DATE 01/21/2011 Columbia County This Permit Must Be Prominently Pos	
APPLICANT MONA BECKHAM	PHONE 386.623.6948
ADDRESS 269 SW PARKER LN	LAKE CITY FL 32024
OWNER VISHAM PERSAD	PHONE 954.214.3535
ADDRESS 301 SW BRADENTON WAY	LAKE CITY FL 32024
CONTRACTOR MONA BECKHAM	PHONE 386.623.6948
LOCATION OF PROPERTY 47-S TO 27,TL TO TIMUQU.	A,TL TO BEAR,TR TO BRADENTON,TL
1/2 MILE DOWN ON R.	
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 12-7S-16-04184-133 SUBDIVI	SION TIMUQUA
LOT 3 BLOCK C PHASE UNIT	TOTAL ACRES 5.01
IH1031914	Mong & Beckham
Culvert Permit No. Culvert Waiver Contractor's License	
EXISTING 11-0003-N BLK	<u>HD N</u>
Driveway Connection Septic Tank Number LU & 2	Coning checked by Approved for Issuance New Resident
COMMENTS: 1 FOOT ABOVE ROAD.	
	Check # or Cash 1230
FOR BUILDING & ZO	NING DEPARTMENT ONLY (footer/Slab)
Temporary Power Foundation	Monolithic
date/app. by	date/app. by date/app. by
Under slab rough-in plumbing Sla	ab Sheathing/Nailing
date/app. by	date/app. by date/app. by
Framing Insulation	date/app. by
	Electrical rough-in
Rough-in plumbing above slab and below wood floor	date/app. by date/app. by
Heat & Air Duct Peri. beam (I	date upp. 0)
date/app. by	date/app. by date/app. by
Permanent power C.O. Final	date/app. by date/app. by
Pump pole Utility Pole M/H	tie downs, blocking, electricity and plumbing
Reconnection RV	date/app. by  Re-roof
date/app. by	date/app. by date/app. by
BUILDING PERMIT FEE \$ 0.00 CERTIFICATION	date/app. by
CERTIFICATION	
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 5	FEE \$ SURCHARGE FEE \$
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 5	FEE \$ SURCHARGE FEE \$
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 5	1 FEE \$ 0.00       SURCHARGE FEE \$ 0.00         0.00       FIRE FEE \$ 57.78       WASTE FEE \$ 150.75

"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.

#### PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

, ,		214 01	old do
	sed 1-10-08) Zonin Date Received/3	g Official By	Building Official ## 1-5-11 Permit # 19135
			Land Use Plan Map Category A-3
Comments			
FEMA Map#A Eleva	ationNA Finish	ed Floor / world R	iverIn Floodway
			L.
Recorded Deed or Affidavit	from land owner 🖭 🛴	etter of Auth. from in	staller   State Road Access
□ Parent Parcel #	(	STUP-MH	F W Comp. letter
IMPACT FEES: EMS	Fire	Corr	Road/Code Fee. MN
School	= TOTAL	Sopul	- VEC FICULION SHEET IS
		1	WI (RUMBING) LOT3
Property ID # 12 - 75	16-04184-13351	ubdivision	Tinuqua Sp
	Used Mobile	Home	MH Size /x/oc/Year 84
Mona / Stacy B	ectham	Phone #	(023-61948 (110NA)
<ul> <li>Address 269 54</li> </ul>	I Par Kw Loy	Latre City,	F1. 7202 Y
<ul> <li>Name of Property Owner</li> </ul>	Vishan Pe.	rsad Pr	A
• 911 Address_ 301	SN BRADENTON	Way, St. W	MEE 7 32038
<ul> <li>Circle the correct power of</li> </ul>	company - <u>FL</u>	Power & Light	- Clay Electric
(Circ	cle One) - Suwanı	nee Valley Electric	- Progress Energy
93 (\$€000-0150)	, /	2 ,	
<ul> <li>Name of Owner of Mobile</li> </ul>	Home /Isham	fersace	Phone # 954-214-355
Address 0/5 S	w and s	1 Hollow	lake FY 53009
Relationship to Property	Owner	Thospania Hollow	
<ul> <li>Current Number of Dwelli</li> </ul>		6	
Lot Size		Total Acreage	5.01
Do you : Have <u>Existing Dr</u> (Currently using	or <u>Private Drive</u> of (Blue Road Sign)	or need Culvert Pe (Putting in a Cu	rmit or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
<ul> <li>Is this Mobile Home Repla</li> </ul>	acing an Existing Mot	oile Home <u>No</u>	
<ul> <li>Driving Directions to the I</li> </ul>	Property 47	South to	9 27 (Th) 70
Timagne TX	to Rece	~ (TA)	to Bradenton
way to	/2 ·· w	cy on	R.H.
Name of Lineared Design	Installer Mona	Backham	Bhoma # 1/023-100 UR
Name of Licensed Dealer/	0 1	XNI GO	Phone # (023-10998)
Installers Address	03/9/11	Installation	Decal # 4368
المام الله	263 (1)		se to Stavey 1-11-11
¥ 53	1230	-1	ones and

