PERMIT Columbia County Building Permit This Permit Must Be Prominently Posted on Premises During Construction 000028323 JOSEPH JOHNSON APPLICANT PHONE 867-2401 ADDRESS 171 SE CLINE FEAGLE RD. LAKE CITY 32025 OWNER JOHN CLOUD/JOSEPH JOHNSON PHONE 867-2401 **ADDRESS** 147 SE CLINE FEAGLE RD 32055 LAKE CITY FL CONTRACTOR MANUEL BRANNAN PHONE 386 590-3289 LOCATION OF PROPERTY 41S, TL ON ALDINE FEAGLE, TR ON CLINE FEAGLE, FIRST ON LEFT ESTIMATED COST OF CONSTRUCTION TYPE DEVELOPMENT MH, UTILITY 0.00 HEATED FLOOR AREA TOTAL AREA HEIGHT **STORIES** FOUNDATION WALLS **ROOF PITCH FLOOR** A-3 LAND USE & ZONING MAX. HEIGHT Minimum Set Back Requirments: STREET-FRONT 30.00 25.00 NO. EX.D.U. FLOOD ZONE DEVELOPMENT PERMIT NO. PARCEL ID SUBDIVISION 13-5S-17-09227-003 .00 PHASE UNIT TOTAL ACRES IH0000868 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor **EXISTING** 10-0005 BK LU & Zoning checked by Septic Tank Number Approved for Issuance New Resident COMMENTS: ONE FOOT ABOVE THE ROAD, MEETS DENSITY REQUIREMENTS(FOR FAMILY MEMBER) CASH Check # or Cash 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 Electrical rough-in Rough-in plumbing above slab and below wood floor date/app. by date/app. by Heat & Air Duct Peri. beam (Lintel) Pool date/app. by date/app. by date/app. by

FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE ____ 375.00 INSPECTORS OFFICE

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

CERTIFICATION FEE \$

date/app. by

date/app. by

0.00

M/H tie downs, blocking, electricity and plumbing

Culvert

Re-roof

SURCHARGE FEE \$

WASTE FEE \$

date/app. by

date/app. by

date/app. by

C.O. Final

date/app. by

Permanent power

Pump pole

Reconnection

date/app. by

date/app. by

date/app. by

BUILDING PERMIT FEE \$

Utility Pole

0.00

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.

Sub-Verification form (Logan)

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION	PERMIT APPLICATION	MANUFACTURED HO	ME INSTALLATION APPLICATION
---	--------------------	-----------------	-----------------------------

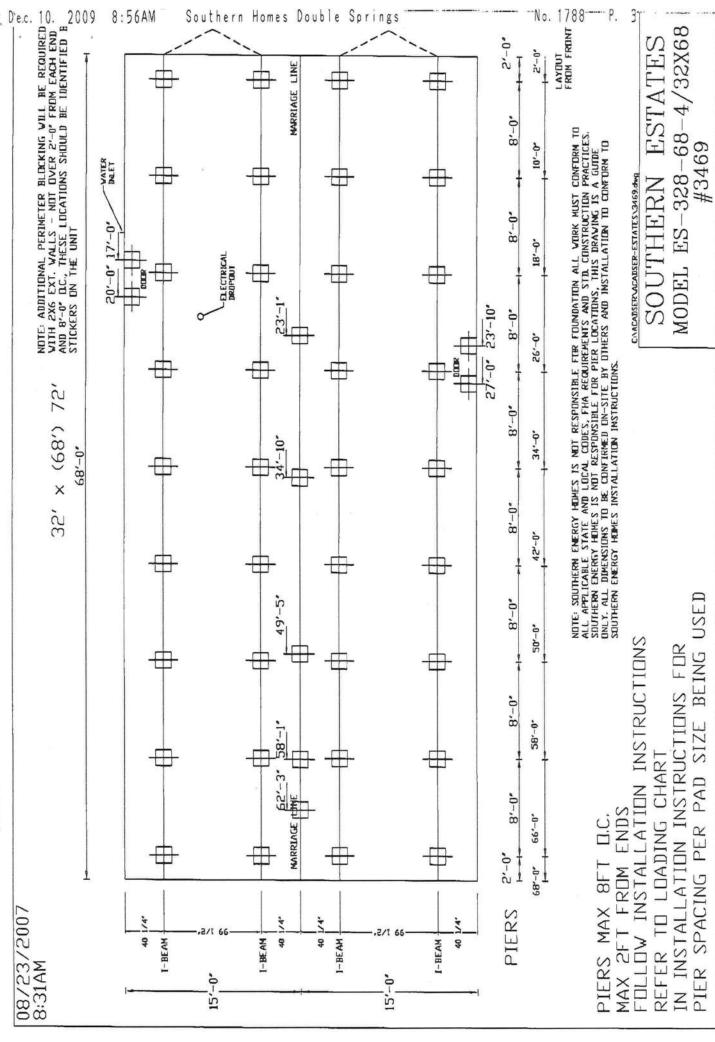
	For Office Use Only (Revised 1-10-08) Zoning Official BLK 28.0.01 Building Official LO 12-23 G
	Flood Zone X Development Permit NA Zoning A-3 Land Use Plan Map Category A-3 Comments Meds Density Requirements Some Sandy member
1.	
1	FEMA Map# Elevation Finished Floor River In Floodway
0	Site Plan with Setbacks Shown EH#EH Release Well letter Existing well
V	Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access
[Parent Parcel # STUP-MH F W Comp. letter
IN	IPACT FEES: EMS Fire Corr Road/Code
	School = TOTALYA Replacing Existing MH M Affidavit
	(No pre Insp Needed
ъ.	W. 13-55-17 00007 003 0
Pr	operty ID # 13-55-17-09227-003 Subdivision N/A
•	New Mobile Home Used Mobile Home MH Size 32xle8 Year 2007 Bee
	Applicant <u>Joseph Johnson</u> Phone # (386) 867-2401
•	Address 17/ SE Cline Feagle Rd (Current) 147 SE Cline Feagle Rd (New
	Name of Property Owner John & Barbara Cloud Phone# (386) 755-0419
•	911 Address 147 St Cline Fengle Pd, Lake City & 32025
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progress Energy
	Name of Owner of Mobile Home Joseph Johnson Phone # (386) 867-240/
	Address _ 147SE Cline Feagle Rd Lake City fl 32025
•	Relationship to Property Owner Son - in - law
	Current Number of Dwellings on Property 3 (Remain 3) (Paid for 3)
	0.1/0
•	Lot Size N/A Total Acreage 15,19
•	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) Or Private Drive or need (Putting in a Culvert)
•	Is this Mobile Home Replacing an Existing Mobile Home Yes
•	Driving Directions to the Property South on 441, Left on Aldine Feagle Rd,
	Right on Cline Feagle, first on left.
-	Name of Licensed Dealer/Installer Manuel Stangan Phone # 386-540-3289
	Installers Address CR 5107 CR 252 wellbarn fla. 32094
•	License Number 0000 868 Installation Decal # 305383
	Called-Spoke to . Toronto Talaran m 12-28-09 1.H

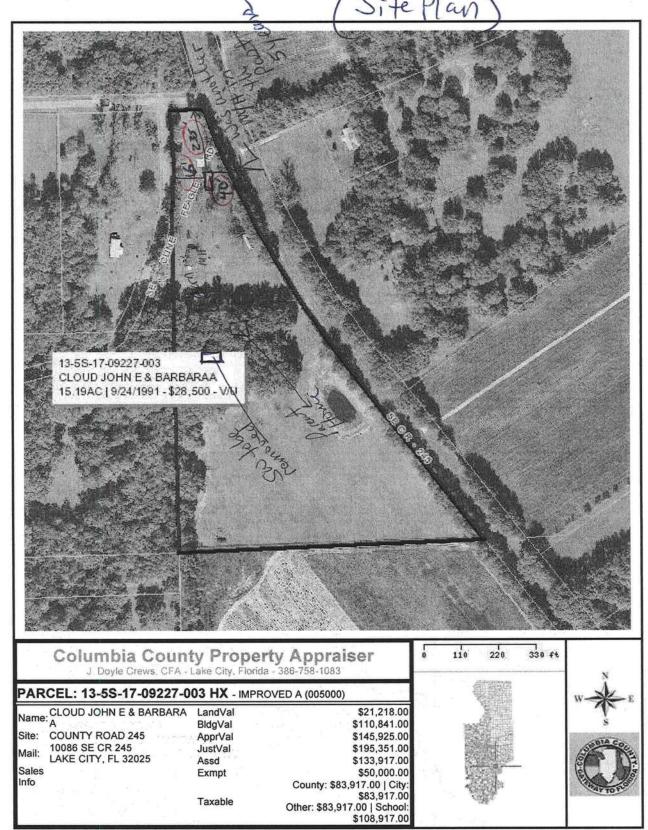
PERMIT NUMBER

Connect all sewer drains to an existing sewer tap or septic tank. Pg.		Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.	Electrical	Date Tested 12-11-09	Installer Name Manuel Installer Name Manuel Manuel	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 anchors are required at all centerline tie points where the torque test	TORQUE PROBE TEST 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.	x 1.5 x 1.5 x 1.5	Using 500 lb. increments, take the lowest reading and round down to that increment.	 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. 	POCKET PENETROMETER TESTING METHOD	× 1.5	The pocket penetrometer tests are rounded down to 1500 psf	POCKET PENETROMETER TEST
manufacturer's installation instructions and or Rule 15C-1 & 2	installer verifies all information given with this permit workshee		Cue	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	lagons	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	Type gasket 100 M1 Installed: Pg Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	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	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.	Type Fastener: Screws Length: 4" Type Fastener: 455 Length: 4" For used homes amin 30 gauge 8" wide ga	Fastening multi wide units Floor: Type Fastener: $\sqrt{a\zeta \zeta}$ Length: $\sqrt{a\zeta}$ Spacing: \sqrt{s}	Debris and organic material removed Other Other	Site Preparation

Installer Signature d on the and or Rule 15C-1 & 2 h this permit worksheet Date 12-04-09

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





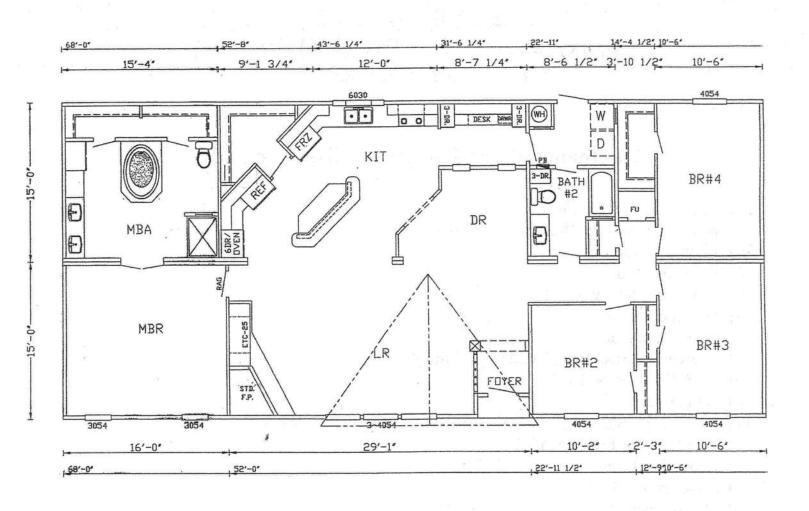
This information, GIS Map Updated: 11/13/2009, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, 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. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Assignment of Authority

I, Manuel Sannan License # 0000868 do hereby
Authorize Joseph Johnson to act on my behalf in all
Aspects of pulling a move on permit.
Sworn and Subscribed before me this 11th day of December,
2009. County of Columbia, State of Florida.
Signature Manuel Brann Date 12-11-09
Notary Commission Expires 8/8/11 Commission Expires 8/8/11 WILLIAM P. CREWS WILLIAM P. CREWS
WILLIAM F. Ot 20246 MY COMMISSION # DD 703246 EXPIRES: August 8, 2011 EXPIRES: August 8, 2011



Southern Estates ES-328 "The Logan" 32 x 68 Approx. 2089 Sq. Ft



ALL PRICES INCLUDE:

DELIVERY & SET UP		
A/C HEAT PUMP 13 SEER		
STANDARD WHITE SKIRTING	Notes:	
TWO SETS OF CODE STEPS		



COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT



P. O. Box 1787, Lake City, FL 32056-1787 Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

A Residential or Other Structure(s) on Parcel Number: 13-5S-17-09227-003

Address Assignment(s): 147 SE CLINE FEAGLE RD, LAKE CITY, FL, 32025

Note: This is a replacement, old home moved off property. New home will be utilizing same access, therefore no change in address number necessary.

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.

AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

This is to certify that I, (We), John Cloud + Barbara Cloud owner of the below described property:
Tax Parcel No. 13-55-17-09227-003
Subdivision (name, lot, block, phase)
Give my permission to Joseph L. Johnson to place a mobile home/travel trailer/single family home (circle one) on the above mentioned property.
I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property.
Owner Cloud Baibaia Chouse
SWORN AND SUBSCRIBED before me this 2 st day of December
ID Personally known to me or produced
Betty J. KNAPP Commission DD 641236 Expires May 14, 2011 Bonded Thru Troy Fain Insurance 800-385-7019

Columbia County Property Appraiser DB Last Updated: 11/13/2009

2009 Tax Year

Tax Record

Property Card

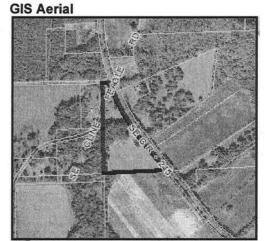
Interactive GIS Map

Parcel: 13-5S-17-09227-003 HX

Owner & Property Info

Owner's Name	CLOUD JOHN E & BARBARA A					
Site Address	COUNTY ROAD 245					
Mailing Address	10086 SE CR 245 LAKE CITY, FL 32025					
Use Desc. (code)	Desc. (code) IMPROVED A (005000)					
Neighborhood	013517.00	Tax District	3			
UD Codes	MKTA02	Market Area	02			
Total Land Area	15.190 ACRES					
Description	BEG SW COR, RUN N 1700.17 FT TO A PT ON W'LY R/W CR-245, RUN SE ALONG R/W 1933.44 FT TO S LINE OF SEC, RUN W 909.81 FT TO POB EX 0.28 AC DESC ORB 764-934. ORB 751-129, 751-267, 751-268, 761-1166, 764-934,					

Search Result: 1 of 1



Property & Assessment Values

Total Appraised Value		\$145,925.00
XFOB Value	cnt: (6)	\$11,628.00
Building Value	cnt: (1)	\$110,841.00
Ag Land Value	cnt: (1)	\$2,238.00
Mkt Land Value	cnt: (6)	\$21,218.00

Just Value	\$195,351.0				
Class Value		\$145,925.00			
Assessed Value	\$133,917.00				
Exemptions	(code: HX) \$50,000.				
Total Taxable Value	County: \$83,917.00 City: \$83,917.00 Other: \$83,917.00 School: \$108,917.00				

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
9/24/1991	751/129	WD	V	U	12	\$28,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1996	Cedar (12)	1943	2885	\$110,841.00
	Note: All S.F. calculation	ns are base	d on <u>exterior</u> l	ouilding dimens	ions.	

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0020	BARN,FR	0	\$5,000.00	0000001.000	40 x 40 x 0	(000.00)
0294	SHED WOOD/	0	\$300.00	0000001.000	0 x 0 x 0	(000.00)
0166	CONC,PAVMT	1996	\$1,428.00	0000952.000	0 x 0 x 0	(000.00)
0190	FPLC PF	1996	\$1,600.00	0000001.000	0 x 0 x 0	(000.00)
0040	BARN,POLE	2005	\$1,500.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000100	SFR (MKT)	0000001.000 AC	1.00/1.00/1.00/1.00	\$4,617.00	\$4,617.00
006200	PASTURE 3 (AG)	0000011.190 AC	1.00/1.00/1.00/1.00	\$200.00	\$2,238.00
009910	MKT.VAL.AG (MKT)	0000011.190 AC	1.00/1.00/1.00/1.00	\$0.00	\$51,664.00
009945	WELL/SEPT (MKT)	0000001.000 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00
000000	VAC RES (MKT)	0000001.000 AC	1.00/1.00/1.00/1.00	\$4,617.00	\$4,617.00
000200	MBL HM (MKT)	0000001.000 AC	1.00/1.00/1.00/1.00	\$4,617.00	\$4,617.00

Columbia County Property Appraiser

DB Last Updated: 11/13/2009

1 of 1

Disclaimer

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Notice:

Under Florida Law, e-mail addresses are public record. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead contact this office by phone or in writing.

Scroll to Top

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Columbia County Tax Collector

Site Provided by... governmax.com T1.14

Tax Record

Print | Account Number

Last Update: 12/22/2009 3:47:21 PM EST

Ad Valorem Taxes and Non-Ad Valorem Assessments

Details

Tax Record

Legal Desc. * Print View

The information contained herein does not constitute a title search and should not be relied on as such.

97.8CT¢	100,0016	23,000	100,001	T. 3000	CHELLIAN COLUMN
2 2	100 000			1 50	CARTMAT OUNT AV
\$565.83	\$105,507	25,000 :	30 130,507	5.3630	LOCAL
\$105.30	\$105,507	25,000 :	130,507	0.9980	DISCRETIONARY
\$635.28	\$80,507	50,000	130,507	7.8910	BOARD OF COUNTY COMMISSIONERS COLUMBIA COUNTY SCHOOL BOARD
Levied	Value		Value	Rate	Taxing Authority
Taxes	Taxable	Exemption 3	Assessed	,	
			Ad Valorem Taxes	Ad	
				64-934,	751-268, 761-1166, 764-934,
-267,		1. ORB 751-12	ESC ORB 764-934	0.28 AC D	909.81 FT TO POB EX 0.28 AC DESC ORB 764-934. ORB 751-129, 751-267,
A PT ON	FT TO P	On) RUN N 1700.17	full descriptions BEG SW COR, I	5.19 Acre	Legal Description (click for full description) 13-5S-17 5000/5000 15.19 Acres BEG SW COR, RUN N 1700.17 FT TO A PT ON
					нх 25000
			003	0	нз 25000
	Escrow Code	Esc	Millage Code	×	Exemption Detail
		Below	See Be		See Below
		Value	Taxable 1		Exempt Amount
		175S13-09227-003	175S13-0		
		ber	GEO Number		LAKE CITY FL 32025
	245 LKC	086 SE COUNTY ROAD 2	086 SE C	RA A	CLOUD JOHN E & BARBARA 10086 SE CR 245
		Property Address	Property		Mailing Address
2009	20	TATE	REAL ESTATE		R09227-003
Tax Year	Tax	/pe	Тах Туре		Account Number

Site Functions

Mailing Address Certificate NEW! Property Address Owner Name GEO Number Account Number

Tax Search

Local Business Tax

Home

County Login Contact Us Tax Sale List Searches

Print Tax Bill NEW! Payment History Tax Payment Appraiser Data

	\$0.00						
	Amount Due	Am	Υ	If Paid By			
	\$2,578.43	10000	Taxes & Assessments	Taxes & P			
	\$903.58	S	Total Assessments	Total A			
	(
R	\$603.00	_			ANNUAL	SOLID WASTE - ANNUAL	GGAR
	\$300.58				NTS	FIRE ASSESSMENTS	FFIR
1	Amount	2			rity	Levying Authority	Code
7 30			ents	n Assessm	Non-Ad Valorem Assessments	No	
	\$1,674.85	35	Total Taxes	Tota	18.3627	Total Millage	[
<u></u>							I
	\$9,98	\$80,507	50,000	130,507	0.1240	COLUMBIA COUNTY INDUSTRIAL	JUMBIA COUN
	\$164.78	\$80,507	50,000	130,507	2.0468	LAKE SHORE HOSPITAL AUTHORITY	CE SHORE HO
	\$35.42	280,507	50,000	130,507	0.4399	SUWANNEE RIVER WATER MGT DIST	ANNEE RIVE

\$2,475.29	2009	3300697.0001	PAYMENT	11/10/2009
Amount Paid	Item	Receipt	Transaction	Date Paid

Prior Years Payment History

NO DELINQUENT TAXES **Prior Year Taxes Due**

Print | << First < Previous Next > Last >>



SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	PHONE
	THE FORM MUST BE SURMITTED PRIOR TO THE ISSUANCE OF	A PERMIT

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	Signature	
	License #:	Phone #:	
MECHANICAL/	Print Name	Signature	
A/C	License #:	Phone #:	
PLUMBING/	Print Name	Signature	
GAS	License #:	Phone #:	
ROOFING	Print Name	Signature	
	License #:	Phone #:	_
SHEET METAL	Print Name	Signature	
	License #:	Phone #:	
FIRE SYSTEM/	Print Name	Signature	-2-2-
SPRINKLER	License#:	Phone #:	
SOLAR	Print Name	Signature	
and the same of th	License #:	Phone #:	

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR	38		
METAL BLDG ERECTOR			

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 Contractor Forms: Subcontractor form: 6/09 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. 947809
DATE PAID:
FEE PAID:
RECEIPT #: 77939

[]	CATION FOR: New System Repair	[] E	xisting Sys bandonment	tem []	Holding Tank Temporary	[]	Innovative MONIFICATION
APPLI	CANT: John Clou	ıd						
AGENT	: ROCKY FORD,	A & B	CONSTRUCT	ION		TEL	EPHONE:	386-497-2311
MAILI	NG ADDRESS: P.C	. BOX	39 FT. WHI	ITE, FL, 3	320:	38		
A PER	SON LICENSED PU	RSUANT T BILITY T	0 489.105(3) 0 PROVIDE DO) (m) OR 489 OCUMENTATIO	.552 N O	2, FLORIDA STATE THE DATE THE	TUTES. LOT WA	S CREATED OR PLATTED
PROPE	RTY INFORMATION							
LOT:	na BLOCK:	na	sub: na				E	PLATTED:
PROPE	RTY ID #: 13-58	5-17-09	227-003	ZONIN	G: _	Bes. I/M OR	EQUIV	ALENT: [Y/N]
PROPE	RTY SIZE: 15.1	ACRES	WATER SUPP	LY: [X] PR	IVA'	TE PUBLIC []	<=2000	GPD []>2000GPD
IS SET	WER AVAILABLE AS	S PER 38	1.0065, FS?	[Y /N)]		DISTAN	CE TO	SEWER:FT
PROPE	RTY ADDRESS: 14	7 SE C	line Feagl	e Road, I	ake	city, FL,	32025	
DIREC'	TIONS TO PROPER	ry: 441	South, TI	on CR 24	10,	TR (just be	fore (CR 245) on
Cline	e Feagle Road	, 1 st d	rive on le	eft				
10-								
BUILD	ING INFORMATION	3	[X] RESI	DENTIAL		[] COMMERCIA	AL	
	Type of							1 System Design
No_	Establishment		Bedrooms	Area Sqit	Tal	ole 1, Chapter	64E-6,	FAC
1 2	DW Mobile H	ome	4	2089				
3			**************************************				···	
-			_		_		W	
ι <i>γ</i> 1	Floor/Equipment	t p rains	[Do oth	er (Specif	y) _			
STGNA	Va	-la 1) /			1	DATE: 1	/6/2010

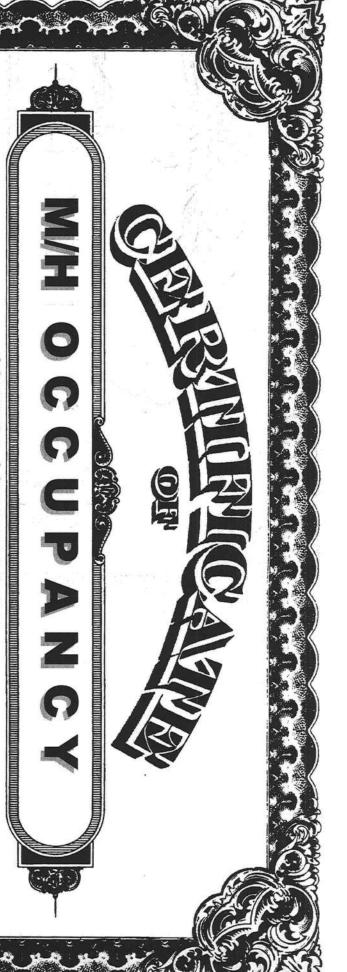
DH 4015, 10/97 (Previous Editions May Be Used)



DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number 10 0

Scale: Each block represents 5 fe		SITE PLAN-———		+
		2.10		
15.19 ACS 19097	210' 5		85 80 00 9 5	To the state of th
		Vater 3 and to		
Notes:		Well		
Site Plan submitted by:	Signature]		Agent Title
Plan Approved By V V V V V V V V V V V V V	Not Appro	Columbi	VA Cour	Date 1809 nty Health Departme
OH 4015, 10/96 (Replaces HRS-H Form 4015 which may b Stock Number: 5744-002-4015-6)	S MUST BE APPROVED B	Y THE COUNTY H	EALTH DEPART	Page 2 o



COLUMBIA COUNTY, FLORIDA

epartment 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 13-5S-17-09227-003

Building permit No. 000028323

Permit Holder MANUEL BRANNAN

Owner of Building JOHN CLOUD/JOSEPH JOHNSON

Location: 147 SE CLINE FEAGLE RD., LAKE CITY, FI

Date: 02/24/2010

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)