| M : | Fibe permit Mobile Home on Piers (Poured Concrete) |
|-----|---|
| 10, | pure permit permit Mobile Home on Piers (Poured Concrete) pure to PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION |
| F | 11 11 9 1-18 |
| 4 | 148.99 |
| | P# Development Permit 18-009 Zoning ESA 2 Land Use Plan Map Category ESA |
| | comments elevation certificate required Including Machinery before power |
| | in released. |
| FE | MA Map# 0467C Elevation 34 Finished Floor 35.00 River Sarda FC In Floodway 465 |
| | Recorded Deed or Property Appraiser PO Site Plan FEH# 18-010 Z U Well letter OR |
| P | Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid DOT Approval Parent Parcel # STUP-MH 911 App 100 |
| | DOT Approval Parent Parcel # STUP-MH STUP-MH |
| 7 | Spin Pemi + Assessment Raid on Property - Out County - In Sounty - Sub VF Form |
| | unit 2 |
| Pro | perty ID# 00-00-00-00573-019 Subdivision Three Rivers Estates Lot#19 |
| • | New Mobile Home Used Mobile Home MH Size 48 ×26 Year 2018 |
| | Applicant Teff Hordee Phone #352)744-0392 |
| | Address 6450 NW 72nd Lane, Chiefland Fl 32626 |
| | PR- for William Burke Phone# 1786) 236-8977 Lori Name of Property Owner Norma Burke Phone# 1786) |
| | 911 Address 788 SW Manches Ter Ft White F1 32038 |
| • | Circle the correct power company - FL Power & Light - Clay Electric |
| - | (Circle One) - Suwannee Valley Electric - Duke Energy |
| | |
| • | Name of Owner of Mobile Home Norma Parke Phone # (786) 236-8922 |
| | Address 925 SLS 181 Ter. Mjami + 33157 |
| • | Relationship to Property Owner Owner |
| | Current Number of Dwellings on Property Zero |
| | (01 × 99 c C/ |
| | Lot Size |
| • | Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) (Blue Road Sign) (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 Removed Makita Home JES |
| | Driving Directions to the Property 475 ~18 miles, TR onto W Right of |
| | Way St/SW Wijster Springs. TI on Wilson Springs Rd. |
| | TRON SW Alberta Pl. Turn Right on SW Pleasont For. |
| | year left w/ Road, TKon Ohio PKing, TKon Sonta te Kend. |
| • | Name of Licensed Dealer/Installer Roma Phone # 386 - 752 387/ |
| • | Installers Address 1004 Charles 7em Lake City F 623-77/6 |
| • | License Number # 53(c/2 |
| | |

UH-Spola & Jett 9-19-18 & Ronnie Norris

| | | | marriage well piers within 22 of end of home per Rule 15C | | | | Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) | where the sidewall ties exceed 5 ft 4 in. Installer's initials Typical pier spacing | NOTE: If home is a single wide fill out one half of the blocking plan I understand Lateral Arm Systems cannot be used on any home (new or used) | Manufacturer Specific Specific Length x width | Address of home being installed | Installer: TORN, & NOSKY License # I H/025/45/ | Mobile Home Permit Worksheet |
|---|--------------|--------------------|---|--|----------------------------------|--|--|--|---|---|--|--|------------------------------|
| Longitudinal Stabilizing Device (LSD) Number Nanufacturer Number Number | within space | Pier pad size 4 ft | | Other pier pad sizes (required by the mfq.) 18.5 x 18.5 342 16 x 22.5 360 17 x 22 374 17 x 22 374 13 1/4 x 26 1/4 360 400 400 | Pad Size 3 16 x 16 16 x 18 | 8' 8' 8' 8' 8' 6' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' | Desf 3' 4' 5' 6' 7' Desf 4'6" 6' 7' 8' 8' Desf 6' 8' 8' 8' Desf 7'6" 8' 8' 8' 8' | Load Footer bearing size capacity (sq in) (256) 1/2" (342) (400) (484)* (576)* (676) | PIER SPACING TABLE FOR USED HOMES | Installation Decal # 536/2 | Single wide Wind Zone II Wind Zone III | New Home Used Home Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C | mber: |

Mobile Home Permit Worksheet

Note: showing 275 inch pounds or less will require 5 foot anchors. The results of the torque probe test is here if you are declaring 5' anchors without testing or check here to declare 1000 lb. soil The pecket penetrometer tests are rounded down to anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft A state approved lateral arm system is being used and 4 ft. reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity. 3. Using 500 lb. increments, take the lowest 1. Test the perimeter of the home at 6 locations. POCKET PENETROMETER TESTING METHOD Take the reading at the depth of the footer. reading and round down to that increment POCKET PENETROMETER TEST TORQUE PROBE TEST without testing. Installer's initials inch pounds or check

Electrical

Date Tested Installer Name

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Connect electrical conductors between multi-wide units, but not to the main power This includes the bonding wire between mult-wide units.

