DATE 08/0)5/2009	Colu	ımbia Co				ectruotion		RMIT
ADDI ICANIT	CTEVE A		ist de Fromine	ntiy Fosteu on		HONE			027991
APPLICANT ADDRESS	STEVE A	SW KOONVILI	F AVENUE		LAKE CITY	HUNE	386.438.4288	- FL	32024
OWNER	STEVE A		SE A VENUE			HONE	386.438.4288		
ADDRESS	848	SW KOONVILI	LE AVENUE		LAKE CITY	10112	300112011200	- FL	32024
CONTRACTO		TODD			-	HONE	386.688.7372		-
LOCATION O	F PROPER	TY 90-W	TO KOONVILI	LE,TL AND IT	'S 1/2 MILE (ON R AC	ROSS	-	
		FROM	ARCHIE GLN	í.					
TYPE DEVEL	OPMENT	M/H/UTILIT	Y	ESTI	MATED COS	T OF CO	NSTRUCTION	0.0	00
HEATED FLO	OOR AREA			TOTAL AREA	-		HEIGHT	S	TORIES
FOUNDATIO	N	W	ALLS	RO	OF PITCH		Fl	LOOR	
LAND USE &	ZONING	A-3				MAX	. HEIGHT		
Minimum Set	Back Requir	rments: STRE	ET-FRONT	30.00	R	EAR	25.00	SIDE	25.00
NO. EX.D.U.	0	FLOOD ZO	NE X		DEVELOPME	NT PERM	MIT NO.		
PARCEL ID	26.20.15	00267-000		UBDIVISION	PARC				
LOT	BLOCK	00267-000 PHAS		UNIT	PARC	0004044 125	AL ACRES 1	1.36	
LOI	BLUCK	Phas	E	UNIT		ion	L ACKES 1	1.30	
-			IH00007	70	4	X	17	>	
Culvert Permit	No.	Culvert Waiver	Contractor's	License Numb	er /		Applicant/Owner		
EXISTING		09-0402-N	_	CFS		_	oroved for Issuan		N w Resident
Driveway Con		Septic Tank Nun		LU & Zoning	спескед бу	Арр	roved for issuan	ce Ne	w Resident
COMMENTS:	1 FOOT A	ABOVE ROAD. A	SSESSMENTS	CHARGED.					
							Cl1-# C	Cash 140	188
							Check # or C	asn 140	
		FOR	BUILDING		DEPART	MENT	ONLY	(1	footer/Slab)
Temporary Pov	wer	data/ann ba	Founda		date/app. by		_ Monolithic _	1	
11-11-1		date/app. by			date/app. by		C1		e/app. by
Under slab rou	igh-in plumb	-	e/app. by	Slab	date/app.	by	Sheathing	/Nailing _	date/app, by
Framing			W. CO.C. 11		date/app.	O _j			шис прр. су
	date/ap			date/a	app. by				
Rough-in plum	bing above	slab and below wo	od floor			El	ectrical rough-in		
	-			date	e/app. by	=0)		da	te/app. by
Heat & Air Du		late/app. by	Peri.	beam (Lintel)		app. by	Pool		, .
Permanent pow	ver	**************************************	C.O. Fir	nal	date	арр. Оу	Culvert	date	/app. by
Pump pole	da	ite/app. by			te/app. by				pp. by
	date/app. by	Utility Pole	date/app. by	M/H tie dov	vns, blocking,	electricit	y and plumbing		date/app. by
Reconnection	-			RV			Re-roof		
	C	date/app. by			date/app. by			date	e/app. by
BUILDING PE	ERMIT FEE	\$ 0.00	CERTIFIC	CATION FEE	\$0.00		SURCHARG	E FEE \$	0.00
MISC. FEES \$	300.00	0 ZON	ING CERT. FEI	E \$ 50.00	FIRE FEE	\$ 0.0	0 WAS	TE FEE \$	
FLOOD DEVE	LOPMENT	EEE \$	FLOOD ZONE	FEE \$ 25.00	CULVER	Γ FEE \$	TO	TAL FEI	E 375.00
INSPECTORS	OFFICE	100		-	CLERKS C			H	

PERMIT

PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND 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 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.

	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
F	or Office Use Only (Revised 1-10-08) Zoning Official Building Official 7 - 13 - 0
A	P# (0907-16 Date Received 7/11/09 By Permit # 27991
F	lood Zone Development Permit Zoning A 3 Land Use Plan Map Category A - 3
	comments
_	
FI	EMA Map# Elevation Finished Floor River In Floodway
=	Site Plan with Setbacks Shown FH# 09-0402-N FAEH Release Well letter Existing well Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access
1	Recorded Deed or Affidavit from land owner (Letter of Auth. from installer ⊏ State Road Access
=	Parent Parcel # STUP-MH F W Comp. letter
IMF	PACT FEES: EMS Fire Corr Road/Code
	School= TOTAL
Pro	perty ID# 26-35-15-00267-00 PARCE 6
	New Mobile Home Used Mobile Home MH Size24x52_Year_1989_
	Applicant Steve Atkins Phone # 386 438 4288
•	Address 900 Sw Koonville Ave Lake City Kl 32024
	Name of Property Owner Same Phone#
	911 Address 848 SW KODNING TE, LAKE Cot, SL 37024
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progress Energy
•	Name of Owner of Mobile Home Phone #
	Address
•	Relationship to Property Owner
•	Current Number of Dwellings on Property
	Lot Size_398 X 1250' Total Acreage 11.36
•	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home
	Driving Directions to the Property 90 West To Koonville South
	1/2 Milz to 800-900 Koonville on Bight
	ACross from Archie Islen
	Name of Licensed Dealer/Installer octobal Phone # 386 688 7372
	Installers Address 13636 CR 137 Wellbour Fl
•	License Number TH 0000 770 Installation Decal # 299545
	5/2014 70 37 09



27991

GTC Design Group, LLC 176 NW Lake Jeffery Road Lake City, FL 32643 (Phone) 386.719.9985 (Fax) 386.719.8828 cwilliams@gtcdesigngroup.com

Finish Floor Elevation Letter

Owner: Steven and Kathleen Atkins

Parcel Number: 26-3S-15-00267-000

Parcel Description: 900 SW Koonville Ave

For protection against water damage, the minimum finish floor elevation of the proposed structure shall be 3 feet above natural ground at any point along the perimeter of the proposed structure. In no case shall the finish floor elevation be greater than 5 feet below the centerline elevation of the adjacent roadway.

The ground around the proposed structure shall be graded such as to convey all stormwater runoff away from the proposed structure.

The above elevations are based on the structure's proposed location, on existing fill, approximately 100 feet west of the existing home.

Chad Williams

P.E. License Number: 63144

September 10, 2009

PERMIT WORKSHEET

page 2 of 2

Flumbing
Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.
Electrical
Date Tested 6/8/09
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
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 requires anchors with 4000 lb bolding capacity. Installer's initials
The results of the torque probe test is -2.95 inch pounds or check here if you are declaring 5' anchors without testing A test showing 275 inch pounds or less will require 5 foot anchors.
TORQUE PROBE TEST
X 2500 X 1500 X 2000
Using 500 lb. increments, take the lowest reading and round down to that increment.
2. Take the reading at the depth of the footer.
Test the perimeter of the home at 6 locations.
POCKET PENETROMETER TESTING METHOD
X row X rose X rs as
r tests are rounded down to 1500 1000 lb. soil without testing.
POCKET PENETROMETER TEST

of tape will not serve as a gasket.

Type gasket

form

Installed:

a result of a poorty installed or no gasket being installed. I understand a strip

Installer's initials

homes and that condensation, mold, meldew and buckled marriage walls are l understand a properly installed gasket is a requirement of all new and used

Gasket (weatherproofing requirement)

Roof: Walls: Floor:

Type Fastener: 6-95
Type Fastener: 6-95

Length:

3

Spacing:

Length:

Spacing: 2 %

Fastening multi wide units

Type Fastener: Length: Q Sparvilly. Type Fastener: Length: Q Sparvilly. Type 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.

Debris and organic material removed

Water drainage: Natural

Swale

Pad

Other

Site Preparation

man		Insta			(
nufactur		ller veri			
er's ins	is ac	fies all			
tallation	curate	nforma			
n instru	and tru	tion giv			
ctions	e basec	en with			
and or	on the	this p			
Rule 1	10	ermit w			
5		/ork			
	manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1	Installer verifies all information given with this permit work is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1	Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2	Installer verifies all information given with this permit work is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1

Skirting to be installed. Yes V No Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting.

K

Fireplace chimney installed so as not to allow intrusion of rain water. Siding on units is installed to manufacturer's specifications. Yes

Yes

Miscellaneous

The bottomboard will be repaired and/or taped. Yes

Weatherproofing

Bottom of ridgebearn Yes Between Walls Yes Between Floors

Yes

Electrical crossovers protected. Yes

Drain lines supported at 4 foot intervals. Yes

independent water supply systems. Pg.

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

Connect all potable water supply piping to an existing water meter, water tap, or other



MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statues Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installar'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

installation of the manufactured home for	ber T.H. 0000170, states that the
installation of the manufactured home for at 911 Address: will be done under my supervision.	4e be and Kaphleon Arking
Signed: A Signed: Mobile Home Installer	
Sworn to and described before me this	dayof lag 2009
Notary public	
Notary Name	Personally known
GWEN H. WALKER Notary Public - State of Florida SMy Commission Expires Dec 29, 2009 Commission # DD502988 Bonded By National Notary Assn.	DL ID

AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Stese + Ka	thloon Atkins 00267:001
Property ID: Sec: 26 Twp: 35 R	ge: 15 Tax Parcel No: 7635/50076700
Lot: Block: Subdivision:	
Mobile Home Year/Make: 1989	Size: 24x52
Signature of Mobile Home Installer	
Sworn to and subscribed before me this	2009 2009
Notary's name printed/typed	Notary Public, State of Florida
GWEN H. WALKER Notary Public - State of Florida My Commission Expires Dec 29, 2009 Commission # DD502988 Bonded By National Notary Asses	Commission No Personally Known: Produced ID (type)

Columbia County Property Appraiser DB Last Updated: 4/27/2009

2009 Preliminary Values

Tax Record

Property Card

Interactive GIS Map

Search Result: 1 of 1

Parcel: 26-3S-15-00267-000 HX

Owner & Property Info

Owner's Name	ATKINS STEVEN L & KATHLEEN D				
Site Address	KOONVILLE				
Mailing Address	900 SW KOONVILLE AVE LAKE CITY, FL 32024				
Use Desc. (code)	IMPROVED A (005000)			
Neighborhood	026315.00	Tax District	3		
UD Codes	MKTA01	Market Area	01		
Total Land Area	34.100 ACRES				
Description	COMM NE COR OF SE1/4 OF SW1/4, RUN S 132 FT FOR POB, RUN S 1192.66 FT, W 1319.99 FT, N 1193.78 FT, E 1317.59 FT TO POB, EX RD. (PARCELS 5, 6 & 7) PROB#05-101CP 1049-2391 THRU 2410, OCD 1079-2595, 2597, WD 1127-1623				

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (3)	\$15,330.00
Ag Land Value	cnt: (2)	\$5,594.00
Building Value	cnt: (2)	\$128,230.00
XFOB Value	cnt: (5)	\$9,531.00
Total Appraised Value		\$158,685.00

Just Value		\$304,237.00
Class Value		\$158,685.00
Assessed Value		\$126,597.00
Exemptions	(code: HX)	\$50,000.00
Total Taxable Value	Other	5,597.00 City: \$76,597.00 r: \$76,597.00 bl: \$101,597.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vimp	Sale Qual	Sale RCode	Sale Price
8/1/2007	1127/1623	WD	I	Q		\$375,000.00
9/15/2005	1079/2595	QC	I	U	01	\$100.00
9/6/2005	1079/2597	QC	I	U	01	\$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1978	Cement BRK (18)	2736	3744	\$110,956.00
2	MOBILE HME (000800)	1988	WD or PLY (08)	1196	1316	\$17,274.00
	Note: All S.F. calculation	ons are bas	ed on <u>exterior</u> bui	lding dimension	ns.	

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0180	FPLC 1STRY	1978	\$2,300.00	0000001.000	0 x 0 x 0	(00.00)
0020	BARN,FR	1978	\$2,688.00	0000240.000	12 x 20 x 0	AP (020.00)
0166	CONC,PAVMT	0	\$378.00	0000270.000	18 x 15 x 0	(000.00)

397.56' State Road No. 3-,55768 ,55168 PARCEL NO. 4 MBC J.C. JONES 3,,08,67.88 N N 88°29'30" 55.16E 5281 12.868 .95268 783

gos.

CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7-8-09 BY 4 IS THE MIN ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? 10
OWNERS NAME Steve Atkins PHONE 386 438-4288 CELL
ADDRESS GOO SW Koonville Aug. Late (ily it
MOBILE HOME PARK
DRIVING DIRECTIONS TO MOBILE HOME 90 W. TZ on Koonville, 1/2 mile
on right
MOBILE HOME INSTALLER JOC Todd PHONE 688-7372 CELL
MOBILE HOME INFORMATION
MAKE Homes of Movit YEAR 1988 SIZE 24x5 x 56 COLOR Beibe
BERIAL NO. LHML PZ4061422373 A-B
WIND ZONE Must be wind zons if or higher NO WIND ZONE I ALLOWED
INSPECTION STANDARDS
INTERIOR: (P or F) · P= PASS F= FAILED
SMOKE DETECTOR () OPERATIONAL () MISSING
FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION
DOORS () OPERABLE () DAMAGED
- WALLS () SOLID () STRUCTURALLY UNSOUND
WINDOWS () OPERABLE () MOPERABLE
PLUMBING FIXTURES () OPERABLE () MOPERABLE () MISSING
CEILING () BOLID () 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 () GRACKED! BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS
Ast Alm 462 7-13-69
2018 3000 J J J J J J J J J J J J J J J J J
A/\IA/\IA/\IA/\IA/\IA/\IA/\IA/\IA/\IA/\I





.07/10/2009 16:17

COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

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

1, JOE Todd	(license holder name), licensed qualifier			
for IOE Tolds mobile Home Setup (company name), do certify that				
the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.				
Printed Name of Person Authorized	Signature of Authorized Person			
1. Steve Atkins	1.			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits. T.H. OCOOTTO Coloro Date				
NOTARY INFORMATION: STATE OF:FloridaCOUNTY County of the above license holder, whose name ispersonally appeared before me and is known by type of I.D.)	me or has produced identification			

Commission # DD502988 Bonded By National Notary Assn.

3041070404-0402-N



Stock Number: 5744-001-4015-1

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

PERMIT NO.	P 930416
DATE PAID:	7/23/09
FEE PAID:	42500
RECEIPT #:	116/647

Page 1 of 3

The second secon			
APPLICATION FOR: [New System [] [] Repair []	Existing System [Abandonment [Holding Tank	[] Innovative
APPLICANT: Steve	affins		1.
AGENT:		ENTER Carne	72. 1
MAILING ADDRESS: 900	SW KOON VI	110 110	HONE: 386 438-4238
Lah	s. CIty Fl	32024	
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN	OR APPLICANT'S AUTHORI OT TO 489.105(3)(m) OR 4	ZED AGENT. SYSTEMS 89.552, FLORIDA STA	HUST BE CONSTRUCTED
PROPERTY INFORMATION			Silvedia and Alia Silvedia and Alia Silvedia and Alia
PROPERTY ID #: 24-35-15	SUBDIVISION: 15-60	267-00	PLATTING NW
PROPERTY ID #: 24-35-15	- 00267-000 ZONING	Res, I/M OR E	QUIVALENT: [V
ACRES	WATER SUPPLY: [PRIVA	TR PURTIC .	200000
IS SEWER AVAILABLE AS PER 38	1.0065, FS? [V (S)		
PROPERTY ADDRESS:	NO 848 511) K	00001110	TO SEWER: NA PT
DIRECTIONS TO PROPERTY:	o west to	1/2/1/10	
12 mile on	Right	FN ROOM	ville Ave
	,		
BUILDING INFORMATION	[X] RESIDENTIAL	[] CCMMERCIAL	
Unit Type of No Establishment	No. of Building C Bedrooms Area Sqft T	Commercial/Instituti able 1, Chapter 64g	onal System Design
1 Mobile Home	3 1248		
3			
4	-		
[] Floor/Equipment Drains)[] Other (Specify)		
SIGNATURE:		DATE	7/20/20
DH 4015, 10/97 – Page 1 (Previous Stock Number: 5744-001-4015-1	editions may be used)	CEIVED)	1/21/07

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:

7/8/2009

DATE ISSUED:

7/20/2009

ENHANCED 9-1-1 ADDRESS:

848

SW KOONVILLE

AVE

LAKE CITY

FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

26-3S-15-00267-000

Remarks:

PARCEL 6

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.



MI OCCUPANO

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.

	1		,
		36 36 000	

Building permit No. 000027991

Permit Holder JOE TODD

Owner of Building STEVE ATKINS

Location: 848 SW KOONVILLE AVE., LAKE CITY, FL

Date: 09/29/2009

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)





GTC Design Group, LLC 176 NW Lake Jeffery Road Lake City, FL 32643 (Phone) 386.719.9985 (Fax) 386.719.8828 cwilliams@gtcdesigngroup.com

Finish Floor Elevation Certification

Owner: Steve and Kathleen Adkins

Parcel Number: 26-3S-15-00267-000

Parcel Description: 900 SW Koonville Ave.

On September 28, 2009, GTC Design Group LLC verified the heated and cooled Finish Floor Elevation of the 'set' mobile home with a Nikon, Automatic Level, Model AP-8. The following are actual elevation shots.

Finish Floor Elevation (FFE)	5.72'
Centerline SW Koonville Ave.	1.62'
Existing Ground around Mobile Home	9.00'
Earth Pad under Mobile Home	8.24'

The above numbers translate to:

- 1. The FFE is 50" lower than the centerline of SW Koonville Ave.
- 2. The FFE is 40" higher than the existing ground around the home.
- 3. The FFE is 31" higher than the earth pad under the home.

The above elevations are based on the relationship between the centerline elevations of the denoted county road at a location perpendicular to the structure's existing location.

Chad Williams

P.E. License Number: 63144

September 28, 2009



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number ______09-0402 /\dots - PART II - SITE PLAN----Scale: Each block represents 5 feet and 1 inch = 50 feet. 1318.591 watchine 210 Notes: Site Plan submitted by: Signature Plan Approved Not Approved Date **County Health Department**

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT