PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	For Office Use Only (Revised 1-11) Zoning Officia BLK 23 April 2013 Building Official Tn 4/20/13
	AP# 1304-40 Date Received 4-15-13 By CH Permit # \$ 1007
	Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3 Comments Section 2.3.8 Mobile Home Parks Replicing existing MH
F	Side Plan with Setbacks Shown DEH# 13-0737- EH Release Well letter Existing well Recorded Deed or Affidavit from land owner Winstaller Authorization Watate Rd Access 2911 Sheet
6	Recorded Deed or Affidavit from land owner Planstaller Authorization Hattate Rd Access 1944 Short
V	Parent Parcel # STUP-MH FW Comp. letter App Fee Pd VF Form Thom
IIV	PACT FEES: EMS Fire Corr WOut County On Countypd Mose
	pad/CodeSchool= TOTAL_Suspended March 2009_ MEllisville Water Sys
Dr	operty ID# 34 45 17 08980 -000 Subdivision 67 402
1 1	
H	New Mobile Home Used Mobile Home MH Size 14x (6 Year 1991
10	Applicant David Morrell Phone # 365.7690  Address 212 Su Cottage Glen Lake City. F/ 32024
te	Address 212 Su Cottage Glen Lake City . F/ 32024
=	Name of Property Owner Olisa Properties, LLC Phone# 365 7690
ш	911 Address 402 SE Doe Glen Like City F1 37025
u	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progress Energy
a	Name of Owner of Mobile Home Olisa Properties LLC Phone # 365-7690
	Address 212 SW Cottage Glas Lake City, F1 32024
	Relationship to Property Owner Manager
=	Current Number of Dwellings on Property 9
EI .	Lot Size Total Acreage 19.50
26	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home
THE STATE OF	Driving Directions to the Property 41 South go Too yeards Dest 1336
	(Hopeful Church Road) turn Lett on Doe Glen. 4th mH on
	Right
100	Name of Licensed Dealer/Installer Robert Step-4 Phone # 623 - 2203
8	Installers Address 6355-5E Cty RJ 245 Luke Ct, Fl 32025
	License Number IH 1025384 Installation Decal # 29766
	Called David 4-15-13 to Advise what was needed.  Rail Blocking Diagram 4-18-13  Ble Sport W Love 4. 24.13
	Rad Blocking Diegram 4-18-13 Be Sport W DIVE 4. 24.13

## COLUMBIA COUNTY PERMIT WORKSHEET

26" x 26' POPULAR PAD SIZES (929)44 within 2' of end of home spaced at 5' 4" oc FRAME TIES OTHER TIES ANCHORS 7 3/16 x 25 3/16 7 1/2 × 25 1/2 24 × 24 5 ft GAFLL 75A 11748 W 内 24" X 24" (929) 185 × 185 Longitudinal Marriage wall Shearwall 17 × 22 13 1/4 × 26 20 × 20 16 x 18 16 x 16 Wind Zone III 29766 PIER SPACING TABLE FOR USED HOMES 22" x 22" (484)\* 4 # Home installed to the Manufacturer's Installation Manual Draw the approximate locations of marriage Longitudinal Stabilizing Device w/ Lateral Arms List all marriage wall openings greater than 4 foot and their pier pad sizes below. 20" × 20" wall openings 4 foot or greater. Use this symbol to show the piers. (400) Home is installed in accordance with Rule 15-C ā āσ 7 Installation Decal # 17×25 7 X 25 17×23 
 2500 bsf
 7' 6"
 8'

 3000 bsf
 8'
 8'

 3500 bsf
 8'
 8'

 interpolated from Rule 15C-1 pier spacing table.
 Pier pad size Longitudinal Stabilizing Device (LSD) Wind Zone II TIEDOWN COMPONENTS 18 1/2" x 18 Used Home 1/2" (342) Manufacturer D [] ver | 101U Serial # PIER PAD SIZES 16" x 16" Perimeter pier pad size (256)Other pier pad sizes (required by the mfg.) I-beam pier pad size Z (sq in) Footer Opening size Manufacturer Double wide Triple/Quad Single wide New Home 1000 psf 1500 psf 2000 psf capacity bearing Load 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 TH1025-386 14×66 I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 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 These worksheets must be completed and signed by the installer. Submit the originals with the packet. Installer's initials Length x width License # SEDA Shey pord longitudinal Fleetwood lateral Saz obert 911 Address where home is being installed Typical pier spacing Manufacturer NOTE: Installer

page 2 of 2

Site Preparation

#### Cultures בקקומה reading is 275 or less and where the mobile home manufacturer may anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test 00// X inch pounds or check x 1700 1500 pst A test A state approved lateral arm system is being used and 4 ft. POCKET PENETROMETER TESTING METHOD Installer's initials Test the perimeter of the home at 6 locations. Using 500 lb. increments, take the lowest reading and round down to that increment. without testing. Take the reading at the depth of the footer. showing 275 inch pounds or less will require 5 foot anchors POCKET PENETROMETER TEST requires anchors with 4000 lb holding capacity TORQUE PROBE TEST The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil \_\_\_\_\_\_ without The results of the torque probe test is 670 here if you are declaring 5' anchors without testing 00// X 290 x 1700 0011 x x /700 2 Note:

# ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Staller Mail

Date Tested

Robert Shappy

Yes

Miscellaneous

Range downflow vent installed outside of skirting.

Drain lines supported at 4 foot intervals. Electrical crossovers protected. Yes

Other

Dryer vent installed outside of skirting. Yes

Skirting to be installed. Yes

Yes

## Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 28

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

4-16-13

Date

Installer Signature

Installer verifies all information given with this permit worksheet

is accurate and true based on the

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.  $\mathbb{Z}_{2}$ 

Type gasket Installed: Pg. Between Floors Yes
---

#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1304-	40	CONTRACTOR _	Robert	Sheppard	PHONE \$23 - 220	3
		-					

#### 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 <u>REQUIRED</u> 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.

ok	ELECTRICAL 535	Print Name THOMAS S. Thomas Signature S. Steven Thomas License #: EC 0001/2/ Phone #: 386-752-5125
ak	MECHANICAL/ A/C A 327	Print Name Heart Moseley Signature Heart Moneley License #: Bf 00303/6 Phone #: 386-752-2304
4	PLUMBING/ GAS	Print NameSpread(Sheaf SignaturePhone #:

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 Forms: Subcontractor form: 1/12.

#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1304-40	CONTRACTOR _	Robert Shappard	PHONE	
			//		

#### THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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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	Print Name	Signature
	License #:	Phone #:
MECHANICAL/	Print Name	Signature
A/C	License #:	Phone #:
PLUMBING/	Print Name Robert Sheppard	Signature Lobel Shepper
GAS	License #: # 1025386	Phone #: 386-623-2203

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 Forms: Subcontractor form: 1/11



#### 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:

4/9/2013

DATE ISSUED:

4/10/2013

**ENHANCED 9-1-1 ADDRESS:** 

402

SE DOE

GLN

LAKE CITY

FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

34-4S-17-08980-000

#### Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR REPLACEMENT STRUCTURE ON PARCEL (MHP)

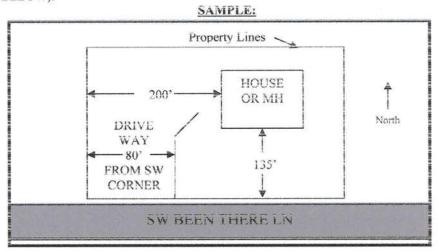
Address Issued By: SIGNED: / RONAL N. CROFT

Columbia County 9-1-1 Addressing / GIS Department

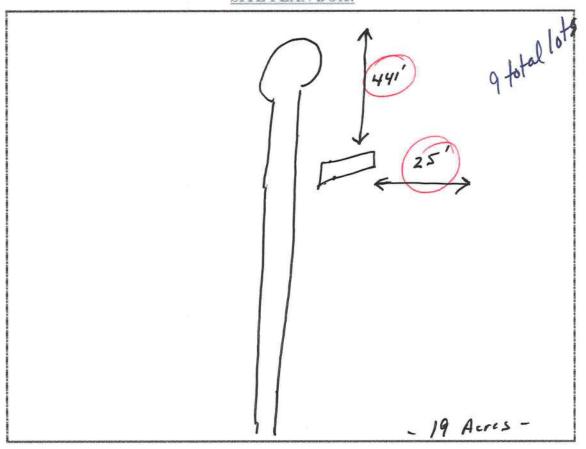
NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

2-31,0 41 SOUTH Park

- 1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
- 2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
- 3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
- 4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).



#### SITE PLAN BOX:



Page 2 of 2

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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#### **Detail by Entity Name**

#### Florida Limited Liability Company

OLISA PROPERTIES, L.L.C.

#### Filing Information

**Document Number** 

L04000050400

FEI/EIN Number

870741515

Date Filed State or Country 07/02/2004 FL

Status

ACTIVE

#### Principal Address

212 SW COTTAGE GLEN LAKE CITY, FL 32024

#### Mailing Address

212 SW COTTAGE GLEN LAKE CITY, FL 32024

#### Registered Agent Name & Address

MORRELL, DAVID W 212 SW COTTAGE GLEN LAKE CITY, FL 32024

#### Manager/Member Detail

#### Name & Address

Title MGRM

MORRELL, DAVID W 212 SW COTTAGE GLEN LAKE CITY, FL 32024

Title Managing Member

Morrell, Vicki L 212 SW COTTAGE GLEN LAKE CITY, FL 32024

#### Annual Reports

Report Year

**Filed Date** 

2011

01/04/2011

2012

01/12/2012

#### PERSONAL REPRESENTATIVE'S DEED

THIS INDENTURE, executed this day of April 2013, between Nancy North Smith, as Personal Representative of the Estate of Earl Julian North, Sr., a/k/a Earl Julian North a/k/a Buck North, deceased, party of the first part, and Olisa Properties, L.L.C., a Florida Limited Liability Company, party of the second part, whose address is: 212 SW Cottage Glen, Lake City, FL 32024.

#### WITNESSETH:

The party of the first part, pursuant to Last Will and Testament of Earl Julian North, Sr. a/k/a Earl Julian North a/k/a Buck North, deceased, Case #12000309CPAXMX, recorded in O.R. Book 1247, Page 11573, in the Office of the Clerk of Circuit Court of Columbia County, Florida, and in consideration of the sum of TEN AND NO/100'S (\$10.00) DOLLARS, and other good and valuable consideration in hand paid, grants, bargains, sells, aliens, remises, releases, conveys and confirms to the party of the second part, their heirs and assigns forever, the real property in Columbia County, Florida, described as:

SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF.

TOGETHER WITH THE FOLLOWING MOBILE HOMES:

1989 ASPT Doublewide Mobile Home, VIN#s FLA35469 and FLA35468.

1985 STON Doublewide Mobile Home, VIN#s FLFL2AF137905908 & FLFL2BF137905908.

1983 SUNS Singlewide Mobile Home, VIN# SSMFLAA110158.

1965 CHAM Singlewide Mobile Home, VIN# 0461011846.

1979 CLAS Doublewide Mobile Home, VIN#s ED1256A & ED1256B.

1979 SATE Singlewide Mobile Home, VIN# GDWSGA08793559.

1959 NEWM Singlewide Mobile Home, VIN# 45X29898.

1970 SWEE Singlewide Mobile Home, VIN# SV60CK12352.

TOGETHER with all and singular the tenements, hereditaments and appurtenances belonging or in anywise appertaining to that real property.

TO HAVE AND TO HOLD the same to the party of the second part, their heirs and assigns, in fee simple forever.

GRANTOR covenants with Grantee that Grantor has good right and lawful authority to sell and convey the above-described real property and Grantor warrants the title to the above described real property for any acts of Grantor, and will defend the title against the lawful claims of any and all persons claiming by, through or under Grantor.

IN WITNESS WHEREOF, the party of the first part, as Personal Representative of the Estate of Earl Julian North, Sr. a/k/a Earl Julian North a/k/a Buck North, deceased, has set his hand and seal on the day and year first above written.

Witness MELINDA WEAVER

Signed, Seated and Belivered in the presence of:

Nancy North Smith as Personal Representative of the Estate of Earl Julian North, Sr. a/k/a Earl Julian North, deceased

STATE OF FLORIDA COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 12 day of April, 2013, by Nancy North Smith, as Personal Representative of the Estate of Earl Julian North, Sr., a/k/a Earl Julian North a/k/a Buck North, deceased, personally known to me or if not personally known, produced as identification.

NOTARY PUBLIC My Commission Expires:

File 5499/Olisa Properties

#### **EXHIBIT** A

That certain piece, parcel of tract of land situate, lying and being in the County of Columbia, and State of Florida, known and described as follows: All of that part of the South 1/2 of the Northwest 1/4 that lies East of Florida State Highway No. 2 (U.S. Highway No. 41), and the West 1/2 of the Southwest 1/4 of the Northeast 1/4 of Section 34, Township 4 South, Range 17 East, Columbia County, Florida, except 509.5 feet off the South side and 379 feet off the North side of the above described lands; and further excepting any part lying within a public right of way.

### CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

Lot 402

DATE RECEIVED 4-15-13 BY CH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO
OWNERS NAME Olisa Properties LLC PHONE 365.7690 CELL (David Morrell)
ADDRESS 212 SW Cottage Glen Loke City Fl 32024
MOBILE HOME PARK SUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME 41 South To 252- (Hylschool) turn Left go to
Old Country Club Rd turn Right, First Drive on Right. 2 Single will in Field. Met-1 5, iled one on Lett (Roland Tarditts Property)
MOBILE HOME INSTALLER 12.6c-1 Shepa-d PHONE \$623 2203 CELL
MOBILE HOME INFORMATION
MAKE Fleetwood YEAR 1991 SIZE 14 x 66 COLOR Blue Grey?
SERIAL No. GA FLL 75A 11748 WE
WIND ZONE Must be wind zone II or higher NO WIND ZONE I ALLOWED
INSPECTION STANDARDS
INTERIOR: (P or F) - P= PASS F= FAILED
SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING
FLOORS () SOLID () WEAK () HOLES. DAMAGED LOCATION
DOORS () OPERABLE () DAMAGED
WALLS () SOLID () STRUCTURALLY UNSOUND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES ( ) OPERABLE ( ) MISSING
CEILING () SOLID () HOLES () LEAKS APPARENT
ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT
P ROOF ( ) APPEARS SOLID ( ) DAMAGED
STATUS
APPROVED V WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS
SIGNATURE JOY CO ID NUMBER 306 DATE 4-16-13



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

#### MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

, give this authority for the job address show	below									
only, 402 SE Doe Glen lala Coty ft 32025, and I do certify that										
on this form is/are under my direct supervision and	contro									
mits, call for inspections and sign on my behalf.										
	S									
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	fficer									
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.  I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.										
IH 1025 386 4-18-	13									
NOTARY INFORMATION: STATE OF:Florida COUNTY OF: Columbia The above license holder, whose name is Robert Shappand										
personally appeared before me and is known by me or has produced identification (type of I.D.) on this 18 day of 400 day of 13 NOTARY'S SIGNATURE (Seal/Stamp)										
	on this form is/are under my direct supervision and mits, call for inspections and sign on my behalf.    ature of Authorized									

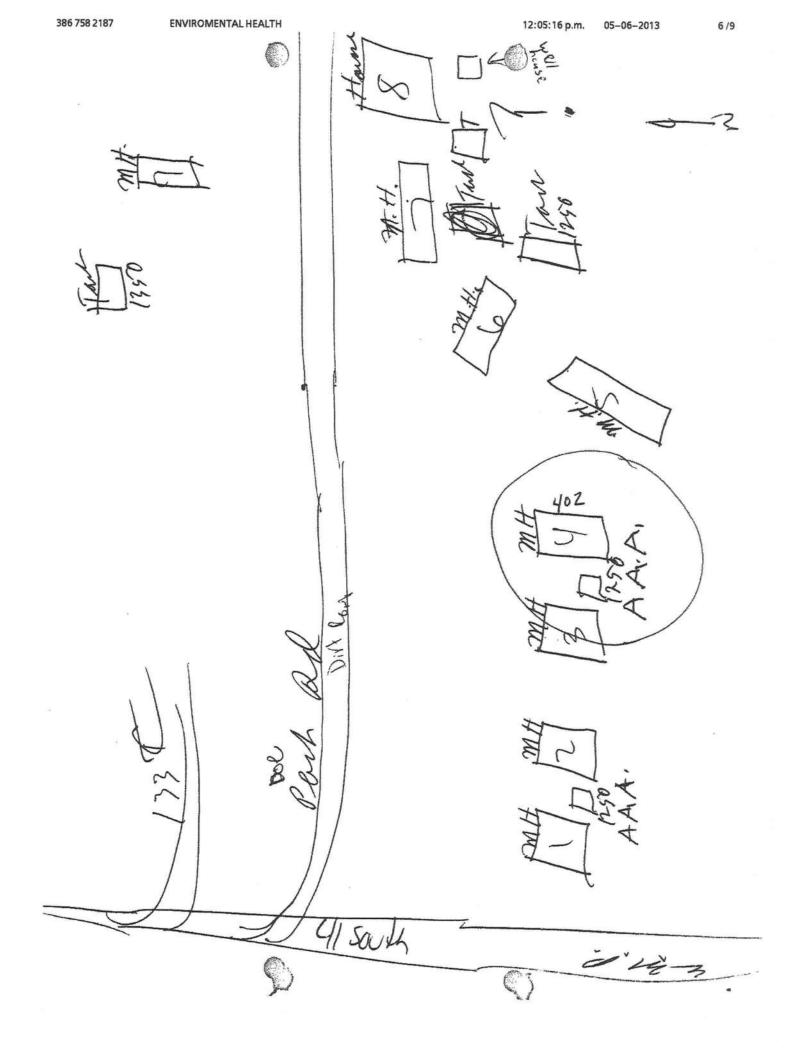
## STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-8437E

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DH 4015, 08/09 Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

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

PERMIT NO.	13-33275
DATE PAID:	4124119
FEE PAID:	125.00
RECEIPT #:	リのマッグマ
	(100)

APPLICATION	FOR CONSTRUCTION PERM	HT RECEIPT #: 1105-723	
APPLICATION FOR: [ ] New System [ ] 1	Existing System [ ] Abandonment [ ]	Holding Tank [ ] Innovative Temporary [ ]	
APPLICANT: Olisa	ropedies LLC 1	David W. Mornell	
AGENT:		TELEPHONE: 365-1690	
MAILING ADDRESS: 2/2	SW Cottye Glew L	who City Fl 32024	
BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY	NT TO 489.105(3)(m) OR 489. TO PROVIDE DOCUMENTATION OF	D AGENT. SYSTEMS MUST BE CONSTRUCTED .552, FLORIDA STATUTES. IT IS THE F THE DATE THE LOT WAS CREATED OR TUTORY GRANDFATHER PROVISIONS.	
PROPERTY INFORMATION	Ruck Nort	IL MAP	
LOT: 402 BLOCK:	SUBDIVISION: Doc Gha	MHP PLATTED:	
PROPERTY ID #: 34 45 1	7 08980 JJJ zoning: _	I/M OR EQUIVALENT: [Y/N]	
PROPERTY SIZE: 19 1/2 ACRES	WATER SUPPLY: [   PRIVAT	TE PUBLIC [ ]<=2000GPD [ ]>2000GPD	
		DISTANCE TO SEWER:FT	
		road on Left past 133C (Doe G	,
DIRECTIONS TO PROPERTY:>	402 SE /	oe Glan Loke City Fl	1
BUILDING INFORMATION	[ ] RESIDENTIAL	[ ] COMMERCIAL	
Unit Type of No Establishment	No. of Building Com Bedrooms Area Sqft Tab	nmercial/Institutional System Design ble 1, Chapter 64E-6, FAC	
1 Single Wick	Z 924'		
2			
3			
4			
[ ] Floor/Equipment Drains	[ ] Other (Specify)		
SIGNATURE:	MI	DATE:	

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