DATE 11/21/2	Columbia County Bu This Permit Must Be Prominently Posted of		PERMIT 000029778
APPLICANT M	IIKE COX	PHONE 386-623-4	
	466 SW DEPUTY J DAVIS LN	LAKE CITY	FL 32024
Decoupling the second	IMBERLANE M/H COMM,LLC.(ART GROVER)	PHONE 607-592-9	
-	22 SW SWEETBAY CT.	LAKE CITY	FL 32024
CONTRACTOR	RUSTY KNOWLES	PHONE 386-397-0	
LOCATION OF P	PROPERTY 90-W TO SR. 247-S, TO TROY,T	R TO MHP IS 1 1/2 MILES ON L	
	ON SWEETBAY CT, THEN 2ND	ON LEFT	
TYPE DEVELOP	MENT MH, UTILITY EST	TIMATED COST OF CONSTRUCTION	ON 0.00
HEATED FLOOR	AREA TOTAL ARE	A HEIGHT	STORIES
FOUNDATION	WALLS R	OOF PITCH	FLOOR
LAND USE & ZO	ONING RSF-2	MAX. HEIGHT	35
Minimum Set Bac	k Requirments: STREET-FRONT 25.00	REAR 15.00	SIDE 10.00
NO. EX.D.U.	1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.	
	9-4S-16-02824-000 SUBDIVISION		UITY
	LOCK PHASE 2 UNIT 0		
E01 2 B	THASE ONLY		
	IH1038219	4 Wester D	act
Culvert Permit No.	Productive colors of the first water and the state of the		vner/Contractor
EXISTING	11-476-E BK	RJ	uance New Resident
Driveway Connect		g checked by Approved for Iss	uance New Resident
_	LOOR ONE FOOT ABOVE THE ROAD		
SECTION 2.3.8 M	H PARK AS NON-CONFORMITY	Claral #	or Cash 32269
		Check # o	or Cash 32209
	FOR BUILDING & ZONIN	G DEPARTMENT ONLY	(footer/Slab)
Temporary Power		Monolithi Monolithi	
Under alah revek	date/app. by	date/app. by	date/app. by
Under slab rough-	in plumbing Slab Slab	date/app. by	ning/Nailing date/app. by
Framing	Insulation		,,
	date/app. by date	/app. by	
Rough-in plumbing	g above slab and below wood floor	Electrical rough	n-in
Heat & Air Duct		ate/app. by	date/app. by
Heat & Air Duct	Peri. beam (Lintel date/app. by	Pool date/app. by	date/app. by
Permanent power	C.O. Final	Culvert	чанеларр. бу
Pump pole		ate/app. by	date/app. by
	/app. by Utility Pole M/H tie do	owns, blocking, electricity and plumbi	ng date/app. by
Reconnection	RV	Re-n	oof
	date/app. by	date/app. by	date/app. by
BUILDING PERM	IIT FEE \$ 0.00 CERTIFICATION FEE	E\$ 0.00 SURCHA	RGE FEE \$ 0.00
MISC. FEES \$	250.00 ZONING CERT. FEE \$ 50.00	FIRE FEE \$ W.	ASTE FEE \$
FLOOD DEVELO	PMENT FEE \$ FLOOD ZONE FEE \$ _25.00	CULVERT FEE \$ T	OTAL FEE 325.00
INSPECTORS OF	FICE Z L	CLERKS OFFICE	14
Deloks of	-6-1		1

PERMIT

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.

	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
F	for Office Use Only (Revised 1-11) Zoning Official SK 18 Nov Jehr Building Official
100	P# [[[] - 16 Date Received [[/]5/[] By L/4 Permit # 29778
F	lood Zone X Development Permit NA Zoning QSF-2 Land Use Plan Map Category & Land Sevinaria
C	comments Section 2.3.8 MH Park as Non-conformity
_	
	EMA Map# NA Elevation NA Finished Floor River NA In Floodway NA
1	Site Plan with Setbacks Shown EH # 11 - 476 - E = EH Release
	Recorded Deed or Affidavit from land owner Installer Authorization Istate Road Access 911 Sheet
	Parent Parcel # STUP-MH F W Comp. letter VF Form
4	PACT FEES: EMS Fire Corr Anout County in County
Ro	ad/Code School= TOTAL _ Impact Fees Suspended March 2009_
Pro	perty ID # 09-45-16-028-24-000 Subdivision Timberlane Wobile Home PAKK
•	New Mobile Home Used Mobile Home MH Size 16 X 60 Year 2012
	Applicant Fleedow Mobile Home SHles Phone # 386-623-4218
*	Address 466 SW Deptety J. DAVIS LA LAKE CITY F1 32024
ä	Name of Property Owner WARK & PAH, Coad Sow Phone# 386-755-6795
	911 Address 122 Sweetbay Court LAKE City. Fl 32024 CHour Site
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Progress Energy</u>
	Name of Owner of Mobile Home ART & WHRY CHOVER Phone # 607-592-9057
- T	Address 122 SW Sweethey Count, Lake City Fl B2024 New Home Site
	Relationship to Property Owner Nowe
	Current Number of Dwellings on Property
	Lot Size 75 × 150 Total Acreage N/H
•	Do you : Have Existing Drive or Private Drive (Gurrently using) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home
	Driving Directions to the Property 90 West To 252B TORN Left 252B To
	TROY Rd Tiens Right GO TO Seconds Drive way IN Timerhous PARK
	TURN Right Then Seconde Home ON Left Sec Sign.
=	Name of Licensed Dealer/Installer Kusty L. Kwowles Phone #386-397-0886
•	Installers Address 580 SW State Rd 47 LAKE City Fd, 32024
	License Number <u>1H-1038219</u> Installation Decal # <u>8931</u>
	last a message on Mike's cell 11/18/11

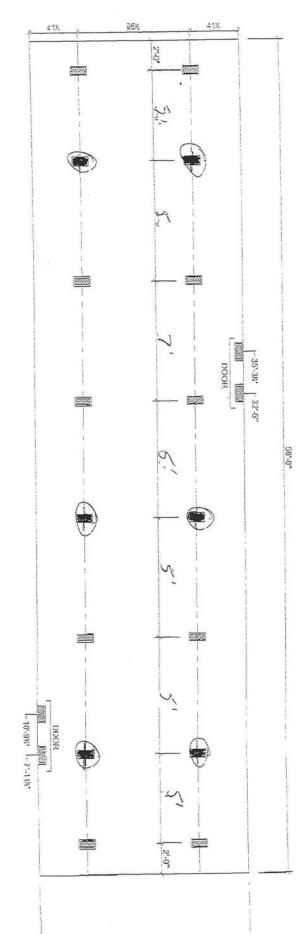
. .

New Home Used Home Home Installed in accordance with Rule (5-C) Single wide Installed in accordance with Rule (5-C) Single wide Installation Decal #		Maritage wall plots within 2 of end of frome per Rule 15C	Typical pier spacing lateral Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Manufacturer 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 it 4 in.	Installer Rust L. Kwowles License # 14 4038218 Address of home being installed	PERMIT WORKSHEET
	TIEDOWN COMPONENTS Stabilizing Device (LSD) Stabilizing Device w/ Lateral Arms Stabilizing Device w/ Lateral Arms Shearwall Shearwall	ad size 16 x 18 288 18.5 x 18.5 342 18.5 x 18.5 342 18 x 22.5 360 17 x 22 374 18 x 22.5 360 17 x 26 1/4 348 20 x 20 400 17 3/16 x 25 3/16 441 17 3/16 x 25 3/16 441 17 3/16 x 25 3/16 441 17 3/16 x 25 3/16 446 18 x 18 288 18 x 18 342 18 x 22.5 342 342 374 43 47 47 446 47 47 47 47 47 47 48 47 49 40 40 40 40 40 40 40 40 5/6 6	1 1 1 1 1 1 1 2 2 2	Wind Zone Wind Zone	ome Used Home II Installed to the Manufacturer's Installation Manual Is installed in accordance with Rule 15-C	page 1 of 2

PERMIT NUMB

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pa. 157-1	Connect all sewer drains to an existing sewer tap or septic tank. Pg. 152-1	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 156-1	Electrical	Installer Name Rusty L. Knowles Date Tested 11-11-11	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	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 2 /5 or less and where the mobile nome manufacturer may requires anchors with 4000 lb holding capacity. Installer's initials	TORQUE PROBE TEST The results of the torque probe test is AA USA IIIII 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.	OTX OTX	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	z. Take the teading at the depth of the locies.		CTx CTx	POCKET PENETROMETER TEST The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing.	PERMIT NUMBER PERMIT W
Installer Signature # # # Control Data [1-11-1]	installation instructions and or Rule		Installer verifies all information given with this permit worksheet	Oller 126-1 may of easy hat have like to in series	to be installed. YesNo ent installed outside of skirting. Yes downflow vent installed outside of skirting res supported at 4 foot intervals. Yes all crossovers protected. Yes	Miscellaneous	Weatherproofing The bottomboard will be repaired and/or laped. Yes Pg. 152-1 Siding on units is installed to manufacturer's specifications. Yes Fireplace chin ney installed so as not to allow intrusion of rain water. Yes	Type gasket A Installed: Pg Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage wells are	Gas kat (wautharproofing raquirament)	Type Fastener: Type Fastener: Length: Length:	Floor: Type Fastener: 1. Length: Spacing:	Sile Preparation Debris and organic material removed Water drainage: Natural Swale Pad Other Fastaning multi wide units	PERMIT WORKSHEET page 2 of 2

ten - Door piers lexle Abs pads 11 - I Bran piers 7'Oc, using 231/4×311/4 Abs pad 1.6. 1101V All Steel Foundations From Oliver technology



SUPPORT PIER/I'YP IS MARRIAGE LINE OPENING SUPPORT PIER/TYP.

FOUNDATION NOTES:

MODEL: S-5562 - 16 X 60 2-BEDROOM / 2-BATH

Live Oak Homes

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

14/29/07

(A) MAIN ELECTRICAL
(B) ELECTRICAL CROSSOVER
(B) ELECTRICAL CROSSOVER
(B) SEWER PROPS
(C) WATER INLET
(D) WATER CROSSOVER (IF ANY)
(D) WATER CROSSOVER (IF ANY)
(D) SUPPLY AIR (WI/OPT, HEAT PUMP OH DUCT)
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ANY)

S-5562



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number _ . . . PART II - SITE PLAN-Scale: Each block represents 5 feet and 1 inch = 50 feet. 5.00 ACES 8 DoUBLENIRE 017 TROJEd Notes: MARK & PATTY bondson Signature Not Approved

Columbia Col

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTME

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

Page 2 of 3

386 752 4757 (CHA1300 15C 4151

r. uu i P 1/1

05/25/2011 07:35 3867582160

BUILDING AND ZONING

בראחרורחרחו

P. UU1/UU1 PAGE 07/07

MOBILE HOME INSTALLATION SUBCONTRACTOS: VERIFICATION FORM

APPLICATION NUMBER CONTRACTOR PHONE 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 finder 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 Competioncy 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.

X	ELECTRICAL	Print Name MICHAEL A. BO-AND SIgnature Mula Roll - C License #: ES 12000671 Phone #: 850 556-7418
*	MECHANICAL/	Print Name MICHAEL A BOLAND SIgnature Much Poulup License #: CACISIO 480 PRone #: 850-556-7418
	PLUMBING/ GAS	Print Name Ruate L. Kasowies Signature 7 12 12 12 12 12 12 12 12 12 12 12 12 12

Specially License	License Number	Sub-Contractors Printed Name	Sub Contractor, Signature
MASON	1 441	to part of the second of the second	DES CONTRACTOR SIGNATURE
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. 442.10 and 440.38, and shall be presented each Mike Fill out And FAX Buck Both
Thanks wike freedom time the employer applies for a building permit.

Columbia County Property

Appraiser

DB Last Updated: 10/3/2011

Parcel: 09-4S-16-02824-000

<< Next Lower Parcel | Next Higher Parcel >>

Owner & Property Info

Marle & Pati

Tax Collector	Tax Estimator	Property Card	
	Pa	rcel List Generator	
	Interactive GI	S Map Print	

Search Result: 1 of 1

1000 1250 1500 1750 ft

2010 Tax Year





Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$33,242.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (3)	\$56,310.00
Total Appraised Value		\$89,552.00
Just Value		\$89,552.00
Class Value		\$0.00
Assessed Value		\$89,552.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$89,552 Other: \$89,552 Schl: \$89,552

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

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/30/2005	1070/47	WD	V	Q		\$173,800.00
1/1/1984	529/495	WD	V	Q		\$13,500.00
11/1/1983	526/245	WD	V	Q		\$13,800.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value	
NONE							

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0259	МНР НООКИР	0	\$36,550.00	0000017.000	0 x 0 x 0	AP (050.00)
0166	CONC,PAVMT	0	\$6,800.00	0000001.000	20 x 20 x 0	(000.00)
0260	PAVEMENT-A	0	\$12,960.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

http://g2.columbia.floridapa.com/GIS/D_SearchResults.asp

11/15/2011

MAA-01-5011(WAN) 12:48 KX UOTE/IIBE 3861285160 P. 001 11/07/2011 15:52 3867582160 BUILDING AND ZONING PAGE 01/01 AFFIDAVIT STATE OF FLORIDA COUNTY OF COLUMBIA This is to certify that I, (We). owner of the below described property: Tax Parcel No. Subdivision (name, lot, block, phase)_ Give my permission to Arthur & Mary Grover Lot 15 mobile home/travel trailer/single family home (circle one) on the above mentioned I (We) understand that this could result in an assessment for solid waste and fire protection services leyied on this property. Owner Owner SWORN AND SUBSCRIBED before me this SWORN AND SUBSCRIBED before me this day of November 20 1. This (these) person(s) are personally known to me or produced LAURIE HODSON MY COMMISSION # DD 805657 EXPIRES: July 14, 2012 ded Thru Notary Public Underwi Notary Signature

>1	086
	209
1 9 4	195
 7 87	179
	167
SO	153
i34	135
15	123
108	109

Screen print to verify address 122 SW Sweetbay CT, from permit/address database file. 11/15/2011 By: Laurie Hodson

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT
Permit Application Number _- 11-04465

---- PART II - SITE PLAN --Scale: Each block represents 5 feet and 1 Inch = 50 feet. Notes: Site Plan submitted by Not Approved CHANGES MUST BE APPROVED BY THE COUNTY HE

