

DATE 05/04/2011

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029378

APPLICANT GLENN W. COX PHONE 352.317.2332
ADDRESS 286 SW BELLAMY ROAD HIGH SPRINGS FL 32643
OWNER GLENN W. COX PHONE 352.317.2332
ADDRESS 286 SW BELLAMY ROAD HIGH SPRINGS FL 32643
CONTRACTOR FERMON JONES PHONE 352.318.4711
LOCATION OF PROPERTY 41/441-S TO 1/2 MILE PAST OLENO STATE PARK TO BELLANY RD,TR
AND IT'S 1/4 MILE TO RROPERTY ON L.
TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
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 04-7S-17-09891-006 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 5.90

IH1025418
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 11-206 BLK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REPLACING EXISTING M/H. 1 FOOT ABOVE ROAD.

Check # or Cash CASH

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 \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 325.00
INSPECTORS OFFICE CLERKS OFFICE

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.

Patricia Cox: 386.454.1517

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>BLK 03.05-11</u>	Building Official <u>T.C. 4-28-11</u>
AP# <u>1104-52</u>	Date Received <u>4-26-11</u>	By <u>CH</u>	Permit # <u>29378</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>Rephrasing existing m/A</u>			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1 above RL</u>	River <u>N/A</u> In Floodway <u>N/A</u>
☒ Site Plan with Setbacks Shown	☒ EH # <u>11-206</u>	☐ EH Release	☐ Well letter ☒ Existing well
☒ Recorded Deed or Affidavit from land owner	☐ Installer Authorization <u>N/A</u>	☐ State Road Access	☒ 911 Sheet
☐ Parent Parcel # <u>09891-500</u>	☐ STUP-MH	☒ F W Comp. letter	☐ VF Form
IMPACT FEES: EMS _____ Fire _____ Corr _____		☒ Out County	☒ In County <u>pd</u>
Road/Code _____ School _____ = TOTAL _____		Impact Fees Suspended March 2009 <u>5.4.11</u>	
<u>N/A Replacement</u>			

Property ID # 04-75-17-09891-006 Subdivision _____

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x70 Year 1987
- Applicant Glenn W. Cox Phone # 352.317.2332
- Address 286 SW Bellamy RD High Springs FL 32643
- Name of Property Owner Glenn W. Cox Phone# 352-317-2332
- 911 Address 286 SW Bellamy RD High Springs FL 32643
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

- Name of Owner of Mobile Home Glenn Cox Phone # 352.317.2332
- Address 286 SW Bellamy Rd. High Springs, FL 32643
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 5.90

- 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 which was the on the whole property this piece new # but replacing home on property
- Driving Directions to the Property 1/2 mile S of Olden State Park Bellamy RD to right 1/4 mile property on left.

- Name of Licensed Dealer/Installer Fernon Jones Phone # 352-318-4211
- Installers Address 6795 S.W. 71st Ave Lake Butler, FL 32054
- License Number TH/1025419 Installation Decal # 306742

