

DATE 07/23/2010

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000028749

APPLICANT WENDY GRENNELL PHONE 288-2428
ADDRESS 3104 SW OLD WIRE ROAD FT. WHITE FL 32038
OWNER LENA LOFTON/CATHRYN BROWN PHONE 350 281-1986
ADDRESS 975 SW JONES TERRACE LAKE CITY FL 32025
CONTRACTOR ROBERT PUCKETT PHONE 352 266-9297

LOCATION OF PROPERTY 41S, TR CR 242A, TL JONES TERR., TO THE END ON LEFT
IN FIELD

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 A-3 MAX. HEIGHT

Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 29-4S-17-08847-000 changed by L. Jackson SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 67.00

IH0000707

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 10-344 BK TC Y
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 5 ACRES DESIGNATED FOR THIS DWELLING, ONE FOOT ABOVE THE ROAD

Parcel number corrected on permit, original was typed incorrectly.
L. Jackson 8-18-2010 Check # or Cash 6674

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 \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 36.66 WASTE FEE \$ 50.25

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 461.91

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. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

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

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

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

DATE 07/23/2010

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NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 24-6S-15-01438-316 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 67.00

IH0000707
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
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(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
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Framing date/app. by Insulation date/app. by
Rough-in plumbing above slab and below wood floor date/app. by Electrical rough-in date/app. by
Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
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**COLUMBIA COUNTY
FLORIDA**

M/H OCCUPANCY

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 29-4S-17-08847-000

Building permit No. 000028749

Permit Holder ROBERT PUCKETT

Owner of Building LENA LOFTON/CATHRYN BROWN

Location: 975 SW JONES TERR., LAKE CITY, FL

Date: 08/30/2010



Harry Pickett

Building Inspector

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

License Number LH0000707 Installation Decal # _____

PERMIT WORKSHEET

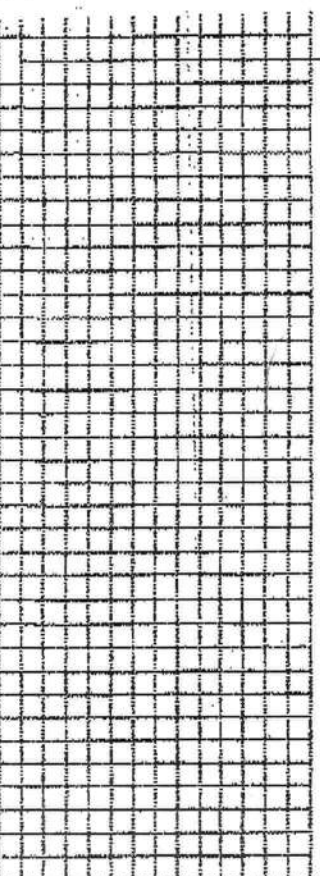
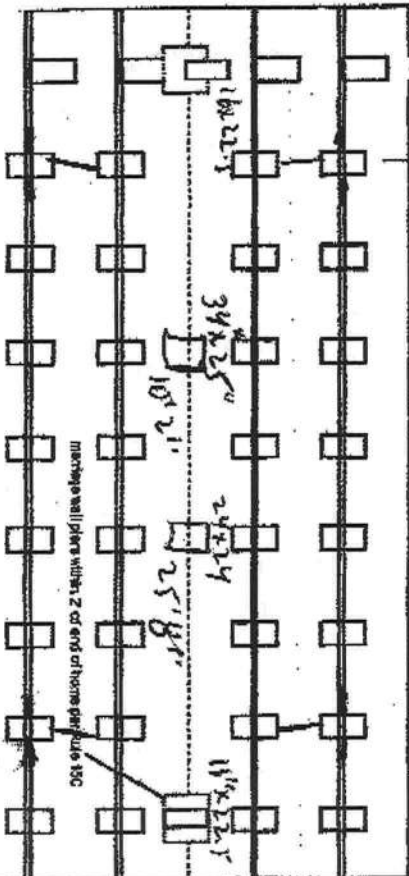
page 1 of 2

Installer Robert Pickett License # TH000707
 Manufacturer Nobilis Length x Width 28' x 44'
 Name of Owner of this Mobile Home Leona Loftis
 Phone 305-281-1986
 Address 561 Jones Terrace Lake City, FL 32025

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

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

Installer's initials RP



New Home ☒ Used Home ☐ Year _____
 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 Detail # 18A
 Triple/Quad ☐ Serial # _____

