

DATE 03/08/2010

## Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028404

APPLICANT DILEENA BOND PHONE 965-6249  
ADDRESS 389 SW FUTCH PLACE FORT WHITE FL 32038  
OWNER DILEENA BOND PHONE 965-6249  
ADDRESS 389 SW FUTCH PLACE FORT WHITE FL 32038  
CONTRACTOR JACKIE GIBBS PHONE 755-2349  
LOCATION OF PROPERTY 47 S, R 238, R ON SPRUCE, L FUTCH, THEN 5T 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 AG-3 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 36-5S-15-00488-024 SUBDIVISION SPRINGHILL  
LOT 24 BLOCK 14 PHASE UNIT TOTAL ACRES 1.30

IH0000214 Dileena F. Bond  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING 09-0592-E BK WR N  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REPLACING EXISTING MH, FLOOR ONE FOOT ABOVE THE ROADCheck # or Cash 07002219

## FOR BUILDING &amp; ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic  
date/app. by date/app. by date/app. by  
Under slab rough-in plumbing Slab Sheathing/Nailing  
date/app. by date/app. by date/app. by  
Framing Insulation  
date/app. by date/app. by  
Rough-in plumbing above slab and below wood floor Electrical rough-in  
date/app. by date/app. by  
Heat & Air Duct Peri. beam (Lintel) Pool  
date/app. by date/app. by date/app. by  
Permanent power C.O. Final Culvert  
date/app. by date/app. by date/app. by  
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing  
date/app. by date/app. by date/app. by  
Reconnection RV Re-roof  
date/app. by date/app. by 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 \$ 0.00 WASTE FEE \$  
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ **TOTAL FEE** 325.00  
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 20.10.09      Building Official W 10/20/09

AP# 0910-44      Date Received 10/16/09      By LH      Permit # 28404

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

Comments Replacing Existing MH

---

FEMA Map# N/A      Elevation N/A      Finished Floor 1st floor      River N/A      In Floodway N/A

☒ Site Plan with Setbacks Shown      ☒ EH # 09-0592-E      ☐ 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 \_\_\_\_\_      ☐ F W Comp. letter \_\_\_\_\_

IMPACT FEES: EMS \_\_\_\_\_      Fire \_\_\_\_\_      Corr \_\_\_\_\_      Road/Code \_\_\_\_\_

School \_\_\_\_\_ = TOTAL Replac existing MH      ☒ out of County form Insp.      ☒ In County Pre-Insp.

Property ID # 36-55-15-00488-024      Subdivision Springhill Lot 24 Block 14

- New Mobile Home \_\_\_\_\_      Used Mobile Home ☒      MH Size 14x70      Year 1992
- Applicant Daleena F. Bond      Phone # 386-965-6249
- Address 389 SW Futch Place Fort White FLA. 32038
- Name of Property Owner SAME      Phone# SAME
- 911 Address 389 SW Futch Place Fort White FLA. 32038
- Circle the correct power company -      FL Power & Light      -      Clay Electric
- (Circle One) -      Suwannee Valley Electric      -      Progress Energy
- Name of Owner of Mobile Home Michael Williams      Phone # 386-963-1034
- Address SAME
- Relationship to Property Owner SELF
- Current Number of Dwellings on Property 1
- Lot Size \_\_\_\_\_      Total Acreage 1.3
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
- (Currently using)      (Blue Road Sign)      (Putting in a Culvert)      (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home YES      CHARGED
- Driving Directions to the Property From LAKE City take 47 south towards Fortwhite - turn right on CR 38 towards itchnucknee State Park go 1,000 ft turn onto spruce go to futch 5th driveway on right 389 S.W. Futch Place
- Name of Licensed Dealer/Installer Jacque Gibbs      Phone # 386-755-2349
- Installers Address 1664 SW Sebastian Cir Lake City FL 32024
- License Number IT 1000214      Installation Decal # \_\_\_\_\_

\* Need to pay the Application fee      2 SEPARATE CHECKS - NEEDED      \$325.00      JW spoke w Daleena : 10.20.09

