This Permit Expires One Year	r From the Date of Issue 000025232
APPLICANT JEFF HARDEE	PHONE <u>352.949.0592</u>
ADDRESS 6750 NW 72 LANE	CHIEFLAND FL 32626
OWNER JOSH ANDERSON	PHONE 352.490.6100
ADDRESS 518 SE SHARON LANE  CONTRACTOR FESSIE L CHESTER KNOWLES	LAKE CITY FL 32025
CONTRACTOR JESSIE L. CHESTER KMOWLES	PHONE 386.755.6441
LOCATION OF PROPERTY  SR 100 TO PRICE CREEK RD,TR  THE END.(2ND FROM END ON I	TO SHARON LN,TR PROPERTY IS @
	IMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA	A HEIGHT STORIES
FOUNDATION WALLS RO	OOF PITCH FLOOR
LAND USE & ZONING RR	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 25.00	REAR 15.00 SIDE 10.00
NO. EX.D.U. 1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 15-4S-17-08355-120 SUBDIVISION	PERRY PLACE
LOT 20 BLOCK A PHASE UNIT	TOTAL ACRES 1.02
Culvert Permit No. Culvert Waiver Contractor's License Numb  EXISTING 06-0981MD BLK  Driveway Connection Septic Tank Number LU & Zoning	CFSN
COMMENTS: 1 FOOT ABOVE ROAD.REPLACING EXISTING M/H.	Check # or Coch 7914
	Check # or Cash 7914
FOR BUILDING & ZONING	
FOR BUILDING & ZONING  Temporary Power Foundation	DEPARTMENT ONLY (footer/Slab)  Monolithic
Temporary Power Foundation date/app. by	Monolithic date/app. by (footer/Slab)
FOR BUILDING & ZONING  Temporary Power Foundation	DEPARTMENT ONLY (footer/Slab)  Monolithic
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above	Monolithic date/app. by  Sheathing/Nailing
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by	Monolithic date/app. by  Sheathing/Nailing date/app. by  date/app. by
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by  Electrical rough-in Heat & Air Duct	Monolithic  date/app. by  Sheathing/Nailing  date/app. by  date/app. by  ve slab and below wood floor  Peri. beam (Lintel)
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above  date/app. by  Electrical rough-in Heat & Air Duct  date/app. by	Monolithic  date/app. by  Sheathing/Nailing  date/app. by  date/app. by  ve slab and below wood floor  Peri. beam (Lintel)  date/app. by
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FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by  Electrical rough-in Heat & Air Duct date/app. by  Permanent power C.O. Final  date/app. by date  M/H tie downs, blocking, electricity and plumbing	Monolithic  date/app. by  Sheathing/Nailing  date/app. by  date/app. by  ve slab and below wood floor  Peri. beam (Lintel)  date/app. by  Culvert  te/app. by  Pool
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by  Electrical rough-in Heat & Air Duct  date/app. by  Permanent power C.O. Final  date/app. by  M/H tie downs, blocking, electricity and plumbing  Reconnection Pump pole	Monolithic  date/app. by  Sheathing/Nailing  date/app. by  Sheathing/Nailing  date/app. by  ve slab and below wood floor  Peri. beam (Lintel)  date/app. by  Culvert  te/app. by  Pool  Dy  date/app. by
FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by  Electrical rough-in Heat & Air Duct  date/app. by  Permanent power C.O. Final  date/app. by  M/H tie downs, blocking, electricity and plumbing  Reconnection Pump pole  date/app. by  date/app. by	Sheathing/Nailing date/app. by Sheathing/Nailing date/app. by we slab and below wood floor  Peri. beam (Lintel) date/app. by Culvert te/app. by  Pool  Utility Pole  Jop. by  Monolithic  date/app. by
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FOR BUILDING & ZONING  Temporary Power Foundation  date/app. by  Under slab rough-in plumbing Slab  date/app. by  Framing Rough-in plumbing above date/app. by  Electrical rough-in Heat & Air Duct  date/app. by  Permanent power C.O. Final  date/app. by date  M/H tie downs, blocking, electricity and plumbing  Reconnection Pump pole  date/app. by  M/H Pole Travel Trailer  date/app. by  BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$	B DEPARTMENT ONLY    Monolithic     date/app. by   date/app. by     Sheathing/Nailing     date/app. by   date/app. by     ve slab and below wood floor     Peri. beam (Lintel)     date/app. by   date/app. by     Culvert     te/app. by   date/app. by     Doy   date/app. by     Culvert     Doy   date/app. by     Doy   date/app. by     Doy   date/app. by     Culvert     Doy   date/app. by     Doy   Doy   date/app. by     Doy   Doy   Doy     Doy   Doy   Doy

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."

This Permit Must Be Prominently Posted on Premises During Construction

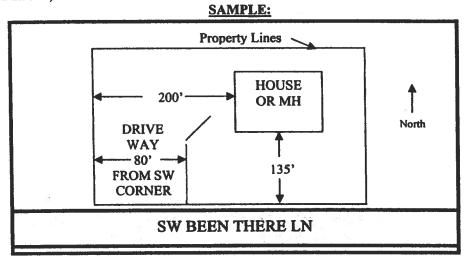
PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

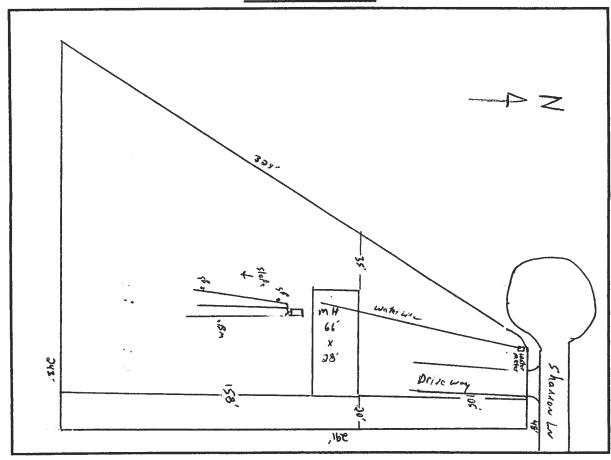
For Office Use Only (Revised 9-22-06) Zoning Official 1/7/0 Building Official 0/ 7/H /- 0/6
AP# 06/0-12 Date Received 11/6/06 By Tw Permit # 25232
Flood Zone Development Permit N/A Zoning RR Land Use Plan Map Category RVLD
Comments
FFMA Man# Flavation / Finished Flavat
FEMA Map# Elevation Finished Floor River In Floodway Community white Site Plan with Setbacks Shown DEH Signed Site Plan AN EH Release ##Well letter DExisting well
Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer
State Road Access Parent Parcel # STUP-MH
Property ID# 083 55-120 (15-45-17) Subdivision Fry Plate Log 20 BIK A.
New Mobile Home Used Mobile Home Year 2002
• Applicant Jeff Hudee Phone # 352 - 949 - 0592
- Address 6450 Nw 12 LN the fland FL 37676
Name of Property Owner Josh Anderson Phone# 352-490 - 6100
= 911 Address 518 SE Shown, UNC , LAKE C74 71 32025
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Progress Energy</u>
Name of Owner of Mehile Home Toland
Name of Owner of Mobile Home Josh Anderson Phone # 352 -490 -6100  Address 312 SW Pilots Way Lake City FL 37074
■ Relationship to Property Owner
Current Number of Dwellings on Property
■ Lot Size 18×129   X245 X 329 Total Acreage 1,02 AC
Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Putting in a Culvert) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home Yes (ASSESSMENT) CHANGED
■ Driving Directions to the Property     Driving Directions to the Property   Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Directions to the Property     Driving Direction
then Tun Right on to = Price creek Rd
Then turn Right on Shakkon La Property on Left and
from and.
■ Name of Licensed Dealer/Installer <u>Jessie L chester Kawles</u> Phone # 381 -755 - 6441
Installers Address 580/ He gall 47 Lake (it = 3 2024
License Number TH 4/00 509 Installation Decal # 22/300
100100 Hamber 4 1000 30 1 1000 1000 1000 1000 1000 10

1264

- 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:**

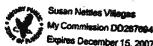


## MOBILE HOME INSTALLER AFFIDAVIT

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.

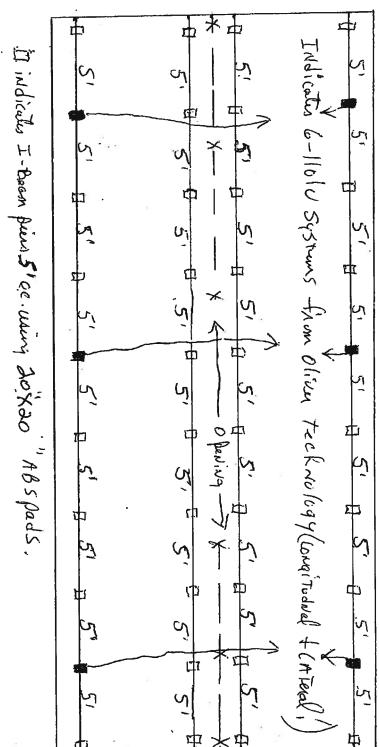
1, Jessie L'Chester KNOW	(a.c., licenso	number IH <u>0000 50 9</u>
Please Print		d home for TEFF HARDEE
Please Print do hereby state that the installat	ion of the manutacture	Applicant
JOSH AND ERSON	at	911 Address
will be done under my supervision	on.	
Just I Church Moule Signature	<u>.</u>	
Sworn to and subscribed before	me this 6th day of	November.
20 <u>06</u> .	100	0.91
Notary Public: Signature	41 July	<b>)</b>
My Commission Expires:	) 15 07 Date	
	300	



### LIMITED POWER OF ATTORNEY

I, <u>Jessie Chester Knowles</u> license # <u>IH0000509</u> hereby authorize
Jeff HARDEE to be my representative and act on my
behalf in all aspects of applying for a mobile home permit to be
placed on the following described property located in
Columbia County, Florida.
Property Owner: Josh ANDERSON
911 Address:
Parcel ID#: 15-45-17-083.55-120
Sect: 15 Twp: 45 Rge: 17
Mobile Home Installer Signature Date
Sworn to and subscribed before me this 6th day of November, 20_0()  Swar(M. Jilligan  Notary Public
My Commission expires: 12-15-07  Commission Number: DD 247694  Personally known: 10000 traveleo  Produced ID (type):

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding with between multi-wide units. Pg	ALL TESTS WUST BE PERFORMED BY A LICENSED INSTALLER Installer Name    Installer Name	Note: A state approved lateral arm system is being used and 4 ft. anothers are allowed at the sidewall locations. I understand 5 ft anothers are required at all centertine its points where the torque test reading is 275 or less and where the mobile frome manufacturer may requires anchors with 4800 lb holding capacity.  Installer's initiats	TORQUE PROBETEST  The results of the torque probe test is Alfa war firsh pounds or check have if you are declaring 5 enobors without leading the pounds of check showing 275 inch pounds or less will require 4 fool enchange. A test	POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the home at 6 focations.  2. Take the reading at the depth of the focier.  3. Using 500 lb. increments, take the lowest reading and round down to that increment.	The pocket penetrometre Test  The pocket penetrometer lesis are rounded down to 1000 psf or check here to declare 1000 lb. sol without festing.  x 1:0 x (.0 x 1.0 x 1.0	
Installer verifies all information given with this pernit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 18C-1 & 2 installer Signature Addition of Columnia Minimum Datu 11-6-06		Bottom of ridgebeam Yes  Weatherpreding  The bottomboard will be repaired and/or taped. Yes Siding on units is instalted to manufacturer's specifications. Yes Fireplace chinney instalted so as not to allow intrusion of rain water. Yes	Type gasket Coll Floar Installed:  Type gasket Coll Floar Installed:  Belween Floors Yes  Belween Walls 'Ves	Type Fastener: 1240 Type F	lal ramove WS evocutal ra	



Nama:

Address:

diginal best

POYCE! 1.1). # - 48355-120

This Instrument Prepared by & return to:

davist, an employee of

TITLE OFFICES, LLC 1089 SW MAIN BLVD

Fila No. 05Y-10012LD

Inst: 2005026910 Date: 10/28/2005 Time: 09:54 Doc Stamp-Deed : 210.00 DC,P. Dewitt Cason, Columbia County B: 1063 P:807 LAKE CITY, FLORIDA 32025 SPACE ABOVE THIS LIVE FOR RECORDING DATA SANCE ABOVE THIS LINE POR PROCESSING DATA . THIS WARRANTY DEED Made the 14th day of October, A.D. 2005, by VENTURE CAPITAL ELLITE, INC., A FLORIDA CORPORATION, having its principal place of business at 5731 NW 601H STREET, PARKLAND, FLORIDA 32067, hereinafter called the grantor, to JOSHUA A ANDERSON, whose post office address is (SINGLE) 312 SW L'ILOIS WAY, LAKE CITY, FL 32024, hereinafter called the grantes: (Wherever used haven the terms "grantor" and "grames" include all the parties to this instrument, singular and plural, the beirs, legal representatives and analysis of individuals, and the successors and assigns of corporations, wherever the contact or admits or requires.) Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in Celumbia County, State of FLORIDA, viz: Lot 20, Block A, PERRY PLACE, according to the map or plat thereof as recorded in Plat Book G, Page 195, of the Public Records of Columbia County, FLORIDA. The above described property is not the homestead of the grantor-Tree-tree with all the tenements, hereditaments and appurtenances thereto belonging or in anywise To Have and to Hold the same in fee simple forever. and a strong communes with said granica inactic is inwritty sciend at and land in the simple: that it and species in more in salt and convey social land, and herapy fully warronts 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 tomes accruing subsequent to December 31, 2004. In Witness Whereof, the said grantor has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its proper officers thereunto duly authorized, the day and year first above written. WILLIAM WILSON, President Name: Title:

Signed, souled and delivered in the presence of: Printed Name

COUNTY OF BLOWARD

instrument was acknowledged before me this 14th day of October, 2005, by WILLIAM WILSON as President . FENTURE CAPITAL ELITE, INC., A FLORIDA CORPORATION. He (she) is personally known to as identification. ma -- 2-- .

Shelleon King My Commission Di0385327

Expires 01/11/2009

Notary Public My commission expires

STATE OF FLORIDA COUNTY OF\_

MATERIAL MAT

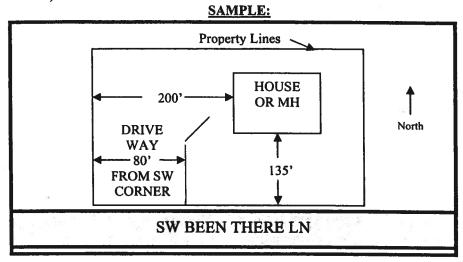
The foregoing instrument was acknowledged before me this 14th day of October, 2005, by, who is known to me as identification. or who has produced

FROM : COLUMBIA CO BUILDING + ZONING FA: NO. :386-758-2160 Nov. 13 2006 10:17AM OUT OF COUNTY MOBILE HOME INSPECTION REPORT COUNTY THE MOBILE HOME IS BEING MOVED FROM OWNERS NAME JOSK ANderson Knurelle MOBILE HOME INFORMATION MAKE SERIAL No. COLOR SMOKE DETECTOR WIND ZONE INTERIOR: cors got wet of has to FLOORS DOORS . WALLS \_ CABINETS ELECTRICAL (FIXTURES/OUTLETS) EXTERIOR: WALLS / SIDDING WINDOWS DOORS STATUS: NOT APPROVED **APPROVED** INSTALLER OR INSPECTORS PRINTED NAME Installer/Inspector Signature ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM. NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED. BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT. ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-718-2038 TO SET UP THIS INSPECTION, NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

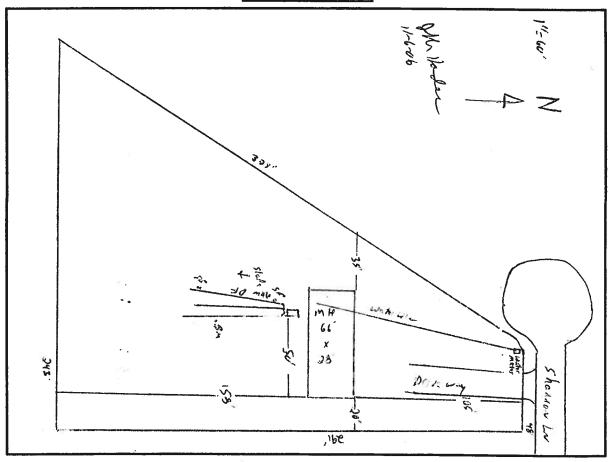
I . 9

appr 11/13/06

- 1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
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- 4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).



### **SITE PLAN BOX:**



Page 2 of 2

## PRELIMINARY MOBILE HOME INSPECTION REPORT

ATE RECEIVED _	11- 14 OC BY TW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED TES
<u> </u>	JOSH ANDERSON PHONE 352. 490 6100 CELL
ADDRESS	5/8 SE SHARON W, LAKE GITS, 14/ 32024
MOBILE HOME PA	
DRIVING DIRECT	IONS TO MOBILE HOME \$ 100 to POICE CIFFE-TI to SHAMON LUTE
	# Property ON CEST + PND from End.
	Adam 1/
	NSTALLER ( MESTE / LADWES PHONE 755-644) CELL_
	E INFORMATION COLOR COLO
	#/EFFGUOL YEAR 2002 SIZE 28 x 66 COLOR GREY
	6485AH
WIND ZONE	TOTAL PARTY OF THE
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 ( ) INOPERABLE ( ) MISSING
-4	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
-/	
	ROOF ( ) APPEARS SOLID ( ) DAMAGED
STATUS: APPROVED	WITH CONDITIONS:
NOT APPROVE	DNEED REINSPECTION FOR FOLLOWING CONDITIONS
SIGNATURE	My Real DATE 11-14-01

25232

# CODE ELITEURCEIVIELT I VELIMINARY MOBILE HOME INSPECTION REPORT



TE RECEIVED _	11. 14. OC BY TW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED FIS
	JOSN ANDERSON PHONE 352. 40 6/00 CELL
DRESS	518 SE SHARON W, LAKE GITS, 41 32024
OBILE HOME P	ARKSUBDIVISION
RIVING DIRECT	THE PROPERTY ON LESS TEND FROM CAL.
OBILE HOME I	NSTALLER (NESTE / KARRIES PHONE 755-644) CELL_
	E INFORMATION ,
AKE	FIEFFWOOD YEAR 2002 SIZE 28 x 66 COLOR GREY
ERIAL No	6485AH
/IND ZONE	Must be wind zone II or higher NO WIND ZONE I ALLOWED
NTERIOR: P or F) / P=	PASS F= FAILED
1	SMOKE DETECTOR () OPERATIONAL () MISSING
_//	FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION
_/_	DOORS ( ) OPERABLE ( ) DAMAGED
/,	WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND
	WINDOWS () OPERABLE () INOPERABLE
1	
	PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING
	CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT
EXTERIOR:	ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING
	WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
	WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT
	ROOF ( ) APPEARS SOLID ( ) DAMAGED
STATUS: APPROVED_	WITH CONDITIONS:
Acceptance of the Control of the Con	DNEED REINSPECTION FOR FOLLOWING CONDITIONS
SIGNATURE_	Day DATE HOLES