\$325.00

JW spoke w/ Glenn on 5.4.11
JW advised Fernon of status. 5.4.11

COLUMBIA COUNTY PERMIT WORKSHEET

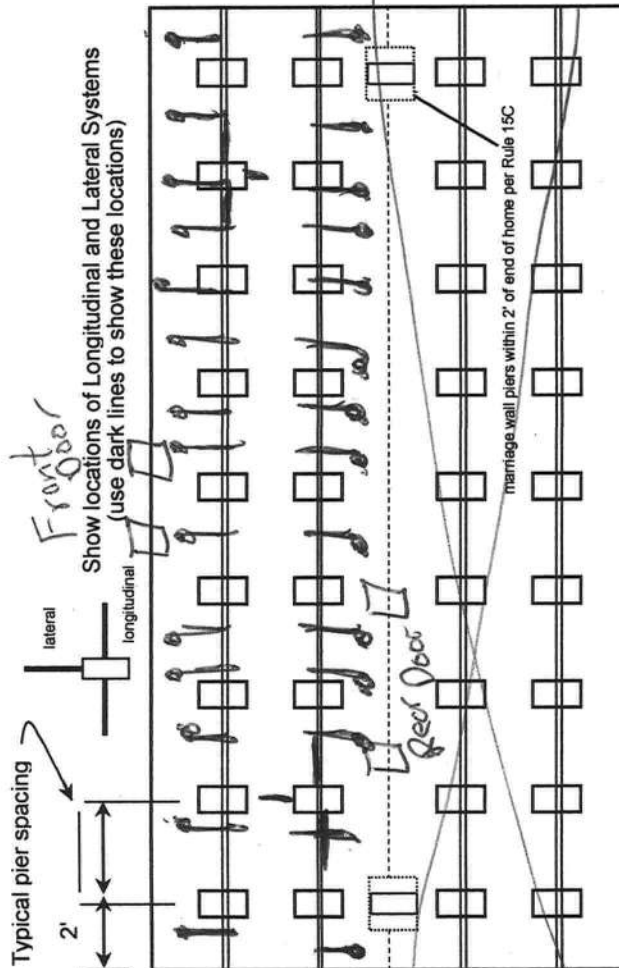
These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Fernon Jones License # TH/1025418
911 Address where home is being installed. 286 S.W. Belknap Rd
High Springs, FL 32643
Manufacturer SHS Length x width 14x70

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 F.J.



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 # 30674182
Triple/Quad ☐ Serial # SHS/WGA238610189

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	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'	3'	4'	5'	6'	7'	8'
1500 psf	4'6"	4'6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7'6"	7'6"	8'	8'	8'	8'	8'
3000 psf	8'	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 23x31
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg.) 12x12

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 ft

5 ft

ANCHORS

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Number

Longitudinal Stabilizing Device (LSD)

Manufacturer

Sidewall Longitudinal

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Marriage wall Shearwall

682
Sq.
Tie, 2
of
Pad

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 325 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 requires anchors with 4000 lb holding capacity.

F.J. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Fernon Jones
Date Tested 4-23/11

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 yes
Water drainage: Natural ✓ Swale ✓ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: N/A Length: _____ Spacing: _____
Walls: Type Fastener: N/A Length: _____ Spacing: _____
Roof: Type Fastener: N/A 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 F.J.

Type gasket N/A
Pg. _____
Installed:
Between Floors Yes N/A
Between Walls Yes N/A
Bottom of ridgebeam Yes N/A

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 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 over _____
Electrical crossovers protected. Yes _____
Other: _____

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

Installer Signature Fernon Jones Date 4/23/11

RONNIE BRANNON

COLUMBIA COUNTY TAX COLLECTOR

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

Reminder REAL ESTATE 2010 130410.0000

ACCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R09891-006		SEE BELOW	SEE BELOW	SEE BELOW	003

PRIOR YEAR TAXES ARE DUE

COX GLENN W & PATRICIA L
P O BOX 2014
HIGH SPRINGS FL 32643

04-7S-17 0000/0200 5.90 Acres
COMM SE COR OF N1/2 OF NE1/4
OF SE1/4, RUN W 50 FT TO W
R/W US-41, CONT W 731.51 FT
FOR POB, CONT W 545.36 FT, N
See Tax Roll For Extra Legal

AD VALOREM TAXES					
TAXING AUTHORITY	MILLAGE RATE	ASSESSED VALUE	EXEMPTION AMOUNT	TAXABLE VALUE	TAXES LEVIED
BOARD OF COUNTY COMMISS	7.8910	42,860		42,860	338.21
COLUMBIA COUNTY SCHOOL					
DISCRETIONARY	0.9980	42,860		42,860	42.77
LOCAL	5.4140	42,860		42,860	232.04
CAPITAL OUTLAY	1.5000	42,860		42,860	64.29
SUWANNEE RIVER WATER M	0.4399	42,860		42,860	18.85
LAKE SHORE HOSPITAL AUT	0.9620	42,860		42,860	41.23
COLUMBIA COUNTY INDUST	0.1240	42,860		42,860	5.31
Exemptions Applied:					
TOTAL MILLAGE		17.3289	AD VALOREM TAXES		742.70

NON-AD VALOREM ASSESSMENTS		
LEVYING AUTHORITY	RATE	AMOUNT
FFIR FIRE ASSESSMENTS		77.00
GGAR SOLID WASTE - ANNUAL		201.00
NON-AD VALOREM ASSESSMENTS		278.00

Please
retain
this
Portion
for your
records

COMBINED TAXES AND ASSESSMENTS		1,020.70	See reverse side for important information		
IF PAID BY PLEASE PAY	Apr 30 2011 1,051.32	ADV IF NOT PD BY 4/30	May 24 2011 1,076.82		

RONNIE BRANNON

COLUMBIA COUNTY TAX COLLECTOR

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R/W US-41, CONT W 731.51 FT
FOR POB, CONT W 545.36 FT, N
See Tax Roll For Extra Legal

PLEASE PAY IN U.S. FUNDS (NO POST DATED CHECKS) TO RONNIE BRANNON TAX COLLECTOR - 135 NE HERNANDO AVE. - SUITE 125, LAKE CITY, FL. 32055-4006

IF PAID BY PLEASE PAY	Apr 30 2011 1,051.32	ADV IF NOT PD BY 4/30	May 24 2011 1,076.82		
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0000000000 0000102070 0000001304100000 0001 5

Columbia County Property Appraiser

DB Last Updated: 5/3/2011

2010 Tax Year

Parcel: 04-7S-17-09891-006

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	COX GLENN W & PATRICIA L		
Mailing Address	P O BOX 2014 HIGH SPRINGS, FL 32643		
Site Address	P O BOX 2014		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	4717
Land Area	5.900 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 OF N1/2 OF NE1/4 OF SE1/4, RUN W 50 FT TO W R/W US-41, CONT W 731.51 FT FOR POB, CONT W 545.36 FT, N 543.74 FT TO S R/W OF OLD BELLAMY RD, SE ALONG R/W 566.47, S 399.22 FT TO POB. ORB 468-673, 648-805, 725-049, 794-685, (SPLIT FROM PARENT 09891-000)			



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$42,860.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$42,860.00
Just Value		\$42,860.00
Class Value		\$0.00
Assessed Value		\$42,860.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$42,860 Other: \$42,860 Schl: \$42,860	

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
NONE						

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)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	5.9 AC	1.00/1.00/1.00/1.00	\$6,232.95	\$36,774.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

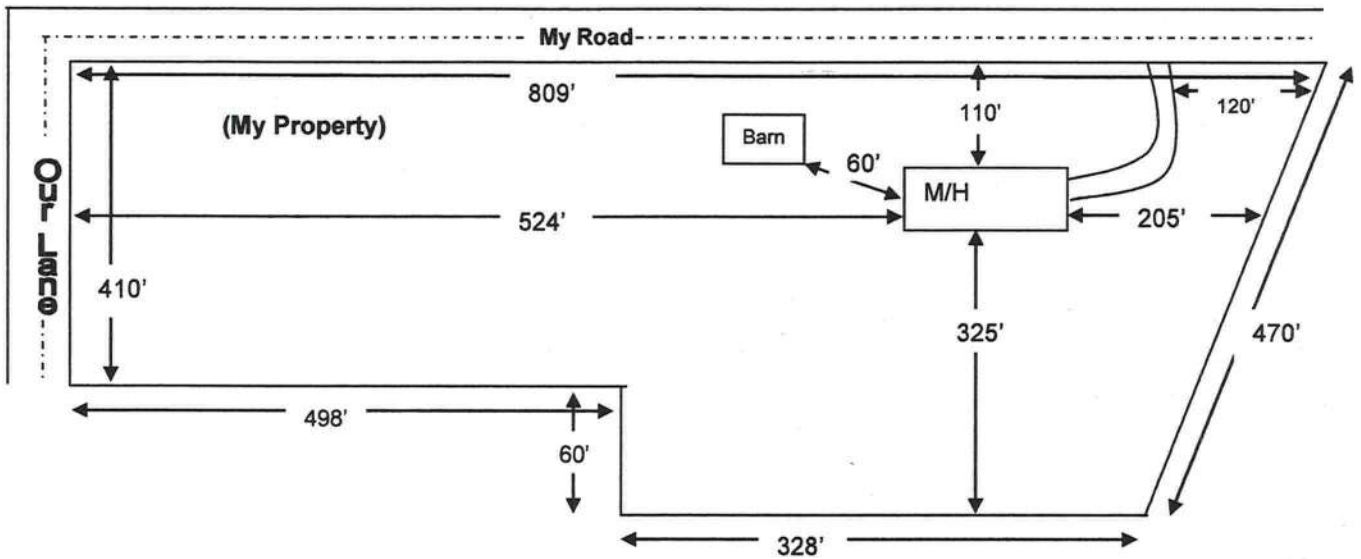
© CAM112M01	CamaUSA Appraisal System	Columbia County
4/25/2011 10:32	Legal Description Maintenance	38774 Land 002
Year T Property	Sel	AG 000
2011 R 04-7S-17-09891-006		Bldg 000
HIGH SPRINGS		Xfea 000
COX GLENN W & PATRICIA L.		38774 TOTAL B*

1	COMM SE COR OF N1/2 OF NE1/4	OF SE1/4, RUN W 50 FT TO W	2
3	R/W US-41, CONT W 731.51 FT	FOR POB, CONT W 545.36 FT, N	4
5	543.74 FT TO S R/W OF OLD	BELLAMY RD, SE ALONG R/W	6
7	566.47, S 399.22 FT TO POB.	ORB 468-673, 648-805,	8
9	725-049, 794-685, (SPLIT FROM	PARENT 09891-000)	10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

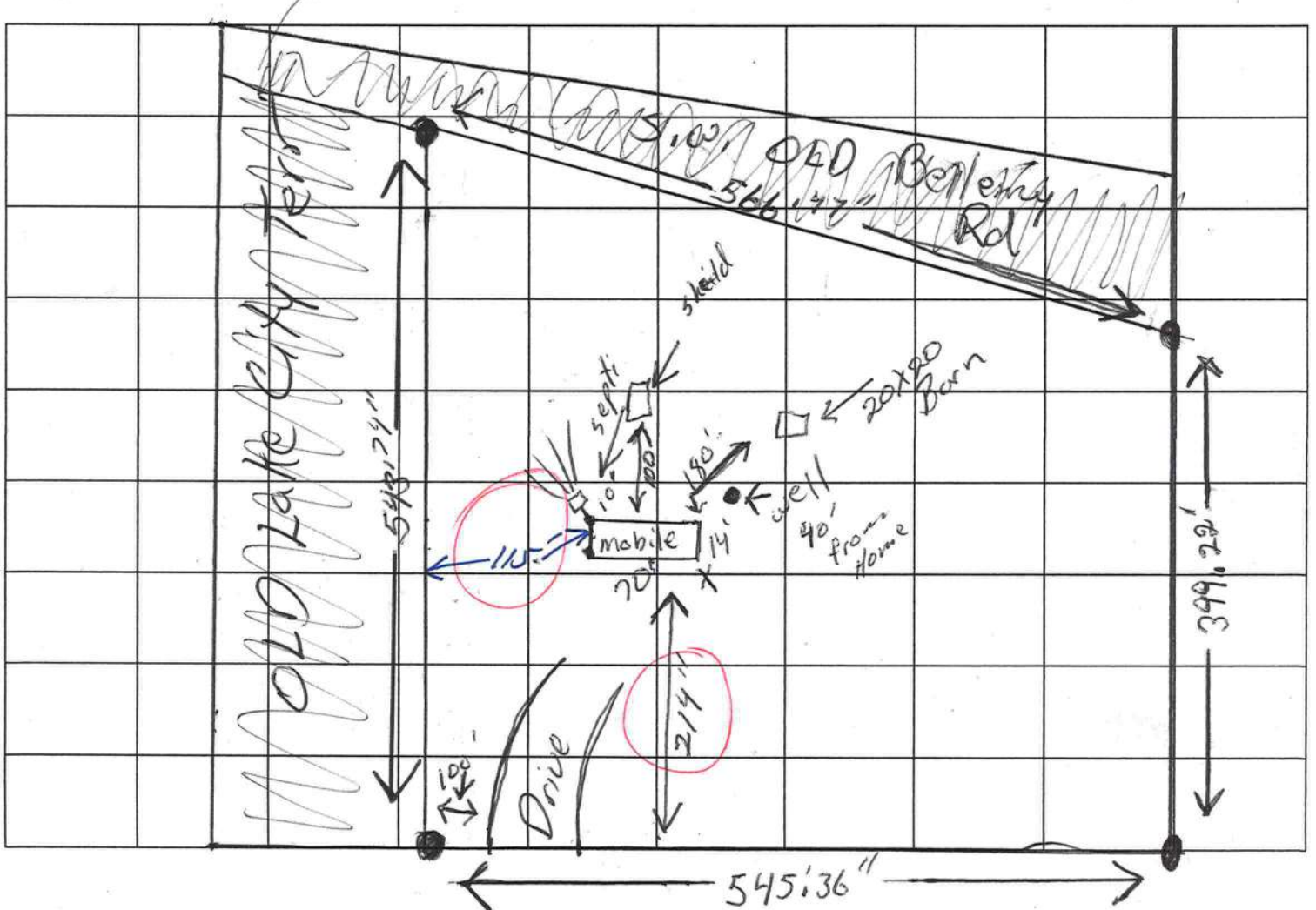
Mnt 10/14/2009 LARRY

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

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.



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: 4/26/2011 DATE ISSUED: 4/26/2011

ENHANCED 9-1-1 ADDRESS:

286 SW OLD BELLAMY RD
HIGH SPRINGS FL 32643

PROPERTY APPRAISER PARCEL NUMBER:

04-7S-17-09891-006

Remarks:

RE-ISSUE OF EXSITING ADDRESS FOR NEW STRUCTURE ON PARCEL,
NO CHANGE OF ACCESS OR ADDRESSED STRUCTURE LOCATION.

Address Issued By: SIGNED: / RONAL N. CROFT
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.**

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

1104-52

COUNTY THE MOBILE HOME IS BEING MOVED FROM Union
OWNERS NAME Glen Cox PHONE CELL 352-272-2331
INSTALLER Fernon Jones PHONE 7 CELL 352-318-1211
INSTALLERS ADDRESS 6795 SW 71st Ave Lake Butler, FL 32054

MOBILE HOME INFORMATION

MAKE Shaw YEAR 1987 SIZE 14 x 20
COLOR Blue SERIAL No. 5151WGA 238610184
WIND ZONE II SMOKE DETECTOR YES
INTERIOR:
FLOORS Wood
DOORS good
WALLS good
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) good
EXTERIOR:
WALLS / SIDING good
WINDOWS good
DOORS good
STATUS:
APPROVED yes NOT APPROVED

NOTES
INSTALLER OR INSPECTORS PRINTED NAME Fernon Jones
Installer/Inspector Signature Fernon Jones License No. TH1005413 Date 4/25/11

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 386-718-2838 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature A. J. K... .. Date 4-28-11



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1104-52

CONTRACTOR

FERMON JONES

PHONE

352 317 2332

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>Glenn W. Cox</u>	Signature <u>[Signature]</u>
	License #:	Phone #: <u>352-317-2332</u>
MECHANICAL/ A/C	Print Name <u>Glenn W. Cox</u>	Signature <u>[Signature]</u>
	License #:	Phone #: <u>352-317-2332</u>
PLUMBING/ GAS	Print Name <u>Fernon Jones</u>	Signature <u>[Signature]</u>
	License #: <u>TH1025418</u>	Phone #: <u>352-318-4711</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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

Contractor Forms: Subcontractor form: 1/11



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, Fermon Jones, give this authority for the job address show below
Installer License Holder Name

only, 286 SW Bellemey Rd High Spring FL 32623 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)
Glenn W. Cox	<i>Glenn W. Cox</i>	☐ Agent ☐ Officer ☒ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ 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.

Fermon Jones 1H1025418 4/26/11
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Fermon Jones,
personally appeared before me and is known by me or has produced identification
(type of I.D.) on this 26 day of April, 2011

Laurie Hodson
NOTARY'S SIGNATURE



(Seal Stamp)



STATE OF FLORIDA
DEPARTMENT OF HEALTH

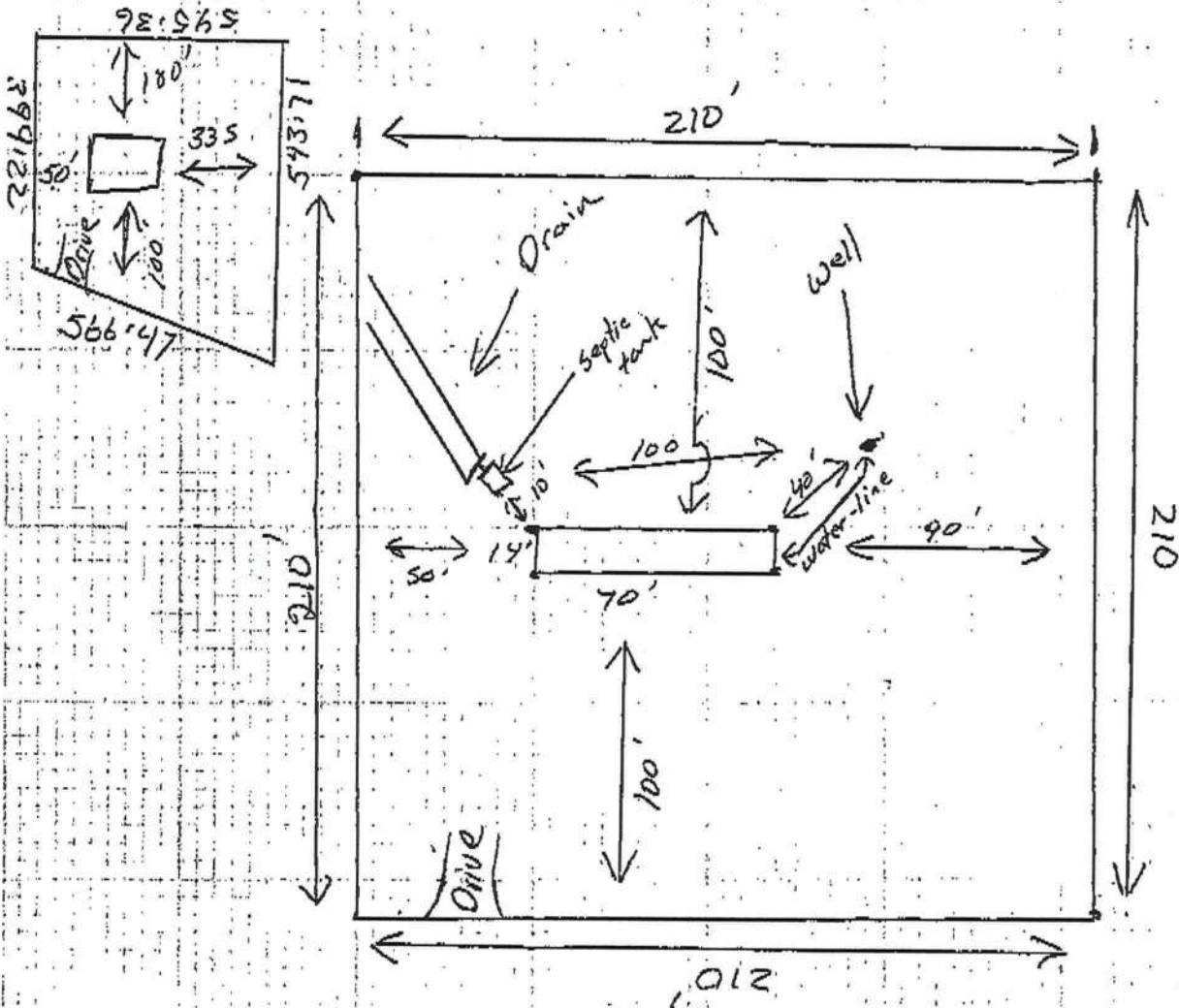
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

11-2286E

PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

Shawn W. Cox
Signature

OWNER
Title

Plan Approved ☒

Not Approved

Date

4/26/11
5/4/11

By

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT