



Columbia County, FL. Building & Zoning

RV - Recreational Vehicle Permit #000039604

Issued April 15, 2020



OWNER: CRAFT MICHAEL A & AUTUMN

PHONE: 386-288-1444

ADDRESS: 5944 SE COUNTY ROAD 252 LAKE CITY, FL 32025

PARCEL: 30-4S-18-10513-006

ZONING: AGRICULTURE - 3 A-3

FLOOD ZONE: X

Coords: 30.11,-82.55

SUBDIVISION: HIGH FALLS UNR

LOT: BLK: PHASE: UNIT: ACRES: 10.02

CONTRACTOR

NAME: CRAFT MICHAEL A & AUTUMN

BUSINESS:

ADDRESS:

5944 SE COUNTY ROAD
252 LAKE CITY, FL 32025

PHONE: 386-288-1444

LICENSE: -

PROJECT DETAILS

RESIDENTIAL OR COMMERCIAL?:

Residential

THIS IS A SERVICE FOR :

6 Month RV

STUP #::

2004-20

SEPTIC #:

20-0245

SETBACKS FRONT:

30

SETBACK SIDE 1:

25

SETBACK SIDE 2:

25

SETBACKS REAR:

25

STIPULATIONS:

RV ON THE PROPERTY 6 MONTHS THEN MUST BE REMOVED

ELECTRICAL CODE EDITION:

2014 National Electrical Code

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. The issuance of this permit does not waive compliance by permittee with deed restrictions.

Notice: all other applicable state or federal permits shall be obtained before commencement of this permitted development.

"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 receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous inspection.



39604

Columbia County Gateway to Florida

FOR PLANNING USE ONLY

Application # STUP 2004-20
Application Fee 300.00 Fee waived
Receipt No. N/A
Filing Date 4-14-20
Completeness Date 4-15-20

Special Temporary Use Permit Application

A. PROJECT INFORMATION

1. Project Name: Michael Craft
2. Address of Subject Property: 5944 SE CR 252
3. Parcel ID Number(s): 10513-006
4. Future Land Use Map Designation: Ag
5. Zoning Designation: A-3
6. Acreage: 10.2
7. Existing Use of Property: Living, mobile home
8. Proposed Use of Property: residential
9. Proposed Temporary Use Requested: EV - 6 month

B. APPLICANT INFORMATION

1. Applicant Status ☒ Owner (title holder) ☐ Agent
2. Name of Applicant(s): Michael Craft Title: _____
Company name (if applicable): _____
Mailing Address: 2384 SW Bascom Norris Dr.
City: Lake City State: FL Zip: 32025
Telephone: (888) 288-1444 Fax: () Email: Michael.Craft166@gmail.com

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.

3. If the applicant is agent for the property owner*.

Property Owner Name (title holder): _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Telephone: () Fax: () Email: _____

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.

***Must provide an executed Property Owner Affidavit Form authorizing the agent to act on behalf of the property owner.**

C. ADDITIONAL INFORMATION

1. Is there any additional contract for the sale of, or options to purchase, the subject property?
If yes, list the names of all parties involved: none
If yes, is the contract/option contingent or absolute: ☐ Contingent ☐ Absolute
2. Has a previous application been made on all or part of the subject property:
Future Land Use Map Amendment: ☐ Yes _____ ☐ No _____
Future Land Use Map Amendment Application No. CPA _____
Site Specific Amendment to the Official Zoning Atlas (Rezoning): ☐ Yes _____ ☐ No _____
Site Specific Amendment to the Official Zoning Atlas (Rezoning) Application No. Z _____
Variance: ☐ Yes _____ ☐ No _____
Variance Application No. V _____
Special Exception: ☐ Yes _____ ☐ No _____
Special Exception Application No. SE _____

D. ATTACHMENT/SUBMITTAL REQUIREMENTS

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.

6. In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;
- c. Site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building;
- d. Responsibility for non ad-valorem assessments;
- e. Inspection with right of entry onto the property by the County to verify compliance with this section. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section and;
- f. Shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- g. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- h. Requirements upon expiration of permit. Unless extended as herein provided, once a permit expires the mobile home shall be removed from the property within six (6) months of the date of expiration.

The property owner may apply for one or more extensions for up to two (2) years by submitting a new application, appropriate fees and family relationship residence affidavit agreement to be approved by the Land Development Regulations administrator.

Previously approved temporary use permits would be eligible for extensions as amended in this section.

8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
9. In any zoning district: A temporary business, as defined within these Land Development Regulations. At least sixty (60) days prior to the commencement date of the temporary permit, the applicant shall submit an application to the County, which shall include the following information:
 - a. The name and permanent address or headquarters of the person applying for the permit;
 - b. If the applicant is not an individual, the names and addresses of the business;
 - c. The names and addresses of the person or persons which will be in direct charge of conducting the temporary business;
 - d. The dates and time within which the temporary business will be operated;
 - e. The legal description and street address where the temporary business will be located;
 - f. The name of the owner or owners of the property upon which the temporary business will be located;
 - g. A written agreement containing the permission from the owner of the property for its use for a temporary business must be attached to and made a part of the application for the permit;

- h. A site plan showing display areas, plans for access and egress of vehicular traffic, any moveable interim structures, tents, sign and banner location and legal description of the property must accompany the application for the temporary use permit; and
- i. A public liability insurance policy, written by a company authorized to do business in the State of Florida, insuring the applicant for the temporary permit against any and all claims and demands made by persons for injuries or damages received by reason of or arising out of operating the temporary business. The insurance policy shall provide for coverage of not less than one million dollars (\$1,000,000.00) for damages incurred or claims by more than one person for bodily injury and not less than two million dollars (\$2,000,000.00) for damages incurred or claims by more than one person for bodily injury and fifty thousand dollars (\$50,000.00) for damages to property for one person and one hundred thousand dollars (\$100,000.00) for damages to property claimed by more than one person. The original or duplicate of such policy, fully executed by the insurer, shall be attached to the application for the temporary permit, together with adequate evidence that the premiums have been paid.

The sales permitted for a temporary business, as defined with these land development regulations, including, but not limited to, promotional sales such as characterized by the so-called "sidewalk "sale", "vehicle sale", or "tent sale", shall not exceed three (3) consecutive calendar days.

There must be located upon the site upon which the temporary business shall be conducted public toilet facilities which comply with the State of Florida code, potable drinking water for the public, approved containers for disposing of waste and garbage and adequate light to illuminate the site at night time to avoid theft and vandalism.

If the application is for the sale of automobiles or vehicles, the applicant shall provide with the application a copy of a valid Florida Department of Motor Vehicle Dealers license and Department of Motor Vehicle permit to conduct an "offsite" sale. If any new vehicles are to be displayed on the site, a copy of the factory authorization to do so will be required to be filed with the application.

No activities, such as rides, entertainment, food, or beverage services shall be permitted on the site in conjunction with the operation of the temporary business.

Not more than one (1) sign shall be located within or upon the property for which the temporary permits is issued, and shall not exceed sixteen (16) square feet in surface area. No additional signs, flags, banners, balloons or other forms of visual advertising shall be permitted. The official name of the applicant and its permanent location and street address, together with its permanent telephone number, must be

posted on the site of the property for which the temporary permit is issued and shall be clearly visible to the public.

Any applicant granted a temporary permit under these provisions shall also comply with and abide by all other applicable federal, State of Florida, and County laws, rules and regulations.

Only one (1) tent, not to exceed three hundred fifty (350) square feet in size shall be permitted to be placed on the site of the temporary business and such tent, if any, shall be properly and adequately anchored and secured to the ground or to the floor of the tent.

No person or entity shall be issued more than one (1) temporary permit during each calendar year.

The temporary permit requested by an applicant shall be issued or denied within sixty (60) days following the date of the application therefore is filed with the Land Development Regulation Administrator.

10. In agriculture and environmentally sensitive area districts: a single recreational vehicle as described on permit for living, sleeping, or housekeeping purposes for one-hundred eighty (180) consecutive days from date that permit is issued, subject to the following conditions:

- a. Demonstrate a permanent residence in another location.
- b. Meet setback requirements.
- c. Shall be hooked up to or have access to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- d. Upon expiration of the permit the recreational vehicle shall not remain on property parked or stored and shall be removed from the property for 180 consecutive days.
- e. Temporary RV permits are renewable only after one (1) year from issuance date of any prior temporary permit.

Temporary RV permits existing at the effective date of this amendment may be renewed for one (1) additional temporary permit in compliance with the land development regulations, as amended. Recreational vehicles as permitted in this section are not to include RV parks.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

Additional Requirements for a complete application:

1. Legal Description with Tax Parcel Number.
2. Proof of Ownership (i.e. deed).
3. Agent Authorization Form (signed and notarized).
4. Proof of Payment of Taxes (can be obtained online via the Columbia County Tax Collector's Office).
5. Fee. The application fee for a Special Temporary Use Permit Application is based upon the Temporary Use requested. No application shall be accepted or processed until the required application fee has been paid.
 - a. For Items (1) through (6) above, the application fee is \$100.00
 - b. For Item (7) above, the application fee is \$450.00 or \$200.00 for a two year renewal
 - c. For Item (8) above, the application fee is \$250.00
 - d. For Item (9) above, the application fee is \$500.00 for temporary sales of motor vehicles or \$250.00 for non-seasonal good or general merchandise
 - e. For Item(10) above, the application fee is \$200

For submittal requirements, please see the Columbia County Building and Zoning Development Application Submittal Guidelines.

I hereby certify that all of the above statements and statements contained in any documents or plans submitted herewith are true and accurate to the best of my knowledge and belief.

Michael Craft

Applicant/Agent Name (Type or Print)

Michael Craft

Applicant/Agent Signature

4/9/2020

Date

Columbia County Property Appraiser

Jeff Hampton

2020 Working Values

updated: 3/9/2020

Parcel: << **30-4S-18-10513-006** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

Owner	CRAFT MICHAEL A & AUTUMN ARMIJO (JTWRS) 5944 SE CR 252 LAKE CITY, FL 32025		
Site	5944 COUNTY ROAD 252 , LAKE CITY		
Description*	COMM SE COR OF SW1/4, RUN N 33 DEG W 1076.39 FT FOR POB, CONT N 33 DEG W 336.40 FT, N 52 DEG E 1224.86 FT TO W R/W CR-252, S 43 DEG E ALONG R/W 361.82 FT, S 53 DEG W 1286.17 FT TO POB. ORB 930-087, WD 1064-2449, WD 1068-1780, CT 1160-901, SWD 1190-1638, (DC ...more>>>		
Area	10.02 AC	S/T/R	30-4S-18E
Use Code**	MOBILE HOM (000200)	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

2019 Certified Values		2020 Working Values	
Mkt Land (2)	\$30,073	Mkt Land (2)	\$30,073
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$54,806	Building (1)	\$59,445
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$84,879	Just	\$89,518
Class	\$0	Class	\$0
Appraised	\$84,879	Appraised	\$89,518
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$84,879	Assessed	\$89,518
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$83,998 city:\$83,998 other:\$83,998 school:\$84,879	Total Taxable	county:\$89,518 city:\$89,518 other:\$89,518 school:\$89,518



▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
8/5/2016	\$55,000	1320/1475	WD	I	U	30
4/29/2016	\$42,500	1316/1992	WD	I	U	12
3/16/2016	\$100	1312/0585	CT	I	U	18
6/20/2011	\$100	1216/1749	PR	I	U	19
1/21/2010	\$11,514	1190/1638	WD	V	U	12
10/1/2008	\$100	1160/0901	CT	V	U	01
12/15/2005	\$95,000	1068/1780	WD	V	Q	
7/18/2003	\$8,800	1064/2449	WD	V	U	06
6/27/2001	\$28,000	930/0087	WD	V	Q	

Department of Health- Office of Vital Statistics

**STATE OF FLORIDA
MARRIAGE RECORD**

TYPE IN UPPER CASE

USE BLACK INK

This license not valid unless seal of Clerk,
Circuit or County court appears thereon.

(STATE FILE NUMBER)

122017XX000190MLAXMX

(APPLICATION NUMBER)

Inst: 201712009531 Date: 05/22/2017 Time: 11:41AM
Page 1 of 1 B: 1337 P: 868, P.DeWitt Cason, Clerk of Court
Columbia, County, By: RS
Deputy Clerk

APPLICATION TO MARRY

1a. NAME OF SPOUSE (First, Middle, Last) MICHAEL ALAN CRAFT		1b. MAIDEN SURNAME (if applicable)	2. DATE OF BIRTH (Month, Day, Year)
3a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE CITY		3b. COUNTY Columbia	3c. STATE Florida
4. BIRTHPLACE (State or Foreign Country) Florida			
5a. NAME OF SPOUSE (First, Middle, Last) AUTUMN MCKENZI ARMIJO		5b. MAIDEN SURNAME (if applicable) ARMJO	6. DATE OF BIRTH (Month, Day, Year)
7a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE CITY		7b. COUNTY Columbia	7c. STATE Florida
8. BIRTHPLACE (State or Foreign Country) Florida			

WE THE APPLICANTS NAMED IN THIS CERTIFICATE EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF SPOUSE (Sign full name using black ink)

10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)

05/01/2017

11. TITLE OF OFFICIAL

Deputy Clerk Lori B Koon

12. SIGNATURE OF OFFICIAL (Use black ink)

Lori B Koon DC

13. SIGNATURE OF SPOUSE (Sign full name using black ink)

14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)

05/01/2017

15. TITLE OF OFFICIAL

Deputy Clerk Lori B Koon

16. SIGNATURE OF OFFICIAL (Use black ink)

Lori B Koon DC

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE

Columbia

18. DATE LICENSE ISSUED

05/01/2017

19a. DATE LICENSE EFFECTIVE

05/04/2017

19b. EXPIRATION DATE

06/30/2017

20a. SIGNATURE OF COURT CLERK OR JUDGE

P. DeWitt Cason

20b. TITLE

Clerk of the Circuit Court

20c. BY D.C.

Lori B Koon

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year)

May 6, 2017

22. CITY, TOWN, OR LOCATION OF MARRIAGE

LAKE CITY, FLORIDA

23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)

P. Steven Futch N.P.

23b. ADDRESS (Of person performing ceremony)

403 S. Dunn St, STARK, FL 32091

23c. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp)



24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)

25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)

SEAL

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

SPOUSE	28. SOCIAL SECURITY NUMBER	29. RACE	28. WERE YOU EVER PREVIOUSLY MARRIED?	IF ANSWER IS YES TO ITEM 28, THEN COMPLETE ITEMS 29a, 29b, and 29c		
		White	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	29a. NO. OF THIS MARRIAGE	29b. LAST MARRIAGE ENDED BY DEATH, DIVORCE OR ANNULMENT	29c. DATE LAST MARRIAGE ENDED (Mo, Day, Year)
SPOUSE	30. SOCIAL SECURITY NUMBER	31. RACE	32. WERE YOU EVER PREVIOUSLY MARRIED?	IF ANSWER IS YES TO ITEM 32, THEN COMPLETE ITEMS 33a, 33b, and 33c		
		White	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	33a. NO. OF THIS MARRIAGE	33b. LAST MARRIAGE ENDED BY DEATH, DIVORCE OR ANNULMENT	33c. DATE LAST MARRIAGE ENDED (Mo, Day, Year)

Columbia County Tax Collector

generated on 4/14/2020 11:34:21 AM EDT

Last Update: 4/14/2020 11:32:50 AM EDT

[Register for eBill](#)

Ad Valorem Taxes and Non-Ad Valorem Assessments

The information contained herein does not constitute a title search and should not be relied on as such

Account Number R10513-006	Tax Type REAL ESTATE	Tax Year 2019
Mailing Address CRAFT MICHAEL A & AUTUMN ARMIJO (JTWRS) 5944 SE CR 252 LAKE CITY FL 32025		
Property Address 5944 COUNTY ROAD 252 SE LAKE CITY GEO Number 304S18-10513-006		
Exempt Amount See Below	Taxable Value See Below	
Exemption Detail NO EXEMPTIONS	Millage Code 003	Escrow Code 651
Legal Description (click for full description) 30-4S-18 0200/020010.02 Acres COMM SE COR OF SW1/4, RUN N 33 DEG W 1076.39 FT FOR POB, CONT N 33 DEG W 336.40 FT, N 52 DEG E 1224.86 FT TO W R/W CR-252, S 43 DEG E ALONG R/W 361.82 FT, S 53 DEG W 1286.17 FT TO POB. ORB 930-087, WD 1064-2449, WD 1068-1780, CT 1160-901, See Tax Roll For Extra Legal		
Ad Valorem Taxes		
Taxing Authority	Rate	Assessed Exemption Value Amount
BOARD OF COUNTY COMMISSIONERS	8.0150	83,998 0
COLUMBIA COUNTY SCHOOL BOARD		
DISCRETIONARY	0.7480	84,879 0
LOCAL	3.9880	84,879 0
CAPITAL OUTLAY	1.5000	84,879 0
SUWANNEE RIVER WATER MGT DIST	0.3840	83,998 0
LAKE SHORE HOSPITAL AUTHORITY	0.9620	83,998 0
Total Millage	15.5970	Total Taxes
		\$1,315.62
Non-Ad Valorem Assessments		
Code	Levying Authority	Amount
FFIR	FIRE ASSESSMENTS	\$280.76
GGAR	SOLID WASTE - ANNUAL	\$189.66
Total Assessments		\$470.42
Taxes & Assessments		\$1,786.04
If Paid By	Amount Due	
	\$0.00	

Date Paid	Transaction	Receipt	Item	Amount Paid
11/10/2019	PAYMENT	9971561.0001	2019	\$1,714.60

Prior Years Payment History

Prior Year Taxes Due
NO DELINQUENT TAXES

CAMPUS USA CREDIT UNION
PO BOX 147029
GAINESVILLE FL 32614-7029

RETURN SERVICE REQUESTED

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE
PAID
Mail Services, Inc.

FIRST CLASS MAIL

MICHAEL ALAN CRAFT
2384 SW BASCOM NORRIS DR
LAKE CITY FL 32025-4907

214495
MSP





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

20-024
PERMIT NO. 20-024
DATE PAID: 3-25-20
FEE PAID: 60.00
RECEIPT #: AP 1475673
1475673

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Michael Craft

AGENT: _____

TELEPHONE: 386-288-1444MAILING ADDRESS: 2384 SW Bascom Norris Dr. Lake City, FL 32025

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 30-40-18-10513-006 ZONING: AG I/M OR EQUIVALENT: [Y / N]PROPERTY SIZE: 10.2 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 5944 SE CR 252

DIRECTIONS TO PROPERTY: _____

BUILDING INFORMATION

[X] 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>PV</u>	<u>1</u>	<u>210</u>	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Michael CraftDATE: 3/24/2020

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

Permit Application Number 20-0245

Page 2 of 4

A FDID <u>29091</u> ★ State <u>FL</u> ★ Incident Date <u>12</u> <u>19</u> <u>2019</u> ★ Station <u>048</u> Incident Number <u>0004200</u> ★ Exposure <u>000</u> ★		<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity NFIRS-1 Basic	
B Location Type ★ <input type="checkbox"/> Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B. "Alternative Location Specification" Use only for wildland fires.			
<input checked="" type="checkbox"/> Street address <input type="checkbox"/> Intersection <u>5944</u> <u>SE</u> <u>COUNTY ROAD 252</u> <input type="checkbox"/> In front of Number/Milepost Prefix Street or Highway <input type="checkbox"/> Rear of <u>LAKE CITY</u> <u>FL</u> <u>32025</u> <input type="checkbox"/> Adjacent to Apt./Suite/Room City State ZIP Code <input type="checkbox"/> Directions <input type="checkbox"/> U.S. National Grid <small>Cross Street, Directions or National Grid, as applicable</small>			
C Incident Type ★ <u>111</u> <u>Building fire</u> <small>Incident Type</small>		E1 Dates and Times Midnight is 0000 Check boxes if dates are the same as Alarm Date. Alarm <u>12</u> <u>19</u> <u>2019</u> <u>1914</u> ARRIVAL required, unless canceled or did not arrive <input checked="" type="checkbox"/> Arrival <u>1928</u> CONTROLLED optional, except for wildland fires <input type="checkbox"/> Controlled LAST UNIT CLEARED, required except for wildland fires <input checked="" type="checkbox"/> Last Unit Cleared <u>2126</u>	
D Aid Given or Received ★ <input checked="" type="checkbox"/> None 1 <input type="checkbox"/> Mutual aid received 2 <input type="checkbox"/> Auto. aid received 3 <input type="checkbox"/> Mutual aid given 4 <input type="checkbox"/> Auto. aid given 5 <input type="checkbox"/> Other aid given Their FDID _____ Their State _____ Their Incident Number _____		E2 Shifts and Alarms Local Option <input type="checkbox"/> Shift or Platoon <u>1</u> <u>D48</u> Alarms District E3 Special Studies Local Option Special Study ID# _____ Special Study Value _____	
F Actions Taken ★ <u>11</u> <u>Extinguishment by fire service personnel</u> <small>Primary Action Taken (1)</small> <u>12</u> <u>Salvage & overhaul</u> <small>Additional Action Taken (2)</small> <small>Additional Action Taken (3)</small>		G1 Resources ★ <input checked="" type="checkbox"/> Check this box and skip this block if an Apparatus or Personnel Module is used. Apparatus _____ Personnel _____ Suppression _____ EMS _____ Other _____ <input type="checkbox"/> Check box if resource counts include aid received resources	
G2 Estimated Dollar Losses and Values LOSSES: Required for all fires if known. Optional for non-fires. None Property \$ <u>000</u> <u>060</u> <u>000</u> <input type="checkbox"/> Contents \$ <u>000</u> <u>001</u> <u>500</u> <input type="checkbox"/> PRE-INCIDENT VALUE: Optional Property \$ _____ <input type="checkbox"/> Contents \$ _____ <input type="checkbox"/>			
Completed Modules <input checked="" type="checkbox"/> Fire-2 <input checked="" type="checkbox"/> Structure Fire-3 <input type="checkbox"/> Civilian Fire Cas.-4 <input type="checkbox"/> Fire Service Cas.-5 <input type="checkbox"/> EMS-6 <input type="checkbox"/> HazMat-7 <input type="checkbox"/> Wildland Fire-8 <input checked="" type="checkbox"/> Apparatus-9 <input checked="" type="checkbox"/> Personnel-10 <input type="checkbox"/> Arson-11		H1 Casualties ★ <input checked="" type="checkbox"/> None Deaths Injuries Fire Service _____ Civilian _____ H2 Detector <small>Required for confined fires.</small> 1 <input type="checkbox"/> Detector alerted occupants 2 <input type="checkbox"/> Detector did not alert them U <input type="checkbox"/> Unknown	
H3 Hazardous Materials Release <input type="checkbox"/> None 1 <input type="checkbox"/> Natural gas: slow leak, no evacuation or HazMat actions 2 <input type="checkbox"/> Propane gas: <21-lb tank (as in home BBQ grill) 3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container 4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage 5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable storage 6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only 7 <input type="checkbox"/> Motor oil: from engine or portable container 8 <input type="checkbox"/> Paint: from paint cans totaling <55 gallons 0 <input type="checkbox"/> Other: special HazMat actions required or spill > 55 gal <small>(Please complete the HazMat form.)</small>		Mixed Use Property <input type="checkbox"/> Not mixed 10 <input type="checkbox"/> Assembly use 20 <input type="checkbox"/> Education use 33 <input type="checkbox"/> Medical use 40 <input type="checkbox"/> Residential use 51 <input type="checkbox"/> Row of stores 53 <input type="checkbox"/> Enclosed mall 58 <input type="checkbox"/> Business & residential 59 <input type="checkbox"/> Office use 60 <input type="checkbox"/> Industrial use 63 <input type="checkbox"/> Military use 65 <input type="checkbox"/> Farm use 00 <input type="checkbox"/> Other mixed use	
J Property Use ★ <input type="checkbox"/> None Structures 131 <input type="checkbox"/> Church, place of worship 161 <input type="checkbox"/> Restaurant or cafeteria 162 <input type="checkbox"/> Bar/Tavern or nightclub 213 <input type="checkbox"/> Elementary school, kindergarten 215 <input type="checkbox"/> High school, junior high 241 <input type="checkbox"/> College, adult education 311 <input type="checkbox"/> Nursing home 331 <input type="checkbox"/> Hospital Outside 124 <input type="checkbox"/> Playground or park 655 <input type="checkbox"/> Crops or orchard 669 <input type="checkbox"/> Forest (timberland) 807 <input type="checkbox"/> Outdoor storage area 919 <input type="checkbox"/> Dump or sanitary landfill 931 <input type="checkbox"/> Open land or field 341 <input type="checkbox"/> Clinic, clinic-type infirmary 342 <input type="checkbox"/> Doctor/Dentist office 361 <input type="checkbox"/> Prison or jail, not juvenile 419 <input checked="" type="checkbox"/> 1- or 2-family dwelling 429 <input type="checkbox"/> Multifamily dwelling 439 <input type="checkbox"/> Rooming/Boarding house 449 <input type="checkbox"/> Commercial hotel or motel 459 <input type="checkbox"/> Residential, board and care 464 <input type="checkbox"/> Dormitory/Barracks 519 <input type="checkbox"/> Food and beverage sales 539 <input type="checkbox"/> Household goods, sales, repairs 571 <input type="checkbox"/> Gas or service station 579 <input type="checkbox"/> Motor vehicle/boat sales/repairs 599 <input type="checkbox"/> Business office 615 <input type="checkbox"/> Electric-generating plant 629 <input type="checkbox"/> Laboratory/Science laboratory 700 <input type="checkbox"/> Manufacturing plant 819 <input type="checkbox"/> Livestock/Poultry storage (barn) 882 <input type="checkbox"/> Non-residential parking garage 891 <input type="checkbox"/> Warehouse 936 <input type="checkbox"/> Vacant lot 938 <input type="checkbox"/> Graded/Cared for plot of land 946 <input type="checkbox"/> Lake, river, stream 951 <input type="checkbox"/> Railroad right-of-way 960 <input type="checkbox"/> Other street 961 <input type="checkbox"/> Highway/Divided highway 962 <input type="checkbox"/> Residential street/driveway 981 <input type="checkbox"/> Construction site 984 <input type="checkbox"/> Industrial plant yard Look up and enter a Property Use code and description only if you have NO 1 checked a Property Use box.			