

DATE 06/12/2013

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000031130

APPLICANT WENDY GRENNELL PHONE 288-2428  
ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038  
OWNER POND VIEW, LLC. PHONE 386-961-0017  
ADDRESS 1586 SE COUNTRY CLUB RD, LOT 28 LAKE CITY FL 32025  
CONTRACTOR RONNIE NORRIS PHONE 623-7716  
LOCATION OF PROPERTY EAST BAYA AVE, R COUNTRY CLUB RD, GO TO 2ND ENTRANCE ON R,  
4TH LOT ON LEFT  
TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00  
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES  
FOUNDATION WALLS ROOF PITCH FLOOR  
LAND USE & ZONING RSF/MH-2 MAX. HEIGHT 35  
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00  
NO. EX.D.U. 56 FLOOD ZONE AH DEVELOPMENT PERMIT NO. 13-004

PARCEL ID 04-4S-17-07598-001 SUBDIVISION POND VIEW MH PARK  
LOT 28 BLOCK PHASE UNIT TOTAL ACRES 16.66

IH1025145  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING X13-44 BK TM N  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: SECTION 2.3.8 MH PARK, MINIMUM FLOOR ELEVATION SET @ 104.5' FOR FLOOR  
AND AC EQUIPMENT, 1 FT RISE LETTER ON FILE, AFFIDAVIT ON FILE, EXISTING

MH PARK-REPLACING MH IN PARK 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 \$ 0.00  
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$  
FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 375.00  
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 3 June 2013 Building Official TM 5/20/13

AP# 1305-44 Date Received 5/17/13 By CH Permit # 31130

Flood Zone AH Development Permit YES Zoning RSP/MH-2 Land Use Plan Map Category RES. Low Den.

Comments Section 2.3.8 MH Park, Bottom of Finished Floor + Equipment to be 104.5'

☒ 1 foot rise letter DP#: 13-004 88 N/A

FEMA Map# 0311C Elevation 103.5 Finished Floor 104.5 River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # X13-44 ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Private System ☐ Installer Authorization ☒ State Road Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☒ W Comp. letter ☒ VF Form

IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ ☒ Out County ☒ In County

Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL \_\_\_\_\_ Impact Fees Suspended March 2009 ☒ App Fee Paid

Property ID # 64-45-17-67598-001 MHP Subdivision Pondview MHP Lot 28

▪ New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 16x56 <sup>Bx</sup> Year 2013

▪ Applicant Wendy Grennell Phone # 386-288-2428

▪ Address 3104 SW Old Wire Rd. Fort White FL 32038

▪ Name of Property Owner Pond View LLC Phone# 386-961-0017

▪ 911 Address 1586 SE Country Club Rd Lake City Lot 28

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

▪ Name of Owner of Mobile Home Sandy Johns Phone # 386-365-8151

Address 1586 SE Country Club Rd Lot 21

▪ Relationship to Property Owner renter

▪ Current Number of Dwellings on Property 56

▪ Lot Size 70x100 Total Acreage 16.66

▪ 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 Yes

▪ Driving Directions to the Property 90E to SE Country Club Rd take right, Pond View LLC is on right (MHP) Lot 28  
2nd entrance 445 on left

▪ Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716

▪ Installers Address 1004 SW Charles Ter Lake City 32024

▪ License Number IH 1025145 Installation Decal # 15657

I w left uss for Wendy G. 3.13

## COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

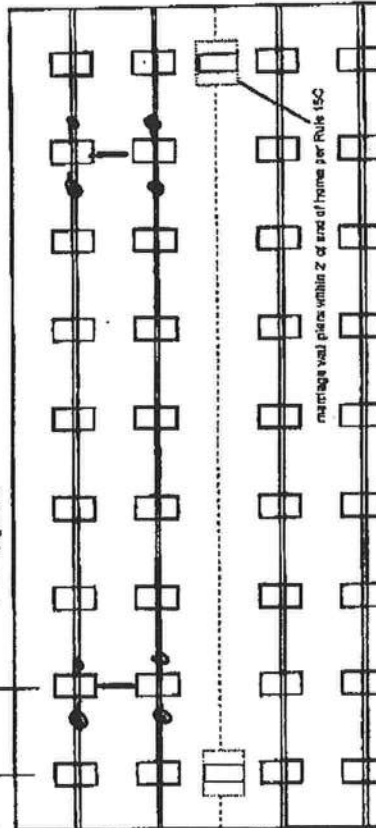
Installer RONNIE D. NORRIS License # TH/1025145  
 911 Address where home is being installed. 1586 Country Club #28  
Lake City, FL  
 Manufacturer LIVE OAK Length x width 50x16

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 lies exceed 5 ft 4 in. R

Installer's initials

Typical pier spacing  
 2' 6  
 Show locations of Longitudinal and Lateral Systems  
 (use dark lines to show these locations)



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

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 # 15657  
 Triple/Quad ☐ Serial # \_\_\_\_\_

## PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity | Footer size (sq in) | 15' x 15' (255) | 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'                  | 3'              | 4'                      | 5'              | 6'              | 7'              | 8'              |
| 1500 Dsf              | 4' 6"               | 4' 6"           | 6'                      | 7'              | 8'              | 9'              | 10'             |
| 2000 Dsf              | 6'                  | 6'              | 8'                      | 9'              | 10'             | 11'             | 12'             |
| 2500 Dsf              | 7' 6"               | 7' 6"           | 9'                      | 10'             | 11'             | 12'             | 13'             |
| 3000 Dsf              | 8'                  | 8'              | 10'                     | 11'             | 12'             | 13'             | 14'             |
| 3500 Dsf              | 8'                  | 8'              | 10'                     | 11'             | 12'             | 13'             | 14'             |

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

## PIER PAD SIZES

I-beam pier pad size 17x25  
 Perimeter pier pad size N/A  
 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

SW SW SW  
SW SW SW  
SW SW SW

## TIEDOWN COMPONENTS

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

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Number

Sidewall 22  
 Longitudinal 2  
 Marriage wall 2  
 Shearwall 2

## COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

## 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

## 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

## TORQUE PROBE TEST

The results of the torque probe test is 215 inch pounds or check here if you are declaring 5' anchors without testing (4). 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. 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 RS

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name True north

Date Tested 5-1-013

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: SW Length:          Spacing: SW  
Walls: Type Fastener: SW Length:          Spacing: SW  
Roof: Type Fastener: SW Length:          Spacing: SW  
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 requirements

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 SW

Type gasket         

Installed:         

Between Floors Yes         

Between Walls Yes         

Bottom of ridgebeam Yes SW

## 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         

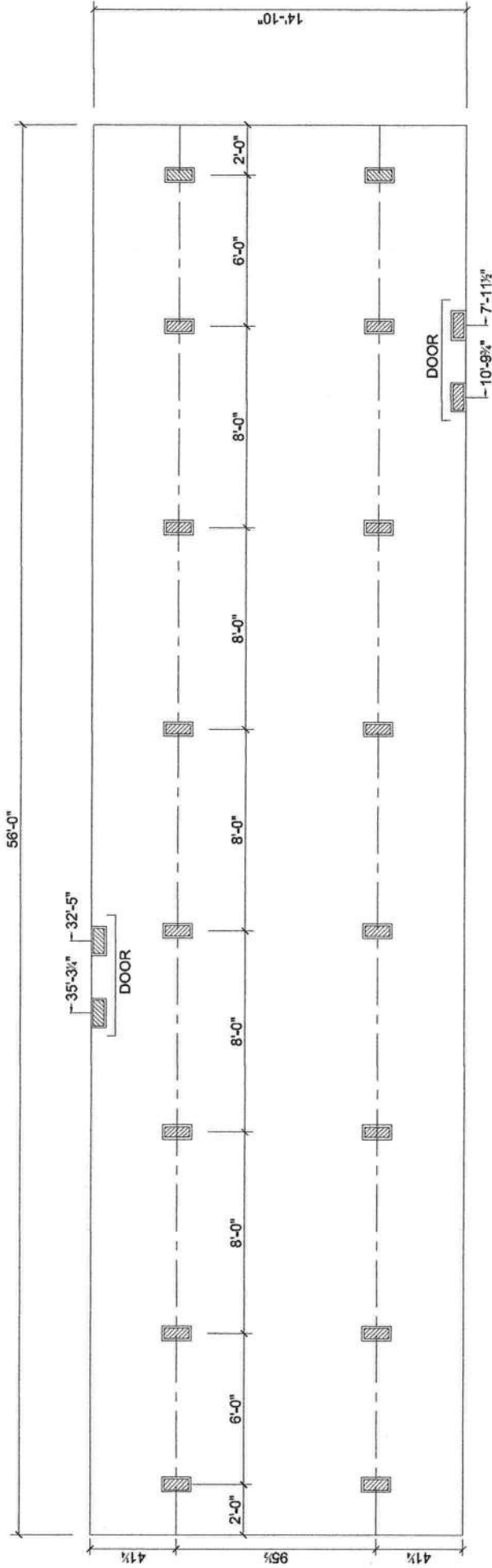
## Miscellaneous

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 True north

Date 5-1-013



MARRIAGE LINE OPENING SUPPORT PIER/TYP.  
 SUPPORT PIER/TYP

FOUNDATION NOTES:

- 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.

11/29/07

**Live Oak Homes**  
**MODEL: S-5562A - 16 X 60**  
**2-BEDROOM / 2-BATH**

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

**S-5562A**

**MOBILE HOME INSTALLER AFFIDAVIT**

As per Florida Statutes Section 320.8249 Mobile Home-Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

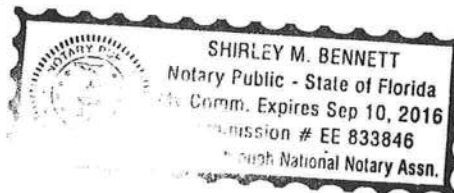
I, RONNIE D. NORRIS, license number IH/1025145  
Please Print  
do hereby state that the installation of the manufactured home for Pondview  
LLC / Sandy Johns at 1586 SE Country Club Rd Lot 28  
Applicant  
911 Address  
will be done under my supervision.

  
Signature

Sworn to and subscribed before me this 1 day of May,  
20 13.

Notary Public:   
Signature

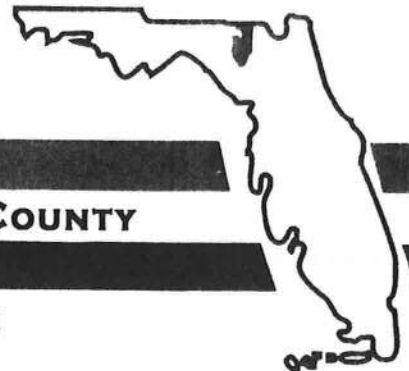
My Commission Expires: 9-10-14  
Date



District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Stephen E. Bailey  
District No. 5 - Scarlet P. Frisina



31130



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- ☒ The attached elevation certificate is complete and correct.
- \_\_\_\_\_ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

|  |       |  |
|--|-------|--|
| A1. Building Owner's Name  |       | For Insurance Company Use:   |
|  |       | Policy Number  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.                                |       | Company NAIC Number  |
| City   | State | ZIP Code   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)   |       |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____   |       |  |
| A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 |       |  |
| A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.                        |       |  |
| A7. Building Diagram Number _____  |       |  |
| A8. For a building with a crawl space or enclosure(s), provide:  |       | A9. For a building with an attached garage, provide:   |
| a) Square footage of crawl space or enclosure(s) _____ sq ft   |       | a) Square footage of attached garage _____ sq ft   |
| b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____               |       | b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____ |
| c) Total net area of flood openings in A8.b _____ sq in  |       | c) Total net area of flood openings in A9.b _____ sq in  |

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|   |            |                     |                                       |                   |   |
|---|------------|---------------------|---------------------------------------|-------------------|---|
| B1. NFIP Community Name & Community Number  |            | B2. County Name     |                                       | B3. State         |   |
| B4. Map/Panel Number  | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.<br><input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____ |            |                     |                                       |                   |   |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____  |            |                     |                                       |                   |   |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA             |            |                     |                                       |                   |   |

Comments: \_\_\_\_\_

Date of Review: 26 JUNE 2013

Community Official: *Bruce L. [Signature]*

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.  
AND THIRD THURSDAY AT 7:00 P.M.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

## FOR INSURANCE COMPANY USE

A1. Building Owner's Name Sandra Johns

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1586 SE Country Club Road #28

Company NAIC Number:

City Lake City

State FL

ZIP Code 32025

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
04-4S-17-07598-001

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 30°09.869' Long. 82°36.666' Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 5

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A8.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Columbia 120070

B2. County Name  
Columbia

B3. State  
FL

B4. Map/Panel Number  
12023C0311C

B5. Suffix  
C

B6. FIRM Index Date  
4 Feb 2009

B7. FIRM Panel  
Effective/Revised Date  
4 Feb 2009

B8. Flood  
Zone(s)  
AH

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
103.50

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source: \_\_\_\_\_

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No  
Designation Date: \_\_\_\_\_ ☐ CBRS ☐ OPA

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: spike in 10" dogwood

Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 107.44 ☒ feet ☐ meters  
b) Top of the next higher floor N/A ☐ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 107.0 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 102.1 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 102.3 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A ☐ feet ☐ meters

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☒ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name L. Scott Britt

License Number LS 5757

Title Chief Surveyor

Company Name Britt Surveying and Mapping, LLC

Address 2086 SW Main Blvd. #112

City Lake City

State FL ZIP Code 32025

Signature 

Date 06/26/13

Telephone 386-752-7163

PLACE  
SEAL  
HERE

|  |                         |                                  |
|--|-------------------------|----------------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>  |                         | <b>FOR INSURANCE COMPANY USE</b> |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>1586 SE Country Club Road #28 |                         | Policy Number:                   |
| City Lake City   | State FL ZIP Code 32025 | Company NAIC Number:             |

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments L-22703  
See Attachment


Signature

Date 06/26/13

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

**SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

|                   |                        |   |
|-------------------|------------------------|---|
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certificate Of Compliance/Occupancy Issued |
|-------------------|------------------------|---|

- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1586 SE Country Club Road #28

City Lake City

State FL

ZIP Code 32025

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Front View



**Building Photographs**

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1586 SE Country Club Road #28

City Lake City

State FL

ZIP Code 32025

FOR INSURANCE COMPANY USE

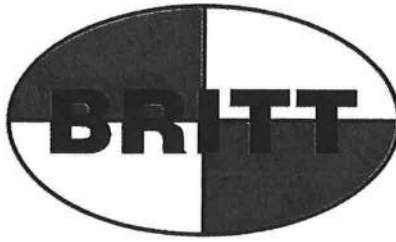
Policy Number:

Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Rear View





## **BRITT SURVEYING**

***Land Surveyors and Mappers***

**LAKE CITY • VENICE • SARASOTA**

### Section A

- A1 No additional comment
- A2 The address is taken from the public records
- A3 – A4 No additional comment
- A5 Hand Held GPS coordinate at the center of building along the front wall
- A6 No photographs at this time
- A7 – A9 No additional comment

### Section B

- B1 – B7 No additional comment
- B8 This building appears to be in Zone AH.
- B9 – B10 The BFE as shown hereon is based on the FIRM.
- B11 – B12 No additional comment

### Section C

- C1 No additional comment
- C2 There is a benchmark in a 10" dogwood, whose elevation is determined to be 104.71 feet NAVD 88 datum.
- C2 a Premanufactured home
- C2 b-d No additional comment
- C2 e Air conditioning unit
- C2 f - h No additional comment

### Section D

No additional comment

### Section E

No additional comment

### Section F

No additional comment

### Section G

No additional comment

### Photographs

No photographs at this time

# Britt Sirveying and Mapping, LLC

L- 22703

26 June 2013

## INPUT

Geographic, NAD83  
Vertical - NGVD29 (Vertcon94), U.S. Feet

## OUTPUT

Geographic, NAD83  
Vertical - NAVD88, U.S. Feet

---

### spike in 10" dogwood

1/1

Latitude: 30 09.869  
Longitude: 82 43.666  
Elevation/Z: 105.5

Latitude: 30 09.8690000  
Longitude: 82 43.6660000  
Elevation/Z: 104.706

---

Remark:

1305-44

**ONE FOOT RISE ANALYSIS AND CERTIFICATION  
100 YEAR BASE FLOOD**

**PROJECT DATA**

**PARCEL ID:** 04-4S-17-070598-001

**PROPERTY DESCRIPTION:** Lot 28 of Pond View Mobile Home Subdivision

**OWNER:** Pond View, LLC

**PROJECT DESCRIPTION:** 896 SF Residential Dwelling (16'x26' Mobile Home) located +/-40' from private driveway. Subdivision is located off of SE Country Club Rd.

**FLOOD ZONE:** AE

**BASE FLOOD ELEVATION:** Unknown Based on SRWMD Effective Flood Report (attached)

**EXISTING GRADE ELEVATION (AT BUILDING LOCATION):** +/-100.0, Based on USGS Quad Map

**CONCLUSION**

To demonstrate the proposed construction will not cause more than a 1 foot rise in the flood elevation, the following calculation was performed:

Area of Flood Zone = Undetermined, Associated with Alligator Lake  
Depth of Lot below Flood Elevation = 3 ft (Assumed based on flood report and USGS Quad Map)  
Storage Volume Removed due to development =  $3\text{ft} \times 2 \times 896\text{ sf} = 5,376\text{ cf} = 0.12\text{ acre-ft}$   
Flood Level Increase (if flood zone area = lot size = 16.66 acres) =  $0.12\text{ acre-ft} / 16.66\text{ acres} = 0.006\text{ ft}$

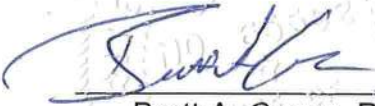
This is a very conservative calculation for the following reason:  
Flood Zone Area is much larger than 40 acres and associated with the Alligator Lake.

**CERTIFICATION**

I hereby certify that, to the best of my knowledge, construction of the project as described above will increase the flood elevations less than one foot at the project location.

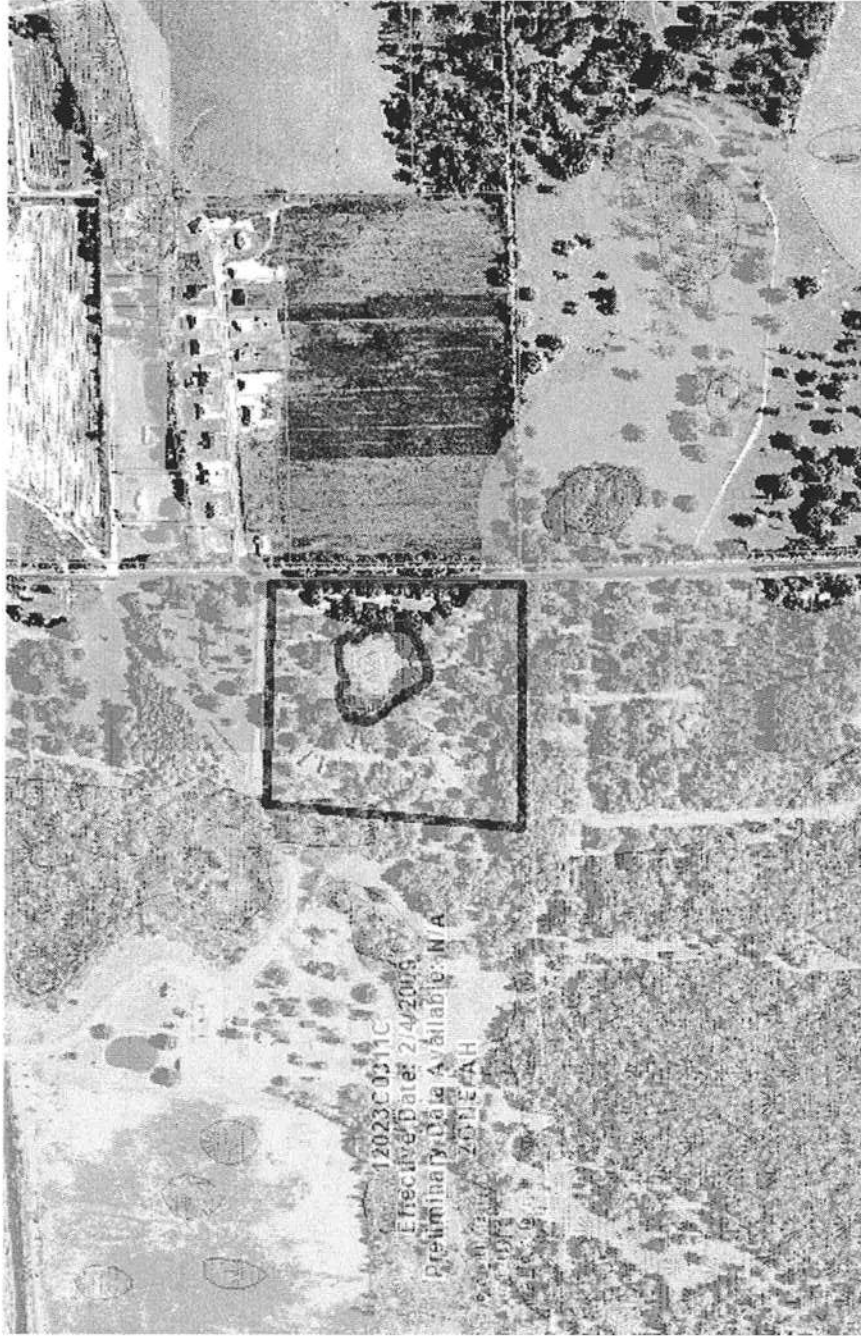
**ATTACHEMENTS**

SRWMD Effective Flood Report, Ownership Information (Columbia County Property Appraiser)

  
Brett A. Crews, PE No. 65592



# Suwannee River Water Management District Effective Flood Information Report



## LOCATION

Date: 05-22-2013  
Parcel: 04-4S-17-07598-001  
County: Columbia  
STR: S004 T04 R17  
Columbia Flood Hazard Areas Status: Effective:  
02/04/2009

## FLOOD INFORMATION

FIRM Panel(s): 12023C0311C

Parcel In Special Flood  
Hazard Area? (SFHA): Yes  
Flood Zone(s): AH  
1% Annual Chance  
Flood Elev (BFE): Not Available  
Floodway: No  
10% Annual  
Chance Flood Elev: Not Available  
50% Annual  
Chance Flood Elev: Not Available  
Note: Elevations are based on NAVD88

| Effective Flood Zones described on<br>Page 2 |                  |             | Depressions |     |                |
|--|------------------|-------------|-------------|-----|----------------|
| SFHA - AE w/Floodway                         | SFHA - Zone VE   | Wetlands    | Counties    | BFE | Cross Sections |
| SFHA - Zones AE, AH, AO                      | SFHA - Zone A    | FIRM Panel  | SRWMD       |     |                |
|  | 0.2 % (shaded X) | State Lands | Parcels     |     |                |

The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available online (<http://www.srwmdfloodreport.com>). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (<http://www.msc.fema.gov>) for information on available products associated with this FIRM panel. Available products from the Map Service Center may include previously issued Letters of Map Change. Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps.



### Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

**PARCEL: 04-4S-17-07598-001 - MH PARK (002802)**

COMM SE COR, RUN W 36.95 FT TO W R/W CR-133 FOR POB, CONT W 845.82 FT, N 901.80 FT, E 774.4 FT TO RD, S ALONG R/W 893.60 FT TO POB, EX 0.04 AC DESC OR

NOTES:

|       |                            |                              |                                    |
|-------|----------------------------|------------------------------|------------------------------------|
| Name: | POND VIEW LLC              | <b>2012 Certified Values</b> |                                    |
| Site: | 1586 SE COUNTRY CLUB RD    | Land                         | \$46,308.00                        |
|       | C/O CHARLES BANKS JR       | Bldg                         | \$125,118.00                       |
| Mail: | P O BOX 1336               | Assd                         | \$256,617.00                       |
|       | TAMPA, FL 33601-1336       | Exmpt                        | \$0.00                             |
| Sales | 8/30/2001 \$400,000.00 I/Q | Taxbl                        | Cnty: \$256,617                    |
| Info  | 8/30/2001 \$100.00 I/U     |                              | Other: \$256,617   Schl: \$256,617 |



## Brian Kepner

---

**From:** Brian Kepner  
**Sent:** Tuesday, May 21, 2013 12:22 PM  
**To:** 'wendyg226@bellsouth.net'  
**Subject:** MH Applications

Wendy,

Hope you are doing well today.

MH App. 1305-44 (Pondview, LLC) – property is located within a AH flood zone requiring a 1 foot rise letter from and engineer, Bottom of finished floor and equipment at 104.5 (88NAVD) and an elevation certificate.

MH App. 1305-45 (Jones) – Need to show on site plan the distance the driveway is from the north property line. County requirements are a minimum of 5 feet.

Brian Kepner  
Columbia County  
Land Development  
Regulation Administrator  
386.754.7119  
386.758.2160 FAX



**CONFIDENTIALITY NOTICE:** This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential, proprietary, and/or privileged information protected by law. If you are not the intended recipient, you may not use, copy, distribute this e-mail message or its attachments. If you believe you have received this e-mail message in error, please contact the sender by e-mail and telephone immediately and destroy all copies of the original message. **E-Mail Warning:** Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.



1305-44

# Columbia County Property Appraiser

CAMA updated: 3/15/2013

**2012 Tax Year**

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Parcel: 04-4S-17-07598-001

&lt;&lt; Next Lower Parcel

Next Higher Parcel &gt;&gt;

Interactive GIS Map

Print

**Owner & Property Info**

Search Result: 1 of 3

Next &gt;&gt;

**Owner's Name** POND VIEW LLC

**Mailing Address** C/O CHARLES BANKS JR  
P O BOX 1336  
TAMPA, FL 33601-1336

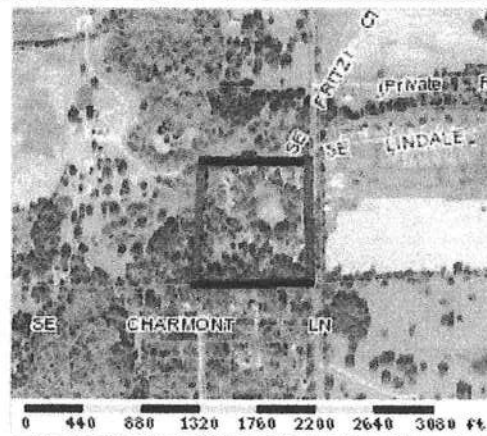
**Site Address** 1586 SE COUNTRY CLUB RD

**Use Desc. (code)** MH PARK (002802)

**Tax District** 2 (County) **Neighborhood** 4417

**Land Area** 16.660 ACRES **Market Area** 06

**Description** NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.



COMM SE COR, RUN W 36.95 FT TO W R/W CR-133 FOR POB, CONT W 845.82 FT, N 901.80 FT, E 774.4 FT TO RD, S ALONG R/W 893.60 FT TO POB, EX 0.04 AC DESC ORB 882-966. ORB 505-326, 681-800, 934-424, 934-427, (PONDVIEW MH PARK)

**Property & Assessment Values**

| 2012 Certified Values |           |                             |
|-----------------------|-----------|-----------------------------|
| Mkt Land Value        | cnt: (0)  | \$46,308.00                 |
| Ag Land Value         | cnt: (2)  | \$0.00                      |
| Building Value        | cnt: (46) | \$125,118.00                |
| XFOB Value            | cnt: (8)  | \$85,191.00                 |
| Total Appraised Value |           | \$256,617.00                |
| Just Value            |           | \$256,617.00                |
| Class Value           |           | \$0.00                      |
| Assessed Value        |           | \$256,617.00                |
| Exempt Value          |           | \$0.00                      |
|                       | Cnty:     | \$256,617                   |
| Total Taxable Value   | Other:    | \$256,617   Schl: \$256,617 |

**2013 Working Values****NOTE:**

2013 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   |
|-----------|--------------|---------|-------------------|----------------|------------|--------------|
| 8/30/2001 | 934/424      | WD      | I                 | Q              | 99         | \$400,000.00 |
| 8/30/2001 | 934/427      | WD      | I                 | U              | 01         | \$100.00     |

**Building Characteristics**

| Bldg Item | Bldg Desc           | Year Blt | Ext. Walls      | Heated S.F. | Actual S.F. | Bldg Value |
|-----------|---------------------|----------|-----------------|-------------|-------------|------------|
| 1         | MOBILE HME (000800) | 1980     | BELOW AVG. (03) | 1104        | 1104        | \$3,599.00 |
| 2         | MOBILE HME (000800) | 1980     | BELOW AVG. (03) | 952         | 952         | \$2,716.00 |
| 3         | MOBILE HME (000800) | 1978     | BELOW AVG. (03) | 924         | 924         | \$2,636.00 |
| 4         | MOBILE HME (000800) | 1980     | BELOW AVG. (03) | 920         | 920         | \$2,625.00 |
| 5         | MOBILE HME (000800) | 1978     | BELOW AVG. (03) | 672         | 672         | \$1,729.00 |
| 6         | MOBILE HME (000800) | 1975     | BELOW AVG. (03) | 924         | 924         | \$2,579.00 |
| 7         | MOBILE HME (000800) | 1990     | BELOW AVG. (03) | 966         | 966         | \$3,745.00 |
| 8         | MOBILE HME (000800) | 1980     | BELOW AVG. (03) | 784         | 784         | \$2,237.00 |
| 9         | MOBILE HME (000800) | 1970     | BELOW AVG. (03) | 720         | 720         | \$1,763.00 |

STATE OF FLORIDA  
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Pond View, LLC,

as the owner of the below described property:

Property tax Parcel ID number R07598-001, 8427.0000

Subdivision (Name, lot, Block, Phase) \_\_\_\_\_

Give my permission for Sandy Johns to place a

Circle one - Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home.

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Charles M. Smith  
Owner Signature

5/9/13  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

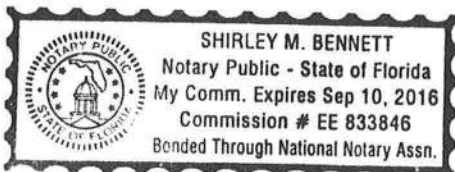
Sworn to and subscribed before me this 8 day of May, 2013. This


(These) person(s) are personally known to me or produced ID FL DL.  
(Type)

Shirley M. Bennett  
Notary Public Signature

Shirley M. Bennett  
Notary Printed Name

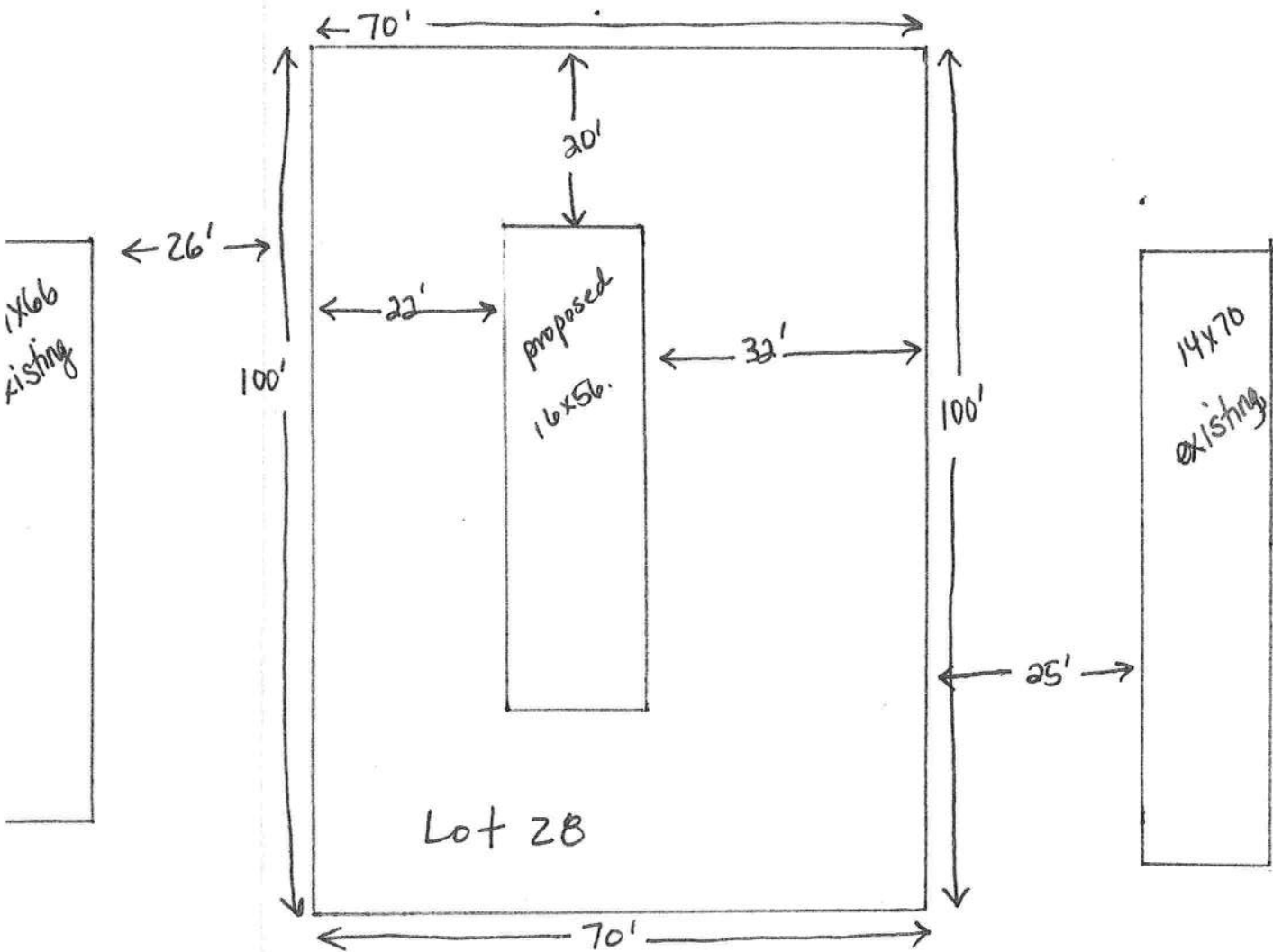
Notary Stamp/



| FLORIDA DEPARTMENT OF STATE<br>DIVISION OF CORPORATIONS          |                            | www.sunbiz.org                        |                                   |  |                      |
|--|----------------------------|---------------------------------------|-----------------------------------|---|----------------------|
| <a href="#">Home</a>   | <a href="#">Contact Us</a> | <a href="#">E-Filing Services</a>     | <a href="#">Document Searches</a> | <a href="#">Forms</a>   | <a href="#">Help</a> |
| <a href="#">Events</a>   | <b>No Name History</b>     | <a href="#">Entity Name Search</a>    |                                   |   |                      |
| <a href="#">Return to Search Results</a>                         |                            | <input type="button" value="Search"/> |                                   |   |                      |
| <b>Detail by Entity Name</b>                                     |                            |                                       |                                   |   |                      |
| <b><u>Florida Limited Liability Company</u></b>                  |                            |                                       |                                   |   |                      |
| <b>POND VIEW, LLC</b>  |                            |                                       |                                   |   |                      |
| <b><u>Filing Information</u></b>                                 |                            |                                       |                                   |   |                      |
| <b>Document Number</b>   | L01000013564               |                                       |                                   |   |                      |
| <b>FEI/EIN Number</b>  | 593739934                  |                                       |                                   |   |                      |
| <b>Date Filed</b>  | 08/13/2001                 |                                       |                                   |   |                      |
| <b>State or Country</b>  | FL                         |                                       |                                   |   |                      |
| <b>Status</b>  | ACTIVE                     |                                       |                                   |   |                      |
| <b>Last Event</b>  | REINSTATEMENT              |                                       |                                   |   |                      |
| <b>Event Date Filed</b>  | 06/26/2003                 |                                       |                                   |   |                      |
| <b>Event Effective Date</b>                                      | NONE                       |                                       |                                   |   |                      |
| <b><u>Principal Address</u></b>                                  |                            |                                       |                                   |   |                      |
| 2811 W. HAWTHORNE ROAD<br>TAMPA, FL 33611                        |                            |                                       |                                   |   |                      |
| Changed: 04/29/2011  |                            |                                       |                                   |   |                      |
| <b><u>Mailing Address</u></b>                                    |                            |                                       |                                   |   |                      |
| P.O. BOX 1336<br>TAMPA, FL 33601 FL                              |                            |                                       |                                   |   |                      |
| Changed: 07/01/2009  |                            |                                       |                                   |   |                      |
| <b><u>Registered Agent Name &amp; Address</u></b>                |                            |                                       |                                   |   |                      |
| <b>BANKS, CHARLES MSR.</b>                                       |                            |                                       |                                   |   |                      |
| 2811 W. HAWTHORNE ROAD<br>TAMPA, FL 33611                        |                            |                                       |                                   |   |                      |
| Name Changed: 04/29/2011   |                            |                                       |                                   |   |                      |
| Address Changed: 04/29/2011                                      |                            |                                       |                                   |   |                      |
| <b><u>Manager/Member Detail</u></b>                              |                            |                                       |                                   |   |                      |
| <b>Name &amp; Address</b>  |                            |                                       |                                   |   |                      |
| Title MGR  |                            |                                       |                                   |   |                      |
| BANKS, CHARLES MSR.<br>2811 W. HAWTHORNE ROAD<br>TAMPA, FL 33611 |                            |                                       |                                   |   |                      |

Parcel # 04-4S-17-07598-001 Lot 28

Pond view MHP / Sandra Johns



# 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: 5/8/2013 DATE ISSUED: 5/13/2013

### ENHANCED 9-1-1 ADDRESS:

1586 SE COUNTRY CLUB RD LOT 28  
LAKE CITY FL 32025

### PROPERTY APPRAISER PARCEL NUMBER:

04-4S-17-07598-001

### Remarks:

ADDRESS FOR NEW STRUCTURE IN POND VIEW MPH.

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.**

May 01 13 12:21p Nor

RECEIVED 01/25/2013  
3867521913

P. 5

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1305-44 CONTRACTOR Ronnie Norris PHONE 623-7716

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<br>1074       | Print Name <u>Glenn Whittington</u><br>License #: <u>EC13002957</u> | Signature: <u>Glenn Whittington</u><br>Phone #: <u>386-972-1700</u> |
| <input checked="" type="checkbox"/> MECHANICAL/<br>A/C & 701 | Print Name <u>Robert Grant</u><br>License #: <u>CAC1814931</u>      | Signature: <u>Robert Grant</u><br>Phone #: <u>1800-859-3708</u>     |
| <input checked="" type="checkbox"/> PLUMBING/<br>GAS         | Print Name <u>RONNIE D. NORRIS</u><br>License #: <u>IH/1026145</u>  | Signature: <u>Ronnie Norris</u><br>Phone #: <u>386-623-7716</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: 1/11

**Columbia County Building Department  
Flood Development Permit**

**Development Permit  
F 023- 13-004**

DATE 06/12/2013 BUILDING PERMIT NUMBER 000031130  
APPLICANT WENDY GRENNELL PHONE 288-2428  
ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038  
OWNER POND VIEW, LLC. PHONE 386-961-0017  
ADDRESS 1586 SE COUNTRY CLUB RD, LOT 28 LAKE CITY FL 32025  
CONTRACTOR RONNIE NORRIS PHONE 623-7716  
ADDRESS 1004 SW CHARLES TERR LAKE CITY FL 32024  
SUBDIVISION POND VIEW MH PARK Lot 28 Block      Unit      Phase       
TYPE OF DEVELOPMENT MH, UTILITY PARCEL ID NO. 04-4S-17-07598-001

FLOOD ZONE AH BY BK      2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0311 - C  
FIRM 100 YEAR ELEVATION 103.5' PLAN INCLUDED YES or NO  
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 104.5' "88 NAUD"  
IN THE REGULATORY FLOODWAY YES or NO RIVER N/A  
SURVEYOR / ENGINEER NAME Brett Crews LICENSE NUMBER 65592

☒ ONE FOOT RISE CERTIFICATION INCLUDED

N/A ZERO RISE CERTIFICATION INCLUDED

N/A SRWMD PERMIT NUMBER       
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED     

INSPECTED DATE      BY     

COMMENTS     

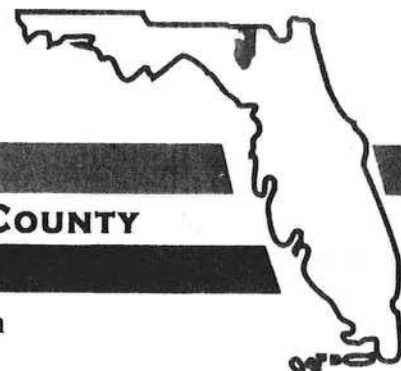
135 NE Hernando Ave., Suite B-21  
Lake City, Florida 32055  
Phone: 386-758-1008  
Fax: 386-758-2160



District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Stephen E. Bailey  
District No. 5 - Scarlet P. Frisina



31130



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- ✓ \_\_\_\_\_ The attached elevation certificate is complete and correct.
- \_\_\_\_\_ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

|  |       |  |
|--|-------|--|
| A1. Building Owner's Name  |       | For Insurance Company Use:   |
|  |       | Policy Number  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.                  |       | Company NAIC Number  |
| City   | State | ZIP Code   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)                           |       |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)                                       |       |  |
| A5. Latitude/Longitude: Lat. _____ Long. _____   |       | Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983                      |
| A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.          |       |  |
| A7. Building Diagram Number _____  |       |  |
| A8. For a building with a crawl space or enclosure(s), provide:  |       | A9. For a building with an attached garage, provide:   |
| a) Square footage of crawl space or enclosure(s) _____ sq ft   |       | a) Square footage of attached garage _____ sq ft   |
| b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ |       | b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____ |
| c) Total net area of flood openings in A8.b _____ sq in  |       | c) Total net area of flood openings in A9.b _____ sq in  |

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|   |            |                     |                                       |                   |   |
|---|------------|---------------------|---------------------------------------|-------------------|---|
| B1. NFIP Community Name & Community Number  |            | B2. County Name     |                                       | B3. State         |   |
| B4. Map/Panel Number  | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.<br><input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____ |            |                     |                                       |                   |   |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____  |            |                     |                                       |                   |   |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA             |            |                     |                                       |                   |   |

Comments: \_\_\_\_\_

Date of Review: 26 JUNE 2013

Community Official: B. L. Legan

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.  
AND THIRD THURSDAY AT 7:00 P.M.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

|   |  |  |
|---|--|--|
| A1. Building Owner's Name Sandra Johns  |  | FOR INSURANCE COMPANY USE  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>1586 SE Country Club Road #28                                  |  | Policy Number:   |
| City Lake City State FL ZIP Code 32025  |  | Company NAIC Number:   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br>04-4S-17-07598-001  |  |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>   |  |  |
| A5. Latitude/Longitude: Lat. <u>30°09.869'</u> Long. <u>82°36.666'</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 |  |  |
| A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.   |  |  |
| A7. Building Diagram Number <u>5</u>  |  |  |
| A8. For a building with a crawlspace or enclosure(s):   |  | A9. For a building with an attached garage:  |
| a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft  |  | a) Square footage of attached garage <u>N/A</u> sq ft  |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>   |  | b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u> |
| c) Total net area of flood openings in A8.b <u>N/A</u> sq in  |  | c) Total net area of flood openings in A9.b <u>N/A</u> sq in   |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  | d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No                       |

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|   |                 |                                   |   |                         |   |
|---|-----------------|-----------------------------------|---|-------------------------|---|
| B1. NFIP Community Name & Community Number<br>Columbia 120070   |                 | B2. County Name<br>Columbia       |   | B3. State<br>FL         |   |
| B4. Map/Panel Number<br>12023C0311C   | B5. Suffix<br>C | B6. FIRM Index Date<br>4 Feb 2009 | B7. FIRM Panel Effective/Revised Date<br>4 Feb 2009 | B8. Flood Zone(s)<br>AH | B9. Base Flood Elevation(s) (Zone AO, use base flood depth)<br>103.50 |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.<br><input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____ |                 |                                   |   |                         |   |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____  |                 |                                   |   |                         |   |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA         |                 |                                   |   |                         |   |

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: spike in 10" dogwood Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

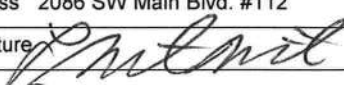
|   |               |  |                                 |
|---|---------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | <u>107.44</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>N/A</u>    | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | <u>N/A</u>    | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | <u>N/A</u>    | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>107.0</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>102.1</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>102.3</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>N/A</u>    | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments.

|   |   |
|---|---|
| Certifier's Name L. Scott Britt   | License Number LS 5757                        |
| Title Chief Surveyor  | Company Name Britt Surveying and Mapping, LLC |
| Address 2086 SW Main Blvd. #112   | City Lake City State FL ZIP Code 32025        |
| Signature  | Date 06/26/13 Telephone 386-752-7163          |

PLACE  
SEAL  
HERE

**ELEVATION CERTIFICATE, page 2**

|  |                         |                                  |
|--|-------------------------|----------------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>  |                         | <b>FOR INSURANCE COMPANY USE</b> |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>1586 SE Country Club Road #28 |                         | Policy Number:                   |
| City Lake City   | State FL ZIP Code 32025 | Company NAIC Number:             |

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments L-22703  
See Attachment  
Signature

Date 06/26/13

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

**SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**SECTION G – COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

|                   |                        |   |
|-------------------|------------------------|---|
| G4. Permit Number | G5. Date Permit Issued | G6. Date Certificate Of Compliance/Occupancy Issued |
|-------------------|------------------------|---|

- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1586 SE Country Club Road #28

City Lake City

State FL

ZIP Code 32025

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Front View



**Building Photographs**

Continuation Page

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1586 SE Country Club Road #28

City Lake City

State FL

ZIP Code 32025

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Rear View





## **BRITT SURVEYING**

***Land Surveyors and Mappers***

**LAKE CITY • VENICE • SARASOTA**

### Section A

- A1 No additional comment
- A2 The address is taken from the public records
- A3 – A4 No additional comment
- A5 Hand Held GPS coordinate at the center of building along the front wall
- A6 No photographs at this time
- A7 – A9 No additional comment

### Section B

- B1 – B7 No additional comment
- B8 This building appears to be in Zone AH.
- B9 – B10 The BFE as shown hereon is based on the FIRM.
- B11 – B12 No additional comment

### Section C

- C1 No additional comment
- C2 There is a benchmark in a 10" dogwood, whose elevation is determined to be 104.71 feet NAVD 88 datum.
- C2 a Premanufactured home
- C2 b-d No additional comment
- C2 e Air conditioning unit
- C2 f - h No additional comment

### Section D

No additional comment

### Section E

No additional comment

### Section F

No additional comment

### Section G

No additional comment

### Photographs

No photographs at this time

# **Britt Sirveying and Mapping, LLC**

**L- 22703**

26 June 2013

## **INPUT**

Geographic, NAD83  
Vertical - NGVD29 (Vertcon94), U.S. Feet

## **OUTPUT**

Geographic, NAD83  
Vertical - NAVD88, U.S. Feet

---

### **spike in 10" dogwood**

1/1

**Latitude:** 30 09.869  
**Longitude:** 82 43.666  
**Elevation/Z:** 105.5

**Latitude:** 30 09.8690000  
**Longitude:** 82 43.6660000  
**Elevation/Z:** 104.706

---

Remark:

**GREENBRIAR CORP. OF FLORIDA**

**M/H O C C U P A N C Y**

**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 04-4S-17-07598-001

Building permit No. 000031130

Permit Holder RONNIE NORRIS

Owner of Building POND VIEW, LLC.

Location: 1586 SE COUNTRY CLUB RD, LOT 28, LAKE CITY, FL 32025

Date: 06/26/2013

Building Inspector

**POST IN A CONSPICUOUS PLACE**  
*(Business Places Only)*