# PERMIT WORKSHEET

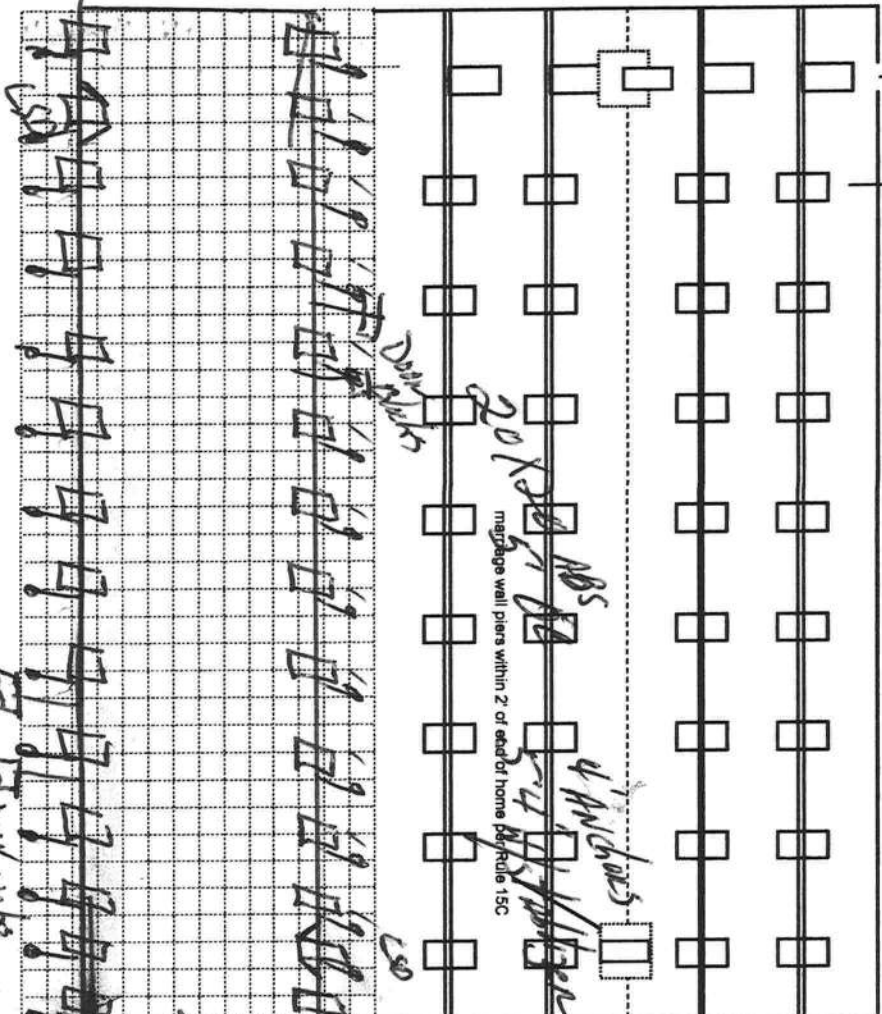
page 1 of 2

Installer Jackie G. Hays License # IK0000214  
 Manufacturer Electrowood Length x Width 14 x 70  
 Name of Owner of this Mobile Home Dakota F. Bond  
 Phone \_\_\_\_\_  
 Address \_\_\_\_\_

**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 JLH



New Home ☐ Used Home ☒ Year \_\_\_\_\_  
 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 # 298277  
 Triple/Quad ☐ Serial # 5ATC075013417WE

PIER SPACING TABLE FOR USED HOMES

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

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

PIER PAD SIZES

I-beam pier pad size 20x20  
 Perimeter pier pad size 16x16

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 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
 Manufacturer Oliver  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer \_\_\_\_\_

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall  
 Number 14 per side



POCKET PENETROMETER TEST

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

4000 x 1000 x 1000

POCKET PENETROMETER TESTING METHOD

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

4000 x 1000 x 1000

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 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 requires anchors with 4000 lb. holding capacity.

280 Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Spacie B. B. B.

Date Tested

9/30/09

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 ☒ 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

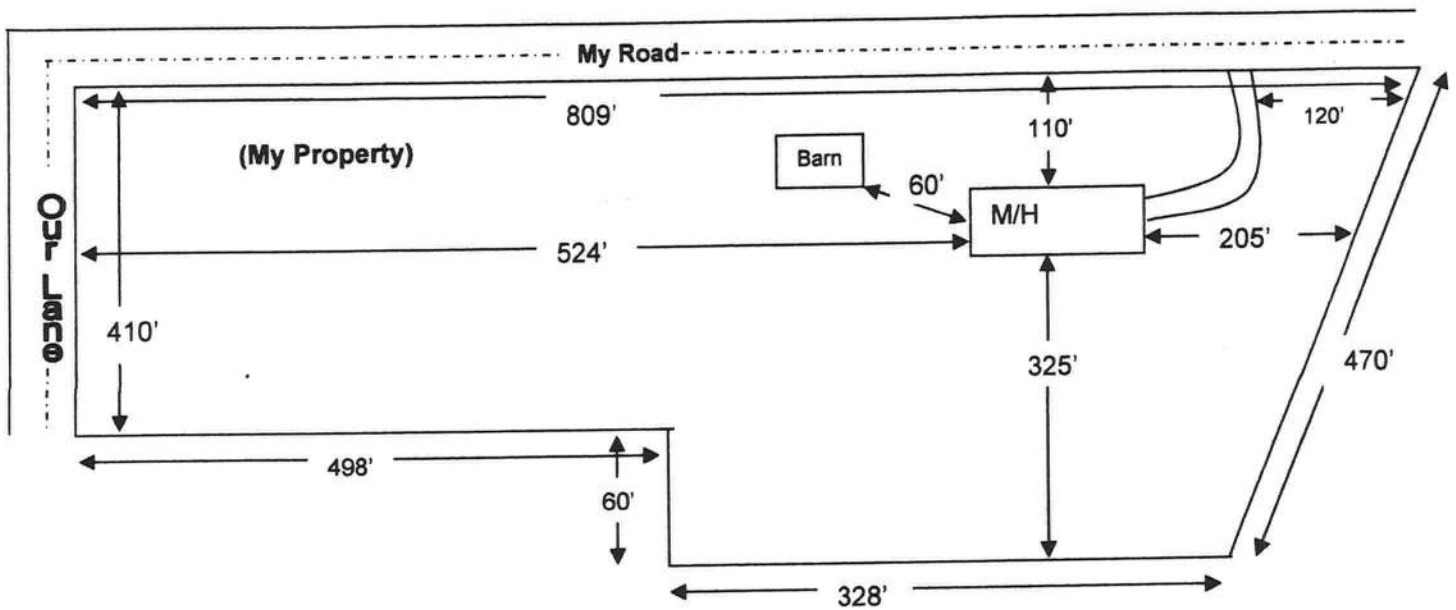
Installer Signature

Spacie B. B. B.

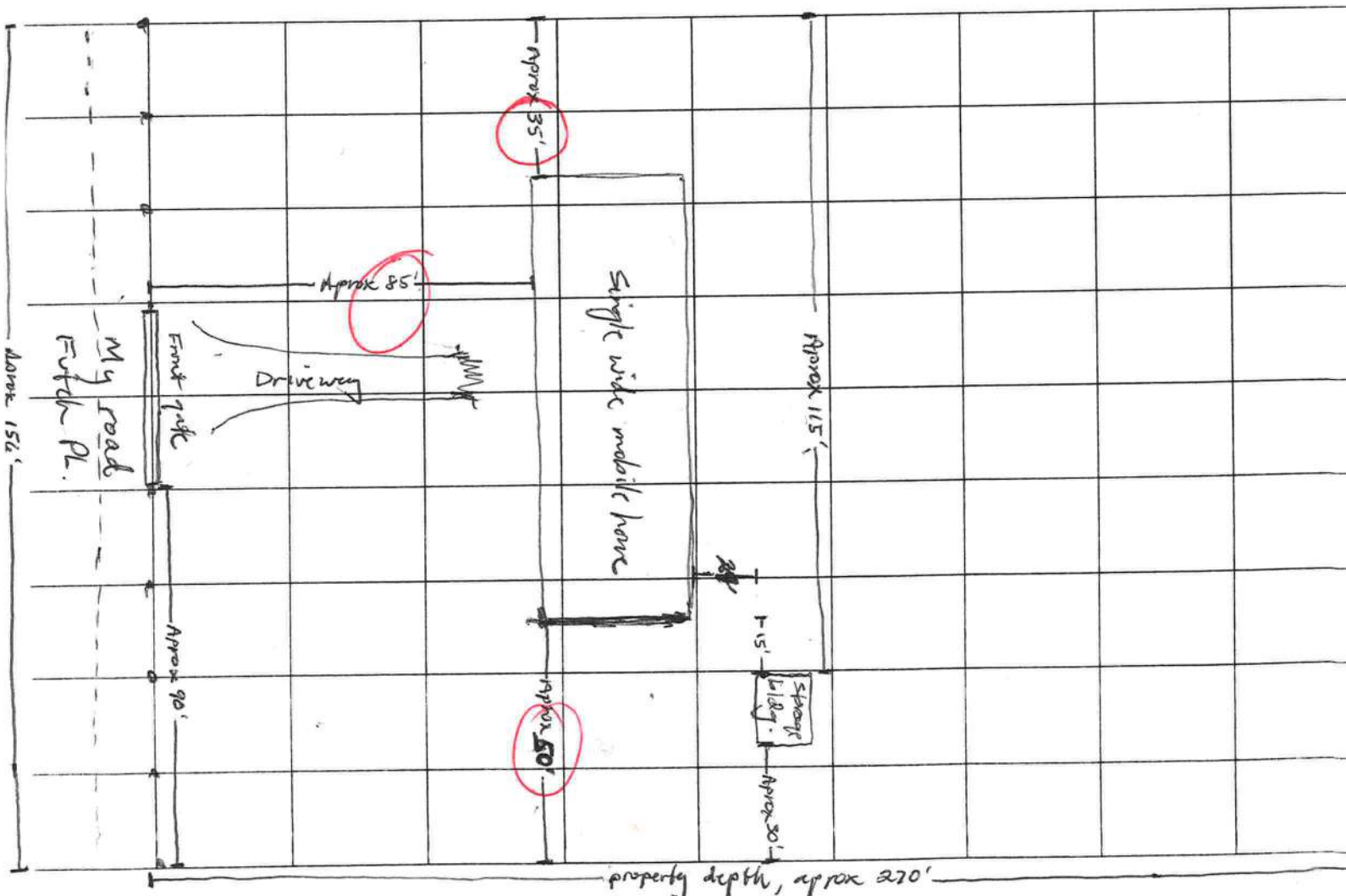
Date

9/30/09

## SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



This instrument prepared by  
Mary Ann Shepard, Esq.  
1214 SE Baya Drive  
Lake City, FL 32025

### QUIT CLAIM DEED

THIS INDENTURE, made this 19<sup>th</sup> day of September, 2006, by and between **ELSIE MORGAN LEWIS**, hereinafter referred to as the party of the first part and **DALEENA FRANCINE BOND**, hereinafter referred to as the party of the second part,

WITNESSETH, that the said party of the first part, for and in consideration of love and affection, in hand paid by the said party of the second part, and for other goods and valuable consideration, the receipt whereof is hereby acknowledge, has remised, released and quit-claimed and by these presents does remise, release and quit-claim unto the said part of the second part, and her heirs and assigns, forever, all the right, title, interest, claim and demand which the said party of the first part has in and to the following described land to wit:

LOT 24 BLOCK A SPRING HILLS  
S/D. ORB 753-447, 843-1529  
Public Records of Columbia County,  
Florida.

TO HAVE AND HOLD THE SAME, together with all and singular the appurtenances thereunto belonging or in anywise appertaining and all the estate, right, title, interest claim whatsoever of the said party of the first part, either in law or equity, to the only proper use, benefit and belief of the said party of the second part her heirs and assigns forever.

IN WITNESS WHEREOF, the said party of the first part has hereunto set her hand and seal the day and year first above written.

Elsie Morgan Lewis  
ELSIE MORGAN LEWIS  
PRODUCE & ID L200-213461840  
EXP. 5/24/07

Signed, sealed and delivered in the presence of:

Hilda Harrington  
Printed Name Hilda Harrington

Rona McCall  
Printed Name Rona McCall

Inst:2006022567 Date:09/21/2006 Time:12:40  
Doc Stamp-Deed : 31.50  
J. F. DC, P. DeWitt Cason, Columbia County B:1096 P:1921

STATE OF FLORIDA  
COUNTY OF Columbia

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared ELSIE MORGAN LEWIS, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that she executed the same.

WITNESS by hand and official seal in the County and State last aforesaid this 19<sup>th</sup> day of September, 2006.

Janney McManaway  
Notary Public, State of Florida  
My Commission Expires March 29, 2009

SEAL

Date

9/19/06





# Columbia County Property Appraiser

DB Last Updated: 10/9/2009

Parcel: 36-5S-15-00488-024

## 2009 Preliminary Values

[Tax Record](#)
[Property Card](#)
[Interactive GIS Map](#)
[Print](#)

### Owner & Property Info

<b>Owner's Name</b>	BOND DALEENA FRANCINE		
<b>Site Address</b>	FUTCH		
<b>Mailing Address</b>	389 SW FUTCH PL FT WHITE, FL 32038		
<b>Use Desc. (code)</b>	MOBILE HOM (000200)		
<b>Neighborhood</b>	036515.02	<b>Tax District</b>	3
<b>UD Codes</b>	MKTA02	<b>Market Area</b>	02
<b>Total Land Area</b>	1.014 ACRES		
<b>Description</b>	LOT 24 BLOCK A SPRING HILLS S/D. ORB 753-447, 843-1529, QCD 1096-1921		

&lt;&lt; Prev

Search Result: 2 of 21

Next &gt;&gt;

### GIS Aerial



### Property & Assessment Values

<b>Mkt Land Value</b>	cnt: (2)	\$17,300.00
<b>Ag Land Value</b>	cnt: (0)	\$0.00
<b>Building Value</b>	cnt: (1)	\$3,787.00
<b>XFOB Value</b>	cnt: (1)	\$600.00
<b>Total Appraised Value</b>		\$21,687.00

<b>Just Value</b>	\$21,687.00
<b>Class Value</b>	\$0.00
<b>Assessed Value</b>	\$21,687.00
<b>Exemptions</b>	\$0.00
<b>Total Taxable Value</b>	County: \$21,687.00   City: \$21,687.00 Other: \$21,687.00   School: \$21,687.00

### Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
9/19/2006	1096/1921	QC	I	U	01	\$4,500.00
8/1/1997	843/1529	WD	I	Q		\$25,000.00
11/14/1991	753/447	WD	V	U	02	\$0.00

### Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1971	Alum Siding (26)	720	1064	\$3,787.00
Note: All S.F. calculations are based on exterior building dimensions.						

### Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	1993	\$600.00	0000001.000	10 x 12 x 0	(000.00)

### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	0000001.000 LT - (0000001.014AC)	1.00/1.00/1.00/1.00	\$15,300.00	\$15,300.00
009945	WELL/SEPT (MKT)	0000001.000 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 10/9/2009

IDENTIFICATION NUMBER LM75A13417WE	YR 1992	MAKE FLEE	MODEL	BODY HS	WT-L-BHP 76'	VESSEL REGIS. NO.	TITLE NUMBER 61720388
---------------------------------------	------------	--------------	-------	------------	-----------------	-------------------	--------------------------

REGISTERED OWNER

MICHAEL SAMSON WILLIAMSON  
3564 168TH ST  
WELLBORN FL 32094-3014

DATE OF ISSUE

02/24/2006

LIEN RELEASE

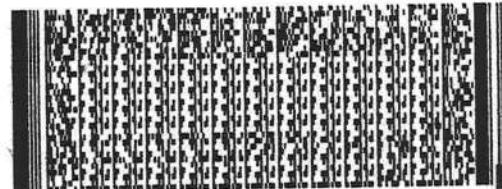
INTEREST IN THE ABOVE DESCRIBED VEHICLE IS  
HEREBY RELEASED

BY \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

MAIL TO:

MICHAEL SAMSON WILLIAMSON  
3564 168TH ST  
WELLBORN FL 32094-3014



LIEN SATISFACTION

## CERTIFICATE OF TITLE

SATISFACTORY PROOF OF OWNERSHIP HAVING BEEN SUBMITTED UNDER SECTION 319.23/328.03, FLORIDA STATUTES, TITLE TO THE MOTOR VEHICLE  
OR VESSEL DESCRIBED BELOW IS VESTED IN THE OWNER(S) NAMED HEREIN, THIS OFFICIAL CERTIFICATE OF TITLE IS ISSUED  
FOR SAID MOTOR VEHICLE OR VESSEL

IDENTIFICATION NUMBER GAFLM75A13417WE		YR 1992	MAKE FLEE	MODEL	BODY HS	WT-L-BHP 76'	VESSEL REGIS. NO.	TITLE NUMBER 61720388
PREV STATE FL	COLOR UNK	PRIMARY BRAND		SECONDARY BRAND		NO OF BRANDS	USE PVT	PREV ISSUE DATE 04/12/2001
ODOMETER STATUS OR VESSEL MANUFACTURER OR OH USE						HULL MATERIAL	PROP	DATE OF ISSUE 02/24/2006

REGISTERED OWNER  
MICHAEL SAMSON WILLIAMSON  
3564 168TH ST  
WELLBORN FL 32094-3014

LIEN RELEASE

INTEREST IN THE ABOVE DESCRIBED VEHICLE IS  
HEREBY RELEASED

BY \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

1ST LIENHOLDER

NONE

DIVISION OF MOTOR VEHICLES

TALLAHASSEE

FLORIDA



DEPARTMENT OF HIGHWAY SAFETY  
AND MOTOR VEHICLES

CARL A. FORD  
DIRECTOR

Control Number 77566992

FRED O. DICKINSON, III  
EXECUTIVE DIRECTOR

TRANSFER OF TITLE BY SELLER (This section must be completed at the time of sale.)  
ODOMETER CERTIFICATION - Federal and state law require that you state the mileage in connection with the transfer of ownership. Failure to  
complete or providing a false statement may result in fines and/or imprisonment.

This title is warranted and certified to be free from any liens except as noted on the face of this certificate and the motor vehicle or vessel described is hereby transferred to.

Purchaser: \_\_\_\_\_ Address: \_\_\_\_\_

I/We state that this ☐ 5 or ☐ 6 digit odometer now reads ☐☐☐☐☐☐ (no tenths)  
miles, date read \_\_\_\_\_ and to the best of my knowledge  
that it reflects the actual mileage of the vehicle described herein, unless  
one of the odometer statement blocks is checked.

CAUTION  
DO NOT CHECK  
BOX IF ACTUAL  
MILEAGE

Selling Price: \$ \_\_\_\_\_ Date Sold: \_\_\_\_\_  
1. I hereby certify that to the best of my knowledge the odometer reading reflects the  
amount of mileage in excess of its mechanical limits.  
2. I hereby certify that the odometer reading is not the actual mileage.  
WARNING - ODOMETER DISCREPANCY.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of  
Purchaser: \_\_\_\_\_  
Signature of  
Co-Purchaser: \_\_\_\_\_  
Signature of  
Seller: \_\_\_\_\_  
Signature of  
Co-Seller: \_\_\_\_\_

Printed Name of  
Purchaser: \_\_\_\_\_  
Printed Name of  
Co-Purchaser: \_\_\_\_\_  
Printed Name of  
Seller: \_\_\_\_\_  
Printed Name of  
Co-Seller: \_\_\_\_\_

(When Applicable) Selling Dealer's License Number \_\_\_\_\_ Tax No. \_\_\_\_\_ Tax Collected: \$ \_\_\_\_\_

Auction Name \_\_\_\_\_ License Number: \_\_\_\_\_

VOID IF ALTERED





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 LETTER OF AUTHORIZATION

I, Jackie Gibbs, give this authority for the job address show below  
Installer License Holder Name

only, 389 SW Futch Place Fort White FL and I do certify that  
Job Address

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

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
<u>Daleena F. Bond</u>	<u>Daleena F. Bond</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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.

Jackie Gibbs  
License Holders Signature (Notarized)

1H0000214  
License Number

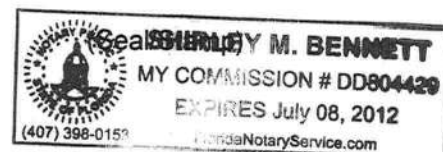
9/30/09  
Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Jackie Gibbs, personally appeared before me and is known by me or has produced identification (type of I.D.) Drivers Lic on this 30 day of Sept, 2009.

Shirley M. Bennett  
NOTARY'S SIGNATURE



Received 10/16/09 CH

0910-44

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

COUNTY THE MOBILE HOME IS BEING MOVED FROM SUL PHUR  
OWNERS NAME Dorcas Bird PHONE 386-935-2072 CELL 386-344-0438  
INSTALLER Jackie Gibbs PH 386-755-2345 CELL 386-345-8964  
INSTALLERS ADDRESS 1664 W. Sebastian Cir Lake City

## MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1993 SIZE 28' 14" x 70'  
COLOR white & yellow SERIAL No. GAFLM75A13417WE  
WIND ZONE 11 SMOKE DETECTOR yes

## INTERIOR:

FLOORS good  
DOORS good  
WALLS good  
CABINETS good  
ELECTRICAL (FIXTURES/OUTLETS) good

## EXTERIOR:

WALLS / SIDING good  
WINDOWS good  
DOORS good

## INSTALLER:

APPROVED ✓ NOT APPROVED \_\_\_\_\_

## NOTES:

INSTALLER OR INSPECTORS PRINTED NAME Jackie GibbsInstaller/Inspector Signature Jackie Gibbs License No. 14000244 Date 10/16/09**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 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.**Code Enforcement Approval Signature At P. LavelDate 10-16-09





STATE OF FLORIDA  
DEPARTMENT OF HEALTH

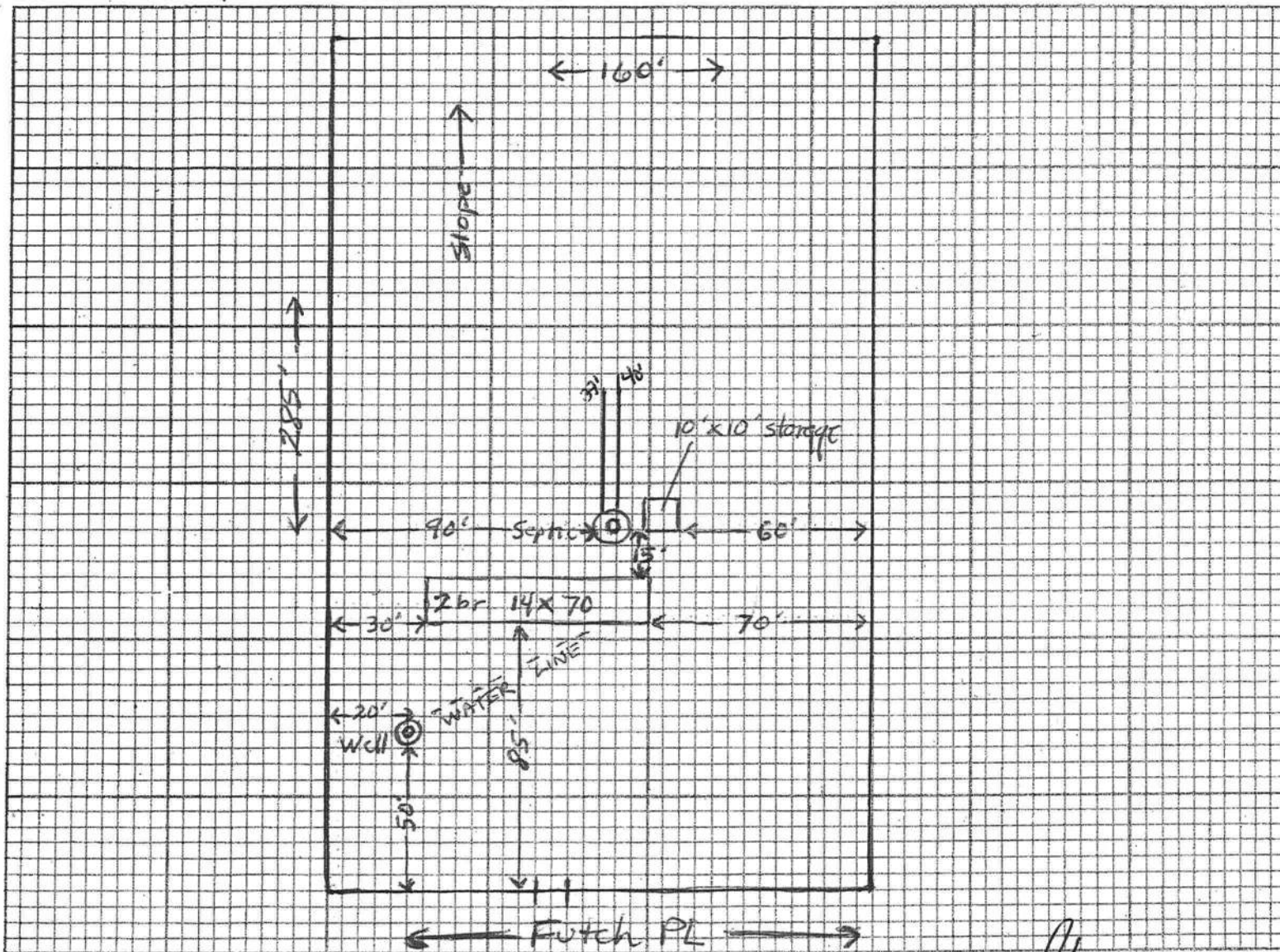
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

09-0592E

PART II - SITE PLAN

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



Notes:

Site Plan submitted by: Valencia V. Bancel

Signature

owner

Title

Plan Approved X

Not Approved \_\_\_\_\_

Date 12/3/09

By

Columbina

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 943921  
DATE PAID: 11/30/09  
FEE PAID: 125.00  
RECEIPT #: 126623

APPLICATION FOR:

[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ]

APPLICANT: DALEENA F. Bond

AGENT: TELEPHONE: 386-344-0438

MAILING ADDRESS: 389 SW. Futch Place Fort 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.

PROPERTY INFORMATION

LOT: 24 BLOCK: A SUBDIVISION: Spring Hills PLATTED: Book 4  
Page 33-334  
PROPERTY ID #: 36-55-15-00488-024 ZONING: I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 1.3 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD  
IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 389 SW. Futch Place Fort White FLA. 32038

DIRECTIONS TO PROPERTY: Hwy 41 to Head of Ichneuteknee Springs  
right on Spruce St, go around 5 curves first road  
to left 6th driveway on right.

BUILDING INFORMATION

[X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	mobile home	2	980.5F	Original Attached
2	Sheet	-	1440	
3				
4				

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

SIGNATURE: Daleena F. Bond

DATE: 11/30/2009