

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official Bles Building Official TM 11/27/17

AP# 1711-72 Date Received 11/21/17 By LM Permit # 36134

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

Comments 5 yr temp use for grandson

FEMA Map# _____ Elevation _____ Finished Floor 1' above River _____ In Floodway _____

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 17-0735 ☐ Well letter OR

☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ ~~FW Comp. letter~~ ☒ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH 1712-59 ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment owed ☐ Out County ☒ In County ☒ Sub VF Form

Property ID # 25-5S-17-09380-000 Subdivision N/A Lot# N/A

- New Mobile Home _____ Used Mobile Home ☒ MH Size 24x44 Year 1989
- Applicant Sonya Crews / Linda Craft Phone # 816-517-5701
- Address 825 NW Turner Ave Apt 102 Lake City 32055
- Name of Property Owner Eunice Johnson Phone# 386-752-9594
- 911 Address 12217 SE CR 245 Lulu FL 32061
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Eunice Johnson Phone # 386-752-9594
- Address 12201 SE CR 245 Lulu FL 32061
- Relationship to Property Owner Grandson - Leighton Markham
- Current Number of Dwellings on Property 1 - this will make 2
- Lot Size _____ Total Acreage 3.21
- 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 _____
- Driving Directions to the Property US Hwy 90 East
then turn (R) on SR 100, then (R) on CR 245
address on (L)
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terr Lake City
- License Number JH10251451 Installation Decal # 46919

*JW spoke w/ Sonya 12.21.17 (advised - ready for permit issuance).
719.20 for december only*

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Kevin Weeks License # EH0051451

911 Address where home is being installed: 12201 SE CR 245
Lulu FI 32041

Manufacturer _____ Length x width 44x24

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 PC

page 1 of 2

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 # 46919

Triple/Quad ☐ Serial # GAFC135A01689ET

PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity (sq in) | 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' | 4' | 5' | 5' | 7' | 8' |
| 1500 psf | 4' | 5' | 6' | 7' | 8' | 8' | 8' |
| 2000 psf | 5' | 6' | 7' | 8' | 8' | 8' | 8' |
| 2500 psf | 6' | 7' | 8' | 8' | 8' | 8' | 8' |
| 3000 psf | 7' | 8' | 8' | 8' | 8' | 8' | 8' |
| 3500 psf | 8' | 8' | 8' | 8' | 8' | 8' | 8' |

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 16x16 N/A

Other pier pad sizes (required by the mfg.) 16x16

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

4 16x16

4 16x16

4 16x16

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

POPULAR PAD SIZES

| Pad Size | Sq In |
|-----------------|-------|
| 16 x 16 | 256 |
| 18 x 18 | 324 |
| 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 |
| 22 3/8 x 25 3/8 | 441 |
| 17 1/2 x 26 1/2 | 446 |
| 24 x 24 | 576 |
| 26 x 26 | 676 |

ANCHORS

4 ft 5 ft

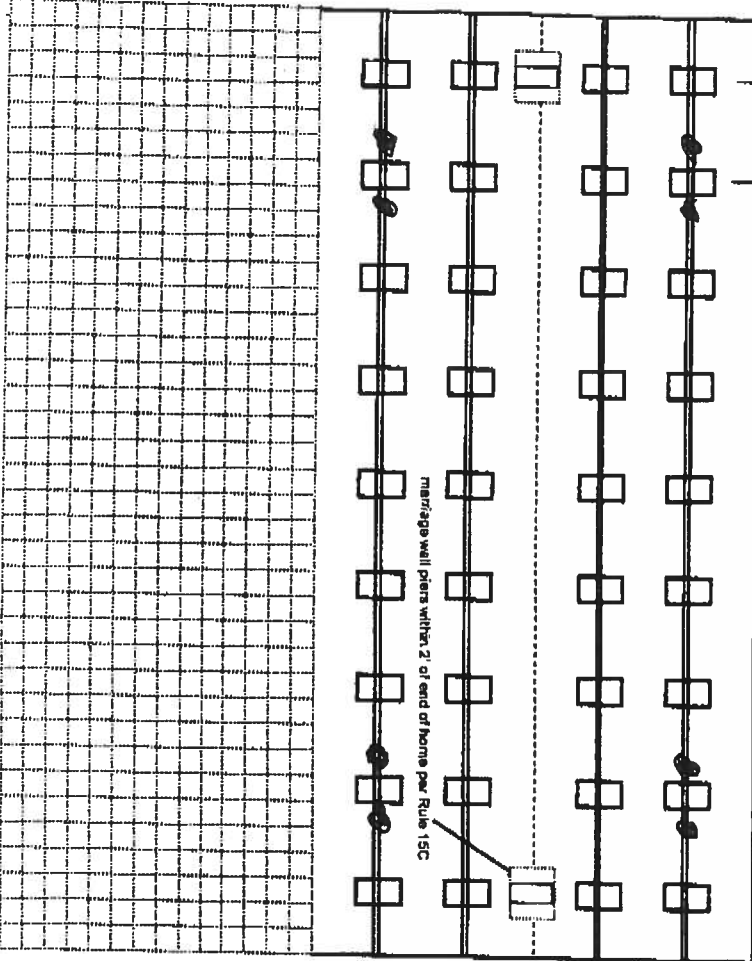
FRAME TIES

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

OTHER TIES

Number 4

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____



COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 500 psi or check here to declare 1000 lb. soil without testing.

