

17462

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official [Signature]

Building Official M 9/22/17

AP# 1709-22 Date Received 9/15 By JW Permit # 35819

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

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor 1' above River In Floodway _____

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 17-0576-X ☒ Well letter OR

☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH STUP 1709-45 ☒ 911 App

☐ Ellisville Water Sys ☐ Assessment Paid on Property ☐ Out County ☐ In County ☒ Sub VF Form

Property ID # 35-7S-16-04346-018 Subdivision Rum Island Ranches Unrec Lot# 4

▪ New Mobile Home X Used Mobile Home _____ MH Size 28x48 Year 2018

▪ Applicant Dale Burd or Rocky Ford Phone # 386-497-2311

▪ Address 546 SW Dortch St, Fort White, FL, 32038

▪ Name of Property Owner Kenneth Barton Phone# 941-979-1408

▪ 911 Address 1134 SW Rum Island Road, Fort White, FL, 32038

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Same Phone # Same
Address 1216 SW Rum Island Road, Fort White, FL, 32038

▪ Relationship to Property Owner Same

▪ Current Number of Dwellings on Property 1

▪ Lot Size 1230 x 310 Total Acreage 9.88

▪ 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 47 South, TL US 27, TR CR 138, TL Rum Island Road, After 90 degree right turn, 1st drive on right

▪ Name of Licensed Dealer/Installer Ernest "Scott" Johnson Phone # 352494-8099

▪ Installers Address 22204 SE US Hwy 301, Hawthorne, FL, 32640

▪ License Number IH-1025249 Installation Decal # 45817

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

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

Installer

Ernest S Johnson License # TH1025249

91' Address where home is being installed

1134 SW Elmwood Road
Fort Worth TX 76103

Manufacturer

Town Home Length x width 48' x 28'

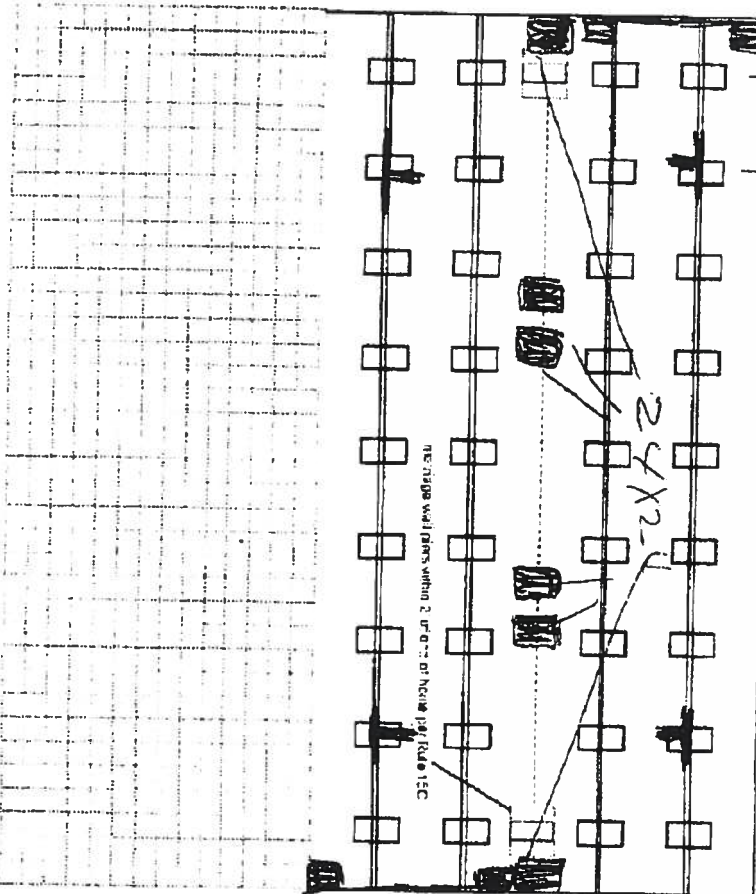
NOTE:

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 has exceed 5 ft 4 in.

