

DATE 05/13/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000029395

APPLICANT DOUGLAS SKINNER PHONE 386-344-1691
ADDRESS 322 NW WALDO STREET LAKE CITY FL 32055
OWNER JOY WILLIAMS/DOUG SKINNER PHONE 386-344-1691
ADDRESS 322 NW WALDO STREET LAKE CITY FL 32055
CONTRACTOR BERNIE THRIFT PHONE 752-9561
LOCATION OF PROPERTY 41 N, R WALDO, THEN 1ST MH ON RIGHT

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 INDUSTRIAL MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT REAR SIDE
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 19-3S-17-05113-002 SUBDIVISION VALLEY PARK (CORNER OF LOT 8)
LOT 8 BLOCK PHASE UNIT TOTAL ACRES 0.39

IH1025155
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 10-0109-E BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REPLACING EXISTING MH, EXISTING MH PERMITTED USE IN DISTRIC SAME

LOCATION AS PREVIOUS MH NO INCREASE IN NON-CONFORMING FOR SETBACKS

Check # or Cash 1000

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Insulation date/app. by
Rough-in plumbing above slab and below wood floor 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
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 325.00
INSPECTORS OFFICE Z. H. CLERKS OFFICE CH

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 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.

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer

Bernie Thrift License # 1025155/1

911 Address where home is being installed.

322 NW WOODBURY ST
C.C. #132055

Manufacturer

Spec Length x width 76 X 14

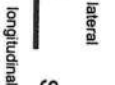
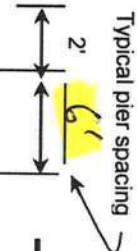
NOTE:

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

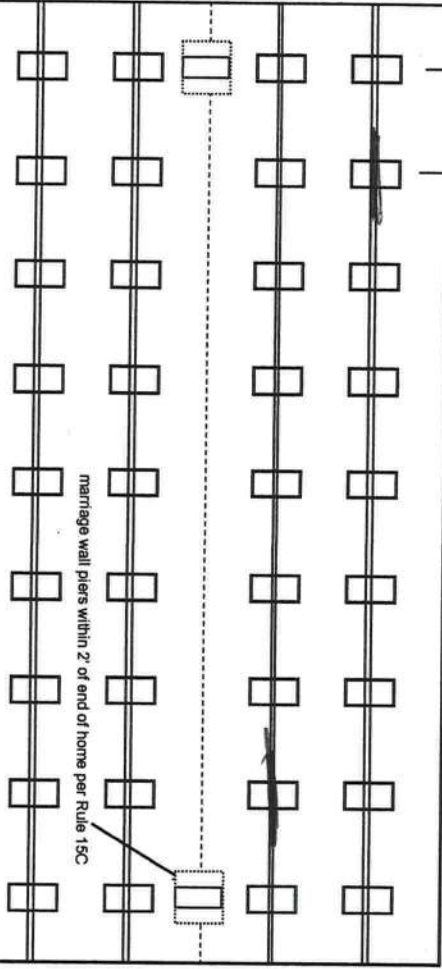
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials

BT



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



marriage wall piers within 2' of end of home per Rule 15C

New Home

☐

Used Home

☒

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 #

Triple/Quad

☐

Serial #

AH137013489

5584

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	4'6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7'6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size

17 X 22

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

Pier pad size

AA

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Model 1101 V

Oliver Systems

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

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

24

2

14

14

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil without testing.

X 2000 X 2500 X 2500

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 2000 X 2000 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 2964 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.

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.

BT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernie Thrift

Date Tested

4-4-11

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. 5

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: NA Length: _____ Spacing: _____
Walls: Type Fastener: NA Length: _____ Spacing: _____
Roof: Type Fastener: NA Length: _____ Spacing: _____
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 BT

Type gasket NA

Installed:
Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes _____ Pg. _____
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 NA
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Bernie Thrift

Date 4-12-11



STATE OF FLORIDA
DEPARTMENT OF HEALTH

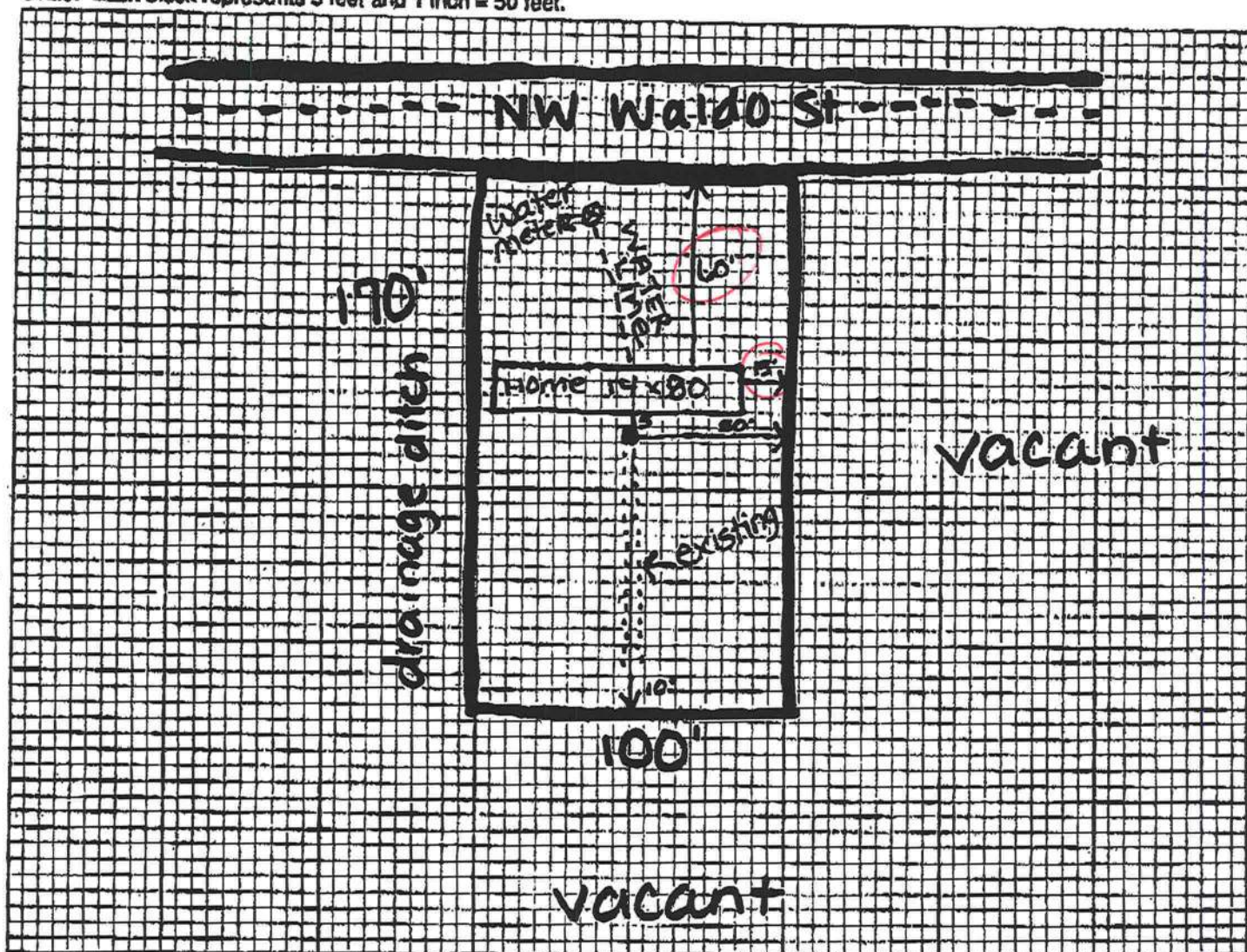
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

10-0109-E

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: 322 NW Waldo St.
Lake City, FL 32055

Site Plan submitted by:

AC Ford

Signature

JK

master

Title

Plan Approved

X

Not Approved

Date

By

Colur CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

APPROVED

Re. 15.00
10.36.40

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Grantee's S.S. No. _____

Property Appraiser's
Parcel Identification No.
19-3S-_____

WARRANTY DEED

THIS INDENTURE, made this 15th day of December, 1992, BETWEEN MINNIE LOU HARVEY and LUCA LOUISE POWELL, formerly, LUCA LOUISE HARVEY, neither of whom reside on the property described herein, whose post office address is Route 8, Box 329-K, Lake City, Florida 32055, of the County of Columbia, State of Florida, grantor*, and JOY VIOLA PEPPER, whose post office address is Route 8, Box 323, Lake City, Florida 32055, of the County of Columbia, State of Florida, grantee*.

WITNESSETH: that said grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

TOWNSHIP 3 SOUTH - RANGE 17 EAST

SECTION 19: Begin at the Northwest Corner of Lot or Block 8, run South 170 feet; thence East 100 feet; thence North 170 feet to West side of Waldo Street; thence West 100 feet to POINT OF BEGINNING. This being and lying in Valley Park, a subdivision recorded in the public records of Columbia County, Florida, all lying and being in Section 19, Township 3 South, Range 17 East, in the SE 1/4 of the SE 1/4.

TOGETHER WITH a 1973 Montibello Doublewide Mobile Home, ID No. 10298L and ID No. 10298R, which said mobile home is attached to and is a part of the above described property.

EX 0768 PG 1459

OFFICIAL RECORDS

DOCUMENTARY STAMP \$ 36.40
INTANGIBLE TAX 0
P. DEWITT CASON, CLERK OF
COURTS, COLUMBIA COUNTY
BY Paul R. G.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

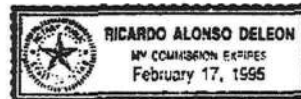
*"Grantor" and "grantee" are used for singular or plural, as context requires.

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered
in our presence:

X Darlene Suter
(First Witness)
Darlene Suter
Printed Name

X Minnie Lou Harvey (SEAL)
Minnie Lou Harvey
Printed Name



X Shirley Smith
(Second Witness)
Shirley Smith
Printed Name

Signed, sealed and delivered
in our presence:

Myrtle Ann McElroy
(First Witness)
Myrtle Ann McElroy
Printed Name

Luca Louise Powell (SEAL)
Luca Louise Powell
Printed Name

Michelle L. Slanker
(Second Witness)
Michelle L. Slanker
Printed Name

STATE OF TEXAS
COUNTY OF HARRIS

The foregoing instrument was acknowledged before me this 9 day of December, 1992, by MINNIE LOU HARVEY, who is personally known to me or who has produced Texas driver license as identification and who did not take an oath.

My Commission Expires:

2-17-95
X Ricardo Alonso Deleon
Notary Public
Printed, typed, or stamped name:
Ricardo Alonso Deleon

- JWB - approved 4.12.11 -

AFFIDAVIT

1104-24



STATE OF FLORIDA
COUNTY OF COLUMBIA

This is to certify that I, (We), Joy Viola Pepper Williams
owner of the below described property:

Tax Parcel No. 17-35-17-05113-002

Subdivision (name, lot, block, phase) _____

Give my permission to Douglas Skinner to place a
mobile home travel trailer/single family home (circle one) on the above mentioned
property.

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Joy Viola Pepper Williams
Owner

Owner

SWORN AND SUBSCRIBED before me this 12th day of April
2011. This (these) person(s) are personally known to me or produced
ID personally known.

Tracy Francis
Notary Signature



Return FAX # 386 758 2160

For Office Use Only

(Revised 1-10-08)

Zoning Official BK 16.04.10

Building Official LD 4-16-10

AP# 1004-10 Date Received 4/8/10 By G Permit # _____

Flood Zone X Development Permit N/A Zoning I Land Use Plan Map Category I

Comments Replacing Existing MH

FEMA Map# N/A Elevation N/A Finished Floor 1st floor River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-0169-E ☐ EH 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 11 Fire _____ Corr _____ Road/Code _____
School 11 TOTAL N/A Super Replaces existing dwelling ☒ V F ☒ Pre-Insp.

15
325

Columbia County Property Appraiser

DB Last Updated: 3/29/2010

2009 Tax Roll Year

Parcel: 19-3S-17-05113-002

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

<< Prev

Search Result: 59 of 89

Next >>

Owner & Property Info

Owner's Name	WILLIAMS JOY VIOLA PEPPER		
Mailing Address	286 NW WALDO ST LAKE CITY, FL 32055		
Site Address	322 NW WALDO ST		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	2 (County)	Neighborhood	19317
Land Area	0.391 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
BEG AT NW COR OF LOT 8 & RUN S 170 FT, E 100 FT, N 170 FT, W 100 FT TO POB. ORB 531-125, 730-083, 768-1459 BEING IN VALLEY PARK S/D.			



Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$7,111.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$4,300.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$11,411.00
Just Value		\$11,411.00
Class Value		\$0.00
Assessed Value		\$11,411.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$11,411 Other: \$11,411 Schl: \$11,411	

2010 Working Values

NOTE:

2010 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
12/15/1992	768/1459	WD	I	U	12	\$5,200.00
9/1/1990	730/83	WD	I	U	03	\$4,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1973	BELOW AVG. (03)	1104	1380	\$4,121.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
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10-0109-E



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. AP054893
DATE PAID: 3/3/10
FEE PAID: 125.00
RECEIPT #: 12-PID-1241285

SSOC OF #: 061003417

on 03-02-10 by mandy R. - F/15

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Joy Williams - Benjamin Gunn

AGENT: Ford's Septic - RC Ford TELEPHONE: 755-6288

MAILING ADDRESS: 116 NW Lawley Way
Lake City, Florida 32055

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.

PROPERTY INFORMATION

LOT: 8 BLOCK: _____ SUBDIVISION: Valley Park PLATTED: S7

PROPERTY ID #: 19-35-17-05113-002 ZONING: Res I/M OR EQUIVALENT: (Y / N)

PROPERTY SIZE: 0.39 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☐ ☒ ≤ 2000 GPD ☒ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y / N DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 322 NW Waldo St. Lake City, FL 32055

DIRECTIONS TO PROPERTY: From CCHD - turn (R) on Hwy 441 + travel
north. Turn (L) on 25-A. Turn (L) on Waldo St.

House #322 on (L) across from Lawley Way.

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sq Ft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	mobile Home	3	1120	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: RC Ford

DATE: 3-1-2010

RECEIVED
3/2/10

ENTERED
KSR

NO APPL.

COE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 2/25/10 BY GP IS THE MOBILE HOME THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No
 OWNERS NAME Ben Gunn PHONE _____ CELL 288-3149
 ADDRESS 243 NE CLARA Glen Lake City, FL
 MOBILE HOME PARK _____ SUBDIVISION _____
 DRIVING DIRECTIONS TO MOBILE HOME 411N TR Tammy Lane,
TL Colvin, TR CLARA Glen, 3rd on left.
 MOBILE HOME INSTALLER John Shipp PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Spec YEAR 1997 SIZE 14 x 80 COLOR White/TAN
 SERIAL No. AH137013489
 WIND ZONE TL Must be wind zone 1 or higher NO WIND ZONE 1 ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

\$50.00

☒ SMOKE DETECTOR () OPERATIONAL () MISSING Date of Payment: 2-25-10
☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION Paid By: Ben Gunn
☒ DOORS () OPERABLE () DAMAGED Notes: No Appl. submitted
☒ WALLS () SOLID () STRUCTURALLY UNSOUND
☒ WINDOWS () OPERABLE () INOPERABLE
☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
☒ CEILING () SOLID () HOLES () LEAKS APPARENT
☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
 FIXTURES MISSING

EXTERIOR:

☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
☒ WINDOWS () CRACKED / BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: _____
 NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS: _____

SIGNATURE AD. Powell ID NUMBER 402 DATE 2-26-10

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1104.24 CONTRACTOR BENIC SHUFF PHONE 752 9561

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.

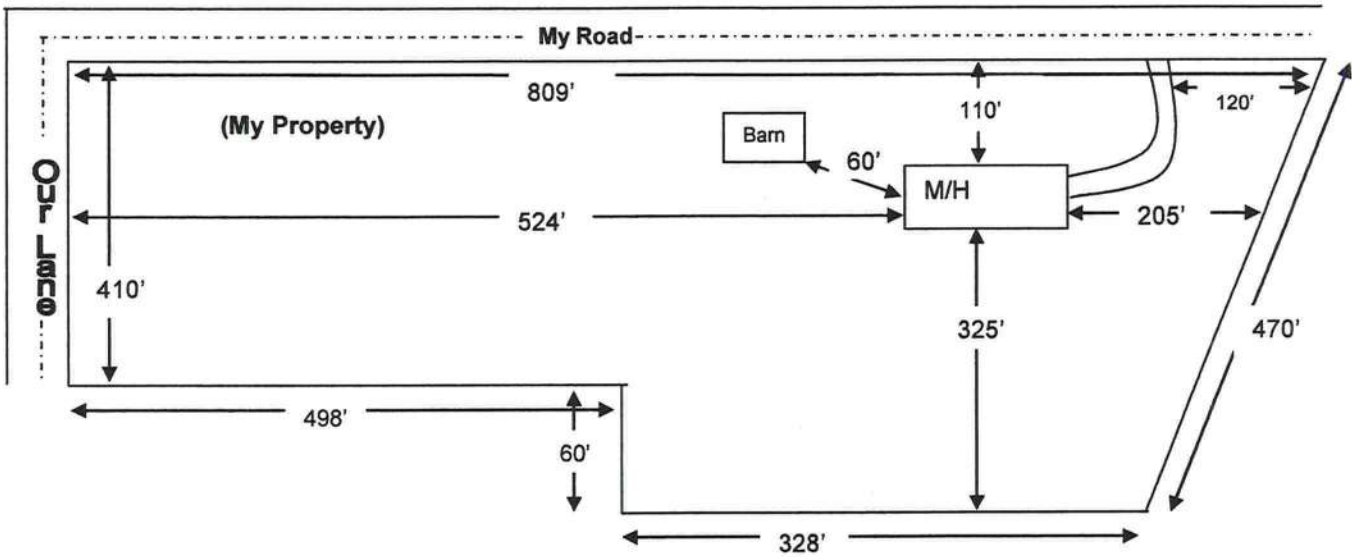
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<input checked="" type="checkbox"/> ELECTRICAL	Print Name: <u>Gregg A Douglas Skinner</u> License #:	Signature: <u>[Signature]</u> Phone #: <u>386-344-1691</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name: <u>Douglas Skinner</u> License #:	Signature: <u>[Signature]</u> Phone #: <u>386-344-1691</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name: <u>Douglas Skinner</u> License #:	Signature: <u>[Signature]</u> Phone #: <u>386-344-1691</u>

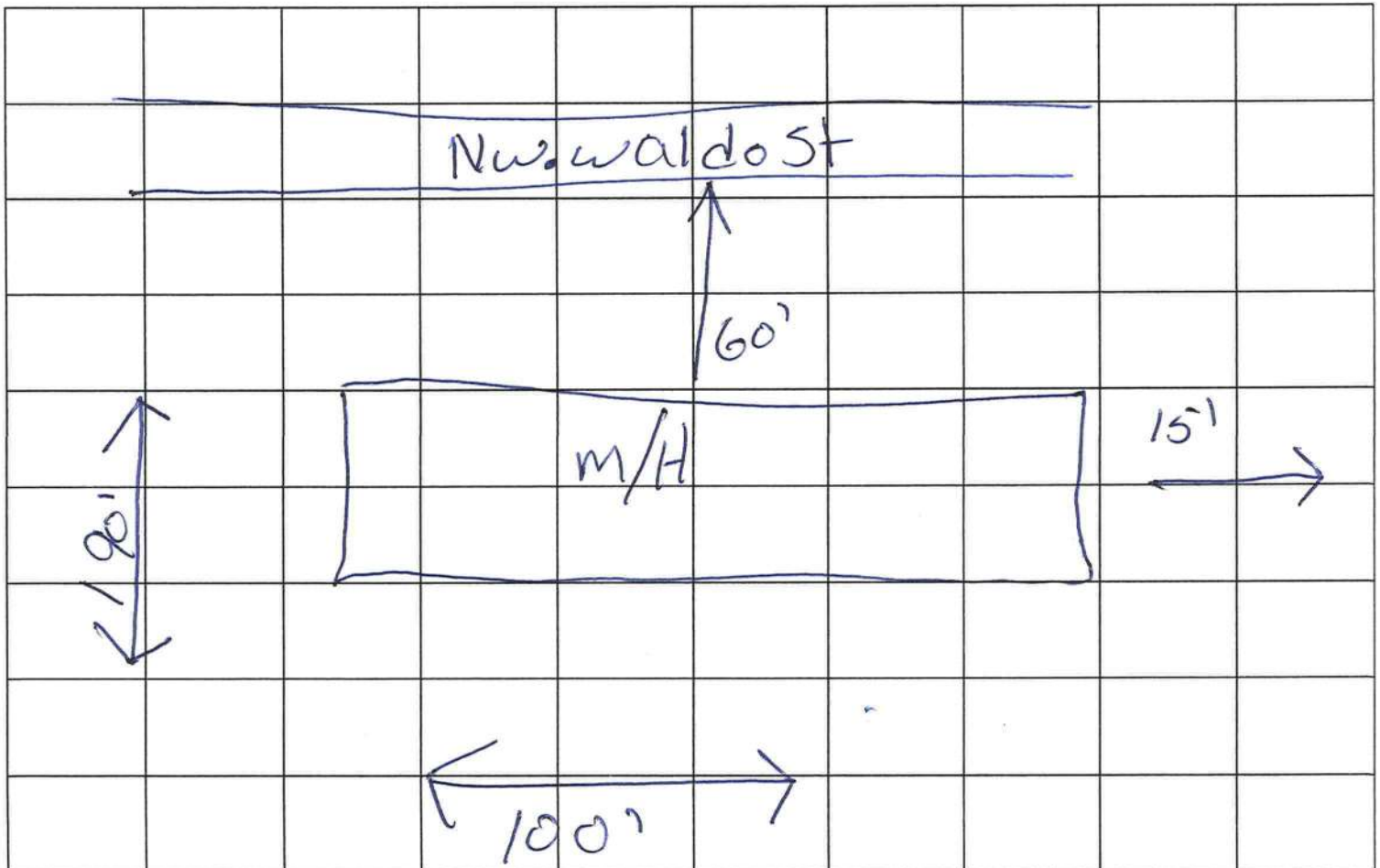
Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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.

SITE PLAN EXAMPLE / WORKSHEET



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.



Janice Williams

From: Ron Croft
Sent: Tuesday, April 12, 2011 9:59 AM
To: Janice Williams
Subject: RE: FYI

PARCEL_N	ADDRESS	CITY	ST	ZIP
19-3S-17-05113-002:	322 NW WALDO ST	LAKE CITY	FL	32055

1 records selected.

Image looks like the building that was here is gone.

Ron



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

1104-29

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Bernie Thrift, give this authority for the job address show below
Installer License Holder Name

only, 322 NW WALCOO OFFICER, LAKE CITY, FL, 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 and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Doug Skinner	<i>Doug Skinner</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" 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.

Bernie Thrift
License Holders Signature (Notarized)

TH1025155
License Number

4-12-11
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Bernie Thrift, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 13th day of April, 20 11.

[Signature]
NOTARY'S SIGNATURE



- 15.00 - fee
- waived
- customer
- explained
- 6 mos.

Previously

The LTL message of Soug. 4.19.11 sent to him 4-19-11