	010 Columbia Count This Permit Must Be Prominently	ty Building Permit Posted on Premises During Con	struction PERMIT
APPLICANT W	ENDY GRENNELL	PHONE	386.288.2428
ADDRESS	POB 39	FT. WHITE	FL 32038
OWNER B	RENDA M. ANDERSON(AARON ANDERS	ON M/H) PHONE	386.752.0530
ADDRESS 24	SW MAYO ROAD	LAKE CITY	FL 32024
CONTRACTOR	RODNEY FEAGLE	PHONE	352.283.1589
LOCATION OF P	ROPERTY <u>90-W TO PINEMOUNT</u> ,	TL TO MAYO,TR TO APPROX.	1/2 TO 3/4 MILE
	TO PROPERTY ON R,&	IT'S DIRECTLY ACROSS FROM	I BLUE HOUSE.
TYPE DEVELOP	MENT M/H/UTILITY	ESTIMATED COST OF COM	NSTRUCTION 0.00
HEATED FLOOR	AREA TOT	AL AREA	HEIGHT STORIES
FOUNDATION	WALLS	ROOF PITCH	FLOOR
LAND USE & ZO	NING A-3	MAX.	HEIGHT
Minimum Set Bac	k Requirments: STREET-FRONT	30.00 REAR	25.00 SIDE 25.00
NO. EX.D.U.	1 FLOOD ZONE X	DEVELOPMENT PERM	
PARCEL ID 01		DIVISION	
		*****	L ACRES 40.00.
	<u>IH0000526</u>		dy Surrell
Culvert Permit No. EXISTING	Culvert Waiver Contractor's Lice		Applicant/Owner/Contractor
Driveway Connect			w New Resident
2	ESIGNATING 5 ACRES AS INDICATED IN	с , н	
PARCEL. 1 FOOT			
	-4.9 V		Check # or Cash 6101
	FUR BUILDING &	ZONING DEPARTMENT	ONLY
Temporary Power			(Tooter/Stab)
Temporary Power	FOR BUILDING & Foundation date/app. by		ONLY (footer/Slab) Monolithic
Temporary Power Under slab rough-i	Foundation date/app. by	i	Monolithic
Under slab rough-i	Foundation date/app. by	date/app. by	Monolithic date/app. by
	Foundation date/app. by n plumbing date/app. by date/app. by Insulation	date/app. by Slab date/app. by	Monolithic date/app. by Sheathing/Nailing
Under slab rough-i	Foundation date/app. by n plumbing date/app. by	date/app. by Slab date/app. by date/app. by	Monolithic
Under slab rough-i Framing	Foundation date/app. by n plumbing date/app. by date/app. by Insulation	date/app. by Slab date/app. by date/app. by Ele	Monolithic date/app. by Sheathing/Nailing date/app. by
Under slab rough-i Framing	Foundation date/app. by n plumbing date/app. by date/app. by date/app. by g above slab and below wood floor	date/app. by Slab date/app. by date/app. by Ele date/app. by	Monolithic date/app. by Sheathing/Nailing date/app. by date/app. by
Under slab rough-i Framing Rough-in plumbing	Foundation date/app. by n plumbing date/app. by date/app. by date/app. by g above slab and below wood floor	date/app. by Slab date/app. by date/app. by Ele	Monolithic date/app. by Sheathing/Nailing date/app. by
Under slab rough-i Framing Rough-in plumbing	Foundation date/app. by n plumbing date/app. by date/app. by g above slab and below wood floor date/app. by C.O. Final	n date/app. by Slab date/app. by date/app. by Ele date/app. by m (Lintel) date/app. by	Monolithic date/app. by Sheathing/Nailing date/app. by ctrical rough-in date/app. by Culvert
Under slab rough-i Framing Rough-in plumbing Heat & Air Duct Permanent power Pump pole	Foundation date/app. by n plumbing date/app. by date/app. by g above slab and below wood floor date/app. by C.O. Final date/app. by Utility Pole	date/app. by Slab date/app. by date/app. by Ele date/app. by m (Lintel)	Monolithic date/app. by Sheathing/Nailing date/app. by Culvert date/app. by date/app. by and plumbing
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Under slab rough-i Framing Rough-in plumbing Heat & Air Duct Permanent power Pump pole Reconnection	Foundation date/app. by n plumbing date/app. by date/app. by g above slab and below wood floor date/app. by date/app. by Dtility Pole app. by date/app. by RV date/app. by	date/app. by Slab	Monolithic
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Under slab rough-i Framing Rough-in plumbing Heat & Air Duct Permanent power Pump pole Reconnection BUILDING PERM MISC. FEES \$ FLOOD DEVELOF INSPECTORS OFI		date/app. by Slab	Monolithic

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.

	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
	Zoning Official Bullding Official (2-8-10
	Once oscient - 08 Data Received 2/5 By JW Permit #_ 08060
<u>AP</u>	The second and the se
Flo	ments Designating Sacres as indicated in solomers application of the yearse
Cor	Land diagonal distance in the second s
P	A Map# MA Elevation NA Finished Floor And River NA In Floodway MA
FEN	IA Map#A ElevationFinished Floor Release Well letter # Existing well ite Plan with Setbacks Shown E EH # 10.00.56 MA EH Release Well letter # Existing well
Ċ-S	ecorded Deed or Affidavit from land owner ELetter of Auth. from installer - State Road Access
	arent Parcel # Corr Road/Code
IMPA	CT FEES: EMS FILE Suspended CT 214
	School= IOTAS Y Y da(Me(S -torm)
Prop	erty ID # 01-45-15-00316-000 Subdivision NA
	Used Mobile HomeMH Size
	Kocky Ford 201 201 21/2C
	Applicant wondy creating the first ff 32038
20	Address <u>PO BOX ST FT WILLE Ponet 386 752-0530</u>
	Raille of richersy of the Solory
forte	911 Address 2456 300 Mayo Koad Lake City FL 32001
	Circle the correct power company -
	(Circle One) - <u>Suwainise Tanop Ice</u>
	Name of Owner of Mobile Home Aaron Anderson Phone # 386-752-0530
•	Address 2463 Sw Mayo Rd Lale City FL 32024
	Address A 12 COC
•	Relationship to Property Owner
	Current Number of Dwellings on Property
	Lot Size 1329' Total Acreage 5240 40
550	Driver Drive or need Culvert Permit or Culvert Waiver (Circle one)
•	(Currently using) (Bide Road Sign)
	Is this Mobile Home Replacing an Existing Mobile Home ND OWes
	Driving Directions to the Property Huy 90 West to PinemounTRC
	two (L) to SW mayo Ka two (R) gu
	approx'tz - 3/4 mile to property on (R) directly
	across from # 2463 Blue house
	Name of Licensed Dealer/Installer Rodney Feacle Phone # 352-283-1589
	Installers Address 225 (apital Street Bronson FL Javer
	License Number IH 0000526 Installation Decal # 001120
	CALK 6101 - Afrid Aut - Spoke to Ment
	219/10

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page 2 of 2

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Connect all sewer drains to an existing sewer tap or septic tank. Pg.	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.	Electrical	2-2-2-00	Installer Name CODINEY FEAGLE	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 holding capacity. Installer's initials	TORQUE PROBE TEST The results of the torque probe test is 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.	QCETX OCOTX COCTX	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	2. Take the reading at the depth of the footer.	1. Test the perimeter of the home at 6 locations.	POCKET PENETROMETER TESTING METHOD	ODE X ODE X COEX	1000 lb. soil without testing.	unded do	DOCKET DENETROMETED TEST	PERMIT NUMBER
Installer Signature 2-2-201	is accurate and true based on the	Installer verifies all information given with this permit worksheet	Other:	side of skirting nstalled outsid t 4 foot interva otected. Yes	Skirting to be installed. Yes	Miscellaneous	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	Type gasket FOAM Installer's initials 4 Pg. 10 AM Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are	Gasket (weatherproofine requirement)	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	Type Fastener: A screek Length: 3/' Spacing: Type Fastener: A screek (Length: Full Spacing: For used homes a min 30 rating 8" wide releasing min	Length: ('' Spacing:	Fastening multi wide units	Debris and organic material removed	Site Preparation	

	marriage wall piers within 2 of end of home peelRule 15C		where the sidewall ties exceed 5 ft 4 in. Installer's initials $A \in I$ Typical pier spacing I_{intensit} I_{in	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	Address of home TRD TOALD RD. being installed CAKE COULEC 32004. Manufacturer SCOTBILT, Length x width 28×54	Installer 1200/104 FFAGE6 License # 12400000 L	PERMIT NUMBER
D A TIEDOWN CON Stabilizing De Stabilizing De	(required by the mfg.) Image: Content performance of the mfg.) Image: Content performance of the matriage of the	POPULAR PAD SIZ Pad Size 16 x 16 16 x 18 18.5 x 18.5 18.5 x 18.5	Load bearing capacity Footer (size capacity 16" x 16" 18 1/2" x 18 1/2" 20" x 20" 22" x 22" 24" X 24" 26" x 26" 1000 psf 3" 4" 5" 6" 7" 8"	Serial # 2/201	Zone III	New Home Let Used Home	(SHEET page 1 of 2

h \bigotimes 1- PADS - M.SX2SS S'4"olc ISD X 4 Systems (Oliver ANCHORS- 44 @ S'4" o/C 10 PER SIDE BLOCKING DIAGRAM AARON ARASON 1 4 下山一山 中田田田山中 28XSY D/W Ŧ ti 10 per rail - A or 3 sch 8 8 A) 20x20 C1, 23. 5 x31.5 B.) 23.5x 31.5 E) 20 × 20 0)23.5x31.5 BLODGING



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Wholesale Homesot FI.

