### PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

1	r Office Use Only (Revised 7-1-15) Zoning Official W Building Official
AP	
1	pod ZoneX Development Permit Zoning A-3_ Land Use Plan Map Category Ag
FEI	MA Map# Elevation Finished Floor River In Floodway
₽ R	Recorded Deed or V Property Appraiser PO V Site Plan FEH# 20-0249 Vell letter OR
	xisting well  □ Land Owner Affidavit □ Installer Authorization □ FW Comp. letter □ App Fee Paid
0.0	OOT Approval □ Parent Parcel # □ STUP-MH □ 911 App
OE	Illisville Water Sys 🗆 Assessment Paid on Property 🗆 Out County 🗆 In County 🗆 Sub VF Form
Prop	erty ID #
	New Mobile Home X Used Mobile Home MH Size 32 x 58 Year 2020
- /	Applicant Dale Burd Phone # 386-365-7674
• /	Address20619 CR 137, Lake City, FL, 32024
	Name of Property Owner_Robert & Cara Disbrow Phone# 386-292-4613
• 9	111 Address 1880 NW Union Park Rd, Wellborn, fl 32094
• (	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - (Suwannee Valley Electric) - Duke Energy
	Name of Owner of Mobile Home Robert & Cara Disbrow Phone # 386-292-4613
	Address 412 NW Hamilton St, Lake City, FL, 32055
	Relationship to Property Owner <u>Same</u>
• (	Current Number of Dwellings on Property 0
• [	ot Size332 x 678
• [	Do you : Have <u>Existing Drive</u> or <u>Private Drive</u> or need <u>Culvert Permit</u> o <u>Culvert Waiver</u> (Circle one)
	(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
	s this Mobile Home Replacing an Existing Mobile Home No
	Oriving Directions to the Property Lake Jeffery Road West, TR Union Park Road, Property on Left in 2nd 90 degree turn
_	LONG TO GOGGE LITT
- 1	The County Re-Routed Union Park Road. It connects to the North East corner of property
• N	lame of Licensed Dealer/Installer Brent Strickland Phone # 386-365-7043
	nstallers Address 1294 Hamp Farmer Road, LC, FL, 32055
• L	icense Number IH-1104218 Installation Decal # 65704

	auribge wall pers within 2' of and of home per Rule 15C		Typical pier spacing  Show locations of Longitudinal and Lateral Systems  Systems cannot be used on any home (new or used)  Installer's initials  Show locations of Longitudinal and Lateral Systems  (use dark lines to show these locations)	Installer Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043  Address of home being installed  Manufacturer Live Doll Length x width 58 x 32  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
within 2' of end of home spaced at 5' 4" oc Spaced	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  17 1/2 x 25 1/2 24 x 24 24 x 24  ANCHORS  Opening  Pier pad size	8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8	Pier Spacing   Footer   16" x 16"   18 1/2" x 18   20" x 20"   22" x 22"   24" X 24"   25" x 26"   25" x 26"   (576)   (676)   (12" (342)   (400)   (484)   (576)   (676)   (1500 psf   4" 6"   6"   6"   7"   8"   8"   8"   8"   8"   8"   8	Used Home to the Manufacturer's In led in accordance with Ri Wind Zone II Installation De Serial #

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or check here to declare 1000 lb. soil The pocket penetrometer tests are rounded down to without testing 0051 Sd

1500

×

# POCKET PENETROMETER TESTING METHOD

- Test the perimeter of the home at 6 locations
- Take the reading at the depth of the footer
- Using 500 lb. increments, take the lowest reading and round down to that increment

x1500

ASOO

× 1600

TORQUE PROBE TEST

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

Note: A state approved lateral arm system is being used and 4 ft requires anchors with 400% lb holding capacity reading is 275 or less and where the mobile home manufacturer may anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test

Installer Name ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

instalter's initials

Date Tested

Electrical

Other

Connect This includes the bonding wire between mult-wide units. electrical conductors between multi-wide units, but not to the main pay Pg

Plumbing

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

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

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Debris and organic material removed Water drainage. Natural Swale Water drainage. Natural

Fastening multi wide units

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. Type Fastener Type Fastener
Type Fastener Length Length Length Spacing Spacing

3

Roof Walls Floor

# Gasket (weatherproofing requirement)

of tape will not serve as a gasket a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are I understand a properly installed gasket is a requirement of all new and used

installer's initials

Type gasket / bam

Installed Between Walls Yes Between Floors Yes

Bottom of ndgebeam Yes

Weatherproofing

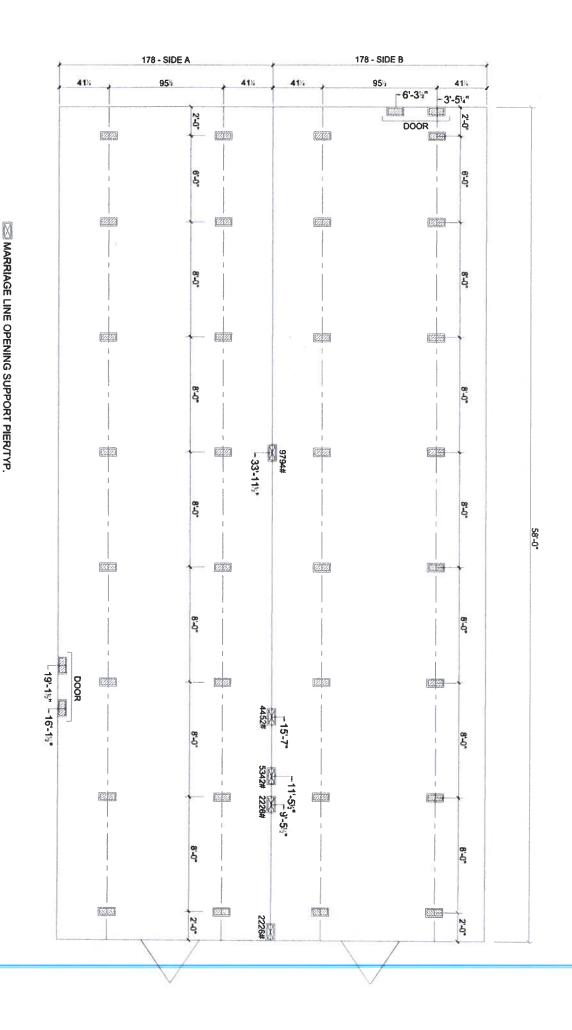
Fireplace chimney installed so as not to allow intrusion of rain water Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or taped. Yes Yes

Miscellaneous

Range downflow vent installed outside of skirting. Electrical crossovers protected Drain lines supported at 4 foot intervals. Dryer vent installed outside of skirting. Yes Skirting to be installed. Yes 8 Yes X Z

Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

Installer Signature \_ Date 3-20-202



## 3-BEDROOM / 2-BATH MODEL: S-3583A-SVS -Live Oak Homes 32 X 58

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS 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.

11-19-2015

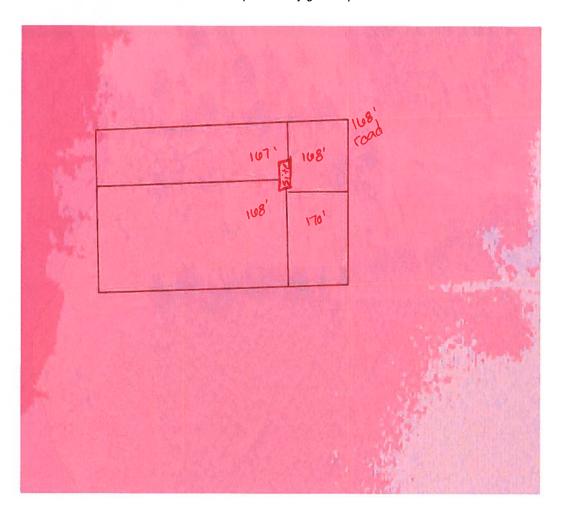
FOUNDATION NOTES: SUPPORT PIER/TYP

- (A) MAIN ELECTRICAL
  (B) ELECTRICAL CROSSOVER
  (D) WATER INLET
  (D) WATER CROSSOVER (IF ANY)
  (F) GAS INLET (IF ANY)
  (F) GAS CROSSOVER (IF ANY) WATER CROSSOVER (IF ANY)
- G DUCT CROSSOVER
  H SEWER DROPS
- (I) RETURN AIR (W/OPT, HEAT PUMP OH DUCT)
  (J) SUPPLY AIR (W/OPT, HEAT PUMP OH DUCT)

S-3583A-SVS

### Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Mar 25 2020 11:22:18 GMT-0400 (Eastern Daylight Time)



### Parcel Information

Parcel No: 02-3S-15-00138-003

Owner: YATES CARA E

Subdivision:

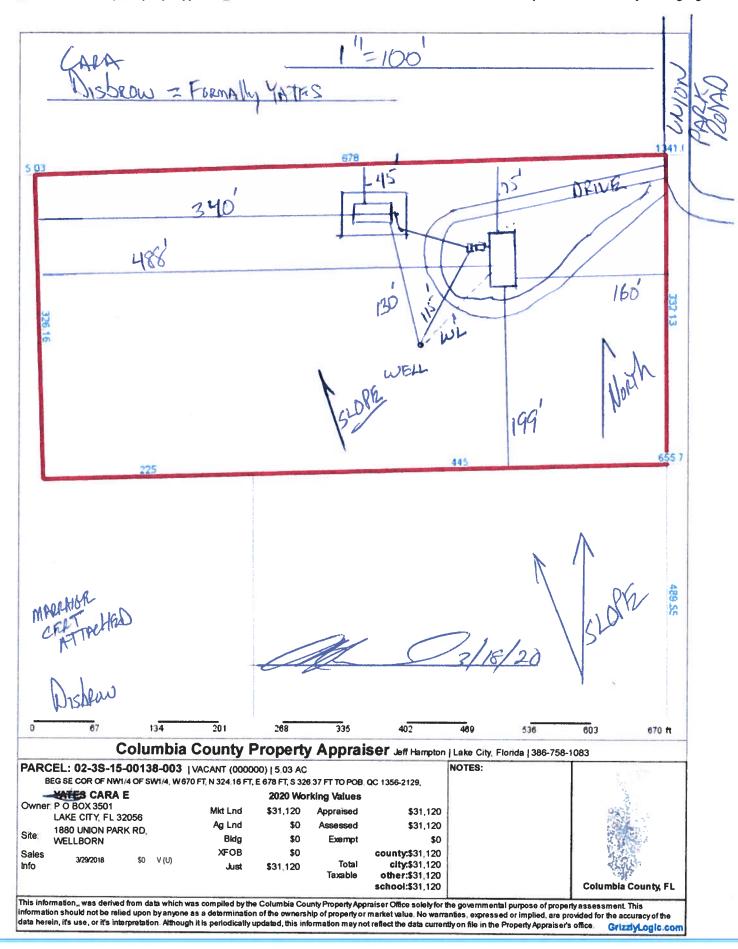
Lot:

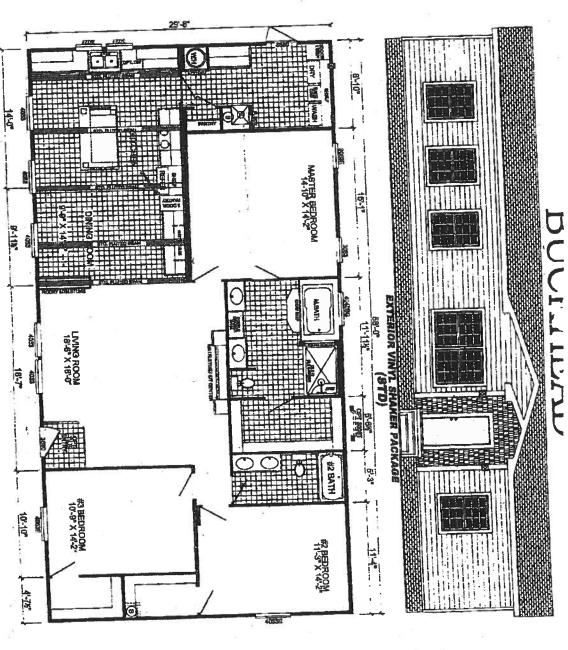
Acres: 5.09686232 Deed Acres: 5.03 Ac

District: District 3 Bucky Nash Future Land Uses: Agriculture - 3

Flood Zones: A,

Official Zoning Atlas: A-3



CO CONTRACTOR OF THE PROPERTY 


32 X 62 - Approx. 1,720 Sq. Ft. 3-BEDROOM / 2-BATH 8-3583A-OAK dossis and equans foolage ligures are expresimate, the on optional Prof. adversal houses care.

but to mostly product offering at any time.

Parcel:	02-38-15-0013	88-003		
Owner & Pr		Res	sult. 2 of 24	
Owner	YATES CARA I P O BOX 3501 LAKE CITY, FL		w-See	
Site	1880 UNION PA	ARK RD, WEL	LBORN	
Description*	BEG SE COR OF NW1/4 OF SW1/4, W 670 FT,			
Area	5.03 AC	S/T/R	02-38-15	
Use Code**	VACANT (000000)	Tax District	3	
Property &	e Property Appraiser & Zoning office for ep  Assessment \	edific zoning infor		
2019 Cert	ified Values	2020 Wor	king Values	
Mkt Land (1)	\$31,120	Mkt Land (1)	\$31,120	
Ag Land (0)	\$0	Ag Land (0)	\$0	
Building (0)		Building (0)	\$0	
XFOB (0)		XFOB (0)	\$0	
Just	\$31,120		\$31,120	
Class		Class	\$0	
Appraised		Appraised	\$31,120	
SOH Cap [?]		SOH Cap [?]	\$0	
Assessed		Assessed	\$31,120	
Exempt		Exempt	\$0	
Total Taxable	county:\$31,120 city:\$31,120 other:\$31,120 school:\$31,120		county:\$31,120 city:\$31,120 other:\$31,120 school:\$31,120	

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

CONTRACTOR Brent Strickland

PHONE 386-365-7043

	THIS FORM MUST BE SUBMITTED I	PRIOR TO THE ISSUANCE OF A PERMIT						
		Robert & Cara Disbrow						
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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.								
		he corrected form being submitted to this office prior to the swill result in stop work orders and/or fines.						
ELECTRICAL	Print Name Glenn Whittington	Signature						
	License #: <u>EC 13002957</u>	Phone #: 386-972-1700						
	Qualifier Form Attached X							
MECHANICAL/	Print Name Michael Boland	Signature Signature						
A/C	License #: CAC 1817716	Phone #: 386-972-1700						
	Qualifier Form At	ttached X						

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015

APPLICATION NUMBER



### COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

### LICENSED QUALIFIER AUTHORIZATION

CI III	ER AUTHORIZATION				
(JANI) Whitington	(license holder name), licensed qualifier				
for WhitTington Effected ?	(company name), do certify that				
the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.					
Printed Name of Person Authorized	Signature of Authorized Person				
1. WARBURD	1				
2. Recky Ford	2. Souls )				
3.	3.				
4.	4.				
5.	5.				
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.					
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or leading to the second se	ing of the changes and submit a new letter of ous lists. Failure to do so may allow				
Licensed Qualifiers Signature (Notarized)	License Number				
NOTARY INFORMATION: STATE OF: COUNTY OF: Columbia					
The above license holder, whose name is	me or has produced identification this, 20, 20				
KILLY POSHOP NOTARY'S SIGNATURE	Seal/Stance) y R BISHOP  Notary Public - State of Florida				



### COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, F1. 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIE	ER AUTHORIZATION			
1 My hope of work	(license holder name), licensed qualifier			
for ACIE A/L DC OCE/A	ALC (company name), do certify that			
the below referenced person(s) listed on this for				
holder, or is/are employed by me directly or thro	rugh an employee leasing arrangement; or, is an			
officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and	in Florida Statutes Chapter 468, and the said			
sign permits, call for inspections and sign subco				
Printed Name of Person Authorized	Signature of Authorized Person			
21.6.1	A COOL			
1. ()A/2 DAG	1.662			
2. Kally Distage	2. Kelly Brishop			
3 Local Force	3. (4/2)			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.				
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or li	ing of the changes and submit a new letter of lous lists. Failure to do so may allow			
Licensed Qualifiers Signature (Notanzed)	CACIBITATION ES DOSCO			
NOTARY INFORMATION STATE OF COUNTY OF	ware			
The above license holder, whose name is \( \sum_{\text{C}} \) personally appeared before me and is known by (type of I.D.)  on	me or has produced identification this day of NOVEMON 20 15			
MOTARYS SIGNATURE TOOC	(Seal/Stamp)			



Inst. Number: 201812006191 Book: 1356 Page: 2129 Page 1 of 4 Date: 3/29/2018 Time: 9:57 AM P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

Inst: 201812006191 Date: 03/29/2018 Time: 9:57AM Page 1 of 4 B: 1356 P: 2129, P.DeWitt Cason, Clerk of Court Columbia, County, By: BD Deputy ClerkDoc Stamp-Deed: 0.00

### **Quitclaim Deed**

RECORDING REQUESTED BYAND WHEN RECORDED MAIL TO:	
Tommie L. Halland, G	rantee(s)
2 11 1 2 2 1 1 1 1 1 1 1 1	
Consideration: \$ 6 love tAffection	
Property Transfer Tax: \$	
Assessor's Parcel No.: <u>02-35-15-00   38-00</u>	
PREPARED BY:	certifies herein that he or she has prepared
this Deed.	0.00
Cara Class	<u> 3-29-18</u>
Signature of Preparer	Date of Preparation
Cara C Tates	
Printed Name of Preparer	1
THIS QUITCLAIM DEED, executed on	arch 29 in the County of
COlumbia, State of Flo.	rida
by Grantor(s), Tommie L. Holland	0
whose post office address is PO Box 3	50) lake City El 22056
whose post office address is P.O. Box 3 to Grantee(s), Cara E Yates whose post office address is P.O. Box 350	our same cry, 11. Drose
whose post office address is 20 P. 25	1 / k P. 1 E/ 22051
whose post office address is _7.0, Add 3.30	Lake City, P1 32056
WITNESSETH, that the said Grantor(s), 10	mmie L. Holland
for good consideration and for the sum of	320 000
	e(s), the receipt whereof is hereby acknowledged,
	into the said Grantee(s) forever, all the right, title
does hereby remise, release and quitciann o	into the saw Grantes(s) lorever, all the right, title
© SmartLegalForms	LF296 Quitclaim Deed 6-15, Pg. 1 of 4

interest and claim which the said Grantor(s) have in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Columbia State of Florida and more specifically described as set forth in EXHIBIT "A" to this Quitclaim Deed, which is attached hereto and incorporated herein by reference. IN WITNESS WHEREOF, the said Grantor(s) has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of: **GRANTOR(S):** Signature of Second Grantor (if applicable) Lommie Print Name of Second Grantor (if applicable) Signature of Second Witness to Grantor(s) NNIE Print Name of Second Witness to Grantor(s) **GRANTEE(S):** Signature of Grantee Signature of Second Grantee (if applicable) Print Name of Grantee Print Name of Second Grantee (if applicable) Signature of First Witness to Grantee(s) Signature of Second Witness to Grantee(s) Print Name of First Witness to Grantee(s) Print Name of Second Witness to Grantee(s)

Inst. Number: 201812006191 Book: 1356 Page: 2130 Page 2 of 4 Date: 3/29/2018 Time: 9:57 AM

P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

Inst. Number: 201812006191 Book: 1356 Page: 2131 Page 3 of 4 Date: 3/29/2018 Time: 9:57 AM P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

, NOTARY ACKNOWLEDGMENT				
State of Florida				
County of Columbia 11. MI				
on March 29,2018, before me, Katrina III. Percher, a notary				
County of Columbia  On Maich 29, 2018, before me, Katrina M. Vercher, a notary public in and for said state, personally appeared, Tommie L. Holland				
who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons				
whose names are subscribed to the within instrument and acknowledged to me that they ex- ecuted the same in their authorized capacities, and that by their signatures on the instrument the				
persons, or the entity upon behalf of which the persons acted, executed the instrument.				
WITNESS my hand and official seal.				
KATRINA M VERCIPER Commission # GG 181020				
Signature of Notary				
Affiant Known Produced ID				
Type of ID (Seal)				

Inst. Number: 201812006191 Book: 1356 Page: 2132 Page 4 of 4 Date: 3/29/2018 Time: 9:57 AM

P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

### PARCEL DESCRIPTION

A PARCEL OF LAND LYING WITHIN THE NW 1/4 OF SW 1/4 OF SECTION 2, TOWNSHIP 3 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT THE SE CORNER OF SAID NW 1/4 OF SW 1/4 OF SECTION 2 AND RUN N 89°36′13″ W ALONG THE SOUTH LINE OF SAID NW 1/4 OF SW 1/4 OF SECTION 2 A DISTANCE OF 670.00 FEET; THENCE RUN N 00°13′33″ W A DISTANCE OF 324.16 FEET TO THE NORTH LINE OF THE SOUTH 1/2 OF SOUTH 1/2 OF NW 1/4 OF SW 1/4 OF SAID SECTION 2; THENCE S 89°47′24″ E ALONG SAID NORTH LINE A DISTANCE OF 678.00 FEET TO THE EAST LINE OF SAID NW 1/4 OF SW 1/4 OF SECTION 2; THENCE RUN S 01°10′56″ W ALONG SAID EAST LINE A DISTANCE OF 326.37 FEET TO THE POINT OF BEGINNING. CONTAINING 5.03 ACRES, MORE OR LESS.

TOGETHER WITH THE EXISTING 30 FOOT EASEMENT AS DESCRIBED IN OFFICIAL RECORDS BOOK 417, PAGES 204-206 AS FOLLOWS:

A STRIP OF LAND 30 FEET IN WIDTH, LYING EASTERLY OF A LINE DEFINED AS FOLLOWS: COMMENCE AT THE NORTHEAST CORNER OF SW 1/4 OF SW 1/4, SECTION 2, TOWNSHIP 3 SOUTH, RANGE 15 EAST, RUN THENCE N 01°01'34" E 296.24 FEET TO THE POINT OF BEGINNING; CONTINUE N 01°01'34" E 357.98 FEET; RUN THENCE N 36°E 42 FEET TO THE RIGHT OF WAY LINE OF COUNTY MAINTAINED ROAD AND THE POINT OF TERMINATION.

<u>SUBJECT TO THE EXISTING 30 FOOT EASEMENT AS DESCRIED IN OFFICIAL RECORDS BOOK 417, PAGES 204-206 AS FOLLOWS:</u>

COMMENCE AT SOUTHEAST CORNER OF NW 1/4 OF SW 1/4 AND RUN N 89°48'50" W 30.00 FEET; THENCE RUN N 01°01'34" E 326.24 FEET; THENCE RUN S 89°47'24" E 30.00 FEET; THENCE RUN S 01°01'34" W 326.24 FEET.

<u>SUBJECT TO</u> A 30.00 FOOT EASEMENT FOR THE PURPOSES OF INGRESS & EGRESS DESCRIBED AS FOLLOWS:

A STRIP OF LAND 30.00 FEET IN WIDTH AND LYING NORTH OF A LINE DEFINED AS FOLLOWS: BEGIN AT THE SOUTHEAST CORNER OF THE NW 1/4 OF THE SW 1/4 OF SECTION 2, TOWNSHIP 3 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA, AND RUN N 89°36'13" W ALONG THE SOUTH LINE OF SAID NW 1/4 OF SW 1/4 OF SECTION 2 A DISTANCE OF 670.00 FEET TO THE POINT OF TERMINATION.



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

PERMIT NO DATE PAID: FEE PAID: RECEIPT #: 14-1587

APPLICATION FOR: [ ] New System [ ] E: [ ] Repair [ ] A	xisting System	[ ]	Holding T	ank [	] Innovat	īve
APPLICANT: Cara Vates	alliant a ric againgt integrated to analytic reliant space increases processory or a security. New York, it is					
AGENT: ROCKY FORD, A & B CON	STRUCTION		annengele op enteggenante verste overste skrivet verste verste	TELEPH	ONE: 386-497	1-2311
MAILING ADDRESS: 546 SW Dort						
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY T PLATTED (MM/DD/YY) IF REQUES	OR APPLICANT'S A T TO 489.105(3)(r O PROVIDE DOCUMEN	AUTHORIZ n) OR 48 NTATION	ED AGENT. 9.552, FLOI OF THE DATE	SYSTEMS RIDA STA THE LO	MUST BE CONTUTES. IT I	S THE
PROPERTY INFORMATION			<del>ම්බන් කියා දෙන්</del> මිසිස් පවිප වෙතැප්වණ එක්ව සහේ <i>ගත</i> <b>ස</b>	the contract with the section of the	ggipt fittig gird witth their files vessio dath verin forty error re	
LOT: NA BLOCK: NA	SUB: NA	adaninalistations on all so year	many mander or many or the		PLATTED:	
PROPERTY ID #: 02-35-15-001	38-003	ZONING:	I	/M OR EQ	QUIVALENT: [	Y
PROPERTY SIZE: 5.03 ACRES	WATER SUPPLY: {	] PEIV	ATE PUBLIC	? [ ]<=	2000GPD [ ]	52000gpp
IS SEWER AVAILABLE AS PER 38	1.0065, FS? [ Y ,	(N)	D	ISTANCE	TO SEWER:	9%, 74 70 8
PROPERTY ADDRESS: 1880 Unio	n Park Rd, Well	born, E	1			
DIRECTIONS TO PROPERTY:	N'CST RIGICI	Ori 10	7 81 1): (	Ep m	Right	the second
Union Park 90° Le						
BUILDING INFORMATION	[X] RESIDENTIA	AL	[ } CO:0	JERCTAL	- Simon	All was an and
Unit Type of No Establishment			ommercial/1 able 1, Cha		ional System E-6, FAC	n Design
SF Residential	3_17	20		and the second proof of the second	Marie Marie Vignamente a	
					enderson som som skrikke ha stat skaret meddemed greper.	44.64
[ ] Floor/Equipment Drains	[ ] Other (	Specify)	where transferance is adjustments to work	open sje namerov gjernjilogomjenim plijanist sje skraveno		
SIGNATURE: Millian A.	Sichago II			DAT	PE: 3/23/202	0
DH 4015 08/09 (Obsoletes or	evious adirions	ale i ede ana				

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

Page 1 of 4

### STATE OF FLORIDA

DEPARTMENT OF HEALTH

	Permit Application N  SDOW  PART II - SITEPLAN	umber_20-0279
Scale: 1 inch = 40 feet.	AIG	ş
	8	
TN comp up	DR IVI	
1 acre of 5.03	N E T	5.6k 17190
Notes:	1N	
1 acre	of 5.03	
Plan Approved By ALL CHANGES M	NOT APPROVED BY THE COUNTY HEALTH	County Health Department
OH 4015, 08/09 (Obsoletes previous editions v (Slock Number 5744-002-4015-5)	which may not be used). Incorporated: 64E 5.001 FAC	Fage _ cf =

Inst. Number: 201812023176 Book: 1372 Page: 1168 Page 1 of 1 Date: 11/9/2018 Time: 9:20 AM P.DeWitt Cason Clerk of Courts, Columbia County, Florida

Department of Health-Office of Vital Statistics

### STATE OF FLORIDA **MARRIAGE RECORD**

TYPE IN UPPER CASE USE BLACK INK This license not valid unless seal of Clark, Circuit or County court appears thereon.

(S	T	<b>ATE</b>	FIL	.E N	UMI	3ER

Inst: 201812023176 Date: 11/09/2018 Time: 9:20AM Page 1 of 1 B: 1372 P: 1168, P.DeWitt Cason, Clerk of Court Columbia, County, By: PT Deputy Clerk

122018XX000484MLAXMX

(APPLICATION NUMBER)								
		APP	LICATION TO	MAR	RY			
1a. NAME OF SPOUSE (First, Middle, Last)				1b. MAIDEN SURNAME (If applicable)		RNAME (if applicable)	2. DATE OF BIRTH (Month, Day, Year)	
ROBERT PALMER DISBROW							a LENGTH BE	
3a. RESIDENCE - CITY, TOWN,	TOWN, OR LOCATION 36. COUNTY			3c. STATE			1	(State or Foreign Country)
LAKE CITY Columbia				Florida			Florida	
5a. NAME OF SPOUSE (First, Middle, Last)				5b. MAIDEN SURNAME (if applicable)			6. DATE OF BIR	TH (Month, Day, Year)
CARA EVONE YATES				ROBINSON				
7a. RESIDENCE - CITY, TOWN, OR LOCATION		76. COUNTY		7G. SYATE		B. BIRTHPLACE (State of Foreign Country)		
LAKE CITY		Columbia		Florida			Florida	
LAKE CITY  CIRCUIT  CIRCUIT  COMPANY  C	CORRECT TO THE BEST	OF OUR KNOWLED AUTHORIZE T	ICATE,EACH FOR HIMS IGE AND BELIEF, THAT HE SAME IS KNOWN TO Jack ink)	NO LEG D US AN	AL OBJEC ID HEREB	CTION TO THE MARRI	AGE NOR THE IS SE TO MARRY.	OVIDED ON THIS RECORD IS SUANCE OF A LICENSE TO ON (DATE)
Y_M\	12/1/1/2	フリゾ				LJ/06/2018		•
15	HI THE OF OFFICIAL	nesty			12. SIGN	TURE DE OVERCIAL	Ude black likt)	11. 11
3 /211	Deputy Clerk Patti WeiffenbachTerrell				<u>► H</u>	tttillu	HANDOC	burrol
A COUNT	3. SIGNATURE OF SPOUSE leigh fullprome using black ink)  ▶ (			14 SUBSCRIBED AND SWORM TO BEFORE ME ON (DATE) 11/06/2018				
**************************************	15 TITLE OF OFFICIAL  16 St  Deputy Clerk  Patti Weiffenbach Terrell			16 SIGNATURE OF OFFICIAL TUPO BROCKINKI				
an abit Mill Mann.	Deputy Clerk Patti WeiffenbachTerrell				MUULUSA			
Manual Constitution of the	LICENSE TO MARRY  AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRI							
	CEREMONY WITHIN THE 81 AFTER THE EFFECTIV	'ATE OF FLORIDA A E DATE AND ON OF	IND TO SOLEMNIZE TH R BEFORE THE EXPIRA	E MARR TION D/	HAGE OF TH	THE ABOVE NAMED F IE STATE OF FLORIDA	PERSONS, THIS LI VIN ORDER TO BE	ICENSE MUST BE USED ON OR E RECORDED AND VALID.
1 PRESENT	17. COUNTY ISSUING LICENSE		THE DATE LICENSE ISS	UED	18	A. DATE LICENSE EF	FECTIVE	19 EXPIRATION DATE
	Columbia		11/06/2018			11/09/2018		01/05/2019
A MAN A	208. SIGNATURE OF COURT OF	LERK OR JUDGE		206	TITLE			20c. BY D. 97
	P. DeWitt Cason			Clerk of the Circuit Court Patti WeiffenbachTerrell				
TO THE PROPERTY OF THE PARTY OF	CERTIFICATE OF MARRIAGE							
CONTRACTOR OF THE PARTY OF THE	THEREBY CERTIFY THAT TH	E ABOVE NAMED SI		BAWE	IN MARRI	AGE IN ACCORDANC	E WITH THE LAW	S OF THE STATE OF FLORIDA
ACO AL	21 DATE OF MARHAGE MON	018	22. CITY, YOWN	ÜLE	Uti	1 Floride	الر	
CON E		V PERHORMINI CE	UNU	,		3 NE Heri	ando,	Avenue
S. S	235 NAME AND TITLE OF PAIR	MAN -	TOUGH!		24 SIANA	nacul	DUC	RH
INFO	TWIII MEIIIM		DIC		≥ SIGNA	DINDE	K Brac	Moraw
A SINFO	DRMATION BELOW	FOR USE B	Y VITAL STAT	ISTIC	SON	LY NOT TO	BE RECO	RDED
י אם פרטיוגו פבר	BITO KITMACO BEATE	TOR WE	RE VOITEVER   FA	INSWEF	B AE2	TO ITEM 28, THEN CO	MPLETE TIEMS 2	9a, 29b, and 29c

### A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

(O) 386-758-3409

(F) 386-758-3410

(C) 386-623-3151

3/18/2020

To: County Building	g Department				
Description of well to be installed for Customer:  Located at Address:  UNION Proc Roma					
1 hp 15 GPM Submersible Pump, 1 1/2 flow prevention, With SRWMD permi	" drop pipe, 86 gallon captive tank and back it.				
Bruse Pard	s.				
Sincerely					
Bruce Park					
President					