Signature] DATE: 4/17/19



Jeff Hardee
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4-17-19