

Bessie
know

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: 9/15/2011 DATE ISSUED: 9/16/2011

ENHANCED 9-1-1 ADDRESS:

2234 SE COUNTY ROAD 349
LAKE CITY FL 32025
PROPERTY APPRAISER PARCEL NUMBER:
25-5S-17-09377-000

Remarks:

ADDRESS FOR PROPOSED STGRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT
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.**



COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com



ADDRESS CHANGE DUE TO CHANGE OF ACCESS

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

Old Address

162 SE BUNNY CT
LAKE CITY, FL 32025

NEW Address

2232 SE COUNTY ROAD 349
LAKE CITY, FL 32025

All residences, businesses, industries, schools, churches, organizations and public buildings are covered by this system. You are required to affix your new address numbers permanently on your house or the principal building where they can be seen easily. Also, if your house or the principal building at this address is not clearly visible from the public or private roadway, you are required to erect a post at your driveway entrance. Place your new number on it facing the road so emergency response personnel coming in either direction can easily see the numbers. To help emergency responding personnel, it will be the responsibility of each property owner, trustee, leasee, agent and occupant of each residence, apartment building, business or industry to purchase, post and maintain address numbers. The address number for residences, townhouses and in town businesses shall be made up of numbers, *which are not less than three (3) inches in height and one and one half (1 ½) inches in width.* All industrial and commercial structures located in low density development areas (areas in which small residential style address numbers are not visible from the road) shall display address numbers not less than ten (10) inches in height. All Apartment buildings and high rises shall display address numbers above or to the side of the primary entrance to the building and shall be displayed not less than six (6) inches in height. Apartment numbers for individual units within the complex shall be displayed on, above or to the side of the doorway of each unit.

All numbers shall contrast in color with the background on which affixed, and shall be visible day or night from the street. When possible, the number shall be displayed beside or over the main entrances of the structure. Any old address numbers shall be removed from the structure, mail box or access point.

It is your responsibility to advise all persons and businesses, with which you correspond, of your change of address (*unless you receive your mail in a Post Office Box*). Your mail will be delivered to your old address for a period of one (1) year.

We are counting on the cooperation of all citizens to help make the Enhanced 9-1-1 Emergency Telephone System a success. If you have any questions please call (386) 752-8787 between 8:00 AM and 5:00 PM Monday through Friday.

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SE COUNTY ROAD 245

SE BUNNY CT

2232 2234

ELTON DICKS CT

SE COUNTY ROAD 349

11-2354

PART II - SITEPLAN

A hand-drawn site plan of a property. The plan shows a rectangular lot with a width of 141' and a depth of 96'. A vertical strip on the left side is labeled '96' and contains a 'BM' (benchmark) and a 'WELL 285' (water well). A 'SEPTIC' tank is located near the top left corner. A 'WELL 285' is also indicated near the top right corner. A 'NORTH' arrow points upwards on the right side. A 'WOOD' area is indicated by a diagonal line on the right side. The plan is divided into several sections with dimensions: 21' on the left, 55' on the bottom left, and 90' on the bottom right. A 'SEPTIC' tank is located near the top left corner. A 'WELL 285' is located near the top right corner. A 'NORTH' arrow points upwards on the right side. A 'WOOD' area is indicated by a diagonal line on the right side.

Notes:

Site Plan submitted by:

Plan Approved

By _____

Not Approved

Env. Health Director

MASTER CONTRACTOR

Date 9.27.11

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

CASH

For Office Use Only (Revised 1-11) Zoning Official BLK 20 SEPT. 2011 Building Official 7.C. 9-16-11

AP# 1109-23 Date Received 9-14-11 By LM Permit # 29701

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Designating the 5 acres in the Northwest corner of the property meets density requirements

FEMA Map# N/A Elevation N/A Finished Floor 1' above River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 11-0399 ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☒ State Road Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☒ F W Comp. letter ☐ VF Form

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☐ Out County ☒ In County

Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 dated 9-14-11

Property ID # 25-55-17-09377-000 Subdivision NA

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x60 Year 1986
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner Bessie Harden Phone # 386-752-4865
- ☒ 911 Address 2234 SE CR 349 Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Betty Howell Phone # 386-752-4865
- Address 12363 SE CR 245 Lulu FL 32061
- Relationship to Property Owner Daughter
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 50.77
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home No - Moving on same property
- Driving Directions to the Property 41 South to CR 349 turn Left go almost to end @ CR 245 turn (R) on 2nd to last drive to site on (R)
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 WE CR 245 Lulu City FL 32025
 - License Number IH1025386 Installation Decal # 6530

Spoke to Wendy 9/21/11 353.97

CR 349

N
↑

this home
to be
moved to
new
location

NOT
A PART

NOT
A PART

Bunny
Ct

Bunny
Ct

579'

190'

375'

NOT
A PART

867'

280'

1972'

2132'

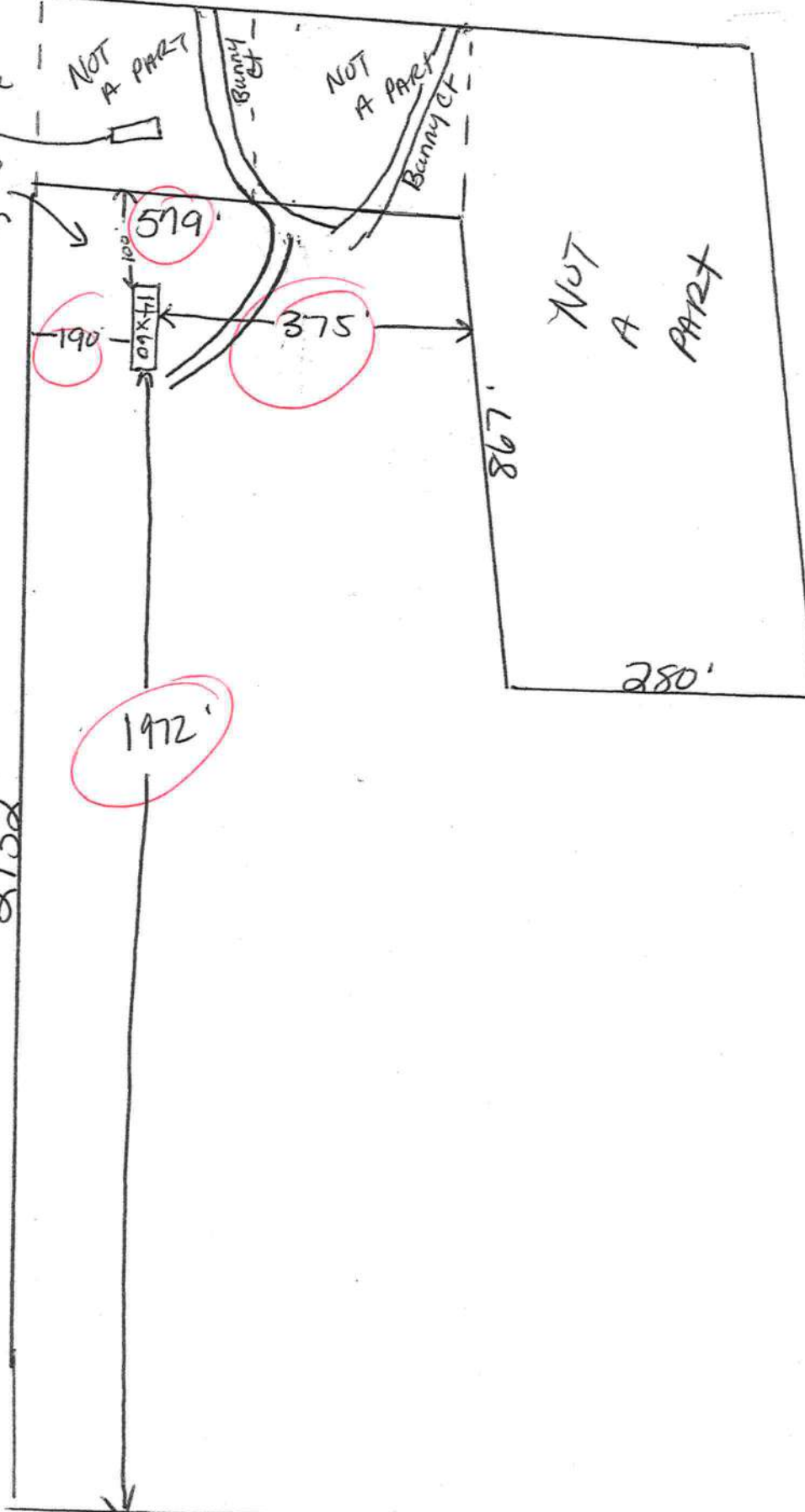
CR 245

* Existing
Home

1265'

1047'

Betty Howell
Bessie Harden



PERMIT WORKSHEET

page 1 of 2

Installer Robert Sheppard License # EH1025386
 Manufacturer DAK Brook Length x Width Hx56
 Name of Owner of this Mobile Home Betty Howell
 Phone 386-752-4865
 Address _____

New Home ☐ Used Home ☒ Year _____
 Home installed to the Manufacturer's Installation Manual
 Home is installed in accordance with Rule 15-C
 Single wide ☒ Wind Zone II ☐ Wind Zone III ☐
 Double wide ☐ Installation Decal # 10530
 Triple/Quad ☐ Serial # 10L18984

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 RS

Typical pier spacing



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

| Load bearing capacity | Footer size (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 psf | 3' | 4' | 4' | 5' | 6' | 7' | 8' |
| 1500 psf | 4' 6" | 6' | 6' | 7' | 8' | 8' | 8' |
| 2000 psf | 6' | 8' | 8' | 8' | 8' | 8' | 8' |
| 2500 psf | 7' 6" | 8' | 8' | 8' | 8' | 8' | 8' |
| 3000 psf | 8' | 8' | 8' | 8' | 8' | 8' | 8' |
| 3500 psf | 8' | 8' | 8' | 8' | 8' | 8' | 8' |

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

PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 17x25

Other pier pad sizes (required by the mfg.) 17x25

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

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Sidewall _____
 Longitudinal _____
 Marriage wall _____
 Shearwall _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer Over 110 lb

Number

22

9

3

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1800 X 1500 X 1900

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 1800 X 1500 X 1800

TORQUE PROBE TEST

The results of the torque probe test is 295 inch pounds or check here if you are declaring 5' anchors without testing 275. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

9-13-11

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. 28

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

Connect all potable water supply piping to an existing water meter, water tap, or other dependent water supply systems. Pg. 29

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: 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.

Type gasket Pg.

Installer's Initials

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 ☒ N/A ☐
Electrical crossovers protected. Yes ☒
Other: ☐

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

Installer Signature

Robert Sheppard

Date

9-13-11

>> [Print as PDF](#) <<

E1/2 OF SE1/4 EX N 782.89 FT
OF S 2073.28 FT LYING E OF
CR-245 & EX THE N 233.86 FT
LYING E OF CR-245 & EX 3 AC

HARDEN BESSIE
12363 SE COUNTY ROAD 245
LULU, FL 32061

25-5S-17-09377-000

Columbia County 2011 R
CARD 001 of 001
BY JEFF

PRINTED 6/20/2011 12:51
APPR 9/22/2005 DF

BUSE 000100 SINGLE FAM AE? Y 1246 HTD AREA 108.500 INDEX 25517.00 DIST 3 PUSE 005000 IMPROVED AG
MOD 1 SFR BATH 1.00 1365 EFF AREA 50.995 E-RATE 100.000 INDX STR 25- 5S- 17
EXW 19 COMMON BRK FIXT 69608 RCN 1971 AYB MKT AREA 02 42,460 BLDG
% 0000000000 BDRM 3 61.00 %GOOD 42,460 B BLDG VAL 1971 EYB (PUD1 400 XFOB
RSTR 03 GABLE/HIP RMS 50.770 7,710 LAND
RCVR 12 MODULAR MT UNTS 3 N/A C-W% 7,240 CLAS
% N/A PMTR 133,465 MKTUSE
INTW 04 PLYWOOD HGHT 1.0 3 +-----15-----+ 184,035 JUST
% N/A STYS 57,810 APPR
FLOR 14 CARPET ECON 3 +-----28-----+ 14-----11-----+
10% 06 VINYL ASB FUNC 3 IBAS1993 9FST19939
HTTP 04 AIR DUCTED SPCD 3 I I I
A/C 02 WINDOW DEPR 52 3 I I I
QUAL 05 05 UD-1 N/A 3 I I I
FNDN N/A UD-2 N/A 3 2 I I I
SIZE 03 RECTANGLE UD-3 N/A 3 6 I I I
CEIL N/A UD-4 N/A 3 I I I
ARCH N/A UD-5 N/A 3 I I I
FRME 01 NONE UD-6 N/A 3 I I I
KTCH 01 01 UD-7 N/A 3 I I I
WNDO N/A UD-8 N/A 3 +-----15-----+ 24-----+ 11-----+
CLAS N/A UD-9 N/A 3 8FEP1993 8
OCC N/A UD-9 N/A 3 I I I
COND 03 03 % N/A 3 +-----24-----+
SUB A-AREA % E-AREA SUB VALUE 3
BAS93 1092 100 1092 33968 3
FEP93 192 80 154 4790 3
FCP93 187 25 47 1462 3
FST93 99 55 54 1680 3
UOP93 90 20 18 560 3
TOTAL 1660 1365 42460

FIELD CK: 11/18/1998 MO
ADJUSTMENTS
UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE
1.000 1.00 1.00 1.00 1.000 AC 7710.490 7710.49 7,710
1.00 1.00 1.00 1.00 45.770 AC 156.000 156.00 7,140AG
1.00 1.00 1.00 1.00 4.000 AC 25.000 25.00 100AG
1.00 1.00 1.00 1.00 45.770 AC 2916.000 2916.00 133,465MK

PERMITS
NUMBER DESC AMT ISSUED
14566 M H 125 9/28/1998

SALE
BOOK PAGE DATE PRICE
796 553 9/30/1994 U I
GRANTOR BESSIE HARDEN
GRANTEE REBECCA L ROBERTS

EXTRA FEATURES
AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE
Y 0296 SHED METAL 1 2005 1.00 1.000 UT 400.000 400.000 100.00 400

L004 - JOINS 30-5S-18-10610-000

AFFIDAVIT**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We) Bessie Harden
owner of the below described property:

Tax Parcel No. 25-55-17-09377-00

Subdivision (name, lot, block, phase) NA

Give my permission to Betty Howell 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.

✓ Bessie Harden
Owner

Owner

SWORN AND SUBSCRIBED before me this 8 day of September,
20 11. This (these) person(s) are personally known to me or produced
ID FL DL

Shirley M. Bennett
Notary Signature



765-1031

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE 386-623-2203

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

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

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

| | | |
|-----------------------------|--|--|
| ELECTRICAL ✓ | Print Name <u>Betty R. Howell</u> License #: <u>OWNER</u> | Signature <u>Betty R. Howell</u> Phone #: <u>386-752-4865</u> |
| MECHANICAL/A/C _____ | Print Name <u>Betty R. Howell</u> License #: <u>OWNER</u> | Signature <u>Betty R. Howell</u> Phone #: <u>386-752-4865</u> |
| PLUMBING/GAS _____ | Print Name <u>Robert Sheppard</u> License #: <u>JH1025386</u> | Signature <u>Robert Sheppard</u> Phone #: <u>386-623-2203</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.

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, Robert Sheppard, license number FH1025386

state that the installation of the manufactured home for owner

Betty Howell at

911 Address: SE Bunny Ct City Lake City

will be done under my supervision.

Signed: Robert Sheppard
Mobile Home Installer

Sworn to and described before me this 13 day of September 20 11

Shirley M Bennett
Notary public

Shirley M Bennett Personally known ✓
Notary Name

DL ID _____



CODE ENFORCER ENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 9-14-11 BY CH IS THE M/M ON THE PROPERTY WHO THE PERMIT WILL BE ISSUED? Yes - moving to different location on same property
OWNERS NAME Betty Howell PHONE 386-752-4865
ADDRESS 12363 SE CR 245 Lulu FL 32061
MOBILE HOME PARK NA SUBDIVISION NA
DRIVING DIRECTIONS TO MOBILE HOME 41 South to CR 349 turn L go just about to end (CR 245) to #9 on R
162 SE Bunny Ct.
MOBILE HOME INSTALLER Robert Sheppard PHONE 386-623-2203

MOBILE HOME INFORMATION

MAKE Oak Brook YEAR 86 SIZE 11' x 60 COLOR cream
SERIAL No. 10L18984

WIND ZONE II Must be wind zone II 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 () 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 () NOT WEATHERTIGHT
☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED / WITH CONDITIONS: _____

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

SIGNATURE Cheryl S. Powell ID NUMBER 402 DATE 9-15-11

App # 1109-23

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P. O. Box 1787, Lake City, FL 32056-1787

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COLUMBIA COUNTY DEPARTMENT OF BUILDING AND ZONING

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 25-5S-17-09377-000

Building permit No. 000029701

Permit Holder ROBERT SHEPPARD

Owner of Building BESSIE HARDEN(BETTY HOWELL(MH))

Location: 2234 SE CR 349, LAKE CITY, FL 32025

Date: 10/19/2011

Ray Curran

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



DATE 09/28/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction**PERMIT**
000029701

APPLICANT WENDY GRENNELL PHONE 386.288.2428
ADDRESS 3104 SW OLD WIRE ROAD FT. WHITE FL 32038
OWNER BESSIE HARDEN(BETTY HOWELL(MH) PHONE 386.752.4865
ADDRESS 2234 SE CR 349 LAKE CITY FL 32025
CONTRACTOR ROBERT SHEPPARD PHONE 386.623.2203

LOCATION OF PROPERTY 41-S TO C-349,TL AND GO ALMOST TO END @ C-245,TR AND IT'S
2ND TO LAST DRIVE ON R.

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT

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

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 25-5S-17-09377-000 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 50.77

IH1025386
Culvert Permit No. Culvert Waiver Contractor's License Number Wendy Grennell Applicant/Owner/Contractor

EXISTING 11-0394 BLK TC N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: DESIGNATING THE 5 ACRES IN THE NW CORNER OF THE PROPERTY. MEETS

DENSITY REQUIREMENTS. 1 FOOT ABOVE THE ROAD.

Check # or Cash CASH REC'D.

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by

Framing Insulation
date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by

Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 12.22 WASTE FEE \$ 16.75

FLOOD DEVELOPMENT FEE \$ 0.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ 0.00 **TOTAL FEE** 353.97

INSPECTORS OFFICE CH 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.