

DATE 05/06/2005

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000023111

APPLICANT ROBERT MINNELLA PHONE 352 486-0016
ADDRESS 11451 NE 83 TERR BRONSON FL 32621
OWNER TAMMY PRINCE PHONE 352 495-5085
ADDRESS 1768 SW SHILOH STREET FT. WHITE FL 32038
CONTRACTOR AL PINSON PHONE 352 258-5888
LOCATION OF PROPERTY 47S, TL ON 27, TR ON SHILOH ST, 2 MILES ON LEFT, YELLOW/
BLACK

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION .00
HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 14-7S-16-04226-213 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 5.06

000000649 Y IH0000019
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
CULVERT 05-0432-N BK Y
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD
SPECIAL FAMILY LOT

Check # or Cash 2846

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 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
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by
Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by
M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 22.68 WASTE FEE \$ 49.00
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 321.68

INSPECTORS OFFICE CLERKS OFFICE

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

Zoning Official BLK 06.05.05

Building Official OK JH 4-20-05

AP# 0504-58

Date Received 4-18-05 by LH

Permit # 649/23111

Flood Zone X

Development Permit NIA

Zoning A-3

Land Use Plan Map Category A-3

Comments

Special Family Lot

FEMA Map # _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☒ Site Plan with Setbacks shown ☐ Environmental Health Signed Site Plan ☐ Env. Health Release

☐ Well letter provided ☐ Existing Well

911

Revised 9-23-04

- Property ID 14-75-16-04226-213 Must have a copy of the property deed
- New Mobile Home ☒ Used Mobile Home _____ Year 2005
- Subdivision Information _____
- Applicant Robert Minnella Phone # (352)486-0016
- Address 11451 NE 83 Terr Bronson, FL 32621
- Name of Property Owner Tammy Prince Phone# (352)495-5085
- 911 Address 1768 SW Shiloh St, Ft White 32038
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progressive Energy
- Name of Owner of Mobile Home Tammy Prince Phone # (352)495-5085
- Address PO Box 1608 High Springs, FL 32655
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 327 X 673 Total Acreage 5.06
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
- Driving Directions 47 South to 27 (TL) to SW Shiloh St (TR)
Go approx 2 miles to prop on left w/ yellow & black
13th st MH sign". Drive back 500' to site.
- Is this Mobile Home Replacing an Existing Mobile Home no
- Name of Licensed Dealer/Installer Al Pinson Phone # (352)258-5888
- Installers Address 3131 NE 183 PL, Gainesville, FL 32609
- License Number IH0000019 Installation Decal # 290764

PERMIT NUMBER

Installer Al Puseen

License # 0000019

Address of home being installed 50 Shihoh St

Manufacturer

Fleetwood

Length x width

70x38

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

AP

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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 psi	3"	4"	5"	6"	7"	8"
1500 psi	4"	6"	7"	8"	8"	8"
2000 psi	6"	8"	8"	8"	8"	8"
2500 psi	7"	8"	8"	8"	8"	8"
3000 psi	8"	8"	8"	8"	8"	8"
3500 psi	8"	8"	8"	8"	8"	8"

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

17 1/2 x 25 1/2

Perimeter pier pad size

Other pier pad sizes (required by the mfg.)

14 x 14

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.

Pad Size	Sq In
16 x 16	256
16 x 18	288
18 5/8 x 18 5/8	342
16 x 22 1/2	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

POPULAR PAD SIZES

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 Johnson
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Tie Down Corp

OTHER TIES

Number
Sidewall 5' 4"
Longitudinal Marriage wall 4'
Shearwall 4'

PERMIT NUMBER

0014461012

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is _____ 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. 1 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 require anchors with 4000 _____ lifting capacity.

_____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Al Pivsen

Date Tested

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: _____ 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, mildew 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 _____

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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Date

PAGE 04

13TH ST HOMES

04/13/2005 13:44 3750592



State of Florida
DEPARTMENT OF
HIGHWAY SAFETY AND MOTOR VEHICLES
TALLAHASSEE, FLORIDA 32399-0500

FRED O. DICKINSON, III
Executive Director

MEMORANDUM

June 14, 2002

TO: All Anchor and Component Manufacturers

FROM: Philip R. Bergell, Program Manager *PB*
Bureau of Mobile Home and Recreational Vehicle Construction

SUBJECT: Lateral Arm Stabilizer Systems

To ensure consumer protection and to ensure that minimum standards are met in the installation of Lateral Arm Stabilizing Systems, it is necessary for us to create uniform installation standards for these systems. A secondary benefit of uniform standards will be the clarification of installation procedures for installers and for county and city inspectors performing field oversight.

Effective immediately all Florida lateral arm stabilizing instructions will include the following prescriptive number of systems:

Four (4) systems up to 52 feet
Six (6) systems from 52 to 80 feet

Five (5) 12 pitch roofs will require a minimum of the following number of lateral arm stabilizing systems, unless a greater number is specified by your engineering:

Six (6) systems up to 52 feet
Eight (8) systems from 52 to 80 feet

Your instructions should contain the following three (3) notes:

Note: 1) The use of this system requires sidewall vertical ties at no greater than 54" on center and allows for the use of 4" anchors.

Note: 2) Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5" anchor.

Note: 3) Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.

DIVISIONS/FLORIDA HIGHWAY PATROL - DRIVER LICENSES - MOTOR VEHICLES - ADMINISTRATIVE SERVICES
Neil Kirkman Building, Tallahassee, Florida 32399-0500

Patent Pending
May 2002

Minute Man anchors, inc.

Installation Instructions for Model LLBS Longitudinal and Lateral Bracing System Approved for Florida

Revised: 6/17/02

Note: Your set must be designed by a Registered Professional Engineer if all or one of the following conditions occur:

Location is within 1,500 feet of Coast	Roof eaves exceeds 16"
Pier Height exceeds 48"	Main beam spacing exceeds 99.5"
Sidewall height exceeds 96"	

1. Refer to the Home Manufacturer Installation Instructions for pier locations. 6" Disc anchors 48" long with vertical ties are required at maximum 5'-4" center along both sidewalls starting a maximum of 2'-0" in from each end of the home. Vertical ties must be used at all connection points furnished by the home manufacturer. Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs require a 5' anchor.
2. Refer to the Foundation Plans for the location of Longitudinal Lateral Bracing System. (See **Attached**). Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.
3. Remove turf to expose firm soil at each SD3 pad location.
4. Attach tube clip to SD3 pier pads (see Detail Assembly Drawing) center pad under beam, level pad. Angle Drive Pins may be driven vertically through four (4) slots in SD3 pier pad now or after home is totally set. Angle drive pins may be driven up to ten degrees (10) off of vertical. If you choose to drive pins after home is set, do not cover slots in pier pad.
5. Level home on concrete blocks or deluxe steel pier by Minute Man.
6. Install Longitudinal and Lateral Bracing in accordance with Foundation Plan and Detail Assembly Drawing.
7. Install vertical anchors, frame ties and stabilizers at each lateral arm system location..

Thank you for using Minute Man Products, Inc. If you have any questions, please call Toll Free at (800) 438-7277.

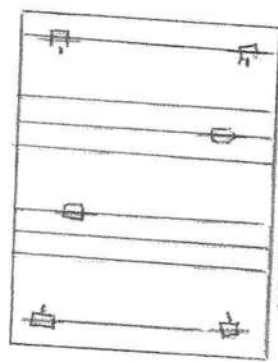
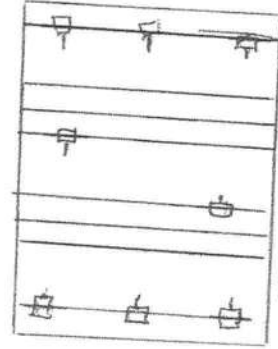
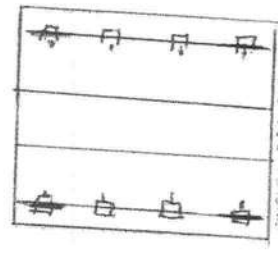
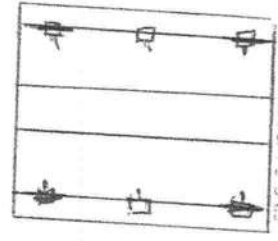
MMA007.2 R-2

305 West King St. East Flat Rock, North Carolina 28726

FLORIDA ZONE II AND III LONGITUDINAL AND LATERAL BRACING SYSTEMS PLACEMENT

For 5/12 Roof Pitch
Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. Systems must be as evenly spaced as possible.
Revised: 6/17/2002

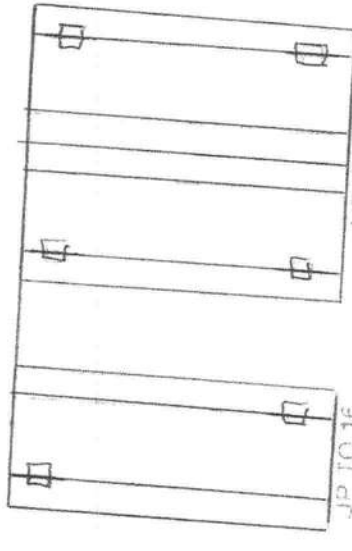
HOME DIMENSIONS REPRESENT BOX SIZE



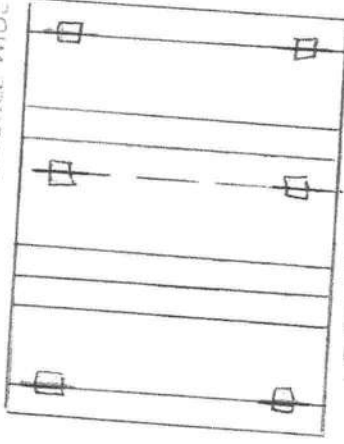
LONGITUDINAL BRACING SYSTEMS PLACEMENT FOR FLORIDA

Use 550 anchors and 180 square inch stabilizers with frame ties and vertical ties at maximum 5' intervals. Vertical ties must be used at all connector points furnished by the home manufacturer. All brace wall anchors must be used in accordance with the home manufacturer's instructions.

For Roof slopes up to 5/12 pitch
Systems must be placed no more than 16' from end of home



UP TO 32' DOUBLE WIDE



Columbia County Property Appraiser

2005 Proposed Values

DB Last Updated: 4/4/2005

Tax RecordProperty CardInteractive GIS MapPrint

Parcel: 14-7S-16-04226-213

Owner & Property Info		Search Result: 1 of 1	
Owner's Name	PRINCE TAMMY	Use Desc. (code)	NO AG ACRE (009900)
Site Address		Neighborhood	15716.01
Mailing Address	P O BOX 1608 HIGH SPRINGS, FL 32655	Tax District	3
Brief Legal	EAST HALF(5 ACRES) OF COMM NE COR OF NW1/4 OF SW1/4 RUN S 648.31 FT, W 654.56 FT FOR POB	UD Codes	
		Market Area	02
		Total Land Area	5.060 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (1)	\$27,324.00	Just Value	\$27,324.00
Ag Land Value	cnt: (0)	\$0.00	Class Value	\$0.00
Building Value	cnt: (0)	\$0.00	Assessed Value	\$27,324.00
XFOB Value	cnt: (0)	\$0.00	Exempt Value	\$0.00
Total Appraised Value		\$27,324.00	Total Taxable Value	\$27,324.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
2/17/2005	1038/844	QC	V	U	06	\$100.00

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						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
009900	AC NON-AG (MKT)	5.060 AC	1.00/1.00/1.00/1.00	\$5,400.00	\$27,324.00

Disclaimer

This information was derived from data which was compiled by the Columbia County Property Appraiser's Office solely for the government purpose of property assessment. The information shown is a **work in progress** and should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for

2015041008
9/5 Springs H 32655

Inst: 2003008313 Date: 04/22/2003 Time: 12:03
Doc Stamp-Deed : 0.70
MK DC, P. DeWitt Cason, Columbia County B: 981 P: 333

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 18th day of April, 2003,
by first party, Grantor, Gladys Louise Adkins
whose post office address is P.O. box 1608, Highsprings
to second party, Grantee, Tammy Marie Prince AND Gladys Louise Adkins
whose post office address is P.O. box 1608, Highsprings

WITNESSETH, That the said first party, for good consideration and for the sum of
Ten Dollars Dollars (\$ 10.00)
paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release
and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first
party has in and to the following described parcel of land, and improvements and appurtenances thereto in
the County of Columbia, State of FL. to wit:

Parcel # 14-75-160422-213

SEE EXHIBIT A.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Mendy E Warner
Signature of Witness

MENDY E WARNER
Print name of Witness

Marcel C Keen
Signature of Witness

Marcel C Keen
Print name of Witness

Bladys L. Adkins
Signature of First Party

Print name of First Party

Signature of First Party

Print name of First Party

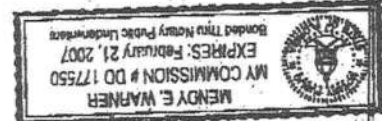
State of Florida }
County of Columbia }
On April 22, 2003 before me,

appeared Bladys Louise Adkins personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Mendy E Warner
Signature of Notary

Affiant Known Produced ID
Type of ID FL DL

(Seal)



State of Florida }
County of Columbia }
On _____ before me,

appeared _____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature of Notary

Affiant Known Produced ID
Type of ID _____

(Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer



STATE OF FLORIDA
DEPARTMENT OF HEALTH

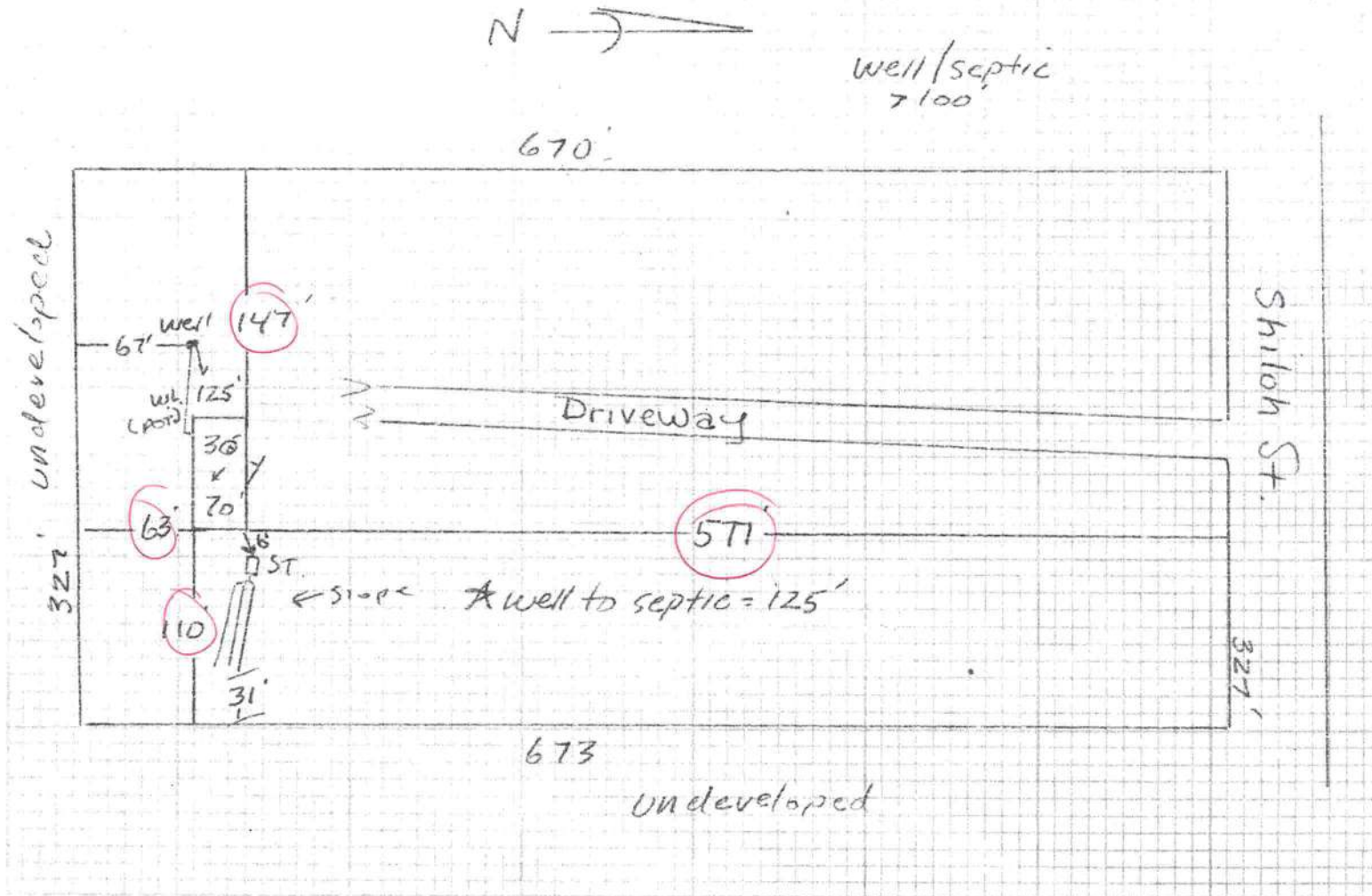
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Tammy Prince

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Ronald M. Smith

Signature

Agent

Title

Plan Approved _____

Not Approved _____

Date 4-19-05

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

INSTALLER AUTHORIZATION

DATE: 4-14-05

TO: Columbia Co

LICENSE NO: TH00000019

I AL PINSON give full consent to Robert Minnella

to pull any and all necessary permits on my behalf for mobile home set ups in

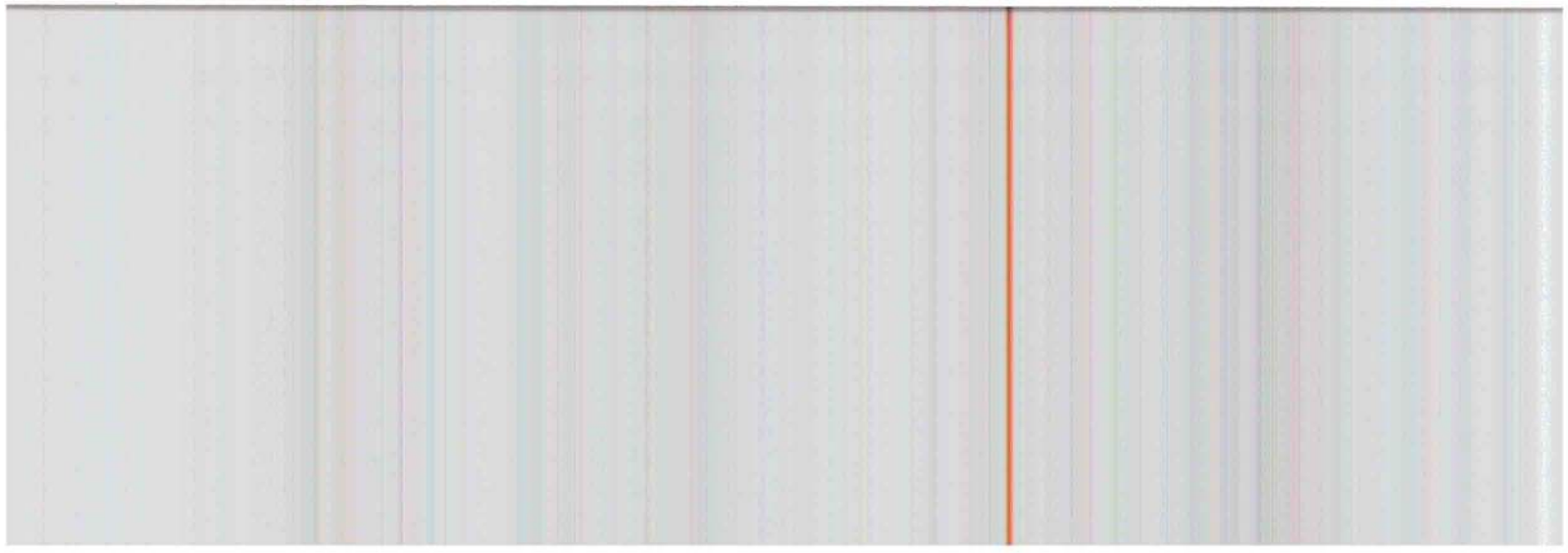
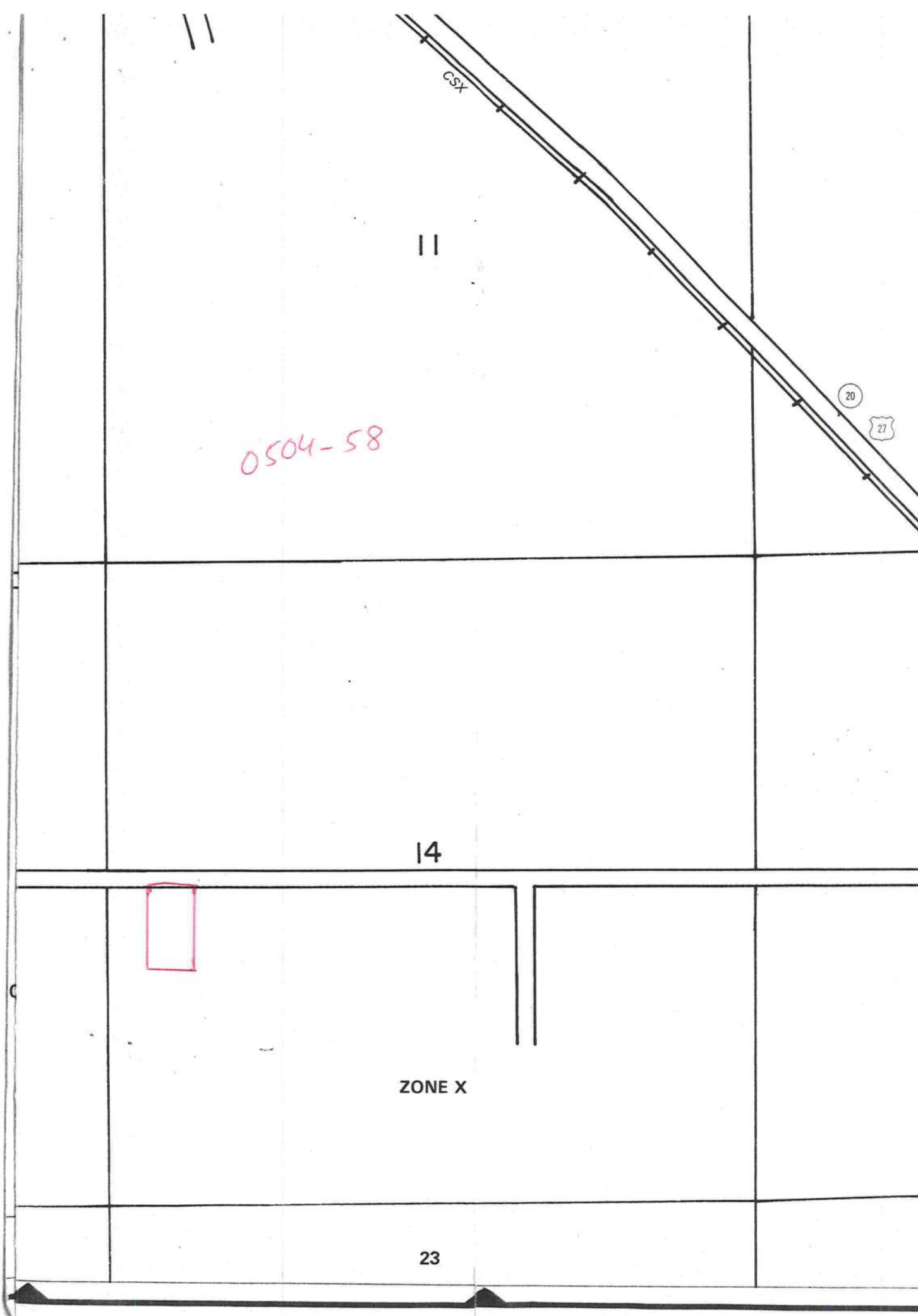
Columbia County.

Signed: *AL Pinson*

Sworn to me this day 14 of April, 2005

Notary Signature *Nancy S. Phelps*

NANCY S. PHELPS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD193088
EXPIRES 05/10/2007
BONDED THRU 1-888-NOTARY1





STATE OF FLORIDA
DEPARTMENT OF HEALTH

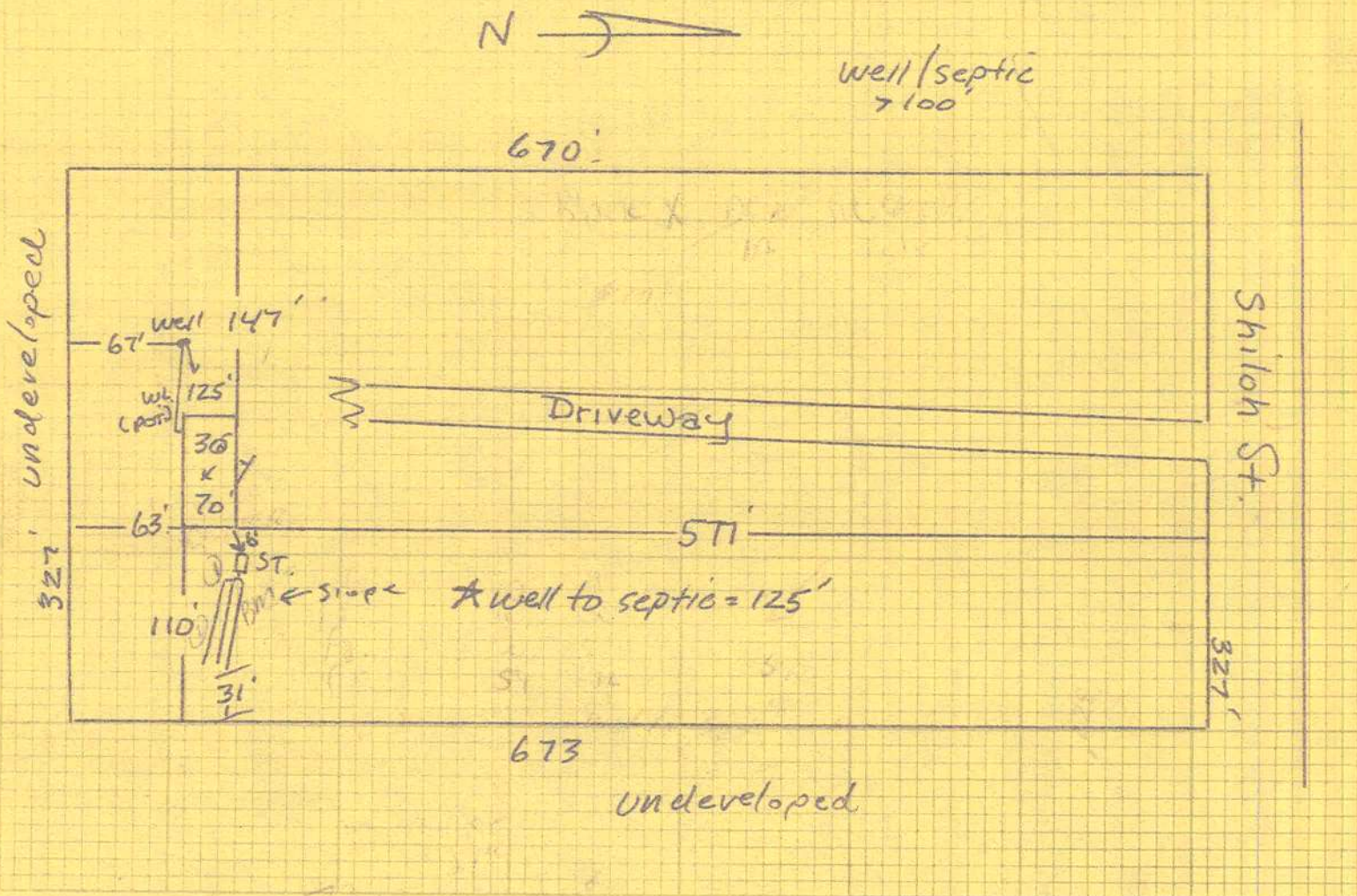
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0432N

Tammy P. Prince Jammy

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Ronald Marshall Signature
Plan Approved X Not Approved _____
By Salbi Haddy - ESI - COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

HUGHES WELL DRILLING & PUMP SERVICE

12367 N US HWY 441
LAKE CITY, FLORIDA 32055

OFFICE: (386)752-1840
FAX: (386)755-2934

E-MAIL:HUGWELL1840@AOL.COM

Columbia County Building and Zoning
P.O. Box 1529
Lake City, Fl. 32056-1529

April 20, 2005

Attn: Gale Tedder/Janis

Subject: Requested Info: Tammy Prince

- 1- 4" Deep Well
- 2- 1-hp Pump-20gpm
- 3- 82 Gallon Eqv. Bladder Tank
- 4- 1-Cycle Stop Valve
- 5- 1-1/4" Drop Pipe

If you have any further questions, please feel free to
phone me at above number.

Sincerely,

Ronnie Hughes

WE DRILL THE BEST AND SERVICE THE REST

Neggie
**Columbia County Building Department
Culvert Waiver**

**Culvert Waiver No.
000000649**

DATE: 05/06/2005

BUILDING PERMIT NO. 23111

APPLICANT ROBERT MINNELLA

PHONE 352 486-0016

ADDRESS 11451 NE 83RD TERR

BRONSON

FL 32621

OWNER TAMMY PRINCE

PHONE 352 495-5085

ADDRESS 140 NW COLIN COURT

LAKE CITY

FL 32055

CONTRACTOR MELVIN SHEPPARD

PHONE 623-2203

LOCATION OF PROPERTY 47S, TLO 27, TR ON SHILOH STREET, 2 MILES ON LEFT, YELLOW AND BLACK,
DRIVE BACK 500' TO SITE

SUBDIVISION/LOT/BLOCK/PHASE/UNIT _____

PARCEL ID # 14-7S-16-04226-213

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: *Robert Minnella*

A SEPARATE CHECK IS REQUIRED

MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE CULVERT WAIVER IS:

APPROVED

NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: *Private cdd*

SIGNED: *Janell Feagly*

DATE: *5/12/05*

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

COLUMBIA COUNTY

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

MAY 10 2005

PUBLIC WORKS DEPT.



FIXED
#2105

COLUMBIA COUNTY
FLORIDA

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 14-7S-16-04226-213

Building permit No. 000023111

Permit Holder AL PINSON

Owner of Building TAMMY PRINCE

Location: 1768 SW SHILOH STREET, FT. WHITE

Date: 07/27/2005



Tammy Prince

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

"
I, Gladys Louise Adkins have
divided and deeded, 5.0 acres to
Tammy Marie Prince, my daughter
for her to live in her new mobile
home.

Gladys Louise Adkins
P.O. Box 1608 High
Springs, Fl. 32655

If any questions, call 386-497-3975
5/4/05

Signed Gladys Louise Adkins
DOB 5-1-59

Fl. DL A325-292-59-661-0

Expires 2006

SS. 404-98-7549

NANCY S. PHELPS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD193088
EXPIRES 05/10/2007
BONDED THRU 1-888-NOTARY1

Nancy S. Phelps
Notary