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	18' 1/2" x 18' (324)	20' x 20' (400)	22' x 22' (484)	24' x 24' (576)	26' x 26' (676)
1000 sq ft	3'	4'	5'	6'	7'	8'
1500 sq ft	4'	5'	6'	7'	8'	9'
2000 sq ft	5'	6'	7'	8'	9'	10'
2500 sq ft	6'	7'	8'	9'	10'	11'
3000 sq ft	7'	8'	9'	10'	11'	12'
3500 sq ft	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

I-beam pier pad size 16' x 22' 1/2"
 Perimeter pier pad size 16' x 16"
 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 34' x 25' Pier pad size 10' x 2'
24' x 24' 25' x 8'

POPULAR PAD SIZES

Pad Size	Sq. ft
16' x 16'	256
18' x 18'	324
20' x 20'	400
22' x 22'	484
24' x 24'	576
26' x 26'	676

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Longitudinal Stabilizing Device (LSD)
 Manufacturer _____
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer _____

Sidewall Longitudinal Marriage wall Shearwall
 Number _____

386-798-2160

PERMIT WORKSHEET

page 1 of 2

Installer Robert Pickett License # TH000707
 Manufacturer Mobility Length x Width 28' x 44'
 Name of Owner of this Mobile Home Lea Loftis
 Phone 305-281-1986
 Address SW Jones Terrace Lake City FL 32025

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

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

Installer's initials RP

New Home ☒ Used Home ☐ Year
 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 # 182
 Triple/Quad ☐ Serial #

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16' x 16' (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4'	5'	6'	7'	8'	9'
2000 dsf	5'	6'	7'	8'	9'	10'
2500 dsf	6'	7'	8'	9'	10'	11'
3000 dsf	7'	8'	9'	10'	11'	12'
3500 dsf	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

I-beam pier pad size 16" x 22.5"
 Perimeter pier pad size 16" x 16"
 Other pier pad sizes (required by the mfg.)

POPULAR PAD SIZES

Pad Size	Sq in
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

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.

ANCHORS

4 ft 5 ft

FRAME TIES

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

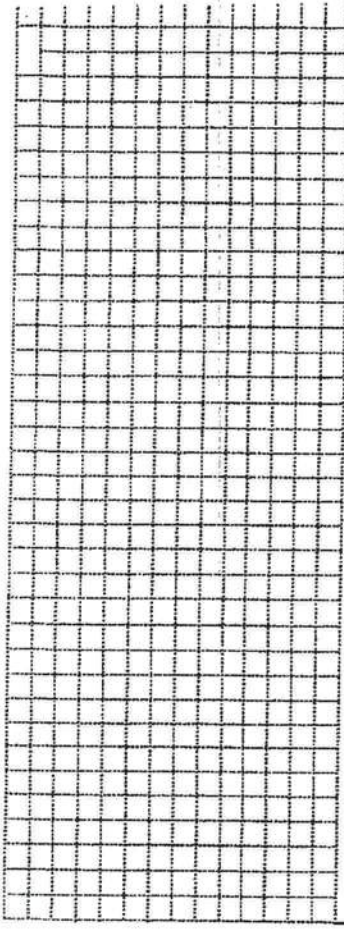
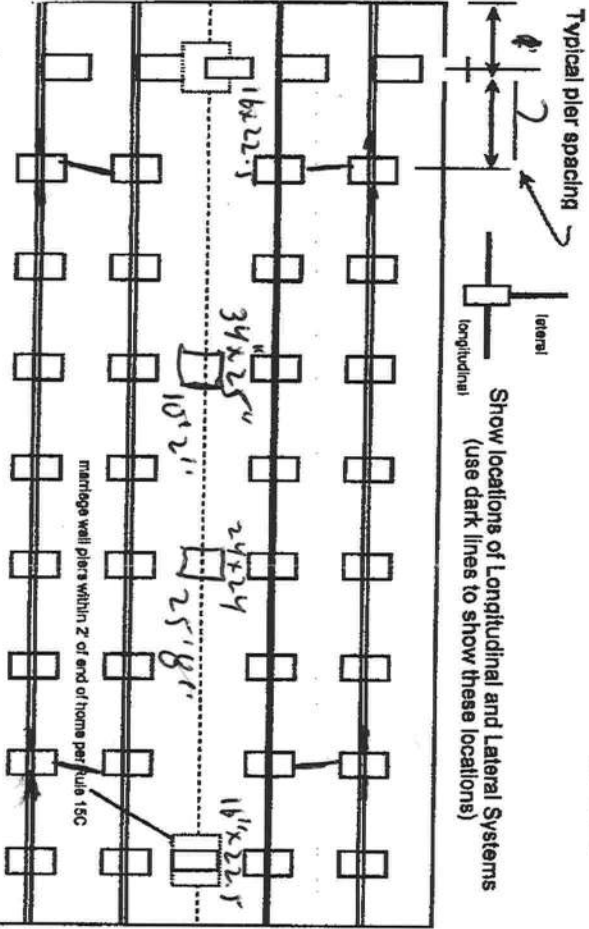
OTHER TIES

Number

TIEDOWN COMPONENTS

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

Sidewall Longitudinal Marriage wall Shearwall
 Number 4



PERMIT NUMBER

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 176 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 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.

B.P. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Packer

Date Tested

2-6-10

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. 43

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 42

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 43

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☒

Fastening multi wide units

Floor: Type Fastener: 3/8" Lg Length: 4" Spacing: 10"
Walls: Type Fastener: 1/2" Lg Length: 4" Spacing: 10"
Roof: Type Fastener: #10 screw Length: 4" Spacing: 8"
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

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

Installer's initials

B.P.

Type gasket factory installed

Pg. 44 gasket
Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 44
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

Robert Packer

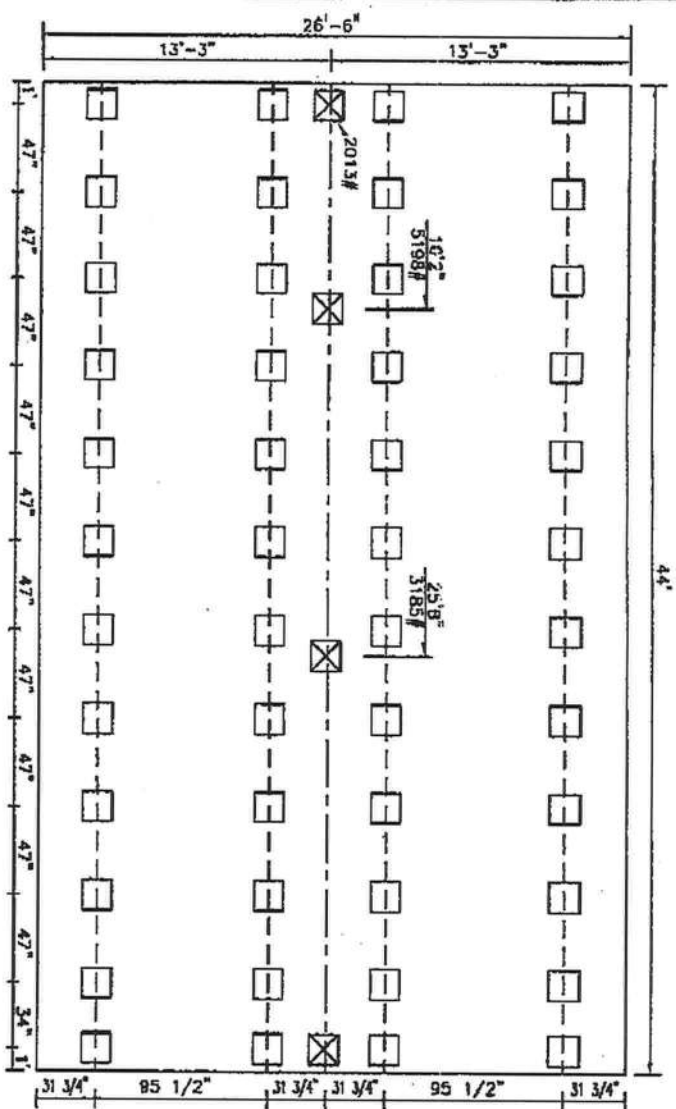
Date 2-6-10

JUN 29 10 06:27P

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3867551031

2



- NOTES: (1) COLUMN SUPPORT PIERS MAY BE WITHIN 8" OF OPENINGS GREATER THAN 48"
- (2) ADDITIONAL PIERS ARE REQUIRED AT EACH SIDE OF EXTERIOR DOOR OPENINGS.
- (3) THIS IS A TYPICAL DRAWING FOR THIS MODEL. SPACING MAY BE DIFFERENT IF MAX. SPACING IS NOT EXCEEDED.

☒ COLUMN SUPPORT PIERS

☐ 17" X 21" BASE PAD

SPACING FOR 1000 PSF SOIL WITH 17" X 21" BASE PAD
 MAXIMUM SPACING FOR THE 1-BEAM PIERS IS 95'

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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NO. OF REVISIONS _____

DATE 6-2-10

SCALE _____

44E3H(7)

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

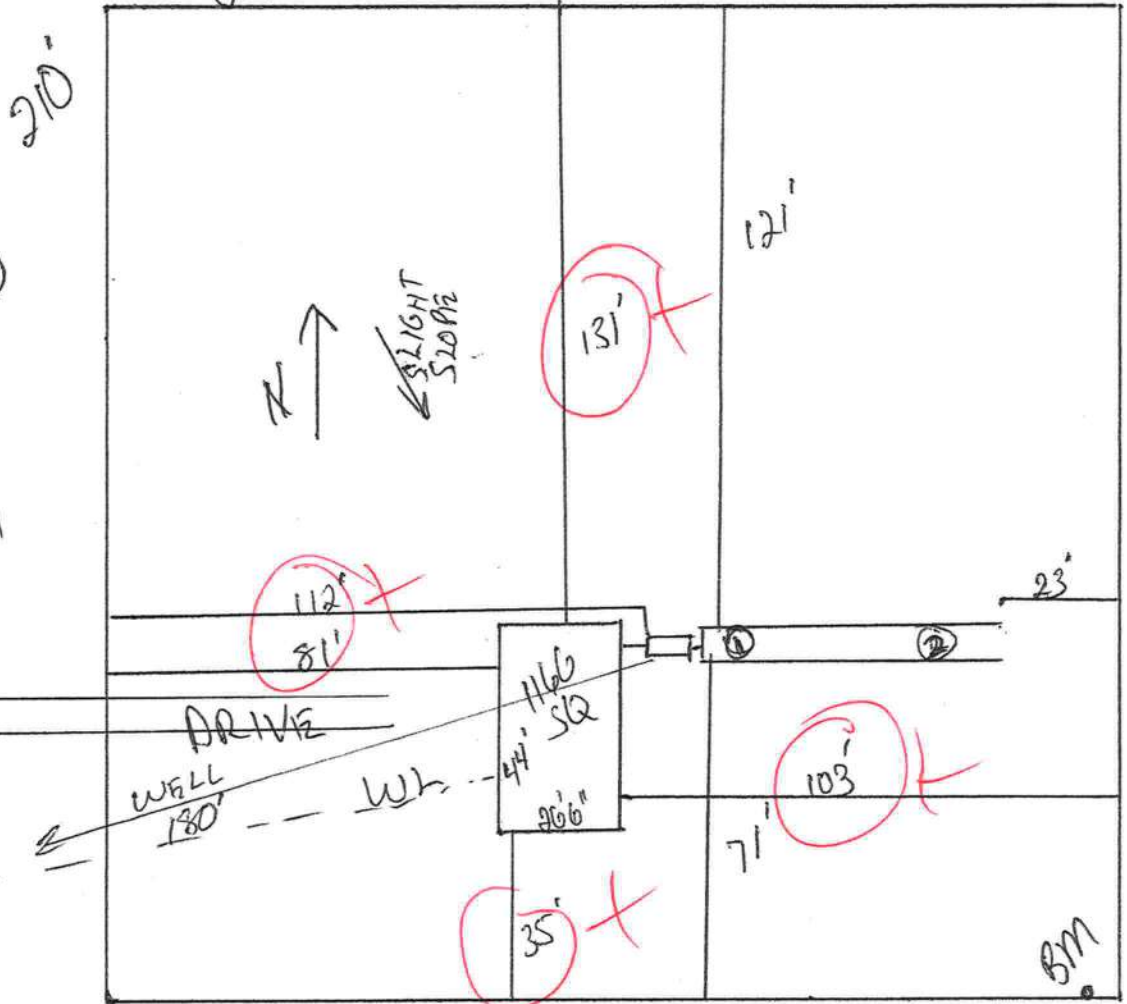
Permit Application Number _____

Leiston

PART II - SITEPLAN

Scale: 1 inch = 50 feet.

*SEE ATTACHED
IRREGULAR
PROPERTY*



1 of 67 Acres

Notes: _____

Site Plan submitted by: *Rock n Fold*

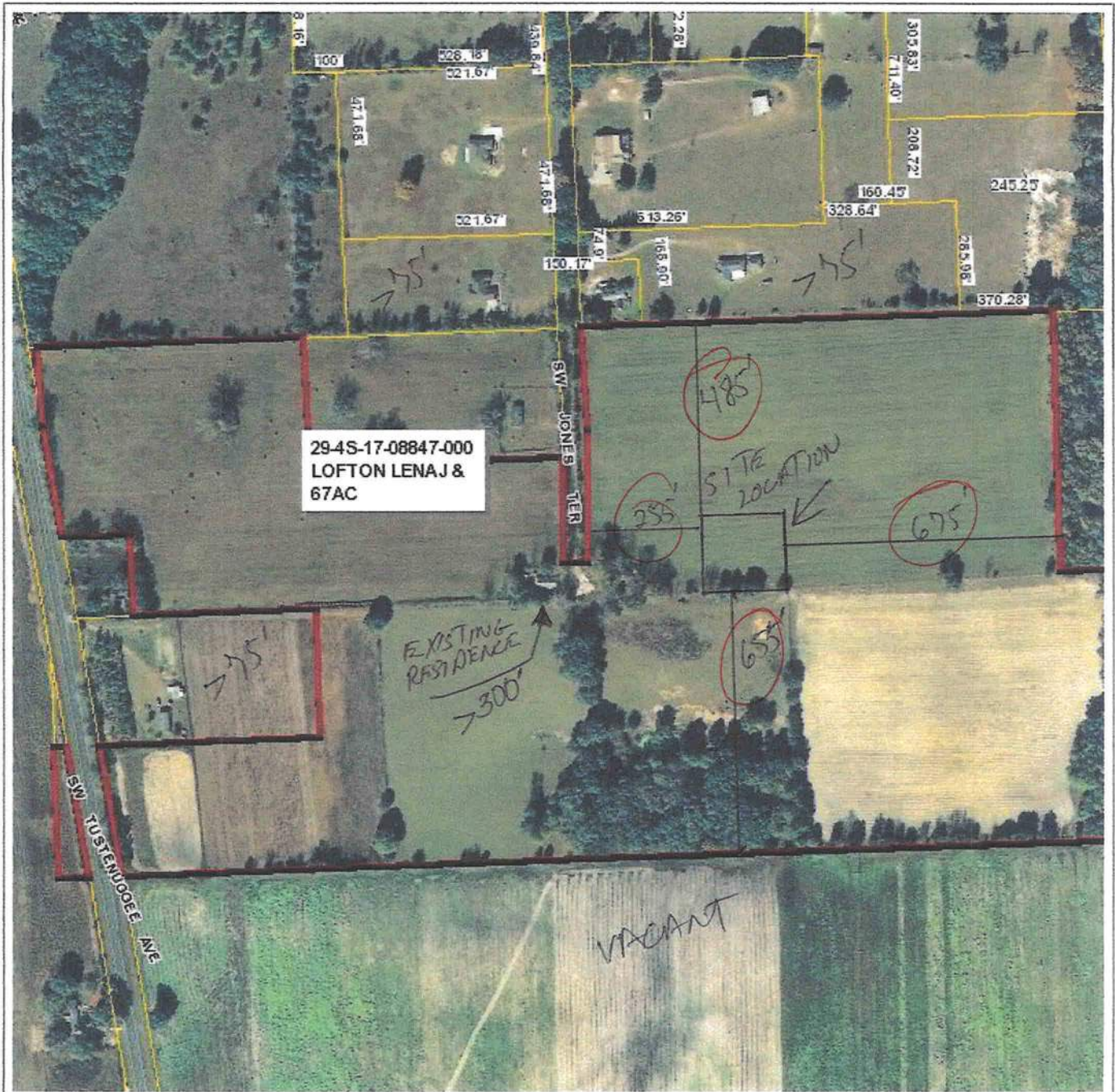
MASTER CONTRACTOR

Plan Approved _____ Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Columbia County Property Appraiser			
J. Doyle Crews - Lake City, Florida 32055 386-758-1083			
PARCEL: 29-4S-17-08847-000 - IMPROVED A (005000)		NOTES:	
BEG AT SW COR OF NE1/4 OF SEC, RUN N 332.95 FT, E 30.41 FT TO W/R/W OF SW TUSTENUGEE AVE, SE ALONG R/W 335.99 FT, WEST 75.32 FT TO POB & BEG AT SE CO			
Name: LOFTON LENA J &		2009 Certified Values	
Site: 976 SW JONES TER		Land	\$13,898.00
CATHRYN J BROWN (JT WRS)		Bldg	\$29,126.00
Mail: 976 SW JONES TER		Assd	\$34,349.00
LAKE CITY, FL 32025		Exmpt	\$34,349.00
Sales	12/10/2009		Cnty: \$0
Info	6/4/2009	\$100.00 I/U	Taxbl
		\$100.00 V/U	Other: \$8,849 Schl: \$8,849



Rock to 7-5
1 of 67 Acres



1007-09

This Instrument Prepared By:
CATHRYN J. BROWN
976 SW JONES TERRACE
LAKE CITY FL 32025

PARCEL#08847-000

WARRANTY DEED

This Warranty Deed, made the 10th day of December, 2009, by Lena J. Lofton, hereinafter called the Grantor, to Lena J. Lofton and Cathryn J. Brown, as Joint Tenants with Rights of Survivorship, whose post office address is 976 SW Jones Terrace, Lake City, Florida 32025, hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH: That the Grantor, for and in consideration of the sum of TEN DOLLARS (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the Grantee all that certain land situate, lying and being in Columbia County, State of Florida, viz:

SEE SCHEDULE "A" ATTACHED

Together, with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining. **To Have and to Hold**, the same in fee simple forever.

And the Grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2008.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Kathleen D. Holmes
Witness Signature KATHLEEN D. HOLMES

Lena J. Lofton
LENA J. LOFTON

Printed Name

Jason Cherris
Witness Signature

Printed Name

Inst: 201012003176 Date: 3/3/2010 Time: 11:22 AM
Doc Stamp-Deed.0.70

DC, P. DeWitt Cason, Columbia County Page 1 of 2 B:1189 P:2652

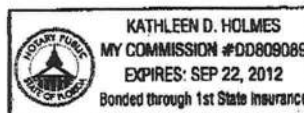
STATE OF FLORIDA
COUNTY OF COLUMBIA

I hereby certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared LENA J. LOFTON known to me to be the persons described in and who executed the foregoing instrument, who acknowledged before me that _____ executed the same, and an oath was not taken. (Check one:) ☒ Said person(s) is personally known to me. ☐ Said person(s) provided the following type of identification: _____

Witness my hand and official seal in the County and State last aforesaid

This 22 day of FEBRUARY 2010

Kathleen D. Holmes
Notary Signature



Printed Name

Attachment "A"

BEGIN AT THE SW CORNER OF THE NE 1/4 OF SECTION 29, TOWNSHIP 4 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AND RUN N.00°28'27"W., ALONG THE WEST LINE OF SAID NE 1/4, 332.95 FEET; THENCE N.89°32'32"E., 30.41 FEET TO THE WESTERLY RIGHT-OF-WAY LINE OF SW TUSTENUGGEE AVENUE; THENCE S.08°09'25"E., ALONG SAID RIGHT-OF-WAY LINE, 335.99 FEET TO THE SOUTH LINE OF SAID NE 1/4; THENCE S.89°33'01"W., ALONG SAID SOUTH LINE, 75.32 FEET TO THE POINT OF BEGINNING. CONTAINING 0.40 ACRES, MORE OR LESS.

ALSO:

BEGIN AT THE SE CORNER OF THE NE 1/4 OF SECTION 29, TOWNSHIP 4 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AND RUN N.00°00'29"E., ALONG THE EAST LINE OF THE NE 1/4, 666.50 FEET; THENCE S.89°32'29"W., 131.00 FEET; THENCE N.00°00'29"E., 666.48 FEET TO THE NORTH LINE OF THE SE 1/4 OF THE NE 1/4 OF SAID SECTION 29; THENCE S.89°31'57"W., ALONG SAID NORTH LINE, 1194.97 FEET TO THE NW CORNER OF SAID SE 1/4 OF THE NE 1/4; THENCE S.00°15'08"E., ALONG THE WEST LINE OF SAID SE 1/4 OF THE NE 1/4, 333.14 FEET; THENCE S.89°31'34"W., 661.93 FEET; THENCE N.00°21'48"W., 333.04 FEET TO THE NORTH LINE OF THE SW 1/4 OF THE NE 1/4; THENCE S.89°31'05"W., ALONG SAID NORTH LINE, 662.58 FEET TO THE NW CORNER OF THE SW 1/4 OF THE NE 1/4 OF SAID SECTION 29; THENCE S.00°28'27"E., ALONG THE WEST LINE OF SAID SW 1/4 OF THE NE 1/4, 175.02 FEET TO THE EASTERLY RIGHT-OF-WAY LINE OF SW TUSTENUGGEE AVENUE; THENCE S.08°09'25"E., ALONG SAID RIGHT-OF-WAY LINE, 284.68 FEET; THENCE N.89°32'02"E., 70.69 FEET; THENCE S.00°28'27"E., 208.75 FEET; THENCE N.89°32'03"E., 452.54 FEET; THENCE S.00°21'48"E., 333.04 FEET; THENCE S.89°32'32"W., 549.51 FEET TO SAID EASTERLY RIGHT-OF-WAY LINE OF SW TUSTENUGGEE AVENUE; THENCE S.08°09'25"E., ALONG SAID RIGHT-OF-WAY LINE, 336.00 FEET TO THE SOUTH LINE OF SAID NE 1/4; THENCE N.89°33'01"E., ALONG SAID SOUTH LINE, 1163.94 FEET TO THE SW CORNER OF THE SE 1/4 OF THE NE 1/4 OF SAID SECTION 29; THENCE CONTINUE N.89°33'01"E., ALONG SAID SOUTH LINE OF NE 1/4 1319.91 FEET TO THE POINT OF BEGINNING. CONTAINING 66.66 ACRES, MORE OR LESS.

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: 7/1/2010 DATE ISSUED: 7/7/2010

ENHANCED 9-1-1 ADDRESS:

975 SW JONES

TER

LAKE CITY FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

29-4S-17-08847-000

Remarks:

2ND LOC

Address Issued By:



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.

A & B Well Drilling, Inc.
5673 NW Lake Jeffery Road
Lake City, FL, 32055
(O) 386-758-3409
(F) 386-758-3410
(C) 386-623-3151

11/6/2009

To: Columbia County Building Department

Description of well to be installed for Customer: 4" residential well
Located at Address: 5W Jones Terrace

1 hp 15 GPM Submersible Pump, 1 1/2" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce H Park

Sincerely
Bruce Park
President

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, Robert Puckett, license number IM0000707

state that the installation of the manufactured home for owner

Lena Lofton at

911 Address: SW Toner Terrace City Lake City FL 32025

will be done under my supervision.

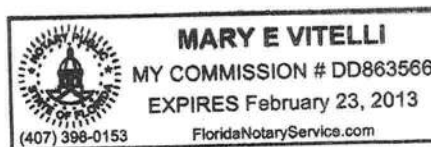
Signed: Robert Puckett
Mobile Home Installer

Sworn to and described before me this 6th day of July 20 10

Mary E Vitelli
Notary public

Mary E. Vitelli Personally known X
Notary Name

DL ID _____





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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Puckett, give this authority for the job address show below
Installer License Holder Name

only, 5W Jones Terrace Lake City FL 32025, and I do certify that
Job Address

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

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

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

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

Robert Puckett
License Holders Signature (Notarized)

1H0000707 7-6-10
License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Marion

The above license holder, whose name is Robert Puckett,
personally appeared before me and is known by me or has produced identification
(type of I.D.) on this 6th day of July, 2010.

Mary E Vitelli
NOTARY'S SIGNATURE

(Seal/Stamp)



App # 1007-09

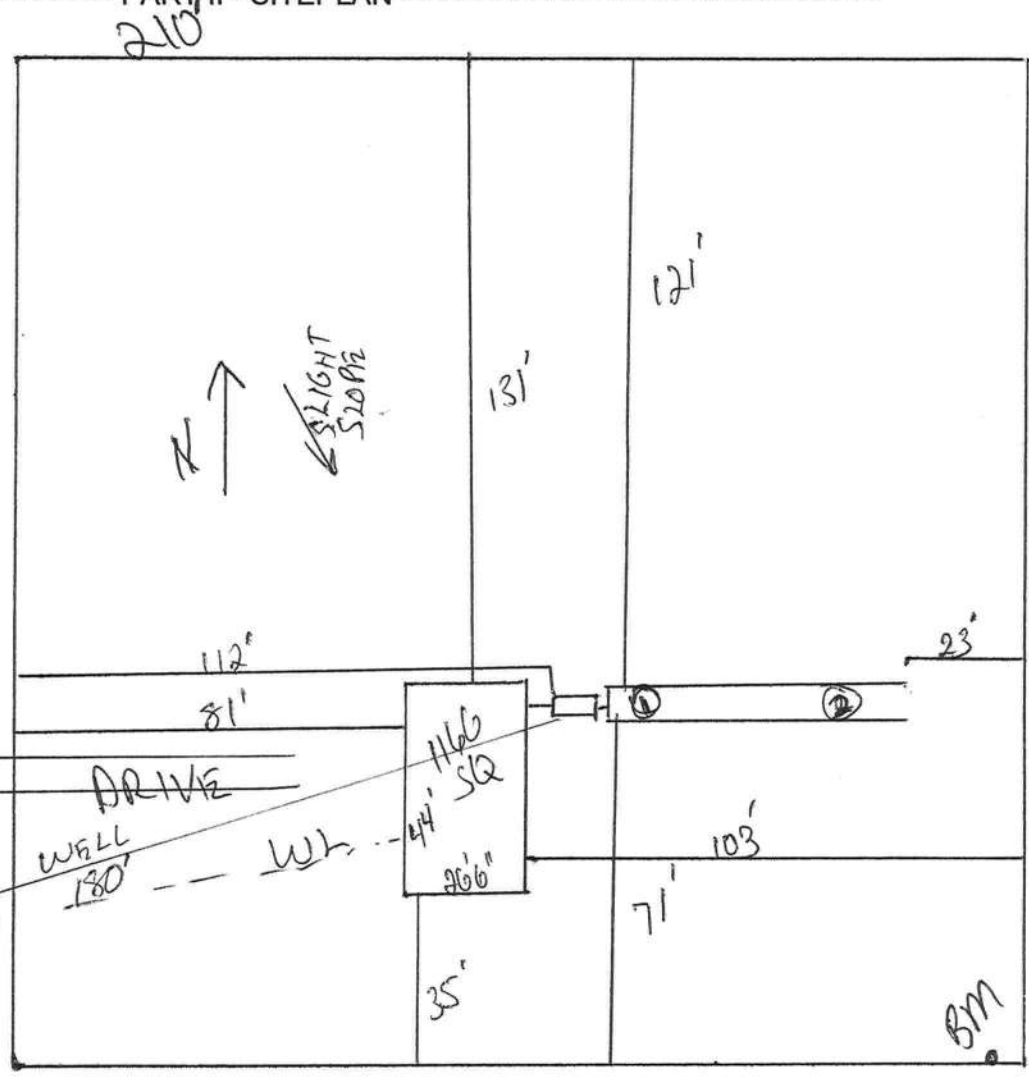
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10-0344

LaSton ----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.

SEE ATTACHED
IRREGULAR
PROPERTY



Notes:

1 of 67 Acres

Site Plan submitted by:

Rock n 7-10

MASTER CONTRACTOR

Plan Approved

Not Approved

Date 7-16-10

By Silbi Ford - EH Director

Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Puckett PHONE 352-266-9297

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

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL <u>234</u> <u>OK</u>	Print Name <u>Michael S Conner</u> License #: <u>ER13013192</u>	Signature <u>Michael S Conner</u> Phone #: <u>386-758-2233</u>
MECHANICAL/A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/GAS <u>188</u> <u>OK</u>	Print Name <u>Robert Puckett</u> License #: <u>IH0000707</u>	Signature <u>Robert Puckett</u> Phone #: <u>352-266-9297</u>
ROOFING	Print Name <u>check on plumbing</u> License #: <u>at permit</u>	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Lena Lotton

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1007-09

CONTRACTOR

Robert Puckett

PHONE

352-266-9297

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

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C <u>OK-358</u>	Print Name <u>MICHAEL BOLAND</u> License #: <u>CAC1816480</u>	Signature <u>[Signature]</u> Phone #: <u>800-576-5713</u>
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

MASON
CONCRETE FINISHER
FRAMING
INSULATION
STUCCO
DRYWALL
PLASTER
CABINET INSTALLER
PAINTING
ACOUSTICAL CEILING
GLASS
CERAMIC TILE
FLOOR COVERING
ALUM/VINYL SIDING
GARAGE DOOR
METAL BLDG ERECTOR

§. 5. 440.108 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: 6/09