This Permit Expires One Ye	ear From the Date of Issue 000023340
ADDRESS 355 NE LAVERNE STREET	PHONE <u>386.755.8758</u> LAKE CITY FI. 32055
OWNER CAROL PIERCE	12 32033
ADDRESS 4557 SE COUNTY ROAD 252	
CONTRACTOR JOHN ANDY SHIPP	
	PHONE 755.8758 2,TL AND IT'S THE 5TH DRIVE ON L.
WHITE SINGLE WIDE	2, IL AND ITS THE STH DRIVE ON L.
TYPE DEVELOPMENT M/H/UTILITY EST	FIMATED COST OF CONSTRUCTION 200.00
HEATED FLOOR AREA TOTAL ARE	
EOI DID ATION	
	OOF PITCH FLOOR
LAND USE & ZONING A-3	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00	REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 24-4S-17-08728-013 SUBDIVISION	J
I OT	
LOT BLOCK PHASE UNIT	TOTAL ACRES 2.61
IH0000334	(2012 1811:00
Culvert Permit No. Culvert Waiver Contractor's License Numb	per Applicant/Owner/Contractor
EXISTING 05-0654-E BLK	N N
Driveway Connection Septic Tank Number LU & Zoning	
COMMENTS: 1 FOOT ABOVE ROAD	Ten resident
	Check # or Cash 6132
FOR BUILDING & ZONING	
FOR BUILDING & ZONING Temporary Power Foundation	DEPARTMENT ONLY (footer/Slab)
Temporary Power Foundation	DEPARTMENT ONLY (footer/Slab) Monolithic
Temporary Power Foundation	Monolithic date/app. by (footer/Slab)
Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab date/app. by	DEPARTMENT ONLY (footer/Slab) Monolithic
Temporary Power Foundation date/app. by Under slab rough-in plumbing Slab date/app. by Framing Rough-in plumbing abov	Monolithic date/app. by Sheathing/Nailing
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Temporary Power	Monolithic date/app. by Sheathing/Nailing date/app. by e slab and below wood floor Peri. beam (Lintel) date/app. by Culvert date/app. by Culvert date/app. by Pool Utility Pole D. by Re-roof app. by (footer/Slab) (date/app. by date/app. by date/app. by date/app. by
Temporary Power date/app. by Under slab rough-in plumbing Slab Cate/app. by	Monolithic date/app. by Sheathing/Nailing date/app. by e slab and below wood floor Peri. beam (Lintel) date/app. by Culvert date/app. by Culvert date/app. by Pool Utility Pole Description Description Description Adate/app. by Adate/app. by Description Descrip
Temporary Power date/app. by Under slab rough-in plumbing Slab date/app. by Framing Rough-in plumbing abov date/app. by Electrical rough-in date/app. by Permanent power C.O. Final date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by Reconnection Pump pole date/app. by M/H Pole date/app. by CERTIFICATION FEE \$ MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00	Monolithic date/app. by Sheathing/Nailing date/app. by Sheathing/Nailing date/app. by e slab and below wood floor Peri. beam (Lintel) date/app. by Culvert date/app. by Pool Utility Pole D. by Re-roof app. by SURCHARGE FEE \$.00
Temporary Power date/app. by Under slab rough-in plumbing Slab Compared to the compared to	Monolithic date/app. by date/app. by Sheathing/Nailing date/app. by e slab and below wood floor Peri. beam (Lintel) date/app. by Culvert Japp. by Pool Utility Pole Description by Adate/app. by Bapp. by Culvert Adate/app. by Adate/app. by Bate/app. by Adate/app. by Bate/app. by Culvert Adate/app. by Bate/app. by
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Temporary Power	Monolithic date/app. by Sheathing/Nailing date/app. by Sheathing/Nailing date/app. by e slab and below wood floor Peri. beam (Lintel) date/app. by Culvert date/app. by Culvert date/app. by Pool Utility Pole D. by Re-roof app. by SURCHARGE FEE \$ 36.75 .00 TOTAL FEE 303.76 CLERKS OFFICE Y BE ADDITIONAL RESTRICTIONS APPLICABLE TO THE

DIESE Maharana

IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR PAYING TWICE FOR BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

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

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION Office Use Only Zoning Official BLK 22.465 Building Official OK 57H 5

For Office Use Only Zoning Official BLK 22.005 Building Official 6K JTH 5-16-05
AP# USOR 7 Date Received 6 /5 - 0 S By V Permit # 23340
Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
Comments
FEMA Man # Floration
FEMA Map # Elevation Finished Floor River In Floodway
Site Plan with Setbacks shown Environmental Health Signed Site Plan
□ Well letter provided □ Existing Weh Revised 9-23-04
Property ID 24-45-17-08 728-013 Must have a copy of the property deed New Mobile Home
New Mobile Home Used Mobile Home Year
Applicant Joyann/John Shipp Phone # 755-8758 Address 355 NF. Avoice St. A 20075
Address 355 NE LAVELNE ST. L.C. 32055
Name of Property Owner One of Diagram
Phone# GOLL THIS
911 Address 455 7 SE COUNTY Rd. 252 L.C 32025
FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progressive Energy Name of Owner of Mobile Home (1982) - Progressive Energy
Name of Owner of Mobile Home <u>CAROL PIERCE</u> Phone # <u>984-7729</u> Address <u>SAME</u> AS ABOVE
Relationship to Property Owner 2 7
Current Number of Dwellings on Property NONE
Lot Size 1500x 1500 Total Acreage 2.61
Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
Driving Directions Price Creek HW Turn Le 77 on 252
5th Prive on Lett, white single wide.
the write single wide.
In 41:- 88
Is this Mobile Home Replacing an Existing Mobile Home 10 303-76
Name of Licensed Dealer/Installer John Shipp Phone # 755-875 8
Installers Address 355 NE LAVERNE STo LC. 32055
License Number I H 0000334 Installation Decal # 248062
(137) Installation Decal # 248062

	marriage wall piers within 2 of end of home per Rule 15C	I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. Installer's initials Typical pier spacing Installer's initials Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	These worksheets must be completed and signed by the installer. Installer Sohn Shipp License # 14000334 Home 911 Address where 45573£ 00014 B 353 Manufacturer FAST Length x width 144 44 Double 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 COLUMBIA COUNTY PERMIT W New H Home Home Single Single Double Triple/C
Opening Pier pad size 4 ft F within 2' opening Stabilizing Device (LSD) Manufacturer Of VER TECH. Longitudinal Stabilizing Device w/ Lateral Arms Marriage Shearwall Marriage Shearwall	psf 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'	Footer 16" x 16" 18 1/2" x 18 1/2" 20" x 20" 22" x 22" 24 (400) (484) (18 1/2" psf 4'6" 6 7'6" 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	New Home Used Home U Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Single wide W Wind Zone II W Wind Zone III D Double wide Installation Decal # 2485/421k384/1c4

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	onnect all sewer drains to an existing sewer tap or septic tank. Pg.	Connect electrical conductors between multi-wide units, but not to the main power cource. This includes the bonding wire between mult-wide units. Pg. $OLoneC$	Electrical	Installer Name Date Tested	requires anchors with 4000 lb holding capacity. ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER		The results of the torque probe test is here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 5 foot anchors. Note: A state approved lateral arm system is being used and 4.4.	TORQUE PROBE TEST	XXXXXXX	3. Using 500 lb. increments, take the lowest		× ×	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST
Installer Signature A Man Date 6/	manufacturer's installation instructions and or Bull 150.1 8 2	Installer verifies all information given with this permit workshoot	irting. Y	Skirting to be installed. Yes Oryer vent installed outside of skirting. Yes N/A	The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Weatherproofing	Type gasket Pg. Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Installer's initials	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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.	Gasket (weatherproofing requirement)	Floor: Type Fastener: Walls: Type Fastener: Roof: Type Fastener: Length: Spacing:	Fastening multi wide units	Debris and organic material removed Water drainage Natural Swale Pad Other	Site Preparation

STATE OF FLORIDA COUNTY OF COLUMBIA

AFFIDAVIT

This is to certify that I, (We), SUBRAMN 4TD , as the
seller, by an Agreement for Deed, of the below described property:
Tax Parcel No. 24-45-17-08728-013
Subdivision (Name, lot, Block, Phase) 2.6/ ACRES
Give my permission for CAROLY M. UNION OR CAROL LYMPEARCE to place a (Mobile Home / Travel Trailer / Single Family Home)
I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.
(1) Seller Signature (2) Seller Signature
Sworn to and subscribed before me this day of MAY, 2005. This
(These) person (s) are personally known to me or produced ID
(Type)
Notary Public Signature State of Florida My commission expires: Nanci Neffles Notary Printed Name
NANCI NETTLES MY COMMISSION # DD 237895 EXPIRES: December 26, 2005 Bonded Thru Notary Public Underwriters

WARRANTY DEED

This Warranty Deed made and executed the 13th day of May A.D. 2005 by Subrandy Limited Partnership, hereinafter called the grantor, to CAROLYN M. UNION AND CAROL LYNN PEARCE, EACH AS TO AN UNDIVIDED ONE HALF INTEREST AS JOINT TENANTS WITH RIGHTS OF SURVIVORSHIP, AND NOT AS TENANTS IN COMMON, Whose post office address is 8784 SE CR 245, Lake City, FL 32025, hereinafter called the grantee:

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for the consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

TOWNSHIP 4 SOUTH, RANGE 17 EAST

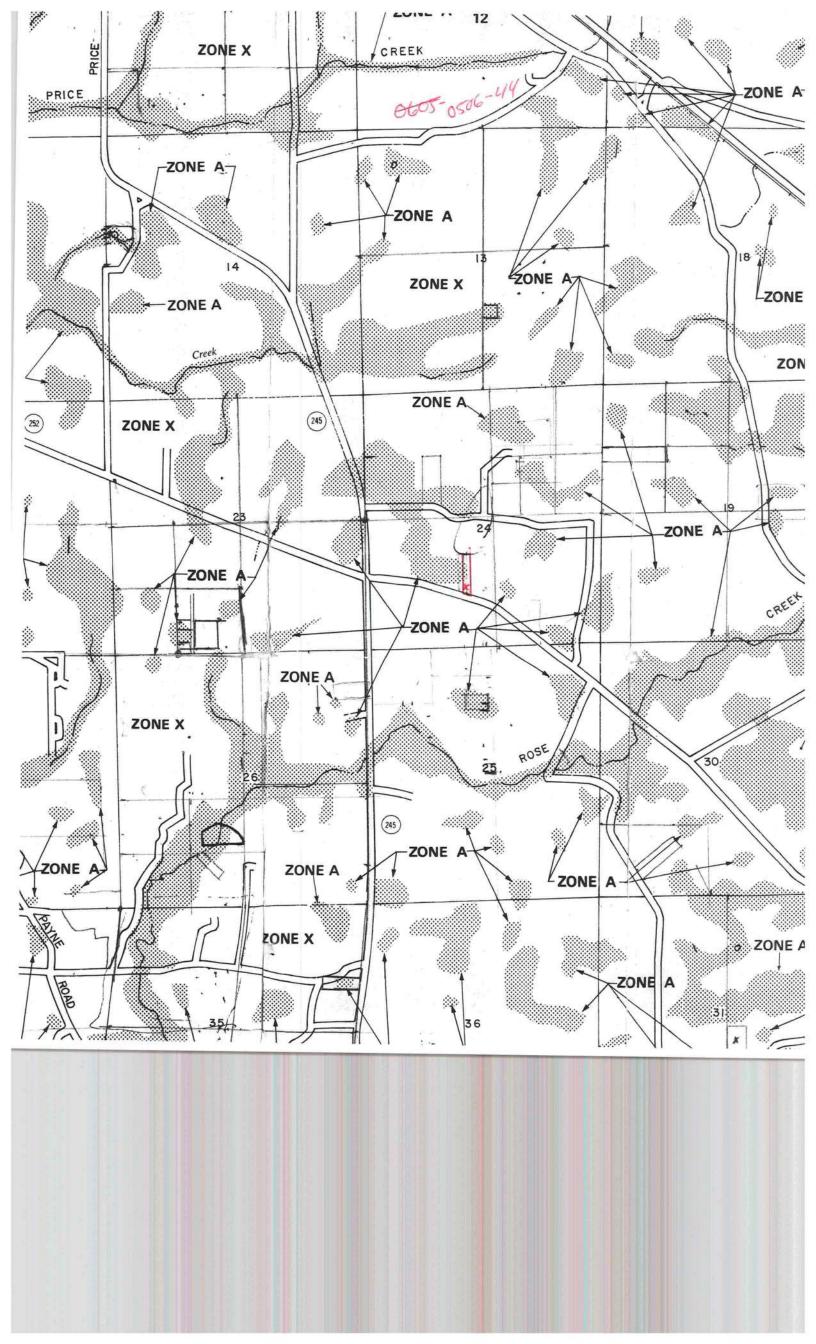
Section 24: Commence at the SE corner of the NE ¼ of SW ¼ and run thence N 0° 57'12" W along the East boundary of said NE ¼ of SW ¼ a distance of 708.72 feet; thence S 86° 00'36" W, 244.20 feet to the POINT OF BEGINNING; thence run S 0° 57'12" E, 829.57 feet to the North right-of-way line of Co. Highway C-252; thence run Northwesterly along said North right-of-way line and along the arc of a curve concave to the left having a radius of 1909.86 feet a distance of 150.16 feet; thence run N 0° 57'12" W a distance of 773.23 feet; thence N 86° 00'36" E, 142.04 feet to the POINT OF BEGINNING, containing 2.61 acres more or less. Said lands lying mostly in the NE ¼ of SW ¼ and partly in the SE ¼ of SW ¼. N.B. For the period of time from the date hereof to and including December 31, 2010, there shall not be placed nor kept upon any of the subject property any junk of any kind or description, including, but not limited to, Junk Automobiles, worn out or discarded electrical appliances, machinery, nor any junk of any kind or nature, nor any items generally construed to be junk or any usable items or materials stored outside in an objectionable or unsightly manner. Includes well, septic tank and power pole.

Together with all the tenements, hereditaments and appurtenances thereto belong or in any-wise appertaining.

DÉPARTMENT OF CODE ENFORCEMENT COLUMBIA COUNTY, FLORIDA

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6/7/05 BY
IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? GES
OWNERS NAME Carol Pierce PHONE 9847729 CELL
911 ADDRESS 4557 SE CR 252, 32025
MOBILE HOME PARK N/A SUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME Price (week, TL 252,
5th drive on left
CONTRACTOR Andy Shipp PHONE 155-8758 CELL_
MOBILE HOME INFORMATION
MAKE ZAST YEAR 1985 SIZE 14 x 44
COLOR White SERIAL NO. F5485142 FK38416A
WIND ZONE SMOKE DETECTOR _ 9e S
INTERIOR: FLOORS
DOORS
WALLS
CABINETS
ELECTRICAL (FIXTURES/OUTLETS)
EXTERIOR: WALLS / SIDDING
WINDOWS
DOORS
STATUS: APPROVED WITH CONDITIONS:
NOT APPROVED NEED REINSPECTION
INSPECTOR SIGNATURE Day A NUMBER 306





STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number ---- PART II - SITE PLAN----Scale: Each block represents 5 feet and 1 inch = 50 feet. 2.61 Notes: Site Plan submitted by: Signature Plan Approved Not Approved Date

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLU MABIA

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

Page 2 of 3

County Health Department



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number _ ---- PART II - SITE PLAN---Scale: Each block represents 5 feet and 1 inch = 50 feet. BudRas Notes: Site Plan submitted by:___ Signature Title Plan Approved _____ Not Approved Date_

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

County Health Department

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6)

