

D 04/19/2011

Columbia County Building Permit


This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000029330

APPLICANT	STEVE SMITH		PHONE	386-365-8549	
ADDRESS	466	SW DEPUTY JEFF DAVIS LN	LAKE CITY	FL	32024
OWNER	BULLARD AUDREY(BRUCE SANDERSON)		PHONE	386-569-2179	
ADDRESS	1329	NW HAMP FARMER RD	LAKE CITY	FL	32055
CONTRACTOR	GAYLE EDDY		PHONE	352-494-2326	
LOCATION OF PROPERTY	441 N PAST I-10 L COWCATCHER, L HAMP FARMER ABOUT 1 MILE 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.	0	FLOOD ZONE	X	DEVELOPMENT PERMIT NO.	

PARCEL ID	07-2S-17-04677-104	SUBDIVISION	PARADISE ESTATES		
LOT	4	BLOCK	PHASE	UNIT	TOTAL ACRES
					5.04

		IH1029339			
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor		
EXISTING	11-0077	BK	TC	N	
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident	

COMMENTS: ELEVATION CONFIRMATION LETTER REQUIRED WITH A MINIMUM FLOOR HEIGHT OF 120' (PER NGVD 1929) BEFORE POWER IS RELEAED

Check # or Cash 3827

FOR BUILDING & 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 \$	38.52
				WASTE FEE \$	100.50
FLOOD DEVELOPMENT FEE \$		FLOOD ZONE FEE \$	25.00	CULVERT FEE \$	
				<b>TOTAL FEE</b>	<b>464.02</b>

INSPECTORS OFFICE		CLERKS OFFICE	
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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.



**COLUMBIA COUNTY**  
**OFFICE**  
**OF**  
**PLANNING & ZONING**

# 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 07-2S-17-04677-104

Building permit No. 000029330

Permit Holder GAYLE EDDY

Owner of Building BULLARD AUDREY(BRUCE SANDERSON)

Location: 1329 NW HAMP FARMER RD, LAKE CITY, FL 32055

Date: 06/21/2011

*Gayle Eddy*

Building Inspector



**POST IN A CONSPICUOUS PLACE**  
*(Business Places Only)*





29 330

Land Surveyors  
and Mappers

## BRITT SURVEYING & ASSOCIATES

830 West Duval Street • Lake City, FL 32055  
Phone (386) 752-7163 • Fax (386) 752-5573

ok per  
6/6-  
6-20-11

04/15/11

L-20863

To Whom It May Concern:

C/o: Mrs. Audrey Bullard

Re: Lot 4 n Paradise Estates

We established a benchmark on lot 4 in a 16" oak tree as marked by the owner at an elevation of 125.00 feet. The minimum floor elevation as per the plat of record is established to be 120.00 feet. The adjacent ground elevation is 123.8 feet. The elevations shown hereon are based on NGVD 29.

L. Scott Britt  
PLS #5757



**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

✓ Eddy 464-759

<b>For Office Use Only</b> (Revised 1-11)		Zoning Official <u>BLK 29.0311</u>		Building Official <u>T.C. 3-25-11</u>	
AP# <u>1103-42</u>	Date Received <u>3/24</u>	By <u>JW</u>	Permit # <u>29330</u>		
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>		
Comments <u>Elevation Confirmation Letter Required 120' N6VD 1929</u>					
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>120'</u>	River <u>N/A</u>	In Floodway <u>N/A</u>	
<input checked="" type="checkbox"/> Site Plan with Setbacks Shown	<input type="checkbox"/> EH # <u>110077</u>	<input type="checkbox"/> EH Release	<input checked="" type="checkbox"/> Well letter	<input checked="" type="checkbox"/> Existing well	
<input checked="" type="checkbox"/> Recorded Deed or Affidavit from land owner	<input checked="" type="checkbox"/> Installer Authorization	<input type="checkbox"/> State Road Access	<input type="checkbox"/> 911 Sheet		
<input type="checkbox"/> Parent Parcel #	<input type="checkbox"/> STUP-MH	<input type="checkbox"/> F W Comp. letter	<input checked="" type="checkbox"/> VF Form		
IMPACT FEES: EMS		Fire	Corr	<input type="checkbox"/> Out County	<input checked="" type="checkbox"/> In County
Road/Code		School	= TOTAL	Impact Fees Suspended March 2009	

Property ID # 07-25-17-04677-104 Subdivision Paradise Estates Lot 4

▪ New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 14x66 Year 1996

▪ Applicant STEVE SMITH (Freedom Homes) Phone # 386-365-8549

▪ Address 466 SW Deputy J. Davis Ln. Lake City, FL 32024

▪ Name of Property Owner Bullard Audrey S. Phone # (386) 755-4050

▪ 911 Address 1329 NW HAMP FARMER RD LAKE CITY, FL 32055

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

▪ Name of Owner of Mobile Home Bruce Sanderson Phone # 386-569-2179  
Address 5729 Hwy 441 S. Lake City, FL 32024

▪ Relationship to Property Owner Buying land from her

▪ Current Number of Dwellings on Property 0

▪ Lot Size 225' x 1080' Total Acreage 5.04 acres (owned)

▪ 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 441 N past I10 - TL ON NW Cowcatcher  
TL ON NW Hamp Farmer. property on Right about  
a mile.

▪ Name of Licensed Dealer/Installer Gayle Eddy Phone # 352-494-2326

▪ Installers Address 10237 SW 40th terrace Lake Butler FL 32054

▪ License Number 1025339/1 Installation Decal # 3290

April 464.02 ck# 3827  
JW 1st + MESSAGE for Steve to call 3.30.11  
Spoke to Steve on 3-29-11 → \$ 487.19 ck# 3823



## COLUMBIA COUNTY 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 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.

EC Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Gaye Eddy

Date Tested

3/16

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. 15C

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C

## 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 N/A

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: N/A

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

Installer Signature

Gaye Eddy

Date 3/16/11



## COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Boyle Eddy License # 1025339/1

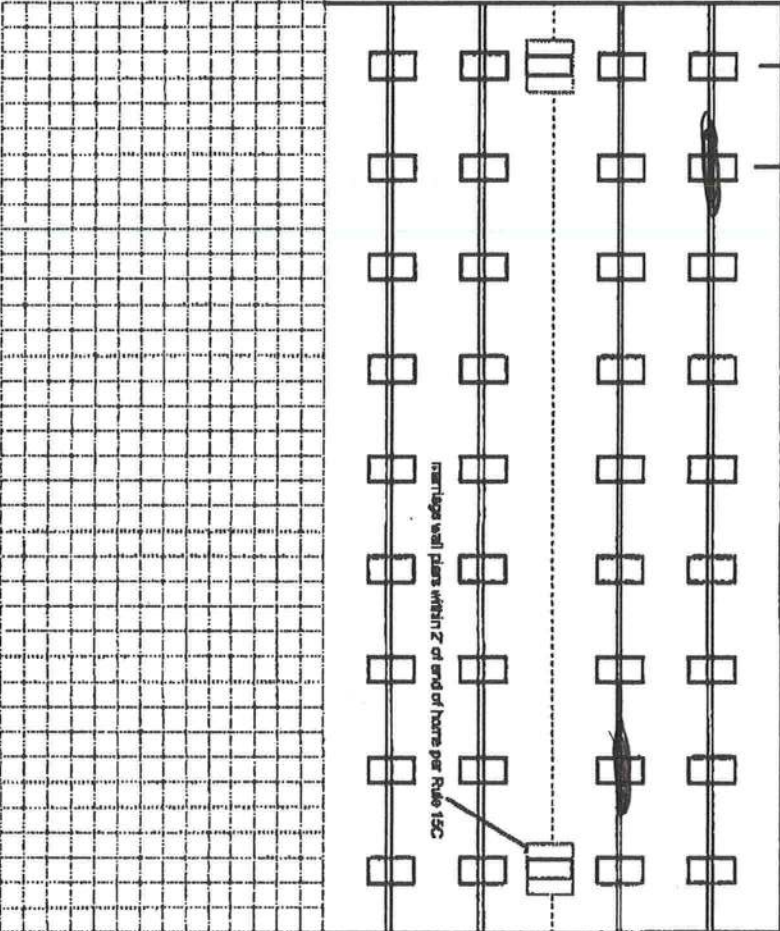
911 Address where home is being installed 1329 NW Hamp Farmer Rd  
Lake City FL 32055