Installer's initials

[Signature]



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 # 45317

Triple/Quad ☐ Serial # FEHKT20256 3394AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Foster size (256)	16 1/2" x 18 (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'
1500 psf	4' 6"	6'	7'	8'	9'	10'
2000 psf	6'	8'	9'	10'	11'	12'
2500 psf	7' 6"	9'	10'	11'	12'	13'
3000 psf	8'	10'	11'	12'	13'	14'
3500 psf	8'	10'	11'	12'	13'	14'

* interpolated from Rule 15C-1 pier spacing table

PIER PAD SIZES

I-beam pier pad size 23x31 70c
Perimeter pier pad size Oliver 1055-1106 16x18

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
<u>15' 4"</u>	<u>24x24</u>
<u>15' 11"</u>	<u>24x24</u>
<u>16' 9"</u>	<u>24x24</u>

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver 1101 V

POPULAR PAD SIZES

Pad Size	Sq in
16 x 16	256
16 x 18	288
18 x 18	324
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	426
24 x 24	576
26 x 26	676

ANCHORS

4 ft ☒ 5 ft ☒

FRAME TIES

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

OTHER TIES

Number 2
Sidewall Longitudinal Marriage wall Shearwall 2

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.

TORQUE PROBE TEST

x 1000 x 1000 x 1000

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

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Ernest S Johnson
Assumed Oliver 1101V
USCS 485 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 1/4x5 Length 6' Spacing 20'
Walls: Type Fastener 1/4x5 Length 6' Spacing 20'
Roof: Type Fastener 1/4x5 Length 6' Spacing 20'
For used homes a min. 30 gauge, 6" 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

Type gasket

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

Weatherproofing

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

Miscellaneous

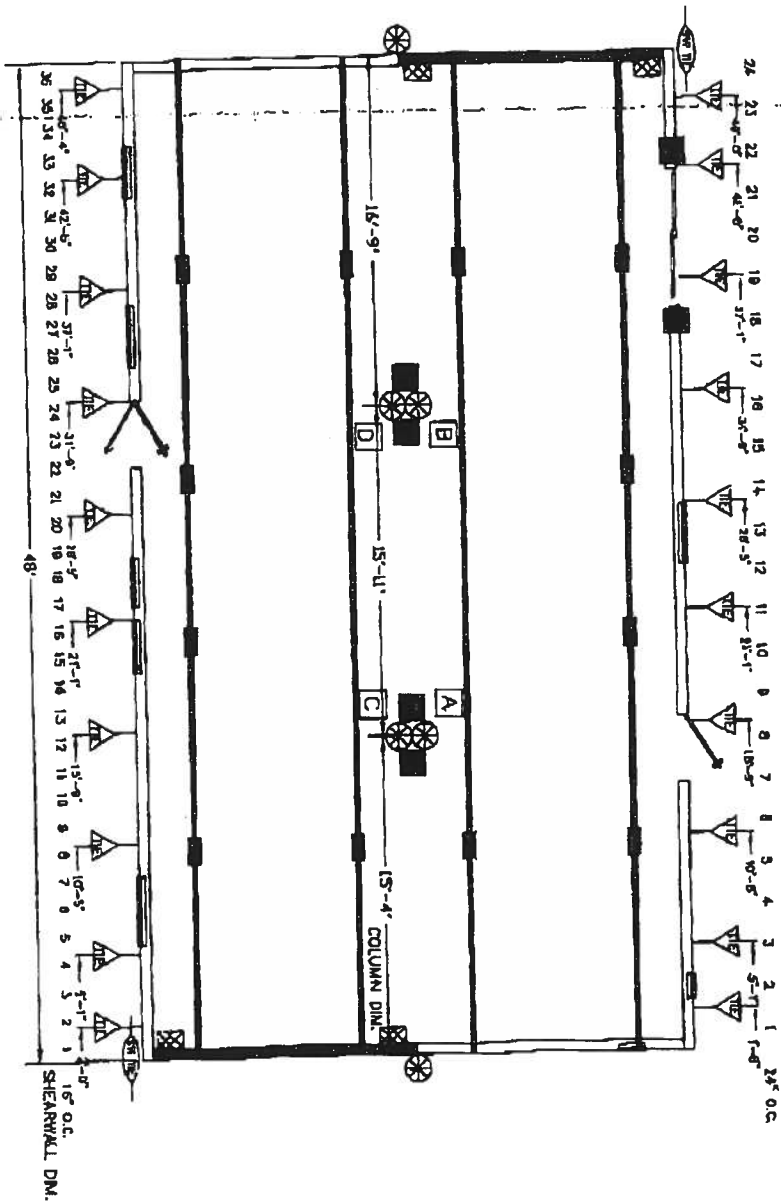
Skirting to be installed. Yes _____ No _____
Dryer vent installed outside of skirting. Yes _____ No _____
Range downflow vent installed outside of skirting. Yes _____ No _____
Drain lines supported at 4 foot intervals. Yes _____ No _____
Electrical crossovers protected. Yes _____ No _____
Other _____

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

Installer Signature

Ernest S Johnson

Date



BLOCKING LEGEND:

1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SPOKES AND EXTERIOR WALL OPENINGS 48" OR GREATER, WILL REQUIRE BLOCKING ON EACH SIDE.

2) 32" WIDE HOMES REQUIRED TO BE BLOCKED MIN 8'-0" ON CENTER BETWEEN COLUMNS.

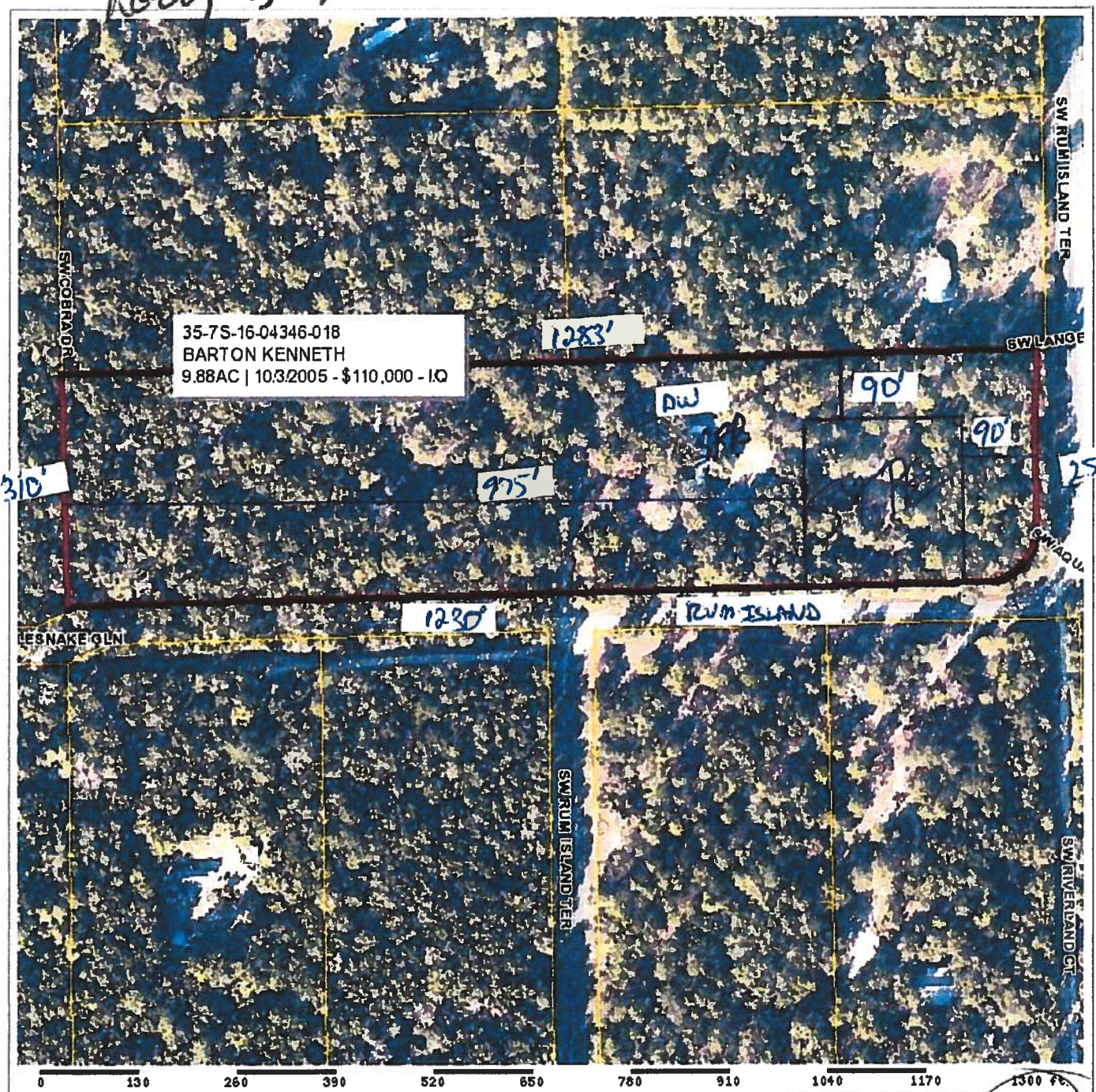
- 1) I-BEAM BLOCKING
- 2) SEE SOIL BEARING CAPACITY CHARTS FOR PAID SIZE
- 3) COLUMN BLOCKING
- 4) SEE SOIL BEARING CAPACITY CHARTS FOR PAID SIZE
- 5) SHEARWALL BLOCKING
- 6) SHEARWALL FRAME TIE
- 7) CENTER LINE TIES
- 8) VERTICAL TIE
- 9) MAX SPACING 9'-8" CENTER TO CENTER
- 10) LONGITUDINAL TIES

TOWNHOMES T.O. BOX 1059 LAKE CITY, RUTHERFORD, NJ 07033		Date: 6-22-18 Drawn: RMB Project: NCS Code: 1 (10) Model: 2863-286		Revisions Conf: 2863A7 Date: 6-22-18 Drawn: RMB Project: NCS Code: 1 (10) Model: 2863-286	
2		2863-286		BLOCKING PLAN	

#286357

Rocky D 7-0

AUG 25 2017

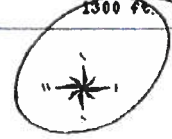


Columbia County Property Appraiser
Jeff Hampton - Lake City, Florida 32055 | 388-758-1083

PARCEL: 35-7S-16-04346-018 - MOBILE HOM (000200)
S1/2 OF S1/2 OF NE1/4 OF NE1/4 (LOT 4 SEC 2 RUM ISLAND RANCHES UNR. ALSO PART OF GOVT LOT 1). EX
ADDN'T RD R/W DESC ORB 1109-1849, 497-469, 789-1257,
Name: BARTON KENNETH
Site: 1218 SW RUM ISLAND TER
Mail: 1216 SW RUM ISLAND TER
FT WHITE, FL 32038-2278
Sales 7/20/2012 \$100.00 I / U Exmpt
Info 10/3/2005 \$110,000.00 I / Q Taxbl

2016 Certified Values	
Land	\$42,074.00
Bldg	\$16,281.00
Assd	\$64,695.00
	\$0.00
Cnty:	\$64,695
Other:	\$64,895 Schl: \$64,895

NOTES:



This information, updated: 8/17/2017, 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, its use, or its 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.

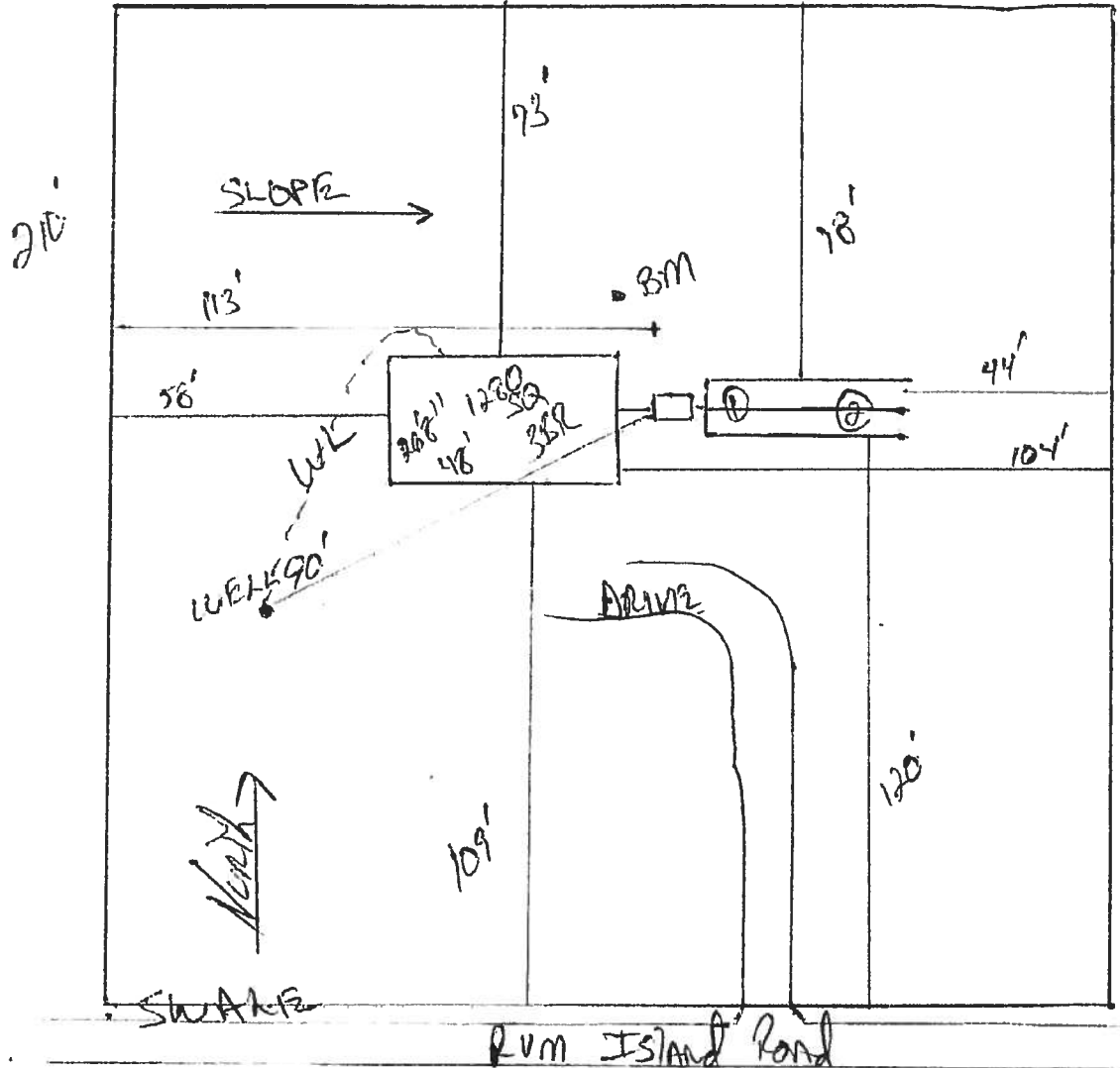
powered by
GrizzlyLogic.com

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

Permit Application Number _____

Barton ----- PART II - SITEPLAN ----- 210'

Scale: 1 inch = 40 feet.



Notes: No PERTINENT IMPROVEMENTS WITHIN 25' OF 1 ACRE

Site Plan submitted by: Rochy D 7-0 MASTER CONTRACTOR
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125 x 1 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.com



Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:	1/26/2017 3:00:00 PM
Address:	1134 SW RUM ISLAND Ter
City:	FORT WHITE
State:	FL
Zip Code	32038

Parcel ID	04346-018
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REMARKS: Address for proposed structure on parcel. 2nd location on parcel.

Address Issued By: **Signed:/ Ronal N. Croft**

Columbia County GIS/911 Addressing Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, 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

LICENSED QUALIFIER AUTHORIZATION

I, Michael A Boland (license holder name), licensed qualifier
for ACE A/C of Ocala, LLC (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. Dale Reed	1. [Signature]
2. Kelly Bishop	2. Kelly Bishop
3. Kelly Ford	3. Kelly Ford
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 is/are no longer agents, employee(s), or
officer(s), you must notify this department in writing of the changes and submit a new letter of
authorization form, which will supersede all previous lists. Failure to do so may allow
unauthorized persons to use your name and/or license number to obtain permits.

[Signature]
Licensed Qualifiers Signature (Notarized)

CAC1817716 License Number
11/17/15 Date

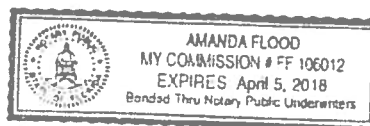
NOTARY INFORMATION

STATE OF Florida COUNTY OF Marion

The above license holder whose name is Michael A. Boland
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 17th day of November, 20 15

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





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

I, Michael Reader (license holder name), licensed qualifier for Madison Services LLC (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. <u>Rocky D Ford</u>	1. <u>[Signature]</u>
2. <u>Nate R. Sural</u>	2. <u>[Signature]</u>
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 is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Michael Reader License Qualifiers Signature (Notarized) ELIZABETH License Number 11/2/15 Date

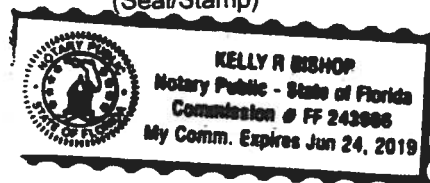
NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Michael Reader personally appeared before me and is known by me or has produced identification (type of I.D.) [Signature] on this 2 day of Nov, 2015.

