DATE 12/22/2008

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027535

APPLICANT CONNIE OATES PHONE 719-8975

ADDRESS 1417 NW CANSA RD LAKE CITY FL 32055

OWNER MICHAEL & KATLYN BOYLE PHONE 719-8975

ADDRESS 1463 NW CANSA RD LAKE CITY FL 32055

CONTRACTOR TERRY THRIFT PHONE 623-0115

LOCATION OF PROPERTY 441 N, TL ON SPRADLEY RD, TL ON CANSA, 3RD DRIVE ON LEFT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES ____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING A-3 MAX. HEIGHT _____

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

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 31-1S-17-04611-002 SUBDIVISION _____

LOT ____ BLOCK ____ PHASE ____ UNIT ____ TOTAL ACRES 10.00

		IH0000036	Connie Oates	
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
EXISTING	08-772	CS	WR	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 407

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ date/app. by

Foundation _____ date/app. by

Monolithic _____ date/app. by

Under slab rough-in plumbing _____ date/app. by

Slab _____ date/app. by

Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by

Rough-in plumbing above slab and below wood floor _____ date/app. by

Electrical rough-in _____ date/app. by

Heat & Air Duct _____ date/app. by

Peri. beam (Lintel) _____ date/app. by

Permanent power _____ date/app. by

C.O. Final _____ date/app. by

Culvert _____ date/app. by

M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Pool _____ date/app. by

Reconnection _____ date/app. by

Pump pole _____ date/app. by

Utility Pole _____ date/app. by

M/H Pole _____ date/app. by

Travel Trailer _____ date/app. by

Re-roof _____ date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 300.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 122.20 WASTE FEE $ 167.50

FLOOD DEVELOPMENT FEE $ ____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ ____ **TOTAL FEE** 664.70

INSPECTORS OFFICE _____ 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 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

For Office Use Only (Revised 1-10-08) Zoning Official cfp 12/17/08 Building Official (WW) 12/16/08

AP# 0812-26 Date Received 12-15-08 By CT Permit # 27535

Flood Zone X Development Permit — Zoning A-3 Land Use Plan Map Category A-3

Comments

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☐ Site Plan with Setbacks Shown ☑ EH # _____ ☐ EH Release ☑ Well letter ☐ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter

IMPACT FEES: EMS 29.88 Fire 78.68 Corr 442.89 Road/Code 1046.00/210

School 1500.00 = TOTAL 3097.45

Property ID # 31-1S-17-04611-002 Subdivision _____

- New Mobile Home _____ Used Mobile Home ✓ MH Size 28x56 Year 99
- Applicant Connie Oates Phone # 386-719-8975
- Address Mailing Address 1417 NW Cansa Rd. Lake City FL 32055
- Name of Property Owner Jimmy Walker Phone# 1-561-333-5726
- 911 Address 1463 NW Cansa Rd Lake City FL 32055
- Circle the correct power company - (Circle One) - FL Power & Light - Clay Electric - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Michael & Katlyn Boyle Phone # 719-8975
  Address 1417 NW Cansa Rd Lake City FL 32055
- Relationship to Property Owner Katlyn Boyle & Jimmy Walker (Brother & Sister)
- Current Number of Dwellings on Property None
- Lot Size _____ Total Acreage 10 Acres
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO (Owes)
- Driving Directions to the Property 441 N. Eight miles past I-10 you will see Miltons Country Store. Next Left (Spradly Rd) to End Left on Cansa to Drive Way before 1417 NW Cansa Rd. 5th drive on left.
- Name of Licensed Dealer/Installer Terry L. Thrift Phone # (386) 623-0115
- Installers Address 448 NW Nye Hunter Dr Lake City Fla. 32055
- License Number IH-0000036 Installation Decal # 298972

Spoke to Kaitlyn 12/17/08

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # _____
DATE PAID _____
FEE PAID $ _____
RECEIPT # _____
CR # 03-1864

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Temporary/Experimental System
[ ] Repair [ ] Abandonment [ ] Other(Specify) _____

APPLICANT: DOUGLAS OATES TELEPHONE: 386-752-3331

AGENT: ~~NORTON~~ CONSTRUCTION

MAILING ADDRESS: 3367 S US HIGHWAY 441 CITY: LAKE CITY STATE: FL ZIP: 32025

==========

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

==========

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: _____ BLOCK: _____ SUBDIVISION: MEETS & BOUNDS DATESUBD: _____

