DATE <u>05/22/2008</u>	PERMIT 000027041				
ADDI ICANET DI HI I H	This Permit Must Be Prominently Posted of	370		00002/041	
APPLICANT PHILLII ADDRESS	P WOOLEY POB 1201	PHONE LAKE CITY	386.590.0490	FL 32056	
	P& CATHY WOOLEY	PHONE	386.590.0490	<u>J2030</u>	
ADDRESS 438	SE ELOISE AVENUE	LAKE CITY	360.370.0470	FL 32025	
	ACKIE GIBBS	PHONE	386.755.2349	32023	
LOCATION OF PROPE					
TYPE DEVELOPMENT	M/H/UTILITY EST	IMATED COST OF CO	NSTRUCTION	0.00	
HEATED FLOOR AREA	A TOTAL ARE	Α	HEIGHT	STORIES	
FOUNDATION	WALLS R	OOF PITCH	FLO	OOR	
LAND USE & ZONING	RSF-MH-2	MAX	. HEIGHT _		
Minimum Set Back Requ	uirments: STREET-FRONT 25.00	REAR	15.00	SIDE 10.00	
NO. EX.D.U. 0	FLOOD ZONE X	DEVELOPMENT PERM	MIT NO.		
PARCEL ID 33-3S-1	7-06675-001 SUBDIVISION	N MELROSE PARK	ADDITION		
LOT 3 BLOCK	PHASE UNIT _1	TOTA	AL ACRES		
	IH0000214	\ D().	10- n	10.	
Culvert Permit No.	Culvert Waiver Contractor's License Num	iber 7	Applicant/Owner/	Contractor	
WAIVER	08-265-N' CFS	The second secon	TH	$_{\rm N}$	
Driveway Connection	Septic Tank Number LU & Zonin	g checked by App	roved for Issuance	New Resident	
COMMENTS: ZONING	G CHANGED 9/20/2007 Z-482. 1 FOOT ABOV	E ROAd.			

			Check # or Ca	sh 3058	
	FOR BUILDING & ZONIN	G DEPARTMENT	ONLY	40 - 40 13	
Temporary Power	Foundation		Monolithic	(footer/Slab)	
	date/app. by	date/app. by	_ Monontine _	date/app. by	
Under slab rough-in plun	nbing Slab		Sheathing/N	Nailing	
	date/app. by	date/app. by	27	date/app. by	
Framing	Rough-in plumbing ab	ove slab and below wood	l floor		
F1	••••			date/app. by	
	Heat & Air Duct	date/app. by	Peri. beam (Lintel	date/app. by	
Permanent power	C.O. Final	сасстарр. бу	Culvert	date/app. by	
		ate/app. by		date/app. by	
M/H tie downs, blocking,	electricity and plumbing date/app	by	Pool		
Reconnection	5.0	Utility Pol	le	date/app. by	
M/H Pole	date/app. by date/	app. by	date/app. by	_	
date/app. by	Travel Trailer	ate/app. by	Re-roof	date/app. by	
BUILDING PERMIT FEI	E \$0.00 CERTIFICATION FEE	E\$ 0.00	SURCHARGE	FEE \$ 0.00	
MISC. FEES \$ 300.				E FEE \$ 83.75	
September 1997		_		8	
FLOOD DEVELOPMEN	FLOOD ZONE FEE \$ 25.00	COLVERT FEE \$	—— TOT	AL FEE 490.85	
INSPECTORS OFFICE		CLERKS OFFICE	(\mathcal{N})		

PERMIT

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 TO BE IN ACTIVE PROGESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION O Building Official OK JIH 5-2400 For Office Use Only Zoning Official (Revised 1-10-08) ____ Date Received <u>5/20/08</u> 27041 0805.37 Permit # AP# Zoning SF/MLand Use Plan Map Category Flood Zone **Development Permit** Comments Finished Floor River In Floodway FEMA Map# Elevation / Site Plan with Setbacks Shown 12 EH # 08265 N = EH Release = Well letter = Existing well ✓ Recorded Deed or Affidavit from land owner □ Letter of Auth. from installer □ State Road Access ____ □ STUP-MH ____ □ F W Comp. letter ☐ Parent Parcel # Fire IMPACT FEES: EMS Corr_____Road/Code_ = TOTAL School Property ID# K-33-35-17-06675 De Subdivision Melase Park Addition #1 Used Mobile Home______MH Size 28 x 40 Year 20 8 New Mobile Home

✓ Phone # (386)598-0498 Address 1 0 Box (201 Lake City &C 31025) Name of Property Owner Phillip & Cathe Wasley Phone# Property CE Bloise 911 Address 438 Circle the correct power company -FL Power & Light Clay Electric (Circle One) -Suwannee Valley Electric -**Progress Energy** ? Cather Walex Phone # (386) 390 0490 Name of Owner of Mobile Home Address # Relationship to Property Owner SAME Current Number of Dwellings on Property Total Acreage Do you : Have Existing Drive or Private Drive or need Culvert Permit of 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 Take Motion Ct (s) Jack:0 Name of Licensed Dealer/Installer - A wholesale Installers Address License Number Installation Decal #

2050

+ MOSSAG

OWNER IMPACT FEE OCCUPANCY AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

BEFORE ME, the undersigned authority, personally appeared Phillip K. Wook ("Owner"), who, after being duly sworn, deposes and says:
 Except as otherwise stated herein, Affiant has personal knowledge of the facts and matters set forth in this affidavit.
 Affiant is the owner of the following described real property located in Columbia Count Florida. (herein "the property"):
(a) Parcel No.: R 33-35-17-06675-000 (b) Legal description (may be attached): Lots Block P Melrose Park Addition #1 5/0
3. Affiant has or will apply to the Columbia County Building Department for a building permit for the replacement of a building or dwelling unit on the property where no additional square footage or dwelling units will be created and will be located on the same property.
4. Either based upon Affiant's personal knowledge or the attached signed written statement of another person, a certificate of occupancy has been issued for the replacement building or dwelling on the property within seven (7) years of the date the previous building or dwelling unit was previously occupied. The building or dwelling unit was last occupied on
5. This affidavit is given for the purpose of obtaining an exemption pursuant to Article VIII. Section 8.01, Columbia County Comprehensive Impact Fee Ordinance No. 2007-40, adopted October 18, 2007, as may be amended.
Further Affiant sayeth naught. Print: Phillip K Wooley
Address: POBOX 1201
Lake City FL 32056
SWORN TO AND SUBSCRIBED before me this 20th day of May, 2008, by Phillip K. Wooley who is personally known to me or who has produced as identification.
(NOTARIES SEAL) Notary Public. State of Florida
My Commission Expires:

EXPIRES March 30, 2009
FloridaNotaryService.com

To Whom if May concern's

I, Mr. Johnny Bell Flower, own and have lived next to 438 SE Eloise Ave since 1990. Mrs. Dorothy Suggs and her nephew (?) used on 438 SE Eloise Ave. until 2005. My address is 469 & Montrose Avenue Schonie D. Beseflorter

Columbia County 5/20/2008 10:03 Property Maintenance 11000 Land 001 Year T Property Sel AG 000 2008 R 33-35-17-06675-000 5879 Bldg 001 Owner WOOLEY PHILLIP K & + Conf Xfea 000 Addr CATHY A WOOLEY (JTWRS) 16879 TOTAL 2012 SW OLD BELLAMY RD .241 Total Acres Retain Cap? Renewal Notice City, St FT WHITE FL Zip 32038 Country (PUD1) (PUD2) (PUD3) MKTA03 Appr By JS Date 9/03/1998 AppCode UseCd 000100 SINGLE FAMILY TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp 002 33317.11 06 MELROSE PK 438 House# Street ELOISE MD ST Dir SE # City LAKE CITY Subd N/A Condo .00 N/A Sect 33 Twn 35 Rnge 17 Subd Blk Legals LOTS 2 & 3 BLOCK P MELROSE PARK ADDITION #1 S/D. ORB 796-2008. WD 1089-2276. Map# Mnt 5/17/2007 GAIL F1=Task F2=ExTx F3=Exit F4=Prompt/ F11=Docs F10=GoTo PgUp/PgDn F24=More

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.

