

DATE 04/25/2012

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

**PERMIT**  
**000030107**

APPLICANT WENDY GRENNELL PHONE 386.288.2428  
ADDRESS 3104 SW OLD WIRE ROAD FT. WHITE FL 32038  
OWNER JOHN SPARKS PHONE 954.868.9432  
ADDRESS 268 SW STALLION GLN LAKE CITY FL 32024  
CONTRACTOR ROBERT SHEPPARD PHONE 386.623.2203  
LOCATION OF PROPERTY 441-S TO C-131,TR TO C-349,TL TO EQUESTRIAN,TR AND CURVES  
INTO STALLION GLN,2ND PLACE 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. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.                     

PARCEL ID 32-5S-17-09475-116 SUBDIVISION A.C. MILTON TRACT..UNREC.  
LOT 16 BLOCK                      PHASE                      UNIT                      TOTAL ACRES 10.02

IH1025386  
Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor Wendy Grennell  
EXISTING 12-0212 BLK                      TC                      N                       
Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                     

COMMENTS: 1 FOOT ABOVE ROAD.

Check # or Cash 5747

**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 \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 73.32 WASTE FEE \$ 100.50  
FLOOD DEVELOPMENT FEE \$                      FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$                      **TOTAL FEE** 548.82 ✓  
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.

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



**COLUMBIA COUNTY**  
**OR**  
**CLAY COUNTY**

**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 32-5S-17-09475-116

Building permit No. 000030107

Permit Holder ROBERT SHEPPARD

Owner of Building JOHN SPARKS

Location: 268 SW STALLION GLN, LAKE CITY, FL 32024

Date: 05/04/2012



A blue ink signature, likely of the Building Inspector, is written over a horizontal line.

Building Inspector

**POST IN A CONSPICUOUS PLACE**  
*(Business Places Only)*



spoke to Wendy 4-23-12

# 5747

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

**For Office Use Only** (Revised 1-11)      Zoning Official BLK 20 Apr 12      Building Official J.C. 4-19-12  
AP# 1204-30      Date Received 4-12-12      By CH      Permit # 30107  
Flood Zone X      Development Permit N/A      Zoning A-3      Land Use Plan Map Category A-3  
Comments \_\_\_\_\_  
FEMA Map# N/A      Elevation N/A      Finished Floor 1st floor      River N/A      In Floodway N/A  
☒ Site Plan with Setbacks Shown      ☒ EH # 12-0212      ☐ 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 \_\_\_\_\_

Electrical  
All &  
Signatures

Property ID # 32-55-17-09475-116      Subdivision AC Milton Tract      Lot 16

- New Mobile Home ☒      Used Mobile Home \_\_\_\_\_      MH Size 32x66      Year 2012
- Applicant Wendy Grennell      Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner John Sparks      Phone# 954-868-9432
- 911 Address 268 SW Stallion Gln, Lake City, FL 32024
- Circle the correct power company -      FL Power & Light      -      Clay Electric  
(Circle One) -      Suwannee Valley Electric      -      Progress Energy
- Name of Owner of Mobile Home John Sparks      Phone # 954-868-9432  
Address 14936 22nd Road N Loxahatchee FL 33470
- Relationship to Property Owner same
- Current Number of Dwellings on Property 0
- Lot Size \_\_\_\_\_      Total Acreage 10.02
- 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 \_\_\_\_\_
- Driving Directions to the Property US 441 south to CR 131 (Tuskeny)  
turn (R) to CR 349 turn (L) to Equestrian  
Way turn (R) curves becomes Stallion Gln 2nd on (R)
- Name of Licensed Dealer/Installer Robert Sheppard      Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
  - License Number IH1025386      Installation Decal # 8686



PERMIT WORKSHEET

page 1 of 2

PERMIT NUMBER

Installer

Robert Sheppard License # JH1025326

Address of home  
being installed

204 SW Stallion Cln  
Lake City, FL 32024

Manufacturer

James of mca Length x width 32x66

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.

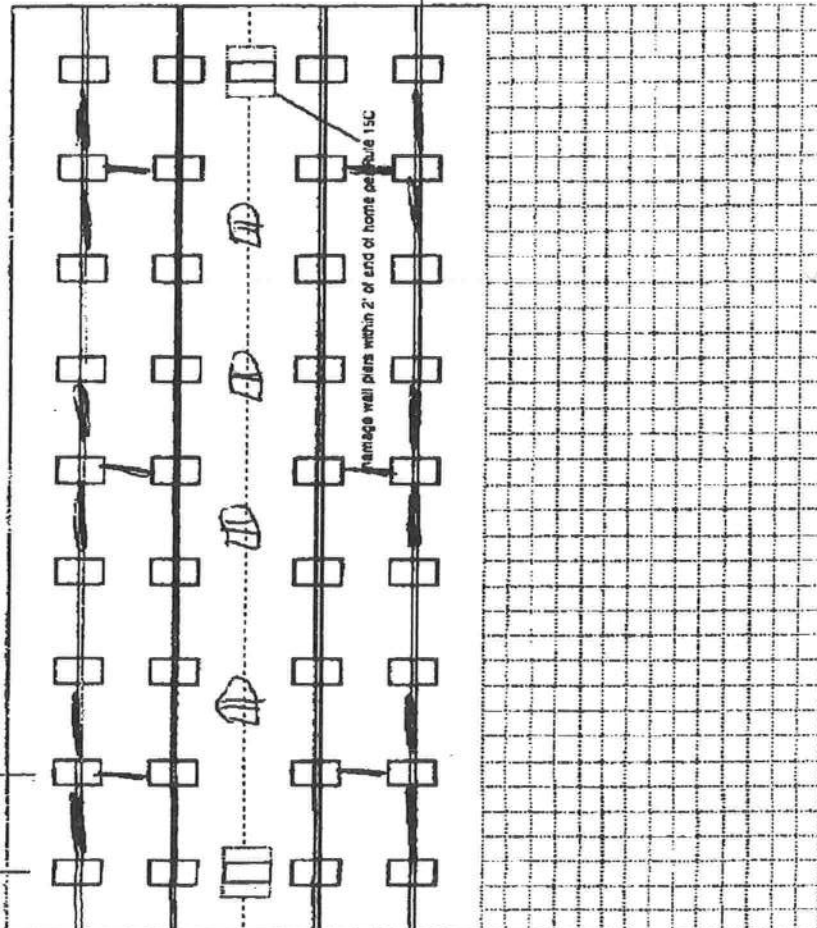
Installer's initials

RS

Typical pier spacing



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



New Home ☒ Used Home ☐

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 #

8686

Triple/Quad ☐

Serial #

Ordered

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	18" x 16" (256)	18 1/2" x 16 1/2" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psi	3"	3"	4"	5"	6"	7"	8"
1500 psi	4"	4"	5"	6"	7"	8"	8"
2000 psi	6"	6"	8"	8"	8"	8"	8"
2500 psi	7"	7"	8"	8"	8"	8"	8"
3000 psi	8"	8"	8"	8"	8"	8"	8"
3500 psi	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

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

1101V



# PERMIT NUMBER

# PERMIT WORKSHEET

page 2 of 2

## 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 1700 x 1700

## POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 8 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 1800 x 1700

## 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 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

Date Tested

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 independent water supply systems. Pg. 30

## Site Preparation

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

## Fastening multi wide units

Floor: Type Fastener: 10-35 Length: 5 Spacing: 16  
Walls: Type Fastener: 5-10 Length: 4 Spacing: 16  
Roof: Type Fastener: 10-35 Length: 6 Spacing: 16  
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.

Installer's initials

Type gasket Pg. 22

Installed:

Between Floors Yes  
Between Walls Yes  
Bottom of ridgebeam Yes

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes  
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 ☒ No ☐  
Range downflow vent installed outside of skirting. Yes ☒ N/A ☐  
Drain lines supported at 4 foot intervals. Yes ☒  
Electrical crossovers protected. Yes ☒  
Other:

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

Installer Signature

Date

4-9-12

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER 1204-30 CONTRACTOR Robert Sheppard PHONE 386-623-2203

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

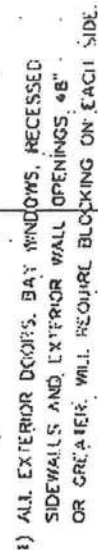
In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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.*

<b>ELECTRICAL</b> <i>Deceased</i>	Print Name <u>John M. Courson</u>	Signature <u>[Signature]</u>
	License #: <u>ER0002038</u>	Phone #: <u>752-8575</u>
<b>MECHANICAL/A/C</b> <i>ok b 701</i>	Print Name <u>Robert Grant</u>	Signature <u>[Signature]</u>
	License #: <u>CAC1814931</u>	Phone #: <u>850-859-3708</u>
<b>PLUMBING/GAS</b>	Print Name <u>Robert Sheppard</u>	Signature <u>[Signature]</u>
	License #: <u>IH1025386</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.



**COLUMN DUCKING**  
SEE SOIL BEARING CAPACITY CHARTS FOR PAD SIZE  
**DUCKING**

# CHAMPION

P.O. BOX 2097 HWY 100 EAST LAKE CITY, UT 84056

ALPHACOVER'S SEAL  
Social Security - Risk

100525

«КОЛЛЕКЦИОН»

[illegible]

CONFIDENTIAL AND PROPRIETARY  
 INFORMATION AND DATA CONTAINED  
 HEREIN IS UNCLASSIFIED  
 DATE 08-01-2001 BY 60322 UCBAW

MODEL 261-0664M1-2

**PIER FOUNDATION!**

DRAWN BY ROJ

DATE 3-20-12

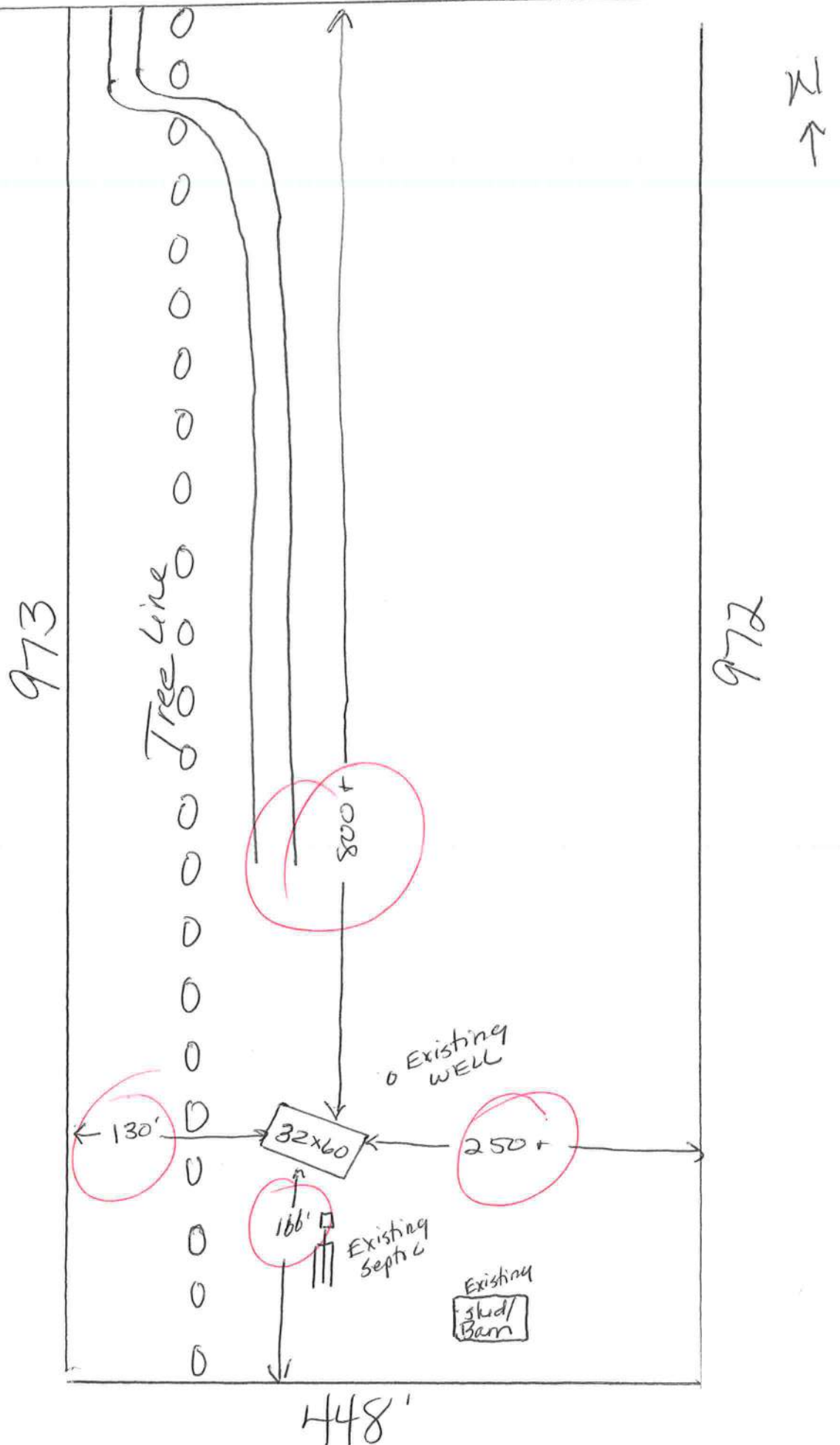
3145

137MS

S-20



SW Station Gln





AKA LOT 16 AC MILTON TRACT UNR	SPARKS JOHN	32-5S-17-09475-116	Columbia County	2012 R
COMM SE COR OF N1/2 OF S1/2 OF	14936 22ND RD NORTH			CARD 001 of 001
NE1/4, RUN W 2140.16 FT FOR	LOXAHATCHEE, FL 33470	PRINTED	3/09/2012	8:26
POB, CONT W 448.62 FT, N		APPR	4/19/2004	TW BY JEFF

BUSE		AE?		HTD AREA	.000 INDEX	32517.03	AC MIL TR	PUSE	006200 PASTURELAND 3
MOD	BATH			EFF AREA	29.614 E-RATE	.000 INDX	STR 32- 5S-17E		
EXW	FIXT			RCN		AYB	MKT AREA 02		0 BLDG
%	BDRM			%GOOD	BLDG VAL	EYB	(PUD1		1,500 XFOB
RSTR	RMS			-----			AC	10.020	2,000 LAND
RCVR	UNTS			%FIELD CK:			NCTD		2,004 CLAS
%	C-W%			%LOC: 204 STALLION GLN SW LAKE CITY			APPR CD		42,156 MKTUSE
INTW	HGHT						CND0		45,656 JUST
%	PMTR						SUBD		5,504 APPR
FLOR	STYS						BLK		
%	ECON						LOT		0 SOHD
HTTP	FUNC						MAP#		0 ASSD
A/C	SPCD								0 EXPT
QUAL	DEPR						TXDT	003	0 COTXBL
FNDN	UD-1								
SIZE	UD-2								
CEIL	UD-3							BLDG TRAVERSE	
ARCH	UD-4								
FRME	UD-5								
KTCH	UD-6								
WNDO	UD-7								
CLAS	UD-8								
OCC	UD-9								
COND	%							PERMITS	
SUB	A-AREA %	E-AREA	SUB VALUE				NUMBER DESC	AMT ISSUED	
							16087 M H	125 9/29/1999	
TOTAL									

TOTAL											GRANTEE BARBARA GLORIA										
EXTRA FEATURES											FIELD CK:										
AE BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UNITS	UT	PRICE	ADJ	UT	PR	SPCD	%	GOOD	XFOB	VALUE	
Y	0040	BARN,POLE	24	36		1		1996	1.00	1.00	UT	1500.000						100.00		1.500	

