	8/2011	This Permit Mus	t Re Prominently Posts	Building Permit d on Premises During Co	t .	PERMIT
APPLICANT	WAYNE C		De i Tommentiy i oste			000029169
ADDRESS	1269	SW HIGH FIELD	TEDDACE	PHONE	386-438-4437	Vad 87.55
OWNER		ARNER & BELVA	2 Control of the state of the s	LAKE CITY	420,4427	FL 32024
ADDRESS	1269	SW HIGHFIELD		PHONE LAKE CITY	438-4437	TI 2222
CONTRACTO	R BERN	JIE THRIFT		PHONE	386.623.0046	FL 32024
LOCATION O			TO MEADOWLANDS	DRIVE,TR, TO HIGH F	The state of the s	TD
			END ON RIGHT.	Bid vE, IK, TO HIGH F	IELDS TERRACE,	IR .
TYPE DEVELO	OPMENT	M/H/UTILITY	ES	STIMATED COST OF CO	ONSTRUCTION	0.00
HEATED FLOO	OR AREA		TOTAL AR		HEIGHT	
FOUNDATION		WAI			Companies Compan	STORIES
LAND USE & 2	-		LLS	ROOF PITCH	FLC	OOR
		<u>A-3</u>		MAX	X. HEIGHT 30	K.
Minimum Set B	ack Requirme	ents: STREET	25.00 25.00	REAR	25.00	SIDE
NO. EX.D.U.	0	FLOOD ZONE	X	DEVELOPMENT PERI	MIT NO.	
PARCEL ID	36-5S-16-037	761-153	SUBDIVISIO	N MEADOWLANDS		
LOT 53	BLOCK	PHASE	4 UNIT			
					ACRES	
Culvert Permit No		ulvert Waiver	IH10251551	Lea	eque (Paul
EXISTING		-0053-E	Contractor's License Nun BLK		Applicant/Owner/Co	ontractor
Driveway Connec		ptic Tank Number	4 44 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	-	D roved for Issuance	N N
COMMENTS:				BEFORE PERMANENT	POWED EDUCAT	New Resident
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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 # 2 6247
For Office Use Only (Revised 1-10-08) Zoning Official BLK 08.03 Building Official 100 2-7-11
AP# 1102 02 Date Received 2/2 By Jw Permit # 2 9 1/6 1
Flood Zone Development Permit NA Zoning A-3 Land Use Plan Man Category A-3
Comments Elevation confirmation letter required for permant power
I-EMA Map# N/A Elevation N/A Finished Floor 77 Seet River N/A In Floodway N/A
13-Site Plan with Setbacks Shown DEH # HUS3E DEH Release Well letter Existing well
□-Recorded Deed or Affidavit from land owner □ Letter of Auth. from installer □ State Road Access
□ Parent Parcel # □ STUP-MH □ F W Comp. letter
IMPACT FEES: EMS Fire Corr Road/Code_ IN Sheet
School= TOTAL _ Impact Fees Suspended March 2009 TVF
21 5- 11 6371 153 PLS 5 4 607 53
Property ID # 36-55-16-0376-153 Subdivision MEADOW LANDS ESTATES
New Mobile Home X Used Mobile Home MH Size 28x52 Year 2010
* Applicant WAYIVE CARNER Phone # 386-438-4437
Address 1269 5 W High FIELD TERRARE I C.C. 21 3208
Name of Property Owner BOLVA K CARVER Phone# 256-531-Coloo5
911 Address 1269 5W High FIEDD TERRAL L. (31 320+1
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
)
Name of Owner of Mobile Home (ALVE CARNER Phone # 386-438-4437
Address 1269 5W High Field TERRARE 16.C, 2132024
Relationship to Property Owner 5 pousE
Current Number of Dwellings on Property
Lot Size 5/16 Acres Total Acreage 5/16
Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) (Blue Road Sign) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home 10 - OWEL (as feature on Curr
Driving Directions to the Property CR 131 (TUSTANUAGE) 6 m/les
PAST FLAShing Light AT CRIHON TURN Right OFF OF CRISI
OUT MERCULANDS DR - GO APPROX / MILE TO
5W High FIELD TERE- 90 TO END LOT ON Right.
Name of Licensed Dealer/Installer Bernie Thit Phone # 623 0046
Installers Address 5557 NW Fallen Creek Rd White Springs f
License Number 1025 55-1 Installation Decal # 1960 320