500 x 500 x 500

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.

500 x 500 x 500

TORQUE PROBE TEST

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

Installer's initials LA

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name James Anderson

Date Tested 11-14-17

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 dependent water supply systems. Pg. _____

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: 60s Length: 6 Spacing: 24
Walls: Type Fastener: 60s Length: 6 Spacing: 24
Roof: Type Fastener: 60s Length: 6 Spacing: 24
For used homes 2x11 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 seal/leakage)

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 LA

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 James Anderson

Date 11-14-17

Columbia County Property Appraiser

updated: 10/27/2017

2017 Tax Year

Tax Collector Tax Estimator Property Card

Parcel List Generator

Parcel: 25-5S-17-09380-000

<< Next Lower Parcel Next Higher Parcel >>

2017 TRIM (pdf)

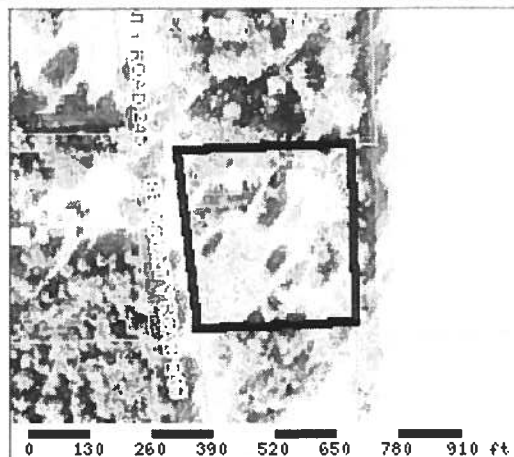
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

| | | | |
|-------------------------|---|---------------------|-------|
| Owner's Name | JOHNSON EUNICE HARDEN STEPHENS | | |
| Mailing Address | 12201 SE CR 245 LULU, FL 32061 | | |
| Site Address | 12201 SE COUNTY ROAD 245 | | |
| Use Desc. (code) | SINGLE FAM (000100) | | |
| Tax District | 3 (County) | Neighborhood | 25517 |
| Land Area | 3.210 ACRES | Market Area | 02 |
| Description | NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM SE COR, RUN N 1707.28 FT FOR POB, CONT N 391 FT, W 368.1 FT TO E R/W CR-245, RUN S ALONG R/W 393.60 FT, E 344.5 FT TO POB. (BEING IN NE1/4 OF SE1/4) ORB 439-590 & ORB 1016- 2857 | | |



Property & Assessment Values

| 2017 Certified Values | | |
|------------------------------|--------------------------------------|-------------|
| Mkt Land Value | cnt: (0) | \$20,115.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (1) | \$44,934.00 |
| XFOB Value | cnt: (2) | \$1,800.00 |
| Total Appraised Value | | \$66,849.00 |
| Just Value | | \$66,849.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$66,849.00 |
| Exempt Value | (code: HX H3 SX) | \$66,849.00 |
| Total Taxable Value | Cnty: \$0 Other: \$25,000 Schl: | \$41,849 |

| 2018 Working Values (...Hide Values) | | |
|--------------------------------------|--------------------------------------|-------------|
| Mkt Land Value | cnt: (0) | \$22,127.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (1) | \$46,678.00 |
| XFOB Value | cnt: (2) | \$1,800.00 |
| Total Appraised Value | | \$70,605.00 |
| Just Value | | \$70,605.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$70,605.00 |
| Exempt Value | (code: HX H3 SX) | \$70,605.00 |
| Total Taxable Value | Cnty: \$0 Other: \$25,000 Schl: | \$45,605 |

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

| Sale Date | OR Book/Page | OR Code | Vacant / Improved | Qualified Sale | Sale RCode | Sale Price |
|-----------|--------------|---------|-------------------|----------------|------------|------------|
| NONE | | | | | | |

Building Characteristics

| Bldg Item | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
|--|---------------------|----------|-----------------|-------------|-------------|-------------|
| 1 | SINGLE FAM (000100) | 1966 | COMMON BRK (19) | 1422 | 1512 | \$46,678.00 |
| Note: All S.F. calculations are based on <u>exterior</u> building dimensions. | | | | | | |

Extra Features & Out Buildings

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|---------|----------|------------|-------------|-----------|--------------------|
| 0190 | FPLC PF | 0 | \$1,200.00 | 0000001.000 | 0 x 0 x 0 | (000.00) |



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1711-22 CONTRACTOR Ronnie Norris PHONE 386.623.7711

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

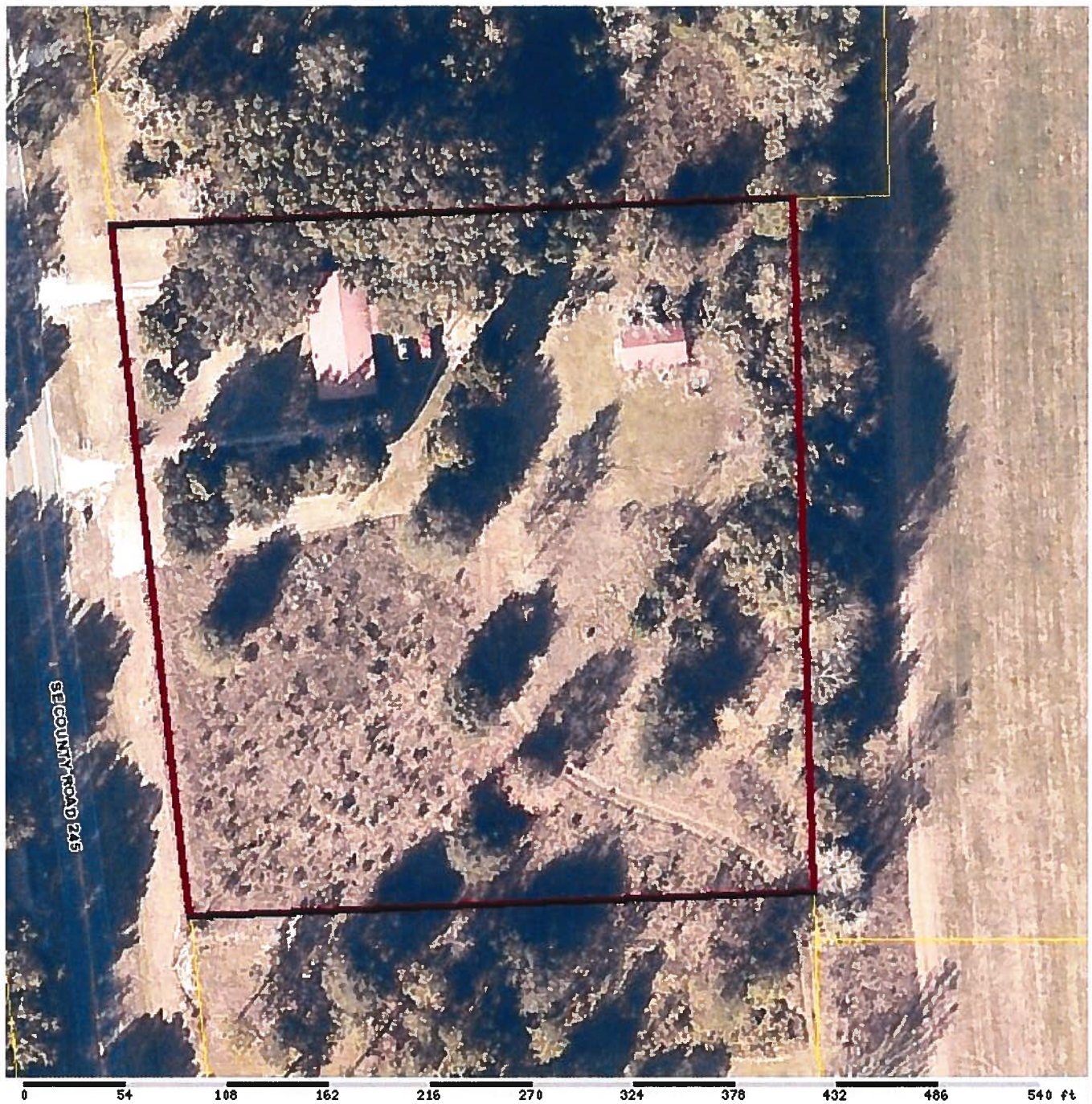
In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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 <u>Eunice Johnson</u> License #: <u>owner</u> Qualifier Form Attached <input type="checkbox"/> | Signature <u>Eunice Johnson</u> Phone #: <u>386-752-9594</u> |
| MECHANICAL/ A/C  | Print Name <u>Eunice Johnson</u> License #: <u>owner</u> Qualifier Form Attached <input type="checkbox"/> | Signature <u>Eunice Johnson</u> Phone #: <u>386-752-9594</u> |



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



Columbia County Property Appraiser

Jeff Hampton - Lake City, Florida 32055 | 386-758-1083

PARCEL: 25-5S-17-09380-000 - SINGLE FAM (000100)

COMM SE COR, RUN N 1707.28 FT FOR POB, CONT N 391 FT, W 368.1 FT TO E R/W CR-245, RUN S
ALONG R/W 393.60FT, E 344.5 FT TO POB. (BEING IN NE1/4 OF SE1/

NOTES:

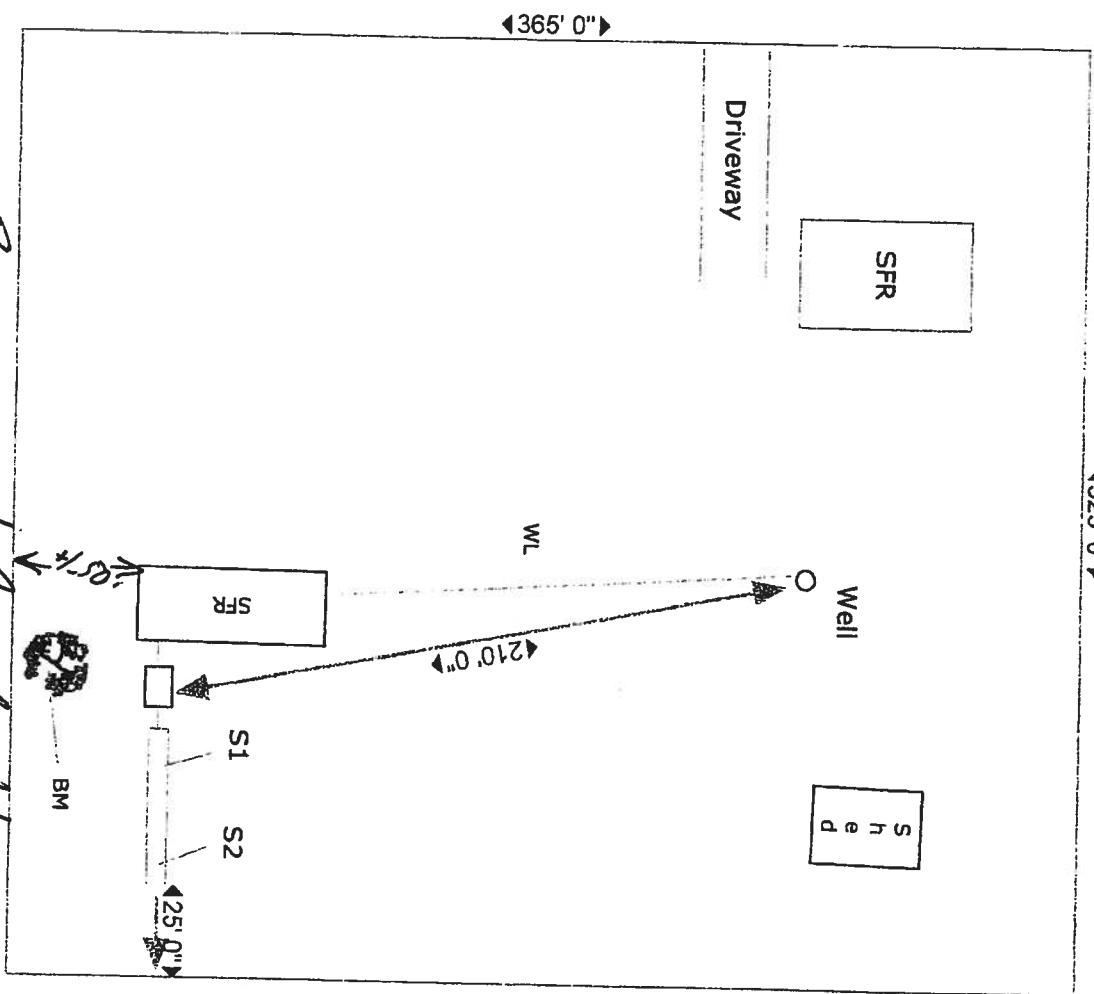
| | | | |
|------------|-----------------------------------|------------------------------|---|
| Name: | JOHNSON EUNICE HARDEN STEPHENS | 2017 Certified Values | |
| Site: | 12201 SE COUNTY ROAD 245 | Land | \$20,115.00 |
| Mail: | 12201 SE CR 245 LULU, FL 32061 | Bldg | \$44,934.00 |
| | | Assd | \$66,849.00 |
| Sales Info | NONE | Exmpt | \$66,849.00 |
| | | Taxbl | Cnty: \$0 Other: \$25,000 Schl: \$41,849 |



State of Florida Department of Health
Application for Construction Permit
Part I: Site Plan

Permit Application Number
1"=64'
N
325' 0"

Applicant: Eunice Johnson



Site Plan Submitted BY:

Elliot Bronson / *Julia Howard*

Plan Approved

Not Approved

Date

By

County Health Department

Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year

updated: 10/27/2017

Parcel: << 25-5S-17-09380-000 >>

Aerial Viewer

Pictometry

Google Maps

Owner & Property Info

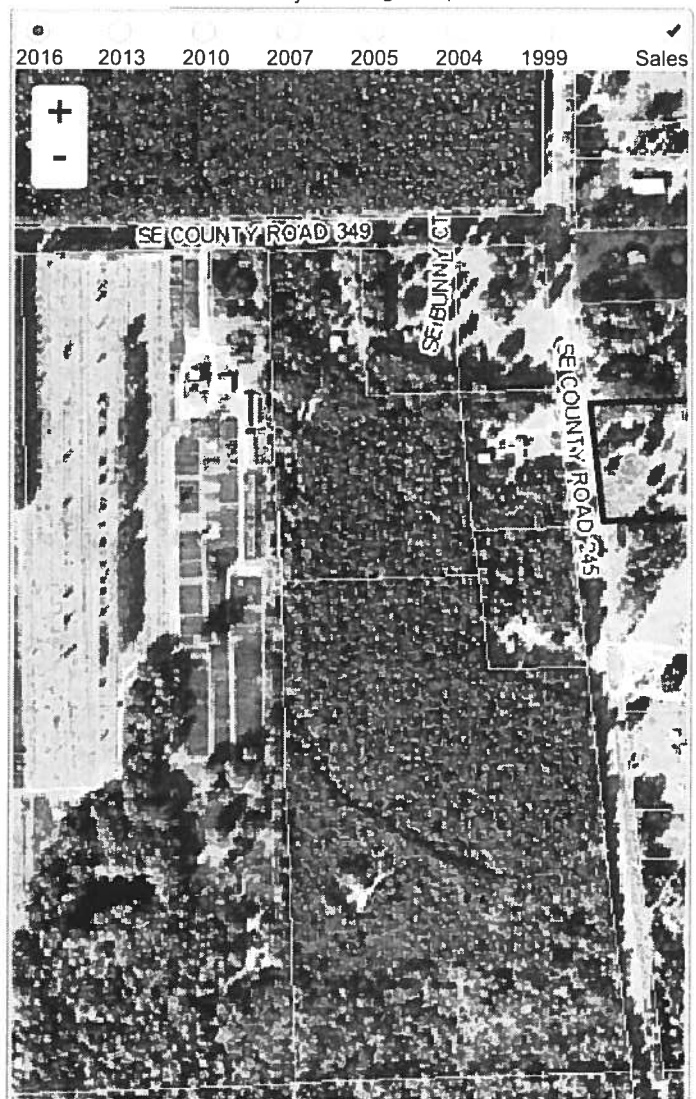
Result: 2 of 2

| | | | |
|-------------|--|--------------|----------|
| Owner | JOHNSON EUNICE HARDEN STEPHENS 12201 SE CR 245 LULU, FL 32061 | | |
| Site | 12201 COUNTY ROAD 245 , LULU | | |
| Description | COMM SE COR, RUN N 1707.28 FT FOR POB, CONT N 391 FT, W 368.1 FT TO E R/W CR-245, RUN S ALONG R/W 393.60 FT, E 344.5 FT TO POB. (BEING IN NE1/4 OF SE1/4) ORB 439-590 & ORB 1016- 2857 | | |
| Area | 3.21 AC | S/T/R | 25-5S-17 |
| Use Code | SINGLE FAM (000100) | Tax District | 3 |

* The Description above is not to be used as the Legal Description for this parcel in any legal transaction. The Use Code is a FL Dept. of Revenue (DOR) code. Please contact the Columbia County Planning & Development office for specific zoning information.

Property & Assessment Values

| 2017 Certified Values | | 2018 Working Values | |
|-----------------------|-----------------------------------|---------------------|-----------------------------------|
| Mkt Land (1) | \$20,115 | Mkt Land (1) | \$22,127 |
| Ag Land (0) | \$0 | Ag Land (0) | \$0 |
| Building (1) | \$44,934 | Building (1) | \$46,678 |
| XFOB (2) | \$1,800 | XFOB (2) | \$1,800 |
| Just | \$66,849 | Just | \$70,605 |
| Class | \$0 | Class | \$0 |
| Appraised | \$66,849 | Appraised | \$70,605 |
| Exempt | HX H3 OTHER \$66,849 | Exempt | HX H3 OTHER \$70,605 |
| Assessed | \$66,849 | Assessed | \$70,605 |
| Total | county:\$0 city:\$25,000 | Total | county:\$0 city:\$25,000 |
| Taxable | other:\$25,000 school:\$41,849 | Taxable | other:\$25,000 school:\$45,605 |



Sales History

| Sale Date | Sale Price | Book/Page | Deed | V/I | Quality (Codes) | RCode |
|-----------|------------|-----------|------|-----|-----------------|-------|
| NONE | | | | | | |

Building Characteristics

| Bldg Sketch | Bldg Item | Bldg Desc | Year Blt | Base SF | Actual SF | Bldg Value |
|-------------|-----------|---------------------|----------|---------|-----------|------------|
| Sketch | 1 | SINGLE FAM (000100) | 1966 | 1422 | 1512 | \$46,678 |

Extra Features & Out Buildings

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|---------|----------|------------|-------|-----------|--------------------|
| 0190 | FPLC PF | 0 | \$1,200.00 | 1.000 | 0 x 0 x 0 | (000.00) |
| 0020 | BARN,FR | 1993 | \$600.00 | 1.000 | 0 x 0 x 0 | (000.00) |

Land Breakdown

| Land Code | Desc | Units | Adjustments | Eff Rate | Land Value |
|-----------|-----------|----------|---------------------|----------|------------|
| 000100 | SFR (MKT) | 3.210 AC | 1.00/1.00 1.00/1.00 | \$6,893 | \$22,127 |

Search Result: 2 of 2

© Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com



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, Ronnie NORRIS, give this authority for the job address show below
Installer License Holder Name

only, 12201 SE CR 245 Lulu 32061, 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>Soupy Crews</u> | <u>Soupy Crews</u> | <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner |
| <u>Linda CRAFT</u> | <u>Linda Craft</u> | <input checked="" 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.

