

DATE 08/20/2012

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

PERMIT
000030400

APPLICANT LARRY BAKER PHONE 961-8654
ADDRESS 330 SW GLADE GLEN LAKE CITY FL 32024
OWNER LARRY & LORI BAKER PHONE 386.365.5826
ADDRESS 318 SW GLADE GLEN LAKE CITY FL 32024
CONTRACTOR BERNIE THRIFT PHONE 623-0046

LOCATION OF PROPERTY 47S, TR ON CR 240, TL ITCHTUCKNEE AVE, TL GRAPE, TR
CANTALOE, TL GLADE GLEN, STRAIGHT TO DRIVEWAY

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 MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 31-5S-16-03744-408 SUBDIVISION PINE FOREST...UNREC.

LOT 8 BLOCK PHASE UNIT TOTAL ACRES 10.00

IH1025155 y Lori Baker
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

EXISTING 12-0238 BLK TC N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD. STUP-MH - 1208-20

2ND UNIT ON PROPERTY.

Check # or Cash CASH REC'D.

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 \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 325.00

INSPECTORS OFFICE Z. H. CLERKS OFFICE CH

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.

STUP Affidavit

27679 MH
16305 MH

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>RLK 20 Aug 2012</u>	Building Official <u>TC. 8-15-12</u>
AP# <u>1208-26</u>	Date Received <u>8/8/12</u>	By <u>LT</u>	Permit # <u>30400</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>N/A</u>
Comments _____			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1st floor</u>	River <u>N/A</u> In Floodway <u>N/A</u>
<input checked="" type="checkbox"/> Site Plan with Setbacks Shown	<input checked="" type="checkbox"/> EH # <u>12-0238</u>	<input type="checkbox"/> EH Release	<input type="checkbox"/> Well letter <input checked="" type="checkbox"/> Existing well
<input checked="" type="checkbox"/> Recorded Deed or Affidavit from land owner	<input checked="" type="checkbox"/> Installer Authorization	<input checked="" type="checkbox"/> State Road Access	<input checked="" type="checkbox"/> 911 Sheet
<input type="checkbox"/> Parent Parcel # _____	<input checked="" type="checkbox"/> STUP-MH <u>1208-20</u>	<input type="checkbox"/> F W Comp. letter	<input checked="" type="checkbox"/> VF Form
IMPACT FEES: EMS _____ Fire _____		Corr _____	<input type="checkbox"/> Out County <input checked="" type="checkbox"/> In County
Road/Code _____ School _____		= TOTAL _____ Impact Fees Suspended March 2009 _____	

Property ID # 31-55-16-03744-408 Subdivision Pine Forest Unrec. Lot 8

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x60 Year 88
- Applicant Larry Baker Phone # 386-365-5826
- Address 330 SE APACHE WAY Lake City Florida 32025
- Name of Property Owner Larry Baker Phone# 386-365-5826
- 911 Address 318 SW Glade Glen 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 Larry Baker Phone # 386-365-5826
Address 330 SE APACHE WAY Lake City Fl. 32025
- Relationship to Property Owner Same Person
- Current Number of Dwellings on Property 1 EA.
- Lot Size _____ Total Acreage 10
- 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 Left
- Driving Directions to the Property 47 South to 242 Left, Right on old Ichnatua
Left on Grape Right on Cantalope, Left on Glade Glenn go
to the end of the drive stay right.
- Name of Licensed Dealer/Installer Bernie Thirft Phone # _____
- Installers Address 5557 NW Falling creek rd White Springs Fl 32096
 - License Number IH 1025155 Installation Decal # 11408

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Bernie Thiff License # 141025155

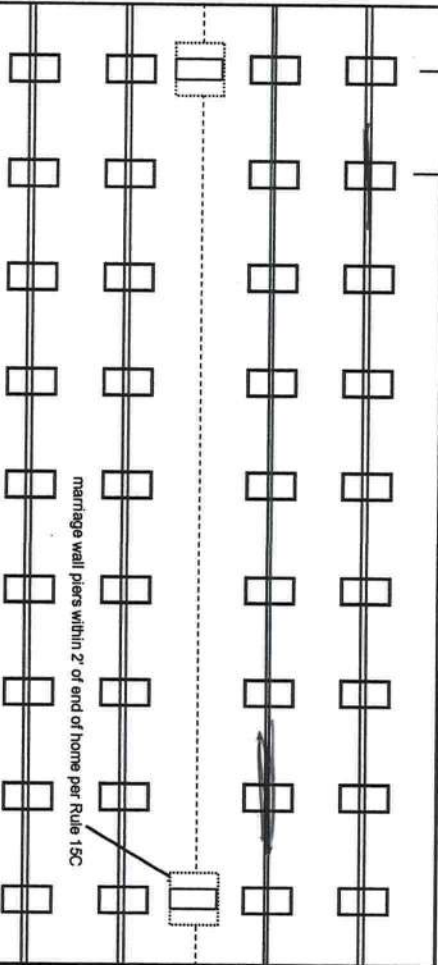
911 Address where home is being installed. _____

