		Building Pe		PERMIT
APPLICANT CAROLYN PARLATO	it Expires One Ye	ear From the Date o	f Issue 963-1373	000023341
ADDRESS 7161 152ND STREET		WELLBORN	303 1373	FL 32094
OWNER ROBERT JOHNSON/JAMES JO	HNSON	PHONE	365-4182	32071
ADDRESS SW CYPRESS LAKE	E ROAD	LAKE CITY		FL 32055
CONTRACTOR MICHAEL PARLATO		PHONE	963-1373	_
LOCATION OF PROPERTY 90W, TL O	N 247S, TR ON 242, T	L ON CYPRESS LAKE	DRIVE, 500	
YDS TO D	RIVE ON LEFT, PAST	Γ 4 BOARD FENCE, IN	MIDDLE OF FIEI	LD
TYPE DEVELOPMENT MH,UTILITY	EST	ΓΙΜΑΤΕD COST OF CO	NSTRUCTION	200.00
HEATED FLOOR AREA	TOTAL ARE	EA	HEIGHT .0	00 STORIES
FOUNDATION WALL	S R	OOF PITCH	FLC	OOR —
LAND USE & ZONING A-3	-	MAX	HEIGHT	
Minimum Set Back Requirments: STREET-F	RONT 30.00	REAR	25.00	SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE	<u>X</u>	DEVELOPMENT PERM	fIT NO.	
PARCEL ID 26-4S-15-00401-024	SUBDIVISION	N LANGTREE UREC	_	
LOT 24 BLOCK PHASE _	UNIT	тота	L ACRES (
	IH0000226		13	
Culvert Permit No. Culvert Waiver Cor	IH0000336 htractor's License Numb	Der A	200	stoled.
EXISTING 05-0043-N	BK	A	pplicant/Owner/Co	ontractor Y
Driveway Connection Septic Tank Number	LU & Zoning	checked by Appro	oved for Issuance	New Resident
COMMENTS: ONE FOOT ABOVE THE ROAD				Tion Resident
		(Check # or Casl	h 5739
FOR BUIL	DING & ZONING	DEPARTMENT (ONLY	
Temporary Power	Foundation		Monolithic	(footer/Slab)
date/app. by		date/app. by		date/app. by
Under slab rough-in plumbing			Sheathing/Na	iling
Framing date/app. b		date/app. by	 2	date/app. by
date/app. by	ough-in plumbing abov	ve slab and below wood fl	oor	
Electrical rough-in F	Heat & Air Duct	2925	11 12020 - 2000 - 200	date/app. by
date/app. by		date/app. by	ri. beam (Lintel)	date/app. by
Permanent power date/app. by	C.O. Final		Culvert	закстарр. бу
M/H tie downs, blocking, electricity and plumbing	date	e/app. by	Pool	date/app. by
Reconnection	date/app. by	Elegania D	Activities and the second	date/app. by
date/app. by	Pump pole date/app	Utility Pole	date/app. by	
M/H Pole Travel T	Trailer	/app. by	Re-roof	ate/app. by
BUILDING PERMIT FEE \$.00 CE	RTIFICATION FEE \$			7-1
	RT. FEE \$ 50.00		SURCHARGE FE	
		- HLL I LL D 1/.UI	WASTEE	4 1 1 1 1 1 1 E
LOOD ZONE DEVELOPMENT FEE \$			My model and a second	303 76
	CULVERT FEE	\$ TO	OTAL FEE_	an Marine Systematical State
NSPECTORS OFFICE NOTICE: IN ADDITION TO THE REQUIREMENTS OF T PROPERTY THAT MAY BE FOUND IN THE PUBLIC RE FROM OTHER GOVERNMENTAL ENTITIES SUCH AS	CULVERT FEE	\$OOTO	OTAL FEE	303.76

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

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

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	PERMIT ALL ELGATION AND TORREST HOME INCLASED HOME
	Office Use Only Zoning Official OK 23.06.05 Building Official OK 57 H 4-28-05 AP#OSO4.88 Date Received OSO4/28/05 By Permit #23341
	. /
FI	ood ZoneX Development Permit Zoning Land Use Plan Map Category 3
	Comments
	WE'LL NEED THE 2ND WAT 911 ADDRESS: CEEN OTE
FE	MA Map # Elevation Finished Floor River In Floodway
(MA	Site Plan with Setbacks shown Environmental Health Signed Site Plan DE Env. Health Release
7	Well letter provided Existing Well Revised 9-23-04
	Property ID <u>26-45-15-00401-024</u> Must have a copy of the property deed
	New Mobile Home Used Mobile Home Year_ 1980
•	Subdivision Information LANGTORE SLO LANGE - LOT 24
	Applicant apolyn A. 12 dato Phone # 963-1373
	Address Mel 152nd St. Wellbon, Fl 32094
	The top of
	Name of Property Owner Robert Johnson Phone# 755-9573
14	
	911 Address 3349 500 Cypress have Rd. Lake City Fl
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progressive Energy
	Name of Owner of Mobile Home James Johnson Phone # 365-4182
	Address P.O. BOU 873 Lake City, FI 32055
•	Relationship to Property Owner Father + 5pm
-	Current Number of Dwellings on Property \ ?
	Lot Size Total Acreage \O
	Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
•	Driving Directions 900 to 247 Thomas co to 242 TR 50 to Cypress
	Cake Rd & Tleff go approx 500 yds to Drive on the text
99	post 4-Roard Fence / go aprox. poort to Buse fole is green telephon
_ 8	BUL - mobile Home is should taken without a charle
-	Is this Mobile Home Replacing an Existing Mobile Home ND
	Name of Licensed Dealer/Installer Michael J. HarlatoPhone # 963-1373
	Installers Address 716 152nd St. Wellbond, Fl 32094
•	License Number <u>IH 00003310</u> Installation Decal # <u>246323</u>

Debris and organic material removed V Water drainage: Natural Swale Pad Other
ide units
Type Fastener: Type Fastener:
For used nomes 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, meldew 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
ing
The bottomboard will be repaired and/or taped. Yes Pg. WASIDING ON Units is installed to manufacturer's specifications. Yes Pg. WASIDING OF TAIL PROVIDED THE PROVIDED TO STATE OF THE PROVIDED TO S
×
Skirting to be installed. Yes No NA
Other:
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 Signature Thouse 1, laws Date 4-3-05



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0043N - PART II - SITE PLAN-Scale: Each block represents 5 feet and 1 inch = 50 feet. Site Plan submitted by: Duna Pian Approved Not Approved County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6) 9:13 No.004 P.01 APR 28'05 COL. CO. HEALTH DEPT. ID:386-758-2187

FROM : COLUMBIA COUNTY EMS FAX NO. :386 758 2121 Apr. 11 2005 03:16PM P1 MARCH 23, 2005 To whom it may concern, DEAR STRE This Letter is to inform the permitina DEPARTMENT in Colombia County, Fla that I Give PERMISSION to MY SON, JAMES JOHNSON to permatter set his moisile none on the North 5 Aux portion of MI preparty Known as lot at Langtrie U/R. DE spectfully Yours Slopent Johnson

DEPARTMENT OF CODE ENFORCEMENT COLUMBIA COUNTY, FLORIDA

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 8/23/04 BY
IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? 4 S
OWNERS NAME Robert & James John Son 755-9573 CELL 965-1975
911 ADDRESS 3349 SW CAPRESS LAKE DR. Rd. JAMES
MOBILE HOME PARK W/A SUBDIVISION LANGTHE
DRIVING DIRECTIONS TO MOBILE HOME Branford, TR 242, TL
Cypress Lake Rd, TL on drive past wood Lence,
600ft.
CONTRACTOR C+m Setups PHONE CELL
MOBILE HOME INFORMATION
MAKE Fleetwood YEAR 1980 SIZE 14 x 70
COLOR Brown SERIAL No. unknown
WIND ZONE SMOKE DETECTOR 9es
INTERIOR: FLOORS
DOORS
WALLS
CABINETS
ELECTRICAL (FIXTURES/OUTLETS)
EXTERIOR: WALLS / SIDDING
WINDOWS
DOORS
STATUS: APPROVED WITH CONDITIONS:
NOT APPROVED NEED REINSPECTION
INSPECTOR SIGNATURE Dugg NUMBER 306