

CR 1003

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BK 07 July 2011 Building Official T.C. 6-30-11

AP# 1106-48 Date Received 6-24-11 By LH Permit # 29529

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments _____

FEMA Map# N/A Elevation N/A Finished Floor 1' above rd River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 11-0310-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

IMPACT FEES: EMS _____ Fire _____ Corr _____ N/A Out County ☒ In County Done

Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 _____

Lot 29 & 30 Block 4 unit 23

Property ID # 00-00-10-01438-029 Subdivision Three Rivers Esd

- New Mobile Home _____ Used Mobile Home ☒ MH Size 16x64 Year 1996
- Applicant Brian Hull/Charlott Phone # 386-752-1624
- Address 270 SW twig Ct lake city FL 32024
- Name of Property Owner Kathy Martin Phone# 386-3497-4658
- 911 Address 276 SW UTAH ST, fort white, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Brian & Charlott Hull Phone # 386-752-1624
- Address 270 SW twig Ct lake city FL 32024
- Relationship to Property Owner mother
- Current Number of Dwellings on Property 1
- Lot Size 29 & 30 Total Acreage 2 acres
- 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 NO (Removed already)
- Driving Directions to the Property Take 47 toward fort white turn right on to 27 like your going to Brandford turn left on to utah 2nd driveway on the left.
- Name of Licensed Dealer/Installer Jackie Gibbs Phone # 755-2349
- Installers Address 1664 SW Sebastian Circle lake city FL 32024
 - License Number IH 1025209 Installation Decal # 304444

Spoke to Charlott 7-7-11 LH
Left Message 7-11-11

Emailed
to Ron
6-27-11

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6/13 BY JW IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO
OWNERS NAME BRIAN HULL PHONE CELL SHANNON: 867-6310
ADDRESS

MOBILE HOME PARK BUI DIVISION
DRIVING DIRECTIONS TO MOBILE HOME 475 TO WATER RD, TL TO LITTLE RD, TL
TO Southwood Meadows, TR 3/4 mile on R.

MOBILE HOME INSTALLER PHONE CELL

MOBILE HOME INFORMATION

MAKE VEBL YEAR 1975 SIZE 16 x 64 COLOR Brown/White
SERIAL No. GAE LR074325 LG DU

WIND ZONE II Must be wind zone II or higher | D WIND ZONE | ALLOWED

INSPECTION STANDARDS

INTERIOR:

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

P SMOKE DETECTOR () OPERATIONAL X MISSING
✓ FLOORS () SOLID () WEAK () HOLES DAMAGED | LOCATION
✓ DOORS () OPERABLE () DAMAGED
✓ WALLS () SOLID () STRUCTURALLY UNBOUND
✓ WINDOWS () OPERABLE () INOPERABLE
P PLUMBING FIXTURES () OPERABLE () INOPERABLE X MISSING
✓ CEILING () SOLID () HOLES () LEAKS APPARENT
✓ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

\$50.00

Date of Payment: 6-13-11

Paid By: SHANNON HULL

Notes: NO Application Rec'd

EXTERIOR:

✓ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNBOUND () NOT WEATHERTIGHT () NEEDS CLEANING
P WINDOWS () CRACKED / BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
✓ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: Replace missing windows, siding, tabs and toilets
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS

SIGNATURE Shawn S. Powell ID NUMBER 402 DATE 6-13-11

777 0000 1211

Rec. 10.50
Dec. 70

Documentary Stamp .70
Intangible Tax 6
r. DeWitt Cason
Clerk of Court
By MCB D.C.

EX 0886 PG 1271

OFFICIAL RECORDS

WARRANTY DEED

THIS INDENTURE, made this 17th day of August, 1999, between **THOMAS**

R. MARTIN, a married person not residing on the property, party of the first part,
Grantor, and **KATHY M. MARTIN**, (Social Security No. _____), a single
person, whose mailing address is Route 2, Box 7022, Fort White, Florida 32038, party
of the second part, Grantee,

W I T N E S S E T H:

That said grantor, for and in consideration of the sum of **TEN AND NO/100**
(\$10.00) **DOLLARS**, and other good and valuable considerations to said grantor in
hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted,
bargained and sold to the said grantee, and grantee's heirs, successors and assigns
forever, the following described land, situate, lying and being in Columbia County,
Florida, to-wit:

Lots 29 and 30, Block 4, **THREE RIVER ESTATES SUBDIVISION**, Unit
23, a subdivision per Plat Book 4, Pages 80-80A, public records,
Columbia County, Florida.

N.B. No portion of the above described property constitutes the
homestead of the Grantor.

N.B. Lot 29 is subject to an existing mortgage which Grantee assumes,
will timely pay, and hold Grantor harmless therefrom.

Tax Parcel No.: R01438-029

and said grantor does hereby fully warrant the title to said land, and will defend the
same against the lawful claim of all persons whatsoever.

RECORDED
1999 AUG 23 10:55
(S to BIRM CITY)

744 0886 12'12

PK 0886 PG 1272

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal the
OFFICIAL RECORDS

day and year first above written.

Signed, sealed and delivered
in the presence of:

Marlin Feagle
Witness
MARLIN Feagle
(Print or type name)

Thomas R Martin (SEAL)
THOMAS R. MARTIN
Route 15, Box 470
Lake City, Florida 32055

Diane S. Edenfield
Witness
DIANE S. EDENFIELD
(Print or type name)


STATE OF FLORIDA
COUNTY OF COLUMBIA

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take
acknowledgments, personally appeared **THOMAS R. MARTIN** who is personally known
to me.

17th WITNESS my hand and official seal in the County and State last aforesaid this
day of August, 1999.

(NOTARIAL SEAL)

Diane S. Edenfield
NOTARY PUBLIC
MY COMMISSION EXPIRES:

 Diane S. Edenfield
MY COMMISSION # CC734169 EXPIRES:
May 26, 2002
BONDED THRU TROY FAIR INSURANCE, INC.

FILED AND RECORDED IN PUBLIC
RECORDS OF COLUMBIA COUNTY, FL.

99-14246

1999 AUG 17 PM 3:26

RECORDED
2
YMK



Columbia County Property Appraiser

DB Last Updated: 6/22/2011

2010 Tax Year

Parcel: 00-00-00-01438-029

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	MARTIN KATHY M		
Mailing Address	1099 SW KENTUCKY ST FT WHITE, FL 32038		
Site Address	276 SW UTAH ST		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	100000
Land Area	1.836 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOTS 29 & 30 BLOCK 4 UNIT 23 RIVERS ESTATES. ORB 644-129, 710-405, 765-930, 775-1606, 783-1699, 798-1298 & 811-1173. ORB 886-1271			



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$24,680.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$24,680.00
Just Value		\$24,680.00
Class Value		\$0.00
Assessed Value		\$24,680.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$24,680 Other: \$24,680 Schl: \$24,680	

2011 Working Values

NOTE:
2011 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
8/17/1999	886/1271		I	U	01	\$100.00
11/9/1994	798/1298	WD	V	Q		\$5,595.00
11/9/1994	798/1298	WD	V	Q		\$5,595.00
12/13/1993	783/1699	CT	V	U	11	\$4,000.00

