	y Building Permit PERMIT
This Permit Expires One APPLICANT LINDA RODGERS	Year From the Date of Issue 000025389 PHONE 454-2241
ADDRESS 1334 SW SPRUCE RD	FT WHITE FL 32038
OWNER LINDA RODGERS	PHONE 454-2241
ADDRESS 1334 SW SPRUCE RD	FT. WHITE FL 32038
CONTRACTOR BERNIE THRIFT	PHONE 623-0046
	CHETUCKNEE, TR ON CURTAIN.
	F SPRUCE & FUTCH, RIGHT SIDE
TYPE DEVELOPMENT MH,UTILITY	ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL A	REA HEIGHT STORIES
FOUNDATION WALLS	ROOF PITCH FLOOR
LAND USE & ZONING ESA2	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 36-5S-15-00488-015 SUBDIVIS	ION
LOT BLOCK PHASE UNIT	TOTAL ACRES 2.02
Woodong	9/.4
Culvert Permit No. Culvert Waiver Contractor's License N	umber. Applicant Owner Contractor
EXISTING 06-1135M BK	JH Y
	ning checked by Approved for Issuance New Resident
COMMENTS: ONE FOOT ABOVE THE ROAD	
COMMENTS.	
	Check # or Cash 4405
FOR BUILDING & ZON	ING DEPARTMENT ONLY
Temporary Power Foundation	(100ter/51ab)
date app. by	Monolithic date/app. by date/app. by
., ,	Sheathing/Nailing
date/app. by	date/app. by date/app. by
	above slab and below wood floor
date/app. by Electrical rough-in	date/app. by
date/app. by Heat & Air Duct	Peri, beam (Lintel)
Permanent power C.O. Final	date/app. by Culvert
date/app. by	date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing	Pool
Reconnection Pump pole	pp. by date/app. by Utility Pole
date/app. by	te/app. by date/app. by
M/H Pole Travel Trailer date/app. by	Re-roofdate/app. by date/app. by
BUILDING PERMIT FEE \$ 0.00 CERTIFICATION F	EE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.0	
	00 FIRE FEE \$ 50.22 WASTE FEE \$ 150.75
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 2/	00 FIRE FEE \$ 50.22 WASTE FEE \$ 150.75 00 CULVERT FEE \$ TOTAL FEE 475.97
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 27 INSPECTORS OFFICE NOTICE IN ADDITION TO THE PEOULDEMENTS OF THE PEOULD FOR THE P	

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."

This Permit Must Be Prominently Posted on Premises During Construction
PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER
THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK
AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.



P.5

FROM : COLUMBIA CO BUILDING + ZONING FRX ND. :386-758-2150 Aug. 01 2206 83:45PM P3 PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

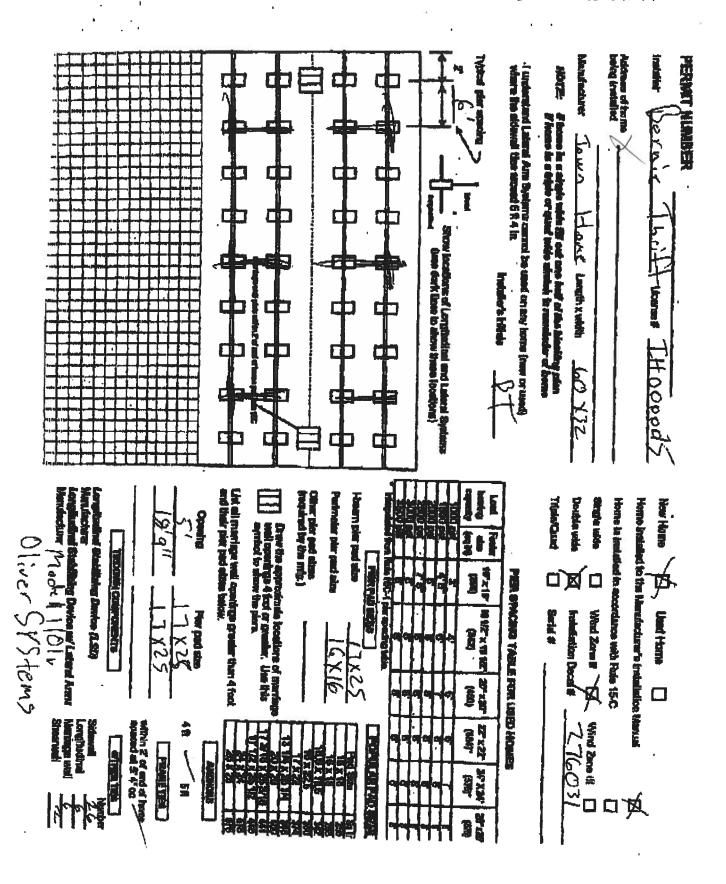
	Elevation_	Pinietied Floo EH Signed Site Plan X	River_	In Floodymy_	
Copy of Rec	orded Dood or Affidavii	i from hand owner	jer resemble /8/19 Alber of Authorization	of fetter distiller on from installer	OK
ANT	36-50 M	M ON COTES 15-00488-0	c + 36-	55-15-0049	8-0
				•	~ /
New Mobile		Used Mobile I		Year Za	3/
Applicant /	+13 Simi-11	NITY CRI	Phone # 58	6 454. 21	41
		nda Rodge		3638	
911 Addres	1334 50	N. SPRUCE	ETWHIT	386 454 224 E 176 3703	
Circle the c	orrect power compa	my - FL Powe	t & Clothe .	Clay Electric	
) - Sursanne Va		Progress Energy	
		LINEA RODGE	R.S. Phor	•#_	
Address		1000			
	p to Property Owner				
	nber of Dwellings on	Property X			į.
Lot She			mesge 2	028	
		or need a Cubret		ert Weiver (Circle o	net
this Mobil	Home Replacing #	n Eirleting Mobile Hon	. 10	(amount	_
	TR CULTARIA	475, TR (R)	240, TL.	n Itchetuch	knee
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04-T	utch on big	1 n + 1 1 NO			

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PAGE 16/13

FROM : COLUMBIA CO BUTLDING + ZONING FRX ND. : 396-758-2168

Aug. 01 2006 03:45PM P4



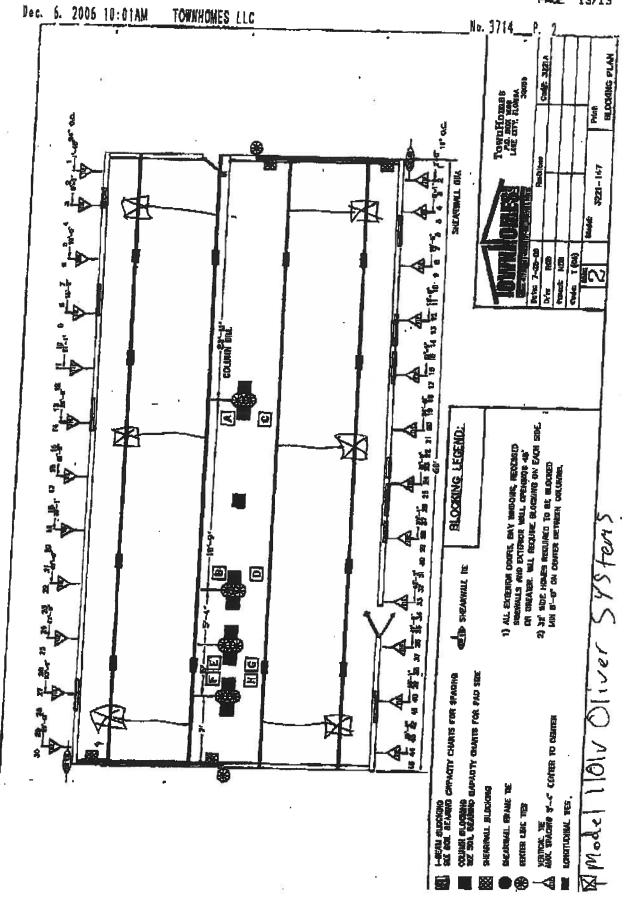
page 2 of 3

PERMIT NUMBER

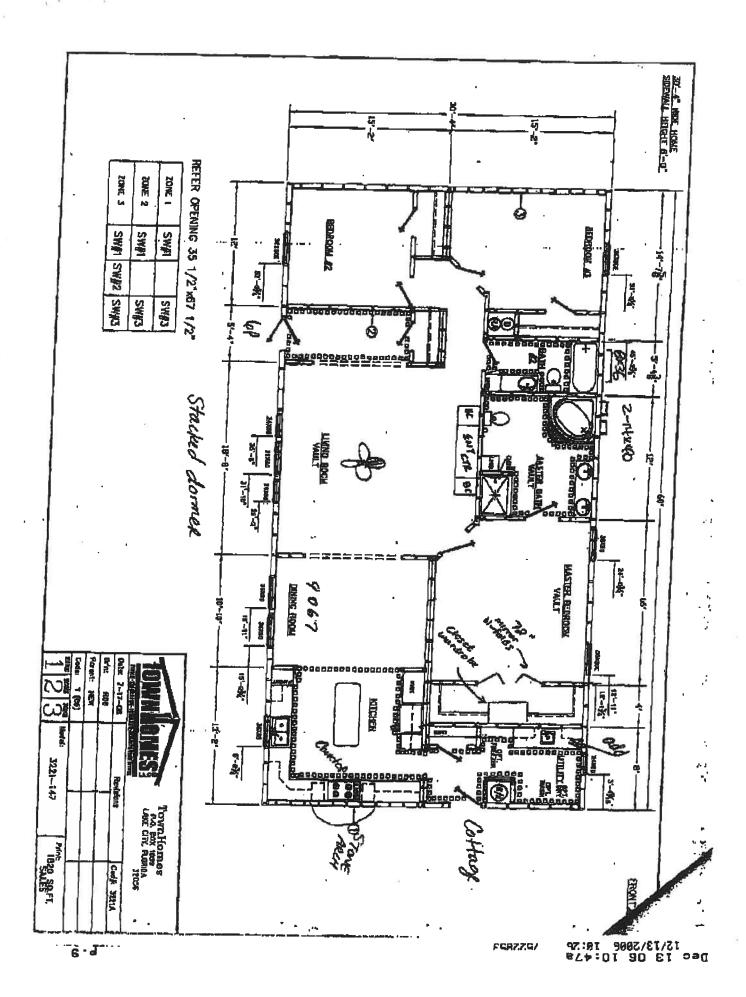
90-[- 2] equa Installor verties all Information given with this permit worksheet lunderstand a property hetalies gastel is a raquirement of all new and used homes and that condensation, moth, netdow and bucked manage waits are a rectil of a poorly installed or no paster being installed. I understand a strip of laps will not entre as a gastidi. manufacturer's installation instructions and or Rule 15C-1 & 2 Type Fastenst: Lo / Length: Flabiling Specing Tribal Johnson and Society Street, galwanzed meter ship will be rentweet over the peak of the roof and fastened with galv. routing neds at 2" on confer on both sides of the centerline. The bottemboard will be impelined another lapach. Yes adding on units is installed to meinufacturer's specifications. Yes rimpledee chimney installed so as not to allow intrusion of rain water. Between Floors Ves Between Wells Yes Bollam of rhigsbeen Yes is accurate and trug based on the Castlet (usellananofing sembanad Tracker's Initiata Fasteaing mouth-wide uni B Sile Praparation Westing Skirling to be installed. Yes Oryer vant healing outside of skirling. Yes Rarge downflow vent installed cutaide of skirling. Druth intel each of skirling. Type Festeren: K.K.
Type Festeren: Chrones
Type Festerens: Low Oebits and organic material numbered Water drainage: Natural Etectrical crossovers protected. Yes Other: Pactors fretailer Signature Type garket L Poor. 300P "nunct all potable water supply piping to an exhaing water mater, water lap, or other denember water supply systems. Pa COCOTE X A state approved lateral arm system to being used and 4 ft. enchors are altowed at the obtained locations. I understand 8 it enchors are stepsized at all contestins the policy whereigh location treeding is 275 or less and where the mobile force malkinectner may electrical conductors between mailt-wide upits, but not to the main power instructors the bounding wite between mult-wide units. Fig. ALL TESTS ARIST BE PERFORMED BY ALICENSID WETAKER The results of the forque probe lead is 2494 but powner or check here if you are declearing 6' enchors without feeting showing 276 inch pounds or less will require 5 host enchors. T. POCKET PENETRONETER TESTING METHOD The packet peopleonrelar lasts are manded down to 2000 or check have to declare 1000 lb, soil 1. Test the perheter of the home at 8 locations. Installar's inflats confect all sever drains to an existing server tap or saptic lank. Pg. Without lasing. Veling 600 lb, Incremente, take the lowest rending and round down to that Increment. 2. Tates the reacting at the depth of the feater. POCKET PENETROMETER TEST ×4500 TOROUG PROBETES requires anchors with 4000 to holding capacity ×2000 P Efte bloca Phundhry 1 ×2000 **6000** Installer Name Dala Testad

Motes

Oppublic



12/13/2006 16:43 7522853



I IMITED POWER OF ATTORNEY

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Bernand Thrift	, license	#IHO	000075	hereby	
ALINA PODE	eto be n	ny represe	ntative and a	ct on my behal	f
in all espects of applying for a mob	ile home	permit to	pe blaced	n the following	,
described property located in Suwanne	e County.	Florida.			
Property owner: LINDA ROI	CERS				•
Sec TwpS Rg	e <u>, </u>	Ė	· · · · · · · · · · · · · · · · · · ·		,
Tax Parcel No.	1	•			
Semil The	*			• •	• 30
Mobile Home Mateller	•	٠,		•	
12-7-06	•	1			
(Date)		af	. 20	A.	ر ها
Swom to and subscribed before me this	· a	ay oi		0 ~	1/6
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Notary Public			391	X Bur.	•
My Commission expires: Commission No. Personally known:	- -	· XX	x of	X ⁰	
Produced ID (Type)	941	$\langle \mathcal{N} \rangle$	9 8	-	
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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

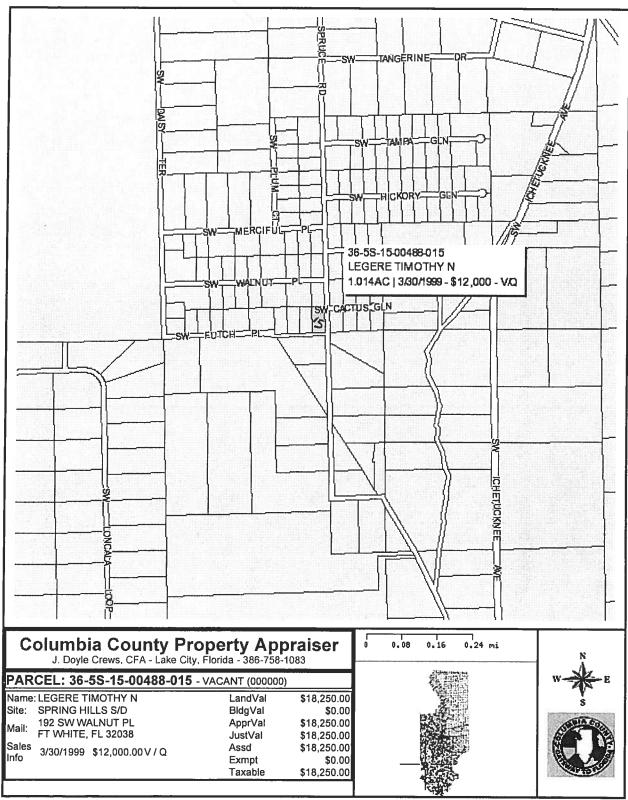
Permit Application Number _____ --- PART II - SITE PLAN----Scale: Each block represents 5 feet and 1 inch = 50 feet. 1 oF 2.3AC Notes: SPRUCE ROAD Site Plan submitted by: /) Signature Not Approved Plan Approved **County Health Department**

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

When recorded, mail to:	
Name: LINDA RODGERS	
Address: 413 S.W. UNITY CRT	
FORT WHITE, FLA.	t:2007000185 Date:01/04/2007 Time:11:04
	Stamp-Deed: 0.00
	<u>√9 · DC,P.DeWitt Cason,Columbia County B:1106 P:2098</u>
	Space above this line for Recorder's use
QUITCLAI	M'DEED 1 ins)
KNOW ALL MEN BY THESE PRESENTS:	
That I (we), Timothy LEGERE	
the undersigned, for the consideration of Ten Dollar	rs (\$10.00), and other valuable considerations, do
hereby release, remise, and forever quitclaim unto _	LINDA RODGERS
	uated in Columbia County,
all right, title and interest in that certain Property situ	•
,	
,	, SPRING Hills SUB. DIV, A
SUBDIV. AS PER PLAT TH	EREOF RECORDED IN PLAT
BOOK 4, AT PAGES 33 +	33A, PUBLIC RECORDS
OF COLUMBIA COUNTY, FL	ORIDA
y ²	
*,	
IN WITNESS WHEREOF, I(we) have hereunto set	mv(our) hand(s) and seal this day of
III WITHESS WITEHEST, I(WS) have hereally det	my (our) name (o) and counting any o.
,	
limothy LEGERE	- Thrane
Printed Name of Releasor	Signature of Releasor
Printed Name of Releasor	Signature of Releasor
Printed Name of Witness (if required by State Laws)	Signature of Witness (if required by State Laws)

ACKNOWLEDGMENT (States Other Than California)

State of Florida,
County of Wilmbia) ss.
On this 27th day of December , 200%, before me, the undersigned
Notary Public, personally appeared Linda Rodgers and Timothy Legere
known to me to be the individual(s) who executed the foregoing instrument and acknowledged the same
My Commission Ex. Commission # DD513460 Expires March 7 2010 State of Florida. Separation in the property from the pro
If acknowledged in the State of Florida, Section(s) below:
(Releasor) Personally Known (or) Produced Identification
If applicable, Type of Identification Produced:
(Co-Releasor) Personally Known (or) Produced Identification
If applicable, Type of Identification Produced:
ACKNOWLEDGMENT (State Of California)
State of California) ss.
County of) ss.
On this day of,, before me,
, the undersigned Notary Public, personally appeared,
, the differighted Notary Public, personally appeared,
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose
name(s) is(are) subscribed to the attached instrument and acknowledged to me that he(she)(they) executed the same in his(her)(their) authorized capacity(ies), and that by his(her)(their) signature(s) on the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.
executed the same in his(her)(their) authorized capacity(ies), and that by his(her) (their) signature(s) on the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.
executed the same in his(her)(their) authorized capacity(ies), and that by his(her) (their) signature(s) on the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal. Inst:2007000185 Date:01/04/2007 Time:11:04 Doc Stamp-Deed: 0.00
executed the same in his(her)(their) authorized capacity(ies), and that by his(her) (their) signature(s) on the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. Inst: 2007000185 Date: 01/04/2007 Time: 11:04



This information, GIS Map Updated: 11/20/2006, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes. vault



STATE OF FLORIDA

DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number PART II - SITE PLAN-Scale: Each block represents 5 feet and 1 inch = 50 feet. 210 FUTCH Notes: Site Plan submitted by Not Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Health Department



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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 36-5S-15-00488-015

Permit Holder

BERNIE THRIFT

Building permit No. 000025389

Owner of Building LINDA RODGERS

Location: 1334 SW SPRUCE ROAD

Date: 02/26/2007

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)