PERMIT Columbia County Building Permit 10/18/2010 DATE This Permit Must Be Prominently Posted on Premises During Construction 000028945 DALE BURD PHONE 497-2311 APPLICANT 32038 PO BOX 39 FORT WHITE FL ADDRESS 288-0919 OWNER JAMES & SANDRA STRIPLING PHONE 32038 **ADDRESS** 415 SW GASTONIA WAY FORT WHITE 623-2203 ROBERT SHEPPARD PHONE CONTRACTOR LOCATION OF PROPERTY 47 S, L ELIM CHURCH RD, R OLD WIRE, L POORMANS CT, R GASTONIA, AT END FOLLOW AROUND LEFT TO SITE TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00 STORIES HEATED FLOOR AREA TOTAL AREA HEIGHT **FLOOR FOUNDATION** WALLS ROOF PITCH MAX. HEIGHT LAND USE & ZONING AG-3 35 30.00 SIDE 25.00 STREET-FRONT REAR 25.00 Minimum Set Back Requirments: NO. EX.D.U. FLOOD ZONE DEVELOPMENT PERMIT NO. PARCEL ID 27-6S-16-03950-107 SUBDIVISION AKA: LOT 7 BLOCK PHASE UNIT TOTAL ACRES IH10253861 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor PRIVATE DRIVE 10-0469-N BK TC Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD Check # or Cash 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 Sheathing/Nailing date/app. by date/app. by date/app. by Framing Insulation date/app. by date/app. by Electrical rough-in Rough-in plumbing above slab and below wood floor

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 Re-roof date/app. by date/app. by date/app. by 0.00 0.00 **BUILDING PERMIT FEE \$ CERTIFICATION FEE \$ SURCHARGE FEE \$** ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 77.00 MISC. FEES \$ WASTE FEE \$ 201.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ FLOOD DEVELOPMENT FEE \$ INSPECTORS OFFICE CLERKS OFFICE

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALL Building Official 1.C. 10-18-10 Zoning Official For Office Use Only (Revised 1-10-08) 289 45 1010-74 10/13/10 Permit# **Date Received** Zonina Land Use Plan Map Category Development Permit Flood Zone Comments **Finished Floor** FEMA Map# Elevation ☐ EH Release ☐ Well letter ☐ Existing well Site Plan with Setbacks Shown , F/EH #\_/O Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access ☐ F W Comp. letter ☐ Parent Parcel # Road/Code Fire Corr IMPACT FEES: EMS = TOTAL \_ impact Fees Suspended March 2009 School WHITE-METAL ON METAI Property ID # 2)-68-16-03950 -107 Subdivision MH Size 14 X **Used Mobile Home New Mobile Home** Phone # Applicant Address Name of Property Owner JAMES Phone# 911 Address Power & Light Clav Electric Circle the correct power company -**Progress Energy** Suwannee Valley Electric (Circle One) -Phone # Name of Owner of Mobile Home 22054 Address Relationship to Property Owner Current Number of Dwellings on Property Lot Size 540 X Total Acreage Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) (Blue Road Sign) (Putting in a Culvert) (Currently using) Is this Mobile Home Replacing an Existing Mobile Home **Driving Directions to the Property** 

Name of Licensed Dealer/Installer Installers Address Installation Decal # License Number

Spoketo AEB 10/18/10

### STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number Scale: 1 inch = 40 feet. PART II - SITEPLAN -WALL 113 68 76 50 469 03 1 of 5.8 Acres Notes: MASTER CONTRACTOR Site Plan submitted by Date\_10-12-10 Not Approved Plan Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

By\_

County Health Department

### 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

10/11/2010

To: Columbia	County Building Department
Description of well to Located at Address:	be installed for Customer: Spoling
1 hp 15 GPM Subme flow prevention, Wit	rsible Pump, 1 ¼" drop pipe, 86 gallon captive tank and back SRWMD permit.
Sincerely	ak
Bruce Park	
President	

### **Columbia County Property Appraiser**

DB Last Updated: 8/5/2010

Parcel: 27-6S-16-03950-107

### **Owner & Property Info**

Owner's Name,	LAWRENCE KEVIN	V) ()		
Mailing Address	5145 N FOXHALL DR WEST PALM BEACH, FL 33417			
Site Address				
Use Desc. (code)	VACANT (000000)			
Tax District	3 (County)	Neighborhood	27616	
Land Area	5.800 ACRES	Market Area	02	
Description	NOTE: This description is in any legal transaction.	s not to be used as the Legal Des	cription for this parcel	
		2.63 FT FOR POB, CONT E 540.0 357-020, 667-57, 727-637, 859-71		

### 2009 Tax Roll Year

Search Result: 1 of 1

### **Property & Assessment Values**

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$14,850.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$14,850.00
Just Value		\$14,850.00
Class Value		\$0.00
Assessed Value		\$14,850.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$14,850 Other: \$14,850   Schl: \$14,850

### 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.

### Sales History

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
9/24/1998	866/1764	WD	V	U	03	\$12,000.00
4/24/1998	859/711	QC	V	U	01	\$10,500.00
8/6/1990	727/637	AG	٧	U	13	\$11,790.00
7/5/1988	657/20	AA	V	Q		\$25,200.00

Inst. Number: 201012015501 Book: 1201 Page: 2737 Date: 9/24/2010 Time: 3:03:47 PM Page 1 of 1

10.30

This Instrument Prepared by & return to:

Name:

TRISH LANG, an employee of NORTH CENTRAL FLORIDA TITLE,

LLC

Address:

343 NW COLE TERRACE, SUITE 101 LAKE CITY, FLORIDA 32055

File No. 10Y-09018

Parcel I.D. #: 03950-107

SPACE ABOVE THIS LINE FOR PROCESSING DATA

Inst.201012015501 Date:9/24/2010 Time:3:03 PM Dpc:9/amp-Deed.115.50

DC, P. DeWitt Cason, Columbia County Page 1 of 1 B:1201 P:2737

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 22nd day of September, A.D. 2010, by KEVIN LAWRENCE.

CONVEYING NON-HOMESTEAD PROPERTY, hereinafter called the grantor, to JAMES M. STRIPLING AND SANDRA T. STRIPLING, HIS WIFE, whose pust office address is P.O. BOX 23, LAKE BUTLER, FLORIDA 32054, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the purities to this instrument, singular and plant, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in Calumbia County, State of Florida, viz:

LOT #7: COMMENCE AT THE SW CORNER OF THE SE ¼, THENCE RUN NORTH 0 DEGREES 01' 26" WEST, 2514.00 FEET, THENCE NORTH 89 DEGREES 34' 53" EAST, 1102.63 FEET TO THE POINT OF BEGINNING, THENCE NORTH 0 DEGREES 08' 20" WEST, 492.56 FEET, THENCE NORTH 89 DEGREES 51' 40" EAST, 540.00 FEET, THENCE SOUTH 0 DEGREES 08' 20" EAST, 489.92 FEET, THENCE SOUTH 89 DEGREES 34' 53" WEST, 540.01 FEET TO THE POINT OF BEGINNING. LYING AND BEING IN SECTION 27, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.

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 he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all enciumbrances, except taxes accruing subsequent to December 31, 2009.

In Witness Whereof, the said grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness Signature

Printed Name

mela

Printed Name

KEVIN LAWRENCE

Address:

5145 N FOXHALL DRIVE, WEST PALM BEACH,

FLORIDA 33417

STATE OF FLORIDA COUNTY OF PALM

The foregoing instrument was acknowledged before me this 22nd day of September, 2010, by KEVIN LAWRENCE, who is known to me or who has produced \_\_\_\_\_\_\_ as identification.

LISA A. GRUBER
MY COMMISSION # DD 627677

EXPIRES: May 7, 2011 Bonded Thru Notary Public Underwittens Notary Public

My commission expires May 7, 201

PERMIT WORKSHEET

	mantage wait plans within 2" of eard of hourse par Rule 16C		Typical pier spacing  2 6 0 k longlandmal (use dark lines to show these locations)	Manufacturer LICCLUSO Length x width 19 X7 &  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 4/15 SW GAS DW A WAY BEING Installed FORT WAITS, FL 3008	PERMIT NUMBER
Longitudinal Stabilizing Device (LSD)  Longitudinal Stabilizing Device (LSD)  Longitudinal Stabilizing Device (LSD)  Manufacturer  O (1 Ne 11.0 )  FRAME TIES  within 2' of end of home spaced at 5' 4" oc Lead of home spaced	t sizes  the mig.)  16 x 22.5  17 x 22  17 x 22  17 x 22  13 1/4 x 26 1/4  the approximate locations of marriage penings 4 toot or greater. Use this of to show the piers.  17 3/16 x 25 3/16  24 x 24  24 x 24  26 x 26  ANCHORS	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	PIER SPACING TABLE FOR USED HOMES  16" x 16"   18 1/2" x 18 1/2"   20" x 20"   22" x 22"   24" X 24"   25" x 25"   (256)   (342)	Triple/Quad Serial # 2062  Triple/Sustem: Triple(a) Hinded	New Home Used Home III  Home installed to the Manufacturer's Installation Manual  Home is installed in accordance with Rule 15-C  Single wide II Wind Zone II II Wind Zone III	

3864974866

Installer Signature

Date 10:12-10

### PERMIT NUMBER

to see or safement

Plumbing  Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. $29$	Date Tested 10-12-10	Snw sls	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 the points where the forque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 to protding capacity.	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. A test showing 276 inch pounds or less will require 5 foot anchors.	× 1/000 × 1/00 × 1/00	Using 500 lb. increments, take the towest reading and round down to that increment	<ol> <li>Test the perimeter of the home at 8 locations.</li> <li>Take the reading at the depth of the footer.</li> </ol>	ET PENETROMETER TESTING METH	341 ×	The packet penetrometer tests are rounded down to 1500 psf or check here to declare 1000 ib, soil without testing.	POCKET DENIET OFFER TENIES
manufacturer's installation instructions and or Rule 15C-1 & 2	installer verifies all information given with this permit worksheet	Dryer versi installed versible of skirting. Yes N/A  Range downflow vent installed outside of skirting. Yes  Drain lines supported at 4 foot intervals. Yes  Electrical crossovers protected. Yes		Weatherproofing  The bottomboard will be repaired and/or taped. Yes Pg. 22 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 Installed: Pg. Between Floors Yes Between Walts 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.	Gastet (www.mpnofis), requirement of all new and used homes and that condensation, mold, metdew and buckled marriade walls are	For used homes will be centered a roofing nails at 2		Fastening Itulb wide units	Debris and organic material removed L. Swale Pad Other	Sile Proparation

### 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 IH - /02 STd/ do herby state that
	the installation of the manufactured home for (applicant) Dale Burd or Rocky Ford
	for (customer name) Steipling in Lolymbia County will be
	done under my supervision.
X	Robel Shepped Signature
	Sworn to and subscribed before me this
	Personally Known:  Produced ID (Type):  DALE R. BURD  NOTABLY PUBLIC
	Notary Public: Stamp)

METAL BLOG ERECTOR

SUBCONTRACTOR VERIFICATION FORM

PHONES 82-648-220 ? CONTRACTOR APPLICATION NUMBER THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUARGE 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 stort of that subcontractor beginning any work. Violations will result in stop work orders and/or fines. ELECTRICAL Print Name Signature License#: MECHANICALI **Print Name** Signature License #: PHIMBING! Print Name Signature GAS License #: 4 ROOFING Print Name Signature License #: Phone #: SHEET METAL Print Name Signature License #: Phone #: FIRE SYSTEM! Print Name Signature SPRINKLER License#: Phone #: SOLAR Print Name Signature License #: Phone # Specialty license License Number Sub-Contractors Printed Name MASON CONCRETE FINISHER FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTALLER PAINTING ACOUSTICAL CFILING GLASS CERAMIC TILE FLOOR COVERING ALUM/VINYL SIDING GARAGE DOOR

F. S. 440.103 Bullding 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.

### CODE ENFORCI MENT PRELIMINARY MOBILE HOME IF SPECTION REPORT

DATE RECEIVED 19/13/10 BY LH IS THE MIN ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME James & Sandry Stripling PHONE CELL 288 - 09/9
OWNERS NAME Taynes & Sandry Spring Thome
ADDRESSSUBDI 15/ON
MOBILE HOME PARK
(2) about 3/4 mile - cee with in front
MOBILE HOME INSTALLER Robert Shephard PHONE CELL 623-2203
MOBILE HOME INFORMATION  MAKE Fleutured YEAR 93 SIZE 14 x 76 COLOR white (metalon Metal)
MAKE fleetwood YEAR SEE THE Metal) SERIAL NO. GENERAL TO 62 Cetyline
SERIAL NO.
WIND ZONE Must be wind zone il or higher NC WIND ZONE I ALLOWED
INSPECTION STANDARDS INTERIOR:  (P or F) - P= PASS F= FAILED  SMOKE DETECTOR () OPERATIONAL () MISSING  FLOORS () SOLID () WEAK () HOLES DAMAGED LI CATION Paid by: AE B Const.  DOORS () OPERABLE () DAMAGED  WALLS () SOLID () STRUCTURALLY UNSOUND  WINDOWS () OPERABLE () INOPERABLE  PLUMBING FIXTURES () OPERABLE () INOPERABLE ( MISSING  CEILING () SOLID () HOLES () LEAKS APPARENT  ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXF DSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY U ISOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS ( ) STATUS  STATUS  APPROVED WITH CONDITIONS: Replace missing ( ) ight fixtures
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CON HITIONS
SIGNATURE CLASS DATE 10-14-10



## OCCUPAZO

### 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 No
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Permit Holder ROBERT SHEPPARD

Owner of Building JAMES & SANDRA STRIPLING

Location: 415 SW GASTONIA WAY, FT WHITE, FL 32038

Date: 11/02/2010

hoy a

**Building Inspector** 

POST IN A CONSPICUOUS PLACE (Business Places Only)