Ronnie Norris
License Holders Signature (Notarized)

2H10251451 11-14-017
License Number Date

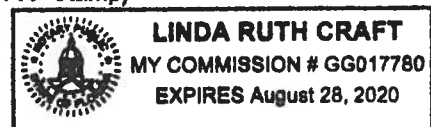
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 14th day of Nov, 20 17.

Linda Ruth Craft
NOTARY'S SIGNATURE

(Seal/Stamp)



37 1 LAH 2613

AUDIT # 87028890



STATE OF FLORIDA
APPLICATION FOR VEHICLE/VESSEL
CERTIFICATE OF TITLE

TRANSACTION ID'S

L# 331026
T# 548551524
B# 184230

| TITLE NUMBER | VEHICLE/VESSEL IDENTIFICATION # | YR. MAKE | MAKE or MANUFACTURER | BODY TYPE | VEHICLE COLOR | WT/LENGTH | GVW/LOC | |
|-------------------------------|---------------------------------|-------------|----------------------|------------|---------------|-------------|---------|-----------|
| 47357806 | GAFLK35A01689ET | 1989 | EAGL | HS | UNK | 40' | | |
| DATE OF ISSUE MO. DAY YEAR | TRANS CODE | VEHICLE USE | HULL MATERIAL | PROPULSION | FUEL | VESSEL TYPE | WATER | FL NUMBER |
| 07 24 08 | TRT | PRIVATE | | | | | | |

| Applicant/Owner's Name & Address GREGORY DEAN GRUBBS 1929 W T GRUBBS RD PERRY, FL 32347 | <table style="width:100%;"> <tr> <th colspan="4">BIRTHDATE</th> <th colspan="2">RESIDENT</th> <th>CNTY</th> </tr> <tr> <th>SEX</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>Y</th> <th>N</th> <th>ALIEN RES.#</th> </tr> <tr> <td>M</td> <td>12</td> <td>20</td> <td>62</td> <td>X</td> <td></td> <td>37</td> </tr> </table> <table style="width:100%;"> <tr> <td style="width:50%;">1st OWNER FL/DL# OR F.E.I.D.#</td> <td style="width:50%;">2nd OWNER FL/DL# OR UNIT #</td> </tr> <tr> <td>G612284624600</td> <td></td> </tr> </table> | BIRTHDATE | | | | RESIDENT | | CNTY | SEX | MO. | DAY | YEAR | Y | N | ALIEN RES.# | M | 12 | 20 | 62 | X | | 37 | 1st OWNER FL/DL# OR F.E.I.D.# | 2nd OWNER FL/DL# OR UNIT # | G612284624600 | |
|--|--|-----------|------|----------|---|-------------|--|------|-----|-----|-----|------|---|---|-------------|---|----|----|----|---|--|----|-------------------------------|----------------------------|---------------|--|
| BIRTHDATE | | | | RESIDENT | | CNTY | | | | | | | | | | | | | | | | | | | | |
| SEX | MO. | DAY | YEAR | Y | N | ALIEN RES.# | | | | | | | | | | | | | | | | | | | | |
| M | 12 | 20 | 62 | X | | 37 | | | | | | | | | | | | | | | | | | | | |
| 1st OWNER FL/DL# OR F.E.I.D.# | 2nd OWNER FL/DL# OR UNIT # | | | | | | | | | | | | | | | | | | | | | | | | | |
| G612284624600 | | | | | | | | | | | | | | | | | | | | | | | | | | |

| VOLUNTARY CONTRIBUTIONS | <table style="width:100%;"> <tr> <th>AGENCY FEE</th> <th>TITLE FEE</th> <th>SALES TAX</th> <th>GRAND TOTAL</th> </tr> <tr> <td>8.25</td> <td>38.50</td> <td>0.00</td> <td>46.75</td> </tr> </table> | AGENCY FEE | TITLE FEE | SALES TAX | GRAND TOTAL | 8.25 | 38.50 | 0.00 | 46.75 |
|-------------------------|---|------------|-------------|-----------|-------------|------|-------|------|-------|
| AGENCY FEE | TITLE FEE | SALES TAX | GRAND TOTAL | | | | | | |
| 8.25 | 38.50 | 0.00 | 46.75 | | | | | | |