Building Characteristics

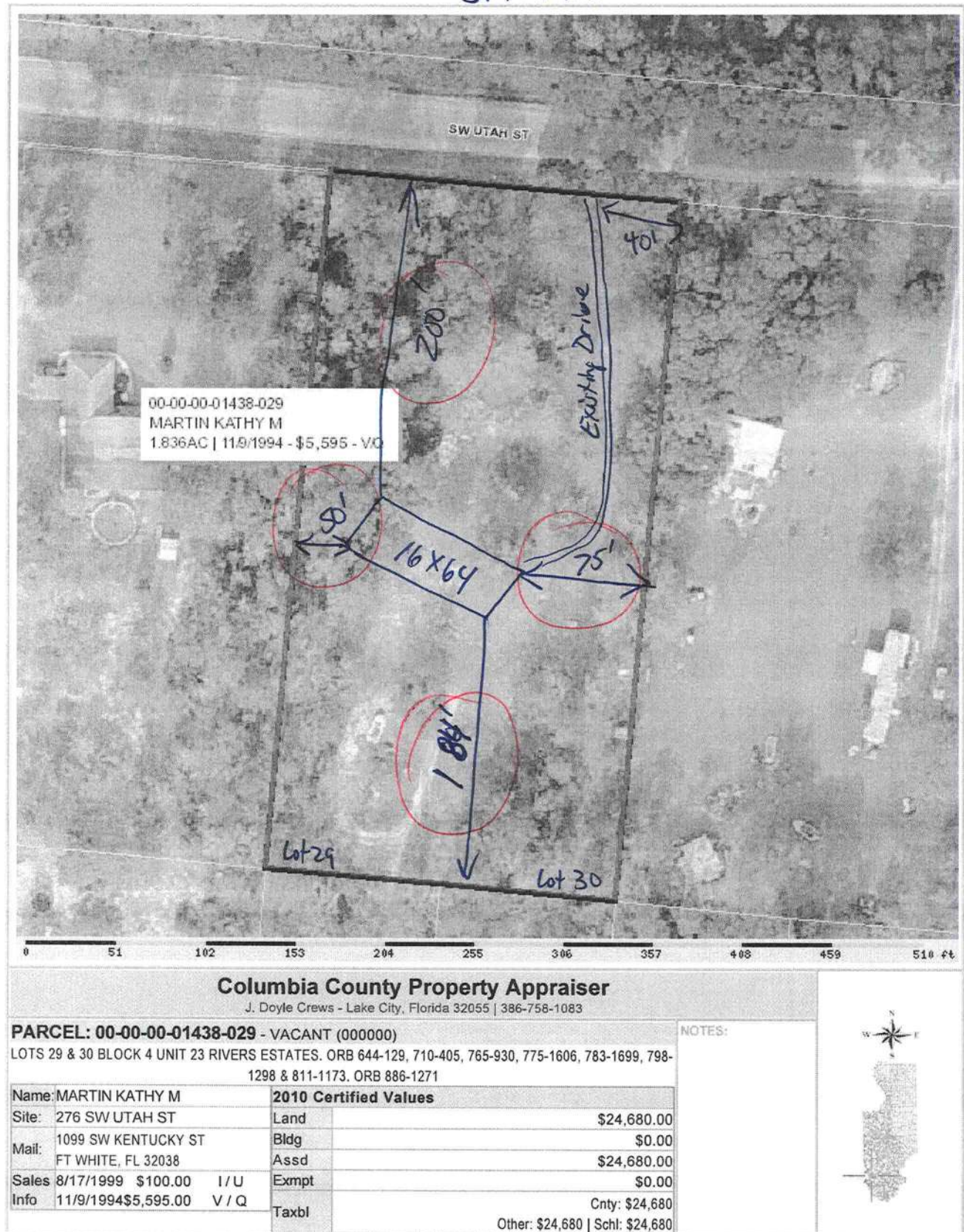
Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Site Plan



Confirmation of this Address:

276 SW UTAH ST. , Fortwhite, FL 32038

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1106-48 CONTRACTOR _____ PHONE _____

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 <u>Charlotte Hull</u> License #: <u>Owner</u>	Signature <u>Charlotte Hull</u> Phone #:
MECHANICAL/ A/C	Print Name <u>Charlotte Hull</u> License #: <u>Owner</u>	Signature <u>Charlotte Hull</u> Phone #:
PLUMBING/ GAS	Print Name <u>Charlotte Hull</u> License #: <u>Owner</u>	Signature <u>Charlotte Hull</u> Phone #:

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.

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer

Jackie Bibbs

License #

7141065209
FH0000214

911 Address where home is being installed.

296 Sw. 67th
FT. WHITE 32028

Manufacturer

Boon

Length x width

16x64

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

JVB (113)

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 # 304444

Triple/Quad ☐ Serial # GAELRD 7A32526BM

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

23x31

Perimeter pier pad size 20x6 4x8x16

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

5'-11"

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

OTHER TIES

Number

10 per side

Longitudinal Marriage wall

Shearwall

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer Chubb Test

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 282 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 the 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 JA

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Charles Gibbs

Date Tested 6/20/11

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. 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.

Site Preparation

Debris and organic material removed ☒ Swale Pad Other
Water drainage: Natural

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
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, 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 JA

Type gasket Installed:
Pg. 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

Installer Signature Charles Gibbs Date 6/20/11

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, Lachre Gibbs, license number IH 0010214
Please Print

do hereby state that the installation of the manufactured home for

Brown Hull at 276 SW 10th Applicant Ft. White
911 Address

will be done under my supervision. (1)

Jackie Miller
Signature

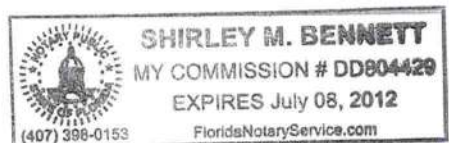
Sworn to and subscribed before me this 21 day of June,
2011.

Notary Public:

Shirley M. Bennett
Signature

My Commission Expires:

7/8/2012
Date





COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

I, Jackie Gibbs (license holder name), licensed qualifier
for Gibbs Brothers M/I (company name), do certify that
the below referenced person(s) listed on this form 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 468, 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. <u>Brian Hull</u>	1. <u>Brian Hull</u>
2. <u>Charlotte Hull</u>	2. <u>Charlotte Hull</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must 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.

Jackie Gibbs License Holders Signature (Notarized) 141005209 License Number 6/21/11 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Jackie Gibbs
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 21 day of June, 2011.

Shirley M Bennett
NOTARY'S SIGNATURE

(Seal/Stamp)



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: 6/29/2011 DATE ISSUED: 7/1/2011

ENHANCED 9-1-1 ADDRESS:

276 SW UTAH ST

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-01438-029

Remarks:

RE-ISSUE 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.

2017

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), Kathy Marie Martin
owner of the below described property:

Tax Parcel No. 00-00-00-01438-029

Subdivision (name, lot, block, phase) Three Rivers Estates, 29 & 30, 41

Give my permission to CHARLOTTE & BRIAN HALL 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.

Kathy Marie Martin
Owner

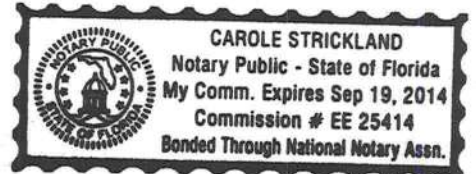
Owner

SWORN AND SUBSCRIBED before me this 7TH day of June,
20 11. This (these) person(s) are personally known to me or produced
ID FL DRIVERS LICENSE.

Carole Strickland
Notary Signature

CAROLE STRICKLAND

MY COMMISSION EXPIRES: 9/19/2014



765-1031



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

PERMIT NO. 1041028
DATE PAID: 7/8/11
FEE PAID: 175.00
RECEIPT #: 1166449

APPLICATION FOR:

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

APPLICANT:

Charlotte & Brian Hall Kathy Martin

AGENT:

TELEPHONE: 386-752-1624

MAILING ADDRESS:

270 SW Twig Ct Lake City FL 32024

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: 29830 BLOCK: 4 SUBDIVISION: Unit 33-3 Rivers Estates PLATTED: 1967

PROPERTY ID #: 00-00-00-01438-029 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☐ N]

PROPERTY SIZE: 1.836 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y / ☐ N] DISTANCE TO SEWER: 100 FT

PROPERTY ADDRESS: 276 SW Utah St Ft. White FL 32038

DIRECTIONS TO PROPERTY: take US 47 toward Fort White turn right at Red light onto US 27 toward Bradford go about 5 mile on 27 until you see Utah St on left take Utah to 3rd drive way on the 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>mobile home</u>	<u>2</u>	<u>960</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE:

Charlotte Hall & Brian Hall

DATE:

7/7/11



STATE OF FLORIDA
DEPARTMENT OF HEALTH

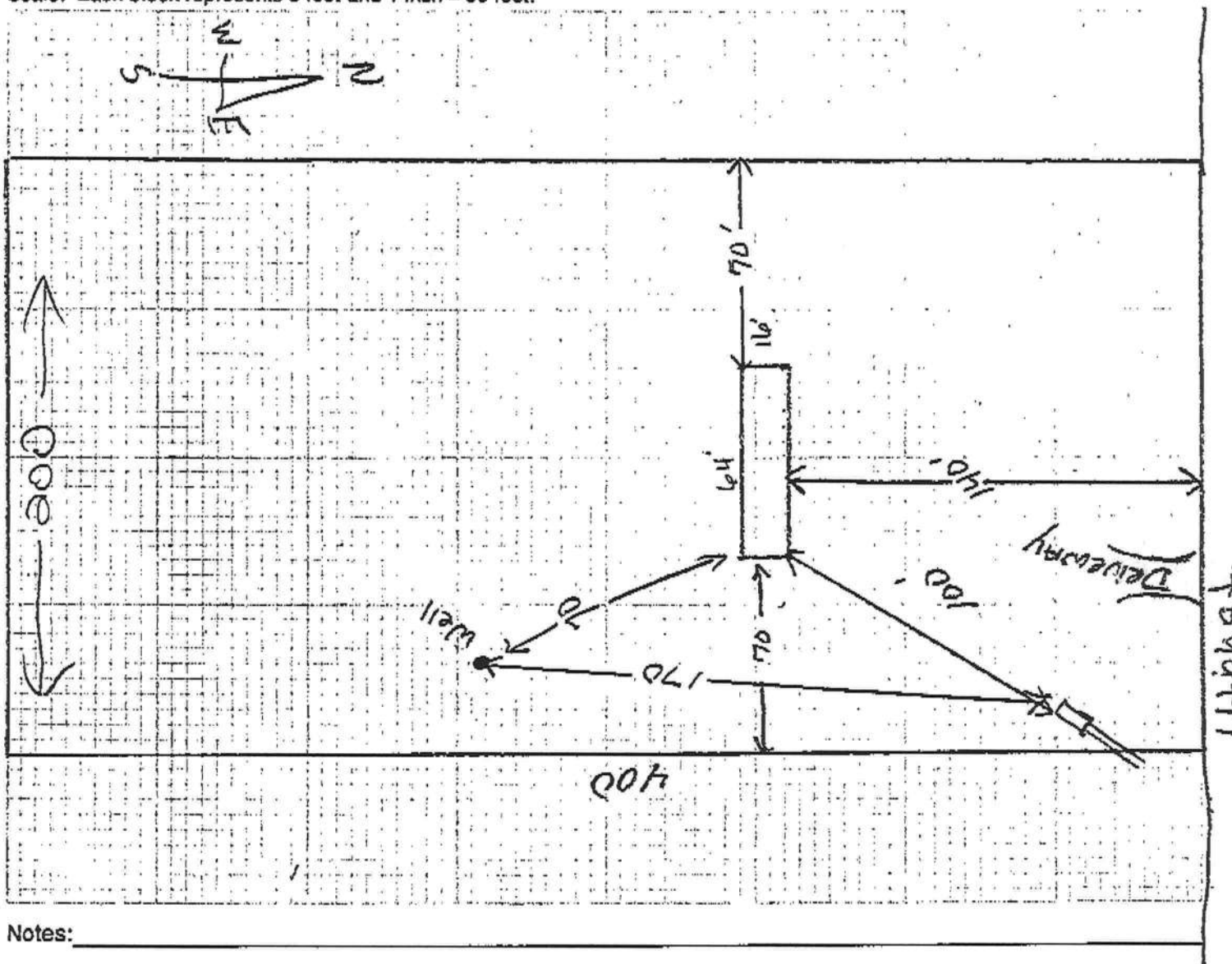
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

11-8210E

PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

Signature

Plan Approved

X

Not Approved

Date

Title

7/11/4

By

Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DATE 07/11/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029529

APPLICANT CHARLOTTE HULL PHONE 386.752.1624
ADDRESS 270 SW TWIG COURT LAKE CITY FL 32024
OWNER KATHY MARTIN(BRIAN /CHARLOTTE HULL M/H) PHONE 386.497.4658
ADDRESS 276 SW UTAH STREET FT. WHITE FL 32038
CONTRACTOR JACKIE GIBBS PHONE 386.755.2349
LOCATION OF PROPERTY 47-S TO US 27,TR TO UTAH,TL AND IT'S TH 2ND DRIVEWAY ON L.

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 19-6S-16-01438-029 SUBDIVISION 3 RIVERS ESTATES
LOT 29/30 BLOCK 4 PHASE UNIT 23 TOTAL ACRES 2.00

IH1025209
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 11-0310-E BLK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD.

Check # or Cash 1003

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by
Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by
Framing Insulation
date/app. by date/app. by
Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by
Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by
Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ N/A FIRE FEE \$ 19.26 WASTE FEE \$ 50.25
FLOOD DEVELOPMENT FEE \$ 0 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ 0 **TOTAL FEE** 344.51
INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

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.