	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
F	or Office Use Only (Revised 7-1-15) Zoning Official LN Building Official
_	P# 1811-22 Date Received 11/-1 By IN Permit # 3744/
F	ood ZoneX Development Permit Zoning Zoning Land Use Plan Map Category
С	omments Special family Lot - SFLP 1818 Deeded 2.5 Ac to Son
_	· · · · · · · · · · · · · · · · · · · ·
FE	MA Map# Elevation Finished Floor River In Floodway
	Recorded Deed or Property Appraiser PO is site Plan FEH # 18 - 0899 Well letter OR
0	Existing well Land Owner Affidavit nstaller Authorization FW Comp. letter App Fee Paid
	DOT Approval Parent Parcel # STUP-MH 11 App
	Ellisville Water Sys Assessment Part on Property Out County In County Sub VF Form 11-13-16
	N/z of
Pro	perty ID # 33-55-16-03751-308 Subdivision South Wind Add Lot# 18
	New Mobile Home Used Mobile Home MH Size 57×37 Year 2019
	Applicant Chad Micke Hands Phone # (354):949-0592
_	Address 6450 NW 72 ND LN, Chiefland, Al 32626
•	Park-
•	Name of Property Owner Chad or Bianka Mickele Phone# (386)705-9221
Ħ	911 Address 823 Sw Sonlicu St ++ White FC32038
•	Circle the correct power company - FL Power & Light - Clay Electric
•	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
•	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
	(Circle One) - Suwannee Valley Electric - Duke Energy Name of Owner of Mobile Home Act Mik/ Phone # 366-205-922/
	Name of Owner of Mobile Home Che Mickle Phone # 366-205-9221 Address 823 Sw Funvirw St # White # 32038
15	Name of Owner of Mobile Home Che J Mickle Phone # 366-205-922/ Address 823 Sw Funniew St # White # 32038 Relationship to Property Owner Same
6	(Circle One) - Suwannee Valley Electric - Duke Energy Name of Owner of Mobile Home Address 823 Sur Fun view St 7 White 4 32038 Relationship to Property Owner Same Current Number of Dwellings on Property
	Name of Owner of Mobile Home Che J Mickle Phone # 366-205-922/ Address 823 Sw Funniew St # White # 32038 Relationship to Property Owner Same
	Name of Owner of Mobile Home Activity Phone # 366-205-922/ Address 523 Sw Sunview St H White At 32038 Relationship to Property Owner Samuer Total Acreage Lot Size 2 Total Acreage 2 Total Acreage Culvert Permit or Culvert Waiver (Circle one)
	Name of Owner of Mobile Home Activity Phone # 566-205-922/ Address 823 Sw Sunview St # White # 32038 Relationship to Property Owner Sum Total Acreage Lot Size Total Acreage Or need Culvert Permit (Putting in a Culvert) Or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
	Name of Owner of Mobile Home Address S23 Sw Funview St H White At 32038 Relationship to Property Owner Current Number of Dwellings on Property Lot Size Do you: Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) Is this Mobile Home Replacing an Existing Mobile Home Address S23 Sw Funview St H White Access Address
	Name of Owner of Mobile Home Address Standish Function of Duke Energy Name of Owner of Mobile Home Address Standish Function of Diversity Standish Functio
	Name of Owner of Mobile Home
	Name of Owner of Mobile Home Address Standish Function of Duke Energy Name of Owner of Mobile Home Address Standish Function of Diversity Standish Functio
	Name of Owner of Mobile Home
	Name of Owner of Mobile Home Che Mick Phone # 366-205-922/ Address 823 Sw Funniew St H White At 32038 Relationship to Property Owner Same Current Number of Dwellings on Property Lot Size Do you: Have Existing Drive or Private Drive or need Culvert Permit (Not existing but do not need a Culvert) Is this Mobile Home Replacing an Existing Mobile Home Point Of Sunview St Total Sunview St Total Sunview St Total Sunview St Total Acreage Driving Directions to the Property Sunview St Total Sunview St Total Acreage Total Sunview St Total Sunview St Total Sunview St Total Acreage Total Sunview St Total Sunvi
	Name of Owner of Mobile Home Continue of Micking Phone # 366-205-922/ Address 823 Sur Funnique of Home # 32038 Relationship to Property Owner Some Current Number of Dwellings on Property Lot Size Doyou: Have Existing Drive or Private Drive or need Culvert Permit (Currently using) or (Blue Road Sign) or need Culvert Permit (Not existing but do not need a Culvert) Is this Mobile Home Replacing an Existing Mobile Home Driving Directions to the Property The Sunyiew Standard Continue of Sunyiew Standard Co

LH-Spoke to Bianka 4/7/18 - Confirmed this is only App for parcel.

Pana			Parilugo well plans within 2 of end of frome par Rule 15C		Installer's initials w locations of Longitudi (use dark lines to show	home is a single wide fill out or home is a triple or quad wide si Lateral Arm Systems cannot be idewall ites exceed 5 ft 4 in.	Address of home License # I H 103826	Wobile Home Permit Worksheet
1 () 2	TIEDOWN COMPONENTS Longitudinal Stabilizing Device (LSO) Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Manufa	ANCHORS 13/6/3/6 4 ft 5 ft FRAME TIES within 2' of end of home		PAD SIZES 734/31/4 Pad Size 16 x 18 16 5 x 18.5 18.5 x 18.5 x 18.5 18.5 x 18.5 18.5 x 18.5 x 18.5 18.5 x 18.5 x 18.5 18.5 x 18.5 x 18.5	0° x 20° 22" x 22° 24" x 24" 26" x 26" (400) (484)° (570)° (676) 5 6° 7° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8° 8°	ble wide Serial # 1		Application Number: Date:

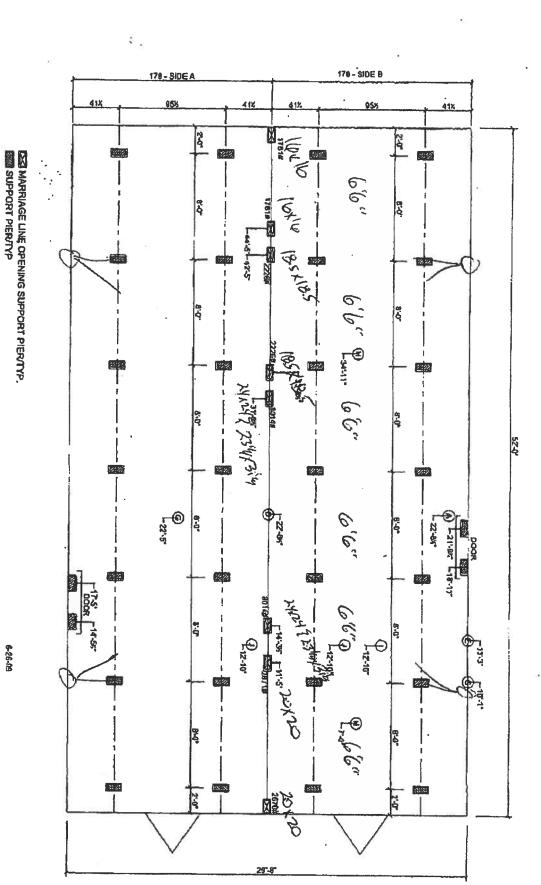
Page 2 of 2

Mobile Home Permit Worksheet

Application Number:

Connect all potable water supply piping to an existing water mater, water tap, or other independent water supply systems. Pg. 15/1/	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 1501. Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Pg. 150-1	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. TORQUE PROBE TEST The results of the lorque probe test is INT HOW increment. X	POCKET PENETROMETER TEST The pocket penetrometer tests are rounded down to pst or check have to declare 1000 is the second sec
Instalter Signature Date / 6. 3j - 1/3	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	Fastening multi wide units The Asy Length: Crosses Space Length: Crosses Length: Space Length: Space Spauge, 8" wide, galvan dover the peak of the roof and fasket?" on center on both sides of the constant of a gasket is a requirement of a cition, mold, meldew and buckled must of no gasket being installed. I was gasket. Installed's initials for installed: Between Floors Yes Bottom of ridgebeam Westberproofing Westberproofing Westberproofing Thiscellaneous of skirting, Yes foot intervals. Yes foot intervals. Yes foot intervals. Yes foot intervals. Yes	Site Preparation Debris and organic material removed Water drainage: Natural Swale Pad Other

MA 20:05:1 PROZESUCE



4-BEDROOM / 2-BATH MODEL: L-3524F - 32 X 52 Live Oak Homes

THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN COMJUNCTION WITH THE INSTALLATION MANUAL AND 178 SUPPLEMENTS, FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC. FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR RECOUREMENTS.

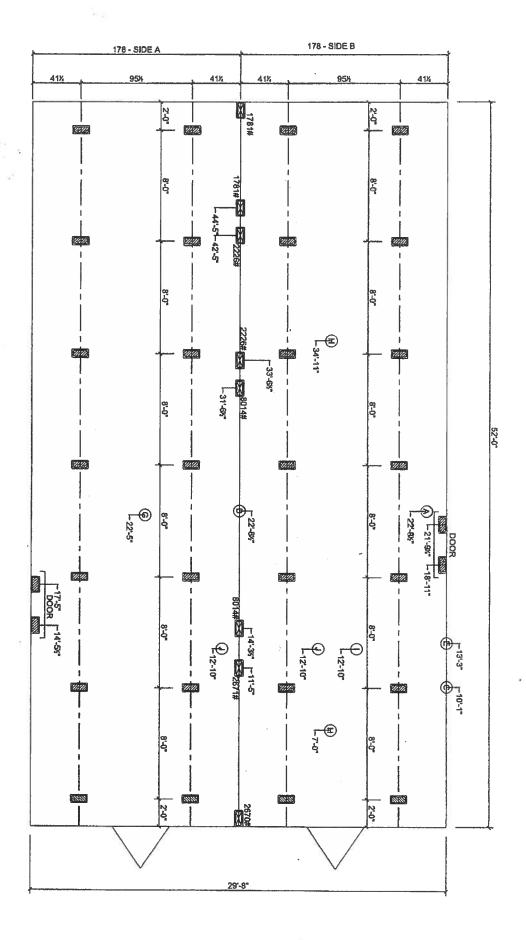
FOUNDATION NOTES:

(A) MAIN ELECTRICAL

(B) ELECTRICAL CROSSOVER
(C) WATER INLET
(D) WATER CROSSOVER (IF ANY)
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ANY)

 CO DUCT CROSSOVER
 SEWER OROPS
 RETURN ALR (MYOPT, HEAT PUMP OH DUCT)
 SUPPLY AIR (MYOPT, HEAT PUMP OH DUCT) RETURN AIR (WICHT, HEAT PUMP OH DUCT)

L-3524F



4-BEDROOM / 2-BATH Live Oak Homes MODEL: L-3524F - 32 X 52

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS, -FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

6-26-09

FOUNDATION NOTES:

SUPPORT PIER/TYP

MARRIAGE LINE OPENING SUPPORT PIER/TYP.

- (A) MAIN ELECTRICAL
 (B) ELECTRICAL CROSSOVER
 (C) WATER INLET
 (D) WATER CROSSOVER (IF ANY)
 (E) GAS INLET (IF ANY)
 (F) GAS CROSSOVER (IF ANY)

 - DUCT CROSSOVER
 SEWER DROPS
 RETURN AIR (WIOPT, HEAT PUMP OH DUCT)
 SUPPLY AIR (WIOPT, HEAT PUMP OH DUCT)

SITE PLAN CHECKLIST

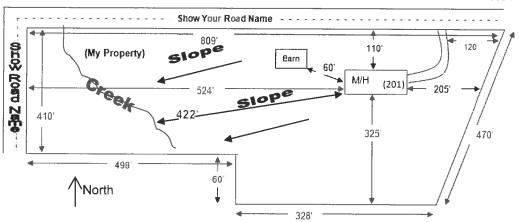
- ___1) Property Dimensions
- 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
 - _3) Distance from structures to all property lines
- __4) Location and size of easements
- __5) Driveway path and distance at the entrance to the nearest property line
- 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ___7) Show slopes and or drainage paths
- 8) Arrow showing North direction

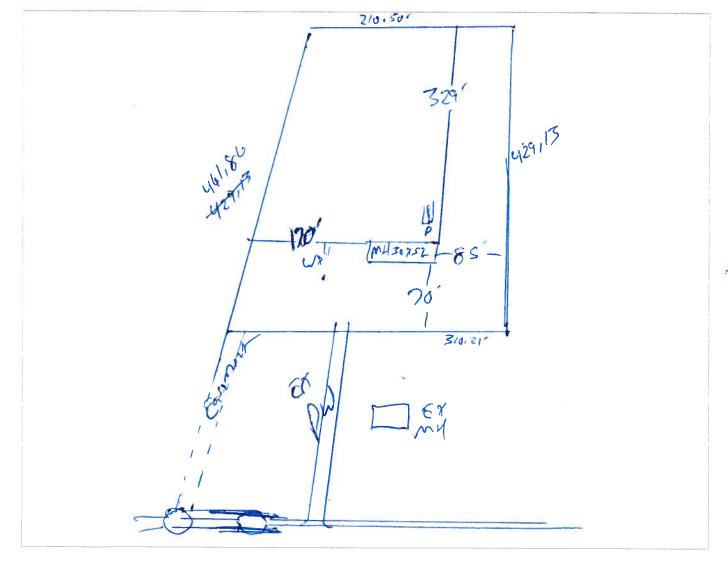
SITE PLAN EXAMPLE

Revised 7/1/15

NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.





2017 Tax Roll Year updated: 8/1/2018

Columbia County Property Appraiser Jeff Hampton

Parcel: << 33-5S-16-03751-308 >>>

Owner & Pi	roperty Info	Resu	ılt: 1 of 1
Owner	MICKLE CHA 340 NE HILLS LEE, FL 3205		
Site	, FORT WHIT	Έ	
Description*	AS: COMM SV 340.74 FT FOI NW COR OF L	18 SOUTH WIND V COR OF SAID L R POB, CONT NE OT 18, E 210.50 F W 429.13 FT, W 3 B-56,	OT 18, NE 461.86 FT TO FT TO NE COR
Area	2.5 AC	S/T/R	33-5S-16
Use Code**	VACANT	Tax District	3

^{*}The Description above is not to be used as the Legal Description for this

Property & Assessment Values

(000000)

2017 Certified Values	2018 Worl	king Values
There are no 2017 Certified	Mkt Land (1)	\$13,500
Values for this parcel	Ag Land (0)	\$0
	Building (0)	\$0
	XFOB (0)	\$0
	Just	\$13,500
	Class	\$0
	Appraised	\$13,500
	SOH Cap [?]	\$0
	Assessed	\$13,500
	Exempt	\$0
	Total Taxable	county:\$13,500 city:\$13,500 other:\$13,500 school:\$13,500



Sales History			
Sale Date	Sale Price	Book/Page	De

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
6/18/2018	\$100	1363/0056	QC	V	U	11

~	Building	Characteristics

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

~	Extra	Features	&	Out	Buildings	(Codes)
---	-------	-----------------	---	-----	-----------	---------

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

|--|

Land Code Desc Units	Adjustments	Eff Rate	Land Value
----------------------	-------------	----------	------------

parcel in any legal transaction.
**The <u>Use Code</u> 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.

District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash

District No. 3 - Bucky Nash
District No. 4 - Everett Phillips

District No. 5 - Tim Murphy



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:

6/29/2018 1:43:47 PM

Address:

823 SW SUNVIEW St

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

03751-318

REMARKS: Address for proposed structure on parcel. 2nd address on 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.

Marlie, Deborah Michile

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 Teleph Email: gis@columbiacountyfla.com

Telephone: (386) 758-1125



Inst: 201812012077 Date: 06/13/2018 Time: 2:16PM Page 1 of 2 B: 1362 P: 880, P.DeWitt Cason, Clerk of Court Columbia, County, By: BS Deputy Clerk

FAMILY RELATIONSHIP AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

COUNTY OF COLUMBIA
BEFORE ME the undersigned Notary Public personally appeared, Debit Cob the Owner of the parent parcel which has been subdivided for and Chad A. Mickel, the Immediate Family Member of the Owner, which is intended for the Immediate Family Members primary residence use. The Immediate Family Member is related to the Owner as Both individuals being first duly sworn according to law, depose and say:
 Affiant acknowledges Immediate Family Member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Immediate Family Member have personal knowledge of all matters set forth in this Affidavit.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Parent Tract Tax Parcel No. 33-55-16-0379-318
4. The Immediate Family Member holds fee simple title to certain real property divided from the Owners' parent parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No
5. No person or entity other than the Owner and Immediate Family Member to whom

- 5. No person or entity other than the Owner and Immediate Family Member to whom permit is being issued, including persons residing with the family member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the property.
- 6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for an Immediate Family Member being in compliance with the density requirements of the Columbia County's Comprehensive Plan and Land Development Regulations (LDR's).
- 7. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

sknew micke	Olada
Owner	Immediate Family Member
Leborah I Hidile	Chad A. Hickle
Typed or Printed Name	Typed or Printed Name
Subscribed and sworn to (or affirmed) be by Lovo (or affirmed) by	no is personally known to me or has produced
	nber) <u>who is personally known tó m</u> e or has dentification.
Notary Public	MARISOL M BROWN MY COMMISSION # GG090396 EXPIRES July 17, 2021
	APPROVED: COLUMBIA COUNTY, FLORIDA BY: Laura Melbles
	Name: Laura Mettles
	Title: FIRMARA PORTO



Inst. _umber: 201812012850 Book: 1363 Page: 56 Page 1 of 3 Date: 6/22/2018 Time: 2:57 PM

P.Delvit Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.70

Prepared By:

Bianka Mickle` 340 northeast hillside ter lee, Florida 32059

After Recording Return To:

nhad Deborah Mickle

340 northeast hillside ter lee, Florida 32059

Inst: 201812012850 Date: 06/22/2018 Time: 2:57PM Page 1 of 3 B: 1363 P: 56, P.DeWitt Cason, Clerk of Court Colum County, By: BD Deputy ClerkDoc Stamp-Deed: 0.70

SPACE ABOVE THIS LINE FOR RECORDER'S USE

OUITCLAIM DEED

WITNESSETH, on June 20, 2018 THE GRANTOR(S),

- Deborah Mickle Mark Mickle, a married couple

for and in consideration of the sum of: One Dollar (\$1.00) and/or other good and valuable consideration to the below Grantee(s) in hand paid by the Grantee(s), the receipt whercof is hereby acknowledged:

- Chad Mickle and Bianka Mickle, a married couple, residing at 340 northeast hillside ter, lee, Madsion County, Florida 32059

Grantor does hereby remise, release, and quit-claim unto the Grantee, the Grantee's heirs and assigns forever, all the rights, title, interest, claim of the Grantor in and to the following described land in the County of Columbia, state of FLORIDA to wit:

821 Sunview stree Fort White, Florida 32038

Legal Description: See attached Schedule A

To have and to hold the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity, and claim whatsoever for the Grantor, either in law or equity, to the only proper use, benefit and behoof of the Grantee forever.

SCHEDULE A LEGAL DESCRIPTION OF REAL PROPERTY

A part of Lot 18 of "South Wind Addition" as per the Plat Thereof Recorded in Plat Book 6, Page 184 of the Public Records of Columbia County, Florida Being More Particularly described Commence at the Sw corner of said Lot as Follows: 18 and run N.24" 19'44'E, 340.74 Feet to the point of Beginning Thence continue

N 24.19'44'E, 44186 Feet to the NW Corner of Said Lot 18, Thence N.89. 12.14. E 210,50 Feet to the NE Corner or Said Lot 18. Thence coopered 512'11.05W, 42913 Feet, Thence S89.12'16W. 310.21 Feet to the Point

Ofbeginning Containing 2.50 Acres, More orless. Together with an easement For ingress and egress as les 30.00 Feet to the right (East) of the following described Line. Beginat the Sw Corner OF said Lot 18 and run N.24. 1944 E 340.74 Feet to the point of Termination of N.24. 1944 E 340.74 Feet to the point of Termination of

Said Easement is to Extend on Contract as needed to Said Line. create the boundaries There OF.

Grantor Signatures:	
DATED: 10018	DATED: 18, 2018
Shoul Neadle	Mark Mille
Deborah Mickle	Mark Mickle
332 northeast hillside ter	332 northeast hillside ter
lee, Florida	lee, Florida
32059	32059
In Witness Whereof,.	101
Carle Ashort	Godan a Shorts
Witness	Witness
. 11	
	. 1
and a landarian la lace	A 8
STATE OF FEBRIDA, COUNTY OF MALES	50N, ss:
N L	
The foregoing instrument was acknowledged bef	fore me this Dorday of
C. C	movia and wark whickle, who are defounded
known to me or who have produced Florida	Divers License as Identification.
	A 01:
	(hold Mest
SEAL	Signature of person taking acknowledgment
JOHNAN A SHEETS NO MARY PUBLIC	1 91
(IN A WEST OF WEST VINGING (Jordan A. Oheets.
.4753 Route 152 Cayalette, WV 25535 My Commission Expires 05/18/2022	Name typed, printed, or stamped
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7-
	Drunch Manager.
	Title or rank
garan and a second a	Serial number (if applicable)
200 C F 1 1 2 C C C C C C C C C C C C C C C C C	

p.4

Hardee Environmental

AGENT AUTHORIZATION

This is to certify that I, Rudy Kimberly Stevens and/or Holly Ervant, dba Happermission to apply for and obtain the necess	rdee Environmental and Permitting, Inc.,
The address, parcel number and/or legal desc	ription of property is
Signature Date	
Signature Date	
IH:1038219	
License #	
No Sworn to and scribed before me this 26 da	of August 2018.
Personally known to me	HOLLY BRYANT
Presented picture ID	Commission # FF 991687 Expires May 11, 2020
Holly Bryant	Bonded Thru Troy Fain Insurance 800-385-7019
Notary Public Signature	SEAL

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	BER_1811-22	_ CONTRACTOR _ Rusty Knowles	PHONE
	THIS FORM MUST	BE SUBMITTED PRIOR TO THE ISSUANCE, OF A F	PERMIT
ecords of the s Ordinance 89-6 exemption, ger	ubcontractors who actually di , a contractor shall require all leral liability insurance and a v	trades doing work at the permitted site. id the trade specific work under the per- subcontractors to provide evidence of valid Certificate of Competency license in	workers' compensation or n Columbia County.
start of that su	bcontractor beginning any w	ork. Violations will result in stop work o	orders ana/or jines.
1503	License #: ES 1200 1176	Phone #:	
MECHANICAL/	Print Name	Signature	100
A/C	License #:	Phone #:	
Qualifier Forr	ns cannot be submitted for (any Specialty License.	
Specialty L		Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			

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.

Revised 10/30/2015

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	MBER 1811-22 CONTRACTOR Trusty Komber PHONE
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
٠,	
records of the Ordinance 89-6 exemption, get Any changes.	country one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 5, a contractor shall require all subcontractors to provide evidence of workers' compensation or neral liability insurance and a valid Certificate of Competency license in Columbia County. The permitted contractor is responsible for the corrected form being submitted to this office prior to the abcontractor beginning any work. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name Signature
	License #: Phone #:
	Qualifier Form Attached
MECHANICAL/	Print Name RONALD Edward Bonds Signature R Edward Bonds; 5R
A/C B	License #: CAC / 8/7658 Phone #: 850 769 1453
1660	Qualifier Form Attached

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015

Roundman's Pump Repair & Well Drilling 14381 48th Street Live Oak, FL 32060

Phone # 386-362-7365 Fax # 386-362-4680

Email: roundmanspump@windstream.net

Name / Address

Bianca Mickle
340 NE HIllside Terr.
Lee, FL 32059

Well Letter

Date 7/10/2018

Description

Location: 821 Sunview St Ft. White, FL

4 Inch well drilled up to 100 Ft

- (1) 81Gallon Diaphragm Tank
- (1) 1HP Submersible Pump
- 1 1/4" Galvanized Drop Pipe

Jennifer Williams Roundman's Pump Repair and Well Drilling 386-362-7365



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO . DATE PAID :	18-1899
FEE PAID: RECEIPT # :	3/14-5/

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Chad Mickle
AGENT: JEFF Hardee TELEPHONE: 352-949-0593
AGENT: JEHT HOUNDE TELEPHONE: 352-949-0593 VAILING ADDRESS: 6450 NW 724 Lune, Chiefland, PC 3260260
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 Partof LOT: 18 BLOCK: SUBDIVISION: Subh wind oddition PLATTED:
PROPERTY ID #: 33-58-16-08751-308 ZONING: I/M OR EQUIVALENT: [Y /N]
ROPERTY SIZE: 7.5 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD
TS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] DISTANCE TO SEWER: FT PROPERTY ADDRESS: 823 SWILL ST FT WN-TCFL 37038
IRECTIONS TO PROPERTY: Jake S main Blud South, The on
5w Surview St
UILDING INFORMATION [] COMMERCIAL
nit Type of No. of Building Commercial/Institutional System Design Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 Mobile Home 4 1543
2
3
4
] Floor/Equipment Drains [] Other (Specify)
DATE: 11-7-18

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

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 8-8899

1'=6	PART II - SITEPLAN
N	461.86
	Shall vallar tookers in the state of the sta
Notes:	Durity of 775 310.21 Conflet
Site Plan submitted by Plan Approved 1/	Not Approved Date 11-14-16 Ind Env Health Mile County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT