

DATE 03/30/2011

**Columbia County Building Permit****PERMIT****This Permit Must Be Prominently Posted on Premises During Construction****000029281**

APPLICANT JAMES RUIS PHONE 386.754.9026  
ADDRESS 30 SW BURNETT LN LAKE CITY FL 32024  
OWNER APRIL RUIS PHONE 386.754.9026  
ADDRESS 453 NW BISON COURT WHITE SPRINGS FL 32096  
CONTRACTOR TERRY L. THRIFT PHONE 386.623.0115  
LOCATION OF PROPERTY 41-N TO C-246,TURN R,TO BISON CT,TL AND IT'S THE 4TH LOT ON  
R,(JUST PAST WHITE SW/MH W/BLUE ROOF).  
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 14-2S-16-01608-114 SUBDIVISION                       
LOT                      BLOCK                      PHASE                      UNIT                      TOTAL ACRES 5.01

IH1025139  
Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor James F. Ruis  
EXISTING 11-0157-E BLK TC 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                      Foundation                      Monolithic                       
                    date/app. by                      date/app. by                      date/app. by  
Under slab rough-in plumbing                      Slab                      Sheathing/Nailing                       
                    date/app. by                      date/app. by                      date/app. by  
Framing                      Insulation                       
                    date/app. by                      date/app. by  
Rough-in plumbing above slab and below wood floor                      Electrical rough-in                       
                    date/app. by                      date/app. by  
Heat & Air Duct                      Peri. beam (Lintel)                      Pool                       
                    date/app. by                      date/app. by                      date/app. by  
Permanent power                      C.O. Final                      Culvert                       
                    date/app. by                      date/app. by                      date/app. by  
Pump pole                      Utility Pole                      M/H tie downs, blocking, electricity and plumbing                       
                    date/app. by                      date/app. by                      date/app. by  
Reconnection                      RV                      Re-roof                       
                    date/app. by                      date/app. by                      date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 44.94 WASTE FEE \$ 117.25FLOOD DEVELOPMENT FEE \$                      FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$                      **TOTAL FEE** 537.19INSPECTORS OFFICE                      CLERKS OFFICE                     

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

**The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.**



**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

<b>For Office Use Only</b> (Revised 1-11)		Zoning Official <u>BLK 24.03.11</u>	Building Official <u>7.C. 3-23-11</u>
AP# <u>1103-28</u>	Date Received <u>3/21</u>	By <u>JIN</u>	Permit # <u>29281</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>
Comments _____			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1' above PA</u>	River <u>N/A</u> In Floodway <u>N/A</u>
<input checked="" type="checkbox"/> Site Plan with Setbacks Shown	<input checked="" type="checkbox"/> EH # <u>11-0157-E</u>	<input checked="" type="checkbox"/> EH Release <u>N/A</u>	<input checked="" type="checkbox"/> Well letter <input checked="" type="checkbox"/> Existing well
<input checked="" type="checkbox"/> Recorded Deed or Affidavit from land owner	<input checked="" type="checkbox"/> Installer Authorization	<input checked="" type="checkbox"/> State Road Access	<input checked="" type="checkbox"/> 911 Sheet
<input checked="" type="checkbox"/> Parent Parcel # _____	<input type="checkbox"/> STUP-MH _____	<input type="checkbox"/> F W Comp. letter	<input type="checkbox"/> VF Form
IMPACT FEES: EMS _____ Fire _____		Corr _____	<input checked="" type="checkbox"/> Out County <input checked="" type="checkbox"/> In County
Road/Code _____ School _____		= TOTAL _____	Impact Fees Suspended March 2009 _____

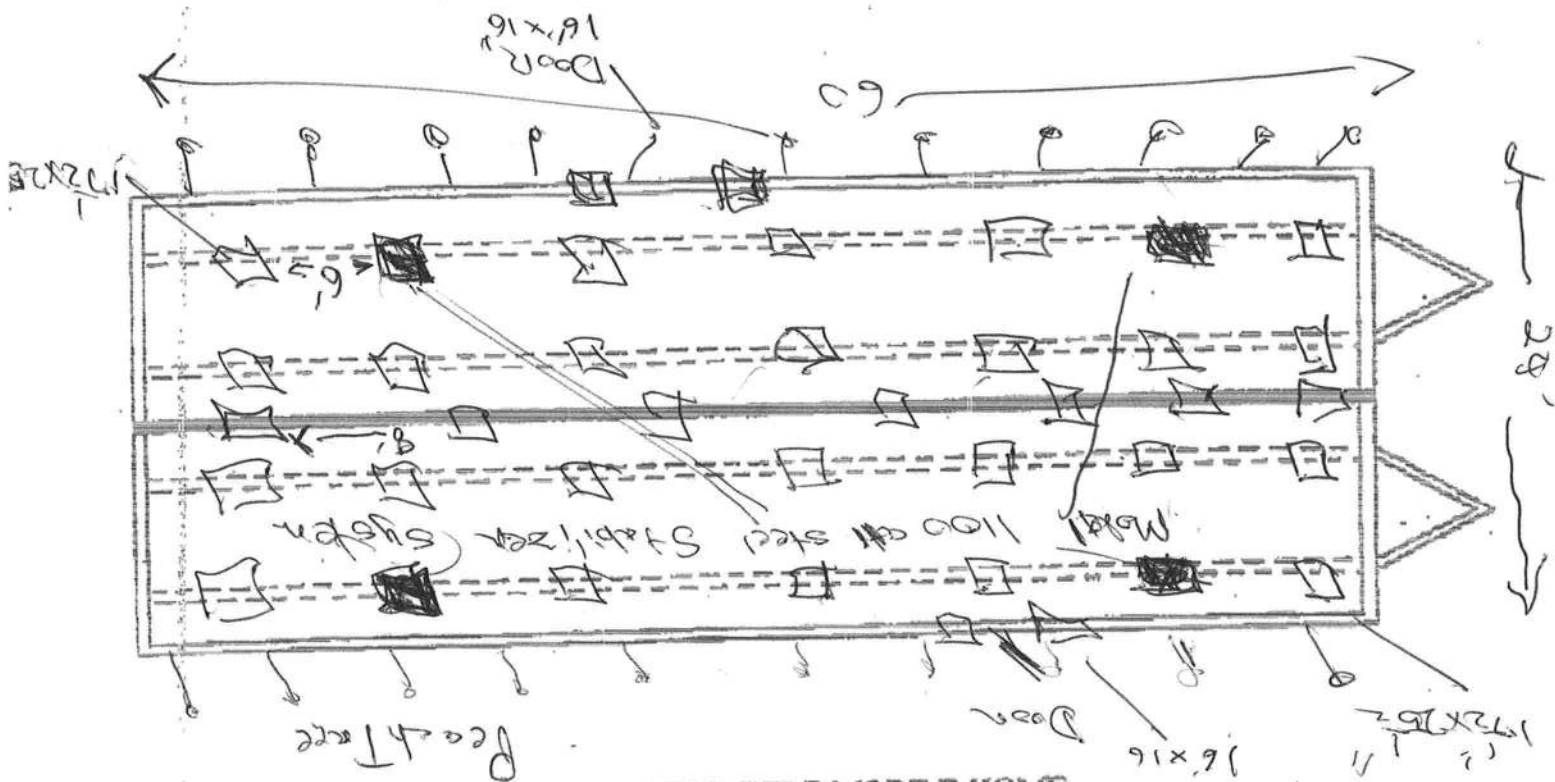
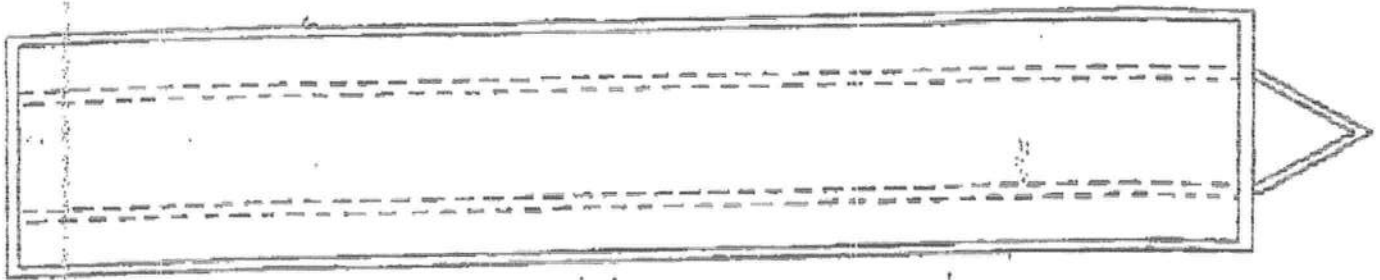
Property ID # 14-25-16-01608-114 Subdivision \_\_\_\_\_

- New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 24x60 Year 1999
- Applicant James Ruis / April Ruis Phone # 386-754-9026
- Address 302 SW Bunnell Ln Lake City FL 32024
- Name of Property Owner April Ruis Phone# 386 754 9026
- 911 Address 453 NW Bison Ct, White Springs, FL 32096
- Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home April Ruis Phone # Same as above  
 Address Same as above
- Relationship to Property Owner Father
- Current Number of Dwellings on Property 0
- Lot Size \_\_\_\_\_ Total Acreage 5.010
- 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 Hwy 41 North, turn Right on 246 head East about 2 1/2 mile, turn Left on Bison ct. head North 4th lot on right, just past white with blue roof single wide
- Name of Licensed Dealer/Installer Terry L. Thrift Phone # (386) 423-0115
- Installers Address 448 NW Nye Hunter Dr Lake City Fla 32055
- License Number IH-1025139 Installation Decal # 4735

\$ 537.19      TI      TW spoke w/ Jam

Applicant shall provide layout from manufacturer specific to the model installed. This form may be used if the layout from the manufacturer is not available.

### SINGLE WIDE MOBILE HOME



### DOUBLE WIDE MOBILE HOME



Show each pier and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.



## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil \_\_\_\_\_ without testing.

X 1500 X 1500 X 1500  
285 285 285

## 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 1500 X 1500 X 1500  
285 285 285

## TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5" anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.

**Note:** A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 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 TL

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

LEON 2. THORNTON

Date Tested

3/14/11

## Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. \_\_\_\_\_

## Plumbing

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

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

## Site Preparation

Debris and organic material removed \_\_\_\_\_  
Water drainage: Natural X Swale \_\_\_\_\_ Pad \_\_\_\_\_ Other \_\_\_\_\_

## Fastening multi wide units

Floor: Type Fastener: 1/4" x 3" screws Length: 6" Spacing: 24" oc  
Walls: Type Fastener: 3/8" x 3" screws Length: 8" Spacing: 32" oc  
Roof: Type Fastener: metal Length: 60" Spacing: 60"  
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

## Gasket (weatherproofing requirement)

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

Installer's initials TL

Type gasket Foam Tape

Installed: Between Floors Yes  
Between Walls Yes  
Bottom of ridgebeam Yes

## 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 \_\_\_\_\_ N/A \_\_\_\_\_  
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 3/14/11



# COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Terrell J. Thibault License # TH-1025139

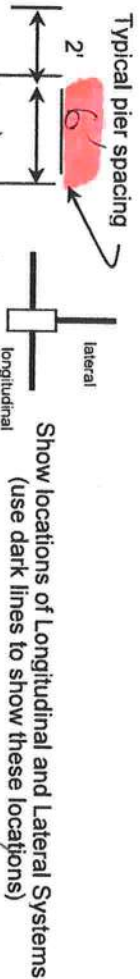
911 Address where home is being installed. \_\_\_\_\_

Manufacturer \_\_\_\_\_ Length x width \_\_\_\_\_

NOTE: if home is a single wide fill out one half of the blocking plan  
if home is a triple or quad wide sketch in remainder of home

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

Installer's initials TT



Model 1150 All Steel Stabilizer system

marriage wall piers within 2' of end of home per Rule 15C

342 req. 446 piers

New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 4735

Triple/Quad ☐ Serial # 0329 44B

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

\* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

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

Pier pad size

8' 17' x 25'

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)  
Manufacturer Shuck  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer \_\_\_\_\_

Sidewall Longitudinal Marriage wall Shearwall  
Number 7  
8



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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, TERRY L. THRIFT, give this authority for the job address show below  
Installer License Holder Name

only, 453 NW Bison Ct, and I do certify that  
Job Address

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

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
April Ruis	April Ruis	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
James Ruis	James F. Ruis	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Terry L. Thrift  
License Holders Signature (Notarized)

JH-1025139  
License Number

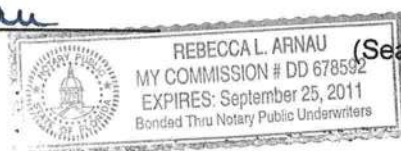
3/16/11  
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Terry L. Thrift, personally appeared before me and is known by me or has produced identification (type of I.D.) \_\_\_\_\_ on this 16 day of March, 2011.

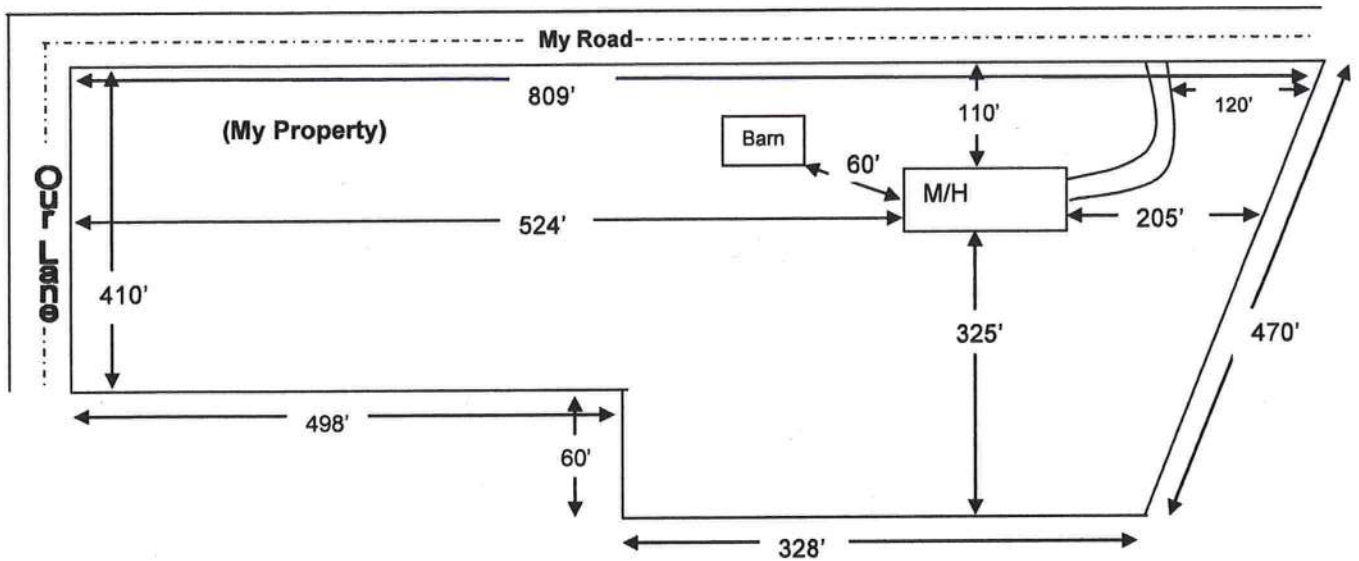
Rebecca L. Arnaud  
NOTARY'S SIGNATURE



(Seal/Stamp)

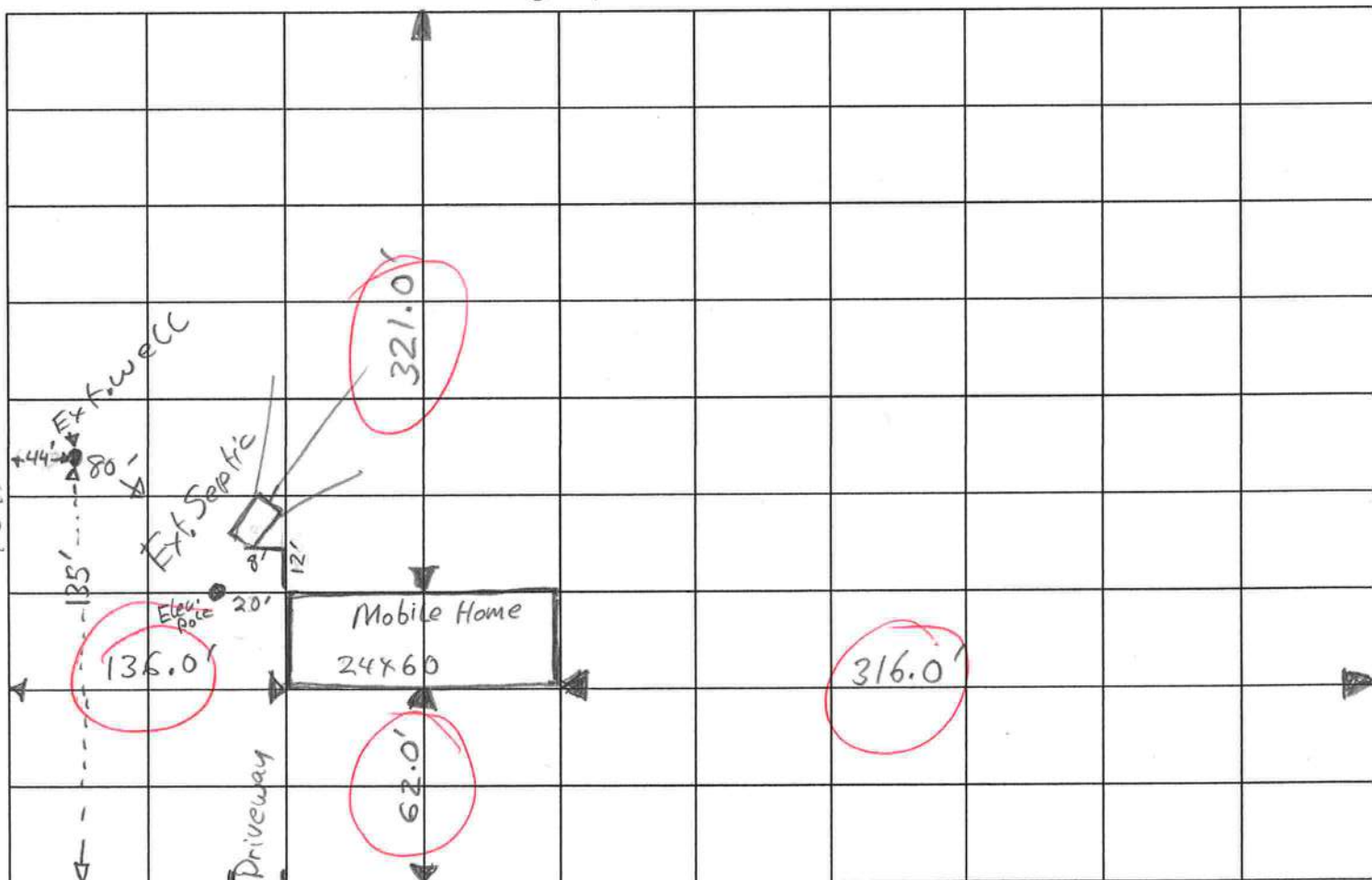


# SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.

534.09'



534.09

← Bison Ct. →

Old Name Marilyn Lane

North

## AFFIDAVIT

I CERTIFY THAT THE FOLLOWING DESCRIBED MOBILE HOME BEING  
PLACED ON THE REFERENCED PARCEL IS NOT A WIND ZONE 1 MOBILE  
HOME.

CUSTOMER'S NAME: April Huis

PROPERTY ID: SEC: 14 TWP: T-2-S RGE: R-16-E  
TAX PARCEL: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_  
SUBDIVISION: \_\_\_\_\_

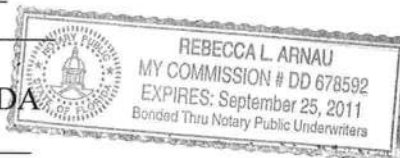
MOBILE HOME YEAR/MAKE: 1979, Sout  
SIZE: 24 X 60'

Terry L. Thrift  
SIGNATURE OF MOBILE HOME INSTALLER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 16 OF March  
20 11  
BY Terry L. Thrift

Rebecca L. Arnau

NOTARY'S NAME PRINTED/TYPED  
NOTARY PUBLIC, STATE OF FLORIDA  
COMMISSION NO. \_\_\_\_\_





CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3/9 BY JLH IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No  
OWNERS NAME JAMES RUIZ PHONE 751-2026 CELL 386-288-2690 (PCS-LV MESA)  
ADDRESS \_\_\_\_\_

MOBILE HOME PARK \_\_\_\_\_ SUB DIVISION \_\_\_\_\_  
DRIVING DIRECTIONS TO MOBILE HOME 90° E TO SR 101, TR TO C-245, TR TO FANNOISE  
Vg Mill Rd. TR. TL @ 90° S. CORNER OF MHI ) BROKEN INTO HALVES

MOBILE HOME INSTALLER UNK PHONE \_\_\_\_\_ CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE FRENCHMAN YEAR 1979 SIZE 24 x 60 COLOR WHITE, "SING"  
SERIAL No. COFGARTO103298  
WIND ZONE II (P) Must be wind zone II or higher N | WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

\$50.00

☒ 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

Date of Payment: 03.09.11

Paid By: JAMES RUIZ

Notes: 24 PL 4x4 to be  
RECEIVED

EXTERIOR:

☒ WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING  
☒ WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT  
☒ ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: Weak Floors, Backdoor + Kitchen  
NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE Jeff S. Howell ID NUMBER 402 DATE 3-11-11

Inst: 201012009237 Date: 6/9/2010 Time: 11:57 AM  
Doc Stamp: Deed 314 30  
DC, P DeWitt Cason, Columbia County Page 1 of 1 B: 1195 P 2497

## WARRANTY DEED

This Warranty Deed made and executed the 1<sup>st</sup> day of June A.D. 2010, by SUBRANDY LIMITED PARTNERSHIP, a Florida limited partnership, hereinafter called the grantor, to APRIL RUIS, Whose post office address is 5117 216<sup>th</sup> Street, Lake City, FL 32024, hereinafter called the grantee:

(Wherever used herein the terms "Grantor" and "Grantee" 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

### TOWNSHIP 2 SOUTH, RANGE 16 EAST

SECTION 14: a part of the NW ¼ of the NE ¼, more particularly described as follows; Commence at the SE corner of said NW ¼ of NE ¼ and thence run S 89° 20'59" W along the South line of said NW ¼ of NE ¼, a distance of 217.80 feet, thence N 0° 53'08" E, 167.60 feet for a POINT OF BEGINNING, thence run N 89° 00'48" West, 407.06 feet to the Easterly right-of-way line of Bison Court, a county paved Road, thence run N 0° 59'12" East along said East right-of-way line 534.09 feet, thence run S 89° 00'48" East 407.06 feet, thence run S 0° 53'08" West 534.09 feet to the POINT OF BEGINNING. Subject to Restrictions as recorded in O.R. Book 0728, Pages 0722-0723 among the Public Records of Columbia County, Florida.

**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, 2009.

**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:

Nanci Brinkley  
Witness: Nanci Brinkley

Bradley N. Dicks L.S.  
Bradley N. Dicks, General Partner  
Subrandy Limited Partnership

Jon C. Jackson  
Witness: Jon C. Jackson

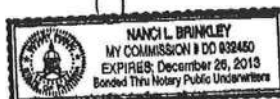
State of Florida  
County of Columbia

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 1<sup>st</sup> day of June, A.D. 2010

Nanci Brinkley  
Notary Public, State of Florida

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





## Columbia County Property Appraiser

DB Last Updated: 2/17/2011

**2010 Tax Year****Parcel:** 14-2S-16-01608-114

&lt;&lt; Next Lower Parcel   Next Higher Parcel &gt;&gt;

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

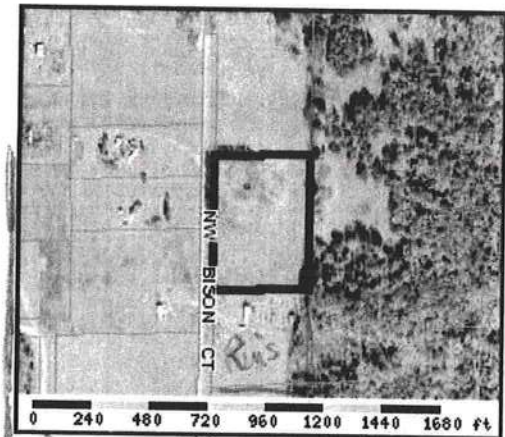
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Search Result: 2 of 5

Next &gt;&gt;

### Owner & Property Info

Owner's Name	RUIS APRIL		
Mailing Address	302 SW BURNETT LN LAKE CITY, FL 32024		
Site Address	453 NW BISON CT		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	14216
Land Area	5.010 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
COMM SE COR OF NW1/4 OF NE1/4, RUN W 217.80 FT, N 167.60 FT, FOR POB, CONT N 407.06 FT, TO E R/W OF BISON CT, N 534.09 FT E 407.06 FT, S 534.09 FT TO TO POB. ORB 799-1412, 878-2107 THRU 2108, WD 1070-2052, AFD 1147-415, QC 1188-2147 & WD 1195-2497			



### Property & Assessment Values

2010 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$22,818.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (0)	\$0.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$22,818.00
<b>Just Value</b>		\$22,818.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$22,818.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$22,818 Other: \$22,818   Schl: \$22,818	

### 2011 Working Values

**NOTE:**  
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

### Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/1/2010	1195/2497	WD	V	U	40	\$44,900.00
2/1/2010	1188/2147	QC	V	U	11	\$100.00
10/1/2007	1147/415	AG	V	U	01	\$69,900.00
1/10/2006	1070/2052	WD	I	Q		\$50,000.00
7/9/1993	799/1412	WD	V	Q		\$62,500.00

### Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
			NONE			

### Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)

# MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR TERRY L. THRIFT PHONE (386) 623-0115

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.*

<b>ELECTRICAL</b>	Print Name: <u>James F. Ruiz</u> License #: <u>none</u>	Signature: <u>[Signature]</u> Phone #: <u>784-9026</u>
<b>MECHANICAL/ A/C</b> <u>R. Ruiz</u>	Print Name: <u>N/A</u> License #: <u>N/A</u>	Signature: _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name: <u>TERRY L. THRIFT</u> License #: <u>1H-1025139</u>	Signature: <u>[Signature]</u> Phone #: <u>(386) 623-0115</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.



## 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: 3/22/2011      DATE ISSUED: 3/22/2011

#### ENHANCED 9-1-1 ADDRESS:

453      NW      BISON      CT

WHITE SPRINGS      FL      32096

#### PROPERTY APPRAISER PARCEL NUMBER:

14-2S-16-01608-114

#### Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE.

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.**



## DEPARTMENT OF HEALTH

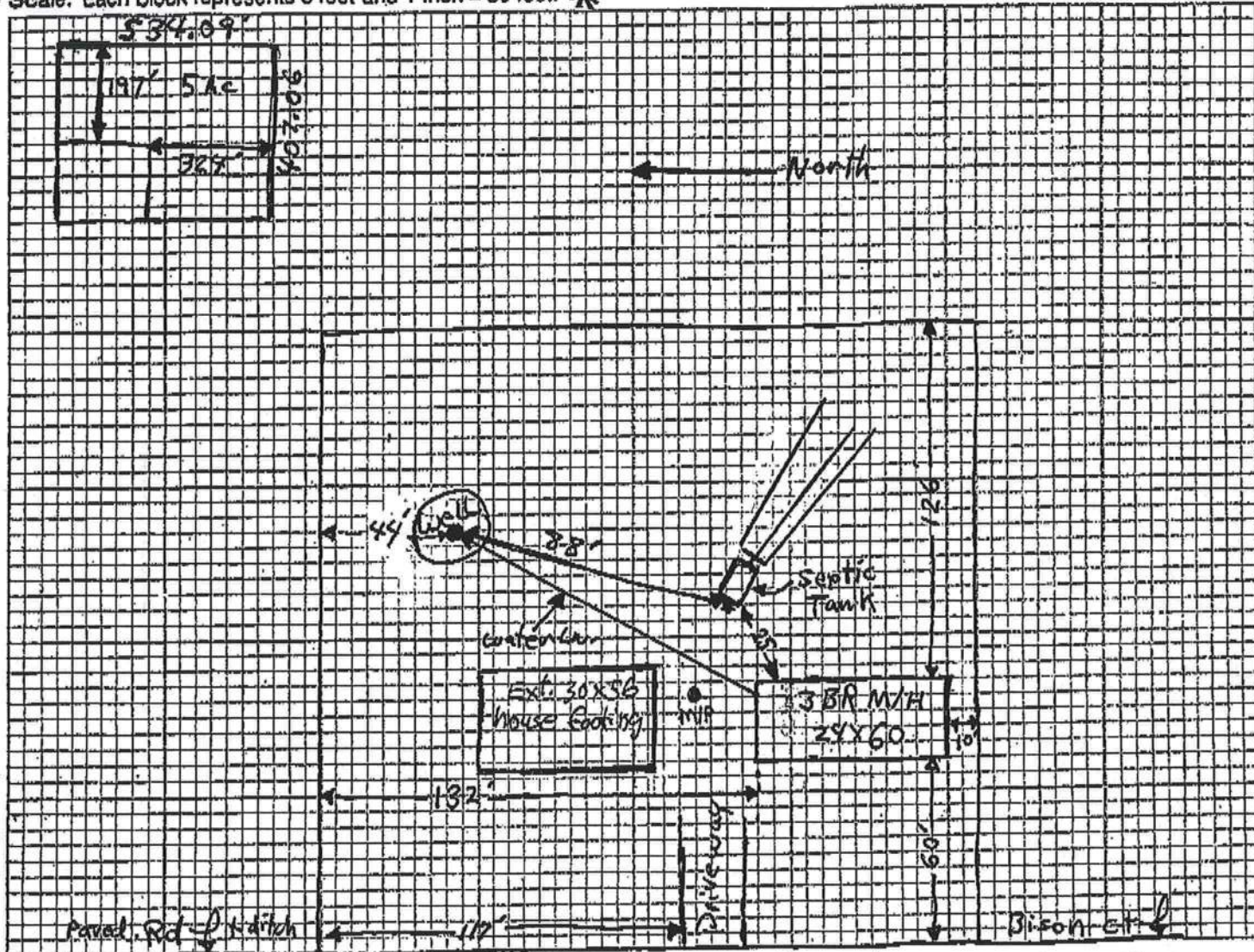
## APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

11-0157E

## PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

James F. Ruiz + April Ruiz

Signature

16807311/1680731

Title

Plan Approved ☒

Not Approved

Date 3/28/11

By

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT





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

PERMIT NO. 999215  
DATE PAID: 3/27/11  
FEE PAID: 125.00  
RECEIPT #: 1581332

81-0157E

## APPLICATION FOR:

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

APPLICANT: April Ruis

AGENT: James Ruis

TELEPHONE: 754-9026  
or 288-2690

MAILING ADDRESS: 302 S/W Burnett Ln. Lake City FL.

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: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 14-25-16-01608-114 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☐ N DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 453 NW Bison Ct. Whitesprings, Fla. 32096

DIRECTIONS TO PROPERTY: Hwy 41 North to C-246 turn right head west 2 1/2 miles + or - to Bison ct, turn left lot on right just past white single wide mobile home white with blue roof.

## 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 24x60 mobile home 3 1440

2 \_\_\_\_\_ ORIGINAL ATTACHED

3 \_\_\_\_\_

4 \_\_\_\_\_

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: April Ruis + James Ruis

DATE: 03/22/10