Action Requested: TRANSFER TITLE **Brands:**

| PREV. STATE | DATE ACQUIRED | NEW | USED | ODOMETER / VESSEL MANUFACTURER | ODOMETER DECLARATION CERTIFICATION |
|-------------|---------------|-----|------|--------------------------------|------------------------------------|
| FL | 02/09/1996 | | XX | | <input type="checkbox"/> |

| LIEN INFORMATION | | DATE OF LIEN | RECEIVED DATE | FEID # OR FL / DL AND SEX AND DATE OF BIRTH | DMV ACCOUNT # |
|---------------------------|--|--------------|---------------|---|---------------|
| NAME OF FIRST LIENHOLDER: | | | | | |
| ADDRESS | | SALVAGE TYPE | | | |

| SELLER INFORMATION | | CONSUMER OR SALES TAX EXEMPTION # |
|---|--|-----------------------------------|
| NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER | | |
| ADDRESS | | |
| DEALER LICENSE NO. | | |

| SALES TAX AND USE REPORT | | INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS | \$ |
|---|-----------------------------|--|------------------------|
| TRANSFER OF TITLE <input type="checkbox"/> | PURCHASER HOLDS VALID | | |
| IS EXEMPT FROM | EXEMPTION CERTIFICATE | | |
| FLORIDA SALES OR | VEHICLE / VESSEL WILL BE | INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES | \$ 0.00 |
| USE TAX FOR THE | USED EXCLUSIVELY FOR RENTAL | | |
| REASON(S) CHECKED <input checked="" type="checkbox"/> | OTHER | | |
| | | <input type="checkbox"/> | SELLING PRICE VERIFIED |

| APPLICANT CERTIFICATION | |
|---|--|
| I/WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE. | |
| <input type="checkbox"/> I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED. | |
| <input type="checkbox"/> I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION. | |
| I/WE HEREBY CERTIFY THAT I/WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I/WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS. | |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. | |
| _____ Signature of Applicant/Owner | _____ Signature of Applicant/Co-Owner |

HSMV 82041 REVISED 02/06



COLUMBIA COUNTY BUILDING DEPARTMENT

Application # 1703-12

PRELIMINARY MOBILE HOME INSPECTION REPORT

\$50.00 Fee Paid JESDATE RECEIVED 3/10 BY [Signature] IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NOOWNERS NAME RONNIE NOLLS PHONE 752 3871 CELL 623 7716ADDRESS 1004 SW Charles Terr Lake City FL 32024

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Hwy 90 W to Hwy 247, Turn (L) To Cypress Lake Rd, Turn (R) to SW Charles Terr, turn (R) 1st dirt road turn (L) go to back of property.MOBILE HOME INSTALLER RONNIE NOLLS PHONE 752 3871 CELL 623 7716

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 89 SIZE 44 x 24 COLOR jaquarSERIAL No. G1689WIND 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

P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION Call Ronnie to open !!

P DOORS () OPERABLE () DAMAGED

P 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

EXTERIOR:

P WALLS / SIDING () 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: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

BUILDING INSPECTOR'S SIGNATURE

[Signature]

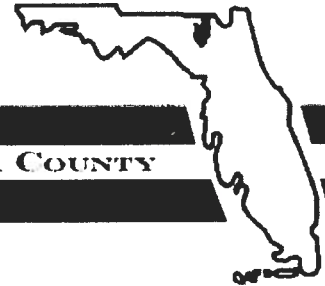
ID NUMBER

306

DATE

3-13-17

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: **11/21/2017 2:37:15 PM**
Address: **12217 SE COUNTY ROAD 245**
City: **LULU**
State: **FL**
Zip Code **32061**

Parcel ID **09380-000**

REMARKS: Address for proposed structure on parcel. 2nd address 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

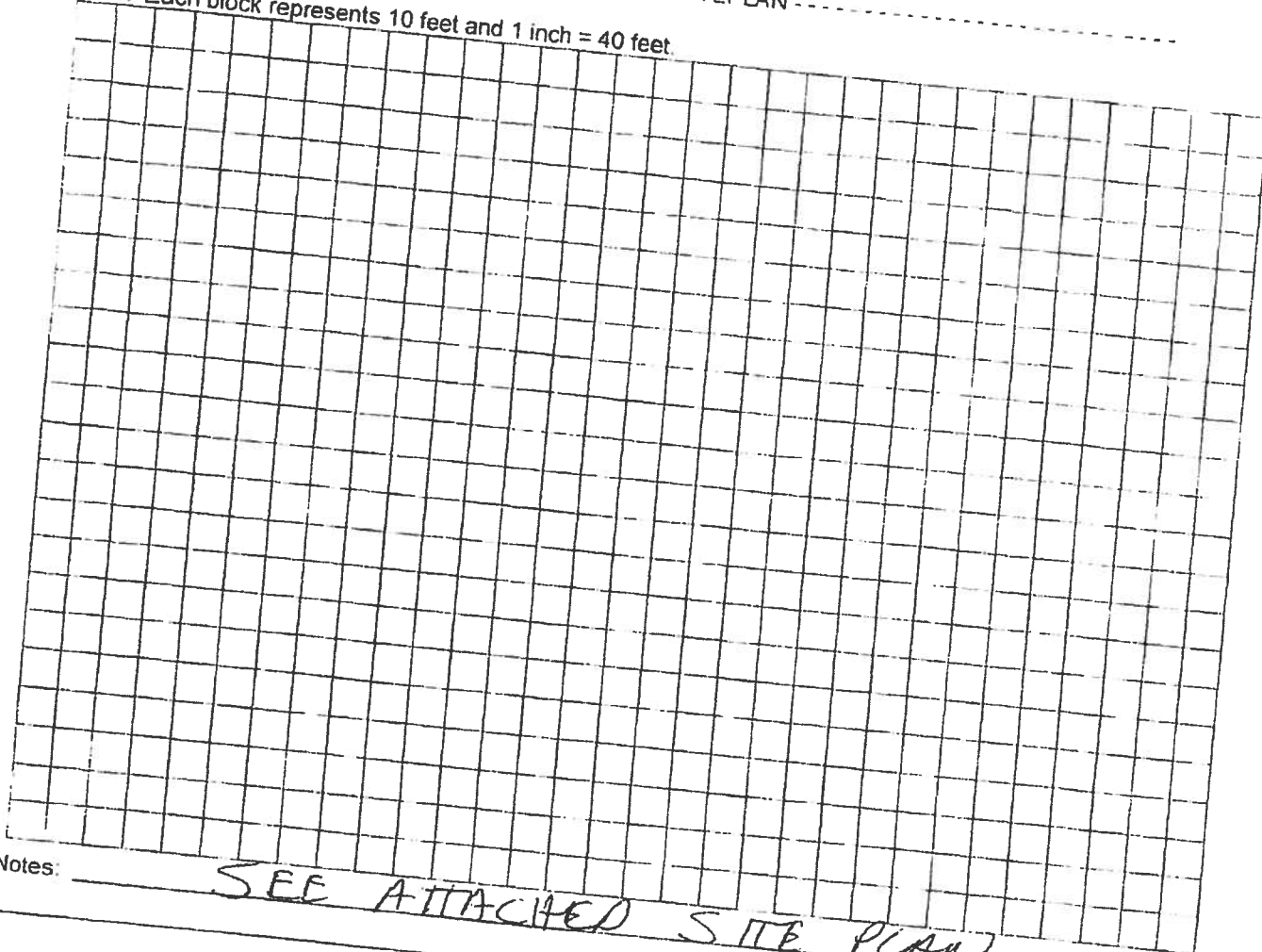
Eunice Johnson

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 17-0735

----- PART II - SITEPLAN -----

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

Notes: SEE ATTACHED SITE PLANSite Plan submitted by: Elliott B. [Signature]Plan Approved [Signature]By [Signature]Not Approved [Signature]Date 12/1/17

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: 64E-6.001, FAC
(Stock Number: 5744 002-4015-G)



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

PERMIT NO. 17-0735N
DATE PAID: 11/13/17
FEE PAID: 310.00
RECEIPT #: 310454

APPLICATION FOR:

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

APPLICANT: Eunice JohnsonAGENT: Howard Septic Service Inc.TELEPHONE: 386-935-1518MAILING ADDRESS: PO Box 180 Branford FL 32008

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 SUBDIVISION: NA PLATTED: _____

PROPERTY ID #: 25-SS-17-09380.000 ZONING: _____ I/M OR EQUIVALENT: ☐ No ☐

PROPERTY SIZE: 3.21 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ No ☐ Yes DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 12201 SE County Road 245, LULU FL 32061

DIRECTIONS TO PROPERTY: from CCHD take US hwy 90 East then turn right on SR 100, then turn right on County Road 245
continue to address on left.

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 | SFR | 3 | 1056 | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

| | | | | |
|---|-----|---|------|--|
| 1 | SFR | 3 | 1056 | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: John HowardDATE: 11/13/17

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

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

STATE OF FLORIDA
COUNTY OF COLUMBIA

Inst: 201712023575 Date: 12/27/2017 Time: 3:06PM
Page 1 of 2 B: 1350 P: 1715. P.DeWitt Cason. Clerk of Court
Columbia, County, By: BD
Deputy Clerk

BEFORE ME the undersigned Notary Public personally appeared.

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

1. Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 25-58-17-09380-000.
4. No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for 5 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.
6. This Special Temporary Use Permit on Parcel No. 25-58-17-09380-000 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.
7. The site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.

8. The parent parcel owner shall be responsible for non ad-valorem assessments.
9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.
10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).
13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

Eunice Johnson
Owner

Leighton Markham
Family Member

Eunice Johnson
Typed or Printed Name

Leighton Markham
Typed or Printed Name

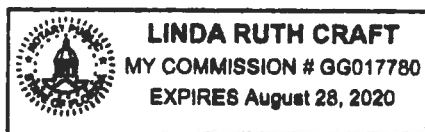
Subscribed and sworn to (or affirmed) before me this 4th day of December 2017, by Eunice Johnson (Owner) who is personally known to me or has produced FLDL as identification.

Linda Ruth Craft
Notary Public



Subscribed and sworn to (or affirmed) before me this 4th day of December 2017, by Leighton Markham (Family Member) who is personally known to me or has produced FLDL as identification.

Linda Ruth Craft
Notary Public



COLUMBIA COUNTY, FLORIDA

By: B. M. S.
Name: Brandon M. Stokes
Title: County Planner / CDR Admin.

