

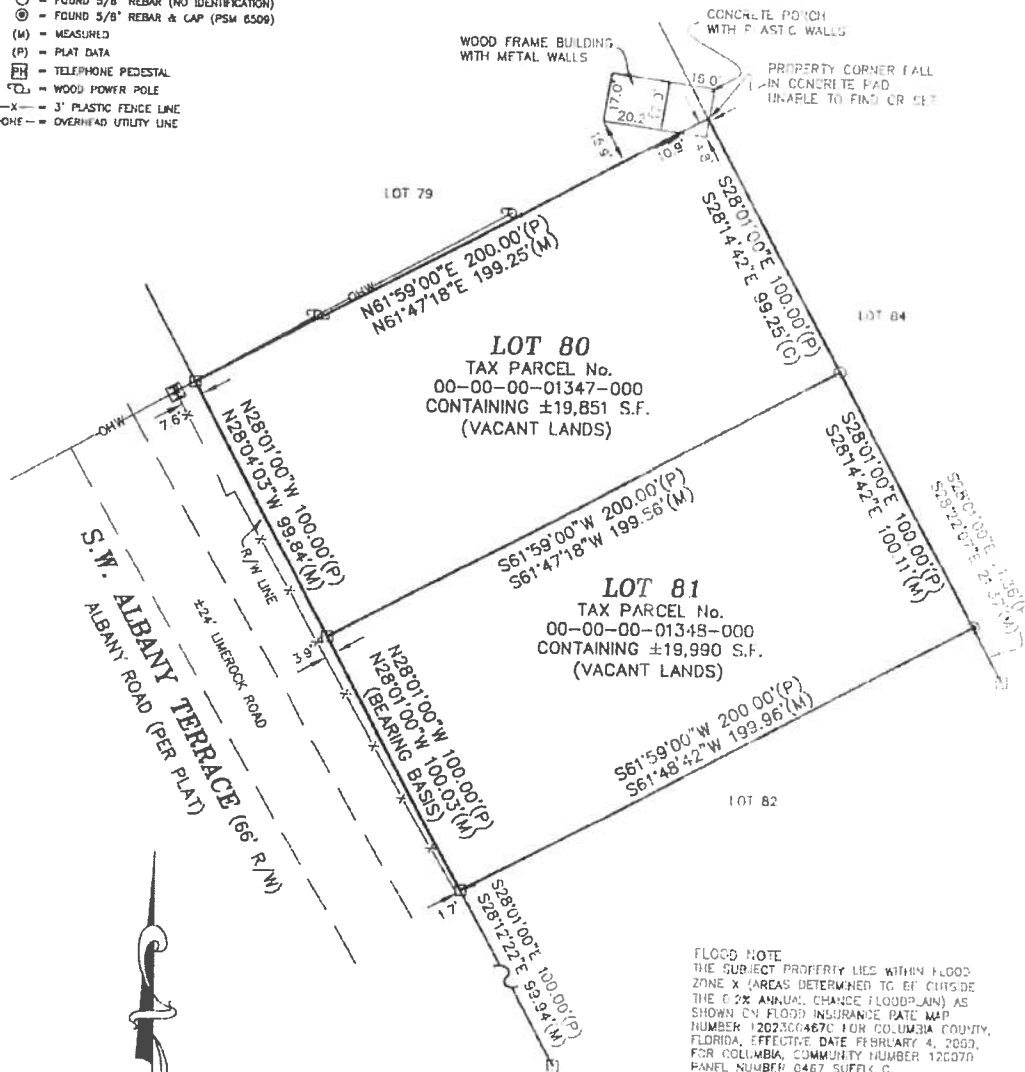
BOUNDARY SURVEY

LYING IN SECTION 25, TOWNSHIP 6 SOUTH, RANGE 15 EAST,
COLUMBIA COUNTY, FLORIDA

LEGAL DESCRIPTION
LOTS 80-81, THREE RIVERS ESTATES,
UNIT 21, ACCORDING TO THE PLAT
THEREOF RECORDED IN PLAT BOOK 6,
PAGE 15 OF THE PUBLIC RECORDS OF
COLUMBIA COUNTY, FLORIDA.

LEGEND

- = FOUND 4"x4" CONCRETE MONUMENT (NO IDENTIFICATION)
- = FOUND 5/8" REBAR (NO IDENTIFICATION)
- ⊙ = FOUND 5/8" REBAR & CAP (PSM 6506)
- (M) = MEASURED
- (P) = PLAT DATA
- PH = TELEPHONE PEDESTAL
- CD = WOOD POWER POLE
- X- = 3" PLASTIC FENCE LINE
- OHE- = OVERHEAD UTILITY LINE



FLOOD NOTE
THE SUBJECT PROPERTY LIES WITHIN FLOOD ZONE X (AREAS DETERMINED TO BE OUTSIDE THE 0.2% ANNUAL CHANCE FLOODPLAIN) AS SHOWN ON FLOOD INSURANCE RATE MAP NUMBER 1202306467C FOR COLUMBIA COUNTY, FLORIDA, EFFECTIVE DATE FEBRUARY 4, 2003, FOR COLUMBIA, COMMUNITY NUMBER 120370, PANEL NUMBER 0467 SUFFIX C.

SURVEYOR NOTES

1. THE BEARINGS SHOWN HEREON ARE BASED ON FIELD MEASUREMENTS PROJECTED FROM A BEARING OF N 73°00'00" W ALONG THE SOUTHERLY LINE OF THE SUBJECT PARCEL.
2. NO UNDERGROUND INSTALLATION OF UTILITIES OR IMPROVEMENTS HAVE BEEN LOCATED EXCEPT AS SHOWN.
3. THE SURVEYOR HAS NO KNOWLEDGE OF UNDERGROUND FOUNDATIONS WHICH MAY ENCROACH.
4. RECORDED EASEMENT AND/OR DEEDS NOT FURNISHED TO THE SURVEYOR ARE NOT SHOWN.

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL PLAT BOOK REF. OF A FLORIDA LICENSED SURVEYOR AND SIGNED, SIGNED BY SURVEYOR TO THIS MAP BY SURVEYOR FROM THE SURVEYOR'S RECORDS.

LEON ANN FLOWERS

PROFESSIONAL SURVEYOR & MAPPER
FLA LICENSE NO. 1002



207 SE CONNOR GLEN
HIGH SPRINGS, FLORIDA 32648
(386) 454-8147

CERTIFIED TO:

STEPHEN ZAKOVSKY

FIELD BOOK NO. 100

DATE: 10/1/03

SHEET 1 OF 1

Zakovsky

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 44154 CONTRACTOR William Price PHONE 407-448-8953

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	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>
MECHANICAL/ AC 11669 ✓	<p>Print Name <u>Ronald E. Bonds SR</u> Signature <u>Ronald E. Bonds SR</u></p> <p>License #: <u>CAC 1817658</u> Phone #: <u>850-768-1453</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>

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.

LIMITED POWER OF ATTORNEY

I Glenn Whittington DO HEREBY AUTHORIZE Oda Price

TO FULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

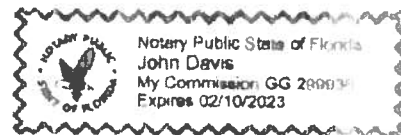
Glenn Whittington
SIGNATURE

11-9-19

DATE

Stephen Zakovsky
247 Albany Ter
Fort White FL 32038

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 9th DAY OF Nov 2004 2019



[Signature]
NOTARY PUBLIC

MY COMMISSION EXPIRES: 02/10/2023
COMMISSION NO. 66299934
PERSONALLY KNOWN: AL
PRODUCED ID. (TYPE): _____

Zakusky

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

William Price

PHONE

407-448-8952

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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 1074	<p>Print Name <u>William W. Whittington</u> Signature <u>William W. Whittington</u></p> <p>License #: <u>EC130022957</u> Phone #: <u>386 972 1500</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>
MECHANICAL/ A/C _____	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>

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.



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, William R. Price, give this authority for the job address show below
Installer License Holder Name

only, 247 Albany Terrace, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control
Fort 10117 FL 32035
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)
<u>Oda Price</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
<u>Jeane Shepard</u>	<u>[Signature]</u>	<input checked="" 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.

[Signature]
License Holders Signature (Notarized)

14-1041436
License Number

10/29/19
Date

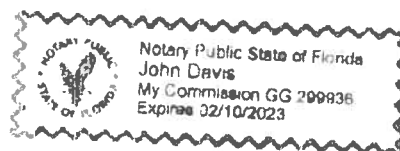
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Shalake

The above license holder, whose name is William R. Price, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 24th day of October, 2019

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





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 AGENT AUTHORIZATION

I, William R. Price, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
Oda Price	<i>[Signature]</i>	Price Rite Enterprises Inc.
Jessie Shepard	<i>[Signature]</i>	Price Rite Enterprises Inc.

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.

[Signature] License Holders Signature (Notarized) 1A-1041436 License Number 10/24/19 Date

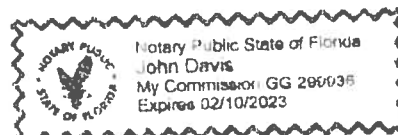
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Sumner

The above license holder, whose name is William R. Price
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 24th day of October, 2019

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



LIMITED POWER OF ATTORNEY

I Stephen Zakovsky DO HERBY AUTHORIZE
ODA PRICE
JESSIE SHEPARD

TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

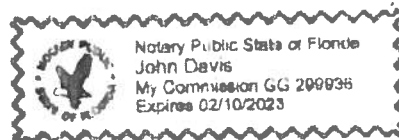
Stephen Zakovsky
SIGNATURE
11-09-19
DATE

SWORN TO AND SUBSCRIBED BEFOR ME ON THIS 4th DAY OF November 20 19

John Davis
NOTARY PUBLIC

(STAMP)

John Davis
NOTARY PUBLIC PRINT



MY COMMISSION EXPIRES: GG 299934 exp 2/10/2023
COMMISSION NO: GG 299934
PERSONALLY KNOWN: _____
PRODUCED ID. (TYPE): F4L Z212-78055-062-c

Laurie Hodson

From: Will Price <will@priceriteenterprise.com>
Sent: Tuesday, December 10, 2019 10:18 AM
To: Laurie Hodson
Subject: RE: Zakovsky Application # 44154

Good Morning MS. Laurie,

I have spoken with Ms. Oda regarding this and Mr. Zakovsky is not planning on selling the other lot. He is using them as one parcel and has no future plans of splitting it that we have spoken about . Let me know Ms. Laurie if you need anything else.

Have a blessed day and thank you for all you do.

Jessie

From: Laurie Hodson <laurie_hodson@columbiacountyfla.com>
Sent: Tuesday, December 10, 2019 10:09 AM
To: Will Price <will@priceriteenterprise.com>
Subject: Zakovsky Application # 44154

Oda or Jessie,

Mr. Zakovsky owns lots 80 & 81. Per the site plan the home is being placed on lot 81 but on the property line of lot 80. There is no problem with this as long as Mr. Zakovsky understands the lots cannot be sold separately unless the mobile home is removed or relocated. If the mobile home can be moved over so the setback of 10' is met from lot 80 then either lot could be sold without having to move this mobile home.

This is not a requirement, I just wanted the owner to know this to avoid a future problem form him.
Please let me know what is decided and if the mh is going to be moved send an updated site plan page.

Thank you,

Laurie Hodson

Laurie Hodson, Administrative Supervisor
135 NE Hernando Avenue, STE B-21
Lake City, FL 32055
PH: 386-758-1007 FX: 386-758-2160
Laurie_hodson@columbiacountyfla.com
www.columbiacountyfla.com

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witz
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:	2/13/2019 10:39:54 AM
Address:	247 SW ALBANY Ter
City:	FORT WHITE
State:	FL
Zip Code	32038
Parcel ID	01347 000

REMARKS: Address for proposed structure on parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com