1, <u>Jackie Gibbs</u> , license number IH 0000214
do hereby state that the installation of the manufactured home for
State City PZ
will be done under my supervision. 911 Address
Jacki Libbs Signature
Sworn to and subscribed before me this 12 day of 12 day of 12 day.
Notary Public: Signature
My Commission Expires: Oute VICKI PRICKITT Notary Public - State of Florida My Commission Expires Sep 30, 2010 Commission # DD 505385

Bonded By National Notary Assn.

AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

21/11/1/1/201	
Customer's Name: Phillip K Wooley	
Property ID: Sec: 33 Twp: 3S Rge: 17	Tax Parcel No: (%625 - 00
Lot: 2 Block: P Subdivision: Melose Park	Addition #1
Mobile Home Year/Make: 2008 Scotbilt 284	1043 Size: 28x40
Signature of Mobile Home Installer	PP
Sworn to and subscribed before me this <u>12</u> day of by <u>Phillip R. Wool</u> ey	: May , 20 08
Notary's name printed/typed Notary Commi	Public, State of Florida ission No
	ced ID (type)

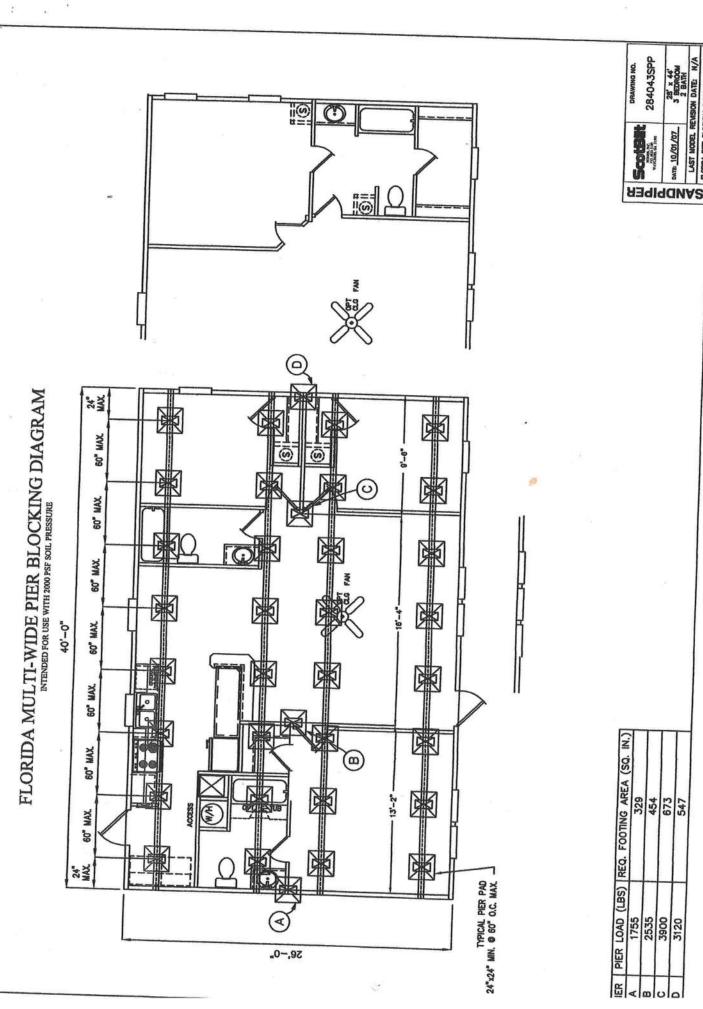
200 20 5

Connect all sewer drains to an existing sewer tap or septic tank. Pg.	rlumping		Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pa.	Electrical		Date Tested 5/12/07	Installer Name CACTILE (5.665	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity. Installer's initials	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft	The results of the torque probe test is inch pounds or check here if you are declaring 5' anchors without testing A test showing 275 inch pounds or less will require 5 foot anchors.	TORQUE PROBE TEST	×/000 ×/000	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	2. Take the reading at the depth of the footer.	 Test the perimeter of the home at 6 locations. 	POCKET PENETROMETER TESTING METHOD	×/000 ×/000	are 1000 lb. soil without testing.
manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the	Installer verifies all information given with this permit workshee		Other:	nes supported at 4 foot intervals. Yes	side of skirting	Skirting to be installed. Yes No	Miscellaneous	The bottomboard will be repaired and/or taped. Yes Pg. Pg. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Weatherproofing	Pg Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Installer's initials A WA	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	Gasket (weatherproofing requirement) I understand a properly installed gasket is a requirement of all new and used homes and that condensation mold moldew and broken.	rooting nails at 2" on center on both sides of the centerline.	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.		Fastening multi wide units	Water drainage: Natural Swale Pad Other

	Г	_	
Installer Signature Facility Auth Date 5/1	manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the	Installer verifies all information given with this permit worksheet
in	N		ee

independent water supply systems. Pg.

Connect all potable water supply piping to an existing water meter, water tap, or other



Return to:: PHILLIP K. WOOLEY This instrument prepared by: PHILLIP K. WOOLEY

Inst:2006016869 Date:07/14/2006 Time:15:42 140.00

Doc Stamp-Deed:

DC,P.DeWitt Cason,Columbia County B: 1089 P:2276

Property Appraiser Parcel Identification: 33-38-17-06675-000 Grantee (s) SS#: (s) SPACE ABOVE THIS LINE FOR RECORDING DATA SPACE ABOVE THIS LINE FOR PROCESSING DATA day of 1011, 2006 by DOROTHY THIS WARRANTY DEED, made this HOWARD YOUNG SUGGS, whose Post Office Address is 438 ELOISE TREET SE, Lake City, Florida 32025 hereinafter called the Grantor, to PHILLIP K. WOOLEY and CATHY A. WOOLEY, as joint tenants with rights of survivorship, whose post office address is PO BOX 1201, Lake City, Florida 32056 hereinafter called the Grantee. (Wherever used herein the terms 'Grantor and 'Grantee" include all the parties to this instrument and 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 considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee all that certain land, situate in COLUMBIA County, State of FLORIDA viz: LOTS 2 & 3, BLOCK P MELROSE PARK ADDITION, #1 SUBDIVISION, a subdivision according to the plat thereof recorded in Plat Book 2, Page 16, of the Public Records of 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 the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby 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 encumbrances, except taxes subsequent to December 31, 2005. 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: Pemberton Witness Signature (as to first Grantor) Printed Printed Name 438 ELOISE ST. SE, Lake City, Fl Witness Signature (as to first Grantor) Post Office Address PATRICIA A. ALBURY Printed Name State of FLORIDA County Of COLUMBIA: I hereby Certify that on this day, before me, an officer duly authorized to administer oaths described in and who executed the foregoing instrument, who acknowledged before me that SHE executed the

> PATRICIA A. ALBURY MY COMMISSION # DD 215503 EXPIRES: September 25, 2007 Rended Thru Budget Notary Services

vided the following type of identification: (1) 5200-186-26-623

same, and an oath was not taken. (Check one:)_

A..D. .

official seal in the County and State last aforesaid this

Motary Signature: PATRICIA Printed Name:

Said person(s) is/are personally known to me. O Said person(s) pro-

O Witness my hand and

District No. 1 - Ronald Williams
District No. 2 - Dewey Weaver
District No. 3 - George Skinner

District No. 4 - Stephen E. Bailey District No. 5 - Elizabeth Porter



September 21, 2007

Mr. and Mrs. Phillip Wooley P.O. Box 1201 Lake City, FL 32056

RE: Z 482

Dear Mr. and Mrs. Wooley:

This is to confirm that the Board of County Commissioners at their regularly scheduled meeting on September 20, 2007 approved the above referenced Zoning Amendment.

If you have any questions concerning this matter, please do not hesitate to contact me at 754-7053.

1. Scott

Sincerely,

Connie F. Scott

Planning Technician

BOARD MEETS FIRST THURSDAY AT 7 00 PM

AND THIRD THURSDAY AT 7 00 PM

LIMITED POWER OF ATTORNEY

1, Jackie Gibbs , license # IH0000 212 hereby
authorize Phillip K Wooley to be my representative and act on my behalf
in all aspects of applying for a mobile home permit to be placed on the following
described property located in Suwannee County, Florida.
Property owner: Phillip k Wooley Sec 33 Twp. 35 S Rge 17 E
Tax Parcel No
Mobile Home Installer
5-20-08 (Date)
Sworn to and subscribed before me this 20th day of Mo, 20 08.
Notary Public Super LINDA J ROUSE
My Commission expires: Commission No. Personally known: Produced ID (Type)

08-365- N

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

PART II-SITEPLAN (Kith Wooley)

Permit Application Number_

Scale: 1 inch = 50 feet.

Let 3

NORTH

Store 25 PAT THE PART OF THE P

Notes:		The state of the s	
Site Plan submitted by:	Roch 3)-9	MASTER CONTRACTOR
Plan Approved	0 20	Not Approved	Date 3/25/08 Columbia: County Health Departmen

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

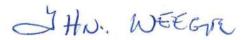
DH 4015, 10/96 (Replaces HRS-H Form 4016 which may be used) (Stock Number: 5744-002-4015-6)

Page 2 of 4

To whom it MAY CONTREAM? This is my swoon statement as owner or 438 SE Bloose Are Lake City that the existing home has been demolished and cleared. Thanks Phillip K Wooley

@ CAM110M01 CamaUSA Appraisal System 5/22/2008 11:40 Property Maintenance Year T Property Sel 2008 R 33-3S-17-06675-001 Owner WOOLEY PHILLIP K & + Conf Addr CATHY A WOOLEY (JTWRS) 2012 SW OLD BELLAMY RD	11000 11000 .241 To	Land AG Bldg Xfea TOTAL otal Ac	000 000 000 B
City, St FT WHITE FL Zip 32038 N Country (PUD1) (PUD2)	Renew	al No	otice
Appr By JS., Date 9/03/1998 AppCode UseCd 000100 SINGL	E FAMILY		ι _. Α0,3,
TxDist Nbnd MktA ExCode Exemption/% Tx0 0.02, 3.3.3.17.11 0.6	Code Ui		Тр
House# 438 Street ELOISE MD S'	[Dir	SE, #	
Subd N/A Condo .00 N/A			
Sect 33 Twn 35 Rnge 17 Subd Blk Legals LOT 3 BLOCK P MELROSE PARK ADDITION #1 S/D.			E
ORB 796-2008. WD 1089-2276. Map# Mnt 5/22/20 F1=Task F2=ExTx F3=Exit F4=Prompt F11=Docs F10=GoTo I	008 CHUCI	K n F24=	=More

438 SE EloisE Ave



Columbia County Building Department **Culvert Waiver**

Culvert Waiver No. 000001601

DATE: 05/22/2008 BUILDING PERMIT NO.	27091	_	
APPLICANT PHILLIP WOOLEY	PHONE	386.590.0490	
ADDRESS POB 1201	LAKE CITY	FL	32056
OWNER PHILLIP & CATHY WOOLEY	PHONE :	386.590.0490	
ADDRESS 438 SE ELOISE AVENUE	LAKE CITY	FL	32025
CONTRACTOR JACKIE GIBBS	PHONE	386.755.2349	
LOCATION OF PROPERTY EAST BAYA TO ELOISE AVENU	UE,TL & 1 1/2 BLOCK	S ON THE L.	
			 %
SUBDIVISION/LOT/BLOCK/PHASE/UNITMELROSE PARK	ADD	3	1
PARCEL ID # 33-3S-17-06675-001			
I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITS SIGNATURE:	TH THE HEREIN PRO	OPOSED APPLICA	ATION.
A SEPARATE CHECK IS REQUIRED MAKE CHECKS PAYABLE TO BCC	Amount	Paid <u>50.0</u>	<u> </u>
PUBLIC WORKS DEPARTMENT	NT USE ONLY		
I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATI CULVERT WAIVER IS:	ON AND DETERMIN	ED THAT THE	
APPROVED	NOT APPROV	ED - NEEDS A	CULVERT PERMIT
COMMENTS:			
SIGNED: Willie Malle DA	ATE: 6-2-	08	

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

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

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





MIT OCCUPATO

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 33-3S-17-06675-001

Building permit No. 000027041

Permit Holder JACKIE GIBBS

Owner of Building PHILLIP& CATHY WOOLEY

Location: 438 SE ELOISE AVENUE

Date: 07/09/2008

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)