

DATE 07/31/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021669

APPLICANT JOHN BURKI PHONE 386.935.4604
 ADDRESS 3368 256TH STREET O'BRIEN FL 32071
 OWNER MARCIA KIRKLAND PHONE 386.496.0656
 ADDRESS 573 SW ILLINOIS STREET FT. WHITE FL 32038
 CONTRACTOR JOSEPH CHATMAN PHONE 386.497.2277
 LOCATION OF PROPERTY 47-S TU US 27, R, GO TO UTAH L, ROBERTS RD, L, GO TO ILLINOIS (R, LO 5 ON RIGHT.

TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 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. _____ FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 26-6S-15-00519-105 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 10.00

IH000240
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING _____ 04-0291-N _____ BLK _____ HD _____ N _____
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FOOT ABOVE ROAD

STUP #045 M/H 1 YEAR TEMP. USE PERMIT

Check # or Cash 1307/1308

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 \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 39.69 WASTE FEE \$ 85.75
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ **TOTAL FEE** 375.44
 INSPECTORS OFFICE CH 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."

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 INCONVENIENCE, 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 Zoning Official BJK 26.03.04 Building Official HD 3/29/04
AP# 0403-59 Date Received 3/18/04 By JW Permit # 21669
Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
Comments
STUP #045 MH, one year temp. use permit

Site Plan with Setbacks shown Environmental Health Signed Site Plan Env. Health Release
 Need a Culvert Permit Need a Waiver Permit Well letter provided Existing Well

- Property ID 25-6S-15-00519-105 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home Year 1996
- Subdivision Information Three Rivers Farms Development
- Applicant John N. BURKL Phone # (386) 935-4604
- Address 3368 256th St O'Brien, FL 32071
- Name of Property Owner MARCIA KIRKLAND Phone# (386) 496-0656
- 911 Address 573 SW ILLINOIS ST. FORT WHITE, FL 32038
- Name of Owner of Mobile Home MARCIA KIRKLAND Phone # (386) 496-0656
- Address 573 SW ILLINOIS ST FORT WHITE, FL 32038
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage 10
- Explain the current driveway EXISTING
- Driving Directions 47S, 27(R) Utah(L), Roberts(L), ILLINOIS(R)
Lot #5 on Right
- Is this Mobile Home Replacing an Existing Mobile Home No
- Name of Licensed Dealer/Installer Joseph Chatman Phone # (386) 997 2277
~~14000240~~
- Installers Address 9241SW Hwy 27 Fort white, FL 32038
- License Number 14000240 Installation Decal # 193054

21669

PERMIT NUMBER

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 240 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 require anchors with 4000 lb holding capacity.

JPL Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Joseph A. C. HARTMAN
Date Tested 3-15-04

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: LBCS Length: 6" Spacing: 24"OC
Walls: Type Fastener: S-Per-S Length: 4" Spacing: 24"OC
Roof: Type Fastener: LBCS Length: 6" Spacing: 24"OC
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 JPL

Type gasket Roll 5.11.5 EPL Installed: _____
Pg. _____
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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature [Signature] Date 3-18-04

PERMIT NUMBER

Installer JOSEPH A. CHATMAN License # IAI-0000240

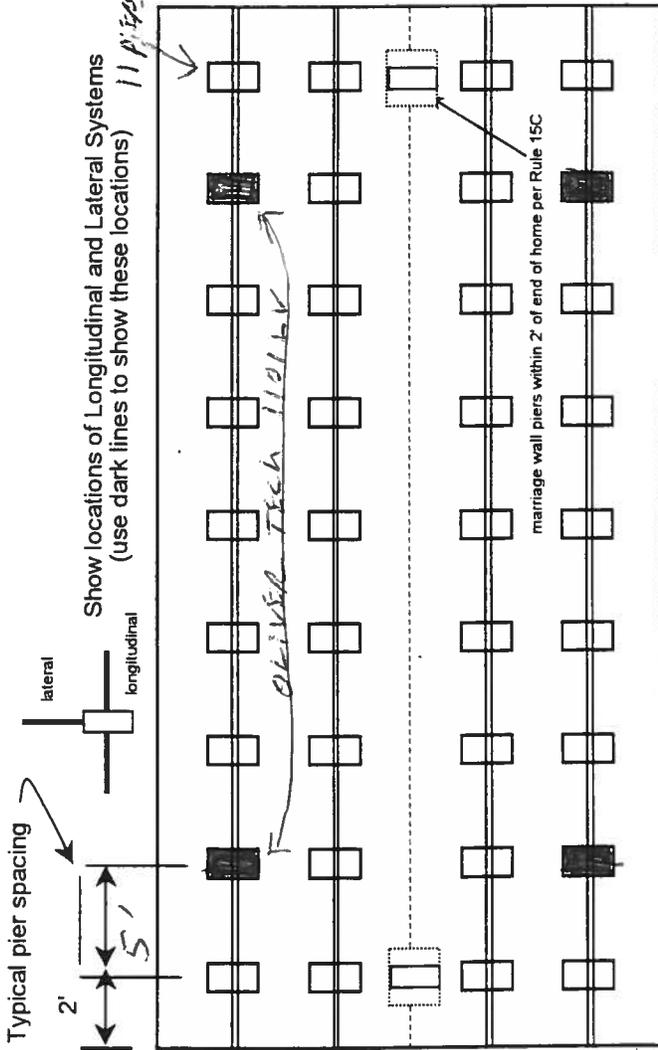
Address of home being installed 573 SW. ILLINOIS ST
3 RIVERS ESTATES FT. WHITE FL 32038

Manufacturer FLEETWOOD Length x width 28x56

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 JPC



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 # 19J054

Triple/Quad Serial # ITS21

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'	3'	4'	5'	6'	7'	8'
1500 psf	4'6"	4'6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7'6"	7'6"	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 20x20

Perimeter pier pad size 20x20

Other pier pad sizes (required by the mfg.) 16x16 (Four piers)

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 12 FT Pier pad size 20x20 SEGMENTED 4 ft 5 ft

OLIVER TECH 1101LV

ANCHORS

FRAME TIES

within 2' of end of home spaced at 5' 4" oc 11 PER

OTHER TIES Floor Joist

Number 3 minimum

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer OLIVER 1101LV

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer _____

Sidewall Longitudinal Marriage wall Shearwall _____

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
PHONE: (386) 752-8787 * 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 ISSUED: January 5, 2004

ENHANCED 9-1-1 ADDRESS:

573 SW ILLINOIS ST (FORT WHITE, FL 32038)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 15A

PROPERTY APPRAISER PARCEL NUMBER: 25-6S-15-00519-105

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 5, 3 RIVERS FARMS DEVELOPMENT GROUP, UNR S/D

Address Issued By: _____


Columbia County 9-1-1 Addressing Department

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

LIMITED POWER OF ATTORNEY

I, Joseph A. Chatman, license # FH-0000240 hereby authorize John N. Burki to be my representative and act on my behalf in all aspects of applying for a mobile home permit to be placed on the following described property located in Columbia County, Florida.

Property owner: MARCIA HIGHLAND

Sec 25 Twp. 65 S Rge 15 E

Tax Parcel No. 25-65-15-00519-105

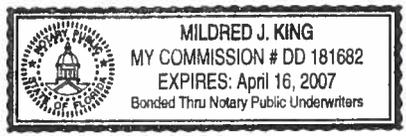
John N. Burki
Mobile Home Installer

3-8-04
(Date)

Sworn to and subscribed before me this 8th day of March, 20 04.

Mildred J. King
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, JOSEPH A. CHATMAN, license number IH 0000240
Please Print

do hereby state that the installation of the manufactured home for MARCEA
KIRKLAND at 573 SW ILLINOIS ST. FORT WILKIE FL
Applicant
911 Address 32038

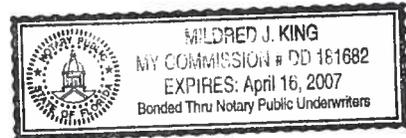
will be done under my supervision.

[Signature]
Signature

Sworn to and subscribed before me this 8th day of March,
2004.

Notary Public: Mildred J. King
Signature

My Commission Expires: _____
Date





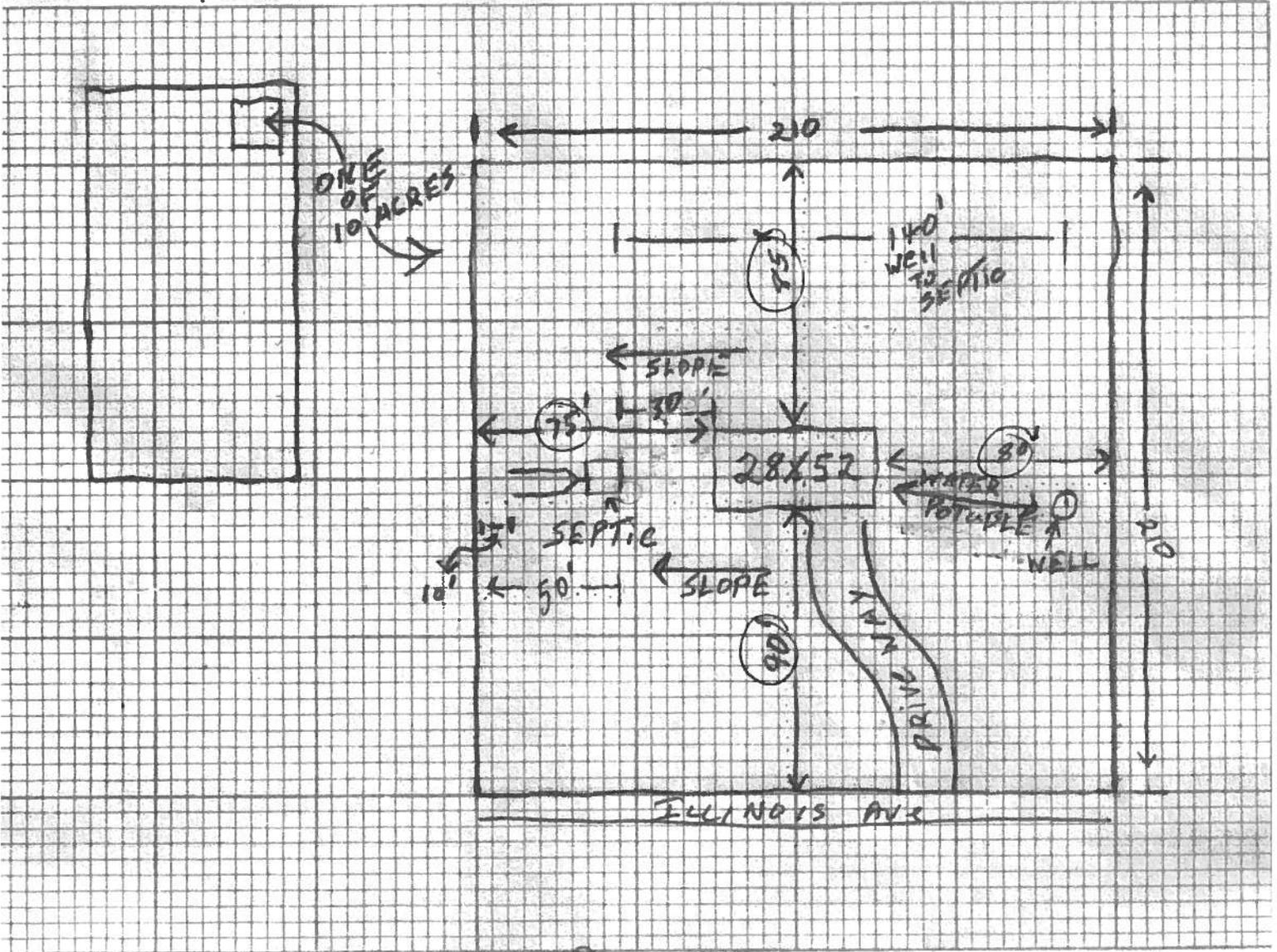
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-0292N

PART II - SITE PLAN

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



Notes: Septic is 140' feet from Well
Site Plan is 1 of 10 ACRES

Site Plan submitted by: Marcia E. Killo
 Signature

Title

Plan Approved _____ Not Approved _____

Date

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

This Instrument Prepared by & return to:
Name: KIM WATSON, an employee of
TITLE OFFICES, LLC ✓
Address: 1089 SW MAIN BLVD.
LAKE CITY, FLORIDA 32025
03Y-11072BS
Parcel I D #: 00519-000

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 19th day of December, A.D 2003, by **THREE RIVERS FARMS DEVELOPMENT GROUP, INC.**, having its principal place of business at 240 NW 76TH DR, SUITE D, GAINESVILLE, FL 32607, hereinafter called the grantor, to **MARCIA E. KIRKLAND**, *Single*, whose post office address is *P.O. Box 182 Worthington Springs 32697*, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

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 **Columbia County, State of FLORIDA**, viz:

PARCEL 5

COMMENCE AT THE NE CORNER OF SECTION 25, TOWNSHIP 6 SOUTH, RANGE 15 EAST, AND RUN THENCE S.01°28'35"E., ALONG THE EAST LINE OF SAID NE ¼ A DISTANCE OF 1328.25 FEET; THENCE S.88°32'50"W., A DISTANCE OF 996.71 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S.88°32'50"W., A DISTANCE OF 332.24 FEET; THENCE S.01°26'50"E., A DISTANCE OF 1329.10 FEET TO THE SOUTH LINE OF SAID NE ¼ ALSO BEING THE NORTH RIGHT-OF-WAY LINE OF ILLINOIS PARKWAY; THENCE N.88°30'39"E., ALONG SAID SOUTH LINE A DISTANCE OF 331.90 FEET; THENCE N.01°25'57"W., A DISTANCE OF 1328.89 FEET TO THE POINT OF BEGINNING.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantee that it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever. and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2003.

In Witness Whereof, the said grantor has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its proper officers thereunto duly authorized, the day and year first above written.

Signed, sealed and delivered in the presence of:

Andrea G Revell
Witness Signature

Andrea G Revell
Printed Name

[Signature]
Witness Signature

Kim Watson
Printed Name

THREE RIVERS FARMS DEVELOPMENT GROUP, INC.

By: [Signature] L.S.
Name: Andrew Hoder
Title: President

Inst: 2003028195 Date: 12/31/2003 Time: 17:27

Doc Stamp-Deed : 266.00

DC, P. DeWitt Cason, Columbia County B: 1003 P: 1974

STATE OF FLORIDA
COUNTY OF Alachua

The foregoing instrument was acknowledged before me this 19th day of December, 2003, by Andrew Hoder as President of THREE RIVERS FARMS DEVELOPMENT GROUP, INC., a Florida corporation. (He) (she) is personally known to me or has produced _____ as identification.

Andrea G Revell
Notary Public
My commission expires 6-1-04



Andrea G. Revell
MY COMMISSION # CC941448 EXPIRES
June 1, 2004
BONDED THRU TROY FAIR INSURANCE, INC.

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

Permit No. Slup 04-5m4

Date 3-9-04

Fee 100.00

Receipt No. 2944

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, one (1) 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, and shall not be located within required yard areas. Such mobile homes shall not be located within twenty (20) feet of any building. A temporary use permit for such mobile homes may be granted for a time period up to one (1) year. When the temporary use permit expires, the applicant may invoke the provisions of Section 14.9, entitled Special Family Lot Permits.

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 any zoning district: A temporary business, as defined within these Land Development Regulations. At least sixty (60) days prior to the commencement date of the temporary permit, the applicant shall submit an application to the County, which shall include the following information.

- a. the name and permanent address or headquarters of the person applying for the permit;
- b. if the applicant is not an individual, the names and addresses of the business;
- c. the names and addresses of the person or persons which will be in direct charge of conducting the temporary business;
- d. the dates and time within which the temporary business will be operated;
- e. the legal description and street address where the temporary business will be located;
- f. the name of the owner or owners of the property upon which the temporary business will be located;
- g. a written agreement containing the permission from the owner of the property for its use for a temporary business must be attached to and made a part of the application for the permit;

- h. a site plan showing display areas, plans for access and egress of vehicular traffic, any moveable interim structures, tents, sign and banner location and legal description of the property must accompany the application for the temporary use permit; and
- i. a public liability insurance policy, written by a company authorized to do business in the State of Florida, insuring the applicant for the temporary permit against any and all claims and demands made by persons for injuries or damages received by reason of or arising out of operating the temporary business. The insurance policy shall provide for coverage of not less than one million dollars (\$1,000,000.00) for damages incurred or claims by more than one person for bodily injury and not less than two million dollars (\$2,000,000.00) for damages incurred or claims by more than one person for bodily injury and fifty thousand dollars (\$50,000.00) for damages to property for one person and one hundred thousand dollars (\$100,000.00) for damages to property claimed by more than one person. The original or duplicate of such policy, fully executed by the insurer, shall be attached to the application for the temporary permit, together with adequate evidence that the premiums have been paid.

The sales permitted for a temporary business, as defined with these land development regulations, including, but not limited to, promotional sales such as characterized by the so-called "sidewalk "sale", "vehicle sale", or "tent sale", shall not exceed three (3) consecutive calendar days.

There must be located upon the site upon which the temporary business shall be conducted public toilet facilities which comply with the State of Florida code, potable drinking water for the public, approved containers for disposing of waste and garbage and adequate light to illuminate the site at night time to avoid theft and vandalism.

If the application is for the sale of automobiles or vehicles, the applicant shall provide with the application a copy of a valid Florida Department of Motor Vehicle Dealers license and Department of Motor Vehicle permit to conduct an "offsite" sale. If any new vehicles are to be displayed on the site, a copy of the factory authorization to do so will be required to be filed with the application.

No activities, such as rides, entertainment, food, or beverage services shall be permitted on the site in conjunction with the operation of the temporary business.

Not more than one (1) sign shall be located within or upon the property for which the temporary permits is issued, and shall not exceed sixteen (16) square feet in surface area. No additional signs, flags, banners, balloons or other forms of visual advertising shall be permitted. The official name of the applicant and its permanent location and street address, together

with its permanent telephone number, must be posted on the site of the property for which the temporary permit is issued and shall be clearly visible to the public.

Any applicant granted a temporary permit under these provisions shall also comply with and abide by all other applicable federal, State of Florida, and County laws, rules and regulations.

Only one (1) tent, not to exceed three hundred fifty (350) square feet in size shall be permitted to be placed on the site of the temporary business and such tent, if any, shall be properly and adequately anchored and secured to the ground or to the floor of the tent.

No person or entity shall be issued more than one (1) temporary permit during each calendar year.

The temporary permit requested by an applicant shall be issued or denied within sixty (60) days following the date of the application therefor is filed with the Land Development Regulation Administrator.

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.

1. Name of Title Holder(s) MARCIA E. KIRKLAND

Address PO Box 682 City White Zip Code 32038

Phone (386) 496 0656 - 352 871 - 6238

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 () _____

- 2. Size of Property 10
- 3. Tax Parcel ID# 25 6S 15 00519 -105
- 4. Present Land Use Classification A-3
- 5. Present Zoning District A-3
- 6. Proposed Temporary Use of Property Mobile Home for Mother

#7

(Include the paragraph number the use applies under listed on Page 1 and 2)

- 7. Proposed Duration of Temporary Use 1 year
- 8. Attach Copy of Deed of Property.

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.

Marcia E. Kirkland POA
 Applicants Name (Print or Type)

MARCIA E. KIRKLAND
 Applicant Signature

4/9/04
 Date

Approved X BLK

OFFICIAL USE

Denied _____

Reason for Denial _____

Conditions (if any) NONE

This Instrument Prepared by & return to:
Name: **KIM WATSON, an employee of**
TITLE OFFICES, LLC ✓
Address: **1089 SW MAIN BLVD.**
LAKE CITY, FLORIDA 32025
03Y-11072BS
Parcel I.D. #: **00519-000**

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 19th day of **December**, A.D. 2003, by **THREE RIVERS FARMS DEVELOPMENT GROUP, INC.**, having its principal place of business at **240 NW 76TH DR, SUITE D, GAINESVILLE, FL 32607**, hereinafter called the grantor, to **MARCIA E. KIRKLAND**, *Single*, whose post office address is *P.O. Box 182 Worthington Springs 32697*, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

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 **Columbia County, State of FLORIDA**, viz:

PARCEL 5

COMMENCE AT THE NE CORNER OF SECTION 25, TOWNSHIP 6 SOUTH, RANGE 15 EAST, AND RUN THENCE S.01°28'35"E., ALONG THE EAST LINE OF SAID NE ¼ A DISTANCE OF 1328.25 FEET; THENCE S.88°32'50"W., A DISTANCE OF 996.71 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S.88°32'50"W., A DISTANCE OF 332.24 FEET; THENCE S.01°26'50"E., A DISTANCE OF 1329.10 FEET TO THE SOUTH LINE OF SAID NE ¼ ALSO BEING THE NORTH RIGHT-OF-WAY LINE OF ILLINOIS PARKWAY; THENCE N.88°30'39"E., ALONG SAID SOUTH LINE A DISTANCE OF 331.90 FEET; THENCE N.01°25'57"W., A DISTANCE OF 1328.89 FEET TO THE POINT OF BEGINNING.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantee that it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever. and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2003.

In Witness Whereof, the said grantor has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its proper officers thereunto duly authorized, the day and year first above written.

Signed, sealed and delivered in the presence of:

Andrea G Revell
Witness Signature

Andrea G Revell
Printed Name

[Signature]
Witness Signature

Kim Watson
Printed Name

THREE RIVERS FARMS DEVELOPMENT GROUP, INC.

By: [Signature] L.S.
Name: Andrew Hoder
Title: President

Inst: 2003028195 Date: 12/31/2003 Time: 17:27

Doc Stamp-Deed : 266.00

DC, P. DeWitt Cason, Columbia County B: 1003 P: 1974

STATE OF FLORIDA
COUNTY OF Alachua

The foregoing instrument was acknowledged before me this 19th day of December, 2003, by Andrew Hoder as President of **THREE RIVERS FARMS DEVELOPMENT GROUP, INC.**, a Florida corporation. (He (she) is personally known to me or has produced _____ as identification.

Andrea G Revell
Notary Public

My commission expires 6-1-04



Andrea G. Revell
MY COMMISSION # CC941448 EXPIRES
June 1, 2004
BONDED THRU TROY FARM INSURANCE, INC.

Return to (enclose self-addressed stamped envelope)

Name

Address

This Instrument Prepared by

Address

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

Power of Attorney

Know All Men By These Presents:

That HARRIET M. PRESCOTT
has VE made, constituted and appointed, and by these presents do hereby make, constitute and appoint
MARCIA E KIRKLAND true and lawful
attorney for me and in my name, place and stead

To PULL ANY Building AND SEPTIC
PERMITS OR ANY DOCUMENTATION TO DO
WITH PARCEL # 25-65-15-00519-105
25-65-15-00519-105

giving and granting unto MARCIA E KIRKLAND said attorney full
power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and
about the premises as fully, to all intents and purposes, as I might or could do if personally present, with full power
of substitution and revocation, hereby ratifying and confirming all that MARCIA E KIRKLAND
said attorney or
substitute shall lawfully do or cause to be done by virtue hereof.

In Witness Whereof, I have hereunto set my hand my and seal on this
27th day of February, A.D. 2004.

Signed, sealed and delivered in the presence of:

Leisa Kay Brown
Witness Signature
Leisa Kay Brown
Printed Name
Lina Ferguson
Witness Signature
Lina Ferguson
Printed Name

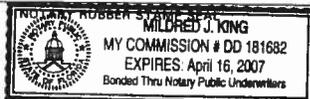
HARRIET M. PRESCOTT
Signature
HARRIET M. PRESCOTT
Printed Name
Post Office Address

STATE OF Florida
COUNTY OF Columbia

Harriet M. Prescott

I hereby Certify that on this day, before me, an officer duly authorized
to administer oaths and take acknowledgments, personally appeared

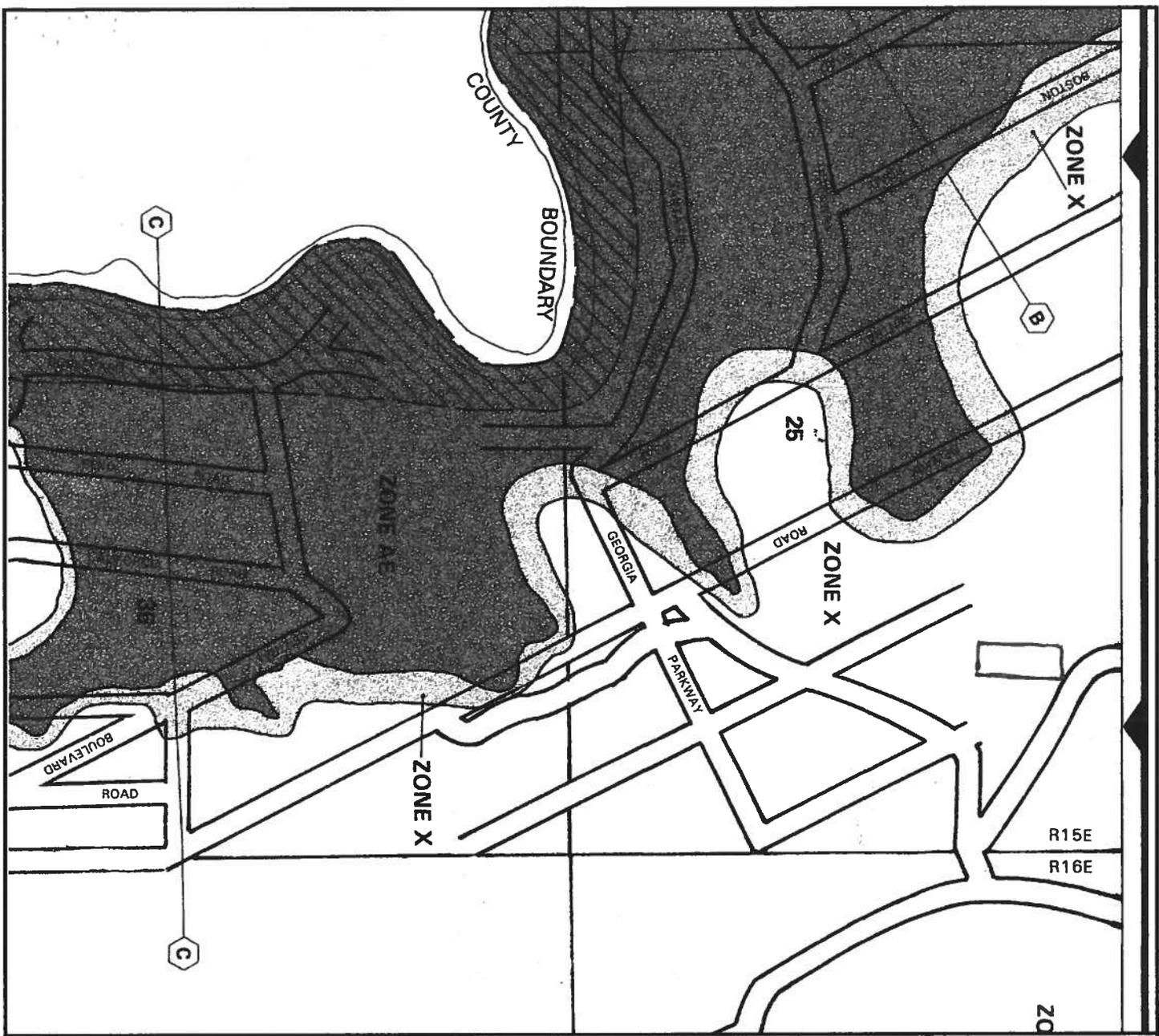
known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that she
executed the same, and an oath was not taken. (Check one:) Said person(s) is/are personally known to me. Said person(s) provided the
following type of identification: FLDL P633-348-37-850-D



Witness my hand and official seal in the County and State last aforesaid
this 27th day of February, 2004.
Mildred J. King
Notary Signature
Mildred J. King
Printed Name

ORIGINAL

0403-579



APPROXIMATE SCALE IN FEET



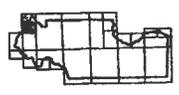
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 255 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0255 B
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mifltsd.

DATE _____ INSPECTION TAKEN BY _____

BUILDING PERMIT # _____ CULVERT / WAIVER PERMIT # _____

WAIVER APPROVED _____ WAIVER NOT APPROVED _____

PARCEL ID # _____ ZONING _____

SETBACKS: FRONT _____ REAR _____ SIDE _____ HEIGHT _____

FLOOD ZONE _____ SEPTIC _____ NO. EXISTING D.U. _____

TYPE OF DEVELOPMENT _____

SUBDIVISION (Lot/Block/Unit/Phase) _____

OWNER Kirkland PHONE _____

ADDRESS 1990 Hwy 18

CONTRACTOR Chattman PHONE _____

LOCATION 415 (R) 18 on left has lake in yard
DWMH in front of new house (Big yellow house)

COMMENTS: 1996 Fleetwood D/W

INSPECTION(S) REQUESTED: _____ INSPECTION DATE: _____

- Temp Power Foundation Set backs Monolithic Slab
- Under slab rough-in plumbing Slab Framing
- Rough-in plumbing above slab and below wood floor Other _____
- Electrical Rough-in Heat and Air duct Perimeter Beam (Lintel)
- Permanent Power CO Final Culvert Pool Reconnection
- M/H tie downs, blocking, electricity and plumbing Utility pole
- Travel Trailer Re-roof Service Change Spot check/Re-check

INSPECTORS:
APPROVED NOT APPROVED _____ BY For POWER CO. _____

INSPECTORS COMMENTS: _____



758-2187

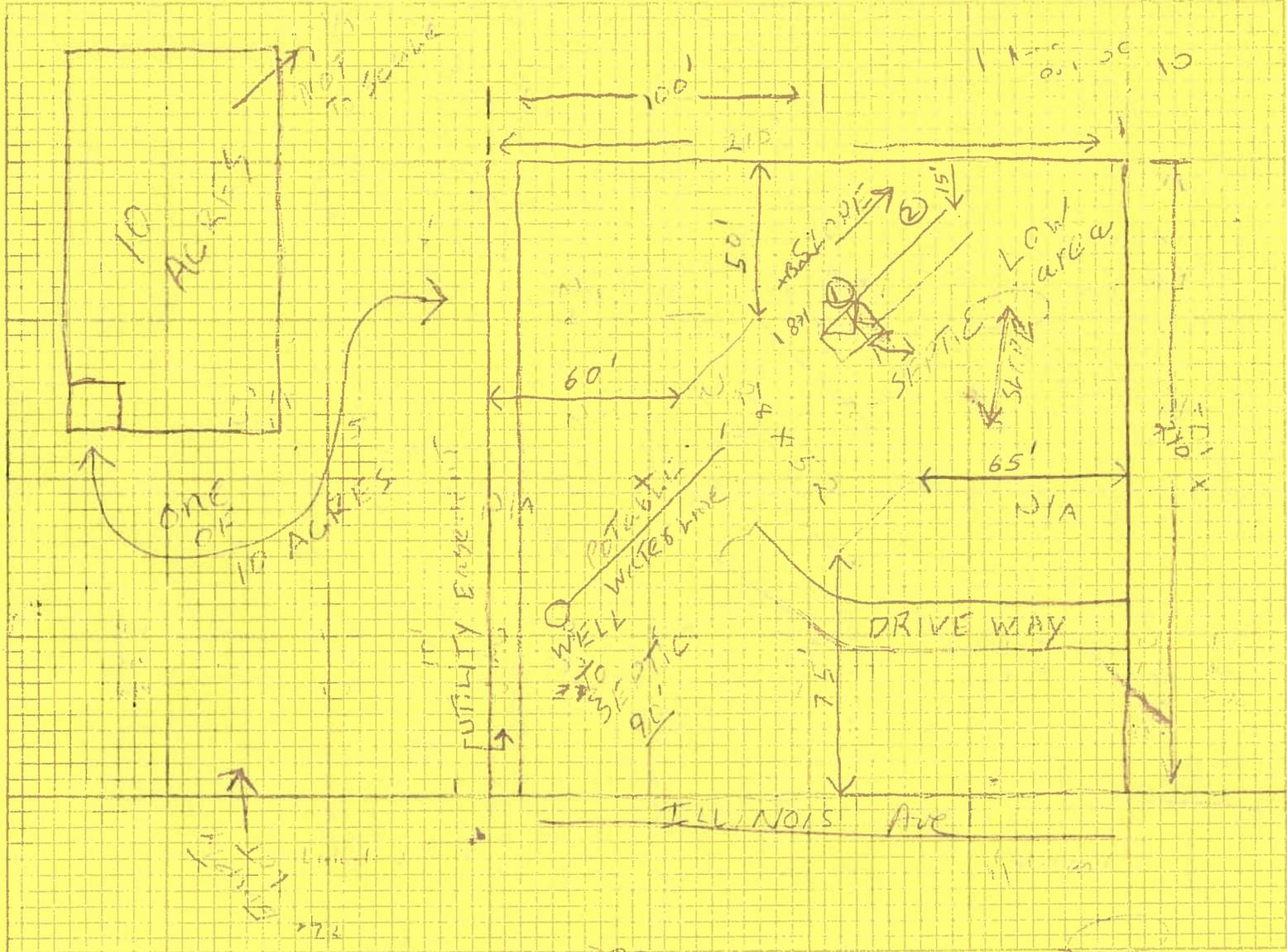
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-02911

PART II - SITE PLAN

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



Notes: Well to septic 90'
Site plan is 2 of 10 acres

Site Plan submitted by: Marcia E. Kinkaid Signature
 Title _____
 Plan Approved Not Approved _____ Date 3-19-04
 By MSM Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Attn: Webbie

**Columbia County Building Department
Culvert Waiver**

**Culvert Waiver No.
000000264**

DATE: 04/07/2004

BUILDING PERMIT NO. 21669

APPLICANT DALE DURD PHONE 467-2311

ADDRESS PO BOX 39 FORT WHITE FL 32038

OWNER MARCIA KIRKLAND PHONE 386-496-0656

ADDRESS 573 SW ILLINIOS ST FORT WHITE FL 32038

CONTRACTOR N/A PHONE _____

LOCATION OF PROPERTY 47 SOUTH, RIGHT ON 27, LEFT SW RIVERSIDE AVE, LEFT SW UTAH, R SW
NEWARK, LEFT SW ILLINIOS, 5TH ON LEFT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT _____

PARCEL ID # 25-6S-15-00519-105

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: [Signature]

A SEPARATE CHECK IS REQUIRED
MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE CULVERT WAIVER IS:

APPROVED NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: _____

SIGNED: [Signature] DATE: 4-27-04

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

COLUMBIA COUNTY

APR 19 2004

PUBLIC WORKS DEPT.

135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160



RON E. BIAS WELL DRILLING

Route 2, Box 5340
Ft. White, Florida 32038
(904) 497-1045
Mobile: 364-9233

00519-000

No. _____

Date 3-17-04

^{Cip}
Marsha Kirkland

Name _____

Address Lot 5

PO 682
7+ white

Phone _____

off Hill in 3 lines 32038
352-871-6238

DESCRIPTION

Dis
4" deep well down to 100'

1-1/2 Hp. sub pump. 82 Equiv
Bladder Tank 32 Gallons
with (cycle stop) and
back flow prevention.
1/4 Dis System.
20.5 Ppm. Constant pressure.

(SRWMD Permit)

Total _____

Deposit _____

Balance _____

25-6-15

Date Wanted _____

Authorized By Ron Bias

Received By _____