Kelly Bishop
NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1709-22 CONTRACTOR ERINIST SLOTT JOHNSON PHONE 357-494-8099

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.

ELECTRICAL ✓ 1338	Print Name <u>Michael Reader</u> License #: <u>EC 1300 2315</u> Qualifier Form Attached <input checked="" type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>850-973-0111</u>
MECHANICAL/ A/C ✓ 150	Print Name <u>Michael Boland</u> License #: <u>CAC1817716</u> Qualifier Form Attached <input checked="" type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>352-274-9326</u>

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

2016 tax year

updated: 8/17/2017
Parcel: 35-7S-16-04346-018

Owner & Property Info

Search Result: 1 of 1

Owner's Name	BARTON KENNETH		
Mailing Address	1216 SW RUM ISLAND TER FT WHITE, FL 32038-2278		
Site Address	1216 SW RUM ISLAND TER		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	35716
Land Area	9.880 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
S1/2 OF S1/2 OF NE1/4 OF NE1/4 (LOT 4 SEC 2 RUM ISLAND RANCHES UNR. ALSO PART OF GOVT LOT 1). EX ADDN'T RD R/W DESC ORB 1109-1849. 497-469, 789-1257, WD 1060- 2313, QC 1239-2326(LE),			



Property & Assessment Values

2016 Certified Values		
Mkt Land Value	cnt: (0)	\$42,074.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$16,281.00
XFOB Value	cnt: (3)	\$6,340.00
Total Appraised Value		\$64,695.00
Just Value		\$64,695.00
Class Value		\$0.00
Assessed Value		\$64,695.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$64,695 Other: \$64,695 Schl: \$64,695	

2017 Working Values			(...Hide Values)
Mkt Land Value	cnt: (0)	\$42,074.00	
Ag Land Value	cnt: (2)	\$0.00	
Building Value	cnt: (1)	\$16,607.00	
XFOB Value	cnt: (3)	\$6,340.00	
Total Appraised Value		\$65,021.00	
Just Value		\$65,021.00	
Class Value		\$0.00	
Assessed Value		\$65,021.00	
Exempt Value		\$0.00	
Total Taxable Value	Cnty: \$65,021 Other: \$65,021 Schl: \$65,021		

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
7/20/2012	1239/2326	LE	I	U	14	\$100.00
10/3/2005	1060/2313	WD	I	Q		\$110,000.00
4/22/1994	789/1257	WD	V	U	12	\$22,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1984	WD FR STUC (16)	1152	2752	\$16,607.00
Note: All S.F. calculations are based on exterior building dimensions.						

Dependable Well Drilling

2139 NW 50TH ST

BELL, FL 32619

(C) 352-225-1618

(F) 386-935-0087

8/30/2017

To: Columbia County Building Department

Description of well to be installed for Customer: Borehole

Located at Address: 1134 SW Rum Island Road

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.



Sincerely

Randy Smith

Permit Application Number L7-0576Permit Application Number LI-VS-76

PART II - SITEPLAN

Notes:

NO PERTINENT IMPROVEMENTS WITHIN 75' OF 1 ACRE

Site Plan submitted by:

Plan Approved

Not Approved

By _____

MASTER CONTRACTOR

Date _____

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. 17-0596
DATE PAID: 8/30/17
FEE PAID: 310.00
RECEIPT #: 1305974

APPLICATION FOR:

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

APPLICANT: Kenneth Barton

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, 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: 4 BLOCK: na SUB: Rum Island Ranches Unrec Sec 2 PLATTED: _____

PROPERTY ID #: 35-7S-16-04346-018 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 9.88 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: 1134 Rum Island Terr, FT White, FL, 32038

DIRECTIONS TO PROPERTY: 47 South, TL US 27, TR CR 138, TL Rum Island Road, After
90 degree right, 1st drive on right

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	SF Residential	3	1280	
---	----------------	---	------	--

2				
---	--	--	--	--

3				
---	--	--	--	--

☒ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Rocky D DATE: 8/25/2017