

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official HO

Building Official T.C. 1-26-18

AP# 1801-83

Date Received 1/25

By HO

Permit # 36259

Flood Zone X

Development Permit _____

Zoning A3

Land Use Plan Map Category A

Comments _____

FEMA Map# _____

Elevation _____

Finished Floor 1st floor

River _____

In Floodway _____

☒ Recorded Deed or

☒ Property Appraiser PO

☒ Site Plan

EH #

18-0072

☒ Well letter OR

☐ Existing well

☐ Land Owner Affidavit

☐ Installer Authorization

☐ FW Comp. letter

☒ App Fee Paid

☐ DOT Approval

☒ Parent Parcel # 09387-000

☐ STUP-MH

☒ 911 App

☐ Ellisville Water Sys

☐ Assessment Paid on Property

☐ Out County

☐ In County

☒ Sub VF Form

Assigned by Property Appraisers office

Property ID # 25-5S-17-09387-003

Subdivision na

Lot# na

▪ New Mobile Home X Used Mobile Home _____ MH Size 28 x 60 Year 2018

▪ Applicant Dale Burd or Rocky Ford or Kimberly Koon Phone # 386-497-2311

▪ Address 546 SW Dortch Street, Fort White, FL, 32038

▪ Name of Property Owner Gary Witt + Tracy Witt Phone# 386-623-0852

▪ 911 Address 1818 SE CR 349, Lake City, FL 32025

▪ Circle the correct power company - FL Power & Light - (Clay Electric)
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Same Phone # Same

Address 2000 SE CR 349, Lake City, FL, 32025

▪ Relationship to Property Owner Same

▪ Current Number of Dwellings on Property 0

▪ Lot Size 272 x 800 Total Acreage 5

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home No

▪ Driving Directions to the Property US 441 South, TL CR 349, 1.7 miles on right

▪ Name of Licensed Dealer/Installer Brent Strickland Phone # 386-365-7043

▪ Installers Address 1294 Hamp Farmer Road, Lake City, FL, 32055

▪ License Number IH-1104218 Installation Decal # 43505

to state w/ date 1.26.18 + 1.30.18

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

Installer Bob Stekla License # TH1104218

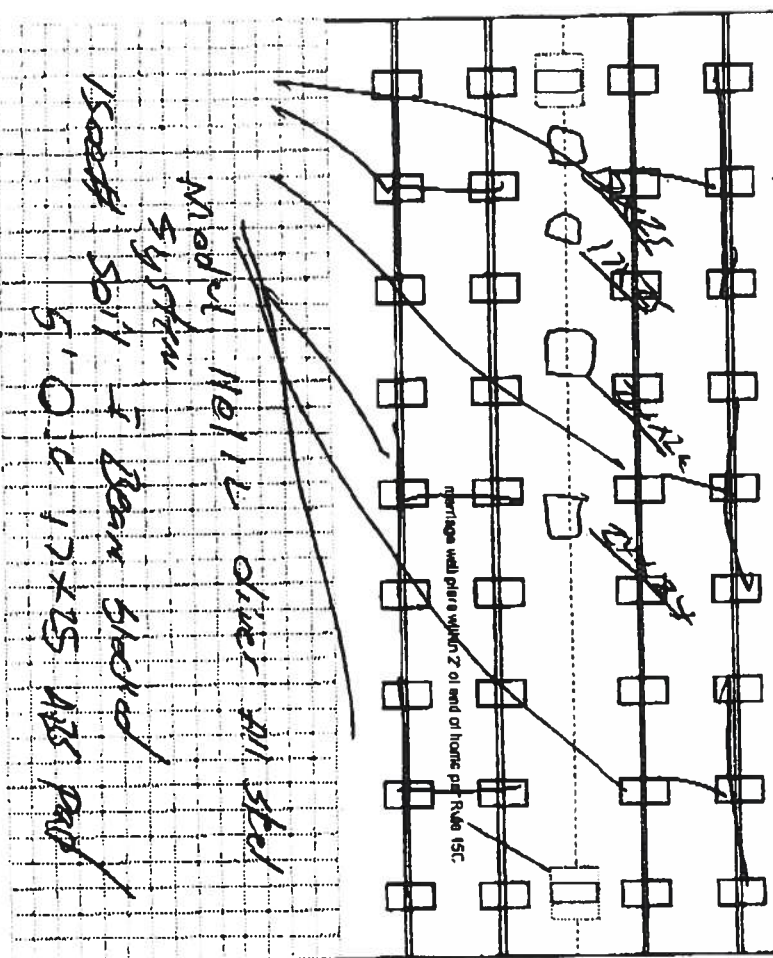
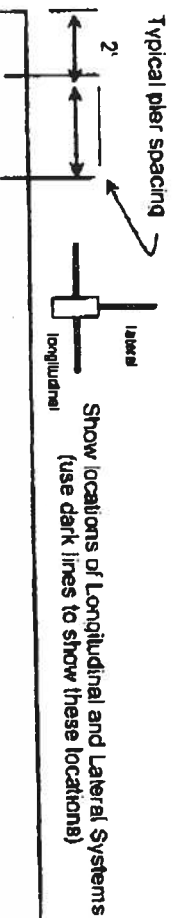
911 Address where home is being installed: SEE 309
1444 1/2 St 22025