Plumbing

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 independent water supply systems. Pg.

Application Number:

Daie

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|---|----|
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| I | ě |
| l | 맖 |
| l | 9 |
| ı | _ |

Debris and organic material removed Water drainage: Natural Swale

Pad

Other

Fastening multi wide units

Type Fastener Type Fastener -- %

Walls: Floor:

Roof

Length: Length:

Spacing: A Spacing: A

Type Fastener: Length: Spacing: A For used homes & Fin. 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)

of tape will not serve as a gasket a result of a poorly installed or no gasket being installed. I understand a strip 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

Installer's initials

Type gasket

Between Floors Installed

Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

Fireplace chimney installed so as not to allow intrusion of rain water. Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or taped. Yes Yes

Miscellaneous

Electrical crossovers protected. Yes Drain lines supported at 4 foot intervals. Yes Range downflow vent installed outside of skirting. Skirting to be installed. Yes

Dryer vent installed outside of skirting. Yes Z

Other:

₹ ×

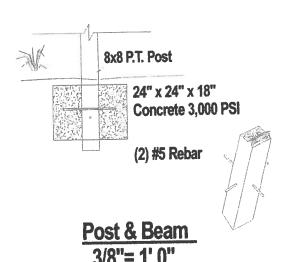
Installer verifies all information given with this permit worksheet is accurate and true based on the

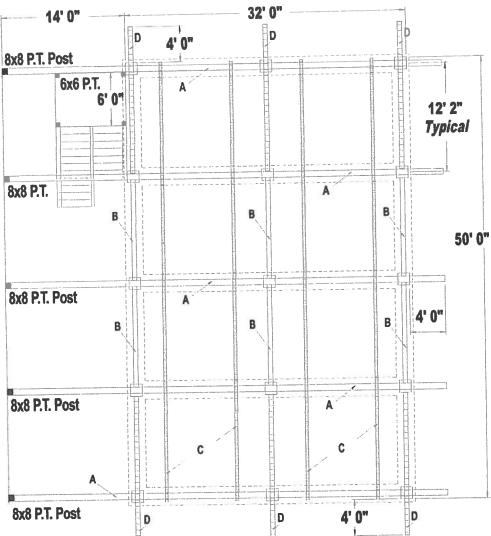
manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Date

Wind load design FBC2017 Category II Structure Ultimate design wind speed 120 mph



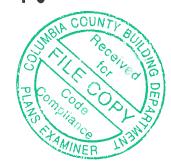


Notes:

- All concrete shall be 3,000 psi
- All rebar shall be grade 40
- Lap rebar 24" in both directions @ corners
- "A" is 8 x 24 beam welded to 1/4" plate
- "B" is 6" channel beam welded to "A" beams for top tie-downs
- "C" is mobile home beams welded to "A" beams
- "D" is W6x15 at end welded to and through "A" beam

FOUNDATION PLAN FOR:
Norma Burke
788 SW Manatee Ter.
Fort White, FI, Coumbia County

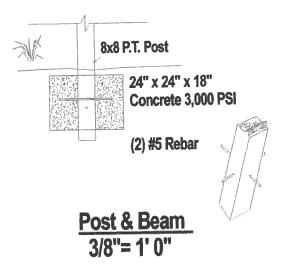
Foundation 3/32" = 1' 0"

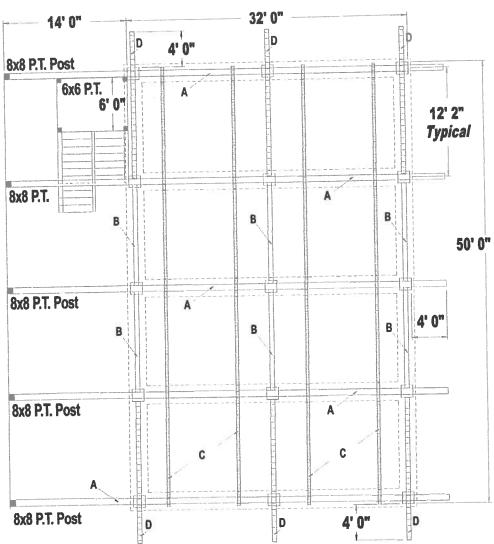


Pur 9/10/2018 FRE Revised: 2017 FRE

Ray E Reissener P.E. #33724 P.O. Box 3 Suwannee, Fl. 32692 352.317.1356 Page 1 of 3

Wind load design FBC2017 **Category II Structure** Ultimate design wind speed 120 mph





Notes:

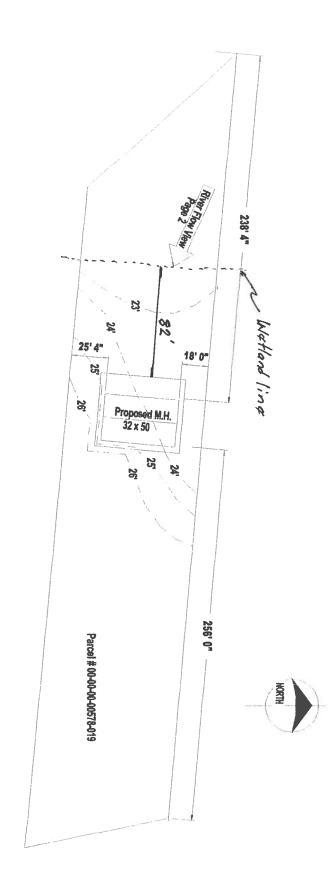
- All concrete shall be 3,000 psi
- All rebar shall be grade 40
- Lap rebar 24" in both directions @ corners
- "A" is 8 x 24 beam welded to 1/4" plate
- "B" is 6" channel beam welded to "A" beams for top tie-downs
- "C" is mobile home beams welded to "A" beams
- "D" is W6x15 at end welded to and through "A" beam

Foundation



FOUNDATION PLAN FOR: Norma Burke 788 SW Manatee Ter. Fort White, FI, Coumbia County Ray E Reissener P.E. P.O. Box 3
Suwannee, Fl. 32692
352.317.1356
Parent

Ray E Reissener P.E. #33724 352.317.1356 Page 1 of 3



Site Plan 1/64" = 1' 0"

1/64" = 1" 0" 1/8" = 1" 0"

Ray E Reissener P.E. #33724
P.O. Box 3
Suwannee, Fl. 32692
352.317.1356 Page 3 of 3

Troy Crews

From:

Laura Nettles

Sent:

Friday, September 07, 2018 8:12 AM

To:

Troy Crews

Subject:

FW: Norma Brurk permit

FYI

Laura Nettles

Planning Technician Columbia County Building & Zoning 135 NE Hernando Avenue Lake City, FL 32055 Ph. 386-719-1474 Inettles@columbiacountyfla.com



From: Ray Reissener <olesuwannee@yahoo.com>

Sent: Friday, September 7, 2018 8:10 AM

To: Laura Nettles < Inettles@columbiacountyfla.com>

Subject: Norma Brurk permit

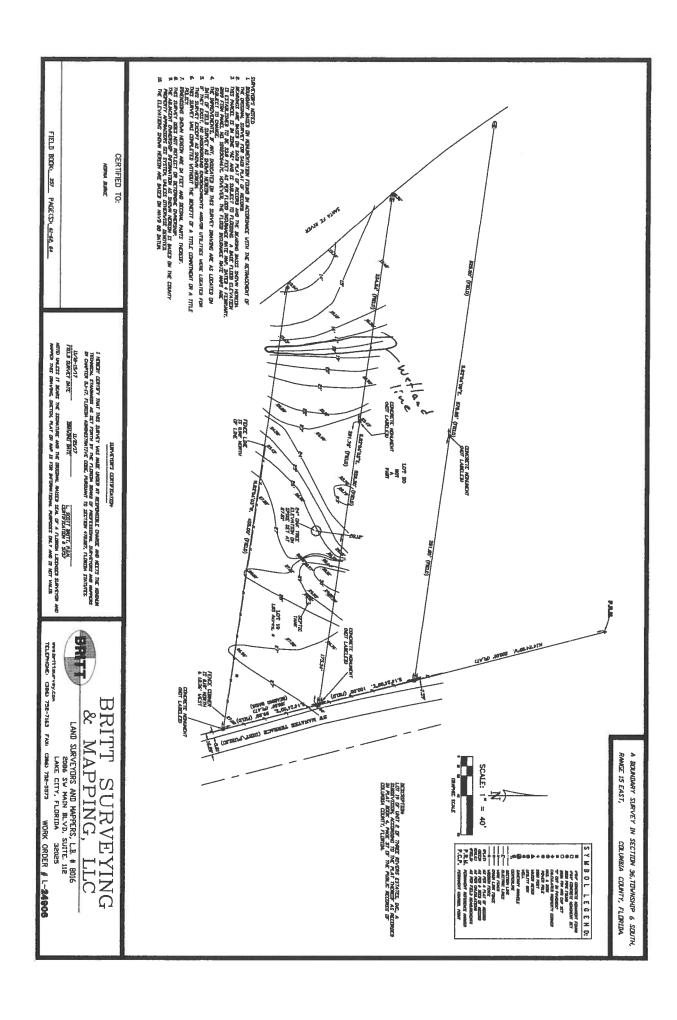
Dear Mr. Crews

Thanks for catching the error, 2014 Florida Building Code (FBC) on Ms. Burk's foundation plans. This is a cut and paste error, these plans were developed using the 2017 FBC, therefore they are in compliance with 2017 FBC.

