Parcel:

36-58-15-00485-087 (2223)

## **Owner & Property Info**

Result: 14 of 21

LEXINGTON ESTATES LLC

Owner

20638 NW 78TH AVE ALACHUA, FL 32615

Site

243 SW CURTAIN Ln, FORT WHITE

Description\*

LOT 27 FERNWOOD ESTATES S/D. 653-603,816-953,856-1525, WD 1198-2302, DC 1232-1622, PB

1232- 1628, PR 1240-2185, QC 1289-2343, TD 1465-1504,

Area

5 AC

S/T/R

Use Code\*\* VACANT (0000)

Tax District 3

36-5S-15

## **Detail by Entity Name**

Florida Limited Liability Company LEXINGTON ESTATES, LLC

#### Filing Information

**Document Number** 

L07000019639

FEI/EIN Number

20-8538932

Date Filed

02/21/2007

State

FL

Status

ACTIVE

### Principal Address

20638 N.W. 78TH AVENUE ALACHUA, FL 32615

### **Mailing Address**

20638 N.W. 78TH AVENUE ALACHUA, FL 32615

Changed: 02/22/2009

### Registered Agent Name & Address

SULLIVAN, MARK P 20638 NW 78TH AVENUE ALACHUA, FL 32615

### Authorized Person(s) Detail

Name & Address

Title MGRM

SULLIVAN, MARK P 20638 NW 78TH AVENUE ALACHUA, FL 32615

Title MGRM

SULLIVAN, NANCY J 20638 NW 78TH AVENUE ALACHUA, FL 32615



#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	Ernest Scott Johnson	PHONE 352-494-8099

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

### Monique Borroto

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> 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 Glenn Whittington	Signature
	License #: EC 13002957	Phone #: 386-972-1700
	Qualifier Form	Attached
MECHANICAL/	Print NameTimothy Shatto	Signature
A/C	License #:CAC 057875	Phone #: 386-496-8224
	Qualifier Form	Attached X

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015



# COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

## LICENSED QUALIFIER AUTHORIZATION

LICENSED QUALIFIE	CK AUTHORIZATION
1. Charl Whitington	(license holder name), licensed qualifier
for Whittington ELERKIC S	Twc(company name), do certify that
the below referenced person(s) listed on this form holder, or is/are employed by me directly or through officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcontains.	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. Cocky Fond	2. 8 0 2 2 2
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for compl Local Ordinances. I understand that the State ar authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted	iance with all Florida Statutes, Codes, and ad County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or limited.	ing of the changes and submit a new letter of jour lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	License Number Date
NOTARY INFORMATION: STATE OF:COUNTY OF:	Colmbia
personally appeared before me and is known by	me or has produced identification this day of, 20
NOTARY'S SIGNATURE	Seal/Stangery R BISHOP  Notary Public - State of Florida



# COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

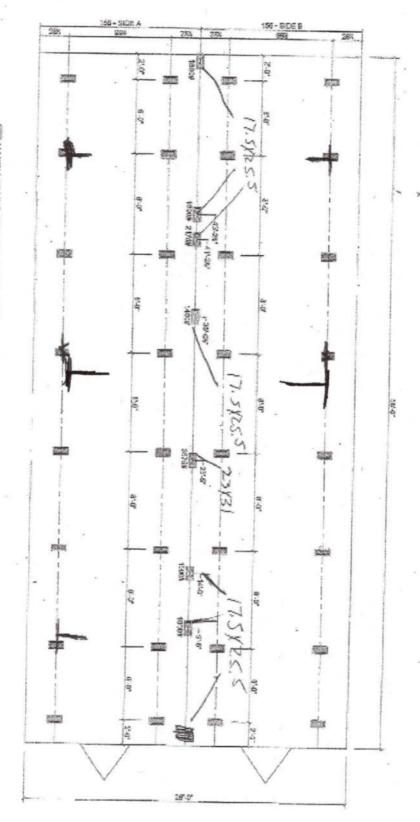
Phone: 386-758-1008 Fax: 386-758-2160

# LICENSED QUALIFIER AUTHORIZATION

, Timothy Shatto	(license holder name), licensed qualifier
for Shatto Heat & Air	
the below referenced person(s) listed on this to holder, or is/are employed by me directly or thro- officer of the corporation; or partner as defined	in Florida Statutes Chapter 468, and the said
Printed Name of Person Authorized	Signature of Authorized Person
1. Bo Royals	1. Both
2. Dale Burd	2.
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complete Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted life at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous unauthorized persons to use your name and/or life.	is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ones lists.
Licensed Qualifiers Signature (Notarized)	CAC 057875 2/22/18 License Number Date
NOTARY INFORMATION: STATE OF: FOLIA COUNTY OF:	Union
Victoria L. Palmer	me or has produced identification his 20 day of february, 2018.
NOTARY'S SIGNATURE	(Seal/Stano) VICTORIA K. PALMER
	Notary Public - State of Florida

Commission # FF 207489
My Comm. Expires Mar 9, 2019
Bonded through National National Association





SUPPORT PIERTYP ES WARRAGE LINE OPENING SUPPORT PIET

ECAMANTICALHOTES.

FORDRICA MEDICALHOTES PORTUGE STANDARD WHYD ZONE AND IS TO DE LIBED IN CONJUNCTION TATH THE HISTALATION ANDLAL AND IT IS SUPPLEMENTS.

FROGUNGS AND RECOUNCED AT SUPPLEMENT AND SPACHNAM MAY MARY BASED ON PAD TYPE, MON. CONDITION, ETC.

FROGUNGS AND RECOUNCED AT SUPPLEMENTS SITE METALATION WANTAL FOR REQUIREMENTS.

MODEL: L-2564F - 28 X 56 ABEDROOM / 2-BATH Live Oak Homes

- (A) WANTERFORMER (B) SECTIONAL CHOOSEOVER (C) WATER HEALT (F) AND (C) CHOOSEOVER (F ANY)

  (B) GAS CROSSOVER (F ANY)

  - SUPER DROWS
     SUPER DROWS
     SUPER DROWS
     SUPER AND PROMOTE HEAT PUMP ON DUISO?

L-2564F

# STATE OF FLORIDA

## DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

	Permit Applic	cation Number
Lexingto	on / Borroto	
Scale: Each block repres	ents 10 feet and 1 inch = 40 feet.	
	North	30 104'
	115'	4BR 8 1768
	SLARE 26	WELL SON 34
	147	81'
Notes:		
1	of 5 Arras SEE ATTACHED	
Site Plan submitted by:	8/26/22	Contractor
Plan Approved	Not Approved	Date
Ву		County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

GrizzlyLogic.com



## **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: 6/22/2020 2:42:46 PM

Address: 243 SW CURTAIN LN

City: FORT WHITE

State: FL

Zip Code 32038

Parcel ID 36-5S-15-00485-087

REMARKS: This address is a verified address in the county's addressing system.

Verification ID: 64391879-56fc-4c42-9498-596ed8d2bd9f

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: GIS Specialist

Columbia County GIS/911 Addressing Coordinator

Columbia County
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456

Longitudinal Marriage wall Shearwall	Manufacturer  Longitudinal Stabilizing Device w/ Lateral Arms  Manufacturer	
Number 2,8	Longitudinal Stabilizing Device (LSD)	
OTHER TIES	TIEDOWN COMPONENTS	
spaced at 5' 4" oc	Plan	
G FRAME TIES	tactory blocking	
4ft V 5ft L		
ANCHORS		
П	List all marriage wall openings greater than 4 foot and their pier pad sizes below	
17 3/16 x 25 3/16 17 1/2 x 25 1/2	symbol to show the piers.	tairriage wall piers within 2' of end of home per Fille 15C
20 x 20	~	
H	(required by the mfg.)	-
18.5 x 18.5	ı	See from blacking Ran
П	PRIMULE 1845 571 01 17.5 x 25.5	
Tuy OC Pad Size I So	ze 23×31	
POPULAR PAD SIZES	PIER PAN SIZES	
8	81	
න් හ න් හ	3000 psf 8' 8'	
0,00	9, 6,	longitudinal (use dark lines to snow these locations)
8 6	4.6°	*
(400) (484)* (576)* (676)	(sq in) (256) 1/2" (342)	2º John James
)" 22" x 22" 24" X 24" 2	5" 18 1/2" x 18	Typical pier spacing
OR USED HOMES	PIER SPACING TABLE FOR USED HOMES	where the sidewall ties exceed 5 ft 4 in.
ged	Roof System: V Typical Hinged	Lunderstand Lateral Arm Systems cannot be used on any home (new or used)
10464 Jeo 38447 AS	Triple/Quad Serial # Lot	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
# 92600	Double wide Installation Decal #	Manufacturer LIVECOIC Length x width 68 X 28
Wind Zone III	Single wide	For White Py 32038
5-C	Home is installed in accordance with Rule 15-C	P.C
7		Installer Fhone # 352-494-8099
_	New Home Used Home T	NOMBER

Site Preparation

in appropriate and the best of the	Plimbing
Installer verifies all information given with this permit worksheet	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg
CHEL	Electrical
Electrical crossovers protected. Yes	Uses 4 i, s' Anchors
Dryer vent installed outside of skirting. Yes N/A N/A	Date Tested ASSUMPED DIIVER 1101 V
Skirting to be installed. YesN6	Installer Name FYNEST SON ON FON
The bottomboard will be repaired and/or taped. Yes	reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb berding capacity.  Installer's initials
Weatherproofing	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft
Type gasket Pg. ALLOW Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	2
a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	2007× 0004 ∩007×
Gasket (weatherproofing requirement)  I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are	<ol> <li>Using 500 lb. increments, take the lowest reading and round down to that increment.</li> </ol>
Type Fastener: 1.085 Length: 7 Type Fastener: 1.085 Length: 7 For used homes a mill: 30 gauge, 8" wide, ga will be centered over the peak of the roof and roofing nails at 2" on center on both sides of the roof and roofing nails at 2" on center on both sides of the roof and roofing nails at 2" on center on both sides of the roofing nails at 2" on center on both	1. Test the perimeter of the home at 6 locations.  2. Take the reading at the depth of the footer.
Fastening multi wide units  Floor: Type Fastener: 1005 Length: 7 Spacing: 2.6	MOD (
Debris and organic material removed Water drainage: Natural Swale Pad Other	The pocket penetrometer tests are rounded down to psf or check here to declare 1000 h. soil without testing
One rieparation	DOCKET DEVICTED TEST

f skirting. Yes AIA d outside of skirting. Yes t intervals. Yes	Skirting to be installed. Yes	Miscellaneous	Fireplace chimney installed so as not to allow intrusion of rain water. Yes	The bottomboard will be repaired and/or taped. Yes Pg. Siding on units is installed to manufacturer's specifications. Yes	Weatherproofing
N/A			water. Yes	1	

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

Installer Signatur TMenXX

MAN Date

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

is accurate and true based on the

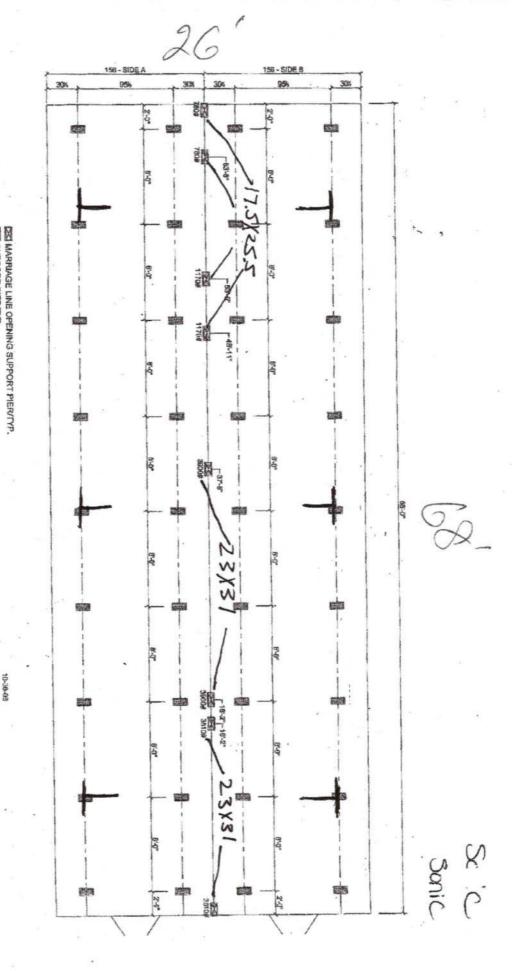
independent water supply systems. Pg.

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

DORMERS SHOWN ARE OPTIONAL. 4'-5%" MASTER BEDROOM 14'-2" x 12'-8" 3063E 3053 71-4 LIVING ROOM 17'-9" x 12'-8" 111-10 56'-0" #4 BEDROOM 8'-11" x 12'-4" 16'-0" #2 BATH #2 BEDROOM 8'-11" x 12'-4" #3 BEDROOM 8'-11" x 12'-4" 8,41% 8-4%

4-BEDROOM / 2-BATH 28 x 60 - Approx. 1456 Sq. Ft. Date: 4-4-2018 L-2564F

All room dimensions include closets and square footage figures are approximate.



**BM SUPPORT PIER/TYP** 

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.

- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes MODEL: L-2684B - 28 X 68 4-BEDROOM / 2-BATH

- (a) DUCT CROSSOVER
  (b) ELECTRICAL CAOSSOVER
  (c) WATER (M.ET
  (c) WATER (M.ET
  (c) WATER (M.ET
  (c) WATER CROSSOVER (IF ANY)
  (d) SUPPLY AIR (WOOPT, HEAT PUMP OH DUCT)
  (e) GAS (M.ET (IF ANY)
  (e) GAS (M.ET (IF ANY)
  (f) BAS CROSSOVER (IF ANY)

L-2684B