Manufacturer Towr Ham Length x width 28' x 60'

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 ES



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 # 43505

Triple/Quad ☐ Serial # PERMIT 28376-3410AAS

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Foodler 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"	8"
1500 psf	4"	6"	7"	8"	9"	10"	10"
2000 psf	6"	8"	9"	10"	11"	12"	12"
2500 psf	7 1/2"	9"	10"	11"	12"	13"	13"
3000 psf	8"	10"	11"	12"	13"	14"	14"
3500 psf	8"	10"	12"	13"	14"	15"	15"

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

PIER PAD SIZES

I-beam pier pad size

12' x 25'

Perimeter pier pad size

16' x 16'

Other pier pad sizes (required by the mfg.)

24' x 24'

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers

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	448
24 x 24	576
26 x 26	676

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

ANCHORS

4 ft ☒ 5 ft ☒

FRAME TIES

within 2' of end of home spaced at 5' 4' OC ☒

OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) ☒

Manufacturer OTZ

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer OTZ

Number 25

Side wall 3

Longitudinal 3

Marriage wall 3

Shear wall 3

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

x 1800 x 1500 x 1700

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 1600 x 1500 x 1600

TORQUE PROBE TEST

The results of the torque probe test is 295 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 require anchors with 4000 lb. holding capacity.

BS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

BS

Date Tested

1-10-18

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: 6d Length: 6" Spacing: 24" o.c.
Walls: Type Fastener: 3d Length: 3" Spacing: 18" o.c.
Roof: Type Fastener: 3d Length: 3" Spacing: 18" o.c.
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 BS

Type gasket BS

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 infiltration 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

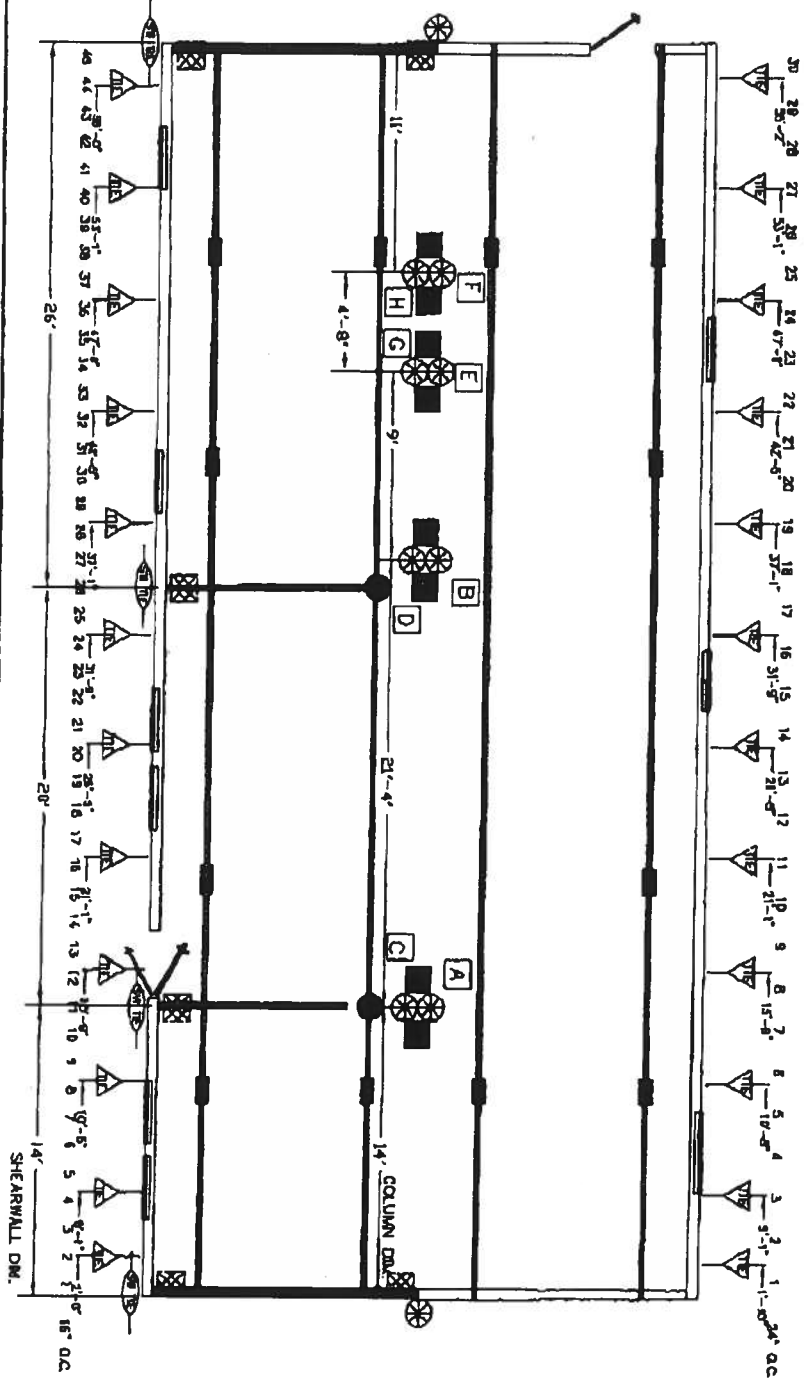
BS

Date

1-10-18

1500# Soil I Beam blocked 5' O.C 12x25 ABS PAD

Penimeter blocked 8' O.C 16x16



- 1-BEAM BLOCKING**
SEE SOL. BEARING CAPACITY CHARTS FOR SPACING
- 2-BEAM BLOCKING**
SEE SOL. BEARING CAPACITY CHARTS FOR PAD SIZE
- SHEARWALL BLOCKING**
- SHEARWALL FRAME TIE**
- CENTER LINE TIES**
- VERTICAL TIE**
MAX SPACING 9'-0" CENTER TO CENTER
- LONGITUDINAL TIES**
- BLOCKING LEGEND:**
- 1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS 48" OR GREATER WILL REQUIRE BLOCKING ON EACH SID.
- 2) 32" WIDE HOLES REQUIRED TO BE BLOCKED MIN 8'-0" ON CENTER BETWEEN COLUMNS.

TownHomes!

10000 N. 15th Ave. Suite 1000
P.O. Box 1050
Lakeland, FL 33809

DATE: 1-5-09

REV: R01

PROJECT: NEW

ORD: 1 (09)

Model: 2837-212

PHI: BLOCKING PLAN



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

LICENSED QUALIFIER AUTHORIZATION

I, Michael A. Boland (license holder name), licensed qualifier
for Aciz A/C of Ocala LLC (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or 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 and sign permits; call for inspections and sign subcontractor verification forms on my behalf

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dale Reed</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>[Signature]</u>
3. <u>[Signature]</u>	3. <u>[Signature]</u>
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 agents, 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.