AE	LAND CODE	DESC	ZONE TOPO	ROAD UTIL	UD1 {UD2}	UD3 {UD4}	FRONT BACK	DEPTH DT	FIELD CK: ADJUSTMENTS				UNITS	UT	PRICE	ADJ	UT	PR	LAND	VALUE
N	006200	PASTURE	3	00	0002				1.00	1.00	1.00	1.00	10.020	AC	200.000		200.00		2,004	AG
N	009910	MKT.VAL.AG		00	0002				1.00	1.00	1.00	1.00	10.020	AC						
Y	009945	WELL/SEPT		00	0002				1.00	1.00	1.00	1.00	1.000	UT	2000.000		2000.00		2,000	

L002 - LOTS 15 & 16

Property Appraiser Identification #

R09475-116  
Prepared by and return to:  
Donald H. Buikus, Esquire  
1402 North State Road Seven  
Margate, FL 33063  
954-974-2704

Inst: 2005006439 Date: 03/18/2005 Time: 14:52  
Doc Stamp-Deed: 252.00  
MR DC, P. Dewitt Cason, Columbia County B: 1041 P: 7

WARRANTY DEED

THIS INDENTURE, made this 18<sup>TH</sup> day of March, 2005 by BARBARA M. GLORIA, a single woman, of 204 SW Stallion Glen, Lake City, FL 32024 ("Grantor"), to JOHN SPARKS, a single man, of 14936 22<sup>nd</sup> Road North, Loxahatchee, FL 33470 ("Grantee"):

WITNESSETH, that the Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS, and other good and valuable considerations to the Grantor in hand paid by the Grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the Grantee, and Grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to wit:

See Exhibit A, attached hereto and made a part hereof.

SUBJECT TO zoning, easements, restrictions and reservations of record, if any, taxes and assessments for the year 2005, a mortgage in favor of Lenvil H. Dicks in the original principal sum of \$38,000.00 recorded in OR Book 971, Pages 493 through 495 of the Public Records of Columbia County, Florida which has an outstanding unpaid balance of \$35,998.12 as of March 1<sup>st</sup>, 2005.

Grantor warrants and represents that she was a single woman when she took title to this property on December 31<sup>st</sup>, 2002 and that she has remained a single woman through the date of delivery of this Deed.

And the Grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the Grantor has executed this instrument on March 18, 2005

Signed, sealed and delivered in the presence of:

Nanci Nettles

Nanci Nettles

Print Name of Witness

Suzanne Davis

Suzanne Davis

Print Name of Witness

Barbara M. Gloria  
BARBARA M. GLORIA

STATE OF FLORIDA  
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me on March 18, 2005, by BARBARA M. GLORIA who has produced a Driver's License as identification or were personally known to me and who did take an oath.

My Commission Expires:

12/26/05

Nanci Nettles  
Notary Public, State of Florida

Nanci Nettles  
Print Name of Notary Public





Inst: 2005006438 Date: 03/18/2005 Time: 14:52  
Doc Stamp-Deed : 252.00  
DC, P. DeWitt Cason, Columbia County B: 1041 P: 8

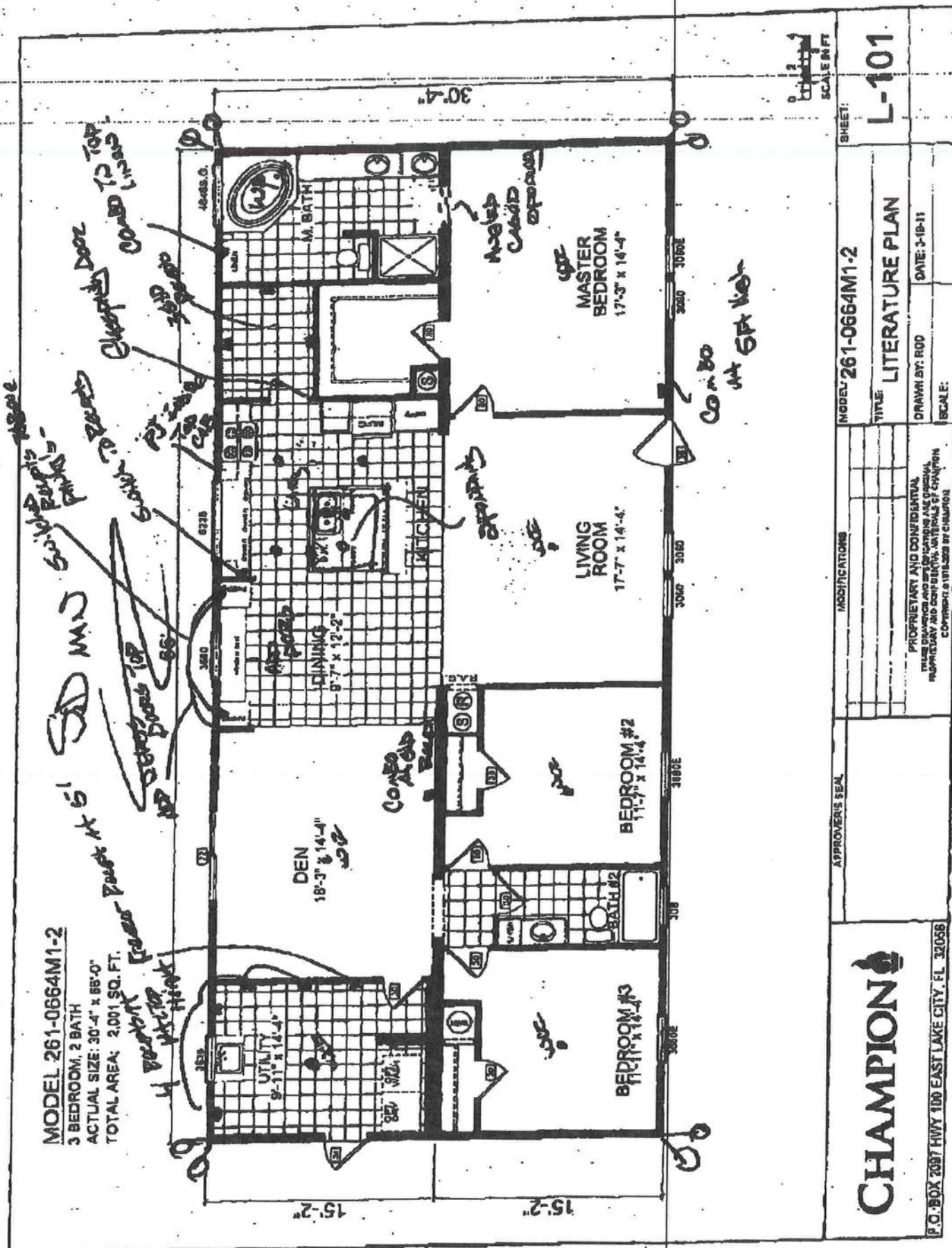
## Exhibit A

LOT 16 A.C. MILTON PROPERTY

### TOWNSHIP 5 SOUTH, RANGE 17 EAST

Section 32: A part of the North 1/2 of Section 32, Township 5 South, Range 17 East, more particularly described as follows: Commence at a concrete monument marking the SE corner of the N 1/2 of S 1/2 of NE 1/4 of said Section 32 and run S 89 degrees 33'27" W along the South line of said N 1/2 of S 1/2 of NE 1/4, 2140.16 feet for a POINT OF BEGINNING. Thence continue S 89 degrees 33'27" W 448.62 feet; thence N 0 degrees 11'17" E 973.17 feet; thence N 89 degrees 36'19" E 448.62 feet; thence S 0 degrees 11'17" W 972.79 feet to the POINT OF BEGINNING. Columbia County, Florida, containing 10.02 acres more or less, subject to Restrictions as recorded in O.R. Book 0786, Pages 0308-0310, and subject to Power Line Easement.

Together with a perpetual non-exclusive Ingress-Egress Easement over and across a 40 foot wide strip of land, the West line of which is described as follows: Commence at the SW corner of the SE 1/4 of Section 29, Township 5 South, Range 17 East and run S 89 degrees 29'42" W 411.62 feet; thence N 0 degrees 03'11" E, 1280.06 feet to the South right-of-way of County Road No. 349 for a POINT OF BEGINNING of said West line of the 40 foot Easement; thence S 0 degrees 03'11" W, 1280.06 feet to the North line of Section 32; thence S 0 degrees 11'17" W 1012.19 feet to the POINT OF TERMINATION of said Easement. And together with a perpetual non-exclusive Ingress-Egress Easement over and across a 40 foot Easement whose North line is described as follows: Begin at the POINT OF TERMINATION of the above described 40 foot Easement and run N 89 degrees 36'19" E, 1395.85 feet to the POINT OF TERMINATION of this 40 foot Easement.





**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 IH1025386

state that the installation of the manufactured home for owner

John Sparks

at 911 Address: 204 SW Stallion Gln City Lake City

will be done under my supervision.

Signed: Robert Sheppard  
Mobile Home Installer

Sworn to and described before me this 9 day of April 2012

Shirley M. Bennett  
Notary public

Shirley M. Bennett Personally known ✓  
Notary Name

DL ID \_\_\_\_\_



1204-30

## 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: 4/13/2012 DATE ISSUED: 4/19/2012

#### ENHANCED 9-1-1 ADDRESS:

268 SW STALLION GLN

LAKE CITY FL 32024

#### PROPERTY APPRAISER PARCEL NUMBER:

32-5S-17-09475-116

#### Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL. CHANGE OF ACCESS TO PROPOSED STRUCTURE RESULTED CHANGE OF ADDRESS (OLD ADDRESS: 204 SW STALLION GLN)

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.**

2259

↓  
- 961-0117-





## COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787  
263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125 \* Fax: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com



### **ADDRESS CHANGE (19 APRIL 2012) DUE TO CHANGE OF ACCESS TO STRUCTURE LOCATION**

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**  
**204 SW STALLION GLN  
LAKE CITY, FL 32024**

**NEW Address**  
**268 SW STALLION GLN  
LAKE CITY, FL 32024**

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.

Any questions concerning this address change should be directed to the Columbia County 911 Addressing / GIS Department at the address, telephone number or email address listed above.

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1204-30 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 234	Print Name <u>Michael Conner</u>	Signature <u>Michael S. Conner</u>
	License #: <u>EK13013192</u>	Phone #: <u>386-758-2233</u>
MECHANICAL/ A/C	Print Name _____	Signature _____
	License #: _____	Phone #: _____
PLUMBING/ GAS	Print Name _____	Signature _____
	License #: _____	Phone #: _____

Specialty License	License Number	Sub-Contractor Printed Name	Sub-Contractor 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.

Contractor Form: Subcontractor form: 1/11





STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM  
CONSTRUCTION PERMIT

PERMIT #: **12-SC-1404375**  
APPLICATION #: **AP1068857**  
DATE PAID: **4-12-12**  
FEE PAID: **125.00**  
RECEIPT #: **163679**  
DOCUMENT #: **PR873879**

CONSTRUCTION PERMIT FOR: OSTDS Existing Modification

APPLICANT: JOHN\*\*12-0212 SPARKS

PROPERTY ADDRESS: 288 SW STALLION Gln Lake City, FL 32024

LOT: 16 BLOCK: \_\_\_\_\_ SUBDIVISION: A C Milton Tract, Unrecorded

PROPERTY ID #: 09475-116

[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]  
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF 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 PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [ 900 ] GALLONS / GPD existing Septic CAPACITY  
A [ ] GALLONS / GPD N/A CAPACITY  
N [ ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]  
K [ ] GALLONS DOSING TANK CAPACITY [ ] GALLONS @ [ ] DOSES PER 24 HRS #Pumps [ ]

D [ 375 ] SQUARE FEET drainfield SYSTEM  
R [ ] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: [x] STANDARD [ ] FILLED [ ] MOUND [ ]

I CONFIGURATION: [x] TRENCH [ ] BED [ ]

F LOCATION OF BENCHMARK: top of septic outlet end

I ELEVATION OF PROPOSED SYSTEM SITE [ 4.00 ] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 22.00 ] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [ 0.00 ] INCHES ENCAVATION REQUIRED: [ 0.00 ] INCHES

1. Add 35 sq ft to existing 340 sq ft to make 375 sq ft.
2. add an approved outlet filter.

SPECIFICATIONS BY: Rocky Ford

TITLE: M Contractor

APPROVED BY: Sally A Ford

TITLE: Environmental Health Director

Columbia CHD

DATE ISSUED: 04/25/2012

EXPIRATION DATE: 10/25/2013

DK 4016, 08/09 (Obsolesces all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

Page 1 of 3

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

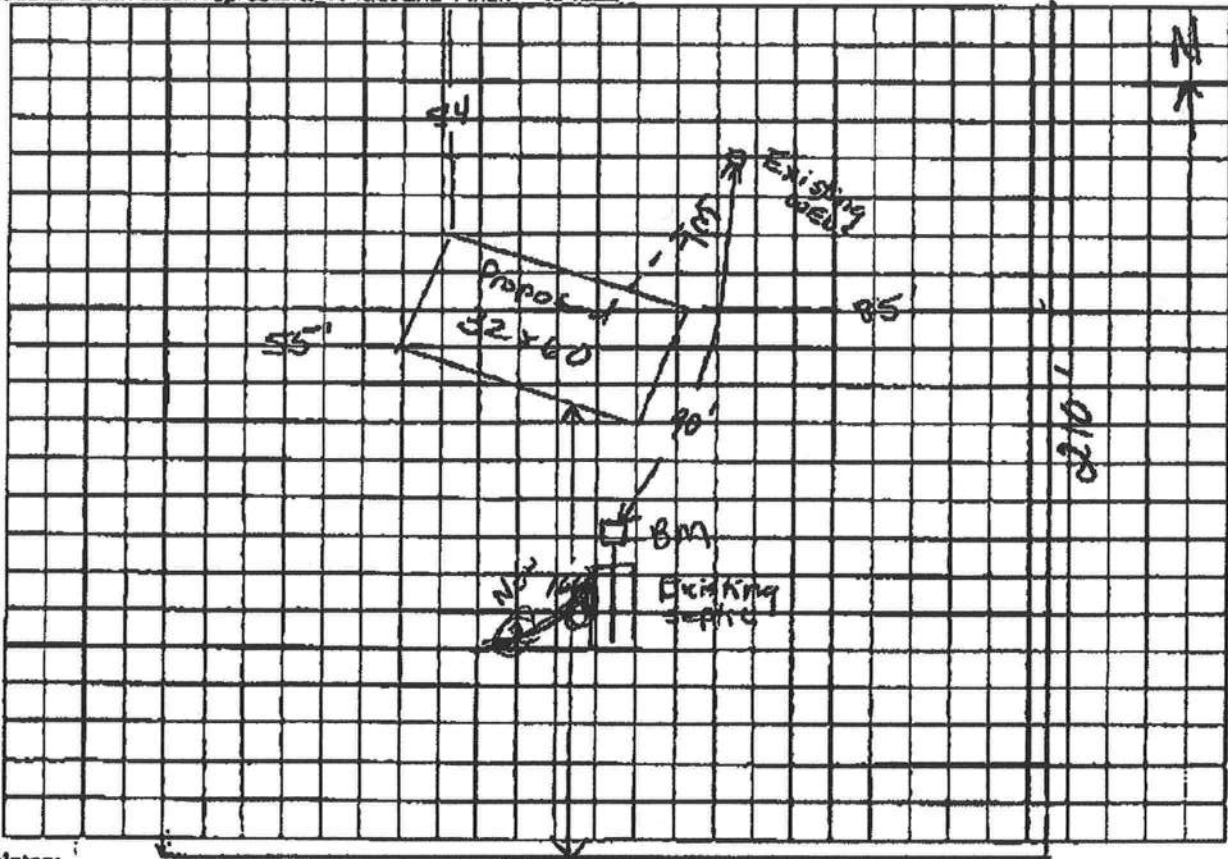
Permit Application Number

App 1204-30

12-0312EM

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes:

1 acre shown out of 10.210  
See attached

Site Plan submitted by:

Plan Approved

By

Sallie A. Ford, ENV Health Director

Not Approved

Agent

Date

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Columbia CHD