

JERRY
CORBETT'S
LIABILITY

APP # 1206-16

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official 15 JUNE 2012 BLC Building Official 7.6.6-13-12
AP# 1206-16 Date Received 6/12 By JL Permit # 30260
Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
Comments Section 2-3.1 Replacing existing mnh
FEMA Map# N/A Elevation N/A Finished Floor 1st floor River N/A In Floodway N/A
☒ Site Plan with Setbacks Shown ☒ EH # 12-0316M ☒ EN 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 _____ ☒ Out County ☒ In County
Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009

HXK3 DK

Property ID # 35-49-17-09033-161 Subdivision Brent Heights Lot 1 Block D

- New Mobile Home _____ Used Mobile Home ☒ MH Size 29x62 Year 1998
- Applicant Gwen Walker or TREA Foster Phone # 386-362-4948
- Address 10314 US Hwy 90 E Live Oak FL 32060
- Name of Property Owner Kisha Sheppard Phone # 386-344-4975
386-438-5322
- 911 Address 270 SE Britt Place Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
386-344-4975
- Name of Owner of Mobile Home Kisha Sheppard Phone # 386-438-5322
Address 270 SE Britt Place Lake City FL 32025
- Relationship to Property Owner SELF
- Current Number of Dwellings on Property 0
- Lot Size 144x144x775x124 Total Acreage 0.530
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home YES (pd)
- Driving Directions to the Property 41-4915 TO C-133-C, FL TO PEACOCK
FL AND 15 (A) THE CORNER OF BRITT & PEACOCK TERRACE
- Name of Licensed Dealer/Installer Jerry Corbett Phone # 386-362-4948
590-0470
- Installers Address 10314 US Hwy 90 E Live Oak FL 32060
- License Number JH-1025368 Installation Decal # 8705

1158

Tw left msg w/ Mary 6.18.12

Spoke to Trea 6-18-12 / 7-3-12

- \$375.00

ck # 5432

POCKET PENETROMETER TEST

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

x 1500 x 1200 x 1000

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 1200 x 1100 x 1000

TORQUE PROBE TEST

The results of the torque probe test is 290 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 6 ft. anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. racking capacity.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

James C. Smith

Date Tested

6-8-12

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. _____

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. _____
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. _____

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 3/8" Length: 6" Spacing: 24"
Walls: Type Fastener: 3/8" Length: 6" Spacing: 24"
Roof: Type Fastener: 3/8" Length: 6" Spacing: 24"
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 rafter/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

Type gasket: Team Gasket Installed: Yes

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 ☒ N/A ☐
Electrical crossovers protected. Yes ☒ No ☐

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and of Rule 15C-1 & 2

Installer Signature

James C. Smith Date 6-8-12

PERMIT NUMBER

PERMIT WORKSHEET

Page 1 of 2

Installer

Jerry Long #1025368

Address of home being installed

270 S.E. Britt Place
Lake City, FL 32025

Manufacturer

Elektro

Length x width

60' x 28'

NOTE:

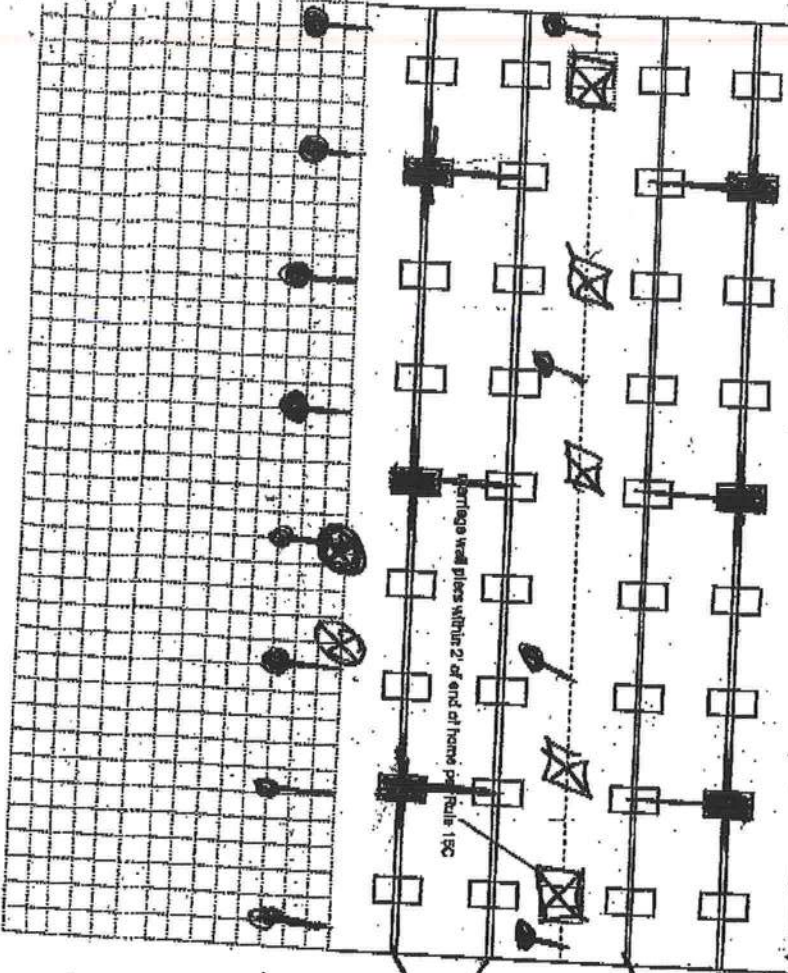
If home is a single wide fill out one half of the blocking plan.
If home is a triple or quad sketch in remainder of home.

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

SC

Typical pier spacing



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 #

8905

Triple/Quad

☐

Serial #

3555 A/B

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footer size (256)	18" x 12" x 16" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	28" x 28" (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

Beam pier pad size

Perimeter pier pad size

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

ANCHORS

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer

Oliver Tech

Number

2

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Sidewall

Longitudinal Marriage wall

Shearwall

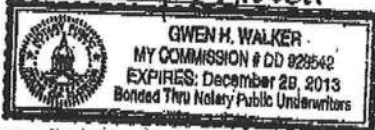
AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Keisha Sheppard & Justin Hawkins
Property ID: Sec: 35 Twp: 4S Rge: 19 Tax Parcel No: 09033-161
Lot: 1 Block: D Subdivision: Brent Heights
Mobile Home Year/Make: 98- Fleetwood Size: 28x62

Jerry Corbett
Signature of Mobile Home Installer

Sworn to and subscribed before me this 8th day of June, 2012
by Jerry Corbett



Notary's name printed/typed

Gwen H. Walker
Notary Public, State of Florida
Commission No. _____
Personally Known: X
Produced ID (type): _____

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, Jerry Corbett, license number IH 1025368
Please Print

do hereby state that the installation of the manufactured home for Keisha Sheppard
Applicant
at 270 S.E. Britt Place Lake City, FL
911 Address
will be done under my supervision. 32057

Jerry Corbett
Signature

Sworn to and subscribed before me this 8th day of June
2012

Notary Public: Gwen M. Walker
Signature

My Commission Expires: _____
Date



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1206-16 CONTRACTOR JERRY CORBETT PHONE 386-596-0470

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>Kiesha Sheppard</u> License #: <u>Home Owner</u>	Signature <u>[Signature]</u> Phone #: <u>386-344-4975</u>
✓ MECHANICAL/ A/C <u>101</u>	Print Name <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-0022</u>
✓ PLUMBING/ GAS	Print Name <u>Kiesha Sheppard</u> License #: <u>Home Owner</u>	Signature <u>[Signature]</u> Phone #: <u>386-344-4975</u>

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.

Inst:201212004975 Date:3/30/2012 Time:4:09 PM

Doc Stamp-Deed:0.70

DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1232 P:949

Recording requested by: _____

Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: _____

Name _____

Address: _____

Address _____

City/State/Zip: _____

City/State/Zip _____

Property Tax Parcel/Account Number: _____

Quitclaim Deed

This Quitclaim Deed is made on March 26 2012, between
/ Linda C. Sheppard, Grantor, of 15183 N.W 150th Apt 2021
_____, City of Alachua, State of Florida,
and Kiesha Leshawn Sheppard, Grantee, of 881 NW Catabw Ave
_____, City of Lake City, State of Florida.

For valuable consideration, the Grantor hereby quitclaims and transfers all right, title, and interest held by
the Grantor in the following described real estate and improvements to the Grantee, and his or her heirs
and assigns, to have and hold forever, located at 270 SE Britt Place
_____, City of Lake City, State of Florida:

**LOT 1, BLOCK D, BRENT HEIGHTS, a subdivision as recorded in Plat Book 6,
Pages 51-51A, Columbia County, Florida, subject to Restrictions recorded in O. R.
Book 0746, Pages 0905-0907, Columbia County, Florida, and subject to Power Line
Easement.**

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any.

Taxes for the tax year of 2012 shall be prorated between the Grantor and Grantee as of the date of
recording of this deed.

Dated: March 26, 2012

Linda C. Sheppard
Signature of Grantor

Linda C. Sheppard
Name of Grantor

Krista Blackwell
Signature of Witness #1

Krista Blackwell
Printed Name of Witness #1

Angela Cox
Signature of Witness #2

Angela Cox
Printed Name of Witness #2

State of Florida County of Columbia
On March 26, 2012, the Grantor, Linda C. Sheppard,
personally came before me and, being duly sworn, did state and prove that he/she is the person described
in the above document and that he/she signed the above document in my presence.

Angela Cox
Notary Signature

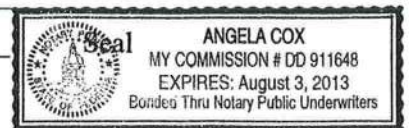
Notary Public,

In and for the County of Columbia State of Florida

My commission expires: 08-03-2013

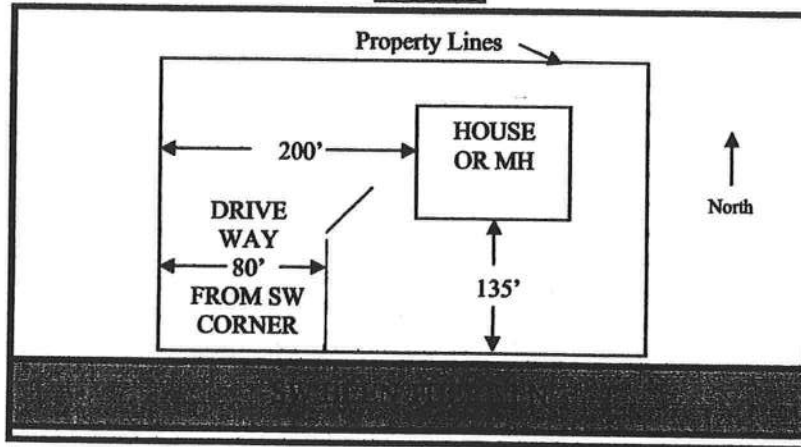
FL DL Produced as ID.

Send all tax statements to Grantee.

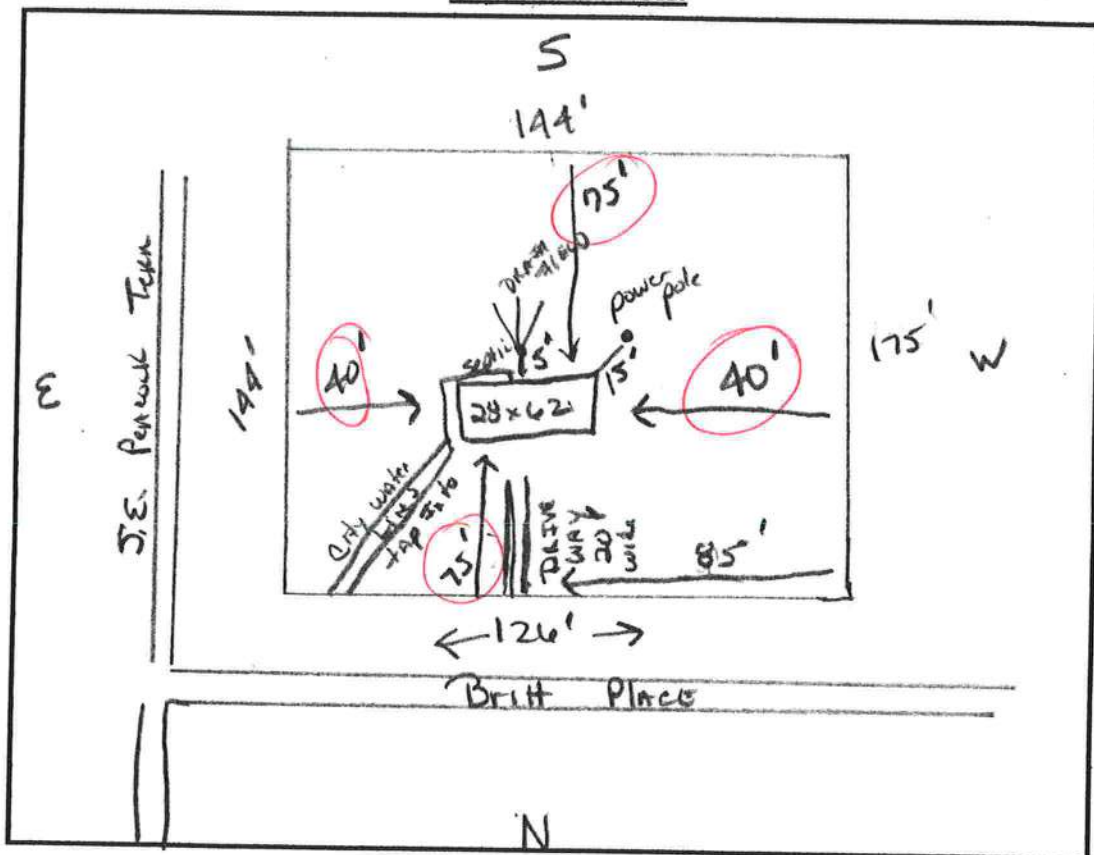


1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:





COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Jerry Corbett, give this authority and I do certify that the below
referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Gwen Walker		Jerry Corbett's MH
TREKA Foster		Jerry Corbett's MH

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license
holder for violations committed by him/her or by his/her authorized person(s) through this
document and that I have full responsibility for compliance granted by issuance of such permits.

Jerry Corbett
License Holders Signature (Notarized) 1025368 6-8-12
License Number Date

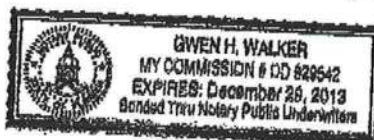
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Jerry Corbett
personally appeared before me and is known by me or has produced identification
(type of I.D.) known by personally on this 8th day of June, 2012.

NOTARY'S SIGNATURE

(Seal/Stamp)



CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

1206-16

COUNTY THE MOBILE HOME IS BEING MOVED FROM Swansea
OWNERS NAME Jan Harris & Kerstin Sheppard PHONE 386-438-5322 CELL 386-344-1890
INSTALLER Terry Corbett PHONE 386-362-4948 CELL 386-590-0470
INSTALLERS ADDRESS 10314 US Hwy 90 E. Live Oak, FL 32060

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1998 SIZE 28 x 62
COLOR white SERIAL No. GATLV35A/B13555H121
WIND ZONE II SMOKE DETECTOR _____

INTERIOR: # 1206-16
FLOORS good
DOORS good
WALLS good
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:
WALLS / SIDING good
WINDOWS good
DOORS good
INSTALLER: APPROVED ✓ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Terry Corbett
Installer/Inspector Signature Terry Corbett License No. TH-1025368 Date 6/8/12

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature Jerry Cunn Date 6-13-12

Jerry spoke w/ Jerry 6.13.12 to move

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: 6/11/2012 DATE ISSUED: 6/13/2012

ENHANCED 9-1-1 ADDRESS:

270 SE BRITT PL

LAKE CITY FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

35-4S-17-09033-161

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.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6/12 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES

OWNERS NAME KIESHA SHEPPARD PHONE _____ CELL 386.344.4975

ADDRESS 270 SE BRIT PL, C.C. #L 32025

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 41/44th TO C-133-C, TL TO PEACOCK, TL AND ITS
ON THE CORNER OF BRIT & PEACOCK TERRACE.

MOBILE HOME INSTALLER JERRY CORBET PHONE 386.362.4948 CELL 590.0470

MOBILE HOME INFORMATION

MAKE FLEETWOOD YEAR 1998 SIZE 28 X 62 COLOR WHITE

SERIAL No. GIAFLV35A/B135SSH21

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

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

\$50.00

Date of Payment: 6.12.12

Paid By: CORBET'S NAME

Notes: 1206-16

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

EXTERIOR:

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

STATUS

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Cur ID NUMBER 304 DATE 6.20.12



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

PERMIT NO. 12-0316M
DATE PAID: 6/22/12
FEE PAID: 300.00
RECEIPT #: 1898342
AP 1075254

APPLICATION FOR:

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

APPLICANT: Juan Harris - Keisha Sheppard (270 S.E. Britt Pl. Lake City, FL)

AGENT: Gwen Walker on TREA Foster - Terry Corbett m.h. TELEPHONE: 306-362-4918

MAILING ADDRESS: 10314 US Hwy 90 E. Live Oak FL 32060

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: 1 BLOCK: D SUBDIVISION: Brent Heights PLATTED: _____

PROPERTY ID #: 35-45-17-09033-161 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 0.530 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065 FS? [Y / N] DISTANCE TO SEWER: 5 FT

PROPERTY ADDRESS: 270 S.E. Britt Pl. Lake City, FL 32025

DIRECTIONS TO PROPERTY: I-15 S toward Alachua go to exit 423 take SR 47N exit toward L.C. turn left onto SR 47N, turn Rth CR 2474/SW Superior St then go Turn Rth onto S. US Hwy 441/41 then Turn Left onto Alfred St then Left onto S.E. Brandon then 1st Rth onto Britt Blvd. go 0.2 mile "270 S.E. Britt Pl."

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>4</u>	<u>1736</u>	<u>Residence</u> ORIGINAL ATTACHED
2				
3				
4				

☒ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Gwen Walker DATE: 6/12/12

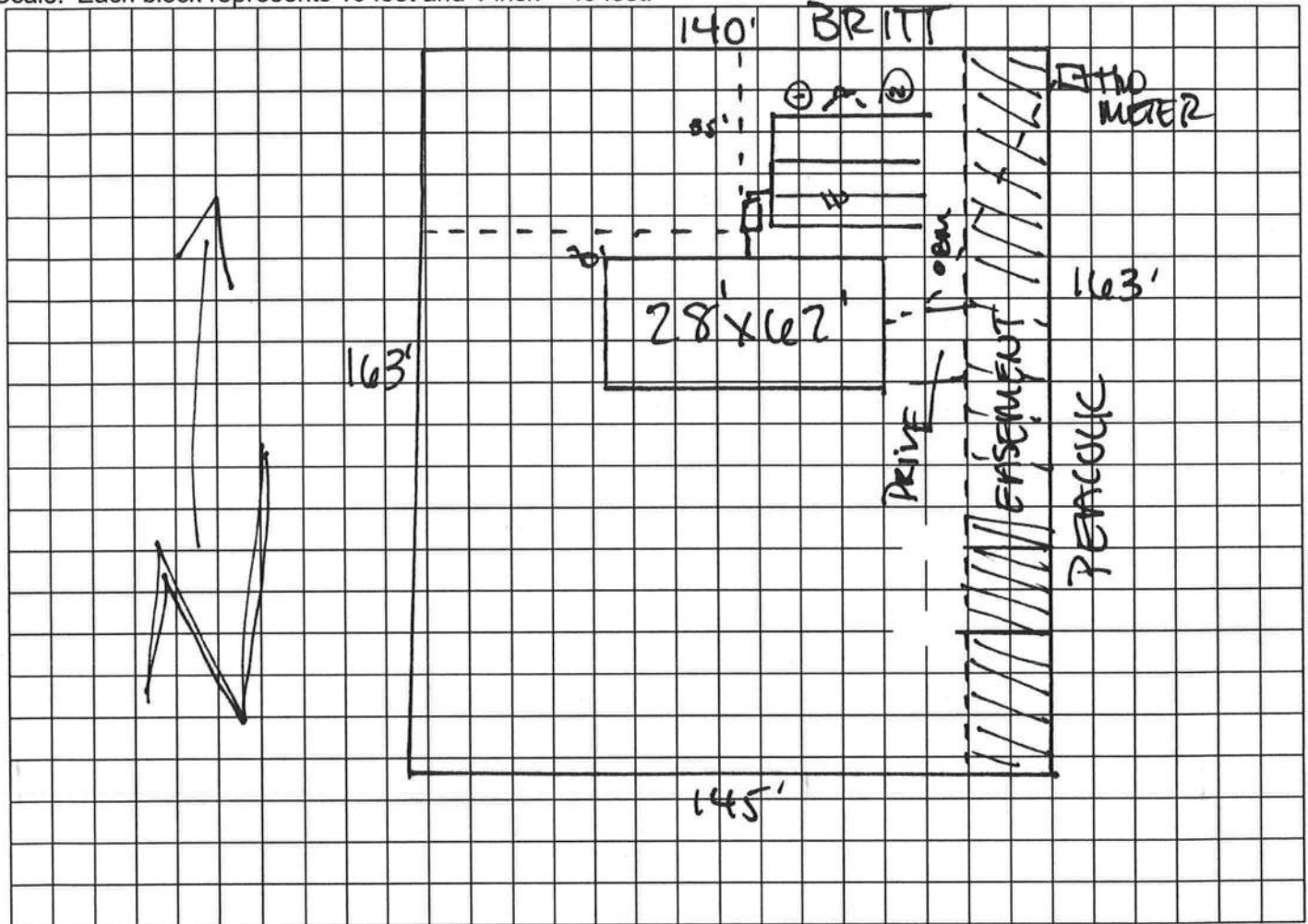
RECEIVED
6/13/12
SM

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 12-31644

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: _____

Plan Approved Y

Not Approved _____

Date 7/6/12

By [Signature] **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT