DATE 11/05/2010

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000028980

APPLICANT WENDY GRENNELL PHONE 386-288-2428

ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038

OWNER HERNON & JOYCE PETERS PHONE 386-984-8642

ADDRESS 355 SW HAMMOCK HILL CIRCLE LAKE CITY FL 32024

CONTRACTOR RONNIE NORRIS PHONE 752-3871

LOCATION OF PROPERTY 441 S, R HAMMOCK HILL CIRCLE, R ON CIRCLE TO 3RD
LOT ON THE RIGHT

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES ____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING AG MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 22-6S-17-09736-107 SUBDIVISION PINE OAK HAMMOCK

LOT 7 BLOCK ____ PHASE ____ UNIT ____ TOTAL ACRES 4.00

_____	____	IH10251451	Wendy Grennell	
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
EXISTING	10-0481	BK	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: SEE ATTACHED LETTER FOR SETUP HEIGHT OF MOBILE HOME
STUP 1010-35, 5 YEAR PERMIT ONLY THEN CONTACT BUILDNG DEPT.
2ND UNIT FOR SON Check # or Cash CASH

FOR BUILDING & ZONING DEPARTMENT ONLY

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

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 250.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 70.62 WASTE FEE $ 184.25

FLOOD DEVELOPMENT FEE $ ____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ ____ **TOTAL FEE** 579.87

INSPECTORS OFFICE L. Hodson CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only *(Revised 1-10-08)* Zoning Official BLK 04.11.11 Building Official T.C. 10-27-10

AP# 1010-49 Date Received 10/25 By JW Permit # 28980

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

Comments See attached memo for set up of MH.

FEMA Map# N/A Elevation N/A Finished Floor _____ River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 10-0481 ☑ EH Release ☑ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☐ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☑ STUP-MH 1010-35 ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL _ Impact Fees Suspended March 2009 ☑ VF ELECTRICAL ONLY

Property ID # 22-6S-17-09736-107 Subdivision Pine Oak Hammock Lot 7

- New Mobile Home ✓ Used Mobile Home _____ MH Size 14x48 Year 2010
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner Hernon + Joyce Peters Phone# 386-984-8642
- 911 Address 355 SW Hammock Hill Cir, Lake City, FL 32024
- Circle the correct power company - FL Power & Light - **Clay Electric**
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Hernon Peters Jr. Phone # 386 984-8642
  Address 353 SW Hammock Hill Cir Lake City 32024
- Relationship to Property Owner Son
- Current Number of Dwellings on Property 1
- Lot Size 471 x 369 Total Acreage 4
- Do you : Have **Existing Drive** (Currently using) or **Private Drive** (Blue Road Sign) or need **Culvert Permit** (Putting in a Culvert) or **Culvert Waiver** (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 441 South through Ellisville to (R) Hammock Hill Circle, veer (R) on circle to 353 on (R) follow drive back behind existing home to sete straight ahead 3rd on (R)
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 752-3871
- Installers Address 1004 SW Charles Terr Lake City FL 32024
- License Number IH1025145/1 Installation Decal # 818

JW Spoke w/ Wendy 11.4.10

Cash $ 579.87

Peters app# 1010-44

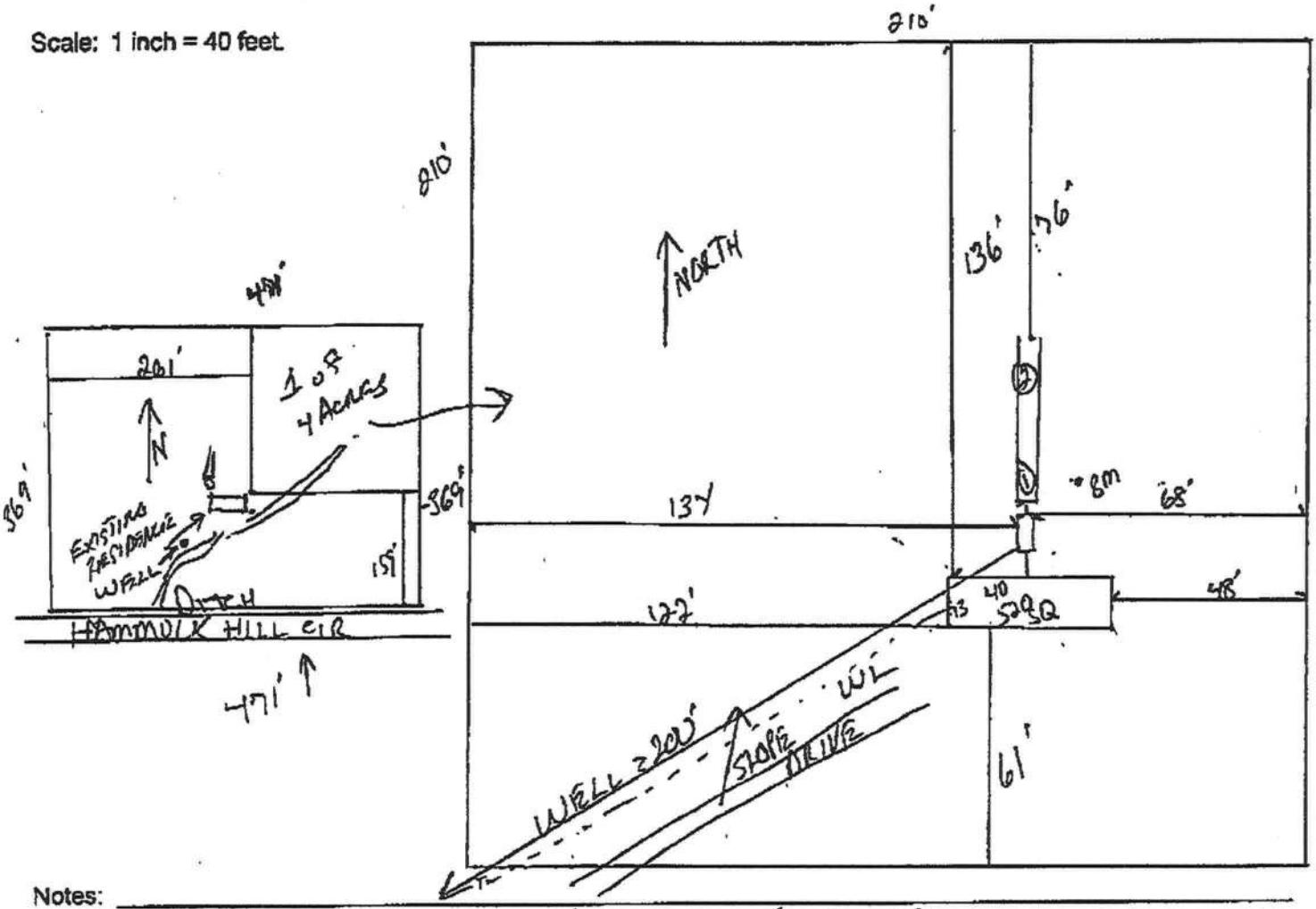
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10-0481

PETERS

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: 1 of 4 Acres

Site Plan submitted by: Rocky D 7-0

MASTER CONTRACTOR

Plan Approved X Not Approved ____ Date 10-27-10

By Sallie Ford - EH Director Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

PERMIT WORKSHEET

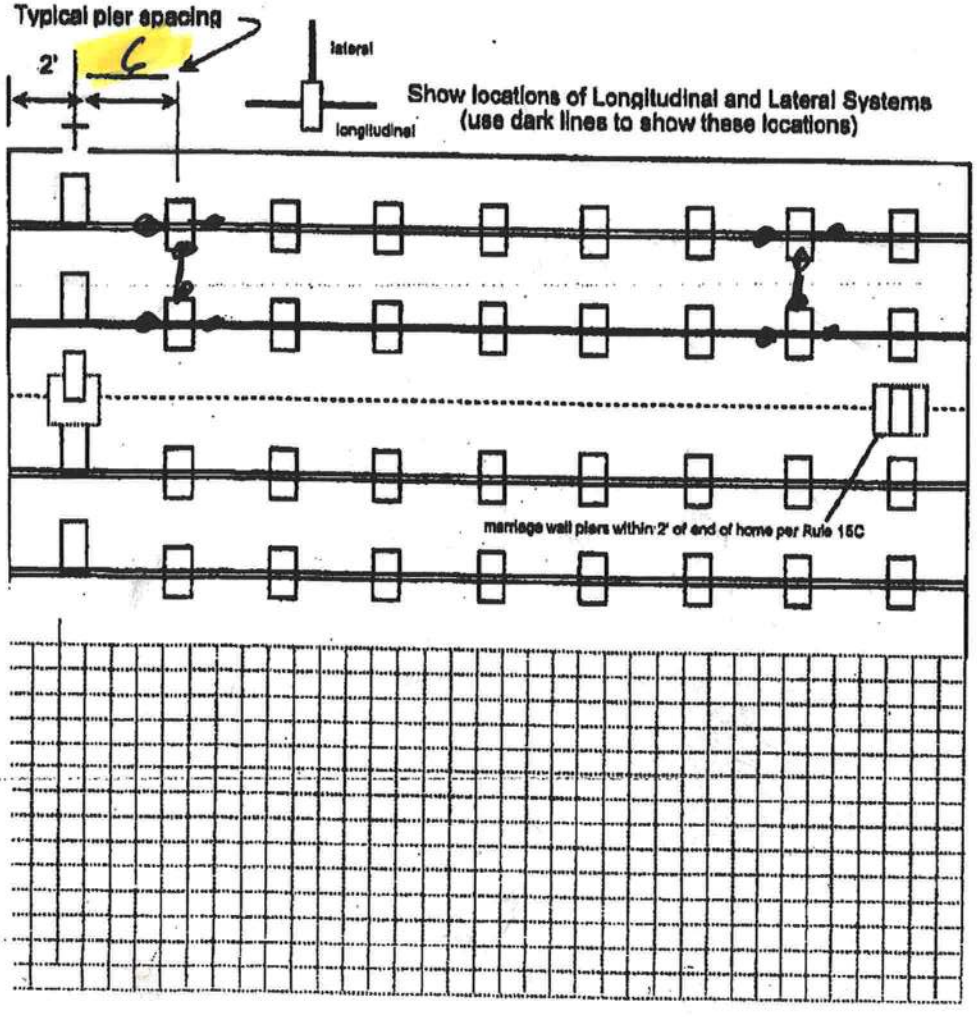
Installer Ronnie Norris License # IH1025145/1
Manufacturer LIVE OAK Length x Width 14X48
Name of Owner of this Mobile Home PETERS, H
Phone 386-984-8642
Address 5W Hammock Hill Circle

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

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials RN

New Home [x] Used Home [ ] Year 2010
Home installed to the Manufacturer's Installation Manual [x]
Home is installed in accordance with Rule 15-C [ ]
Single wide [x] Wind Zone II [x] Wind Zone III [ ]
Double wide [ ] Installation Decal # 818
Triple/Quad [ ] Serial # LOHGA10911610



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

342 Req.
425 Provided

PIER PAD SIZES

I-beam pier pad size 17X25
Perimeter pier pad size
Other pier pad sizes (required by the mfg.) 16X6

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
SW	SW
SW	SW
SW	SW

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

(4 ft) 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

OTHER TIES

	Number
Sidewall	22
Longitudinal	4
Marriage wall	Z
Shearwall	Z

PERMIT WORKSHEET

PERMIT NUMBER _____

POCKET PENETROMETER TEST

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

x 1500 x 1500 x 1500

POCKET PENETROMETER TESTING METHOD

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

x 1500 x 1500 x 1500

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing ___. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

___ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name [signature]

Date Tested 10-20-2020

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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:		Length:		Spacing:
Walls:	Type Fastener:	SW	Length:	SW	Spacing: SW
Roof:	Type Fastener:		Length:		Spacing:

For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, 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.

Installer's initials SW

Type gasket _____

Pg. _____

Installed:

Between Floors Yes _____

Between Walls Yes SW

Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes _____. Pg. _____

Siding on units is installed to manufacturer's specifications. Yes _____

Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

Miscellaneous

Skirting to be installed. Yes _____ No _____

Dryer vent installed outside of skirting. Yes _____ N/A _____

Range downflow vent installed outside of skirting. Yes _____ N/A _____

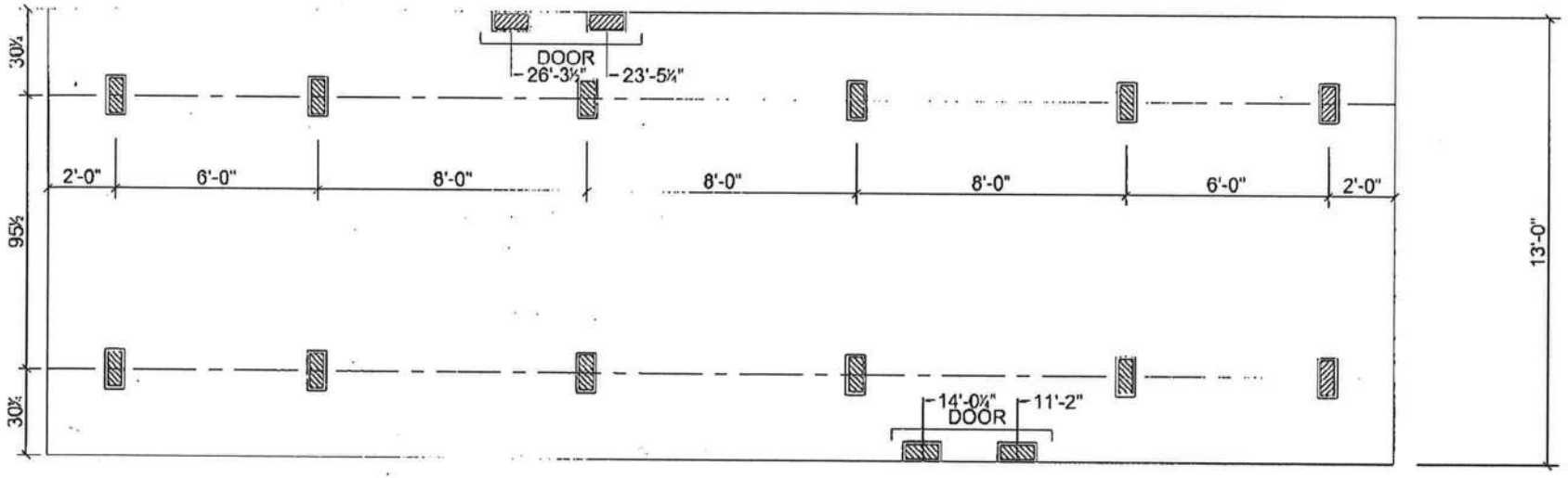
Drain lines supported at 4 foot intervals. Yes _____

Electrical crossovers protected. Yes _____

Other : _____

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

Installer Signature [signature] Date 10-20-20



SUPPORT PIER/TYP

2/26/09

FOUNDATION NOTES:

- 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.

Live Oak Homes
MODEL: S-4401A - 14 X 40
4-BEDROOM / 2-BATH

S-4401A

>> Print as PDF <<

LOT 7 PINE OAK HAMMOCK S/D.
ORB 746-1613, 851-1823.
WD 1067-661.

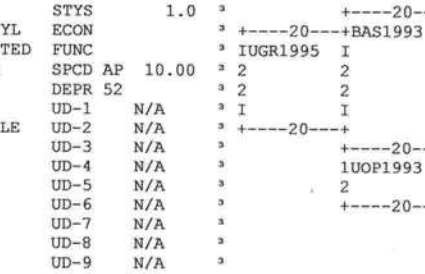
PETERS HERNON D & JOYCE M
353 SW HAMMOCK HILL CIRCLE
LAKE CITY, FL 32024

22-6S-17-09736-107

Columbia County 2010 R
CARD 001 of 001
PRINTED 10/11/2010 10:49 BY JEFF
APPR 7/18/2005 DF

BUSE	000100	SINGLE FAM		AE? Y	1644	HTD AREA	108.931	INDEX	22617.01	PINE OAK	PUSE 000100 SINGLE FAMILY
MOD	1	SFR	BATH	2.00	1977	EFF AREA	51.198	E-RATE	100.000	INDX	STR 22- 6S- 17
EXW	12	CEDAR	FIXT		101218	RCN			1992	AYB	MKT AREA 02 73,889 BLDG
10%	21	STONE	BDRM	2	73.00	%GOOD	73,889	B BLDG VAL	1992	EYB	(PUD1 2,250 XFOB
RSTR	03	GABLE/HIP	RMS								AC 25,040 LAND
RCVR	03	COMP SHNGL	UNTS								NTCD 0 AG
%		N/A	C-W%								APPR CD 0 MKAG
INTW	05	DRYWALL	HGHT								CNDO 101,179 JUST
50%	04	PLYWOOD	PMTR								SUBD 0 CLAS
FLOR	14	CARPET	STYS	1.0							BLK
10%	08	SHT VINYL	ECON								LOT 0 SOHD
HTTP	04	AIR DUCTED	FUNC								MAP# 0 ASSD
A/C	03	CENTRAL	SPCD	AP 10.00							HX SX 0 EXPT
QUAL	05	05	DEPR	52							TXDT 003 0 COTXBL
FNDN		N/A	UD-1	N/A							
SIZE	03	RECTANGLE	UD-2	N/A							
CEIL		N/A	UD-3	N/A							
ARCH		N/A	UD-4	N/A							
FRME		N/A	UD-5	N/A							
KTCH	01	01	UD-6	N/A							
WNDO		N/A	UD-7	N/A							
CLAS		N/A	UD-8	N/A							
OCC		N/A	UD-9	N/A							
COND	03	03	%	N/A							

FIELD CK:
LOC: 353 HAMMOCK HILL CR SW



BLDG TRAVERSE
BAS1993=W20 S3 UGR1995=W20 S22E20N22$ S25
UOP1993=S12 E20 N12 W20$ E20 N28$ BAS199
5=S28 UOP1995=S12E23 N12 W23$ E23 N3E20 N2
2 UOP1995=N8 W20 S8 E20$W20 N3 W23$.

SUB	A-AREA	%	E-AREA	SUB VALUE
BAS95	1084	100	1084	40513
UOP95	436	20	87	3252
BAS93	560	100	560	20930
UGR95	440	45	198	7400
UOP93	240	20	48	1794
TOTAL	2760		1977	73889

PERMITS

NUMBER	DESC	AMT	ISSUED
4608	SFR	31,000	2/05/1991

SALE

BOOK	PAGE	DATE			PRICE
1067	661	11/29/2005	U	I	15000
GRANTOR STOKES-NASSAU					
GRANTEE HERMON PETERS					
746	1613	11/16/1990	U	V	14995
GRANTOR STOKES-NASSAU					
GRANTEE HERMON PETERS					

EXTRA FEATURES

AE	BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UNITS	UT	PRICE	ADJ UT PR	SPCD %	%GOOD	XFOB VALUE
Y		0040	BARN,POLE	30	30		1		2004	1.00	900.000	SF	2.500	2.500		100.00	2,250

AE	LAND CODE	DESC	ZONE	TOPO	ROAD	UTIL	UD1	UD2	UD3	UD4	FRONT	BACK	DEPTH	DT	FIELD CK: ADJUSTMENTS	UNITS	UT	PRICE	ADJ UT PR	LAND VALUE
Y	000100	SFR	RSFMH1	0002	0002	0003	0								1.00 1.00 1.00 1.00	1.000	LT	23040.000	23040.00	23,040
Y	009945	WELL/SEPT	00	0002	0002	0003									1.00 1.00 1.00 1.00	1.000	UT	2000.000	2000.00	2,000

L001 - LOT 7; 4.03 AC.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Ronnie Norris PHONE 386-752-3871

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 _____ License #:	Signature _____ Phone #:
MECHANICAL/ A/C ____✓	Print Name Robert Grant License #: CAC1814931	Signature _____ Phone #: 8008593708
PLUMBING/ GAS ✓	Print Name RONNIE NORRIS License #: IH/1025145	Signature _____ Phone #: 386-752-3871
ROOFING	Print Name _____ License #:	Signature _____ Phone #:
SHEET METAL	Print Name _____ License #:	Signature _____ Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name _____ License#:	Signature _____ Phone #:
SOLAR	Print Name _____ License #:	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Peters

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1010-44 CONTRACTOR Ronnie Norris PHONE 386-752-387.

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 John M Courson License #: ER0002038	Signature Phone #: 386-752-8575
MECHANICAL/ A/C	Print Name License #:	Signature Phone #:
PLUMBING/ GAS	Print Name RONNIE NORRIS License #: IH/025145	Signature Phone #: 386-752-3871
ROOFING	Print Name License #:	Signature Phone #:
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License #:	Signature Phone #:
SOLAR	Print Name License #:	Signature Phone #:

MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

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

I, RONNIE NORRIS (license holder name), licensed qualifier

for NORRIS MOBILE HOME SET-UP (company name), do certify that the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Wendy Grennell	1. Wendy Grennell
2.	2.
3.	3.
4.	4.
5.	5.

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

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

License Holders Signature (Notarized) | License Number: IH/1025145 | Date: 10/22/10

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 22 day of October, 2010.

NOTARY'S SIGNATURE

(Seal/Stamp)
SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

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, RONNIE NORRIS (Please Print), license number IH/1025145
do hereby state that the installation of the manufactured home for Hernon Peders (Applicant)
_____ at 30 Hammock Hill Cir. (911 Address)
will be done under my supervision.

_____ (Signature)

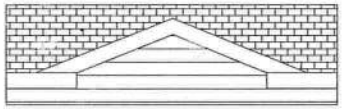
Sworn to and subscribed before me this 22 day of October, 20 10.

Notary Public: Shirley M Bennett (Signature)

My Commission Expires: 7-8-12 (Date)

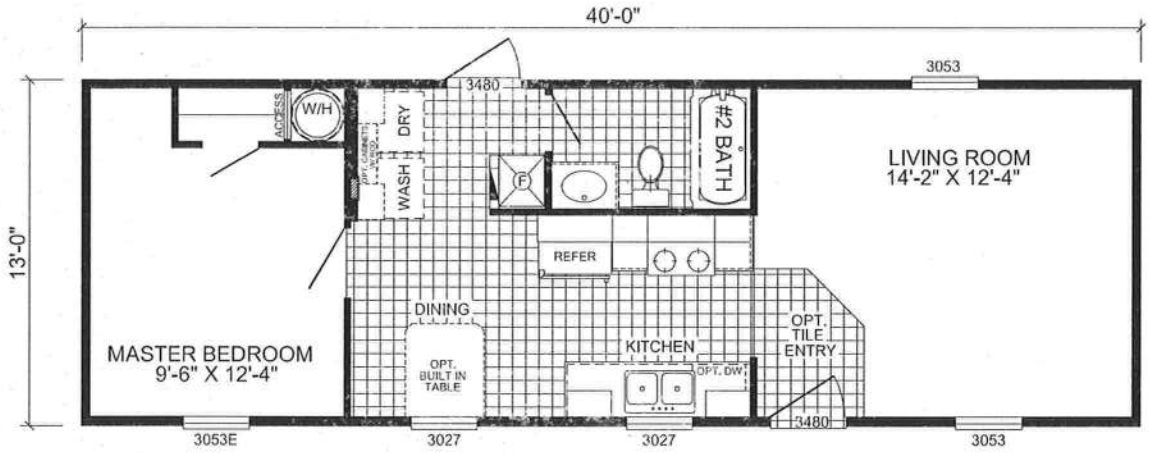
SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

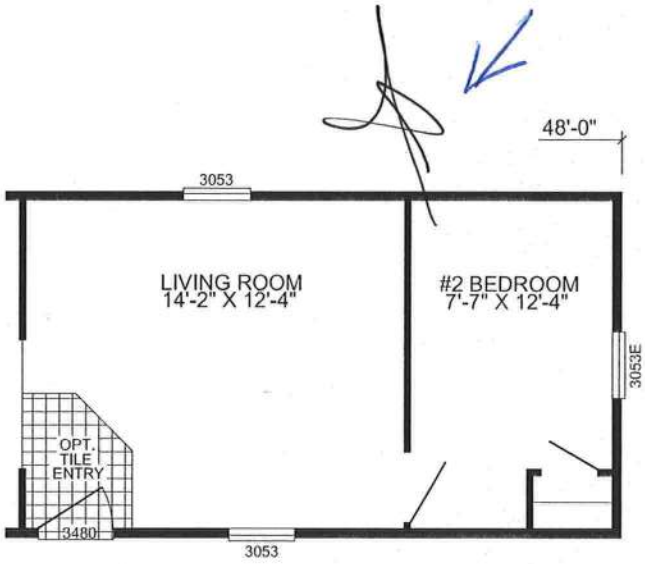
Peters



OPTIONAL DORMER

NOTE: DORMER IS OPTIONAL.





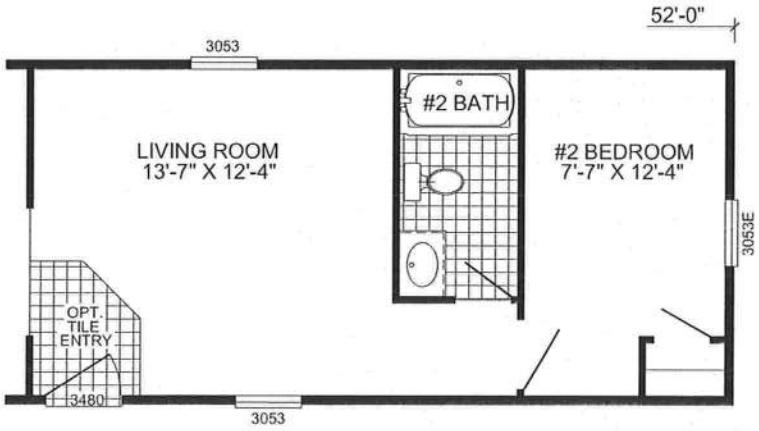
S-4401B

1-BEDROOM / 1-BATH

14 X 44 - Approx. 520 Sq. Ft.

Date: 2-17-09

* All room dimensions include closets and square footage figures are approximate.



Peters App # 1010-44

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: 10/25/2010 **DATE ISSUED:** 10/28/2010

ENHANCED 9-1-1 ADDRESS:

355 SW HAMMOCK HILL CIR

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

22-6S-17-09736-107

Remarks:

2ND LOCATION ON LOT 7 PINE OAK HAMMOCK S/D

Address Issued By: _____

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.

1832

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
APPLICATION

Permit No. STUP-1010-35 Date 29 Oct. 2010

Fee $450.00 Receipt No. 4108 Building Permit No. _____

Name of Title Holder(s) Hernon & Joyce Peters

Address 353 SW Hammock Hill Cir City Lake City

Zip Code 32024

Phone (386) 984-8642

NOTE: If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator MUST be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) Wendy Grennell

Address 3104 SW Old Wire Rd I City Ft White

Zip Code 32038

Phone (386) 288-2428

Paragraph Number Applying for 7

Proposed Temporary Use of Property residential

Proposed Duration of Temporary Use 5 years

Tax Parcel ID# 22-6S-17-09736-107

Provide a copy of your Deed of the property

Size of Property 4 acres

Present Land Use Classification A-3

Present Zoning District A-3

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 RV's 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 RV's 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, but not into the mobile home 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 Regulation 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 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 these 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.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

Hermon R Peters

Applicants Name (Print or Type)

Hermon R Peters

Applicant Signature

10/22/10

Date

OFFICIAL USE

Approved X BLK 28.10.10

Denied _____

Reason for Denial _____

Conditions (if any) _____

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
AUTHORIZATION

The undersigned, Joyce Peters, (herein "Property Owners"). whose physical 911 address is 353 SW Hammock Hill Circle, hereby understand and agree to the conditions set forth by the issuance of a Special Temporary Use Permit in accordance with the Columbia County Land Development Regulations (LDR's). I hereby further authorize Wendy Grennell to act on by behalf concerning the application for such Special Temporary Use Permit on Tax Parcel ID # 22-6S-17-09736-107.

Dated this 22 Day of October, 2010.

Joyce Marie Peters
Property Owner (signature)

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 22 Day of October, 2010, by Joyce Peters Who is personally known to me or who has produced a FL DL Driver's license as identification.

Shirley M Bennett
Notary Public, State of Florida

(NOTARIAL SEAL)

SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

My Commission Expires:

AFFIDAVIT AND AGREEMENT OF SPECIAL TEMPORARY USE FOR IMMEDIATE FAMILY MEMBERS FOR PRIMARY RESIDENCE

1010-49

STATE OF FLORIDA
COUNTY OF COLUMBIA

Inst:201012017856 Date:11/4/2010 Time:11:22 AM
DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1204 P:797

BEFORE ME the undersigned Notary Public personally appeared.

Hernon + Joyce Peters, the Owner of the parcel which is being used to place an additional dwelling (mobile home) as a primary residence for a family member of the Owner, and Hernon R. Peters, the Family Member of the Owner, who intends to place a mobile home as the family member's primary residence as a temporarily use. The Family Member is related to the Owner as SON, and both individuals being first duly sworn according to law, depose and say:

1. 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 Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement.

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 Tax Parcel No. 22-6S-17-09736-107

4. No person or entity other than the Owner 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.

5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for 5 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.

6. This Special Temporary Use Permit on Parcel No. 22-6S-17-09736-107 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.

7. The 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.

8. The parent parcel owner shall be responsible for non ad-valorem assessments.

section with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. 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.

10. The mobile home 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.

11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).

12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).

13. 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.

Joyce Marie Peters
Hernon Donald Peters
Owner

Hernon R Peters
Family Member

Joyce Marie Peters
Hernon Donald Peters
Typed or Printed Name

Hernon R Peters
Typed or Printed Name

Subscribed and sworn to (or affirmed) before me this 22 day of October, 2010, by Joyce + Hernon Peters (Owner) who is personally known to me or has produced FL DL as identification.

Shirley M Bennett
Notary Public

SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

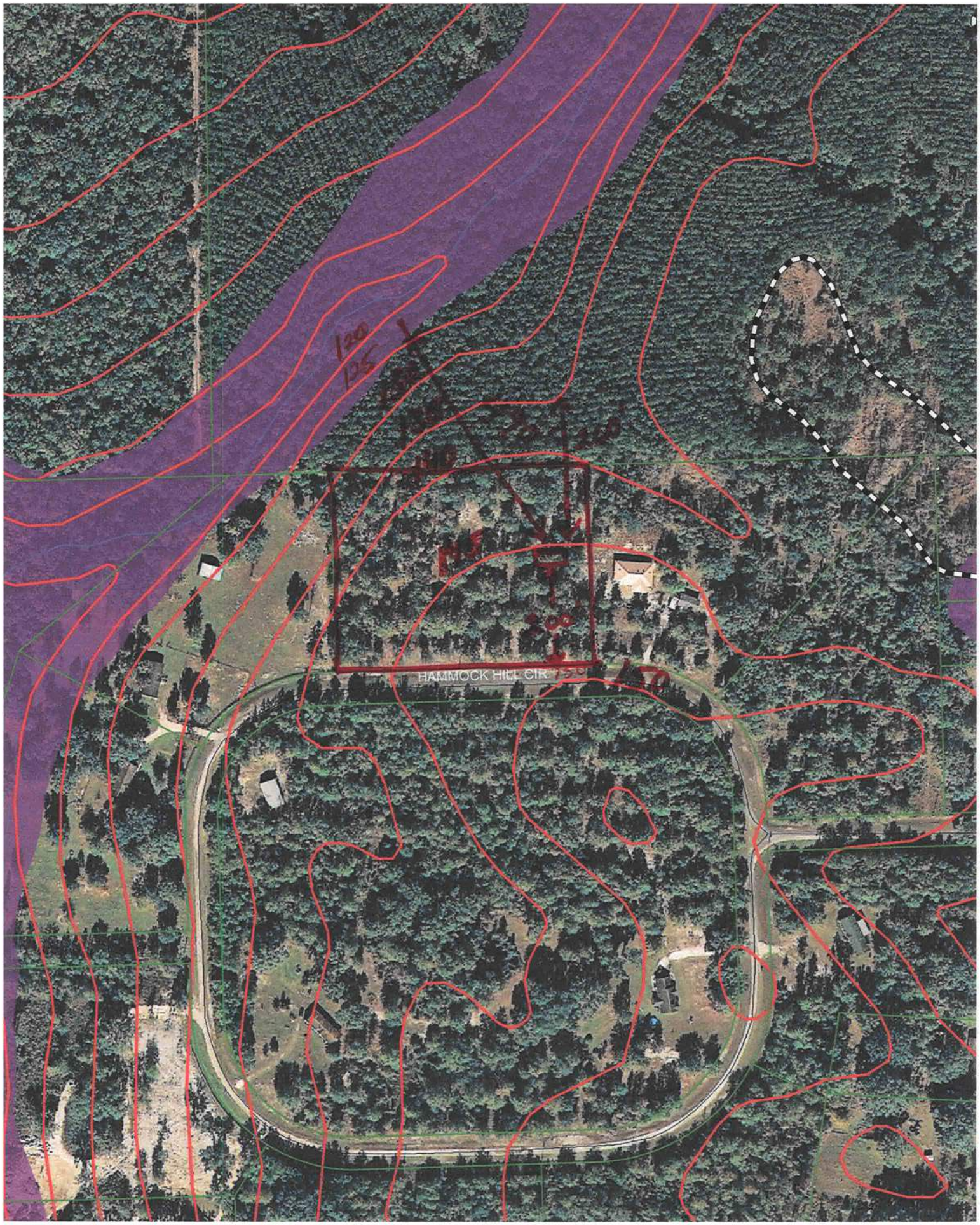
Subscribed and sworn to (or affirmed) before me this 22 day of October, 2010, by Hernon R Peters (Family Member) who is personally known to me or has produced FL DL as identification.

Shirley M Bennett
Notary Public

SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

COLUMBIA COUNTY, FLORIDA

By: Brian L Kepner
Name: BRIAN L. KEPNER
Title: LAND DEVELOPMENT REGULATION ADMINISTRATOR



1010-44

MEMORANDUM

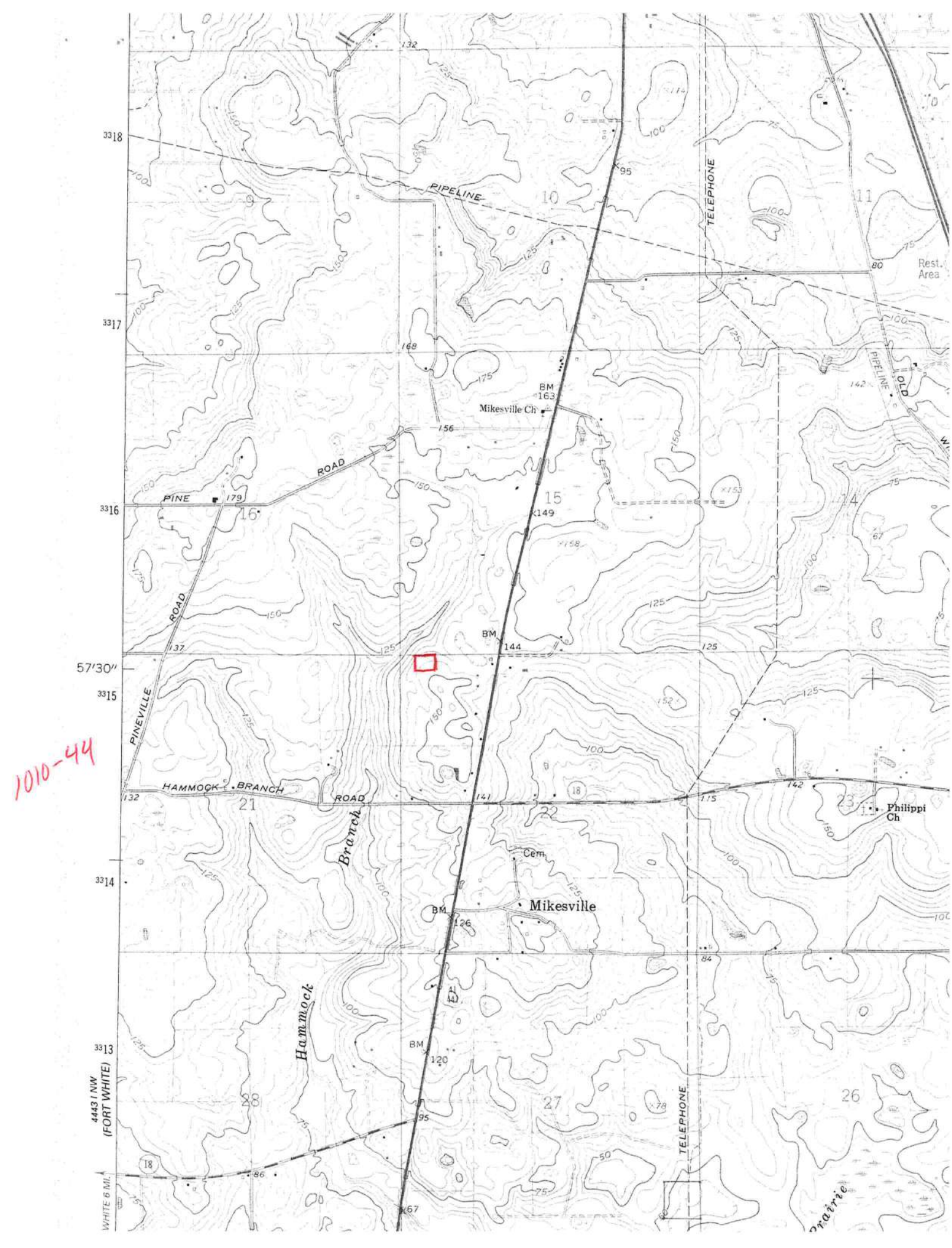
Date: 4 November 2010

To: File

From: Brian L. Kepner, Land Development Regulation Administrator

Re: Mobile Home Move-on Permit Application 1010-44 (Peters)

The mobile home is being proposed to be set up at approximately the 145 foot contour (AMSL). Approximately 200 feet from the road which is at approximately 150 foot (AMSL). The elevation of the property decreases from the southeast corner to northwest corner 20 feet within an approximate distance of 600 feet. The slope continues another 125 feet dropping another 10 feet to a low lying area. This makes the angle of slope at a ratio of 1foot for every 25 feet of distance (1:25). The proposed location of the mobile home from SW Hammock Hill Circle (approximately 200 feet) and the ratio of slope of the property from southeast to the north and northwest and the additional distance beyond the lot to the low lying area have no practical relationship with requiring the mobile home to be set one (1) foot above the road and the prevention of water damage to the mobile home. The installer is allowed to set the mobile home on existing grade in accordance with all applicable codes.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TELEPHONE
Rest. Area
OLD PIPELINE
Mikesville Ch
BM 163
PINE
ROAD
PINEVILLE ROAD
BM 144
HAMMOCK BRANCH ROAD
Philippi Ch
Cem
Mikesville
BM 126
Hammock Branch
BM 120
TELEPHONE
Prairie
4443 I NW
(FORT WHITE)
WHITE 6 MI.
1010-44

CERTIFICATE OF

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 22-6S-17-09736-107 **Building permit No.** 000028980

Permit Holder RONNIE NORRIS

Owner of Building HERNON & JOYCE PETERS

Location: 355 SW HAMMOCK HILL CIRCLE

Date: 11/29/2010

Troy Green

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

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: 10/25/2010 **DATE ISSUED:** 10/28/2010

ENHANCED 9-1-1 ADDRESS:

329 SW HAMMOCK HILL CIR

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

22-6S-17-09736-107

Remarks:

READDRESSED 1 DEC 2010: 2ND LOCATION ON LOT 7 PINE OAK HAMMOCK S/D. NOTE: WAS ISSUED AS 355 SW HAMMOCK HILL CIR BASED ON SITE PLAN SHOWING ACCESS SAME AS 353 SW HAMMOCK HILL CIR.

Address Issued By: S/ 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.

1832

± 28980

Laurie Hodson

From: Ron Croft
Sent: Wednesday, December 01, 2010 2:54 PM
To: Laurie Hodson
Subject: Address Correction
Attachments: 329_SW_HAMMOCK_HILL_CIR.pdf

Laurie

Ref parcel number: 22-6S-17-09736-107

Initial address to 2nd location on parcel was issued as 355 SW Hammock Hill Cir. Later identified that access shown on site plan was NOT correct. Corrected address is 329 SW Hammock Hill Cir.

See attached.

Ron

Ronal N. Croft
Columbia County 911 Addressing / GIS Department
P.O. Box 1787
Lake City, FL 32056-1787
Phone: 386-758-1125
Fax: 386-758-1365
E-Mail: ron_croft@columbiacountyfla.com