Manufacturer Mirage Length x width 14 X 66

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 BE



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 # 3290  
Triple/Quad ☐ Serial # H1165586

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footer size (256)	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 nsf	3'	4'	5'	6'	7'	8'	8'
1500 nsf	4'	6'	7'	8'	8'	8'	8'
2000 nsf	6'	8'	8'	8'	8'	8'	8'
2500 nsf	7'	8'	8'	8'	8'	8'	8'
3000 nsf	8'	8'	8'	8'	8'	8'	8'
3500 nsf	8'	8'	8'	8'	8'	8'	8'

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

## PIER PAD SIZES

I-beam pier pad size 17x22  
Perimeter pier pad size N/A  
Other pier pad sizes (required by the mfg.) 21A

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



## TIEDOWN COMPONENTS

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

## POPULAR PAD SIZES

Pad Size	Sq ft
16' x 16'	256
16' x 18'	288
18.5' x 18.5'	342
15' 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

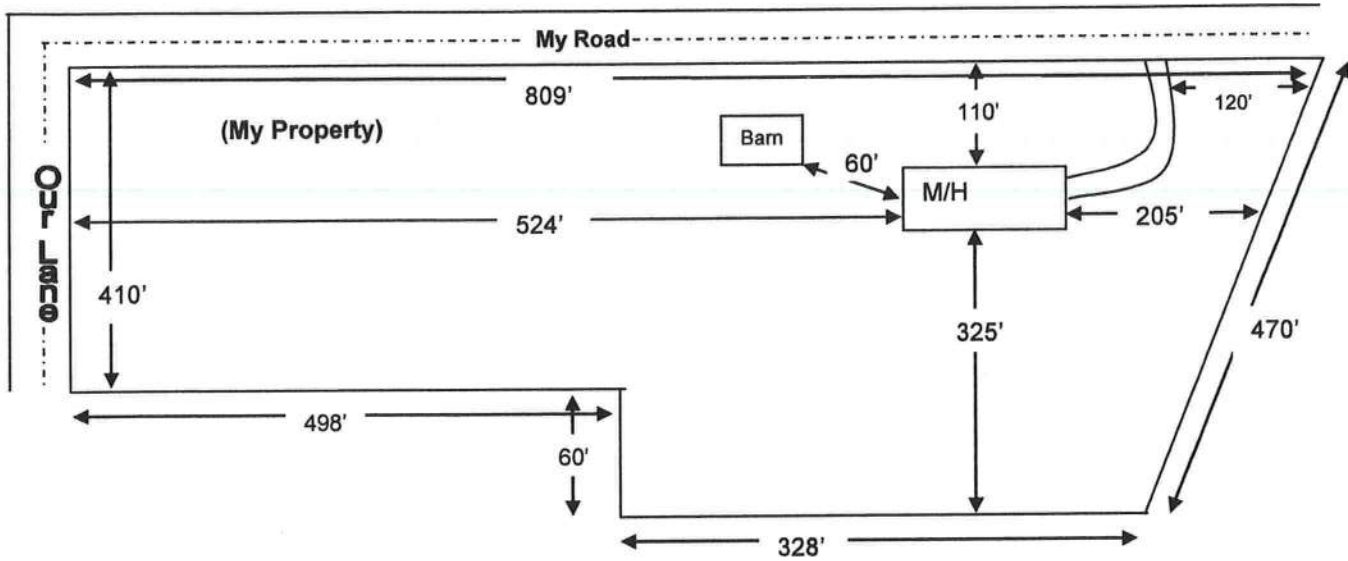
within 2' of end of home  
spaced at 5' 4" oc

## OTHER TIES

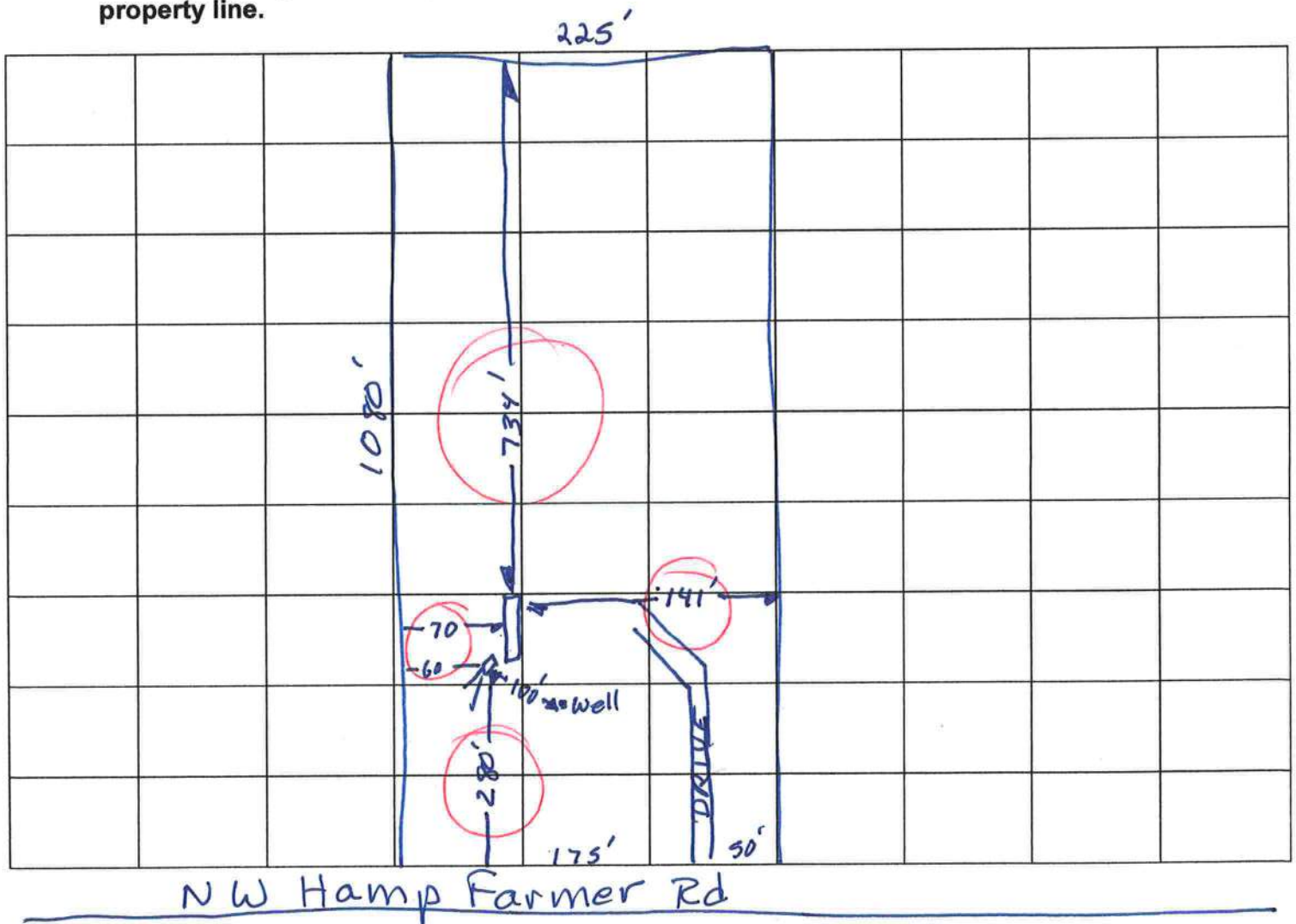
Number  
Sidewall 32  
Longitudinal Marriage wall 2  
Shearwall

will use 4 1/2 ft

# 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.







1103-42



## COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

### Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 9/17/2010 DATE ISSUED: 9/22/2010

**ENHANCED 9-1-1 ADDRESS:**

1329 NW HAMP FARMER RD

LAKE CITY FL 32055

**PROPERTY APPRAISER PARCEL NUMBER:**

07-2S-17-04677-104

**Remarks:**

LOT 4 PARADISE ESTATES S/O

Address Issued By:

  
Columbia County 9-1-1 Addressing / GIS Department

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





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, Gayle Eddy, give this authority and I do certify that the below  
Installers 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
Steve Smith		Freedom Mobile Homes

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.

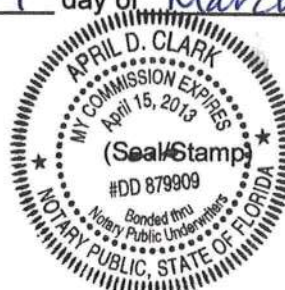
Gayle Eddy  
License Holders Signature (Notarized)  
1H1025339/1  
License Number  
3/17/11  
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Gayle Eddy,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 17 day of March, 20 11.

April D. Clark  
NOTARY'S SIGNATURE





## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 110 3. 42 CONTRACTOR Gayle Eddy PHONE 352-494-2326

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.**

<b>ELECTRICAL</b>	Print Name <u>Bruce Sanderson</u> License #: <u>Owner</u>	Signature <u>Bruce Sanderson</u> Phone #: <u>386-569-2179</u>
<b>MECHANICAL/ A/C</b>	Print Name <u>Bruce Sanderson</u> License #: <u>Owner</u>	Signature <u>Bruce Sanderson</u> Phone #: <u>11</u>
<b>PLUMBING/ GAS</b>	Print Name <u>Bruce Sanderson</u> License #: <u>Owner</u>	Signature <u>Bruce Sanderson</u> Phone #: <u>11</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	<u>NA</u>		
CONCRETE FINISHER	<u>NA</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.

Contractor Forms: Subcontractor form: 1/11





*Hall's Pump & Well Service, Inc.  
904 NW Main Blvd  
Lake City, FL. 32055*

**Date: 02/11/2011**

**Notice to All Contractors:**

**Re: Bruce Sanderson**

***Please be advised that due to the new building codes we will use a large capacity diaphragm tank on all new wells. This will insure a minimum of one (1) minute draw down or one (1) minute refill. If a smaller diaphragm tank is used then we will install a cycle stop valve which will produce the same results. All wells will have a pump & tank combination that will be sufficient enough for each situation.***

***If you have any questions please feel free to call our office.***

**Thank You,**

A handwritten signature in cursive script that reads "Russell Davis".

**Russell Davis**



1103-42

**AFFIDAVIT**

**STATE OF FLORIDA  
COUNTY OF COLUMBIA**

This is to certify that I, (We), DEB Timber & Land Trust  
owner of the below described property:

Tax Parcel No. 07-25-17-04677-104

Subdivision (name, lot, block, phase) lot 4 Paradise Estates

Give my permission to Bruce Sanderson to place a  
mobile home/travel trailer/single family home (circle one) on the above mentioned  
property.

I (We) understand that this could result in an assessment for solid waste and fire  
protection services levied on this property.

Arlene Pineda, Junior  
Owner

Owner

SWORN AND SUBSCRIBED before me this 24 day of March,  
20 11. This (these) person(s) are personally known to me or produced  
ID \_\_\_\_\_

Holly C. Hanover  
Notary Signature





**Columbia County Property Appraiser**

DB Last Updated: 3/22/2011

**Parcel: 07-2S-17-04677-104**

&lt;&lt; Next Lower Parcel Next Higher Parcel &gt;&gt;

**Owner & Property Info**

Owner's Name	BULLARD AUDREY S TRUSTEE		
Mailing Address	D & B TIMBER & LAND TRUST P O BX 3176 LAKE CITY, FL 32056		
Site Address	D B TIMBER LAND TRUST		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	7217
Land Area	5.040 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 4 PARADISE ESTATES S/D.			

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Search Result: 1 of 1

**2010 Tax Year****Property & Assessment Values**

<b>2010 Certified Values</b>	
<b>Mkt Land Value</b>	cnt: (0) \$30,780.00
<b>Ag Land Value</b>	cnt: (1) \$0.00
<b>Building Value</b>	cnt: (0) \$0.00
<b>XFOB Value</b>	cnt: (0) \$0.00
<b>Total Appraised Value</b>	\$30,780.00
<b>Just Value</b>	\$30,780.00
<b>Class Value</b>	\$0.00
<b>Assessed Value</b>	\$30,780.00
<b>Exempt Value</b>	\$0.00
<b>Total Taxable Value</b>	Cnty: \$30,780 Other: \$30,780   Schl: \$30,780

**2011 Working Values**

**NOTE:**  
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)**Sales History**

<b>Sale Date</b>	<b>OR Book/Page</b>	<b>OR Code</b>	<b>Vacant / Improved</b>	<b>Qualified Sale</b>	<b>Sale RCode</b>	<b>Sale Price</b>
NONE						

[Show Similar Sales within 1/2 mile](#)**Building Characteristics**

<b>Bldg Item</b>	<b>Bldg Desc</b>	<b>Year Bld</b>	<b>Ext. Walls</b>	<b>Heated S.F.</b>	<b>Actual S.F.</b>	<b>Bldg Value</b>
NONE						



Extra Features & Out Buildings

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

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1 LT - (0000005.040AC)	1.00/1.00/1.00/1.00	\$27,702.00	\$27,702.00

Columbia County Property Appraiser

DB Last Updated: 3/22/2011

1 of 1

DISCLAIMER

This information 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, it's use, or it's 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.



CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3/24 BY TH IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Bruce Anderson PHONE \_\_\_\_\_ CELL 888.569.2179

ADDRESS \_\_\_\_\_

MOBILE HOME PARK \_\_\_\_\_ SUB DIVISION \_\_\_\_\_

DRIVING DIRECTIONS TO MOBILE HOME FREEDOM MH Sales: See Steve Smith

MOBILE HOME INSTALLER GARY Eddy PHONE 362.499.2322 CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE NIRAGE YEAR 1998 SIZE 14 x 66 COLOR Blue

SERIAL No. A11655867

WIND ZONE II Must be wind zone II or higher N | WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P=PASS F=FAILED

☒ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

☒ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION

☒ DOORS ( ) OPERABLE ( ) DAMAGED

☒ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

☒ WINDOWS ( ) OPERABLE ( ) INOPERABLE

☒ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

☒ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

☒ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

☒ WALLS/SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

☒ WINDOWS ☒ CRACKED/BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

☒ ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: Replace Broken Kitchen Window

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE Steve Smith ID NUMBER 402 DATE 3-25-11





STATE OF FLORIDA  
DEPARTMENT OF HEALTH

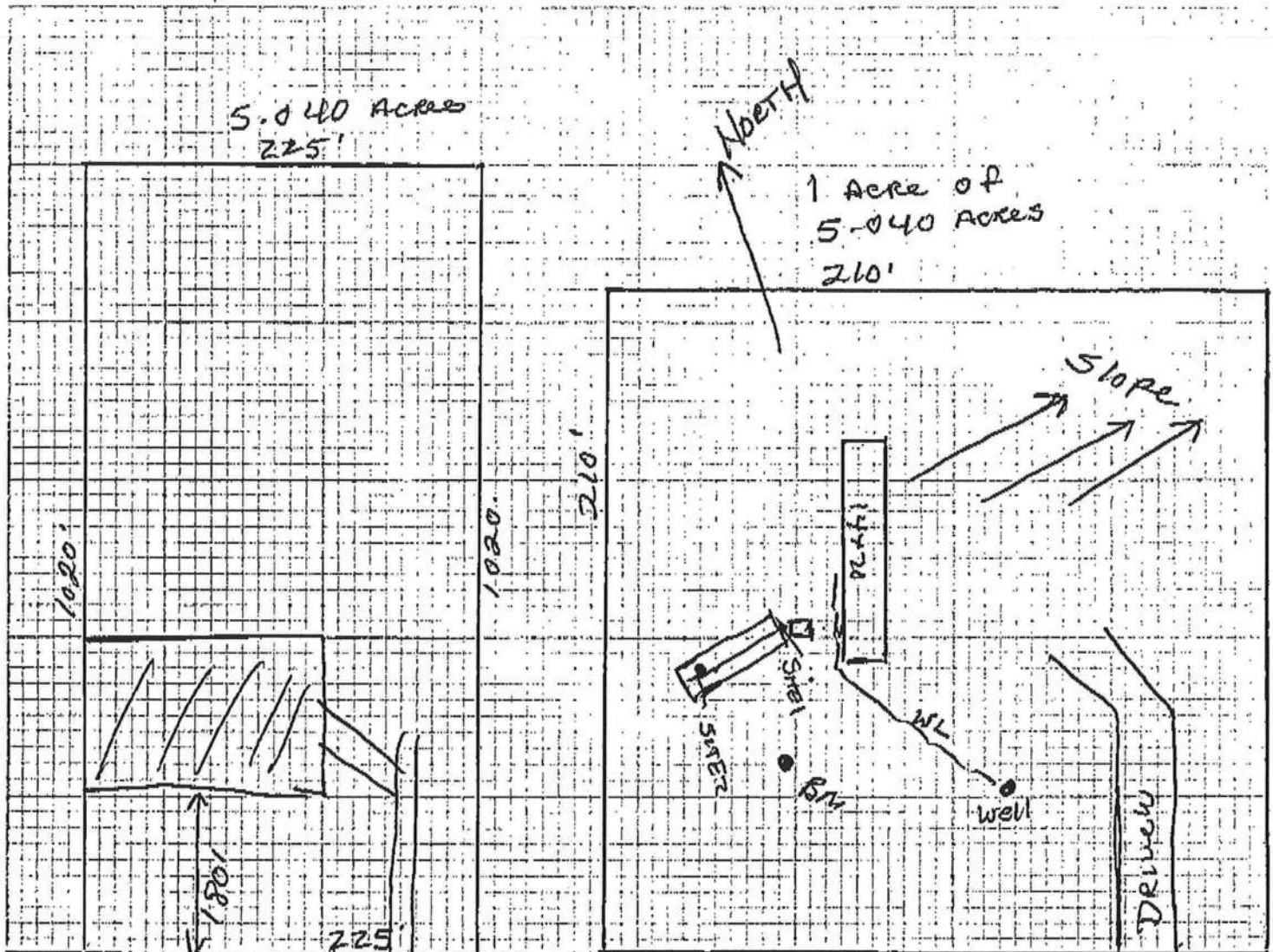
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT,

Permit Application Number

11-0577

**PART II - SITE PLAN.**

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



Notes: Hamp Farmer Rd.

Audrey Bullard (Bruce Sanderson)

20+4 'Paradise Estates' - 04677-104

**Site Plan submitted by:**

Robert W. J. J.  
Signature

**Signature**

**Plan Approved**

Not Approved

By \_\_\_\_\_

Reviewed ✓ Not Applicable  
Sally Ford - Eff Director.

**Columbia CHD**

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**



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

11-0077  
PERMIT NO. 994332  
DATE PAID: 2/16/11  
FEE PAID: 310.00  
RECEIPT #: 1564545

## APPLICATION FOR:

☒ New System  
☐ Repair

☐ Existing System  
☐ Abandonment

☐ Holding Tank  
☐ Temporary

☐ Innovative  
☐

APPLICANT:

Audrey Bullard (Bruce S. Anderson)

AGENT:

Robert Ford NFST inc

TELEPHONE: 755-6372

MAILING ADDRESS:

580 NW Guerdon Rd LE FLA 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) 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: 4 BLOCK: — SUBDIVISION: Paradise Estates PLATTED: 2/10/7

PROPERTY ID #: 07-25-17-04677 <sup>104</sup> ZONING: DF I/M OR EQUIVALENT: ☒ (N)

PROPERTY SIZE: 5.040 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ 1<2000GPD ☐ 1>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ (N)

DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: Hamp Farmer Rd.

DIRECTIONS TO PROPERTY: Hwy 441 NORTH TO Hamp-Farmer Rd  
TL Follow Pavement 3 mile to lot 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

M/H

3

14x70  
980

2

3

4

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE:

Robert W. Ford

DATE: 2/15/11