

DATE 11/21/2013

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000031608

APPLICANT WENDY GRENNELL PHONE 386.288.2428
ADDRESS 3104 SW OLD WIRE ROAD FT. WHITE FL 32038
OWNER JUAN & ELIZABETH LAZO PHONE 386.266.0024
ADDRESS 1124 SE OLD BELLAMY ROAD HIGH SPRINGS FL 32643
CONTRACTOR ERNEST S.JOHNSON PHONE 352.494.8099
LOCATION OF PROPERTY 441-S TO OLD BELLAMY,TL AND IT'S 1/4 MILE ON R PAST DOGWOOD COURT.

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. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 03-7S-17-09880-004 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 10.00

IH1025249
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 13-0588 BLK TM N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD.

Check # or Cash CASH REC'D.

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Insulation date/app. by
Rough-in plumbing above slab and below wood floor date/app. by Electrical rough-in date/app. by
Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 217.36 WASTE FEE \$ 176.99
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 769.35
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.
NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

"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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Serial #

For Office Use Only (Revised 1-11) Zoning Official BLK 13 Apr 2013 Building Official TM 11/8/13

AP# 1311-16 Date Received 11/7/13 By LH Permit # 31608

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments _____

FEMA Map# N/A Elevation N/A Finished Floor 1 1/2' above RL River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 13-0588 ☐ EH Release ☒ Well letter ☐ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☐ State Rd Access ☒ 911 Sheet

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☒ F W Comp. letter ☒ App Fee Pd ☒ VF Form

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Out County ☒ In County

Road/Code _____ School _____ = TOTAL _____ Suspended March 2009 ☒ Ellisville Water Sys

Property ID # 03-75-17-09880-004 Subdivision NA

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32x76 Year 2014
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Road Ft White FL 32038
- Name of Property Owner Juan + Elizabeth Lazo Phone# 386-266-0024
- 911 Address 1124 SE Old Bellamy Road High Spring FL
- Circle the correct power company - FL Power & Light - Clay Electric 32643
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Juan + Elizabeth Lazo Phone # 386-266-0024
- Address 1124 SE Old Bellamy Road High Spring FL 32643
- Relationship to Property Owner same
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 10.00
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home No
- Driving Directions to the Property US 441 South to Old Bellamy Road turn (L) to property on (R) 1/4 mile past SE Dogwood Ct.
- Name of Licensed Dealer/Installer Ernest Scott Johnson Phone # 352-494-8099
- Installers Address 22204 SE US Hwy 301 Hawthorne FL 32640
 - License Number IH 1025249 Installation Decal # 17088

Left Message for Wendy 11/13/13

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

Installer

Ernest S Johnson License # FL1025249

911 Address where home is being installed.

SE Old Bellamy Road
High Springs FL 32643

Manufacturer

Live Oak Length x width 32' x 80'

NOTE: If home is a single wide fill out one half of the blocking plan where the sidewall ties exceed 5 ft 4 in.

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

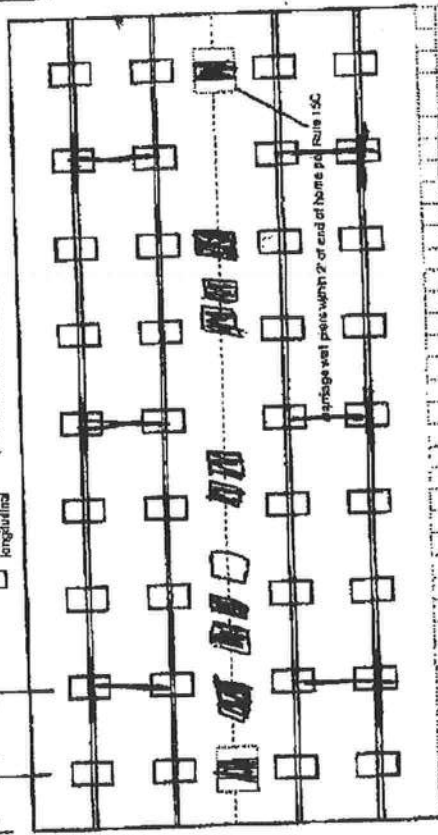
Installer's initials

[Signature]

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	18" 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'	4'	5'	6'	7'	8'	8'
1500 psf	4'	5'	6'	7'	8'	8'	8'
2000 psf	5'	6'	7'	8'	8'	8'	8'
2500 psf	6'	7'	8'	8'	8'	8'	8'
3000 psf	7'	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

J-beam pier pad size	Pad Size	Sq. in
17.5' x 25.5'	16 x 18	288
17.5' x 25.5'	16 x 18	288
	18.5 x 18.5	342
	16 x 22.5	360
	17 x 22	374
	13 1/4 x 26 1/4	348
	20 x 20	400
	17 3/16 x 25 3/16	441
	17 1/2 x 25 1/2	446
	24 x 24	576
	26 x 26	676

Perimeter pier pad size

Other pier pad sizes (required by the mfg.)

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 on Floor plan Pier pad size

ANCHORS

4 ft / 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer OLiver #10117

OTHER TIES

Number 50

Sidewall N/A

Longitudinal 8

Marriage wall 2

Shearwall

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

x 1000 x 1000 x 1000

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 1000 x 1000 x 1000

TORQUE PROBE TEST

The results of the torque probe test is _____ inch pounds or check here if you are declaring 51 anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.

Notes: A state approved lateral arm system is being used and 4 ft anchors are allowed at the sidewalk locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Assigned Oliver 11/11/11
4 \$5 foot anchors

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

Fastening multi wide units

Floor: Type Fastener: 1/4" x 5" Length: 5" Spacing: 2"
Walls: Type Fastener: 1/4" x 5" Length: 5" Spacing: 2"
Roof: Type Fastener: 1/4" x 5" Length: 5" Spacing: 2"
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 (use waterproofing membrane)

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

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Type gasket YES Pg. _____

Weatherproofing

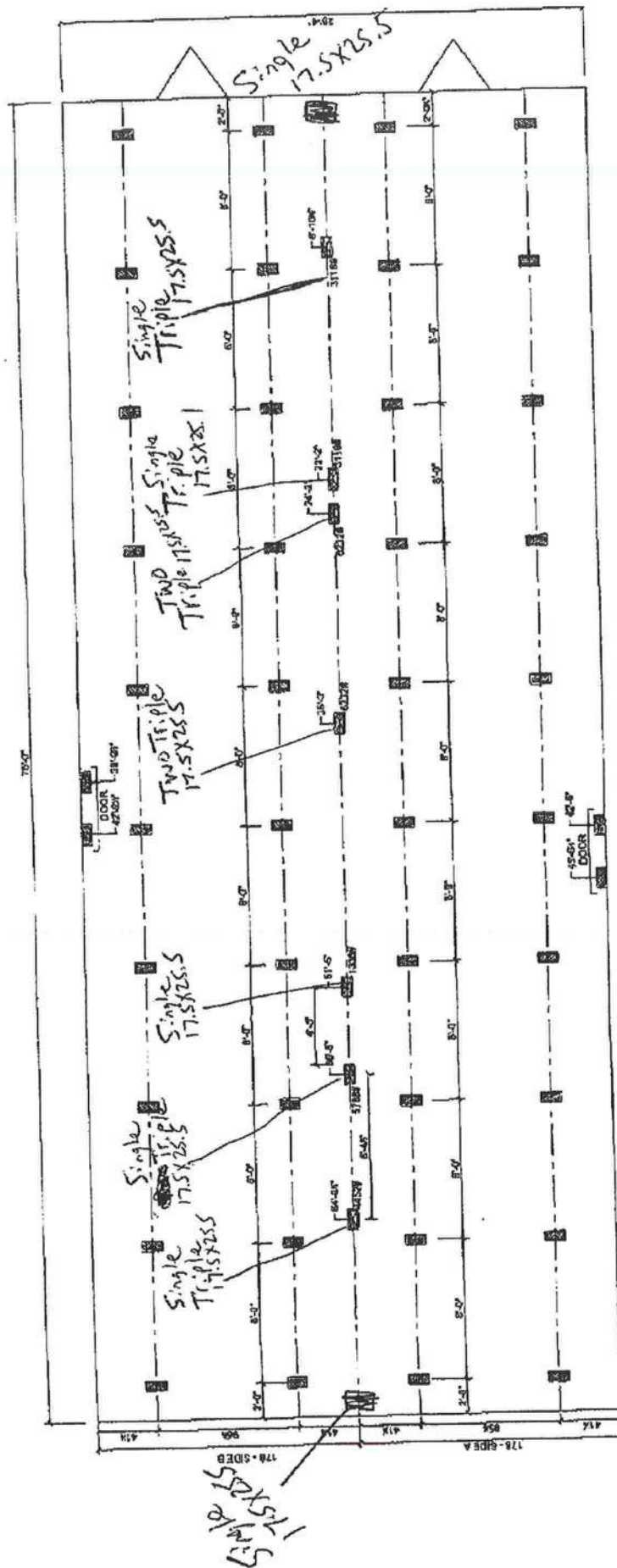
The bottomboard will be repaired and/or taped. Yes Pg. _____
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes N/A
Range downflow vent installed outside of skirting. Yes
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other: _____

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

Installer Signature _____ Date 10-22-13



● TIEDOWN LOCATIONS (FOR CONCRETE SLAB SET)
 ■ MARRIAGE LINE OPENING SUPPORT PIERTYP.

SUPPORT PIERTYP

THIS DRAWING IS DESIGNED FOR THE STANDARD NIBB ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS. FOUNDATION NOTES.

- (A) NONE/ELECTRICAL
 (B) ELECTRICAL CROSSOVER
 (C) WATER INLET
 (D) WATER CROSSOVER (IF ANY)
 (E) GAS INLET (IF ANY)
 (F) GAS CROSSOVER (IF ANY)
 (G) DUCT CROSSOVER
 (H) SEWER DROPS
 (I) RETURN AIR (ADAPT)
 (J) SUPPLY AIR (RVOLT)

Live Oak Homes
MODEL: S-3725A - 32 X 80
4-BEDROOM / 2-BATH

S-3725A

N
↑

SE OLD Bellamy Rd

542.25

55

160'

350'

32x50

145'

839.89

687.44

550'

571.02

Juan + Elizabeth
LAZO

\$10.00.
\$245.00

Prepared By & Return To:
U.S. Title/Crystal Curran
2622-B2 N.W. 43rd Street
Gainesville, FL 32606

UG-14499

Inst: 201212015550 Date: 10/18/2012 Time: 1:05 PM
Doc Stamp Deed: 245.00
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1243 P: 811

[Space Above This Line for Recording Data]
Parcel I.D. No.: 03-7S-17-09880-004

WARRANTY DEED

This Indenture made this 12th day of October, 2012 between JAMES MURPHY, A _____ MAN AND MICHAEL MURPHY, A _____ MAN, AS TENANTS IN COMMON, GRANTOR*, whose post office address is P.O. BOX 2497, ORANGE PARK, FL 32067-2497, and JUAN C. LAZO and ELIZABETH LAZO, HUSBAND AND WIFE, GRANTEE*, whose post office address is OLD BELLAMY ROAD, HIGH SPRINGS, FL 32643.

WITNESSETH, That said Grantor, for and in consideration of the sum of TEN AND 00/100'S (\$10.00) Dollars and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the grantee and grantee's heirs forever the following described land located in the County of COLUMBIA State of Florida, to-wit:

A PART OF THE SOUTHEAST QUARTER OF SECTION 3, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS: BEGIN AT THE SOUTHEAST CORNER OF SAID SECTION 3, AND RUN S.88°30'00"W., ALONG THE SOUTH LINE, THEREOF, A DISTANCE OF 571.02 FEET; THENCE N.01°58'30"W., 839.89 FEET TO THE SOUTHERLY MAINTAINED RIGHT-OF-WAY LINE OF SW OLD BELEMY ROAD; THENCE RUN ALONG SAID MAINTAINED RIGHT-OF-WAY, S.75°30'43"E., A DISTANCE OF 57.45 FEET; THENCE CONTINUING ALONG SAID MAINTAINED RIGHT-OF-WAY, S.76°41'57"E., A DISTANCE OF 534.80 FEET TO THE EAST LINE OF SAID SECTION 3; THENCE S.01°58'30"E., ALONG SAID EAST LINE, A DISTANCE OF 687.44 FEET TO THE POINT OF BEGINNING.

GRANTORS JAMES MURPHY AND MICHAEL MURPHY BOTH WARRANT THAT THIS IS NOT THEIR HOMESTEAD PROPERTY.

SUBJECT TO covenants, restrictions and easements, if any.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

*Singular and plural are interchangeable as context requires.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal this day and year first above written.

WITNESSES

Typed Name: Mark Agones

Typed Name: Maria Luisa Kaczew

JAMES MURPHY

MICHAEL MURPHY

COUNTY OF Clay
STATE OF FLORIDA

THE FOREGOING INSTRUMENT was acknowledged before me on 12th day of October, 2012, by JAMES MURPHY and MICHAEL MURPHY who is/are personally known to me or have produced their Driver's Licenses as identification.



Maria Luisa Kaczew
NOTARY PUBLIC, STATE OF FL AT LARGE
Name: Maria Luisa Kaczew
COMMISSION EXPIRATION: 01-31-2013

THIS INSTRUMENT WAS PREPARED BY: CRYSTAL L. CURRAN, an employee of U.S. TITLE, 2622-B2 NW 43rd Street, Gainesville, FL 32606, as a necessary incident to fulfill the requirements of a Title Insurance Binder issued by it. UG-14499.

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: 11/1/2013 DATE ISSUED: 11/6/2013

ENHANCED 9-1-1 ADDRESS:

1124 SE OLD BELLAMY RD
HIGH SPRINGS FL 32643

PROPERTY APPRAISER PARCEL NUMBER:

03-7S-17-09880-004

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

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.



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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Ernest S Johnson, give this authority and I do certify that the below
Installers Name

referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Wendy Grennell	<i>Wendy Grennell</i>	

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.

Ernest S Johnson TH 1025249 10-22-13
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ernest Scott Johnson,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL DL on this 22 day of October, 2013.

Shirley M Bennett
NOTARY'S SIGNATURE



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1311-16 CONTRACTOR Ernest S. Johnson PHONE 352 481 8099

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.

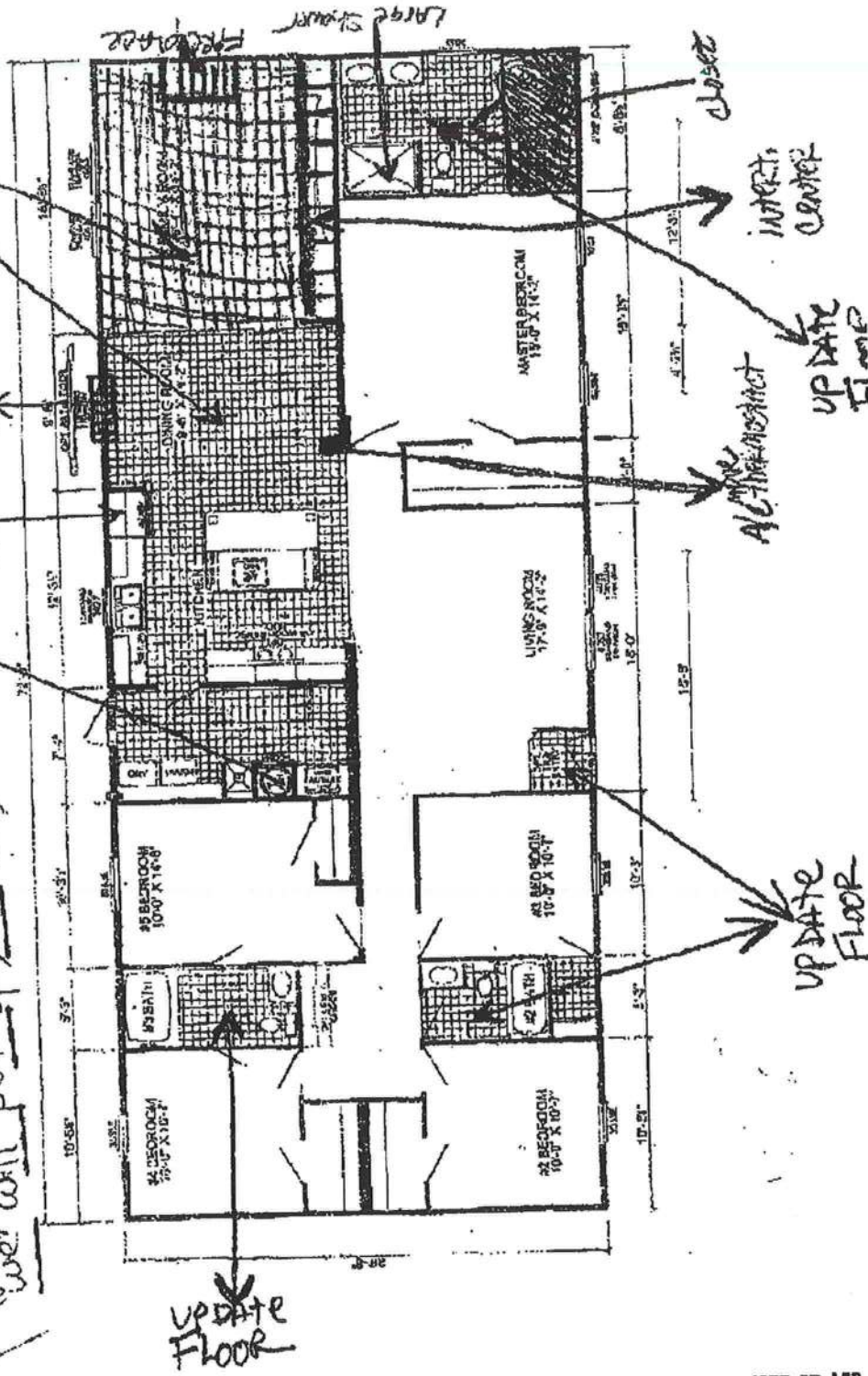
<input checked="" type="checkbox"/> ELECTRICAL 1074	Print Name <u>Glenn Whittington</u> License #: <u>EC13002957</u>	Signature <u>[Signature]</u> Phone #: <u>386-972-1700</u>
<input checked="" type="checkbox"/> MECHANICAL/A/C B 701	Print Name <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature <u>[Signature]</u> Phone #: <u>800-859-3708</u>
<input checked="" type="checkbox"/> PLUMBING/GAS	Print Name <u>Ernest Scott Johnson</u> License #: <u>PH1025249</u>	Signature <u>[Signature]</u> Phone #: <u>352-494 8099</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 Form/Subcontractor Form 3/21

Do NOT glue mirrors ALL
to walls
Just put in closet
We'll put up, —

[illegible]

18-19-13 11:13

8595 662 888 : NOJ, XPJ

Lazo App 1311-16

Andrews Site Prep, Inc.
8230 SW State Road 121
Lake Butler, Fl. 32054
386-867-0572
Well Lic # 2688

November 13, 2013

To: Columbia County Building Department

We will be drilling a well for customer Juan Lazo located at 1124 Old Bellamy, High Springs, Fl. 32643 Parcel # 03-7S-17-09880-004. The well should go approximately 90 feet with a casing depth of 70 feet. We will install a 1hp aermotor submersible pump and a 32 gallon challenger bladder tank.

Thank you,



Danielle Andrews

Wendy Grennell
3104 SW Old Wire Road
Ft White, FL 32038
386-288-2428 Cell
386-755-1031 Fax

Fax

To: Janice / Laurie From: Wendy Grennell

Fax: _____ Fax: 386-755-1031

Phone: _____ Phone: 386-288-2428

Date: 11/21/13 RE: Lazo
Permit 31608

SW

LOHGA 1134838 A/B

COLUMBIA COUNTY FLORIDA DEPARTMENT OF BUILDING AND ZONING

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 03-7S-17-09880-004

Building permit No. 000031608

Permit Holder ERNEST S. JOHNSON

Owner of Building JUAN & ELIZABETH LAZO

Location: 1124 SE OLD BELLAMY RD, HIGH SPRINGS, FL 32643

Date: 01/21/2014



[Signature]

Building Inspector

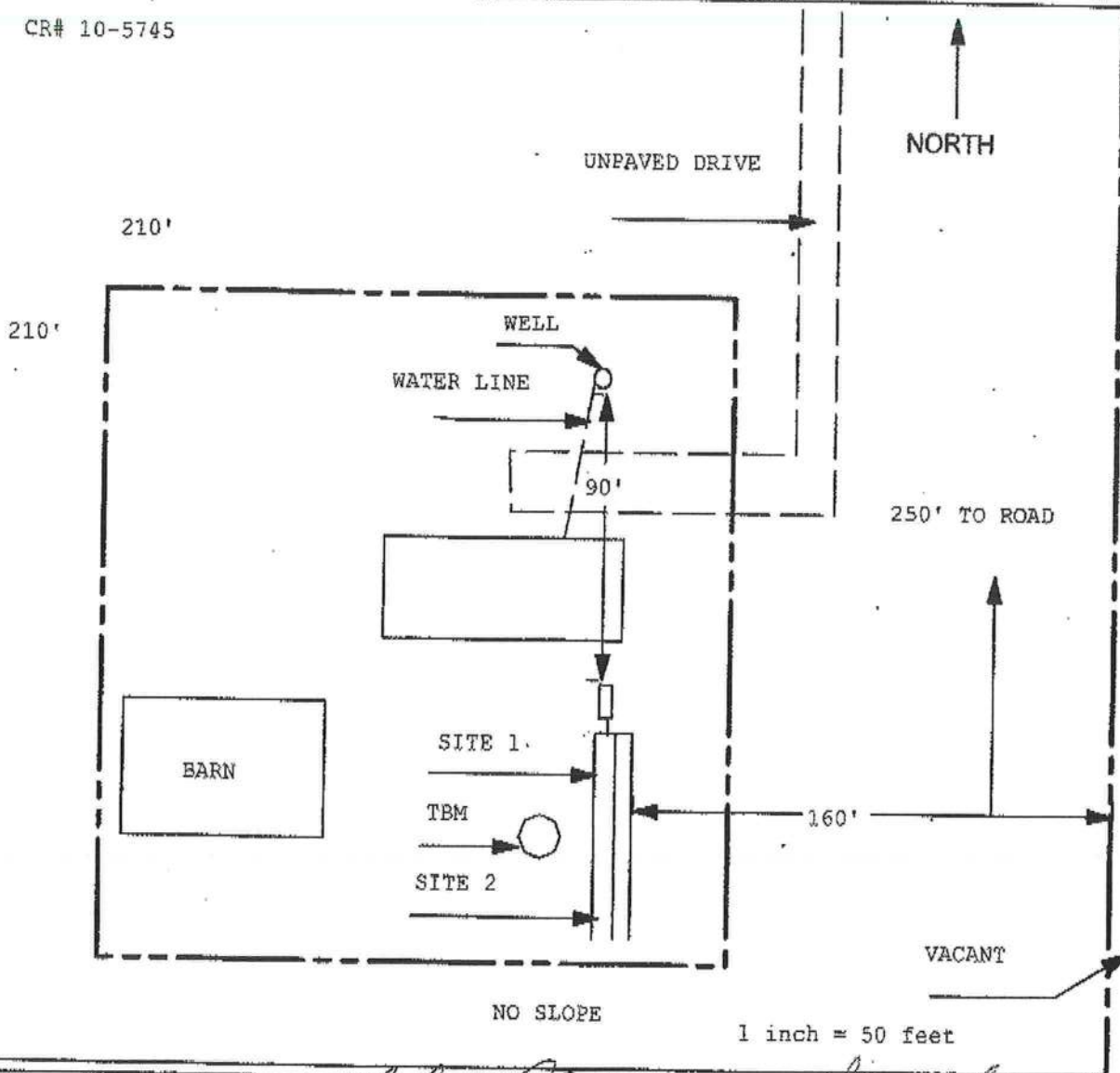
POST IN A CONSPICUOUS PLACE
(Business Places Only)

Lazo - App # 1311-16

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 13-0588

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

CR# 10-5745



Site Plan Submitted By Kelley Lazo Wendy Lazo
Plan Approved ✓ Not Approved _____ Date 10/29/13

By [Signature] Celina CPHU

Notes:

SE
WHERE IS THE FACE APP?



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

CR # 10-5745

PERMIT NO. 13-0588
DATE PAID: 11/8/13
FEE PAID: \$10.00
RECEIPT #: 112,5928

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: JUAN & ELIZABETH LAZOAGENT: WENDY GRENNELLTELEPHONE: (386) 266-0024MAILING ADDRESS: 3104 SW OLD WIRE RD.

FT. WHITE

FL 32038

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. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____PROPERTY ID #: 03-75-17-09880-004 ZONING: AG I/M OR EQUIVALENT: ☐ NO ☐PROPERTY SIZE: 10.000 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FTPROPERTY ADDRESS: 1124 OLD BELLAMY RD. High Springs FL 32643DIRECTIONS TO PROPERTY: 41 SOUTH PAST I-75 TURN LEFT ON OLD BALLAMY RD. SITE APP. 1/2 MILE PAST DOGWOOD CT.BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	MOBILE HOME	5	2,560	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Wendy GrennellDATE: 11/5/13

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