Manufacturer New Moon Length x width 14X60

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 BT



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 # 11408

Triple/Quad ☐ Serial # 14602914

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 17X22

Perimeter pier pad size 16X16

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 _____

17'4"

ANCHORS

4 ft ✓ 5 ft _____

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer Model 1101 Offset

OTHER TIES

Sidewall _____
Longitudinal Marriage wall _____
Shearwall _____

Number 2

174

Systems

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil _____ without testing.

X 2000 X 2500 X 2500

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 2500 X 2000 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 290 ft 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 requires anchors with 4000 lb holding capacity.

BF Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernie Thirif

Date Tested

5-21-12

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. _____

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural ✓ 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 BF

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. 8
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

Miscellaneous

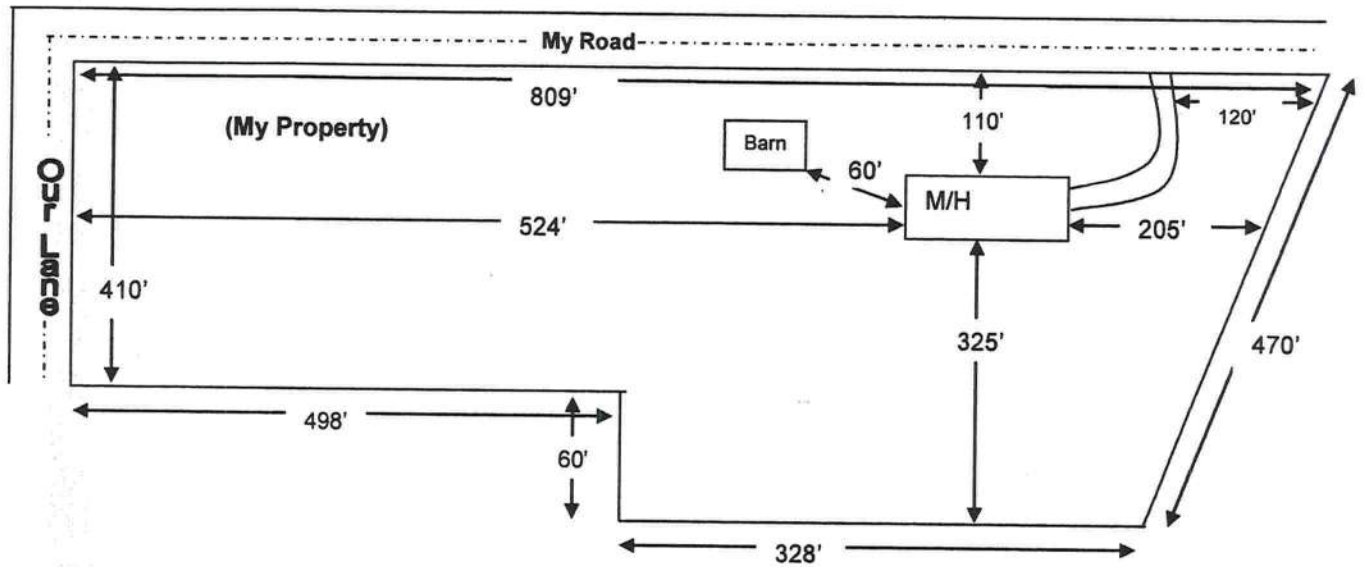
Skirting to be installed. Yes _____ No ✓
Dryer vent installed outside of skirting. Yes _____ N/A _____
Range downflow vent installed outside of skirting. Yes _____ N/A _____
Drain lines supported at 4 foot intervals. Yes _____
Electrical crossovers protected. Yes ✓
Other: _____

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

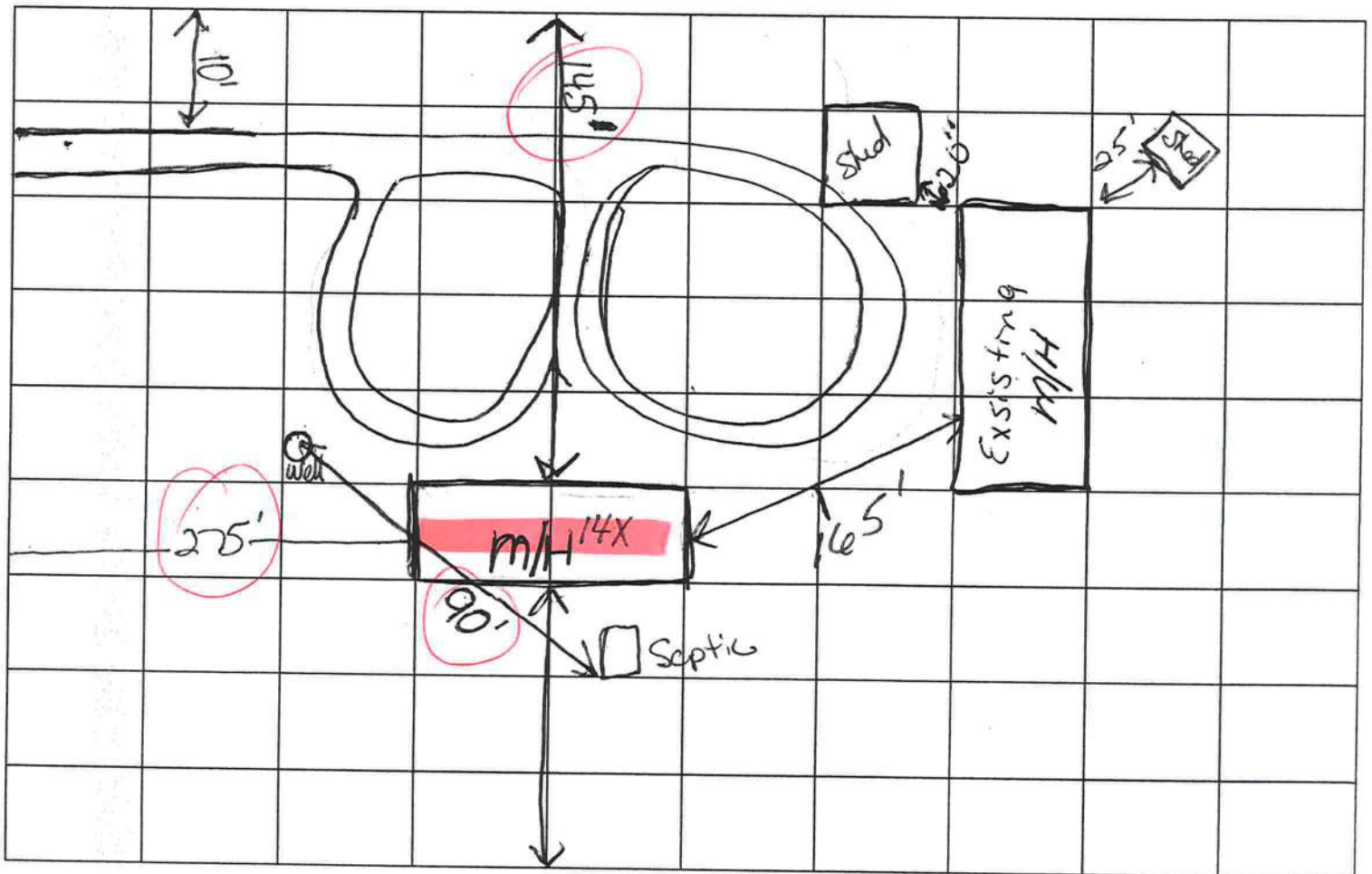
Installer Signature Bernie Thirif

Date 5-23-12

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



2011 Tax Year

Property Card

Parcel List Generator

Interactive GIS Map

Print

Search Result: 1 of 1

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$40,184.00
Ag Land Value	cnt: (4)	\$0.00
Building Value	cnt: (1)	\$10,651.00
XFOB Value	cnt: (3)	\$3,588.00
Total Appraised Value		\$54,423.00
Just Value		\$54,423.00
Class Value		\$0.00
Assessed Value		\$54,423.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$54,423 Other: \$54,423 Schl: \$54,423

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
5/13/2008	1150/1200	WD	I	U	01	\$100.00
5/13/2008	1150/1202	WD	I	U	01	\$53,000.00
10/24/2001	938/898	QC	I	U	01	\$13,600.00
1/22/1998	868/2202	CD	V	U	01	\$29,000.00

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1990	AL SIDING (26)	1064	1064	\$9,745.00
	Note: All S.F. calculations are based on <u>exterior</u> building dimensions.					

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0285	SALVAGE	2008	\$300.00	0000001.000	0 x 0 x 0	(000.00)



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, Bernie Thrift, give this authority for the job address show below
Installer License Holder Name

only, _____, 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)
Lori Baker	Lori Baker	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
Larry Baker		<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.

Bernie Thrift License Holders Signature (Notarized) LH 1025155 License Number 7-26-12 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Bernard Thrift, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 26 day of July, 2012.

Rebecca L. Arnan
NOTARY'S SIGNATURE





Columbia County Property Appraiser			
J. Doyle Crews - Lake City, Florida 32055 386-758-1083			
PARCEL: -		NOTES:	
Name:		2011 Certified Values	
Site:		Land	
Mail:		Bldg	
Sales Info	NONE	Assd	
		Exmpt	
		Taxbl	

This information, updated: 6/7/2012, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This 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, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1266-39 CONTRACTOR _____ PHONE _____

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>Larry Baker</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____
MECHANICAL/ A/C <u>N/A</u>	Print Name _____ License #: <u>N/A</u>	Signature <u>[Signature]</u> Phone #: _____
PLUMBING/ GAS	Print Name <u>Larry Baker</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____

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.



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

PERMIT NO. 12-238
DATE PAID: 4/26/12
FEE PAID: 310.50
RECEIPT #: 1846941

APPLICATION FOR:
☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: LARRY & LORI BAKER
AGENT: Robert Ford NFST inc TELEPHONE: 755-6372
MAILING ADDRESS: 580 HW Guendow Rd LC FLA

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: 8 BLOCK: 1 SUBDIVISION: Pine Forest PLATTED: 95
PROPERTY ID #: 31-55-16-03744-408 ZONING: M/H I/M OR EQUIVALENT: [Y] ☒ [N]
PROPERTY SIZE: 10.010 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] ☒ [N] DISTANCE TO SEWER: NA FT
PROPERTY ADDRESS: 314 SW Glade Glen
DIRECTIONS TO PROPERTY: Hwy 42 SOUTH to 240 TR Go to old
Ichtochnu TL Go to Grape TL Go to Cantalope TR Go
to Glade Glen TL Follow to End Take Right Fork

BUILDING INFORMATION		<input checked="" type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL	
Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	m/h	3	14x60 840	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

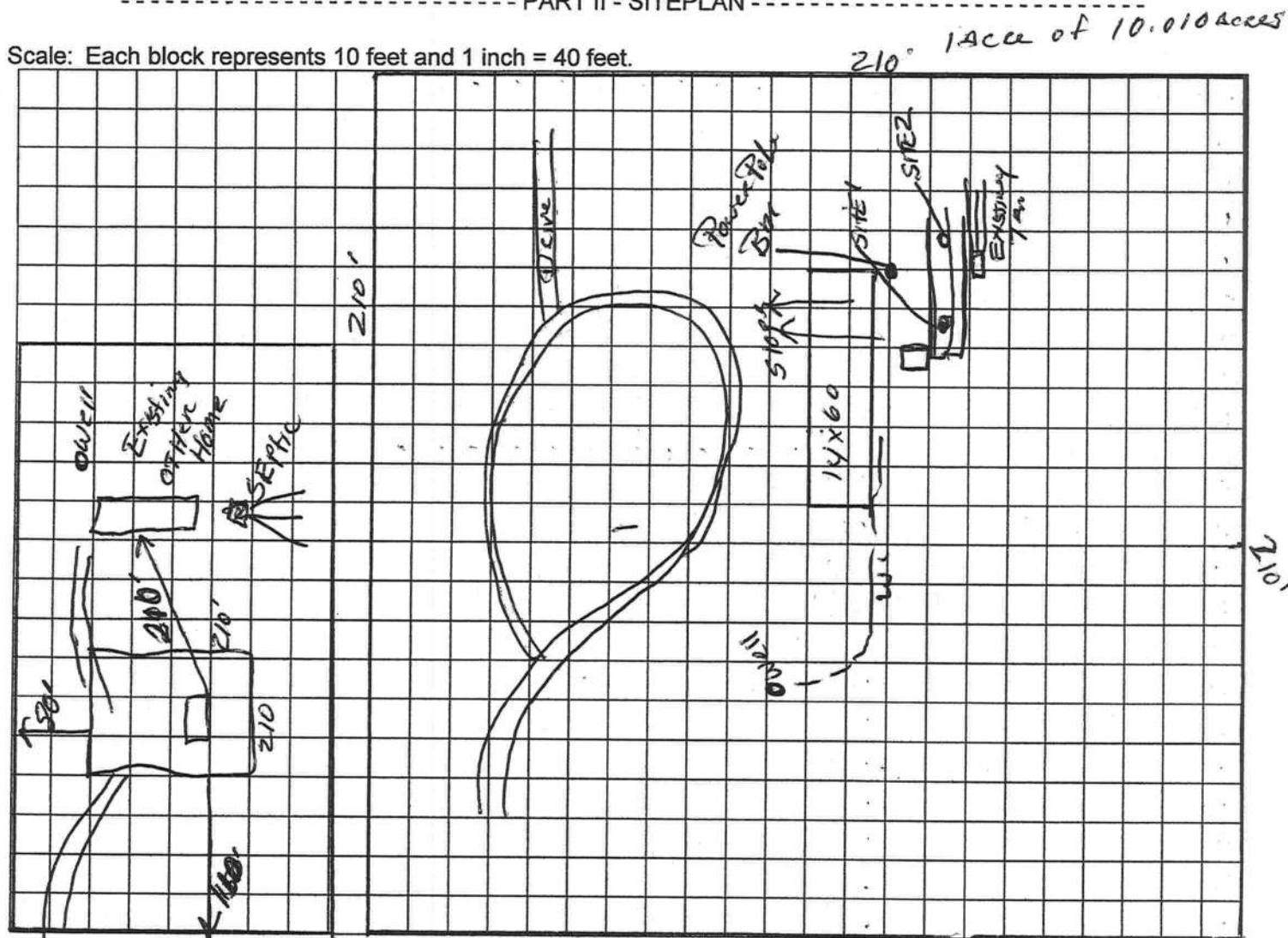
SIGNATURE: Robert W Ford DATE: 4/26/12

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 12-0238

----- PART II - SITEPLAN -----

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



Notes: Glenn Larry & Lori Baker LOT 8 Pine Forest

Site Plan submitted by: Robert W. Ford 4/26/12 Agat
Plan Approved ✓ Not Approved _____ Date 5.3.12
By Sally A. Ford Env Health Director - Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
APPLICATION

Permit No. STUP - 1208-20 Date 8/8/12

Fee 450.00 Receipt No. 4304 Building Permit No. _____

Name of Title Holder(s) Larry & Lori Baker

Address 330 SE APACHE WAY City Lake City FL

Zip Code 32025

Phone (386) 365-5826

NOTE: If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator MUST be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) _____

Address _____ City _____

Zip Code _____

Phone () _____

Paragraph Number Applying for 7

Proposed Temporary Use of Property Mobile Home

Proposed Duration of Temporary Use 5 years

Tax Parcel ID# 31-55-16-03744-408

Size of Property 10.01

Present Land Use Classification Ag-3

Present Zoning District Ag-3

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
6. In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;

- c. Site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building;
- d. Responsibility for non ad-valorem assessments;
- e. Inspection with right of entry onto the property by the County to verify compliance with this section. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section and;
- f. Shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- g. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- h. Requirements upon expiration of permit. Unless extended as herein provided, once a permit expires the mobile home shall be removed from the property within six (6) months of the date of expiration.

The property owner may apply for one or more extensions for up to two (2) years by submitting a new application, appropriate fees and family relationship residence affidavit agreement to be approved by the Land Development Regulations Administrator.

Previously approved temporary use permits would be eligible for extensions as amended in this section.

- 8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
- 9. In agriculture and environmentally sensitive area districts: a single recreational vehicle as described on permit for living, sleeping, or housekeeping purposes for one-hundred eighty (180) consecutive days from date that permit is issued, subject to the following conditions:
 - a. Demonstrate a permanent residence in another location.
 - b. Meet setback requirements.

- c. Shall be hooked up to or have access to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.

Upon expiration of the permit the recreational vehicle shall not remain on property parked or stored and shall be removed from the property for 180 consecutive days.

Temporary RV permits are renewable only after one (1) year from issuance date of any prior temporary permit.

Temporary RV permits existing at the effective date of this amendment may be renewed for one (1) additional temporary permit in compliance with these land development regulations, as amended. Recreational vehicles as permitted in this section are not to include RV parks.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

+ Lori Baker

Applicants Name (Print or Type)

Lori Baker

Applicant Signature

8-8-12

Date

OFFICIAL USE

Approved

X BLK
20 AUG 2012

Denied

Reason for Denial

Conditions (if any)

time to start at Date of Approval final inspection

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 8-8-12 BY LH 1208-26
IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO
OWNERS NAME Larry & Lori Baker PHONE _____ CELL 365-5826
ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION Pine Forest Unrec. Lot 8
DRIVING DIRECTIONS TO MOBILE HOME 441N, past Lassie Black Rd, on (R) Just
past Lassie Black - see home next to DW/MH

MOBILE HOME INSTALLER Bernie Thrift PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE New Moon YEAR 88 SIZE 14 X 60 COLOR White?

SERIAL No. 14602914

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

☒ SMOKE DETECTOR () OPERATIONAL () MISSING ?
☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
☒ DOORS () OPERABLE () DAMAGED
☒ WALLS () SOLID () STRUCTURALLY UNSOUND
☒ WINDOWS () OPERABLE () INOPERABLE
☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
☒ CEILING () SOLID () HOLES () LEAKS APPARENT
☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
☒ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [Signature] ID NUMBER 302 DATE 8/8/12

Call owner when inspection is complete. They need
to get the m/h off current property ASAP. Called 8-9-12 (LH)

Emailed to Ron on 8-8-12 lt



Columbia County 9-1-1 Addressing / GIS Department

P.O. Box 1787, Lake City, FL 32056

Telephone: (386) 758-1125 * Fax: (386) 758-1365 * E-mail: ron_croft@columbiacountyfla.com



9-1-1 Address Request Form

NOTE: ADDRESS ASSIGNMENT MAY REQUIRE UP TO 10 WORKING DAYS. IF THE ADDRESSING DEPARTMENT NEEDS TO CONDUCT ON SITE GPS LOCATION IDENTIFICATION, ADDITIONAL TIME MAY BE REQUIRED.

Date of Request: 8/8/12

Requester Last Name: Baker

First Name: Larry

Contact Telephone Number: (386) 365-5826

(Cell Phone Number if Provided): _____

Requested for Self: ☒ or Requested for Company: _____
(check one)

If Address is Requested by a Company Provide Name of Requesting Company:

Parcel Identification Number: 31 - 58 - 16 - 03744-408

If in Subdivision, Provide Name Of Subdivision:

Pine forest Unrec. lot 8

Phase or Unit Number (if any): _____ Block Number (if any): _____

Lot Number: 8

Attach Site Plan or you may use back of Request Form for Site Plan:

Requirements for Site Plan Are Listed on Back of Request From:

(NOTE: Site Plan Does NOT have to be a survey or to scale; FURTHER a Environmental Health Dept. Site Plan showing only a 210 by 210 cutout of a property will NOT suffice for Addressing Requirements.)

Addressing / GIS Department Use Only:

Date Received: _____ Date Assigned: _____

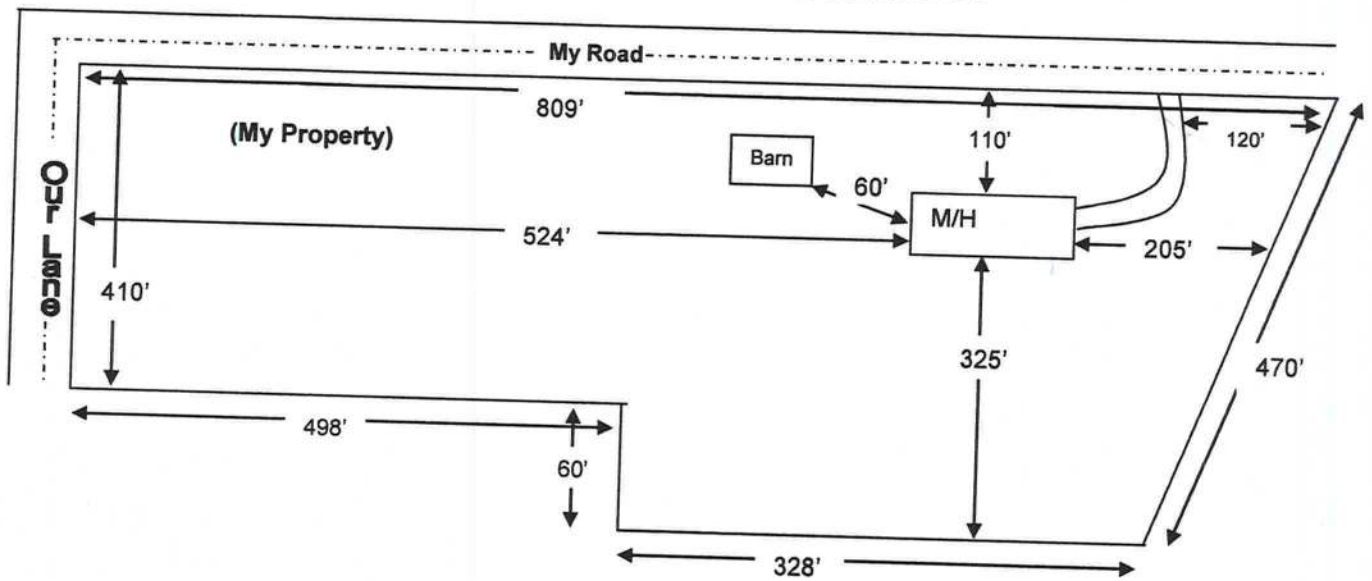
ID Number: _____

Page 1 of 2

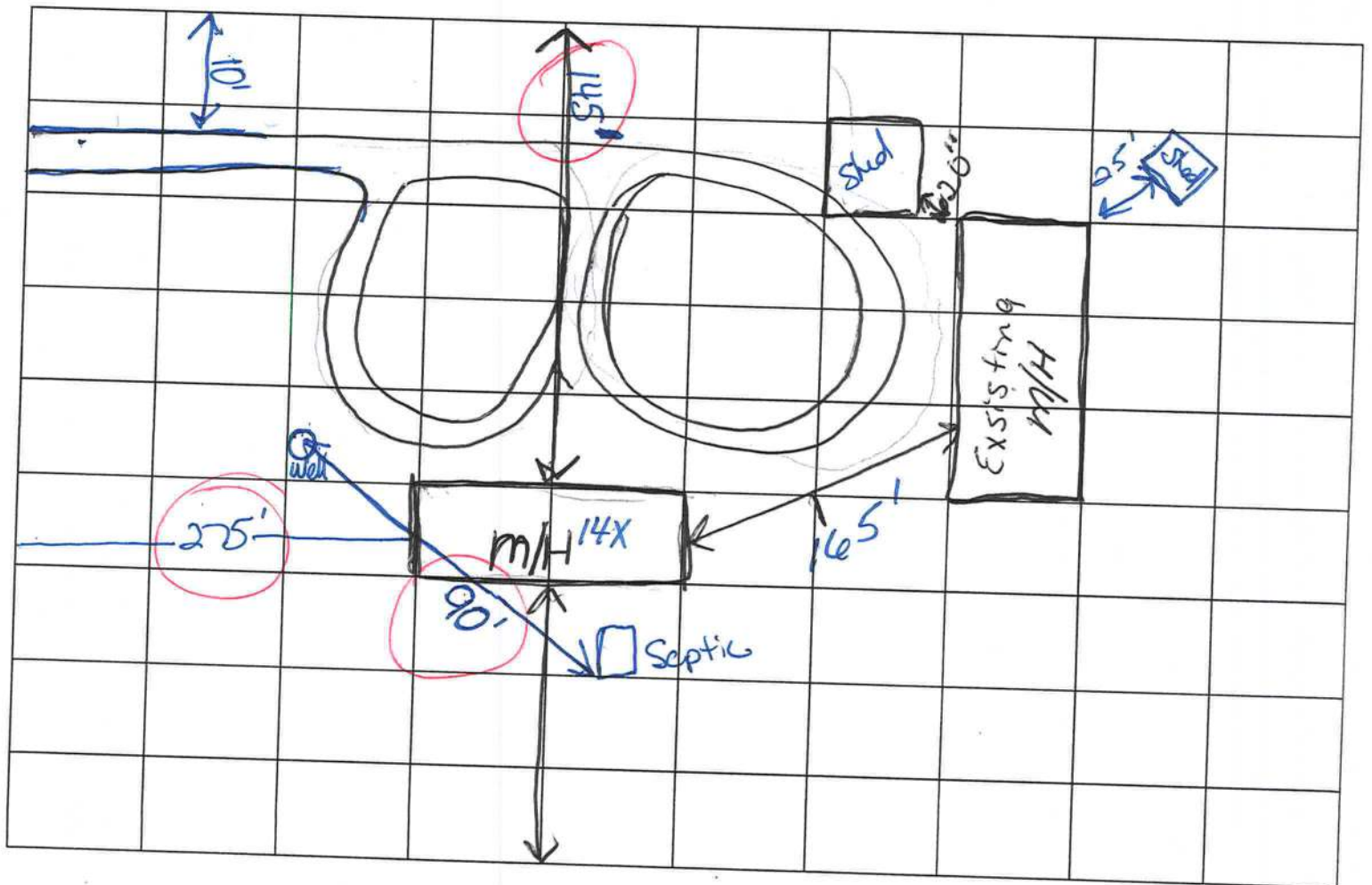
Verify Address:

314 SW Glade Glen, Lake City FL 32024

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



AFFIDAVIT AND AGREEMENT OF SPECIAL
TEMPORARY USE FOR IMMEDIATE
FAMILY MEMBERS FOR
PRIMARY RESIDENCE

STATE OF FLORIDA
COUNTY OF COLUMBIA

Inst: 201212012433 Date: 8/20/2012 Time: 12:47 PM
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1240 P: 471

BEFORE ME the undersigned Notary Public personally appeared.

Larry & Lori Baker, the Owner of the parcel which is being used to place an additional dwelling (mobile home) as a primary residence for a family member of the Owner, and Cody Norris, the Family Member of the Owner, who intends to place a mobile home as the family member's primary residence as a temporarily use. The Family Member is related to the Owner as Son, and both individuals being first duly sworn according to law, depose and say:

1. Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 31-55-16-03744-408.
4. No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for 5 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.
6. This Special Temporary Use Permit on Parcel No. 31-55-16-03744-408 is conditional and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 90 days of the departure of the Family Member or the mobile home is found to be in violation of the Columbia County Land Development Regulations.
7. The site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.

9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.
10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).
13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

① Larry Baker
 ② Lori Baker Lori Baker
 Owner
 ① Larry Baker
 ② Lori Baker
 Typed or Printed Name

Cody Norris
 Family Member
Cody Norris
 Typed or Printed Name

Subscribed and sworn to (or affirmed) before me this 8th day of August, 2012, by Lori Baker + Larry Baker (Owner) who is personally known to me or has produced personally known as identification.

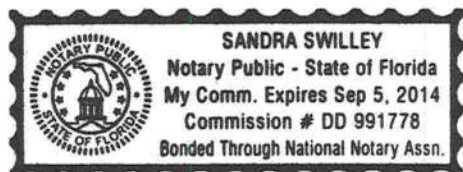
Sandra Swilley
 Notary Public

Subscribed and sworn to (or affirmed) before me this 8th day of August, 2012, by Cody Norris (Family Member) who is personally known to me or has produced personally known as identification.

Sandra Swilley
 Notary Public

COLUMBIA COUNTY, FLORIDA

By: Brian L. Reper
 Name: BRIAN L. REPER
 Title: Land Development Regulation Administrator



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: 8/10/2012 DATE ISSUED: 8/17/2012

ENHANCED 9-1-1 ADDRESS:

318 SW GLADE

GLN

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

31-5S-16-03744-408

Remarks:

ADDRESS FOR PROPOSED STRUCTUE ON PARCEL.

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.**

2334

STUP m/14 1208-20
perm. # 30400

My son Cody Norris would like to move into our mobile home address 318 SW Glade Glen it is a 14x60 1988 mobile home. He decided that he would rather stay in that home instead of our mobile home on the same property address 330 ~~248~~ SW Glade Glen Lake City FL 32024. The final inspection was just done Jan 23, 2013 on the mobile home so he has not been able to live there yet and we have already paid the \$500.00.

Lou Baker