02/16/2010

Columbia County Building Permit

PERMIT

Control of the Contro				n Premises During Co		000028375
	1 - 1 - 1 - 1 - 1 - 1 - 1		* ** *** *** ***	PHONE	755-3353	AND THE REPORT OF THE PARTY OF
_	NW IREN			LAKE CITY		FL 32055
Annear ann ann ann ann ann ann ann ann ann a	LAUDENNA DOWN	water water-out	RTENEY	PHONE	344-3738	
	53 NW IREN			LAKE CITY	Participa (West Participal Company)	FL 32055
CONTRACTOR	VIC ETHERIDG			PHONE	352 283-1511	
LOCATION OF P	ROPERTY 9	0W, TR TURNER	RD, TL IRENE	LANE, 4TH MH ON I	RIGHT	
TYPE DEVELOP	– MENT MH,UTI	LITY	ESTI	MATED COST OF CO	ONSTRUCTION	0.00
HEATED FLOOR	1		TOTAL AREA		HEIGHT	STORIES
FOUNDATION		WALLS	RC	OOF PITCH	FLO	OOR
LAND USE & ZO	NING A-3	10/04/2004/2004/2000		MAX	K. HEIGHT	2
Minimum Set Back	k Requirments:	STREET-FRONT	30.00	REAR	25.00	SIDE 25.00
			70			
	rlool	ZONE X		DEVELOPMENT PER	IVII INU.	
PARCEL ID 21	-3S-16-02240-043		SUBDIVISION	PINE RIDGE		
LOT 43 BI	LOCK P	PHASE .00	UNIT 0	TOT	AL ACRES 0.6	.7
		IH0000	0144	x Cloude	Q 1	7
Culvert Permit No.	Culvert Wai	-	s License Numb		Applicant/Owner/	Contracto
EXISTING	10-0030	Conductor	BK		NR	Y
Driveway Connecti		Number	LU & Zoning		proved for Issuance	New Resident
policettonak etakenaketa				in the second se	1	, rew resident
COMMENTS: O	NE FOOT ABOVE I	HE ROAD, KEPAI	R DOORS BEF	FORE PERM POWER	PER GP	
				-		
					Check # or Ca	ish CASH
	F	OR BUILDING	& ZONING	DEPARTMENT	ONLY	(footer/Slab)
Temporary Power			dation		Monolithic	
	date/app. l	у		date/app. by	K	date/app. by
Under slab rough-in	n plumbing		Slab		Sheathing/N	
Framing		date/app. by		date/app. by		date/app. by
	date/app. by	Insulation _	date/a	app. by		
Rough-in plumbing	g above slab and belo	w wood floor		E	lectrical rough-in	
	, ,		date	e/app. by		date/app. by
Heat & Air Duct		Per	i. beam (Lintel)	date/app. by	Pool	
Permanent power	date/app. by	C.O. F	inal	date/app. by	Culcus	date/app. by
F. F. 2	date/app. by			te/app. by	Culvert	date/app. by
Pump pole	app. by Utility Pe			vns, blocking, electricit	ty and plumbing	,
Reconnection	арр. бу	date/app. by	RV		D¢	date/app. by
	date/app. by	Total Commencer of the	. KV	date/app. by	Re-roof	date/app. by
BUILDING PERMI	IT FEE \$0.0	0 CERTIF	ICATION FEE	\$ 0.00	SURCHARGE	FEE \$ 0.00
MISC. FEES \$	300.00	ZONING CERT. FE	EE \$ 50.00	FIRE FEE \$ 51.3	36 WASTE	E FEE \$ 134.00
FLOOD DEVELOP	a	FLOOD ZONE	FEL 25 10 10 10 10 10 10 10 10 10 10 10 10 10	CULVERT FEE \$		AL FEE 560.36
	Ma					7 FEE 300.30
INSPECTORS OFF	TICE	1180CK		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

CLERKS OFFICE

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.

191	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
	For Office Use Only (Revised 1-10-08) Zoning Official Building Official 2-10-10
1 -	AP# 1002-11 Date Received 2/8/10 By 6 Permit # 28375
-	Flood Zone No Development Permit NA Zoning A Land Use Plan Map Category A
	comments bepain doors - before perm. power per GP.
4	EMA Map# N/A Elevation N/A Finished Floor River N/A In Floodway N/A Site Plan with Setbacks Shown D/EH# □ EH Release □ Well letter ☑ Existing well
	Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access
1 5	Parent Parcel # STUP-MH 1602 -62 □ F W Comp. letter
	DACT FEES, EMS Fire Corr Boad/Code
	School = TOTAL NA Suspended DIOC PRE DIVE
Pro	operty ID# 21-35-16-02240-043 Subdivision 43 Pinehilge 5/0
•	New Mobile Home Used Mobile Home MH Size 24x48 Year 1986
•	Applicant Claudenna Odening Phone # (386) 755 -3353
•	Address 25/N.W. Iren In. Lehe City, Flor 32055-5164
	Name of Property Owner Same Phone#
- 1	911 Address 253 NW IRENE LN, LAKE COTO, 4) 32055
	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 Danna Marteney Phone # (386) 344-3738
	Address
	Relationship to Property Owner Oaughten
	Current Number of Dwellings on Property 1 an property Approved
	Lot Size 0 , 6 ?7 Total Acreage
	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 90 west to Tune Road, So over the
	Rail Road Track 2 was on Left on chem IN. 4 Trails or
	Right at 251
	<u>'</u>
•	Name of Licensed Dealer/Installer Vic Education Phone # 352 2831511
	Installers Address Do Oby 3266 Way 5 Ding Che 32665
122	License Number (1) Matellation Decal # 20000
•	License Number 114 0000 144 Installation Decal # 305975

1 -11. . I D.72

Manufacturer

PERMIT NUMBER

is accurate and true based on the	Plumbing
inetallar varifies all information given with this normit worksho	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.
Other:	Electrical
Dryer vent installed outside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes	Date Tested & - 5 - Acyc
neous	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name
Weatherproofing The bottomboard will be repaired and/or taped. Yes Pq Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	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 is holding capacity. Installer's initials
Type gasket Rel Both Installed: Pg. 15 C Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	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 4 foot anchors.
a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	× 1500 × 1500 × 1500
Gasket (weatherproofing requirement) I understand a properly installed gasket is a requirement of all new and used homes and that condensation mold meldew and buckled marriage walls are	Using 500 lb. increments, take the lowest reading and round down to that increment.
Type Fastener: (2) Length: (2) Type Fastener: (4) Length: (5) For used homes a min. 30 gauge, 8" wide, ga will be centered over the peak of the roof and to roofing nails at 2" on center on both sides of the r	POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations. 2. Take the reading at the depth of the footer.
Fastening multi wide units Floor: Type Fastener: \(\lambda \text{.49} \) Length: \(\lambda \text{.6} \) Spacing: \(\lambda \text{.6} \)	x
Site Preparation Debris and organic material removed Water drainage: Natural Swale Pad Other	POCKET PENETROMETER TEST The pocket penetrometer tests are rounded down to 15th psf or check here to declare 1000 lb. soil without testing.

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

Installer Signature \

Date 2

100

is accurate and true based on the

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

02-03-10; 02: 17PM; BLDG/ZONING ; 386 758-2187 # 37 4
DEPARTMENT OF HEALTH ON IN DATE PAID:
APPLICATION FOR CONSTRUCTION PERMIT
550 0aa00a/e45 J) 1 1/89/10
NO SIBIC 1/26 = > p.370.00
APPLICATION FOR: New System [] Existing System [] Holding Tank [] Innovative
New System [] Existing System [] Holding Tank [] Innovative Repair [] Abandonment [] Temporary [X] Site Evaluation
APPLICANT: Cloudenna DOWning
AGENT: SAME TELEPHONE: 755-3353
MAILING ADDRESS: 251 NW Irene Lane, Lake Gty, FC-
32 <i>05</i> 5
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES.
PROPERTY INFORMATION Occas Ridge 8/7 C
LOT: 43 BLOCK: SUBDIVISION: PINE RIGGE PLATTED: 8/78
PROPERTY ID #: 21.35.16.02240.043 HX ZONING: RO: 1/M OR EQUIVALENT: [Y N)
PROPERY SIZE: 1674 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <= 2000GPD [/] > 2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N) DISTANCE TO SEWER: NA FT
A-1 . / / \ - / / / / / / / / / / / / / / / /
anul 1 Time of aug 18
Irene lane 4th MH on B. to #251.
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design
No Establishment Bedrooms Area Sqft Table 1, Chapter 648-6, FAC
1 DWMHH 2 21448 DIVIN O OHTOR
2 <u>1158</u>
3
4
[] Floor/Equipment Drains [] Other (Specify)
[] Floor/Equipment Drains [] Other (Specify)

DH 4015, 10/97 – Page 1 (Previous editions may be used) Stock Number: 5744-001-4015-1

Page 1 of 3



APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10 - 00

- PART II - SITE PLAN - -Scale: Each block represents 5 feet and 1 inch = 50 feet. Notes: Site Plan submitted by: Claudem Signature Not Approve Coumbia County Health Departmen Plan Approved X TANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

Page 2 of

SUBCONTRACTOR 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 <u>REQUIRED</u> 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	Claudenn	A Downing	Signature Cla	when Oderney
	License #:			Phon	e #:
MECHANICAL/	Print Name	Clauden	na Downing	Signature Cl	sulem Douring
A/C	License #:			Phone	e #:
PLUMBING/	Print Name	Clauden	na Downing		wellen Downey
GAS	License #:			Phon	e#:
ROOFING	Print Name			Signature	/
	License #:			Phon	e#:
SHEET METAL	Print Name			Signature	
	Dicense #:			Phon	e #:
FIRE SYSTEM/	Print Name			Signature	
SPRINKLER	License#:			Phon	e #:
SOLAR	Print Name			Signature	
	License #:			Phon	e #:
					and the second s
Specialty Li	cense	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
Specialty Li	cense	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION STUCCO		License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL	ISHER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER	ISHER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	ALLER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FINE FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	ALLER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL C	ALLER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature
MASON CONCRETE FINE FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO	ALLER	License Number	Sub-Contractors P	rinted Name	Sub-Contractors Signature

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.

GARAGE DOOR

MÉTAL BLDG ERECTOR

Columbia County Property Appraiser DB Last Updated: 1/28/2010

2009 Tax Year

Tax Record

Property Card

Interactive GIS Map

Next >>

Parcel: 21-3S-16-02240-043 HX DX

Owner	e 632	Dino	manher	Tota
PARTICI	ICK.	riu	DCILA	Lills

Owner's Name	DOWNING CL	DOWNING CLAUDENNA			
Site Address	IRENE	IRENE			
Mailing Address	251 NW IRENE LN LAKE CITY, FL 32055				
Use Desc. (code)	MOBILE HOM (000200)				
Neighborhood	021316.03 Tax District 2				
UD Codes	MKTA01 Market Area 01				
Total Land Area	0.674 ACRES				
Description	LOT 43 PINE RIDGE S/D. ORB 639-470, 895-2389, 975-187.				

<< Prev



Search Result: 2 of 6

Property & Assessment Values

Total Appraised Value		\$20,321.00
XFOB Value	cnt: (5)	\$3,000.00
Building Value	cnt: (1)	\$6,446.00
Ag Land Value	cnt: (0)	\$0.00
Mkt Land Value	cnt: (2)	\$10,875.00

Just Value	\$20,321.00		
Class Value	\$0.00		
Assessed Value	\$20,321.00		
Exemptions	(code: HX DX) \$20,321.00		
Total Taxable Value	County: \$0.00 City: \$0.00 Other: \$0.00 School: \$0.00		

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
12/15/2002	975/187	WD	V	Q		\$16,000.00
1/12/2000	895/2389	ст	V	U	01	\$4,500.00
12/1/1987	639/470	WD	V	Q		\$8,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1979	Vinyl Side (31)	1248	1416	\$6,446.00
	Note: All S.F. calculation	ns are base	ed on <u>exterior</u> bu	uilding dimensio	ons.	

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	0	\$400.00	0000001.000	0 x 0 x 0	(00.00)
0120	CLFENCE 4	2008	\$1,200.00	0000001.000	0 x 0 x 0	(000.00)
0294	SHED WOOD/	2008	\$200.00	0000001.000	0 x 0 x 0	(00.00)
0070	CARPORT UF	2008	\$900.00	0000360.000	18 x 20 x 0	(000.00)

WARRANTY DEED

This Warranty Deed made and executed the 15th day of December A.D. 2002, by Subrandy limited Partnership, hereinafter called the grantor, to Claudenna Downing Whose post office address is Rt. 17 Box 266, Lake City, FL 32055, hereinafter called the grantee:

(Wherever used herein the terms "Grantor" and "Grantor" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for the consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

LOT 43, PINERIDGE, a subdivision as recorded in Plat Book 4, Pages 102-102A, Columbia County, Florida, subject to Restrictions recorded in O.R. Book 0533, Pages - 0011-0013, Columbia County, Florida, and subject to Power Line Easement.

Together with all the tenements, hereditaments and appurtenances thereto belong or in any-wise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple: that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 1999.

Inst:2003003315 Date:02/18/2003 Time:10:28
Doc Stamp-Bood: 112.00
DC.P.Beditt Cason, Columbia County 3:975 P:187

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Signature of witness

Nanci L. Griffis

Bradley N. Dicks, G.P.
Subrandy Limited Partnership

Suzanne D. OO

Signature of witness Suzanne D. Adams

Inst: 2003003315 Date: 02/18/2003 Time: 10:28

Doc Stamp-Deed : 112.00

DC.P. DeWitt Cason, Columbia County B:975 P:188

State of Florida County of Columbia

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Bradley N. Dicks, who is personally known to me to be the person described in and who executed the foregoing instrument, who was not required to furnish identification, and he acknowledged before me that he executed the same and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 15th day of December A.D. 2002

NOTARY PUBLIC

My commission expires:

MANOR FOR THE STATE OF THE STAT

This instrument prepared by: Bradley N. Dicks Address: P.O. Box 513 Lake City, FL 32056

COLUMBIA COUNTY, FLORIDA LAND DEVELOPMENT REGULATION ADMINISTRATOR SPECIAL PERMIT FOR TEMPORARY USE APPLICATION

Permit No. <u>STUP - 1002 - 02</u>	Date _2/2/10
Fee 450.00 Receipt No. 4038	Building Permit No
Name of Title Holder(s) Claudenna Downing	4
Address Z51 NW IRENE LANE	_ City LAKE Lity, FC
Zip Code 32055	,
Phone (386) 755-3353	
NOTE: If the title holder(s) of the subject property are appointing an a title holder(s) addressed to the Land Development Regulation Adminis application at the time of submittal stating such appointment.	gent to represent them, a letter from the trator MUST be attached to this
Title Holder(s) Representative Agent(s)	
Address W/A	City
Zip Code	
Phone()	
Paragraph Number Applying for	
Proposed Temporary Use of Property 5 40465	
Proposed Duration of Temporary Use	
Tax Parcel ID# 21 -35 -16 -02240 -043	
Size of Property	
Present Land Use Classification 4-3	
Present Zoning District	

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

- In any zoning district: special events operated by non-profit, eleemosynary organizations.
- In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
- 3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
- In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
- 5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
- In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
- 7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;

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:

2/5/2010

DATE ISSUED:

2/9/2010

ENHANCED 9-1-1 ADDRESS:

253

NW IRENE

LN

LAKE CITY

FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

21-3S-16-02240-043

Remarks:

LOT 43 PINE RIDGE S/D (2ND LOC)

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.

Gert 219.110

SIGNATURE

CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

1	
APP.T	1002-11
///	1002-11

PRELIMINARY MOBILE HOME INSPECTION REPORT		
DATE RECEIVED 2/8/10 BY 4 IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?		
OWNERS NAME C/Audenna Downing PHONE 755-3353 CELL		
ADDRESS 251 NW IRENE LANE, LAKE (ily, FC.		
MOBILE HOME PARK W/A SUBDIVISION Pine Ridbe, Lot 43		
DRIVING DIRECTIONS TO MOBILE HOME 475, TL 27, TR Shloth, TR		
Randolph, 1000, It on right		
MOBILE HOME INSTALLER Vic Ethnidge PHONE CELL 352 283-1510		
MOBILE HOME INFORMATION		
MAKE FIEETWOOD YEAR 1986 SIZE Z4 x 48 COLOR_		
SERIAL NO. 6DOCFL 478511387 AB		
WIND ZONE Must be wind zone II or higher NO 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 / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING		
WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT		
ROOF () APPEARS SOLID () DAMAGED		
APPROVED WITH CONDITIONS: LEPAIN JOHN doors + 1		
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS		

ID NUMBER____

DATE

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

COUNTY THE MOBILE HOME IS BEING MOVED FROM				
OWNERS NAME Gaudenia Downing PHONE 755-3353 CELL				
INSTALLER Vic Effringe PHONE CELL 352-283-1576				
INSTALLERS ADDRESS PO BOX FILED High Springs P/ 72655				
MOBILE HOME INFORMATION				
MAKE Fleetwood YEAR 1986 SIZE RY X 48				
COLOR Brown SERIAL No. GDO CAG 4785 1/387 HB				
WIND ZONE SMOKE DETECTOR YES				
INTERIOR: FLOORS				
DOORS 9800				
WALLS Good				
CABINETS Good.				
ELECTRICAL (FIXTURES/OUTLETS) good,				
EXTERIOR: WALLS / SIDDING Deed repair by Front door - for from				
WINDOWS				
DOORS NEEDS replaced (2)				
INSTALLER: APPROVEDNOT APPROVED				
NOTES:				
INSTALLER OR INSPECTORS PRINTED NAME LOC CHlordge				
Installer/Inspector Signature License No License No				
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.				
NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.				
BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.				
ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.				

_ Date _

Code Enforcement Approval Signature _____

COLE ENFORCEMENT PRELIMINARY MEDILE HOME INSPECTION REPORT

PRELIMINARY M. BILE HORICITAL ESTABLISHMENT
2/8/10 BY IS THE MIN IN THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
DATE RECEIVED 755 33.53 CELL
OWNERS NAME CARDENA COUNTRY
ADDRESS 251 NW IRENE CAR SUBDIVISION PINE RIOBE, LOT 43
MOBILE HOME PARK
RANDOPH, 1000, It on right
MOBILE HOME INSTALLER VIC Ether dae PHONE CELL 352 283-1510
THE REPORT OF THE PROPERTY OF
TISE + WOOD YEAR 19:6 SIZE 24 X 40 COLOR
WIND ZONE Must be wind zone 1 or higher NO WIND ZONE I ALLOWED
INSPECTION STANDARDS
INTERIOR:
SMOKE DETECTOR () OPERATIONAL () #ISSING
FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION
DOORS () OPERABLE (A DAMAGED
WALLS () SOLID () STRUCTURALLY UNI OUND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES () OPERABLE () INC PERABLE () MISSING
CEILING () SOLID () HOLES () LEAKS AF PARENT
ELECTRICAL (FIXTURES/OUTLETS) () OPER (BLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING () LOOSE SIDING () STRI CTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
WINDOWS () CRACKED BROKEN GLASS) SCREENS MISSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED with CONDITIONS: Bepair exterier door.
APPROVED V WITH CONDITIONS
NOT APPROVED NEED RE-INSPECTION FOR FOI LOWING CONDITIONS
SIGNATURE Att A PULL ID NUMBER 462 DATE 2-9-10

LIMITED POWER OF ATTORNEY

I, V: Cincolde DO HEREBY AUTHORIZE Challenna Downing
TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF APPLYING
FOR A MOBILE HOME PERMIT.
SIGNATURE
Z-12-10 DATE
SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 12 DAY OF Feb 2003.
DEBORAH MORRISON Notary Public - State of Florida My Commission Expires Sep 17 2011 Commission # DD 715174 Bonded Through National Notary Assn.
NOTARY PUBLIC
MY COMMISSION EXPIRES: 9-17-201 COMMISSION NO. DD 715174 PERSONALLY KNOWN: V PRODUCED ID (TYPE):

CODE ENFO! CEMENT DEPARTMENT COLUMB A COUNTY, FLORIDA OUT OF COUNTY MO! (LE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM
OWNERS NAME GRUDELING DOWN DO PHONE 755-3853 CELL
INSTALLER VIC SHOWAR PHONE CELL 352-485-7570
INSTALLERS ADDRESS DO BOX FILE WAS SURE PA 72655
MOBILE HOME INFORMATION
MAKE Flotiend YEAR 1986 SIZE RY X 48
COLOR Brown SERIAL NO. (200 092 4785 1/387 185
WIND ZONE SMOKE DETECTOR
INTERIOR: FLOORS
DOORS
WALLS good
CABINETS Good.
ELECTRICAL (FIXTURES/OUTLETS)_ good.
WALLS / SIDDING NEED repair by front door - for from
MANDONAC
DOORS MERCH (2)
APPROVEDNOT APPR OVED
NOTES:
INSTALLER OR INSPECTORS PRINTED NAME
Installer/Inspector Signature
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 PERM TTED.
BEFORE THE MOBILE HOME CAN BE MOVED IN TO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BY ILDING DEPARTMENT.
ONCE MOVED INTO COLUMBIA COUNTY AN INS 'ECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME, CALL 386-719-2038 TO SET. IP THIS INSPECTION, NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.
Code Enforcement Approval Signature Aut S. Pull Date 2.12.10
Code Enforcement Approval Signature

Parm+# 28375

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

STATE OF FLORIDA COUNTY OF COLUMBIA Inst:201012002298 Date:2/16/2010 Time:2:22 PM

DC.P.DeWitt Cason,Columbia County Page 1 of 2 B:1189 P:435

BEFORE ME the undersigned Notary Public personally appeared.

Clauden				ich is being used to place an
additional dwelling	(mobile home) a	s a primar	y residence for a family men	aber of the Owner, and
Denna M	intency			Owner, who intends to place a
mobile home as the	family member'	s primary	residence as a temporarily us	se. The Family Member is related
to the Owner as	oughter	, and	d both individuals being first	duly sworn according to law,
depose and say:	7			

- Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild.
- 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. 2/-35-16-02240-043
- 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. 21 35 -16 0 2240 043 s 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.

terms of the Agreement and agree to compr	ly with it.
X Claudenna Oduning Owner	Family Member
Typed or Printed Name	Typed or Printed Name
Subscribed and sworn to (or affirmed) before the subscribed and subscribe	er) who is personally known to me or has produced GALE TEDDER MY COMMISSION # DD 805686 EXPIRES: July 14, 2012 Bonded Thru Notary Public Underwriters
Subscribed and sworn to (or affirmed) before Leg., 20 10, by Denna known to me or has produced as identification. Notary Public	

Title: LAND OEUBLOPMENT REGULATION

ADMINISTRATOR