			Therefore were places makes 2 of and of homes per quale 15C			Applical pilor spacing annual Show locations of Longitudinet and Lateral Systems (use dark lanes to show these locations)	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	NOTE: If frome is a single white SN out one held of the blocking plant if frome is a triple or quad white sketch is remainder of frome	269 SW High FIELD TER	isotrate the originate with the packet. Inches 1025155/1	These worksheets must be completed and signed by the installer.
Longitudinal Stabilizing Device (LSD) Menufacturer Longitudinal Stabilizing Certics of Largest Arms Manufacturer (Yeaks) Manufacturer (Yeaks) Manufacturer (Yeaks) Manufacturer (Yeaks) Manufacturer (Yeaks)	within	.	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 25 x 26 176 876	16 x 16 5 16 5 16 5 17 x 27 5 17 x 27 5 17 4 x 27 5 17 4 x 27 6 4 4	PAD SIZES BY A BY	U stan 16 x 16 12 x 16 20 x 20 22 x 22 x 22 24 x 22 25 25 25 25 25 25 25 25 25 25 25 25	PR SPACING TABLE FOR USED HOMES	Triple/Qued: Seriel #	alled in accordance with Rule 15-C Wind Zone II X Wand Zone III	New Home St. Used Horite Home Installed to the Manufacturer's Installed on Manuel Home Installed to the Manufacturer's Installed on Manuel	RMIT WORKSHEET page 1 of 2

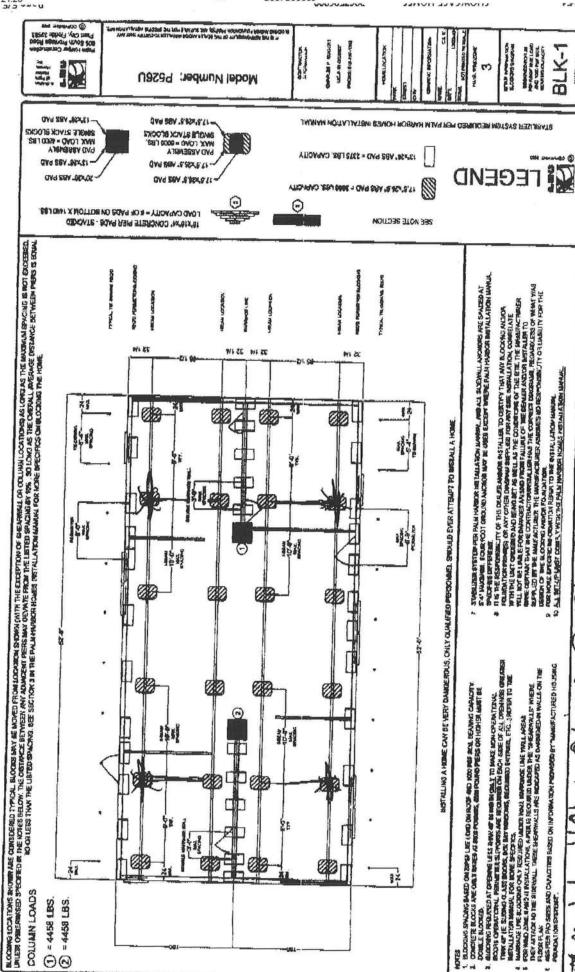
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page 2 of 2

inect all betwer drains to an existing sewer tap or septic tank. Pg	med sledirical conductors between multi-wide units, but not to the main power roe. This truck-des the banding wire between multi-wide units. Pg. 5	Electrics!	ALL TESTS HUST BE PERFORMED BY A LICENSED INSTALLER Vetaler Name Servary Thrift	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewed locations. I understand 5 ft archors are required at all centerline its points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity. Installer's initials	TORQUE PROBE TEST The results of the lorque probe test is 290 † inch pounds or check here if you are declaring 5' enchors without testing. A test showing 275 inch pounds or less will require 5 toot anchors.	SOUTH SOUTH	Using 500 lb. increments, take the lowest reading and round down to that increment.	 rest the pertineter of the home at 6 locations. Take the reading at the depth of the footer. 	POCKET PENETROMETER TESTING METHOD	The pocket penelrumeter tests are rounded down to 2000 per or check here to declare 1000 ib. soil without testing. x 2000 x 2500 x 2500	POCKET PENGTRONGTER TEST
				7100 → 11	.0-1				-	11	

Debris and organic material removed Water drainage: Natural Swale Pad Other Floor: Type Fastener: Lags Length: 5" Spacing: 3-7 Roof: Type Fastener: Spacey Length: 5" Spacing: 3-7 Roof: Type Fastener: Amin. 30 gauge, 6" wide, galvening material strip will be centered ever the peak of the roof and fastened wating galve, roofing naits at 2" on center on both addes of the centerfline. Bellot breakersotia nauthment of all new and used homes and that contensation, molts, meldew and buckted mertiage wells are a requirement of all new and used homes and that contensation, molts, meldew and buckted merriage wells are a result of a poorly installed or no gasket being installed. I understand a sirp of tape will not serve as a gasket. Type gasket factor will be repaired and/or taped. Yes Between Walls Yes Bothom of ridgebeam Yes Stiding on units is installed or manufacturer's specifications. Yes Stiding on units is installed or said of all new and walker. Yes Stiding to be installed. Yes Divisit went installed or materials of a kirting. Yes Fireplace chimmery installed or skirting. Yes Fireplace chimmery protected. Yes Electrical crossovers protected. Yes Detail lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:

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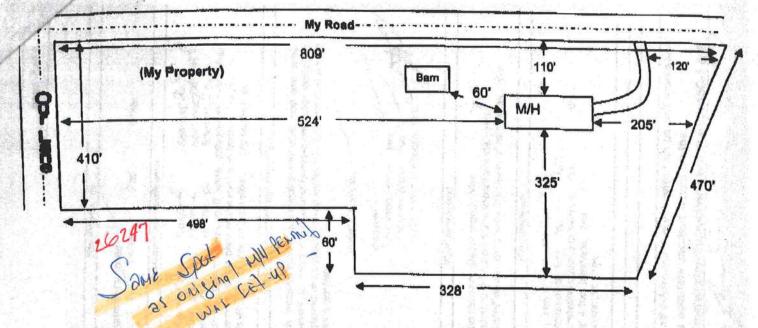
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SITE PLAN EXAMPLE / WORKSHEE!



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.

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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:

9/7/2007

DATE ISSUED:

9/10/2007

ENHANCED 9-1-1 ADDRESS:

1269

SW HIGH FIELD

TER

LAKE CITY

FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

36-58-16-03761-153

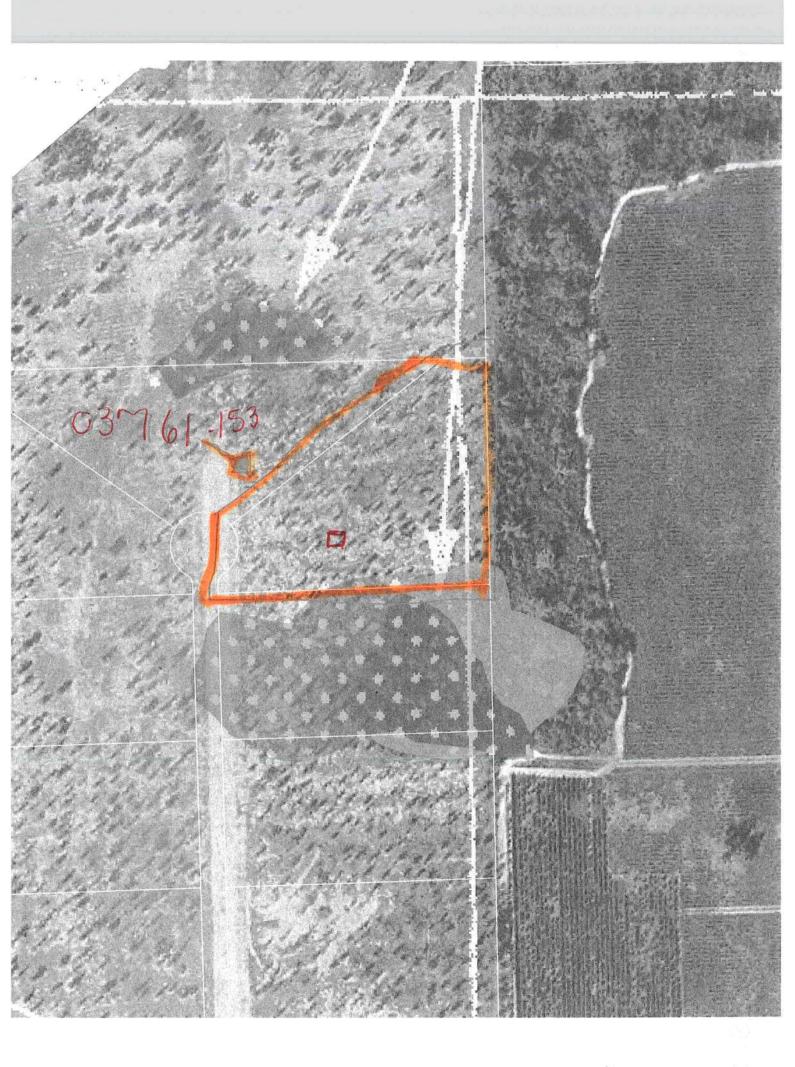
Remarks:

LOT 53 MEADOWLANDS S/D PHASE 4

Address Issued	By:					
	-	olumbis	County 9-1-	1 Address	sing / CIS	Desertment

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.

948



Columbia County Property Appraiser

DB Last Updated: 1/6/2011

Parcel: 36-5S-16-03761-153

< Next Lower Parcel Next Higher Parcel >>

Owner & Property Info

Owner's Name	CARNER BELVA KAY ROGERS						
Mailing Address	3918 CR 8 HANCEVILLE,	3918 CR 8 HANCEVILLE, AL 35077					
Site Address	1269 SW HIGH FIELD TER						
Use Desc. (code)	MISC RES (000700)						
Tax District	3 (County)	Neighborhood	1616				
Land Area	5.160 ACRES	Market Area	02				
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.						
LOT 53 MEADOWLANDS 1005	S S/D PHASE 4 AG	1053-1842, WD 1130-1003 \	WD 1130-				

2010 Tax Year

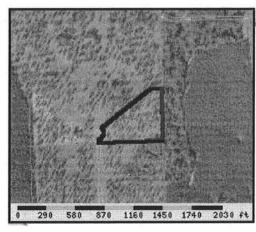
Tax Collector

Tax Estimator Property Card

Parcel List Generator

Interactive GIS Map | Print

Search Result: 1 of 1



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$36,473.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$42,140.00
XFOB Value	cnt: (1)	\$3,456.00
Total Appraised Value		\$82,069.00
Just Value		\$82,069.00
Class Value		\$0.00
Assessed Value		\$82,069.00
Exempt Value	(code: HX)	\$50,000.00
Total Taxable Value	Other	Cnty: \$32,069 : \$32,069 Schl: \$57,069

2011 Working Values

NOTE:

2011 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
9/4/2007	1130/1003	WD	٧	U	04	\$0.00
9/4/2007	1130/1005	WD	V	Q		\$63,000.00
2/21/2005	1053/1842	AG	V	U	08	\$50,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
			NONE	Y	7	

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2007	\$3,456.00	0000288.000	12 x 24 x 0	(000.00)
0070	CARPORT UF	2010	\$600.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000700	MISC RES (MKT)	1 LT - (0000005.160AC)	1.00/1.00/1.00/1.00	\$34,473.60	\$34,473.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 1/6/2011

1000	COLUMBIA CO BUILDING + ZONING FAX NO. :386-758-2160 JMC Sep. 05 2007 11:50AM P2
	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
	For Office Use Only (Revised 9-22-06) Zoning Official of 9/12/0 Building Official OK 57H 9- AP# 0709- 18 Date Received 9/7 By TW Permit # 1452/ 26247 Flood Zone X Development Permit Zoning A-3 Land Use Plan Map Category A-3 Comments
F	EMA Map# Elevation Finished Floor River In Floodway
N	Site Plan with Setbacks Shown EH Signed Site Plan EH Release Well letter AExisting well
ų,	Copy of Recorded Deed or Affidavit from land owner
הו	State Road Access Dearent Parcel # STUP-MH
/	Applicant NayNE L. CARNER Phone # 386-438-4437 CARNER Phon
	Name of Owner of Mobile Home BELUE ROSERS Phone # 438-4437
	Address 182 TOTEM GIN 4 While ,41 32038
	Address 182 TOTEM GIN 41 NATI 41 32038 Relationship to Property Owner Figure F. "
	Address 182 TOTEM GIN 4 While ,41 32038
	Address 182 TOTEM GIN 41 INVIT 41 32038 Relationship to Property Owner Figure F " Current Number of Dwellings on Property O Lot Size Total Acreage 5, 13 ACRES
	Address 182 TOTEM GIN 11 INCHE Prone # 738-443.7 Relationship to Property Owner Figure F Current Number of Dwellings on Property O Lot Size Total Acreage 5, 13 ACRES Do you: Have Existing Drive or Private Drive or need Culvert Permit of Culvert Waiver (Citicle one
	Address 182 TOTEM GIN 11 11 11 11 32038 Relationship to Property Owner Figure 7 Current Number of Dwellings on Property O Lot Size Total Acreage 5, 13 ACRES Do you: Have Existing Drive or Private Drive or need Culvert Permit (Currently using) (Blue Road Sign) Is this Mobile Home Replacing an Existing Mobile Home
	Address

TO ENTRANCE TO MEADOW LANDS' SUBDIVISION

PROCEDE APPOX IMITE TO HIGH FIELDS TERE THEN RI

GO TO COL- JE-SAS-LOTO #53 - ON FIGHT

Name of Licensed Dealer/Installer KONNIVE N. O. M.) Phone # 752 3871

Installers Address Rt 10045W Cht follow

License Number I HODOOGY 9 Installation Decal # 289964

TO RENOWBED 9.17.07 (MR. GANN.)

The ravilar me CARNER 9.12.07

APPLICANT WAYNE CANNER SET STOTEM GLEN FT. WHITE STOTEM GLEN FT. WHIT	DATE 09/17/2007	PERMIT 000026247			
NONE	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	NER	I	PHONE 386-438-443	7
None			FT. WHITE	-	-
No			The plants of the Arthur Maria Control of the Arthur Maria	PHONE 438-4437	
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BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00	udite/8	in the second se			

300/304100

BUILDING AND ZONING

PAGE 01/01



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Charles	rno	ne: 386-758-1008	Fax: 386-75	8-2160	-
Bernara	BILEHOM	E INSTALLERS L			
The state of the s	icense Holder No	give	this authority	for the job a	address show below
only, 1269 3	EWH				
the helpsy reforms	-4	Job Address	FI	1 3202	and I do certify that
and is/are authorize	od person(s)	listed on this form	is/ans under n	av dimen sum	am data
The state of the s	o to barcita	se permits, call for i	nspections ar	d sign on m	y behalf.
Printed Name of A	uthorized	Signature of Auth	orized	Authorize	d Person is
		Person		(Check o	ne)
Behva Co	rner	Belva C	arner		erty Owner
MAYNE C	JRNEN			Carrie of the Party and Publishers of the Party of the Pa	erty Owner
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the license holder	realize that I	am responsible for	all normits		
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Local Ordinances			THE PARTY OF	FIGRICA STA	wes, Codes, and
I understand that the holder for violations or	State Licens	sing Board has the r	Mar and ad	dan da da da	• • •
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License Holders Signa	My	200	102515		10/11
		200)	License Num	iber	Date
NOTARY INFORMATI	OW.	COUNTY OF:	1. 1.1		
The above license hold	ler whom n	n			
(type of I.D.) Derson	THE Know	on this _	2 day of	Feb	20 11
1 Homes	el				,
NOTARY'S SIGNATURE		***************************************	(Sea	/Stamp)	
/	WEST ARY	J. HOWELL		-1	
	* . 10 *	MY COMMISSION # D	, D 70040		

* EXPIRES: January 17, 2012 Bonded Time Budget Notary Senices

NO

AA /LA ---

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number - PART II - SITEPĻAN -Scale: 1 inch = 50 feet. 210 60 109 WELL 529 DRIVE rg 165 la, 85 648' DITCH 1 of SACRES Notes: MASTER CONTRACTOR Site Plan submitted by Not Approved Date Plan Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

County Health Department



Incorporated 64E-6.001, FAC

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

	11-0053E
PERMIT NO.	992404
DATE PAID: FEE PAID:	135,00
RECEIPT #:	7560096

Page 1 of 4

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: BELVA K CAPNER
AGENT: WAYNE + BELVA CAPULE TELEPHONE: 386-438-443
MAILING ADDRESS: 1269 5W High Filld TERRALE
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATION
LOT: 53 BLOCK: NA SUBDIVISION: MEASONS PHY PLATTED: 7/18/03
PROPERTY ID #: 36-55-16-03761-153 ZONING: Ag I/M OR EQUIVALENT: [Y / 10]
PROPERTY SIZE: 5// ACRES WATER SUPPLY: PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N] DISTANCE TO SEWER: N
PROPERTY ADDRESS: 1769 SIN High Field TERRARE, LAKE City FL 32024
DIRECTIONS TO PROPERTY: SOUTH ON CRISI TO MEASON & ESTATES
TR ON MER-bustands DR, go I mile & TROW High FIELD TERR
GOTO END, PROPERTY ON EighT
BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 ORIGINAL ATTACHED
$\frac{1080}{}$
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: Wagne & Cane DATE: Leb Z, 2011
DH 4015, 08/09 (Obsoletes previous editions which may not be used)

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 110 2	CONTRACTOR BERNIE	Heft	PHONE 623-0096

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.

ELECTRICAL	Print Name CRAIGS ELEC. SERVICE License #: ER 0014642	Signature #: 386 391 3810
MECHANICAL/ A/C	Print Name David Hall's Inc License #: CACO 57424	Signature Phone #: 386 755 9797
		Signature Bernel 26 623 00 46

Specialty License	Lic	ense Number	Sub-Co	ontractors Printed Name	Sub	-Contractors Signature
MASON		ľ			345	- contractors signature
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.



Donald F. Lee & Associates, Inc.

140 NW Ridgewood Avenue Lake City, Florida 32055

PH 386-755-6166 FAX 386-755-6167 email: donald@dfla.com

website: www.dfla.com

- Highway & Route Surveys
- Topographic Surveys
- Land & Subdivision Surveys Control Surveying

Since 1984

Monday, February 21, 2011

TO: Columbia County Building Department

CC: Wayne Carner

RE: Floor Elevation Check - Lot 53, Meadowlands Phase 4

Elevations (based on a local benchmark) were obtained on the finished floor for a mobile home placed on the above referenced property. The results are as follows:

Building Floor: 85.47°

This information's datum matches the elevations used in the engineering design of the development (Meadowlands Phase 4).

The engineer for this development has established the 100 year flood elevation at this lot to be 74.5 feet and the Minimum Floor elevation to be 79.0 feet. Both elevations are a part of the recorded subdivision plat.

SIGNED:

Timothy A. Delbene, PLS Florida Reg. Cert. No. 5594

DATE: 2/21/2011

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program

Important: Read the instructions on pages 1-9.

	SECTION	ON A - PROPERTY IN	ORMATION	For Insurance Company Use:			
A1. Building Owner's Name Wayne Carne	Policy Number						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 1269 SW High Field Terrace							
City Lake City State FL ZIP C	ode 32055						
A3. Property Description (Lot and Block N Lot 53, Meadowlands Phase 4 in Sec. 36, 7		mber, Legal Description, e	tc.)				
 A4. Building Use (e.g., Residential, Non-R A5. Latitude/Longitude: Lat. 30°00.43'N A6. Attach at least 2 photographs of the box A7. Building Diagram Number 5 A8. For a building with a crawlspace or enally square footage of crawlspace or enally square footage of crawlspace or enclosure(s) within 1.0 foot above c) Total net area of flood openings in d) Engineered flood openings? 	cong. 82°39.65′W uilding if the Certificate i closure(s): nclosure(s) Nu n the crawlspace or adjacent grade Nu	s being used to obtain floo A9. <u>/A</u> sq ft	For a building with an atta a) Square footage of atta	ched garage: ched garage <u>N/A</u> sq ft I openings in the attached garage djacent grade <u>N/A</u> openings in A9.b <u>N/A</u> sq in			
SEC	TION B - FLOOD IN	SURANCE RATE MAR	(FIRM) INFORMATION	N .			
B1. NFIP Community Name & Community Columbia County, Florida 120070		2. County Name olumbia		B3. State Florida			
B4. Map/Panel Number B5. Suffix 12023C0395 C	B6. FIRM Index Date 2/4/09	B7. FIRM Panel Effective/Revised D 2/4/09	B8. Flood Zone(s) X,A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 74.5			
☐ FIS Profile ☐ FIRM B11. Indicate elevation datum used for BFE	B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No						
SECTION	ON C - BUILDING EL	EVATION INFORMAT	ION (SURVEY REQUIR	ED)			
 Building elevations are based on: A new Elevation Certificate will be requ Elevations – Zones A1-A30, AE, AH, A below according to the building diagram Benchmark Utilized <u>Locak</u>Vertical Datu Conversion/Comments <u>N/A</u> 	(with BFE), VE, V1-V30 specified in Item A7. U	of the building is complete, V (with BFE), AR, AR/A,	AR/AE, AR/A1-A30, AR/A	\$ **			
a) Top of bottom floor (including base	ment crawlenace or er	oclosure floor) 85 47					
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 85.47							
g) Highest adjacent (finished) grade n		82.3 i, including N/A.	☐ feet ☐ meters (Puer ☐ meters (Puer ☐ meters (Puer				
 Lowest adjacent grade at lowest el structural support 							
			HITECT CERTIFICATIO				
This certification is to be signed and sealed information. I certify that the information on I understand that any false statement may be	this Certificate represe	nts my best efforts to inte	pret the data available.	on			
☐ Check here if comments are provided of		lere latitude and longitude censed land surveyor?	in Section A provided by a	SEAL			
Certifier's Name Timothy A. Delbene		License Nu	mber LS 5594	HERE			
Title Land Surveyor & Mapper	Company Name Do	nald F. Lee & Associates,	Inc.	19			
Address 140 NW Ridgewood Ave.	City Lake City	State FL	ZIP Code 32055	T _a			

¥			· · · · · · · · · · · · · · · · · · ·	
IMPORTANT: In these spaces, c				For Insurance Company Use:
Building Street Address (including Apt., 1269 SW High Field Terrace	Unit, Suite, and/or Bldg. No.) or P.	D. Route and Box N	lo.	Policy Number
City Lake City State FL ZIP Code 32	2055			Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, O	OR ARCHITECT	CERTIFICATION (C	ONTINUED)
Copy both sides of this Elevation Certific	cate for (1) community official, (2) in	surance agent/con	npany, and (3) building	owner.
Comments Dwelling is a Mobile Home	. No AC unit or other machinery cu	rrently installed.		
	4.5, shown hereon as BFE, was det bdivision. The same project engine			
Signature Court ()	felliere	Date 2/21/2	011	☐ Check here if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURV	EY NOT REQUIR	RED) FOR ZONE A	O AND ZONE A (WITHOUT BFE)
b) Top of bottom floor (including be E2. For Building Diagrams 6-9 with per (elevation C2.b in the diagrams) of E3. Attached garage (top of slab) is E4. Top of platform of machinery and/E5. Zone AO only: If no flood depth nordinance? Yes No	rade, if available. Check the measure the following and check the approprient grade (LAG). Passement, crawlspace, or enclosure exament, crawlspace, or enclosure exament flood openings provided in the building is feet meter for equipment servicing the building number is available, is the top of the Unknown. The local official must be the feet for equipment servicing the building number is available, is the top of the Unknown. The local official must be the feet for each representative who completes sometis in Sections A, B, and E are contained.	is	whether the elevation feet	is above or below the highest adjacent above or below the HAG. above or below the LAG. so Instructions), the next higher floor the HAG. above or below the HAG. above or below the HAG. the community's floodplain management TIFICATION FEMA-issued or community-issued BFE)
Commonto Donald 1 . 200 de 7 0000 delo	o, me. Lana carreyoro			
	OFOTION C. COMMUNI	TV INFORMATIO	W (ORTIONAL)	Check here if attachment
The local official who is authorized by law	SECTION G - COMMUNI			ce can complete Sections A. B. C. (or F.)
and G of this Elevation Certificate. Comp				
is authorized by law to certify el	levation information. (Indicate the s	ource and date of t	he elevation data in the	
	Section E for a building located in 2			unity-issued BFE) or Zone AO.
	s G4-G9) is provided for community			
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certificate Of Co	ompliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ So	ubstantial Improvem	nent	
G8. Elevation of as-built lowest floor (inc			et meters (PR) Da	
G9. BFE or (in Zone AO) depth of floodir	ng at the building site:		et meters (PR) Da	
G10. Community's design flood elevation	-		et meters (PR) Da	
Local Official's Name		Title		
Community Name		Telephon	9	
Signature		Date		
Comments				

Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1269 SW High Field Terrace	Policy Number
City Lake City State FL ZIP Code 32055	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



FRONT VIEW OF HOUSE



REAR VIEW OF HOUSE