Thanks

Ray E. Reissener P.E.

352-317-1356



inst. Number: 201612011407 Book: 1318 Page: 944 Page 1 of 2 Date: 7/11/2016 Time: 11:38 AM P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

2/24/2016 2:22 PM

IN THE CIRCUIT COURT OF THE 11th JUDICIAL CIRCUIT, IN AND FOR MIAMI-DADE COUNTY, FLORIDA

IN RE: THE ESTATE OF William K. Burke.

Page 1 of 2 St. 1318 Pt. 944, P. DeWitt Casons, Clerk, of Court Cabundán, County, By: KV Deputy ChrisDur Stamp-Derd; 0.80

PROBATE DIVISION CASE NO. 15-2229 Division (04)

Deceased.

ORDER AUTHORIZING DISTRIBUTION

This cause having come on to be heard upon the Petition of Norma F. Burke, as Personal
Representative of the Estate of William K. Burke, deceased, for Order For Distribution and
Discharge and after having heard argument of counsel and having reviewed the pleadings and
filings in this case, IT IS ORDERED AND ADJUDGED that:

- 1. The Petition for Distribution is granted.
- 2. The Personal Representative is hereby directed to distribute the following property to Norma F. Burke:
 - a) The South 300 feet of the North 1643 feet of the East 3/4 of the Southeast 1/4 of section 21, Township 56 the south, range 38 E., Dade County, Florida, less the West 200 feet and less the East 1608.5 feet thereof and less the area bounded by the south line of the north 1343 feet of the southeast 1/4 of said section 21, and bounded by the East line of the West 200 feet of the East 3/4 of the Southeast 1/4 of said section 21, and bounded by a 25 foot radius are concave to the southeast, said are heing tangent to both of the last described lines. (Also known as lot 384 of Bonanza Ranchos, and unrecorded subdivision)

AKA 20940 SW 244 Street

Mismi_FL33031_

b) Lot 19 of unit 2 of Three Rivers Estates Inc., a subdivision, according to the Plat thereof as recorded in Plat Book 4 Page 37 of the public records of Columbia County, Florida

A.K.A. 788 SW Manatee Terrace

Fort White, FI 32038

CERTIFICATION ON LAST PAGE HARVEY RUVIN, CLERK

Legal on property

Inst. Number: 201612011407 Book: 1318 Page: 945 Page 2 of 2 Date: 7/11/2016 Time: 11:38 AM P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.00

- c) 2014 GMC truck: Title Number 115176311, Vehicle ID# 3GT()2VEC4EG443041
- d) 1983 Honda ATV: Title Number 92128172, Vehicle ID# JH2PD0302DM003227
- e) 1976 Dodge pickup truck: Title Number 16712789, Vehicle ID# W14BE6S213579
- f) 1984 Liberty mobile home: Title Number 22852958, ID# 10L16976
- g) WPI boat: Title Number 1210578, ID# WPI4099BK586, Vessel Registration Number FL9433EX

Piliable Oce moi

CIRCUIT COURT JUDGE CELESTE HARDEE MUIR

Copies furnished to all interested parties

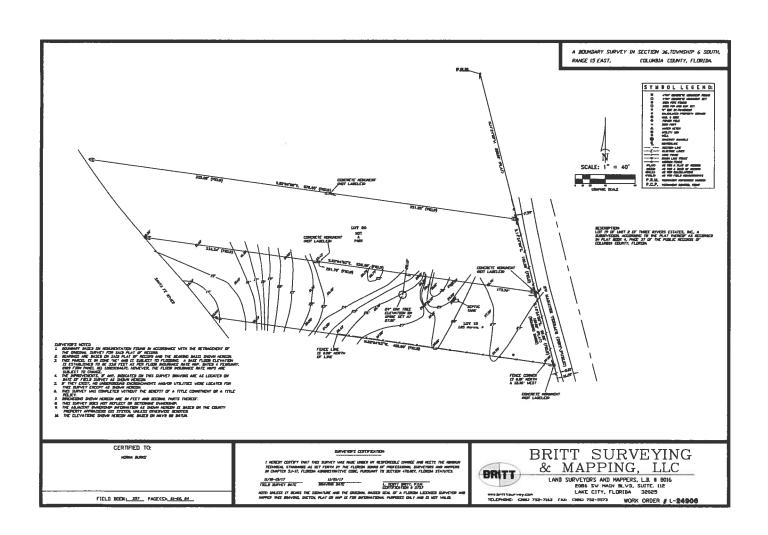
GEOTS LUMBON AND THE PROPERTY OF THE PROPERTY

STATE OF FLORIDA, COUNTY OF COLUMBIA ! HEHEBY CENTIFY, that the obeye and foregoing it a true copy of the cripical field in this office. P. Dewart CASON, CLERK OF COURTS

By 10/6/2017

Date Pattil affin acho

STATE OF FLORIDA, COUNTY OF MIAMI-DADE
HEREBY CERTIFY that the longgoing is a line and county of the
hard on the in this office.
HARVEY RUVIN. CLERK of Circuit and County Courts
Deputy Clerk



Columbia County Property Appraiser updated: 8/1/2018

Parcel: 00-00-00-00578-019

<< Next Lower Parcel Next Higher Parcel >>

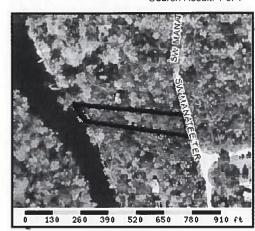
Owner & Property Info

| | | *************************************** | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| Owner's Name | BURKE WILLI | BURKE WILLIAM K JR | | | | | | | |
| Mailing Address | | 0245 SW 181 TERR MIAMI, FL 33157 | | | | | | | |
| Site Address | 788 SW MANATEE TER | | | | | | | | |
| Use Desc. (code) | MOBILE HOM (000200) | | | | | | | | |
| Tax District | 3 (County) Neighborhood 100000 | | | | | | | | |
| Land Area | 0.940 Market Area 02 | | | | | | | | |
| Description | NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. | | | | | | | | |
| LOT 19 UNIT 2 THREE RIVERS ESTATES. ORB 743-1798, DC FRED PRIMO (RECDED IN ALACH CNTY), WD 1013-1938. | | | | | | | | | |

2017 Tax Roll Year

Property Card Tax Estimator Tax Collector Parcel List Generator Interactive GIS Map 2018 TRIM (pdf)

Search Result: 1 of 1



Property & Assessment Values

| 2017 Certified Values | | |
|-----------------------|----------|---|
| Mkt Land Value | cnt: (0) | \$42,000.00 |
| Ag Land Value | cnt: (2) | \$0.00 |
| Building Value | cnt: (1) | \$13,095.00 |
| XFOB Value | cnt: (1) | \$480.00 |
| Total Appraised Value | | \$55,575.00 |
| Just Value | | \$55,575.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$55,575.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | | Cnty: \$55,575 Other: \$55,575 Schl: \$55,575 |

| 2018 Working Values | | (. Hide Values) |
|-----------------------|-------------|--|
| Mkt Land Value | cnt: (0) | \$42,000.00 |
| Ag Land Value | cnt: (2) | \$0.00 |
| Building Value | cnt; (1) | \$13,833.00 |
| XFOB Value | cnt: (1) | \$480.00 |
| Total Appraised Value | | \$56,313.00 |
| Just Value | | \$56,313.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$56,313.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | Other: \$56 | Cnty: \$56,313 5,313 Schl: \$56,313 |

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

| Sale Date | OR Book/Page | OR Code | Vacant / Improved | Qualified Sale | Sale RCode | Sale Price |
|-----------|--------------|---------|-------------------|----------------|------------|-------------|
| 4/23/2004 | 1013/1938 | WD | I | Q | | \$74,000.00 |
| 3/29/1991 | 743/1798 | WD | V | U | 02 | \$0.00 |

Building Characteristics

| Blag Item | | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value | |
|-----------|--|--------------------|----------|-----------------|-------------|-------------|-------------|--|
| L | 1 | MH PILING (000808) | 1984 | BELOW AVG. (03) | 924 | 2439 | \$13,833.00 | |
| | Note: All S.F. calculations are based on exterior building dimensions. | | | | | | | |

Extra Features & Out Buildings

| Code | Desc | Year Bit | Value | Units | Dims | Condition (% Good) |
|------|------------|----------|----------|-------------|-------------|--------------------|
| 0296 | SHED METAL | 2000 | \$480.00 | 0000480.000 | 16 x 30 x 0 | AP (050.00) |

Columbia County Tax Collector

generated on 8/30/2018 12:52:01 PM EDT

Tax Record

Last Update: 8/30/2018 12:52:00 PM EDT

Register for eBill

Ad Valorem Taxes and Non-Ad Valorem Assessments

The information contained herein does not constitute a title search and should not be relied on as such

| Account Number | | | Tax Ty | /pe | Tax | Tax Year | | |
|---------------------|---|------------------|----------------------------|-------------------------|-------------------|--------------------------------|--|--|
| | R00578-019 | | REAL ESTATE | | | 017 | | |
| BURKE | ng Address WILLIAM K JR SW 181 TERR | | | y Address ATEE SW FT | WHITE | | | |
| MIAMI | FL 33157 | | GEO Numb | oer)0578-019 | | | | |
| | Exempt Amount | | Taxable | Value | | | | |
| | See Below | | See Be | low | | | | |
| _ | tion Detail EMPTIONS | Millage 003 | e Code | E | scrow Code | è | | |
| 743-1 | 798, DC FRED PRIMO | | em Taxes | | 3-1938. | | | |
| axing A | Authority | Rate | Assessed Value | Exemption Amount | Taxable Value | Taxes Levied | | |
| | COUNTY COMMISSIONERS | 8.0150 | 55,575 | 0 | \$55,575 | \$445.43 | | |
| OISCRETION OCAL | | 0.7480 4.3200 | 55,575 55,575 | 0 | \$55,575 | | | |
| | JTLAY RIVER WATER MGT DIST E HOSPITAL AUTHORITY | 1.5000 0.4027 | 55,575 55,575 55,575 | | \$55,575 | \$93.36 \$20.38 | | |
| ANE SHUKE | S HOSPITAL AUTHORITI | 0.9620 | 22,2/2 | 0 | \$55 , 575 | \$53.46 | | |
| | Total Millage | 15.9477 | То | tal Taxes | | \$886.28 | | |
| | | n-Ad Valore | m Assess | ments | | | | |
| Code FFII GGA | | NTS | | | | Amount \$219.98 \$193.00 | | |
| | | | Total | Assessment | | \$412.98 | | |
| | | | | Assessmen | | 1,299.26 | | |
| | | - | If Paid | Ву | Amo | \$0.00 | | |



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

| PERMIT NO. | 18-0102 |
|------------|---------|
| DATE PAID: | 719116 |
| FEE PAID: | 60.00 |
| RECEIPT #: | 1317830 |
| | - 2100 |

| | of our senting |
|---|--|
| APPLICATION FOR: [] New System []] [] Repair []] APPLICANT: Now Wester [] | Bxisting System [] Holding Tank [] Innovative Abandonment [] Temporary [] |
| AGENT: Jeff Hardee (Hardee Environm | |
| MAILING ADDRESS: 6450 NW 72 L | ane, Chiefland, FL 32626 EMAIL: JeffHardeeHEP@aol.com |
| APPLICANT'S RESPONSIBILITY T | T OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED NT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR STING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS. |
| PROPERTY INFORMATION | |
| LOT: A BLOCK: | SUBDIVISION: Three Rivers Estates PLATTED: 1956 |
| PROPERTY ID #: 00578-0 |) C ZONING: I/M OR EQUIVALENT: [Y N] |
| PROPERTY SIZE: 94 ACRES | WATER SUPPLY: [] PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD |
| IS SEWER AVAILABLE AS PER 38 | B1.0065, FS? [YN]] DISTANCE TO SEWER: M |
| PROPERTY ADDRESS: | Manates Ter Etilinia II |
| DIRECTIONS TO PROPERTY: | 1-475 218 miles AT on W Right of 11 St TI |
| on Wilson springs | Rd. TR on Sw Nework dr. Lt on Sw Albertaft. |
| 1R on SW. Measanter | Mo. The on Sw Nework dr. Lt on Swalbestaff. The tostay on Rd Theonto Obio Pkly The on Santa M RESIDENTIAL [] COMMERCIAL Fe Rd. |
| | MESIDENTIAL [] COMMERCIAL Fe Rd. |
| Unit Type of No Establishment | No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC |
| $\frac{1}{2}$ | 2 1578 At Flood. |
| 2 Replaces MM | 2 1900 Approved thouse Ind |
| 3 | brul 3/15/12 attack |
| [] Floor/Equipment Drains | |
| SIGNATURE: MILLI | [] Other (Specify) |
| DH 4015, 08/09 (Obsoletes and | miles addition |

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

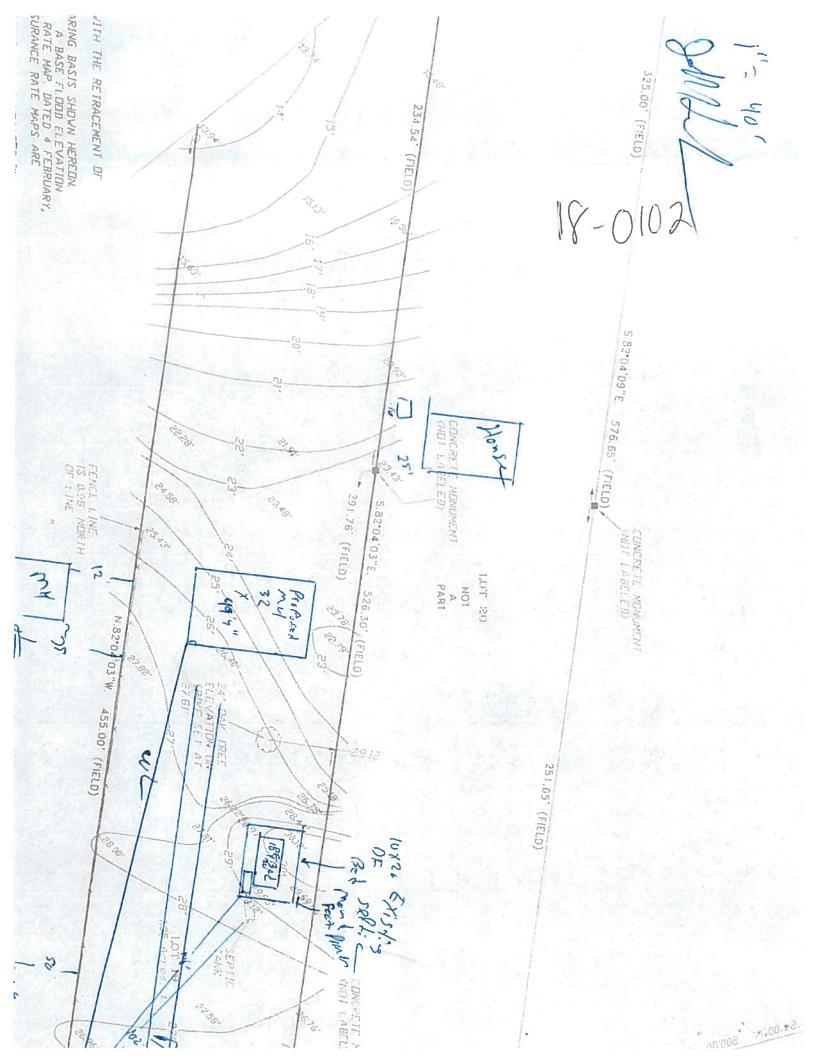
Permit Application Number 18 - 8/DS

PART II - SITEPLAN

| Notes: | \mathcal{M} | Sper | alled | | | |
|--|-------------------------|-------------|-------------------|--|--|--|
| | A | | | | | |
| Site Plan submitted by: | | | 2-9.10 | | | |
| Plan Approved X By All A | Not Approved Fix Hally | Date County | Health Department | | | |
| ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT | | | | | | |

DH 4015, 08/09 (Obsoletes previous editions which may not be used) incorporated: 64E-8.001, FAC (6tock Number: 5744-002-4015-5)

Page 2 of 4



Mission:

ĭ

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Celeste Philip, MD, MPH Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

March 09, 2018

Jeff Hardee 393 SE Brown Street Apt 102 Lake City, FL 32025

RE: Contingency Letter Application Document No: AP1327839 Centrax Permit Number: 12-SC-1821839 OSTDS Number: 788 MANATEE Ter Fort White, FL 32038

Lot:19

Block:

Subdivision: 3 Rivers Est U-2

This will acknowledge receipt of an application dated 02/09/2018 for a permit to use an existing onsite sewage treatment and disposal system located on the above referenced property.

From a review of your completed application, it has been determined that your existing system appears to meet the minimum standards of F.A.C. 64E-6 for the proposed use. It is approved for use with the plans submitted to this office. If this system should fail, causing an unsanitary condition to exist, steps must be taken to bring the system into compliance immediately. Department approval of the system does not guarantee satisfactory performance for any specific period of time. Any change in material facts which served as a basis for issuance of this approval requires the applicant to modify the permit application. Such modification may result in this approval being made null and void. Issuance of this approval does not exempt the applicant from compliance with other Federal, State, or Local Permitting required for development of this property.

If you have any questions on this matter, please call our office at (386) 758-1058.

Sincerely

Sallie Ford, Environmental Health Director

Enclosures

CC:

Florida Department of Health in COLUMBIA COUNTY 217 NE Franklin St, Lake City, FL 32055 PHONE: (386) 758-1058 . FAX:

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| 5 | MOBILE HOME INSTALLATION SOBCONTRACTOR VEHICLE TO VEHIC | | | |
|---|--|--|--|--|
| APPLICATION NUM | BER 1868-99 CONTRACTOR 2000 PHONE 386. 623, 77/6 | | | |
| | THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT | | | |
| records of the s Ordinance 89-6 exemption, gen | unty one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and a contractor shall require all subcontractors to provide evidence of workers' compensation or seral 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 GLENN WHITTINGTON Signature Mem Westungton License #: Ec13002957 Phone #: 386 972 1700 Qualifier Form Attached | | | |
| MECHANICAL/ A/C 950 | Print Name Michael Bolad Signature Mul C Bolad License #: (A(1819716 Phone #: | | | |
| | as cannot be submitted for any Specialty License. | | | |
| Total Control of the | License Number Sub-Contractors Printed Name Sub-Contractors Signature 2029 (6C005480 Harry Hunt (Nomic) Harry Hunt (Nomic) IISHER (License Haller - Larry Lord - LEB Development Corp.) | | | |

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.

Revised 10/30/2015

Columbia County Building Department Flood Development Permit

Development Permit F 023- 18-009

| DATE 09/24/2018 BUILDING PERMIT NUMBER 000037245 | | | | | |
|--|--|--|--|--|--|
| APPLICANT JEFF HARDEE PHONE 352-949-0592 | | | | | |
| ADDRESS 6450 NW 72ND LANE CHIEFLAND FL 32626 | | | | | |
| OWNER NORMA BURKE (PR FOR WILLIAM BURRE (1885) 786-236-8922 | | | | | |
| ADDRESS 788 SW MANATEE TERR FORT WHITE FL 32038 | | | | | |
| CONTRACTOR RONNIE NORRIS PHONE 386-752-3871 | | | | | |
| ADDRESS 1004 SW CHARLES TERR LAKE CITY FL 32024 | | | | | |
| SUBDIVISION THREE RIVERS EST Lot 19 Block Unit 2 Phase | | | | | |
| TYPE OF DEVELOPMENT MH, UTILITY PARCEL ID NO. 36-6S-15-00578-019 | | | | | |
| | | | | | |
| FLOOD ZONE AEF BY LN 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0467C | | | | | |
| FIRM 100 YEAR ELEVATION 34' PLAN INCLUDED YES or NO | | | | | |
| REQUIRED LOWEST HABITABLE FLOOR ELEVATION 35 1 | | | | | |
| IN THE REGULATORY FLOODWAY (YES) or NO RIVER Santa fe | | | | | |
| SURVEYOR/ENGINEER NAME Christopher Survey LICENSE NUMBER 71599 | | | | | |
| | | | | | |
| ONE FOOT RISE CERTIFICATION INCLUDED | | | | | |
| | | | | | |
| ZERO RISE CERTIFICATION INCLUDED | | | | | |
| SRWMD PERMIT NUMBER WOD- 023 - 232173-1 | | | | | |
| SRWMD PERMIT NUMBER WOD- 023 - 232173-1 | | | | | |
| SRWMD PERMIT NUMBER WOD- 023 - 232173-1 (INCLUDING THE ONE FOOT RISE CERTIFICATION) | | | | | |
| | | | | | |
| (INCLUDING THE ONE FOOT RISE CERTIFICATION) | | | | | |
| (INCLUDING THE ONE FOOT RISE CERTIFICATION) | | | | | |
| (INCLUDING THE ONE FOOT RISE CERTIFICATION) DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED INSPECTED DATE BY | | | | | |
| (INCLUDING THE ONE FOOT RISE CERTIFICATION) DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED | | | | | |

135 NE Hernando Ave., Suite B-21 Lake City, Florida 32055

Phone: 386-758-1008 Fax: 386-758-2160





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 LETTER O | F AUTHORIZATION | 1 |
|--|--|--|---------------------------------------|
| I, Toward Work Installer License Holder Na | 5,give this auth | ority for the job addre | ss show below |
| only, 188 Sky N | JANATES TEAL Job Address | , and I | do certify that |
| the below referenced person(s) | listed on this form is/are un | der my direct supendia | ion and control |
| and is/are authorized to purcha | | | |
| Printed Name of Authorized Person | Signature of Authorized Person | Authorized Po (Check one) | erson is |
| Jeff Harder | Il border | Agent Property | Officer Owner |
| | | Agent Property | Officer Owner |
| | | Agent Property | Officer Owner |
| I, the license holder, realize that under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed I document and that I have full re | responsible for compliance insing Board has the power aby him/her or by his/her authosponsibility for compliance g | and authority to disciple norized person(s) throughout the disciple person and the disciple norized person and the disciple norized by issuance of the disciple norized no | line a license ugh this such permits. |
| License Holders Signature (Nota NOTARY INFORMATION: STATE OF: Florida | COUNTY OF: Colum | se Number | Date |
| The above license holder, whose personally appeared before me (type of J.D.) And Algebra (type of J.D.) NOTARY'S SIGNATURE | e name is Ronn and is known by me or has | SANDRA ELIZABETH Notary Public - State of Commission # GG Of Commission # GG Of Commissio | 1 TOPE of Florida 1063811 18, 2021 |