

DATE 07/17/2007

# Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000026028

APPLICANT TREEA FOSTER PHONE 386.362.4948  
 ADDRESS 10314 US HWY 90-E LIVE OAK FL 32060  
 OWNER CLARENCE STALNAKER PHONE 352.538.0875  
 ADDRESS 198 SW DREAMER GLN FT. WHITE FL 32038  
 CONTRACTOR JERRY CORBETT PHONE 386.362.4948

LOCATION OF PROPERTY 47-S TO C-138, TL TO LYN SHERMAN, TR TO DREAMER, TL AND IT'S THE 2ND LOT ON L.

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 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 25-7S-16-04321-056 SUBDIVISION RUM ISLAND RANCHES UNREC. PART/TRACT

LOT 31 BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 5.00

\_\_\_\_\_ IH0000790 \_\_\_\_\_ Treea Foster  
 Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor  
 EXISTING \_\_\_\_\_ 07-0514-E \_\_\_\_\_ CFS \_\_\_\_\_ JTH \_\_\_\_\_ N  
 Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident

COMMENTS: 1 FOOT ABOVE ROAD. 14.9 FAMILY LOT PERMIT.

Check # or Cash 1153

## 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 \_\_\_\_\_ Rough-in plumbing above slab and below wood floor \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Electrical rough-in \_\_\_\_\_ Heat & Air Duct \_\_\_\_\_ Peri. beam (Lintel) \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Permanent power \_\_\_\_\_ C.O. Final \_\_\_\_\_ Culvert \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_ Pool \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Reconnection \_\_\_\_\_ Pump pole \_\_\_\_\_ Utility Pole \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

M/H Pole \_\_\_\_\_ Travel Trailer \_\_\_\_\_ 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 \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 16.74 WASTE FEE \$ 50.25

FLOOD DEVELOPMENT FEE \$ \_\_\_\_\_ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ \_\_\_\_\_ **TOTAL FEE** 341.99

INSPECTORS OFFICE \_\_\_\_\_ CLERKS OFFICE \_\_\_\_\_

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."

### This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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 9-22-06) Zoning Official ofc 7/3/07 Building Official OK JTH 62507  
 AP# 0706-79 Date Received 6/22 By JW Permit # 26028  
 Flood Zone X Development Permit \_\_\_\_\_ Zoning A-3 Land Use Plan Map Category A-3  
 Comments panel 270  
14.9 family lot permit  
 FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_  
 Site Plan with Setbacks Shown  EH Signed Site Plan  EH Release  Well letter  Existing well  
 Copy of Recorded Deed or Affidavit from land owner  Letter of Authorization from installer  
 State Road Access  Parent Parcel # 25-75-16-04321-013  STUP-MH \_\_\_\_\_

Property ID # 04321-056-25-75-16 Subdivision UNREC; RIVER ISLAND LANCHES TRACT 31

▪ New Mobile Home \_\_\_\_\_ Used Mobile Home River Birch Year 2004  
 ▪ Applicant TREBA FOSTER Phone # 386-362-4948  
 ▪ Address 10314 US HWY 90E, LIVE OAK FL 32060

▪ Name of Property Owner CLARENCE STANWELL Phone # 352-538-0875  
 911 Address 198 SW DREAMER GLN, H. White, FL 32038

▪ Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home SAME Phone # 352-538-0875  
 Address \_\_\_\_\_

▪ Relationship to Property Owner SAME

▪ Current Number of Dwellings on Property NONE

▪ Lot Size \_\_\_\_\_ Total Acreage 5

▪ Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home YES

▪ Driving Directions to the Property I 75S to 47 go towards H. White, go thru H. White stay on 47 to rd 138 make (L) on 138 go approx 7miles Lynn Sherman Rd (Dirt) ON (R) go approx .74mile Dreama glenn 100 yds 2nd lot ON (L)

▪ Name of Licensed Dealer/Installer Jerry Corbetts Phone # 386-362-4948

▪ Installers Address 10314 US Hwy 90E Live Oak, FL 32060  
 License Number IH0000796 Installation Decal # 285472

811 TW called 7.5.07: TREBA FOSTER

PERMIT WORKSHEET

STAINAKER 14X7D  
R321

PERMIT NUMBER

Installer Sony Corbett License # I4000790

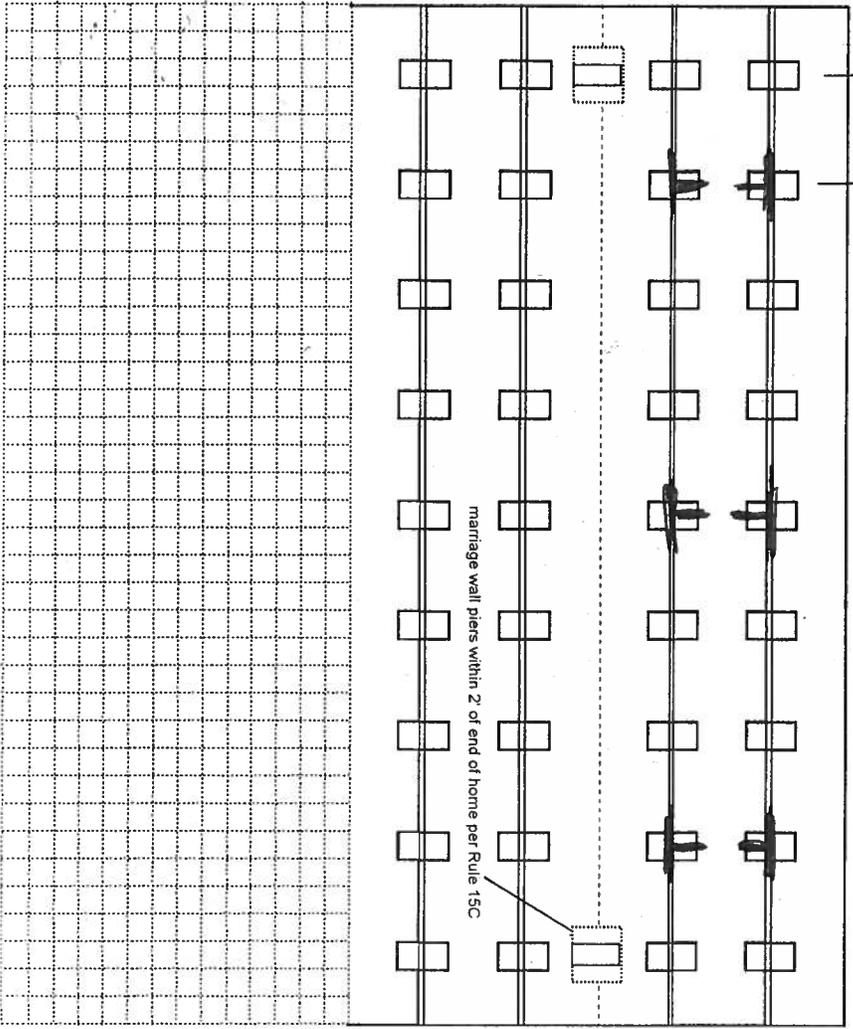
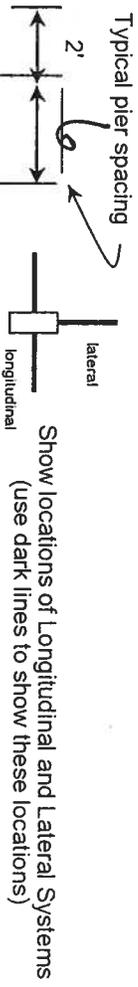
Address of home being installed 533 Feathers Lane  
St. White Jr 32038

Manufacturer River Birch Length x width 70 x 14

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 SC



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 # 285472

Triple/Quad  Serial # 7807

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (sq in)	16" x 16"	18 1/2" x 18 1/2"	20" x 20"	22" x 22"	24" x 24"	26" x 26"
1000 psf	3'	4'	5'	6'	7'	8'	8'
1500 psf	4'6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7'6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

\* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17 x 22 x 1

Perimeter pier pad size 16 x 16 x 1

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 \_\_\_\_\_

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

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Kingston

Sidewall Longitudinal Marriage wall Shearwall

Number 34

POCKET PENETROMETER TEST

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

x 1800 x 1800 x 1800

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 1800 x 1800 x 1800

TORQUE PROBE TEST

The results of the torque probe test is 2285 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 require anchors with 4000 lb holding capacity.

Installer's initials JLC

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Jerry Corbett
Date Tested 10-14-07

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.
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: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:
For used homes a min. 80 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

Type gasket: Installed/Not Installed
Pg. Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
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

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Jerry Corbett Date 10-20-07

# LIMITED POWER OF ATTORNEY

I, JERRY Corbett, do hereby authorize Treeca Foster to be my representative and act on my behalf in all aspects of applying for a Building + Septic permit to be placed on <sup>CLARENCE STAINAKER</sup> property described as: Sec 25 Twp. 7 S Rge 16 E Tax Parcel No. 04321-013 in ~~St. Lawrence~~ Columbia County, Florida.

Jerry Corbett  
(Owner Signature)

6/22/07  
(Date)

Sworn to and subscribed before me this 22 day of June, 2007.

Treeca A. Foster  
Notary Public

My Commission expires: \_\_\_\_\_  
Commission No. \_\_\_\_\_  
Personally known:   
Produced ID (Type) \_\_\_\_\_



## MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I, JERRY COBBETT, license number IH 0000790  
Please Print

do hereby state that the installation of the manufactured home for \_\_\_\_\_

Clarence Stralnaker at 533 Feather Lane #  
Applicant  
911 Address

will be done under my supervision.

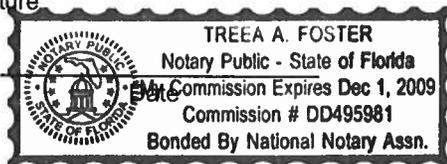
*White, FL*

*Jerry Cobbett*  
Signature

Sworn to and subscribed before me this 20 day of June,  
2007.

Notary Public: *Treva A. Foster*  
Signature

My Commission Expires:



# AFFIDAVIT

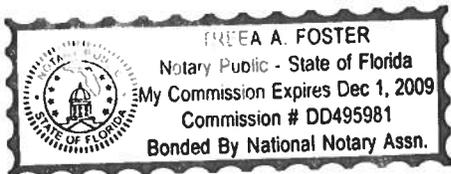
I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Clarence Stainaker  
Property ID: Sec: 25 Twp: 7 Rge: 16 Tax Parcel No: 04321-013  
Lot: 31 Block: \_\_\_\_\_ Subdivision: Rum Island Ranches  
Mobile Home Year/Make: 2004 Rivabirch Size: 14x70

Jerry Corbett  
Signature of Mobile Home Installer

Sworn to and subscribed before me this 21 day of June, 2007  
by JERRY Corbett

TREEA A. FOSTER  
Notary's name printed/typed



TREEA A. Foster  
Notary Public, State of Florida  
Commission No. \_\_\_\_\_  
Personally Known:  \_\_\_\_\_  
Produced ID (type) \_\_\_\_\_



PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6/18 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME CLARENCE WHITAKER PHONE 352-538-0875 CELL \_\_\_\_\_

ADDRESS \_\_\_\_\_

MOBILE HOME PARK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

DRIVING DIRECTIONS TO MOBILE HOME 90-W TO DEPUTY J. DAVIS BLVD @ CORBETT'S SUPPLY  
SEE DOUG:

MOBILE HOME INSTALLER CORBETT'S PHONE \_\_\_\_\_ CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE RIVER BIRCH YEAR 2004 SIZE 14 X 66 COLOR WHITE

SERIAL No. RB04AL7807

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

INTERIOR: INSPECTION STANDARDS

(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 REINSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE [Signature] ID NUMBER 306 1/2 DATE 6-19-07



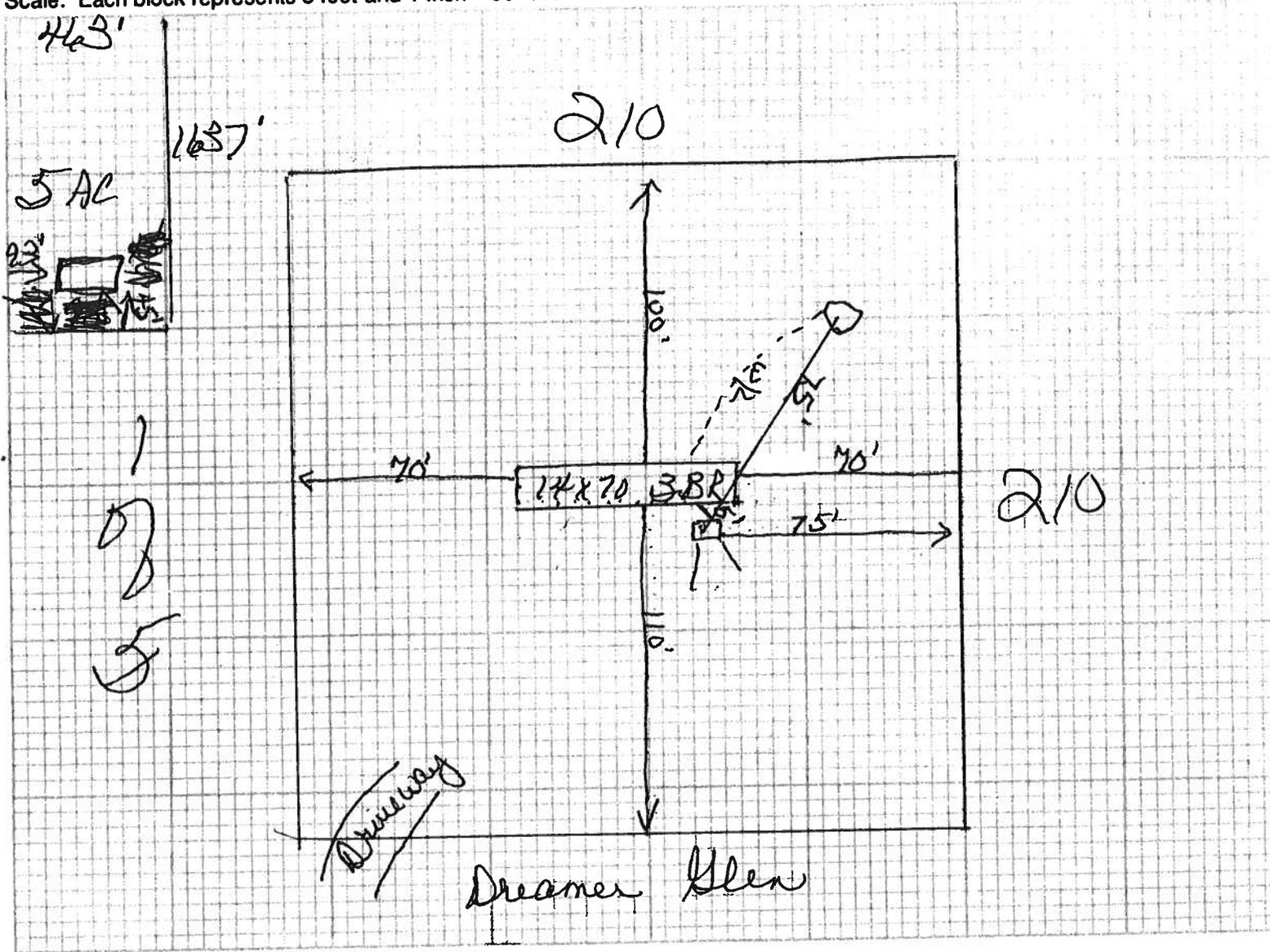
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: \_\_\_\_\_

