

✓ Not Affidavit Recorded

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

See Only

(Revised 7-1-15)

Zoning Official JN

Building Official 2/14

12-36

Date Received 12/12

By 12

Permit # 37832

Development Permit X

Zoning A3

Land Use Plan Map Category A

Comments

STUP 1812-60 System H for parents

Zad unit on Property

FEMA Map#

Elevation

Finished Floor 11 above road

River

In Floodway

☒ Recorded Deed or ☐ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0025 ☐ Well letter OR

☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # ☒ STUP-MH 1812-60 ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment owed for 2nd unit ☒ Out County ☒ In County ☒ Sub VF Form

12-19-18 (40623) failed
12-27-18 (last checked)

Property ID # 18-6517-09696-218 Subdivision Tustnuggee Ridge Lot# 18

New Mobile Home ☐ Used Mobile Home yes MH Size 16x80 Year 1998

Applicant Sayda Ascencio Phone # 352-275-2734

Address 156 SW Marigold Place, Ft. White, FL 32038

Name of Property Owner Robert Ascencio Alternate Phone# 352-514-6640

911 Address 182 SW Marigold Place, Ft. White, FL 32038

Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

Name of Owner of Mobile Home Roberto Ascencio Phone # 352-275-2734

Address 156 SW Marigold Place, Ft. White, FL 32038

Relationship to Property Owner Parent

Current Number of Dwellings on Property 1

Lot Size 5 Acres Total Acreage 5 Acres

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 NO

Driving Directions to the Property Take 441 South to Tommy Lites, at the end of road make an immediate right, and then an immediate left on Marigold Place.

Name of Licensed Dealer/Installer Fernon Jones Phone # 352-318-4734

Installers Address 1795 SW 71st Ave Lake Butler FL 32054

License Number 1H1025418 Installation Decal # 53189

\$565.90

LT - Left a message for Fernon 12-14-18. LT - Spoke to Fernon 12-14-18.
Call 1-800-666-6666 w/ Daniel in person 1-3-19 & 2-11-19

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Fernan Jones License # TH1025114

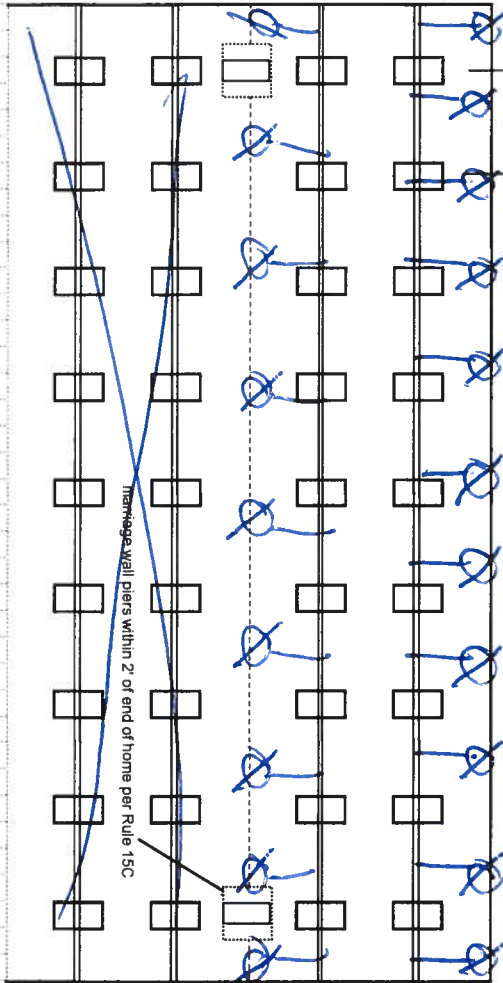
Address of home being installed _____

Manufacturer _____ Length x width 16x40

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 F.J.N.

Typical pier spacing 2' 5"
lateral
longitudinal
Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)



16x40 frame ties - per Fernan 12/14/18

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 # 53189

Triple/Quad ☐ Serial # GAF LV07A41538W221

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	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 16x16 Peris
Other pier pad sizes (required by the mfg.) _____

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 _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Oliver Tech
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____
Number 28

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil _____ without testing.

X 1000 X 1000 X 1000

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 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 1000 X 1000 X 1000

TORQUE PROBE TEST

The results of the torque probe test is 276 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.

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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Fernon Jones

Date Tested

12/3/18

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. 15

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:

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. _____ Installed: Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 17
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 ☒ N/A ☐
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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Fernon Jones

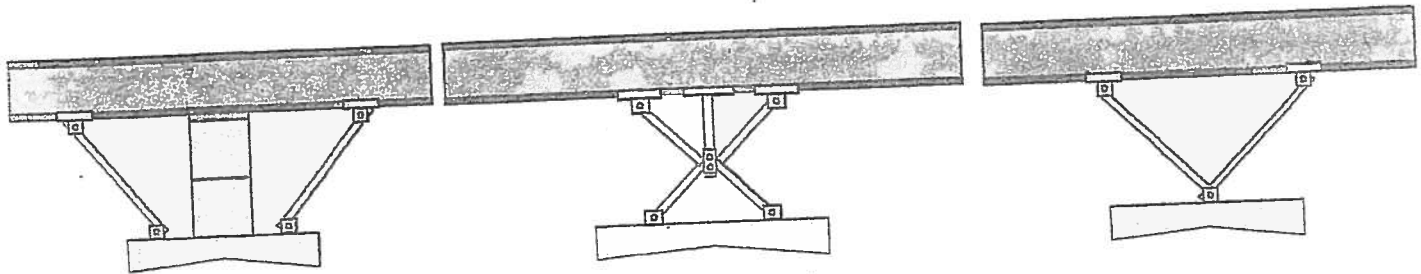
Date

12/3/18

ANCHORS AND TIE-DOWNS

Longitudinal protection, continued

Other approved longitudinal stabilization are these types of steel mechanical systems called longitudinal stabilizing devices.

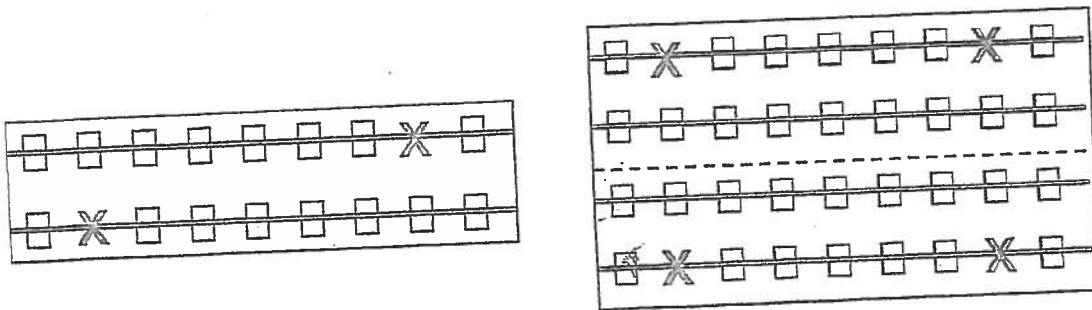


Longitudinal Protection using approved
Longitudinal Stabilizing Devices
(LSDs)

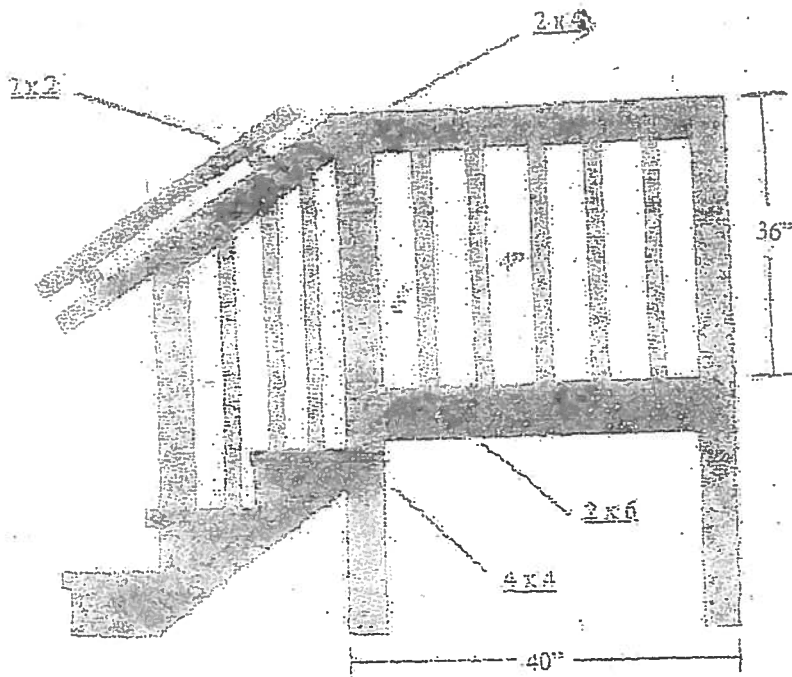
LSD systems may be used in place of the required longitudinal straps, anchors and stabilizer plates. Two systems are required per section of home. A single wide will get two LSDs and a double wide will require four and a triple wide will require six. For the correct placement of these systems see the diagram below.

Commonly found violations when using the lateral arm systems:

- The required self tapping screws were not installed or another type of screw was used.
- The LSD arms were not properly connected to the I-beam or galvanized pan.
- Five foot anchors were required by the home manufacturer and 4 foot anchors were installed.
- The LSD arms are installed at too steep an angle.
- The galvanized pan is not fully embedded into the soil.



Longitudinal Stabilizing Devices shown on typical blocking plans.



SUBMITTED BY HALL SERVICES, INC.

ALL STEPS ARE CONSTRUCTED FROM PRESSURE TREATED PINE.
 STEP PLATFORM IS 40" X 40".
 PICKETS ARE NO MORE THAN 4" APART.
 THE SUM OF 1 TREAD AND 2 RISERS ARE BETWEEN 24" AND 25".

FASTENERS USED:

#3x3" GAL. DECK SCREWS
 #10x4" GAL. DECK SCREWS
 #8 GAL. RING SHANK NAILS

License Number: IH / 1025418 / 1 Name: FERMON JONES

Order #: 3412	Label #: 53189	Manufacturer:	(Check Size of Home) Single _____ Double _____ Triple _____
Homeowner: Robert		Year Model:	
Address:		Length & Width:	
City/State/Zip:		Type Longitudinal System:	HUD Label #:
Phone #: 352-275-2734		Type Lateral Arm System:	Soil Bearing / PSF:
Date Installed:		New Home: _____ Used Home: _____	Torque Probe / in-lbs:
Installed Wind Zone:		Data Plate Wind Zone:	Permit #:
Note:			

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

53189

LABEL #

DATE OF INSTALLATION

FERMON JONES

NAME

IH / 1025418 / 1

3412

LICENSE #

ORDER #

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

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

cell: 352-318-4711

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Union
OWNERS NAME Robert Ascencio PHONE 352-275-2734 CELL _____
INSTALLER Fernon Jones PHONE 352-318-4734 CELL 4711
INSTALLERS ADDRESS 6795 S.W. 71st Ave Lake Butler, FL 32054

MOBILE HOME INFORMATION

MAKE Westwood YEAR 1998 SIZE 16 X 80
COLOR unk SERIAL No. BAFLV07A41538W221
WIND ZONE II SMOKE DETECTOR _____

INTERIOR:

FLOORS good
DOORS good
WALLS good
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:

WALLS / SIDING good
WINDOWS good
DOORS good

INSTALLER: APPROVED ✓ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Fernon Jones

Installer/Inspector Signature [Signature] License No. EA11025418 Date 12/3/18

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature] Date 12-14-18

Ut-Spoke to Fernon 12-14-18

Tried to call Fernon's Cell 12-14-18 - Could not leave a message - I left a message at his office.

Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 11/1/2018

Parcel: << 18-6S-17-09696-218 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

Owner	ASCENCIO ROBERT 156 SW MARIGOLD PL FORT WHITE, FL 32038		
Site			
Description*	LOT 18 TUSTENUGGEE RIDGE FIRST ADDITION. 992-712, WD 1038- 2306, WD 1228 -1824, WD 1337- 2683,		
Area	5.27 AC	S/T/R	18-6S-17E
Use Code**	MISC RES (000700)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information

Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$26,133	Mkt Land (1)	\$26,133
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (1)	\$2,000	XFOB (1)	\$2,000
Just	\$28,133	Just	\$28,133
Class	\$0	Class	\$0
Appraised	\$28,133	Appraised	\$28,133
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$28,133	Assessed	\$28,133
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$28,133 city:\$28,133 other:\$28,133 school:\$28,133	Total Taxable	county:\$28,133 city:\$28,133 other:\$28,133 school:\$28,133

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
5/26/2017	\$100	1337/2683	WD	V	U	11
1/19/2012	\$100	1228/1824	WD	V	U	11
12/15/2004	\$0	1038/2306	WD	V	U	01
8/15/2003	\$53,000	992/0712	WD	V	Q	

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

▼ Extra Features & Out Buildings (Codes)

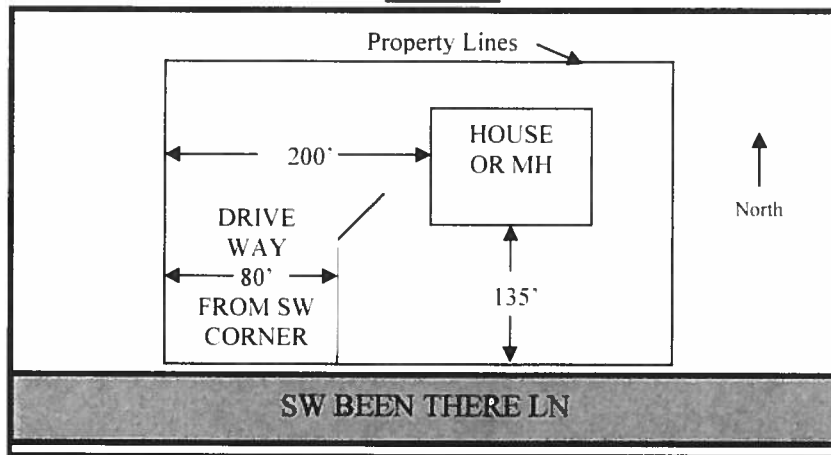
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0070	CARPORT UF	2017	\$2,000.00	1.000	0 x 0 x 0	(000.00)

▼ Land Breakdown

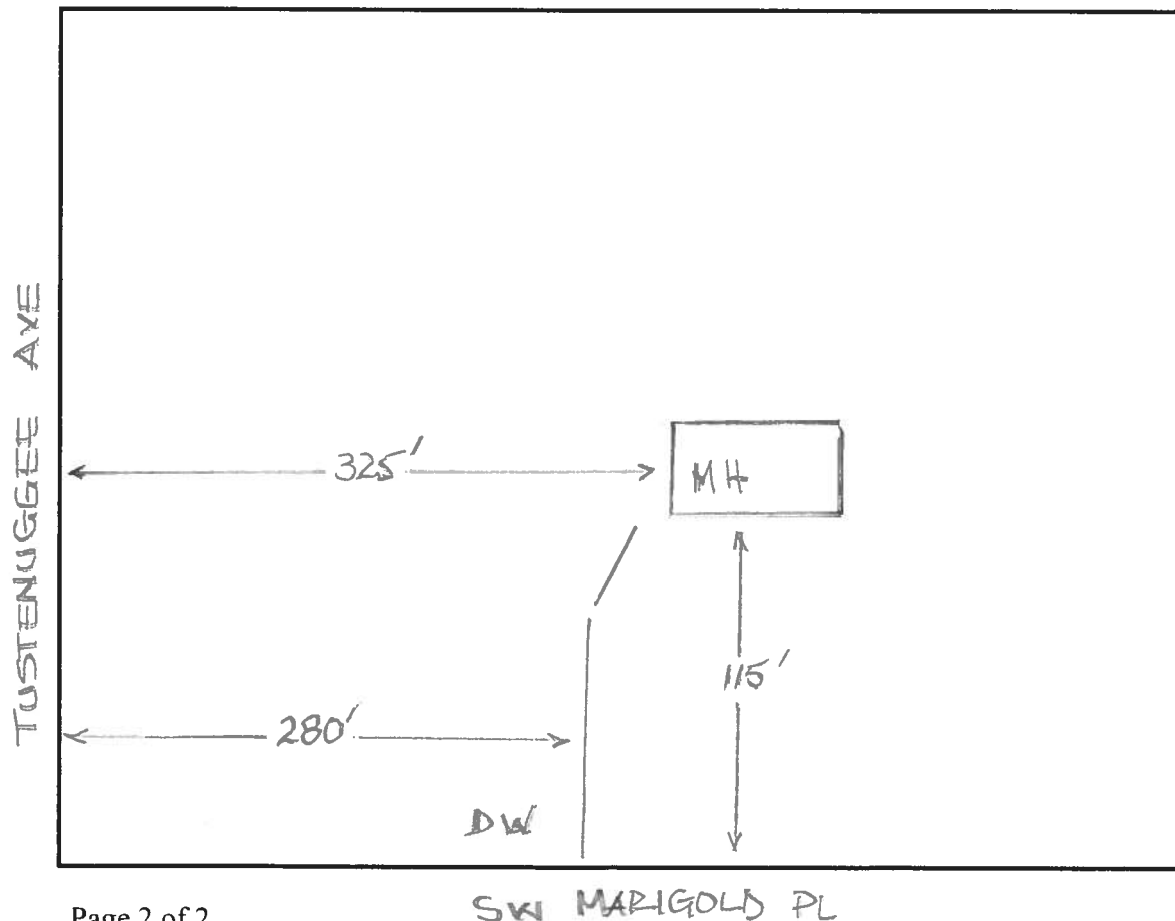
Page 2, Site Plan for 9-1-1 Address Application From

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:





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 OF AUTHORIZATION

I, Fermon Jones, give this authority for the job address show below
Installer License Holder Name

only, 182 SW Marigold Place, and I do certify that
Job Address

the below 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	Authorized Person is... (Check one)
<u>Sayda Ascencio</u>	<u>Sayda Ascencio</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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.

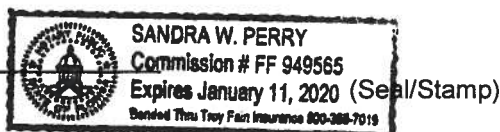
Fermon Jones IH1025418 12-3-18
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Union

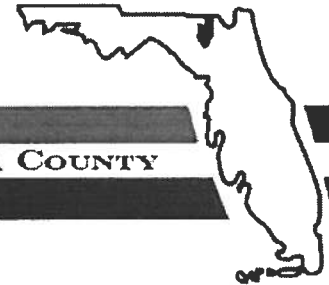
The above license holder, whose name is Fermon Jones,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 3 day of December, 2018.

Sandra W. Perry
NOTARY'S SIGNATURE



District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY



Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:	12/10/2018 12:49:48 PM
Address:	182 SW MARIGOLD PI
City:	FORT WHITE
State:	FL
Zip Code	32038

Parcel ID	09696-218
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REMARKS: Address for proposed structure on parcel. 2nd address on this parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

Mobile Home

Applicant: ROBERT ASCENCIO (352-275-2734) Application Date: 12/18/2018

Convert To ▾

1. ACTION
1. JOB LOCATION

Completed Inspections






Add Inspection

Release Power


2. CONTRACTOR

Schedule Inspection (ScheduleInspection.aspx?Id=40023)

3. MOBILE HOME
DETAILS

Inspection	Date	By	Notes
Failed: Mobile Home - In County Pre-Mobile Home before set-up	12/19/2018	TROY CREWS	H     

4. APPLICANT

Passed: Mobile Home - In County Pre-Mobile Home before set-up	12/27/2018	TOMMY MATTHEWS	
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5. REVIEW

6. FEES/PAYMENT

The completion date must be set To release Certifications to the public.

7.
DOCUMENTS/REPORTS

Permit Completion Date
(Releases Occupancy and Completion Forms)

8.
NOTES/DIRECTIONS

Incomplete Requested Inspections

9. INSPECTIONS (2)

Inspection	Date	By	Notes
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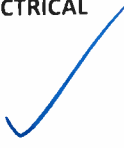

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1812-36 CONTRACTOR FERNON JONES PHONE 352-318-484

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 	Print Name <u>Sayda Ascencio</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>Sayda Ascencio</u> Phone #: <u>352-514-6640</u>
MECHANICAL/A/C 	Print Name <u>Sayda Ascencio</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>Sayda Ascencio</u> Phone #: <u>352-514-6640</u>

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.

SSOCOF #: 003906725 done by Ford's Septic on : 01 - 03 - 2018



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

PERMIT NO. 19-0025
DATE PAID: 1-8-19
FEE PAID: 318.88
RECEIPT #: 1391420

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: **ROBERT ASCENCIO**

AGENT: **Ronald Ford - Ford's Septic**

TELEPHONE: **386-755-6288**

MAILING ADDRESS: **116 NW Lawtey Way Lake City, Florida 32055**

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 18 BLOCK: _____ SUBDIVISION: TUSTENUGGEE RIDGE FIRST ADDITION PLATTED: _____

PROPERTY ID #: 18-6S-17-09696-218 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 5.27 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: **182 SW MARIGOLD PLACE FORT WHITE, FLORIDA 32038**

DIRECTIONS TO PROPERTY: Hwy 441 South. Turn (R) on SW Tustenuggee Avenue. Turn (R) on SW Marigold Place. Home # 182 on left.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	MOBILE HOME	3	1280	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Q C Ford DATE: 1-3-2019

STATE OF FLORIDA
DEPARTMENT OF HEALTH
~~APPLICATION FOR CONSTRUCTION PERMIT~~

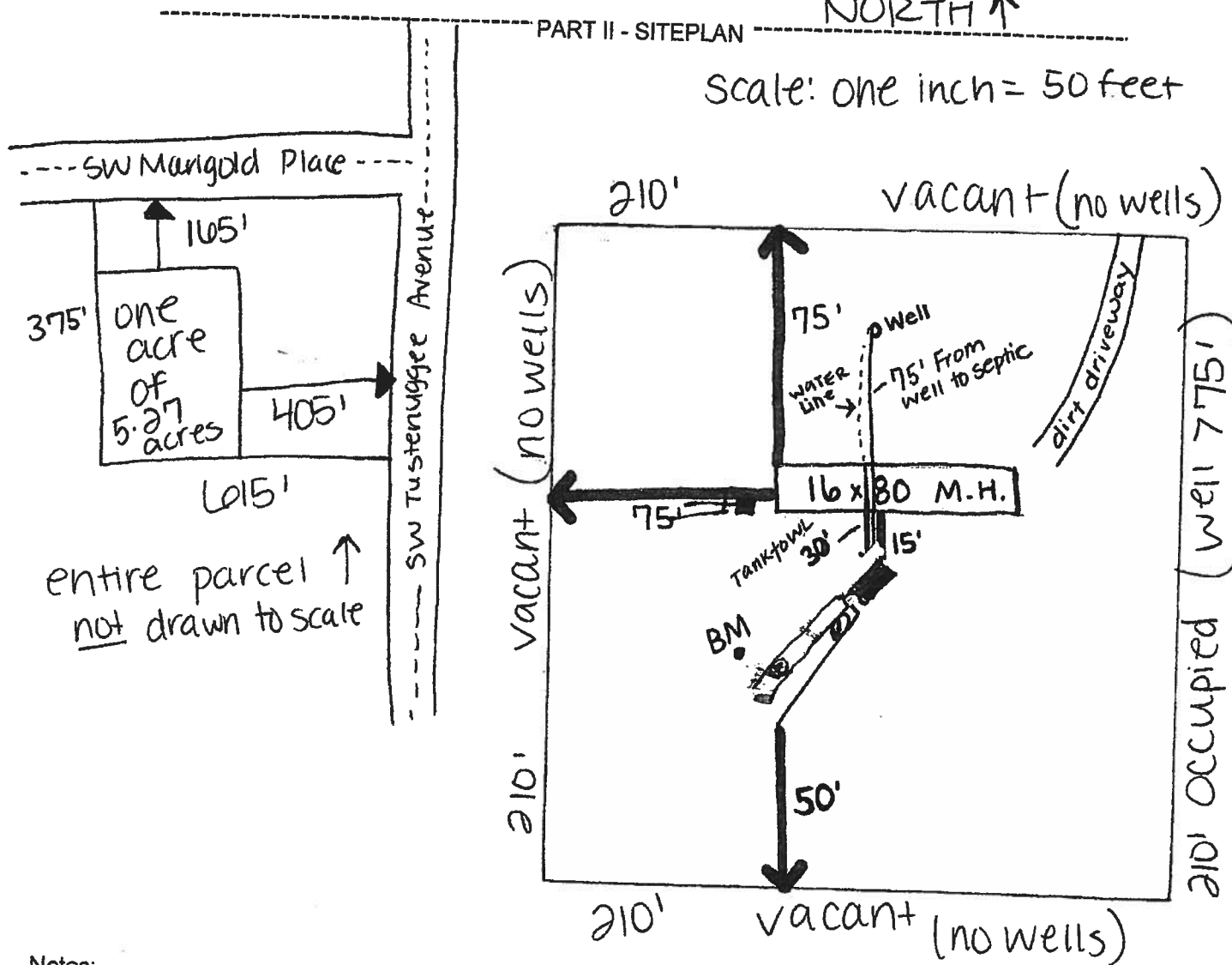
Permit Application Number

29-0025

NORTH ↑

PART II - SITEPLAN

Scale: one inch = 50 feet



Notes:

182 SW Marigold Place
Fort White, Florida 32038

Site Plan submitted by: D C Fina

Plan Approved

Not Approved

Date 1/10/10

By Karen Means ESI Columbia Date 7/27/1
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT