DATE 04/06/2015

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000032842

APPLICANT GLENN WILLIAMS JR PHONE 344-3669

ADDRESS 593 NE MONTANA ST LAKE CITY FL 32055

OWNER BKL INVESTMENTS CO. PHONE 386-466-8261

ADDRESS 338 NE DIANA TERR LAKE CITY FL 32055

CONTRACTOR GLENN WILLIAMS JR PHONE 344-3669

LOCATION OF PROPERTY 441 N, R TAMMY LN, R DIANA TERR, 4TH LOT ON 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 RSF/MH-2 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 17-3S-17-04967-006 SUBDIVISION FIVE POINTS ACRES

LOT 6 BLOCK PHASE UNIT TOTAL ACRES 1.30

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
		IH105458	X Glenn Williams Jr

Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident
EXISTING	15-0114	TC	TC	N

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

AUTHORIZATION ON FILE

Check # or Cash CASH

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic 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 $ 91.68 WASTE FEE $ 96.54

FLOOD DEVELOPMENT FEE $ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ **TOTAL FEE** 513.22

INSPECTORS OFFICE 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.

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 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 1-11) Zoning Official 3-30-15 TC Building Official TM 3/27/15

AP# 1503-65 Date Received 3-25-15 By LH Permit # 32842

Flood Zone X Development Permit N/A Zoning (RSF MH) (2) Land Use Plan Map Category RLD

Comments 1 Foot Above Rd. Front

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

☑ Site Plan with Setbacks Shown ☑ EH # 15-0119 ☐ EH Release ☑ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Installer Authorization ☑ State Rd Access ☑ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☑ F W Comp. letter ☑ App Fee Pd ☑ VF Form

IMPACT FEES: EMS Fire Corr ☑ Out County ☐ In County

Road/Code School = TOTAL Suspended March 2009 ☑ Ellisville Water Sys

17-35-17

Property ID # 04967-006 Subdivision Five Points Acres S/D Lot 6

- New Mobile Home ____ Used Mobile Home ✓ MH Size 14x70 Year 85
- Applicant Glenn Williams JR Phone # 344-3669
- Address 593 NE Montana St
- Name of Property Owner B.K.L. Investment Co. Phone# 386-466-8261
- 911 Address 338 NE Diana Terr Lake City FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Valarie Taylor Phone # 386-466-8261
- Address 289 SE Chandler Court Lake City FL 32058
- Relationship to Property Owner Owner (Contract Agreement for Deed)
- Current Number of Dwellings on Property 0
- Lot Size 1.3 Total Acreage 1.3
- 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 441 N (Marion St) To
- Driving Directions to the Property Tommy Lane Rt to Diana Ter Rt. 4 Lot on Rt.
- Name of Licensed Dealer/Installer Glenn Williams JR Phone # 344-3669
- Installers Address 593 NE Montana St Lake City FL 32055
  - License Number IH1054858 Installation Decal # 24106

Wilbert called 3.30.15.

JW spoke w/ GLENN 3.31.15 IN PERSON. (EH)

~~(FL 544.59 MARION)~~

$513.22 (April)

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Glenn Williams JR License # IH1054858

911 Address where home is being installed 289 Chadder Ct Lake City FL 32055

Manufacturer Edge Length x width 14X70

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 GW

New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

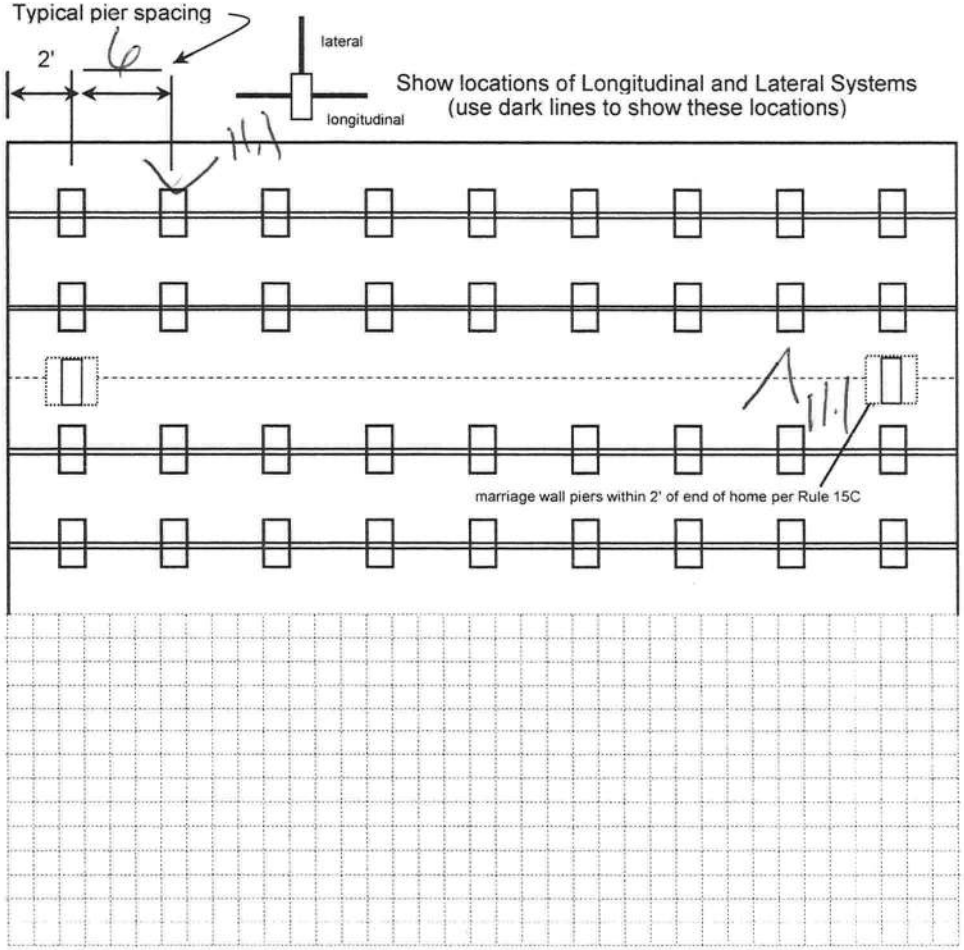
Home is installed in accordance with Rule 15-C ☒

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 24106

Triple/Quad ☐ Serial # FAFLIAB30707741G

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

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.

PIER PAD SIZES

I-beam pier pad size 17X22

Perimeter pier pad size 17X22

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

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 X 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer 2

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

OTHER TIES

	Number
Sidewall	6
Longitudinal	28
Marriage wall	0
Shearwall	6

COLUMBIA COUNTY PERMIT WORKSHEET

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 280 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 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 Glenn Williams Jr

Date Tested 3-1-15

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 X Other _____.

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
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 _____

Type gasket _____
Pg. _____

Installed:
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

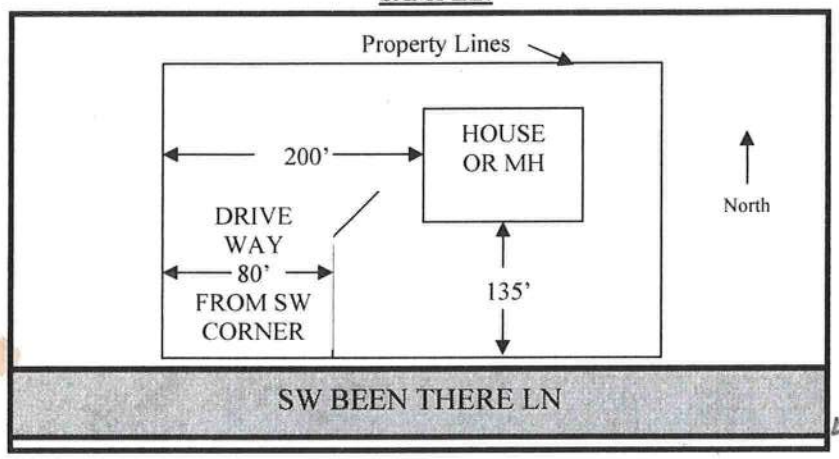
Skirting to be installed. Yes _____ No _____
Dryer vent installed outside of skirting. Yes _____ N/A _____
Range downflow vent installed outside of skirting. Yes _____ N/A _____
Drain lines supported at 4 foot intervals. Yes _____
Electrical crossovers protected. Yes _____
Other : _____

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

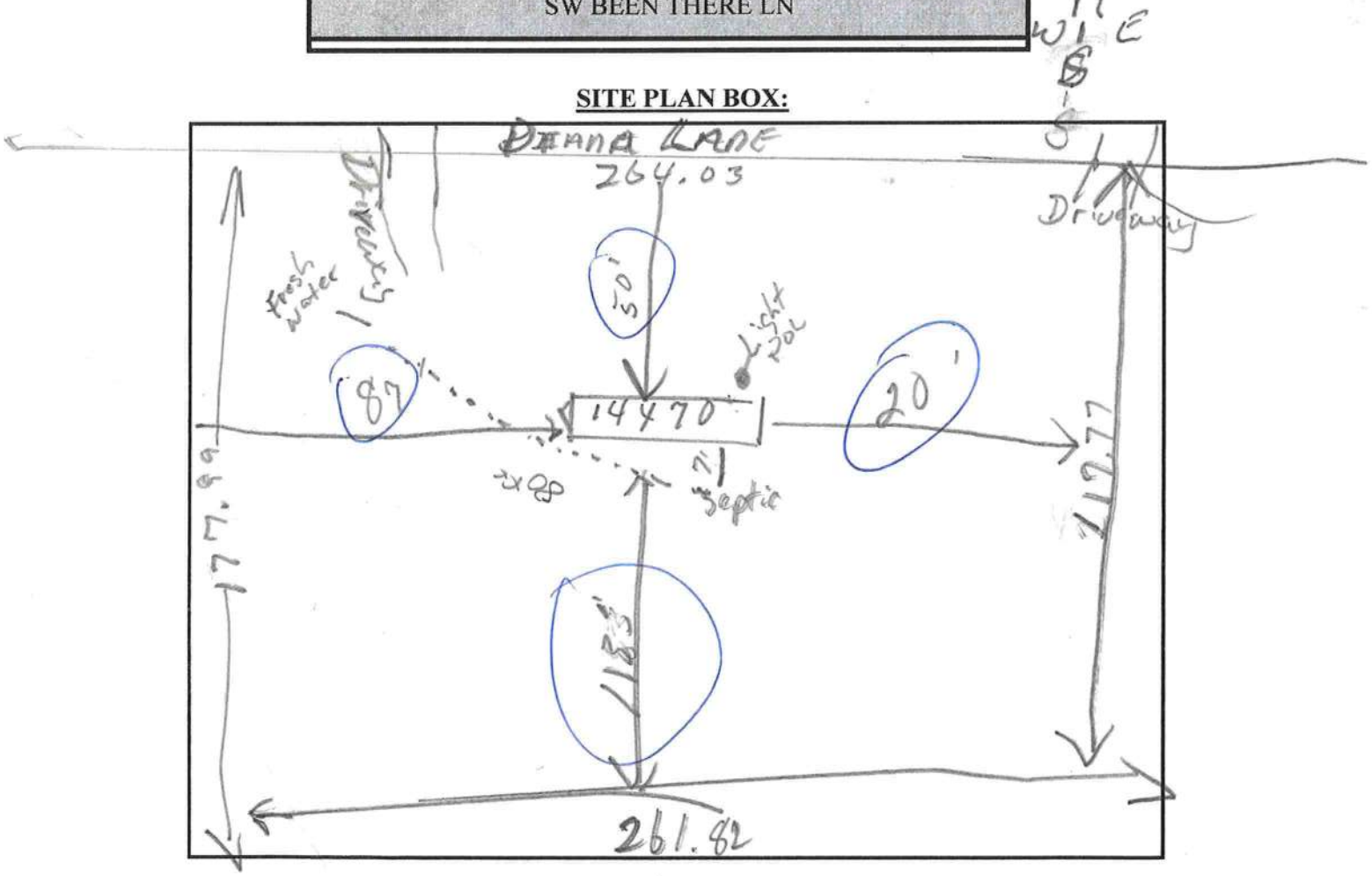
Installer Signature Glenn Williams **Date** 3-3-15

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:



CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1503-65

DATE RECEIVED _____ BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Valarie Taylor PHONE _____ CELL 466-8261

ADDRESS 289 SE Cheddar Ct. Lake City FL 32055

MOBILE HOME PARK _____ SUBDIVISION Five Points Acres S/D Lot 6

DRIVING DIRECTIONS TO MOBILE HOME 441 N, (R) Tammy LN, (R) Diana Terr, 4th Lot on Rt/Lt

MOBILE HOME INSTALLER Glenn Williams Jr PHONE _____ CELL 344-3669

MOBILE HOME INFORMATION

MAKE Edge YEAR _____ SIZE 14 X 70 COLOR Brown/Tan

SERIAL No. GAFL IA F30707416

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

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

F FLOORS ( ) SOLID ( ) WEAK (✓) HOLES DAMAGED LOCATION _

P DOORS ( ) OPERABLE ( ) DAMAGED

F 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

$50.00

Date of Payment: 3-25-16

Paid By: Glenn Williams Jr

Notes: 1503-65 (Out of Co. Submitted) MH already on this site)

EXTERIOR:

F WALLS / SIDDING ( ) 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: Repair Ceilings & Walls

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Crews ID NUMBER 306 DATE 3-26-15

Columbia County Property Appraiser

updated: 3/19/2015

2014 Tax Year

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print

Parcel: 17-3S-17-04967-006

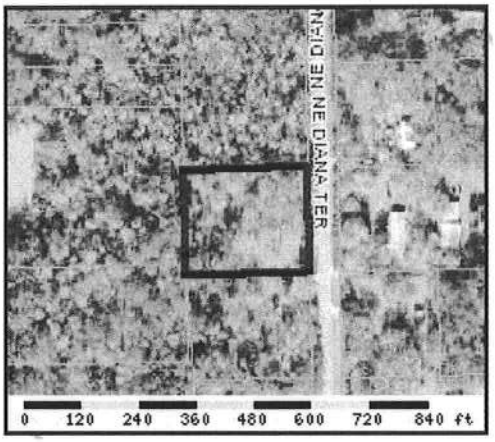
<< Next Lower Parcel | Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	BKL INVESTMENT CO		
Mailing Address	672 EAST DUVAL ST LAKE CITY, FL 32055		
Site Address			
Use Desc. (code)	VACANT (000000)		
Tax District	2 (County)	**Neighborhood**	17317
Land Area	1.300 ACRES	**Market Area**	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		

LOT 6 FIVE POINTS ACRES S/D. ORB 588-795, DC ALLEN WADE STONE 1029-1626, PROB 1164-163, QC 1164-1599, WD 1164-1601, WD 1164-2501 DC (DC JAMES CLAYBORN 1203-1295), PROB 1208-2523 THRU 2534 & PR DEED 1221-244, WD 1289-2089



Property & Assessment Values

2014 Certified Values		
Mkt Land Value	cnt: (0)	$8,825.00
Ag Land Value	cnt: (2)	$0.00
Building Value	cnt: (0)	$0.00
XFOB Value	cnt: (0)	$0.00
Total Appraised Value		$8,825.00
Just Value		$8,825.00
Class Value		$0.00
Assessed Value		$8,825.00
Exempt Value		$0.00
Total Taxable Value		Cnty: $8,825 Other: $8,825 | Schl: $8,825

2015 Working Values

NOTE:
2015 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/18/2015	1289/2089	WD	I	Q	01	$12,000.00
9/9/2011	1221/244	PR	I	U	30	$100.00
1/5/2009	1164/2501	WD	I	Q	02	$13,000.00
12/22/2008	1164/1599	QC	I	U	01	$100.00
12/22/2008	1164/1601	WD	I	Q		$12,500.00
3/1/1985	588/795	WD	V	Q		$10,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

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

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

BKL INVESTMENT CO.

Filing Information

Document Number	P06000003709
FEI/EIN Number	204109575
Date Filed	01/09/2006
State	FL
Status	ACTIVE
Last Event	MERGER
Event Date Filed	05/28/2013
Event Effective Date	NONE

Principal Address

672 E. DUVAL ST.
LAKE CITY, FL 32055

Mailing Address

672 E. DUVAL ST.
LAKE CITY, FL 32055

Registered Agent Name & Address

BULLARD, AUDREY S.
2753 E. US HWY. 90
LAKE CITY, FL 32055

Officer/Director Detail

Name & Address

Title DP

KHACHIGAN, MARTHA JO
362 STREAMSIDE CT.
LAKE CITY, FL 32055

Title DT

LANE, SUE D.
421 SW HARMONY CT.
LAKE CITY, FL 32055

Title DV

BULLARD, CHRIS A.
P.O. BOX 1432
LAKE CITY, FL 32056-1432

Title DS

BULLARD, AUDREY S.
P.O. BOX 1733
LAKE CITY, FL 32056-1733

Annual Reports

Report Year	Filed Date
2013	03/05/2013
2014	02/03/2014
2015	02/17/2015

Document Images

02/17/2015 -- ANNUAL REPORT	View image in PDF format
02/03/2014 -- ANNUAL REPORT	View image in PDF format
03/05/2013 -- ANNUAL REPORT	View image in PDF format
02/20/2012 -- ANNUAL REPORT	View image in PDF format
03/09/2011 -- ANNUAL REPORT	View image in PDF format
02/08/2010 -- ANNUAL REPORT	View image in PDF format
02/26/2009 -- ANNUAL REPORT	View image in PDF format
02/19/2008 -- ANNUAL REPORT	View image in PDF format
02/05/2007 -- ANNUAL REPORT	View image in PDF format
01/09/2006 -- Domestic Profit	View image in PDF format


Parcel
Panel
City
County
Search
Parcel
Twn Rng Sec
County Select
Address
Results
Region
Select County: :
Columbia
NW Farley Pl
Active County: Columbia
Pan tool active
NE Ralph Greene St
NE Tammy Ln
NE Tammy Ln
441
N US Highway 441
NW Deer Run Gln
NE Ryan Gln
NE Tomona Gln
NW Pitts Gln
NE Delk Gln
US-441
COLUMBIA COUNTY FLORIDA
12023C0285C
Effective Date: 2/4/2009
Preliminary Data Available: N/A
NW Ernest Greene Gln
NE Chapple Gln
441
N US Highway 441
NW Joliet Ct
NE Jerry Gln
NW Tweedale Ln
NE Diana Ter
NE Diana Ter
NE Colvin Ave
NE Colvin Ave

376 ft

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Glenn Williams Sr PHONE 386-344-3669

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 Valarie Taylor License #:	Signature Valarie Taylor Phone #:
MECHANICAL/ A/C _____	Print Name Valarie Taylor License #:	Signature Valarie Taylor Phone #:
PLUMBING/ GAS	Print Name Valarie Taylor License #:	Signature Valarie Taylor Phone #:

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.

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

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwanee County

OWNERS NAME Valarie Taylor PHONE 386-466-82[illegible] CELL

INSTALLER Glenn Williams JR PHONE 386-344-3669 CELL

INSTALLERS ADDRESS 593 NE Montana St Lake City FL

MOBILE HOME INFORMATION

MAKE EDGE YEAR 85 SIZE 14 X 70

COLOR Brown Tan SERIAL No. GAFLIAE30707741-6

WIND ZONE II SMOKE DETECTOR 2

INTERIOR:
FLOORS good
DOORS good
WALLS good
CABINETS Good
ELECTRICAL (FIXTURES/OUTLETS) Good

EXTERIOR:
WALLS / SIDDING Good
WINDOWS Good
DOORS Good

INSTALLER: APPROVED _____ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME _____

Installer/Inspector Signature Glenn Williams SR License No. IH 1054850 Date 3-03-15

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 _____ Date _____

Home Already on Property.

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: 3/19/2015 **DATE ISSUED:** 3/24/2015

ENHANCED 9-1-1 ADDRESS:

338 NE DIANA TER

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

17-3S-17-04967-006

Remarks:

ADDRESS FOR PROPOSED 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.

3140

BKL INVESTMENTS

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I. (We). BKL Investment Co.

as the owner of the below described property:

Property tax Parcel ID number 17-35-17-04767-006

Subdivision (Name, lot, Block, Phase) Five Points Acres S/D Lot 6

Give my permission for Valarie Taylor to place a

Circle one (Mobile Home) Travel Trailer Utility Pole Only Single Family Home Barn Shed Garage Culvert Other

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Owner Signature Date 3/26/15

Owner Signature Date

Owner Signature Date

Sworn to and subscribed before me this 25th day of March, 2015. This

(These) person(s) are (personally known to me) or produced ID (Type)

Sue D Lane
Notary Public Signature

SUE D. LANE
Commission # EE 196392
Expires June 18, 2016
Bonded Thru Troy Fain Insurance 800-385-7019

Notary Stamp

County fax #
758-2160

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

April 3, 2015

To: Columbia County Building Department

Description of Well to be installed for Customer VALERIE TAYLOR

Located @ Address: DIANA TERR LOT 6 5 POINTS ACRES

1 HP 15 GPM submersible pump, 1 ¼" drop pipe, 86 gallon captive tank, and backflow prevention. With SRWMD permit.

Bruce N Park

Sincerely,
Bruce N. Park
President

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

PERMIT NO. 15-0114
DATE PAID: 2/25/15
FEE PAID: $10.00
RECEIPT #: 1127937

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: BKL Invest. (Valerie Taylor)

AGENT: Robert W Ford NFST INC TELEPHONE: (386) 755 6372

MAILING ADDRESS: 580 NW Gordon Rd LC Fla 32055

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 GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 6 BLOCK: / SUBDIVISION: Five Points Acres PLATTED: _____

PROPERTY ID #: 17-3S-17 04967-006 ZONING: M/H I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 1.13 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

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

PROPERTY ADDRESS: 354 NE Diania ST

DIRECTIONS TO PROPERTY: 441 North To Tammy Lane TR Follow to Diania TR Follow to Property on Right

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sq/Ft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	M/H	3	14x70 980	
2				
3				
4				

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

SIGNATURE: Robert W. Ford I DATE: 2/25/15

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

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

PERMIT #: 12-SC-1589770
APPLICATION #: AP1177937
DATE PAID: 2/25/15
FEE PAID: 310.00
RECEIPT #: 2011579
DOCUMENT #: PR966180

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: VALERIE*15-0114 TAYLOR

PROPERTY ADDRESS: 354 NE DIANA St Lake City, FL 32055

LOT: 6 BLOCK: SUBDIVISION: Five Points Acres

PROPERTY ID #: 04967-006 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER] [OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [900] GALLONS / GPD Septic CAPACITY
A [ ] GALLONS / GPD N/A CAPACITY
N [ ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS]
K [ ] GALLONS DOSING TANK CAPACITY [ ]GALLONS @[ ]DOSES PER 24 HRS #Pumps [ ]

D [375] SQUARE FEET Drainfield SYSTEM
R [ ] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [ ] STANDARD [ ] FILLED [x] MOUND [ ]
I CONFIGURATION: [x] TRENCH [ ] BED [ ]
N
F LOCATION OF BENCHMARK: Nail with pink ribbon in 20" Oak tree.
I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [6.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [36.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O T H E R
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.
The licensed contractor installing the system is responsible for installing the minimum category of tank in accordance with s. 64E-6.013(3)(f), FAC.

SPECIFICATIONS BY: Robert W Ford TITLE: Master Contractor

APPROVED BY: Jeremy X Clifford TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 03/03/2015 EXPIRATION DATE: 09/03/2016

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

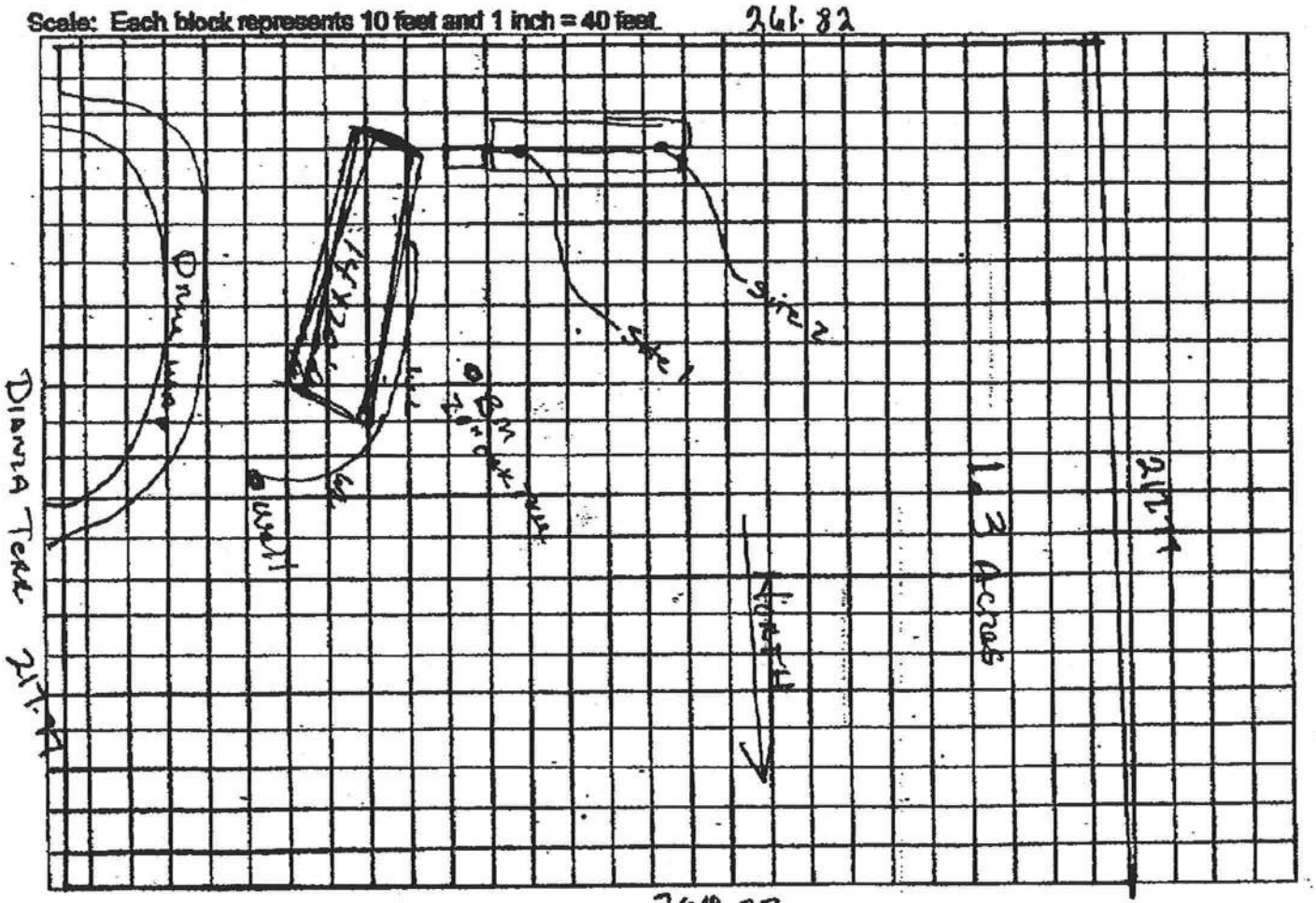
v 1.1 8 AP1177937 98952885

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 15-0114

PART II - SITEPLAN

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



Notes:

BKL Investment. Valerie Taylor
Lot 6 Five Points Acres 1.3 Acres
17-35-17-04967-006

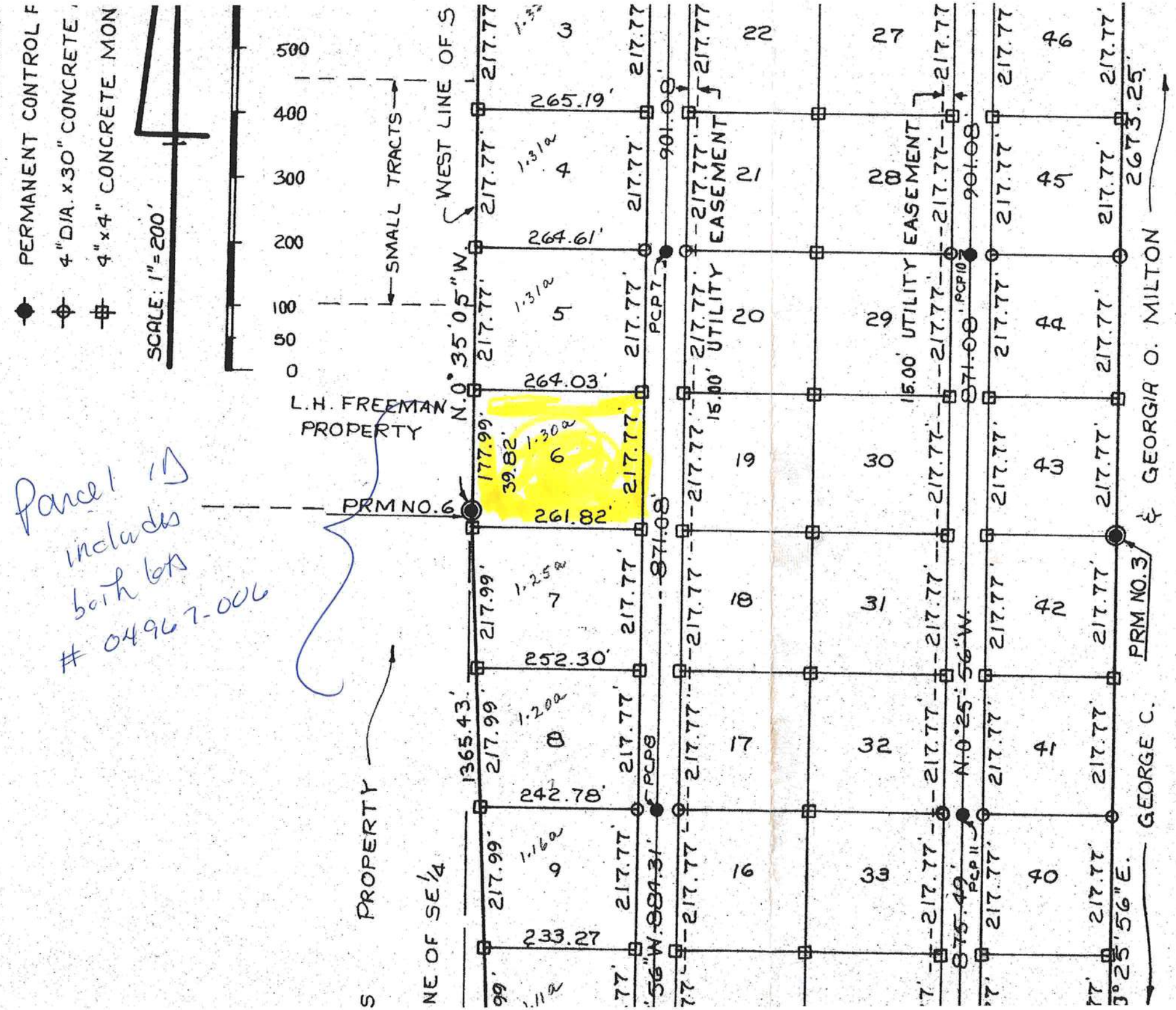
Site Plan submitted by: Robert W Todd Jr 2/25/15 Agent

Plan Approved XO Not Approved ____ Date 3/3/15

By _____ Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, (08/09) (Obsoletes previous editions which may not be used) Incorporated: 64C-9.001, FAC
(Stock Number: 5744-002-4015-6)



Parcel ID includes both lots # 04967-006

SIGNED J. Mack Carter Jr

SIGNED John D. Carter

SIGNED J. D Carter

ACKNOWLDGEMENT:

STATE OF FLORDA

COUNTY OF COLUMBIA

ON THIS 16th DAY OF December,
OWNERS, TO E WELL KNOWN AND KNOWN
ACKNOWLEDGD THAT THEY EXECUTED TH
MAY BE RECORDED.
I FURTHER CETIFY THAT THE SAID COLVIN
TAKEN AND IADE BY AND BEFORE ME, T
VOLUNTARIL AND WITHOUT ANY CONSTRA

WITNESS M HAND AND OFFICIAL SEAL AT L

SIGNED Clara H. Blocker
NOTARY PUBLIC, STATE OF FLORIDA
M COMMISSION EXPIRES August 5

ACKNOWLEDGEMENT:

STATE OF FLORIDA

COUNTY OF COLUMBIA

ON THE 16th DAY OF December,
AND NOWN TO ME TO BE THE INDIVIDUAL
EXECITED THE SAME FOR THE PURPOSES

WITNESS MY HAND AND OFFICIAL SEAL

SIGIED Kathleen W. Bagw
NOTARY PUBLIC, STATE OF FLORI