PROPERTY ID #: PART OF 31-1S-17-04611-003 [Section/Township/Range/Parcel] ZONING: _____

PROPERTY SIZE: ~~2.00~~ ACRES [Sqft/43560] PROPERTY WATER SUPPLY: [X] PRIVATE [ ] PUBLIC

PROPERTY STREET ADDRESS: COW CATCHER ROAD

DIRECTIONS TO PROPERTY: HIGHW 441 NORTH, TL ON HAMP FARMER ROAD, STRAIGHT ON COW CATCHER TO STOP, SITE ON LEFT

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	HOUSE mobile Home	3	1700	4	
2					
3					
4					

[N] Garbage Grinders/Disposals
[N] Ultra-low Volume Flush Toilets
[N] Spas/Hot Tubs
[N] Other (Specify) _____
[N] Floor/Equipment Drains

APPLICANT'S SIGNATURE: _____ DATE: _____

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer Terry L. Thrift License # IH-0000036

Address of home being installed _____

Manufacturer Fleetwood Length x width 56' x 28'

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 TLT

New Home ☐ Used Home ☑

Home installed to the Manufacturer's Installation Manual ☐

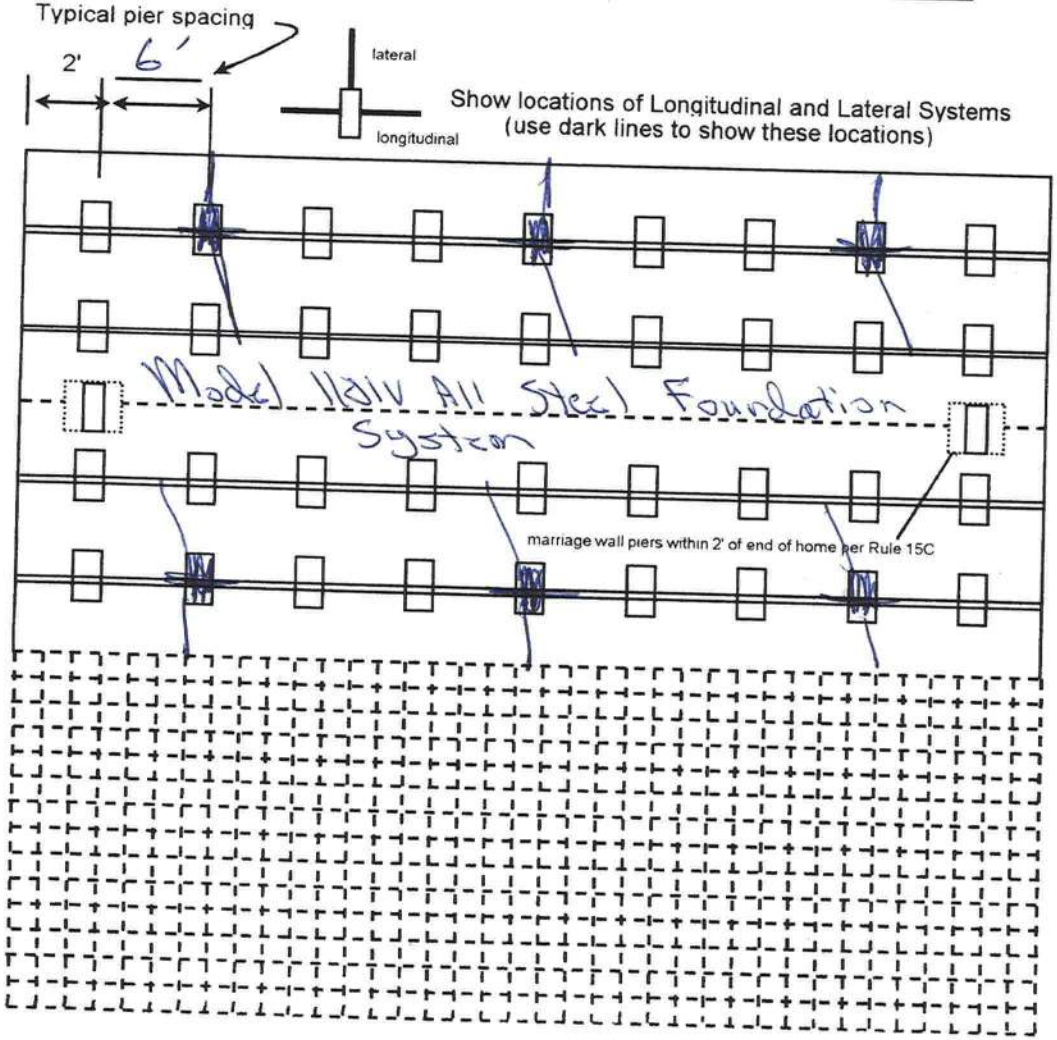
Home is installed in accordance with Rule 15-C ☑