1(386)364-1386

p.2



A & B Well Drilling, Inc. 5673 NW Lake Jeffery Road Lake City, FL, 32055 (O) 386-758-3409 (F) 386-758-3410 (C) 386-623-3151

11/6/2009

To: Columbia County Building Department

Description of well to be installed for Customer: Residential Well Located at Address: SW Mayo Road - anderson

1 hp 15 GPM Submersible Pump, 1 1/2" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Sincerely Bruce Park President . .

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A&B Construction PO Box 39 Ft White, FI 32038 386-497-2311 Office 386-497-4866Fax

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 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

license number IHOUUS -AG(F

state that the installation of the manufactured home for owner

ANDERSON at AARON 0 City MAUO 911 Address: TBD will be done under my supervision. Signed: Mobile Home Installer 2000 day of KELLY R. BISHOP SUMMUNICA STRATE Comm# DD0747390 Expires 1/9/2012 ary public Florida Notary Assn., Inc Personally known DL ID



This information, GIS Map Updated: 1/8/2010, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

http://g2.columbia.floridapa.com/GIS/Print_Map.asp?pjboiibchhjbnligcafceelbjemnolkjkmgaaogmm... 1/26/2010

EX 0893 101776 This Instrument Prepared By: FREDERICK L. KOBERLEIN NORRIS & KOBERLEIN, P.A. FEIGLAL FEIBIST 21084 LAKE CITY, FLORIDA 32056-2349

FILED AND RECORCED IN PUBLIC RECORDS OF COLUMNIA COUNTY, FI

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SPECIAL WARRANTY DEED

THIS SPECIAL WARRANTY DEED, Made this 16th day of December, 1999. between WILLIAM A. LARSON, SR., unmarried, _, Lake City, Florida 32024 4, Box 196 Rt. Grantor, and BRENDA MARIE LARSON ANDERSON, SS# MANAGEMENT, 10201 W. Beaver Street, Lot 152, Jacksonville, Florida 32220, Grantee.

WITNESSETH:

That the Grantor, for and in consideration of the sum of TEN AND No/100 (\$10.00) DOLLARS, and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in Columbia County, Florida, described as follows:

TOWNSHIP 4 SOUTH, RANGE 15 EAST

Section 1: NW 1/4 of SE 1/4. Said lands being in Columbia County, Florida and consisting of approximately 40 acres, subject to existing easement and road right-of-way.

Parcel No. 01-4S-15-00316-000

description الدي . This is provided by Grantor and without a title search

The above described property does not constitute the homestead of Grantor.

TOGETHER, with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD, the same in fee simple forever.

AND the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons claiming by, through or under the said Grantor.

IN WITNESS WHEREOF, the said Grantor has hereunto set his hand and seal the day and year first above written.

Signed, sealed and delivered in our presences

Sign Print F. KORTA Sign_ Dinne A Print

(SEAL) LARSON.

STATE OF FLORIDA COUNTY OF COLUMBIA

1

The foregoing instrument was acknowledged before me this $\underline{//24}$ day of December, 1999, by WILLIAM A. LARSON, SR., unmarried, who is personally known to me or has produced <u>Fig. Driver's License</u> as identification.

NOTARY PUBLIC: Sign DiANE A. CREWS Print_

State of Florida at Large (Seal) My Commission Expires: OFRICHLNOTHIN SEAL DIANE A CREATE OF FLORIDA COMMISSION NO. CC00205 MY COMMISSION EXP. FEB. 92002

GFFICIAL AECORDO

INSTALLATION CERTIFICATION LABEL

30	7728
LABEL	#

DATE OF INSTALLATION

Rodney L. Feagle

NAME

IH0000526

LICENSE #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF HIGHWAY SAFETY AND MOTOR VEHICLES, BUREAU OF MOBILE HOME AND RECREATIONAL VEHICLE CONSTRUCTION.

13776

ORDER #

OUSTOMER . ANDERSON

ON HOME AT SET,

2009-10 Mobile Home Installer License

Rodney L. Feagle

Licensee:

1H0000526

License Number: Effective Date 10-1-09

state of Florida - D

Expiration Date 9-30-10

a of Motor Vehicles







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SUBCONTRACTOR VERIFICATION FORM

APPLICATION	NUMBER	1	0	0	1
MALTON	14Olampru	-	-	-	-

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

PHONE 397-283-1589

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.

	1	OUV.	Conner	Signature	Michael & Comm
ELECTRICAL	Print Name	and the second se	13192	Signature	Phone #: 386-758 - 2233
4					C. DID-IEN -
MECHANICAL/	Print Name		Grant	Signature	
A/C	License #:	CAC 18	14931		Phone #: 800 559-3708
PLUMBING	Print Name	KODIDE	y FEAGL	Signature	
GAS	License #: *	IHOOOD	526	14	Phone #: 352 -283 -1589
ROOFING	Print Name	1.77		Signature	
	License #:		(*)		Phone #:
SHEET METAL	Print Name			Signature	
	bicense #:		i.		Phone #:
FIRE SYSTEM/	Print Name			Signature	
SPRINKLER	License#:				Phone #:
SOLAR	Print Name	1		Signature	
	License #:				Phone #:
Specialty Li	icense	License Numł	er Sub-Cor	tractors Printed Nan	e Sub-Contractors Signature
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STUCCO		5			
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PLASTER			1		
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F. 5. 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.



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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

,give this authority and I do certify that the below EAGLE

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	Agents Company Name	
Wendy Grennell	Wendy Shernell	ACB Construct	Sinc
Dale Burd		n 11	
Rocky Ford	Rul 71	10 (1	

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.

+0000526 2.2-2010

License Holders Signature (Notarized)

NOTARY INFORMATION: STATE OF: Florida

COUNTY OF: Columbia

The above license holder, whose name is RODNEY FEHGLE personally appeared before me and is known by me or has produced identification (type of I.D.) DRILLERS LICENSE on this 2 day of feb 20 10

NOTARY SIGNATURE



COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lats City, FL 32056-1787 PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_crofi@columbiaccentyfla.com

Addressing Maintenauce

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 agaist 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:	2/2/2010	DATE ISSUED:	2/5/2010	
ENHANCED 9-1-1 ADDRES	S :			
2456 SW MAY)		RD	
LAKE CITY PROPERTY APPRAISER P		2024 ER:		
01-45-15-00316-000				
Remarks:		app. 1002-0	ication 08	#.
Address Issued By:	County 9-1-1	Addressing / GIS D	coartment	
NOTICE: THIS ADDRE INFORMATION RECEI AT A LATER DATE, TH TO BE IN ERROR, THIS	SS WAS ISSU VED FROM 1 E LOCATION	TED BASED ON I	LOCATION R. SHOULD, I BE FOUND	
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APPLICATION NUN	100	A - OY	CONTRACTOR	Rodney	Fagle	- PHONE	
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applying for and receiving a building paralit, show proof and cartify to the permit insuer that it has secured. compensation for its employees under the cliqutur as provided in so. 440.10 and 440.38, and shell be presented each time the employee applies for a building permit.

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number 10-00:56
PART 11-SITEPLAN - # 10.0.2-0.8
Scale: 1 Inch = 50 feet. SEE ATTACHED SEE
Notes: 332 of 40 Acrus
Site Plan submitted by:
OH 4015, 10/96 (Replaces HRS-H Form 4016 which may be used) (Stock Number: 5744-002-4015-6) Page 2 of 4

AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

This is to certify that I, (We). Brenda Chalus owner of the below described property:	
Tax Parcel No. 1-45-15-00316-000	
Subdivision (name, lot, block, phase)	~~~~
Give my permission to <u>Aaron Anderson</u> mobile home/travel trailer/single family home (circle one) on the abo property.	to place a to place a to place a

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

n dowo Owner

Owner

SWORN AND SUBSCRIBED before me this 10 day of Februa 20 10 . This (these) person(s) are personally known to me or produced LICENSE ALIA ID

otary Signature

KELLY R. BISHOP Comm# DD0747390 Expires 1/9/2012 Florida Notary Assn., Inc

(Business Places Only)	POST IN A CONSPICUOUS PLACE	Date: 03/02/2010	Location: 2456 SW MAYO RD., LAKE CITY, FL	Owner of Building BRENDA M. ANDERSON(AARON ANDERSON M/	RODNEY FEAGLE	Parcel Number 01-4S-15-00316-000 Buildi	COLUMBIA COUNTY, FLO Continuent of Building and Z <i>Certificate of Occupancy is issued to the below name</i> <i>premises at the below named location, and certifies that</i> <i>ordance with the Columbia County Building Code.</i>	COLUMBIA COUNTY, FLOR	NYI OCCY			
	ACE Building Inspector	- De		M/H)		ilding permit No. 000028360	oning Inspection ed permit holder for the building t the work has been completed in	ORIDA	ANCX			