# PERMIT NUMBER

## Electrical

Installer Name
Date Tested

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.

		100		Cuidi.
NIA	Keg NA	No kirting. Yes outside of skirting. ntervals. Yes	to be installed. Yes ent installed outside of s downflow vent installed outside of s downflow red at 4 foot ines supported at 4 foot in all crossovers protected.	Skirting Dryer v Range Drain li Electric
		Miscellaneous		
Pg. es water. Yes	es F fications. Yes ision of rain wa	and/or taped. Your taped of Your taped of Your taped on the Indian introduced to the Indian introduced on the Indian interest on the Indian inte	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.	The bot Siding of Fireplan
		Weatherproofing		
<b>es</b>	stalled: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Installed: Between Floors Between Walls Bottom of ridgel		Type gasket Pg.
	\ \	Installer's initials		
new and used riage walls are erstand a strip	ement of all r buckled marr talled. I und	asket is a requin ld, meldew and l gasket being ins	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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.	l unders homes a result of tape
	Irement)	Gasket (weatherproofing requirement)	Gasket	1
ed metal strip ed with galv. terline.	de, gaivanize f and fastene is of the cent	a min. 30 gauge, 8"-wide, galvanized metal strip yer the peak of the roof and fastened with galv. on center on both sides of the centerline.	For used homes a min. 30 gauge, 8"-wide, galvanized metal stri will be centered over the peak of the roof and fastened with galv roofing pails at 2" on center on both sides of the centerline.	
ğ	Spacing	Length:	1	Root:
ğ	Spacing	Length:	Type Fastener:	Walls:
<u>ਰ</u>	Spacing	Length:	Type Fastener:	Floor:
	inits	Fastening multi wide units	Faste	
Other		Swale Pad	Debris and organic material removed Water drainage: Natural Swa	Debris a Water d
		\		
		Site Preparation		

Installer verifies all information given with this permit worksheet is accurate and true based on the

Date 1-5-20/

Installer Signature



#### STATE OF FLORIDA DEPARTMENT OF HEALTH

#### APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

represents 5 feet and 1 inch = 50 feet.	
HADE GROWN 210°	
35' E	2101
Bradenton Way	
	HAPTO'S BROWN ZIO 1  STORY WENT OF THE STORY WEN

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

	Charles College		
Dac	30	10	.10:04a
		10	10.044

Total HVAC

9544559057

p.1

#### SUBCONTRACTOR VERIFICATION FORM

	DOLAT	111 2- 25
APPLICATION NUM	MDEN	10NA BECKNAM PHONE 205, 381, 25/c
	THIS FORM MUST BE SUBMITTED PRIOR TO	
records of the	unty one permit will cover all trades doing work at subcontractors who actually did the trade specific v i, a contractor shall require all subcontractors to pr neral liability insurance and a valid Certificate of Co	work under the permit. Per Florida Statute 440 and ovide evidence of workers' compensation or
Any changes, t	he permitted contractor is responsible for the corr	rected form being submitted to this office prior to the
start of that su	bcontractor beginning any work. Violations will re	esult in stop work orders and/or fines.
ELECTRICAL	Print Name VISHAM PERSON	Signature Walm WW
	License #: Home owner	Phone #: 954-314-3535
MECHANICAL//	Print Name VISHAM PERIDO	Signature WMWW WWW
A/C	License #: Home CWNER	Phone #: 954-214-3535
PLUMBING/	Print Name Mona G. Beckham	<b>—</b>
GAS	License #: IH 103 1914	Phone #: 623 - 6948
ROOFING	Print Name	Signature
,,	License #:	Phone #:
SHEET METAL	Print Name	Signature
SHEET WEINE	ticense #:	Phone #:
FIRE SYSTEM/	Print Name	Signature
SPRINKLER	License#:	Phone #:
SOLAR	Print Name	Signature
	License #:	Phone #:
Specialty Li	cense License Number Sub-Contractors I	Printed Name Sub-Contractors Signature
MASON		2
CONCRETE FIN	IISHER	/
FRAMING		
INSULATION		
STUCCO		
DRYWALL		
PLASTER		
CABINET INST	ALLER	
PAINTING		
ACOUSTICAL C	EILING	
GLASS		
CERAMIC TILE		
FLOOR COVER		
ALUM/VINYL S	IDING	
GARAGE DOO	R	
METAL BLDG	RECTOR	
E S 440 103 F	wilding nermits: identification of minimum premi	um policyEvery employer shall, as a condition to

440.103 Building permits; identification of minimum premium policy. 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. Contractor Forms: Subcontractor form: 6/09 Inst. Number: 200912000098 Book: 1164 Page: 2527 Date: 1/6/2009 Time: 11:46:00 AM Page 1 of 2

Prepared by and return to: Judi M. Lowrey Employee Haile Title Company, LLC 219 SE Baya Dr. Lake City, FL 32025 386-754-6600 File Number: LC08-078

Inst 200912000098 Date 1/6/2009 Time 11:46 AM Doc Stamp-Deed: 385 00 \_\_\_\_\_\_DC,P DeWitt Cason Columbia County Page 1 of 2 B 1164 P 2527

[Space Above This Line For Recording Data]

#### **Warranty Deed**

This Warranty Deed made this 29th day of December, 2008 between Richard H. Morris and Linda Morris, f/k/a Linda Steussing, husband and wife whose post office address is 3907 11th Street, Sebastian, FL 32976, grantor, and Visham Persad and Parbatee Persad, husband and wife whose post office address is 615 SW 2nd Street, Hallandale, FL 33009, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) 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 and assigns forever, the following described land, situate, lying and being in Columbia County, Florida to-wit:

Lot 3, Block C, of TIMUQUA SUBDIVISION, according to the plat thereof recorded in Plat Book 5, Pages 85-85A, of the Public Records of Columbia County, Florida.

Parcel Identification Number: 12-7S-16-04184-133

KRISTI COLLINASH MY COMMISSION # DD769839

EXPIRES March 17, 2012 FiorklaNotaryService.com

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

Signed, sealed and delivered in our presence:

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2008.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

My Commission Expires:

Inst. Number: 200912000098 Book: 1164 Page: 2528 Date: 1/6/2009 Time: 11:46:00 AM Page 2 of 2

#### Exhibit A

Lot 3, Block C, of TIMUQUA SUBDIVISION, according to the plat thereof recorded in Plat Book 5, Pages 85-85A, of the Public Records of Columbia County, Florida.

Parcel Identification Number: 12-7S-16-04184-133

File Number: I.C08-078

DoubleTimes

REAL ESTATE 2010 118180,0000

RONNIE BRANNON, CFC

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

CCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAYADIE VALUE	The second second second second
DO4454 400		THE STATE OF THE S	EXEMI HONS	TAXABLE VALUE	MILLAGE CODE
R04184-133		See Below	See Below	See Below	003

X 3881 2-3

99999\*\*SINGLE-PIECE

PERSAD VISHAM & PARBATEE 615 SW 2ND ST HALLANDALE FL 33009

12-7S-16 0000/0000 5.01 acres LOT 3 BLOCK C TIMUQUA S/D ORB 633-720, 906-1842, 908-2157, 920-1492, CT 1046-532, WD 1049-1541, See Tax Roll for extra legal.

		AD VALOREM	TAXES		
TAXING AUTHORITY A	MILLAGE RATE	ASSESSED VALUE	EXEMPTION AMOUNT	TAXABLE VALUE	TAXES LEVIED
BOARD OF COUNTY COMMISSIONERS COLUMBIA COUNTY SCHOOL BOARD	7.8910	36,696		36,696	289.57
DISCRETIONARY OCAL CAPITAL OUTLAY SUWANNEE RIVER WATER MGT DIST AKE SHORE HOSPITAL AUTHORITY OLUMBIA COUNTY INDUSTRIAL	0.9980 5.4140 1.5000 0.4399 0.9620 0.1240	36,696 36,696 36,696 36,696 36,696 36,696		36,696 36,696 36,696 36,696 36,696 36,696	36.63 198.67 55.04 16.14 35.30 4.55
TOTAL MILLAGE	17.3289		AC	VALOREM TAXES	635.90

NON-AD VALOREM ASSESSMENTS

FIRE ASSESSMENTS

**EVYING AUTHORITY** 

RATE Per Parcel

**TNUOWA** 

69.58

OR INFORMATION OR TO PAY WITH CREDIT/DEBIT CARD VISIT WWW.columbiataxcollector.com (CONVENIENCE FEE APPLIES)

NON- AD VALOREM ASSESSMENTS

705.48

COMBINED TAXES AND ASSESSMENTS PAY ONLY ONE AMOUNT

69.58 SEE REVERSE SIDE FOR INADOPTANT

f Paid By Nov 30, 2010 Dec 31, 2010 Jan 31, 2011 Feb 28, 2011	
1 100 01 2010   MI 11 7011   HON 10 1011	M 24 2014
Nov 30, 2010 Dec 31, 2010 Jan 31, 2011 Feb 28, 2011 698.43	Mar 31, 2011

Saction Name

12 RUTLASSER MOST

Mail Lien Satisfaction to: Dept of Highway Safety and Motor Vehicles, Neil Kirkman Building, Tailahassee, FL 32399-0500 で# 620031611 B# 663828 FLFL1AE147006710 1984 SAND HS 60' 40356032 Date of Issue 04/15/2010 Registered Owner: RONALD SLADE MCCARDLE JR PO BOX 2455 LAKE CITY, FL 32056 1,100 IMPORTANT INFORMATION When ownership of the vehicle described here is transferred, the seller MUST complete in but the Transfer of Title by Seller section at the bottom of the certificate of title.

2. Upon sale of this vehicle, the seller must complete Mail To: the notice of sale on the reverse side of this form. RONALD SLADE MCCARDLE JR Remove your license plate from the vehicle. See the web address below for more information and PO BOX 2455 LAKE CITY, FL 32056 the appropriate forms required for the purchase; to title and register the vehicle, mobile home or vesser http://www.hsmy.state.faces.html/ficlint.html WT-L-BHP - Vessel Regis, No. --Lion Re base LFL1AE147006710 60 ' 1984 SAND HS 40356032 1964 SAND HS 60' Interest in the described vehicle is bereta to ou UNK PRIVATE 09/26/2007 The state of the state of the state of Odometer Status or Vessel Manufacture: at OH use Huf Mararar Prop Prop Date of Issue 04/15/2010 Dat Registered Owner DUPLICATE RONALD SLADE MCCARDLE JR PO BOX 2455 LAKE CITY, FL 32056 1st Lienholder NONE DIVISION OF MOTOR VEHICLES FILORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES Control Number Executive Director 29 /1 93899889 TRANSPER OF TITLE BY SELLER; This section must be completed at the time of sale in Form, and restricts require that the role of southern to an experience of the process of the process of the connection will be transfer or the southern transfer and the method of the connection of the southern transfer and the method of the restriction of the connection of the southern transfer and the method of the restriction of the restriction of the southern transfer and the method of the restriction of the restriction of the southern transfer and the method of the restriction of selection investigation fracti Seller Maiorence Date Seller\_ CMC SECRETOR 1 | 5 or 1 | 1 torigo characteristic and a construction of the distribution of the control of the distribution of the control of UNDER PENALTIES OF PERJURY, I DECLARE THAY I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. CG-SELLER Mose Sign Heavi\_\_\_\_\_ land the Lorden Stock McCourte Ja Des Next

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE.

Lawrer Winder.

CO-PUR! HASER Mine

WINFIELD SOLID WASTE BUIL )ING AND ZONING PAGE 01 PAGE 01/01

#### CODE ENFORCEMENT PRELIMINARY MOBILE HOME VEPECTION REPORT

DATE RECEIVED 1/3/11 BY W IS THE MIN ON THE PROF IRTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME Wishum Persud PHONE 7.54- 214 3535
ADDRESS
MOBILE HOME PARKBUBÇ VISION
DRIVING DIRECTIONS TO MOBILE HOME ROBERT Sheppords Gard
MOBILE HOME INSTALLER MONG BULLAND PHONE G27-698 GLL
MOBILE HOME INFORMATION
MAKE Sand YEAR 84 SIZE 14 x 100 COLON BUE ) Rad AC
BERIAL NO SIFILAE/470057/0
WIND ZONE Must be wind zone # or higher N + WIND ZONE   ALLOWED
INSPECTION STANDARDS
INTERIOR: (P or F) · P= PASS F= FAILED 550.00
SMOKE DETECTOR () OPERATIONAL () MISSING Date of Payment: 13/1
FLOORS () SOLID () WEAK () HOLES DAMAGED LICATION _ Paid By STATY C. BECKNAM
DOORS ( ) OPERABLE ( ) DAMAGED
WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( MISSING
CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT
ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXI DSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING
EXTERIOR: WALLS ( SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY U ISOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
WINDOWS ( ) CRACKED BROKEN GLASS ( ) SCREENS IISSING ( ) WEATHERTIGHT
7/
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CON NTIONS
SIGNATURE AL D. P. II ID NUMBER 402 DATE 1-4-10

#### 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:

1/13/2011

DATE ISSUED:

1/20/2011

**ENHANCED 9-1-1 ADDRESS:** 

301

SW BRADENTON

WAY

**FORT WHITE** 

FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

12-7S-16-04184-133

Remarks:

STRUCTURE LOT 3 BLOCK C TIMUQUA S/D

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.

### 550 911147455 11-0003-N



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

PERMIT NO. 409,88945 DATE PAID: 1/4/2011 FEE PAID: RECEIPT #: 12-PID-1550994

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR:  [ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Repair [ ] Abandonment / [ ] Temporary [ ]
APPLICANT: JiShaM Parsod
AGENT: Gary Beckhom TELEPHONE: 623-6948
MAILING ADDRESS: 269 SW Parker Lane, 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  107: 3 BLOCK: C SUBDIVISION: TIME OF 9 50 PLATTED: 1986
PROPERTY INFORMATION  LOT: 3 BLOCK: C SUBDIVISION: Timingua SD PLATTED: 7986  PROPERTY ID #: 12 75-16-0000/0000000000000000000000000000000
PROPERTY SIZE: 5,0/ ACRES WATER SUPPLY: PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD
PROPERTY ADDRESS:  DISTANCE TO SEWER:FT  PROPERTY ADDRESS:  DISTANCE TO SEWER:FT
The 10 Bear TR to Broden for Way The
BUILDING INFORMATION [ RESIDENTIAL [ ] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 Mobile Home 2 840
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
4
[ ] Floor/Equipment Drains [ ] Other (Specify)
DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC Page 1 of 4



DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

#### STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

- PART II - SITE PLAN-Scale: Each block represents 5 feet and 1 inch = 50 feet. Notes: Bra denton Site Plan submitted by: Title Signature Date\_1 Plan Approved Not Approved County Health Departme ALL CHANGES MUST BE AREROVED BY THE COUNTY HEALTH DEPARTMENT

Page 2 of