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

Double wide ☑ Installation Decal # 298972

Triple/Quad ☐ Serial # _____

Typical pier spacing



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (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 17" x 25"

Perimeter pier pad size _____

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
10'	17" x 25"

POPULAR PAD SIZES

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

ANCHORS

(4 ft) 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver Tech

OTHER TIES

	Number
Sidewall	28
Longitudinal	6
Marriage wall	
Shearwall	

PERMIT WORKSHEET

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

x 1500 / 285 x 1600 / 290 x 1500 / 285

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 1500 / 285 x 1600 / 290 x 1500 / 285

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 4 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.

JLT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Terry L. Thrift

Date Tested 12/17/08

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.

Plumbing

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

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

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor:	Type Fastener: Lags	Length: 6"	Spacing: 24" o.c.
Walls:	Type Fastener: staples	Length: 10"	Spacing: 32" o.c.
Roof:	Type Fastener: Metal Fasteners	Length: 10"	Spacing: 56"

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, meldew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Type gasket Foam Tape Pg.

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

Weatherproofing

The bottomboard will be repaired and/or taped Yes Pg.
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

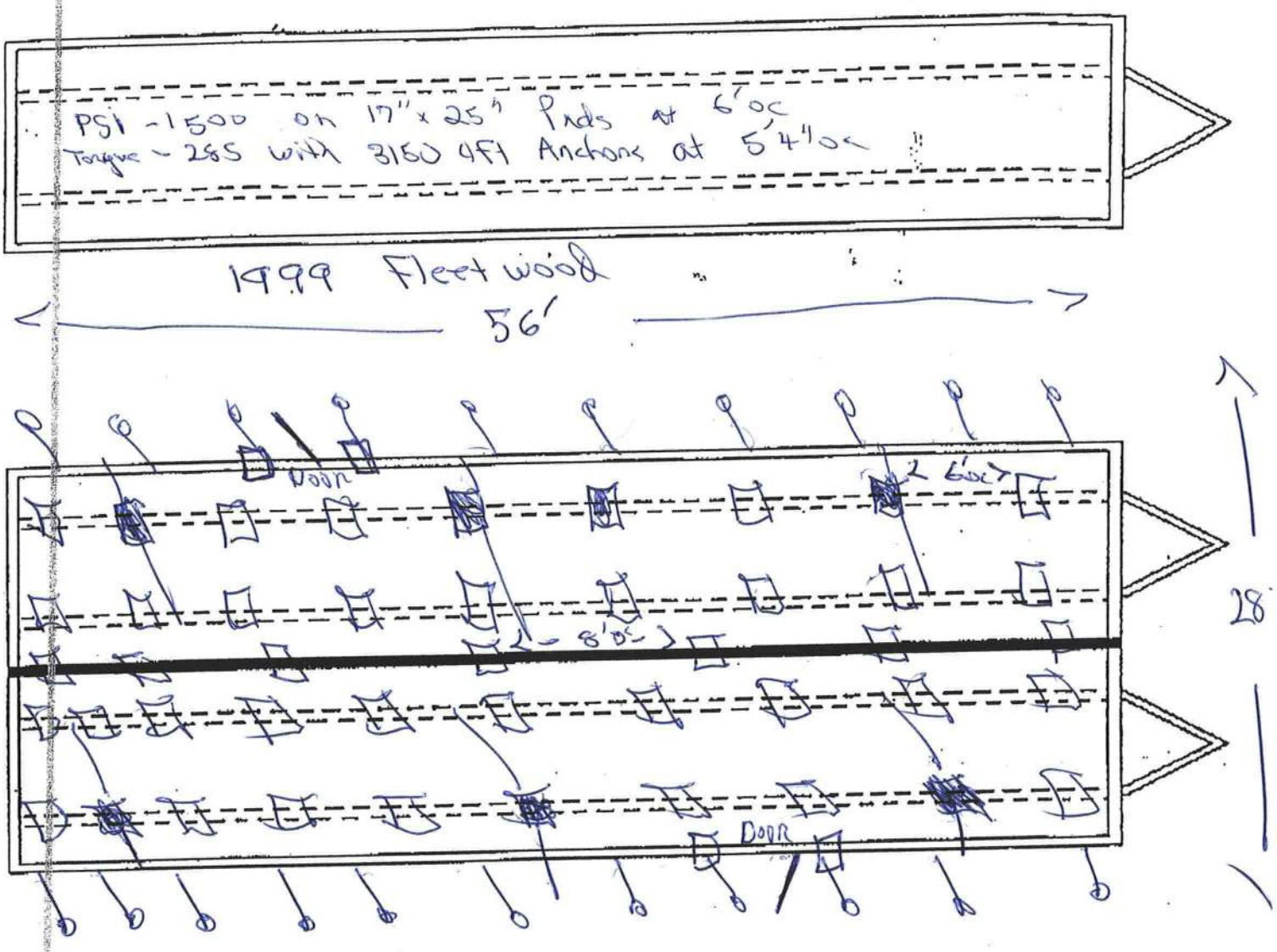
Skirting to be installed Yes No
Dryer vent installed outside of skirting. Yes N/A
Range downflow vent installed outside of skirting. Yes N/A
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other :

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

Installer Signature Terry L. Thrift **Date** 12/17/08

Applicant shall provide layout from manufacturer specific to the model installed. This form may be used if the layout from the manufacturer is not available.

SINGLE WIDE MOBILE HOME



DOUBLE WIDE MOBILE HOME

ANCHOR

Model 1610V All Steel Foundation System

PIER

Show each pier and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.

LETTER OF AUTHORIZATION TO PULL PERMITS

I, Terry L. Thrift, DO HEREBY GRANT

Connie Oates, AUTHORIZATION TO PULL TE

NECESSARY PERMITS REQUIRED FOR THE DELIVERY AND SET OF A

MANUFACTURED HOME IN Columbia COUNTY, FLORIDA.

Terry L Thrift

SIGNATURE

THIS FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS

4 DAY OF December, 2008.

BY Terry L. Thrift, WHO IS PERSONALLY KNOWN TO ME.

STATE OF FLORIDA
COUNTY OF Columbia

REBECCA L. ARNAU
MY COMMISSION # DD 678592
EXPIRES: September 25, 2011
Bonded Thru Notary Public Underwriters

Rebecca L. Arnau
NOTARY PUBLIC

(STAMP)

AFFIDAVIT

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

Customer's Name:_____

Property ID: Sec:_____ Twp:_____ Rge:_____ Tax Parcel No:_____

Lot:_____ Block:_____ Subdivision:_____

Mobile Home Year/Make: 99 Fleetwood Size: 28' x 56'

Terry L. Thrift
Signature of Mobile Home Installer

Sworn to and subscribed before me this 4 day of December, 2008 by Terry L. Thrift.

_____
Notary's name printed/typed

REBECCA L. ARNAU
MY COMMISSION # DD 678592
EXPIRES: September 25, 2011
Bonded Thru Notary Public Underwriters

Rebecca L. Arnau
Notary Public, State of Florida
Commission No._____
Personally Known: ✓
Produced ID (type)_____

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF COLUMBIA

This is to certify that I, (We), Plantation @ Deep Creek LLC. Jimmy Walker owner of the below described property:

Tax Parcel No. 31-1S-17-~~00~~04611-002

Subdivision (name, lot, block, phase) _____

Give my permission to Kaitlyn Boyles 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.

Jimmy Walker
Owner

_____
Owner

SWORN AND SUBSCRIBED before me this 10th day of December, 2006. This (these) person(s) are personally known to me or produced ID _____.

Notary Signature

MARESA BROOKE-TALALAY
Notary Public - State of Florida
My Commission Expires Jul 31, 2010
Commission # DD 579797
Bonded By National Notary Assn.

RONNIE BRANNON, CFC
COLUMBIA COUNTY TAX COLLECTOR

REAL ESTATE 2008 119350.0000

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

ACCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R04611-002		47,500	0	47,500	003

B 1956 12-14 6X9 **99999**SINGLE-PIECE

PLANTATION AT DEEP CREEK LLC
4801 DYER BLVD
WEST PALM BEACH FL 33407

31-1S-17 9900/9900 10 acres
AKA PARCEL A: COMM AT SW COR &
RUN W ALONG S LINE OF SEC
197.42 FT TO SE R/W OF CANSA
RD TO PT ON CURVE, THENCE RUN
See Tax Roll for extra legal.