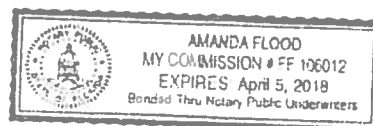
[Signature] License Qualifiers Signature (Notarized) CAC1817716 License Number ES120420 Date 11/17/15

NOTARY INFORMATION
STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland
personally appeared before me and is known by me or has produced identification
(type of I D) _____ on this 17th day of November 20 15

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





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

LICENSED QUALIFIER AUTHORIZATION

I, Michael Reader (license holder name), licensed qualifier
for Madison Services LLC (company name), do certify that
the below referenced person(s) listed on this form is/are contracted/hired by me, the license
holder, or 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 and
sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Richard Ford</u>	1. <u>[Signature]</u>
2. <u>Naila R. Sured</u>	2. <u>[Signature]</u>
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 agents, 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.

[Signature]
Licensed Qualifiers Signature (Notarized)

EL13M2S15
License Number

11/2/15
Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Michael Reader,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 2 day of Nov, 2015.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



**THIS INSTRUMENT PREPARED BY
AND RETURN TO::**

MARLIN M. FEAGLE, ESQUIRE
MARLIN M. FEAGLE, ATTORNEY AT LAW, P.A.
153 NE Madison Street
Post Office Box 1653
Lake City, Florida 32056-1653
Florida Bar No. 0173248

The preparer of this instrument has performed no title examination nor has the preparer issued any title insurance or furnished any opinion regarding the title, existence of liens, the quantity of lands included, or the location of the boundaries. The names, addresses, tax identification numbers and legal description were furnished by the parties to this instrument.

Inst: 201712023577 Date: 12/27/2017 Time: 3:58PM
Page 1 of 2 B: 1350 P: 1718, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy Clerk Doc Stamp-Deed: 0.70

QUIT CLAIM DEED

THIS QUIT-CLAIM DEED made this 28th day of December, 2017, by **KENNETH E. WITT a/k/a KENNETH WITT** and his wife, **LOUISE M. WITT**, whose mailing address is 1277 SE County Road 349, Lake City, Florida 32025, first party, to **GARY D. WITT** and his wife, **TRACY WITT**, whose mailing address is 2000 SE County Road 349, Lake City, Florida 32025, second party.

WITNESSETH:

That the said first party, for and in consideration of the sum of **TEN AND NO/100 (\$10.00) DOLLARS**, in hand paid by the said second party, receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the said second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of Columbia, State of Florida, to-wit:

Commence at the Northeast Corner of the W 1/2 of the NE 1/4 of SW 1/4, Section 25, Township 5 South, Range 17 East, Columbia County, Florida, and run thence S 00°43'24" W, along the East line of said W 1/2 of NE 1/4 of SW 1/4, 7.78 feet to the South right of way line of SE County Road 349 and the **POINT OF BEGINNING**; thence continue S 00°43'24" W, still along said East line, 800.00 feet; thence N 89°10'14" W, 272.26 feet; thence N 00°41'59" E, 800.00 feet to the aforesaid South right of way line of SE County Road 349; thence S 89°10'14" E, along said South right of way line, 272.60 feet to the **POINT OF BEGINNING**.
Containing 5.00 acres, more or less.

Tax Parcel No.: _____ (parent parcel)

TO HAVE AND TO HOLD, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.



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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Brent Strickland, give this authority and I do certify that the below
Installer's Name

referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Rocky Ford	<i>Rocky Ford</i>	A+B Const
DARR BIRD	<i>DARR BIRD</i>	A+B Const

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

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

Brent Strickland License Holders Signature (Notarized) 2H1104218 License Number 4/14/16 Date

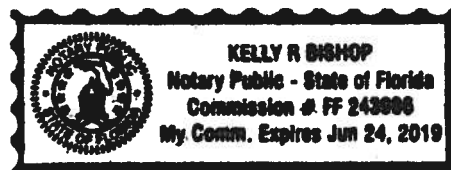
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Brent Strickland,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL DL on this 14 day of April, 2016.

Kelly Bishop
NOTARY'S SIGNATURE

(Seal/Stamp)



Dependable Well Drilling

2139 NW 50TH ST

BELL, FL 32619

(C) 352-225-1618

(F) 386-935-0087

1/25/2018

To: Columbia County Building Department

Description of well to be installed for Customer: WTT

Located at Address: CR 349, LC, FL 32025

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Randy Smith

Sincerely

Randy Smith

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

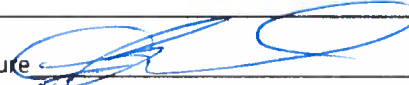

APPLICATION NUMBER 1801-83 CONTRACTOR Brent Strickland PHONE 386-365-7043

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Witt

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 ✓ 1338	Print Name ^{AE} <u>Michael Reader / Madison Services</u> Signature  License #: <u>EC13002315</u> Phone #: <u>850-973-0111</u> Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/A/C ✓ 950	Print Name <u>Michael Boland / Ace A/C of Ocala</u> Signature  License #: <u>CAC1817716</u> Phone #: <u>352-274-9326</u> Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015

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

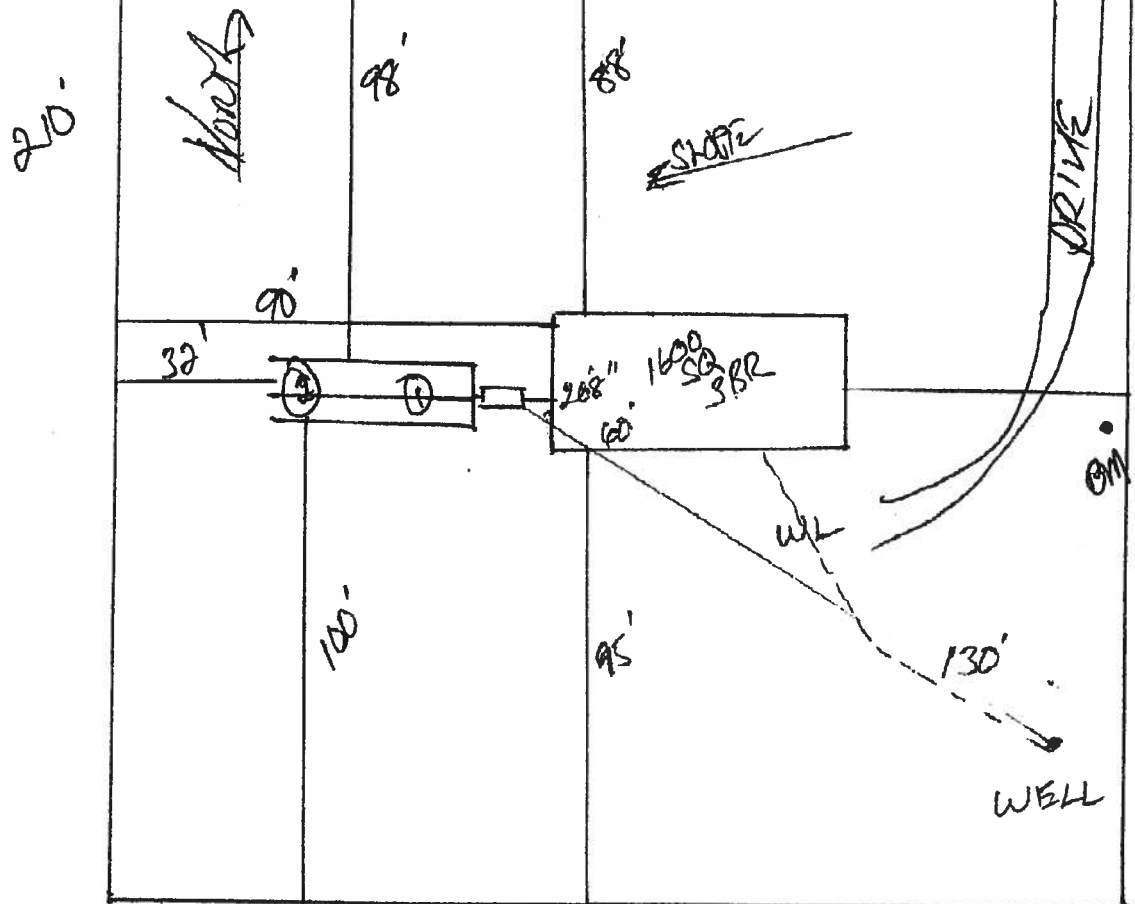
Permit Application Number _____

CR349



----- WITT ----- PART II - SITEPLAN ----- 210'

Scale: 1 inch = 40 feet.



Notes: 1.25 Acres, PLEASE SEE ATTACHED

Site Plan submitted by: Boyd D Fido MASTER CONTRACTOR
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Rocky D 7-0

JAN 25 2018

Dr. HAT Road



Columbia County Property Appraiser

Jeff Hampton - Lake City, Florida 32055 | 388-758-1083

PARCEL: 25-55-17-09387-000 - IMPROVED A (005000)
W1/2 OF SE1/4, EX 0.98 AC DE8C IN ORB 772-927 & EX 10.01 AC DESC ORB 955-2109 & SW1/4 EX EX 10.01 AC DESC 1022-1509 & EX 5 AC DE8C 945-121 & EX 10 AC

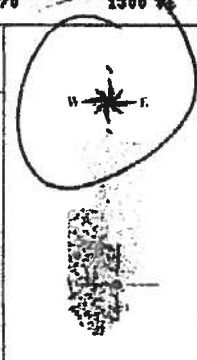
SALE
Name: WITT KENNETH E & LOUISE M
Site: 2184 SE COUNTY ROAD 349
Mail: 1277 SE COUNTY ROAD 349
LAKE CITY, FL 32025

Sales Info: NONE

2017 Certified Values

Land	\$5,178.00
Bldg	\$859.00
Assd	\$74,802.00
Exempt	\$0.00
Taxbl	Cnty: \$74,802
	Other: \$71,002 Gohl: \$71,002

NOTES:



This information, updated: 12/8/2017, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information 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 the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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Permit Application Number 68-0072

Page 2 of 4



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 18-0072
DATE PAID: 1-25-18
FEE PAID: \$1,000
RECEIPT #: 1825413

APPLICATION FOR:

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

APPLICANT: Gary WittAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: na BLOCK: na SUB: Metes & Bounds PLATTED: _____PROPERTY ID #: 25-5S-17-09387-000 ⁰⁰⁸ ZONING: _____ I/M OR EQUIVALENT: [Y] ☒ [N]PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] ☐ ≤2000GPD [] ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [Y] ☒ [N] DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: SE CR 349, LC, FL, 32025DIRECTIONS TO PROPERTY: 441 South, TL CR 349, 1.7 miles to site on right

BUILDING INFORMATION

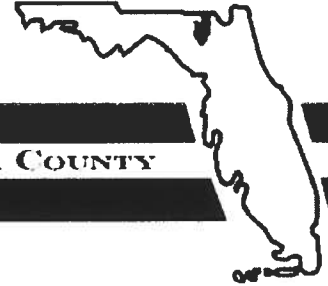
☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	3	1600	
2				
3				

1	SF Residential	3	1600	
2				
3				

[N] Floor/Equipment Drains Rocky D Ford Other? (Specify) _____SIGNATURE: Rocky D Ford DATE: 1/25/2018

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **1/26/2018 11:40:20 AM**
Address: **1818 SE COUNTY ROAD 349**
City: **LAKE CITY**
State: **FL**
Zip Code **32025**

Parcel ID **09387-000**

REMARKS: Address for proposed structure on parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com