Site Plan submitted by: \_\_\_\_\_

*Jane Foster*  
Signature

Signature

Agent

Title

Plan Approved \_\_\_\_\_

Not Approved \_\_\_\_\_

Date \_\_\_\_\_

By \_\_\_\_\_

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

06/29/2007 08:05 3864545038

FILE UPDATES

PREPARED BY & RETURN TO:

Name: Lisa E. Davis, an employee of  
TITLE OFFICES, LLC  
Address: P.O. BOX 2516  
ALACHUA, FL. 32616  
File No. 07G-03006

Parcel No.: 16-7S-25-04321-013

Inst:200712012484 Date:6/6/2007 Time:11:58 AM  
Doc Stamp-Deed:0.70  
DC, P, DeWitt Casson, Columbia County Page 1 of 1

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This **WARRANTY DEED**, made the 5th day of June, 2007, by Willie E. Stalnakor and Velma L. Stalnakor, his wife, hereinafter called the Grantor, to CLARENCE E. STALNAKER, a single person, whose post office address is Southwest Dreamer Lane, Ft. White, Florida 32038, hereinafter called the Grantee:

WITNESSETH: That the Grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the Grantee all that certain land situate in County of Columbia, State of Florida, viz:

The North 1/4 of Tract 31 of RUM ISLAND RANCHES, an unrecorded Plat also known as: The North 1/4 of the West 1/4 of the East 1/4 of the NE 1/4 of the SW 1/4 of Section 25, Township 7 South Range 16 East, LESS Road Right of Way, in Columbia County, Florida.

TOGETHER WITH all the covenants, hereditaments and appurtenances thereto belonging or in anywise appertaining.

THE ABOVE-DESCRIBED PROPERTY IS NOT THE CONSTITUTIONAL HOMESTEAD OF THE GRANTOR, NOR IS IT CONTIGUOUS TO SUCH.

SUBJECT TO TAXES FOR THE YEAR 2007 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

TO HAVE AND TO HOLD the same in fee simple forever.

And the Grantor hereby covenants with the Grantee that the Grantor is lawfully seized of said land in fee simple, that the Grantor has good right and lawful authority to sell and convey said land and that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever. Grantor further warrants that said land is free of all encumbrances, except as noted herein and except taxes accruing subsequent to December 31, 2006.

IN WITNESS WHEREOF, the said Grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

[Signature]  
Witness Signature  
Printed Name: Lisa E. Davis

[Signature] L.S.  
Name: WILLIE E. STALNAKER  
Address: 533 SW FEATHER LANE, FT. WHITE, FL. 32038

[Signature]  
Witness Signature  
Printed Name: Baha Chastain

[Signature] L.S.  
Name: VELMA L. STALNAKER  
Address: 533 SW FEATHER LANE, FT. WHITE, FL. 32038

STATE OF FLORIDA  
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 5th day of June, 2007, by Willie E. Stalnakor and Velma L. Stalnakor, his wife, who is personally known to me or who has produced [Signature] as identification.

 Lisa E. Davis  
Commission # DD636508  
Expires June 2, 2010  
Notary Public  
State of Florida

[Signature]  
Signature of Notary  
Printed Name: Lisa E. Davis  
My commission expires:

FROM COLUMBIA CO BUILDING + ZONING FAX NO. : 386-758-2168

Jul. 02 2007 03:31PM P1

TU: TREEA

364-1979

**AFFIDAVIT OF SUBDIVIDED REAL PROPERTY FOR USE OF IMMEDIATE FAMILY MEMBERS FOR PRIMARY RESIDENCE**

STATE OF FLORIDA  
COUNTY OF COLUMBIA

BEFORE ME the undersigned Notary Public personally appeared

Willie E. Stalnaker, the Owner of the parent tract which has been subdivided for immediate family primary residence use, hereinafter the Owner, and Clarence Stalnaker, the family member of the Owner, who is the owner of the family parcel which is intended for immediate family primary residence use, hereinafter the Family Member, and is related to the Owner as his SON, and both individuals being first duly sworn according to law, depose and say:

1. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit.
2. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference to the Columbia county Property Appraiser Tax Parcel No. 25-75-16-04321-013
3. The Owner has divided his parent parcel for use of immediate family members for their primary residence and the parcel divided and the remaining parent parcel are at least 1/2 acre in size. Immediate family is defined as grandparent, parent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
4. The Family Member is a member of the Owner's immediate family, as set forth above, and holds fee simple title to certain real property divided from the Owner's parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No. 25-75-16-04321-56
5. No person or entity other than the Owner and Family Member 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.
6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for a family member on the parcel divided in accordance with Section 14.9 of the Columbia County Land Development Regulations.

FROM : COLUMBIA CO BUILDING + ZONING FAX NO. : 386-758-2160

Jul. 02 2007 03:31PM P2

7. This Affidavit 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 information contained in this Affidavit are true and correct.

Willie E. Stalaker  
Owner

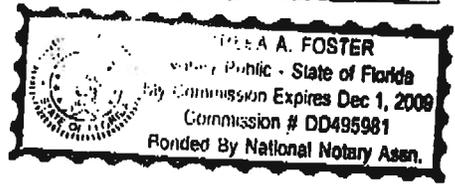
Clarence Stalaker  
Family Member

Willie E. Stalaker  
Typed or Printed Name

CLARENCE STALAKER  
Typed or Printed Name

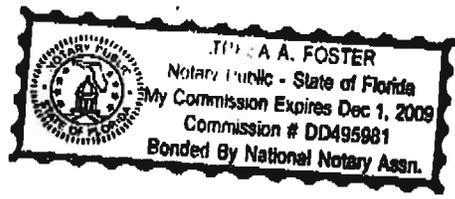
Subscribed and sworn to (or affirmed) before me this 3 day of July, 2007, by Willie Stalaker (Owner) who is personally known to me or has produced Driver's License as identification.

Jane A. Foster  
Notary Public



Subscribed and sworn to (or affirmed) before me this 3 day of July, 2007, by Clarence Stalaker (Family Member) who is personally known to me or has produced Driver's License as identification.

Jane A. Foster  
Notary Public



# **COLUMBIA COUNTY 9-1-1 ADDRESSING / GIS DEPARTMENT**

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

Telephone: (386) 758-1125 \* Fax: (386) 758-1365 \* E-mail: [ron\\_croft@columbiacountyfla.com](mailto: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.

### **Residential or Other Structure on Parcel Number:**

**25-7S-16-04321-013**

(old structure moved off property and new one put in same place, no address change required)

### **Address Assignment:**

**198 SW DREAMER GLN, FORT WHITE, FL, 32038**

Any questions concerning this information should be referred to the Columbia County 9-1-1 Addressing / GIS Department at the address or telephone number above.

**COLUMBIA COUNTY  
9-1-1 ADDRESSING  
APPROVED**

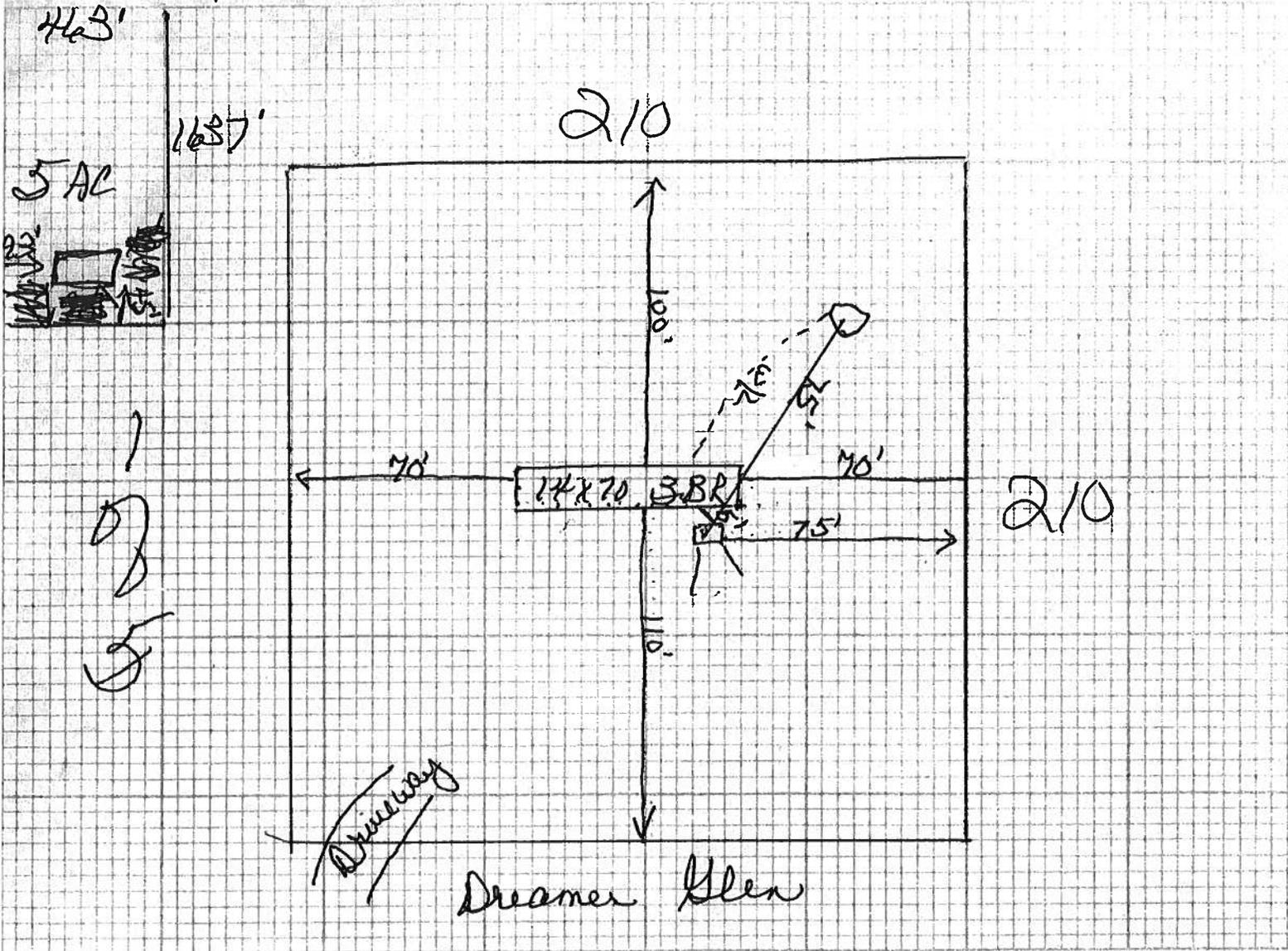
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 07-0514E

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes:

Site Plan submitted by: [Signature] Signature \_\_\_\_\_ Agent \_\_\_\_\_ Title \_\_\_\_\_  
 Plan Approved  Not Approved \_\_\_\_\_ Date 7-11-07  
 By Salbi Ford ESII **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

# CLARENCE STALNAKER OPEN

## M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

### Department of Building and Zoning Inspection

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 25-7S-16-04321-056

Building permit No. 000026028

Permit Holder JERRY CORBETT

Owner of Building CLARENCE STALNAKER

Location: 198 SW DREAMER GLEN, FT. WHITE, FL

Date: 07/20/2007



Building Inspector



POST IN A CONSPICUOUS PLACE  
(Business Places Only)