AD VALOREM TAXES

TAXING AUTHORITY		MILLAGE RATE (Dollars per $1,000 of taxable value)		TAXES LEVIED
C001	BOARD OF COUNTY COMMISSIONERS	7.8910	47,500	374.82
S002	COLUMBIA COUNTY SCHOOL BOARD			
	DISCRETIONARY	0.7480	47,500	35.53
	LOCAL	5.2220	47,500	248.05
	CAPITAL OUTLAY	1.7500	47,500	83.13
W SR	SUWANNEE RIVER WATER MGT DIST	0.4399	47,500	20.90
HLSH	LAKE SHORE HOSPITAL AUTHORITY	2.0160	47,500	95.76
IIDA	COLUMBIA COUNTY INDUSTRIAL	0.1240	47,500	5.89
	TOTAL MILLAGE	18.1909	AD VALOREM TAXES	864.08

NON-AD VALOREM ASSESSMENTS

LEVYING AUTHORITY		RATE	AMOUNT
FFIR	FIRE ASSESSMENTS	Per Parcel	69.58
	NON- AD VALOREM ASSESSMENTS		69.58

FOR INFORMATION OR TO PAY WITH CREDIT/DEBIT CARD VISIT www.columbiataxcollector.com (CONVENIENCE FEE APPLIES)

COMBINED TAXES AND ASSESSMENTS | PAY ONLY ONE AMOUNT **933.66** SEE REVERSE SIDE FOR IMPORTANT INFORMATION

If Paid By	Nov 30, 2008	Dec 31, 2008	Jan 31, 2009	Feb 28, 2009	Mar 31, 2009
Please Pay	896.31	905.65	914.99	924.32	933.66

RETAIN THIS PORTION AS YOUR RECEIPT OR MAIL A SELF-ADDRESSED STAMPED ENVELOPE FOR RETURN OF VALIDATED RECEIPT.
AFTER MARCH 31ST, TAXES BECOME DELINQUENT ADDITIONAL PENALTIES AND FEES WILL APPLY.

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: 12/11/2008 **DATE ISSUED:** 12/11/2008

ENHANCED 9-1-1 ADDRESS:

1463 NW CANSA RD

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

31-1S-17-04611-002

Remarks:

AKA PARCEL A

Address Issued By: _____

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.

1339

HALL'S PUMP & WELL SERVICE, INC.

SPECIALIZING IN 4"-6" WELLS

DONALD AND MARY HALL
OWNERS

PHONE (386) 752-1854
FAX (386) 755-7022
904 NW MAIN BLVD.
LAKE CITY, FLORIDA 32055

Date: March, 18, 2008
To: Milton Builders
Re: Anthony Casentino

Notice To All Contractors:

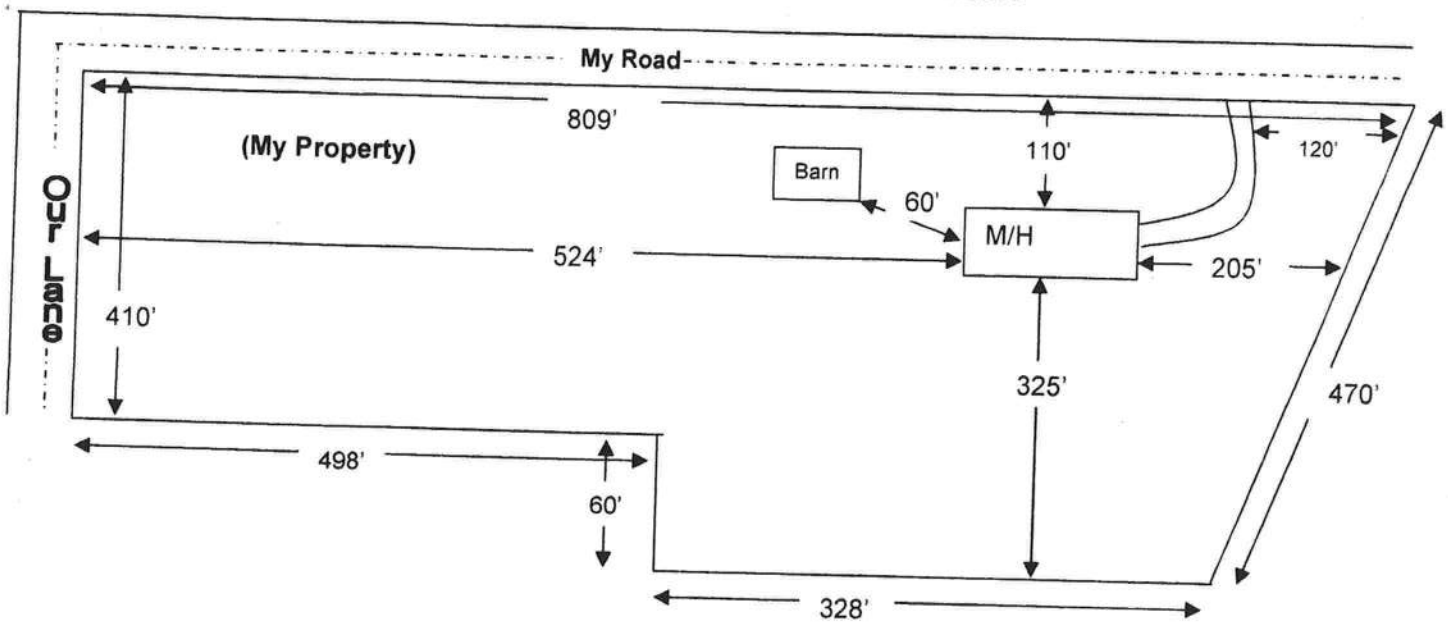
Please be advised that due to the new building codes we will use a large capacity diaphragm tank on all new wells. This will insure a minimum of one (1) minute draw down or one (1) minute refill. If a smaller diaphragm tank is used then we will install a cycle stop valve which will produce the same results. All wells will have a pump & tank combination that will be sufficient enough for each situation.

If you have any questions please feel free to call our office.

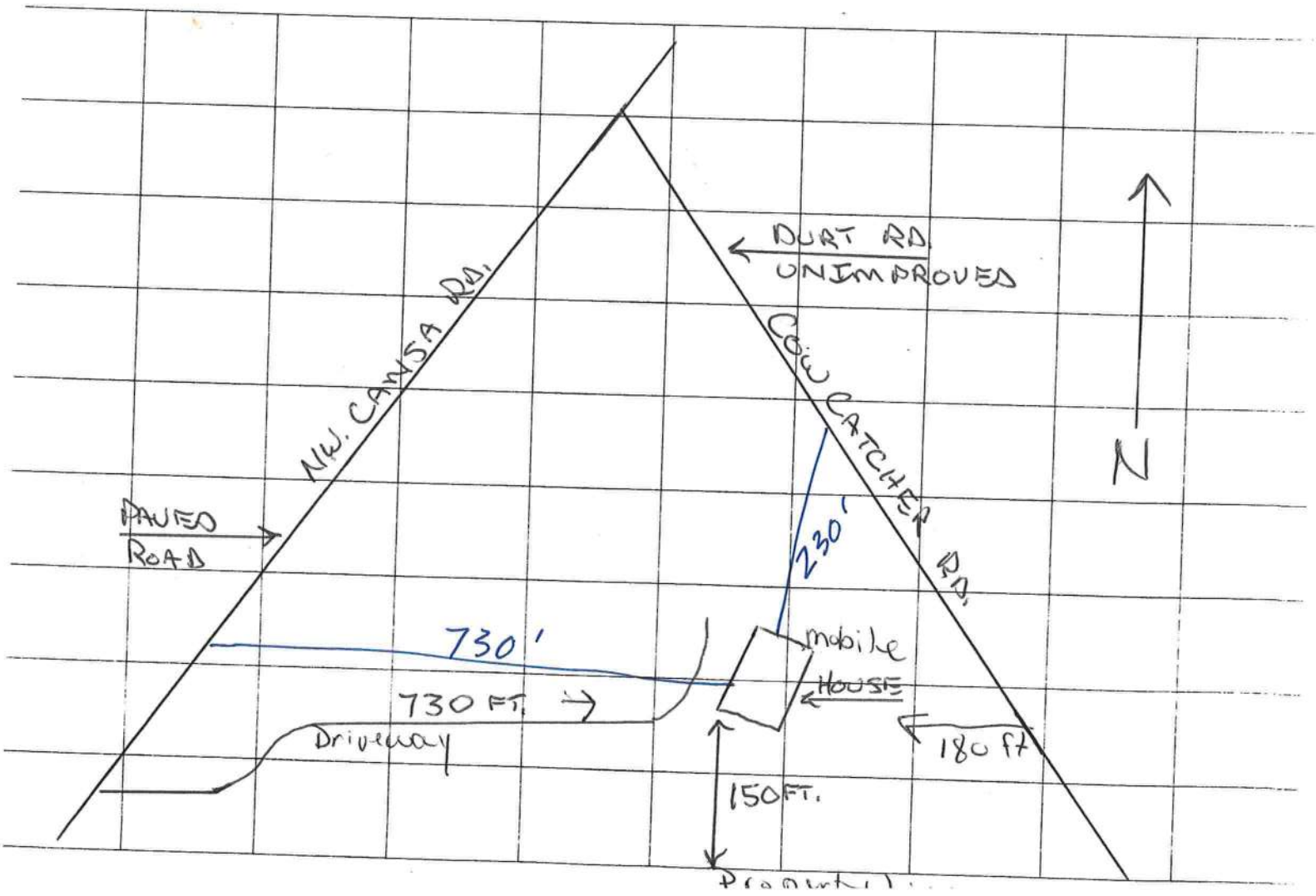
Thank You ,

Donald D. Hall

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. <u>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.</u>



MH is open

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12/15/08 BY G IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME Jimmy Walker / Kaitlyn Boggs PHONE _____ CELL _____

ADDRESS 5327 SW CR 240, L.C.

MOBILE HOME PARK N/A SUBDIVISION N/A

DRIVING DIRECTIONS TO MOBILE HOME 475, TL CR 240, first red brick home on left, next drive road with fence on both sides

MOBILE HOME INSTALLER Terry Thrift PHONE 623-0115 CELL _____

MOBILE HOME INFORMATION

MAKE Stone Creek YEAR 1999 SIZE 56 x 26 COLOR Tan/brown

SERIAL No. FL FLW70A26475SKZL A+B

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

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

EXTERIOR:

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

STATUS

APPROVED P WITH CONDITIONS: _____

NOT APPROVED ___ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER 402 DATE 12-16-08

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Limited Liability Company

PLANTATION AT DEEP CREEK LLC

Filing Information

Document Number	L03000023565
FEI Number	200105850
Date Filed	06/27/2003
State	FL
Status	ACTIVE

Principal Address

4801 DYER BLVD.
WEST PALM BEACH FL 33407

Mailing Address

4801 DYER BLVD.
WEST PALM BEACH FL 33407

Registered Agent Name & Address

ARMOUR, ALAN I II
1645 PALM BEACH LAKES BLVD., SUITE 1200
WEST PALM BEACH FL 33401 US

Manager/Member Detail

Name & Address

Title MGRM

WALKER, JIMMY
4801 DYER BLVD
WEST PALM BEACH FL 33407

Annual Reports

Report Year	Filed Date
2006	04/25/2006
2007	03/05/2007
2008	04/30/2008

Document Images

04/30/2008 -- ANNUAL REPORT	View image in PDF format
03/05/2007 -- ANNUAL REPORT	View image in PDF format
04/25/2006 -- ANNUAL REPORT	View image in PDF format

08-0172

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # 905086
DATE PAID 12/10/08
FEE PAID $ 310.00
RECEIPT # 1085635
CR # 03-1864

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Temporary/Experimental System
[ ] Repair [ ] Abandonment [ ] Other(Specify)

APPLICANT: ~~DOUGLAS OATES~~ Plantation @ Deep Creek III TELEPHONE: 386-752-3331

AGENT: ~~NORTON~~ CONSTRUCTION

MAILING ADDRESS: 3367 S US HIGHWAY 441 CITY: LAKE CITY STATE: FL ZIP: 32025

==========

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

==========

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: _____ BLOCK: _____ SUBDIVISION: MEETS & BOUNDS DATESUBD: _____

PROPERTY ID #: PART OF 31-1S-17-04611-003 [Section/Township/Range/Parcel] ZONING: _____

PROPERTY SIZE: ~~2.00~~ 3.57 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: [X] PRIVATE [ ] PUBLIC

PROPERTY STREET ADDRESS: COW CATCHER ROAD

DIRECTIONS TO PROPERTY: HIGHW 441 NORTH, TL ON HAMP FARMER ROAD, STRAIGHT ON COW CATCHER TO STOP, SITE ON LEFT

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	HOUSE mobile Home	3	~~1700~~ 1568	4	
2					
3					
4					

[N] Garbage Grinders/Disposals [N] Spas/Hot Tubs [N] Floor/Equipment Drains
[N] Ultra-low Volume Flush Toilets [N] Other (Specify)

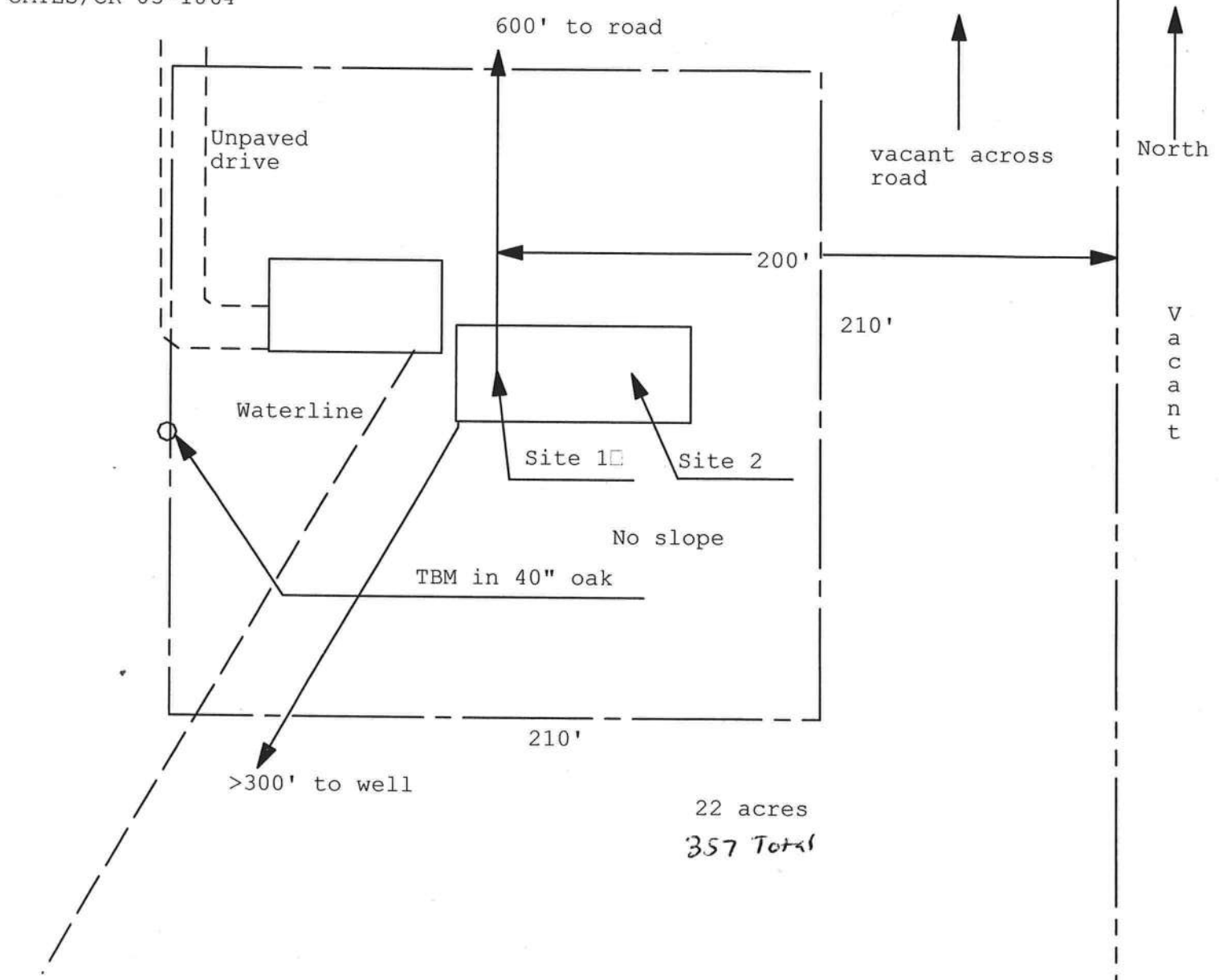
APPLICANT'S SIGNATURE: _____ DATE: 12-16-08

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 08-0772

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

OATES/CR 03-1864



Site Plan Submitted By Paul Lloyd **Date** 12/2/08

Plan Approved ✓ **Not Approved** ____ **Date** 12-15-08

By _____ **CPHU**

Notes: See attached for location on entire parcel