| N. S. | 1/2017 | | | uilding Permit on Premises During Cor | struction | PERMIT 000035873 |
|--|--|--|---|--|---|--|
| APPLICANT | LINDA CF | RAFT | | PHONE | 863-517-5701 | |
| ADDRESS | 825 | NW TURNER AVE | , APT 102 | LAKE CITY | | FL 32055 |
| OWNER | MICHAEL | & SHIRLEY DETTE | ER | PHONE | 865-360-6280 | |
| ADDRESS | 534 | SW GALILEE LOO | P | LAKE CITY | | FL 32024 |
| CONTRACTO | R RON | INIE NORRIS | | PHONE | 386-623-7716 | |
| LOCATION O | F PROPERT | ΓΥ 441 S, R T | USTENUGGEE AVE, | R GALILEE LOOP, ARG | OUND CURVE TO |) |
| | | LEFT, SIT | E ON LEFT | | | |
| TYPE DEVEL | OPMENT | MH, UTILITY | ES | TIMATED COST OF CO | NSTRUCTION | 0.00 |
| HEATED FLO | OR AREA | | TOTAL ARE | EA | HEIGHT | STORIES |
| FOUNDATION | ν | WALI | LS R | ROOF PITCH | FLO | OOR |
| LAND USE & | ZONING | AG-3 | | MAX | . HEIGHT 3: | 5 |
| Minimum Set I | Back Requir | ments: STREET- | FRONT 30.00 | REAR | 25.00 | SIDE 25.00 |
| NO. EX.D.U. | 0 | FLOOD ZONE | - | | | |
| .10. LA.D.U. | <u> </u> | - I LOOD ZONE | <u>X</u> | DEVELOPMENT PERM | VIII NO. | |
| PARCEL ID | 31-5S-17-0 | 09465-015 | SUBDIVISIO | N MEADOW WEST | ESTATES | |
| LOT 5 | BLOCK | PHASE _ | UNIT _ | TOTA | AL ACRES5.0 | 00 |
| | | | IH10251451 | × Devd | e (mal | <i>T</i> |
| Culvert Permit | No. | Culvert Waiver | Contractor's License Nun | 7 | Applicant/Owner/ | Contractor |
| EXISTING | | 17-0619 | BS | TM | N | |
| Driveway Conr | nection | Septic Tank Number | LU & Zoning check | ed by Approved for Iss | uance New Resi | dent Time/STUP No. |
| COMMENTS: | FLOOR O | NE FOOT ABOVEW | THE ROAD | | | |
| | | | | | | Co. Co. Korkii |
| | | | | | 01 1 1/ 0 | 1 6220 |
| | | Victor Andrew Service | | | Check # or Ca | ash 6239 |
| | | FOR BU | | IG DEPARTMENT | | (footer/Slab) |
| Temporary Pov | ver | | JILDING & ZONIN Foundation | | | (footer/Slab) |
| The state of the s | | date/app. by | Foundation | date/app. by | ONLY Monolithic | (footer/Slab) date/app. by |
| Under slab rouş | | date/app. by | Foundation Slab | | ONLY | (footer/Slab) date/app. by |
| The state of the s | gh-in plumb | date/app. by ing date/ap | Foundation Slab pp. by | date/app. by | ONLY Monolithic | (footer/Slab) date/app. by Nailing |
| Under slab roug | gh-in plumbi date/ap | date/app. by ing date/ap In: by | Foundation Slab pp. by sulation dat | date/app. by date/app. by | ONLY Monolithic Sheathing/N | (footer/Slab) date/app. by Nailing |
| Under slab roug | gh-in plumbi date/ap | date/app. by ing date/ap | Foundation Slab pp. by sulation dat | date/app. by date/app. by e/app. by El | ONLY Monolithic | (footer/Slab) date/app. by Nailing |
| Under slab roug | gh-in plumb date/ap bing above s | date/app. by ing date/ap In: p. by lab and below wood fl | Foundation Slab pp. by sulation dat | date/app. by date/app. by te/app. by El ate/app. by | ONLY Monolithic Sheathing/N | date/app. by Nailing date/app. by |
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| Under slab roug Framing Rough-in plumb Heat & Air Duck Permanent power | date/ap bing above s et date/ap | date/app. by ing date/ap In: p. by lab and below wood fl | Foundation Slab pp. by sulation dat loor Peri. beam (Linte | date/app. by date/app. by te/app. by El ate/app. by | ONLY Monolithic Sheathing/N | (footer/Slab) date/app. by Nailing date/app. by date/app. by date/app. by |
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| Under slab roug Framing Rough-in pluml Heat & Air Duce Permanent power | date/ap bing above s et date/ap | date/app. by ing date/ap ling p. by ilab and below wood fl ate/app. by te/app. by Utility Pole | Foundation Slab pp. by sulation dat loor Peri. beam (Linte C.O. Final M/H tie de | date/app. by date/app. by e/app. by ate/app. by date/app. by date/app. by date/app. by | ONLY Monolithic Sheathing/N ectrical rough-in Pool Culvert y and plumbing | (footer/Slab) date/app. by Nailing date/app. by date/app. by date/app. by |
| Under slab roug Framing Rough-in plumb Heat & Air Duck Permanent power Pump pole | date/ap bing above s ct date/ap ate/app. by | date/app. by ing date/ap ling p. by ilab and below wood fl ate/app. by te/app. by Utility Pole | Foundation Slab pp. by sulation dat loor Peri. beam (Linte | date/app. by date/app. by e/app. by ate/app. by date/app. by date/app. by date/app. by | ONLY Monolithic Sheathing/N ectrical rough-in Pool Culvert | date/app. by date/app. by date/app. by date/app. by date/app. by date/app. by |
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| Under slab roug Framing Rough-in pluml Heat & Air Duce Permanent power Pump pole Reconnection BUILDING PEI MISC. FEES \$ | date/ap bing above s ct date/app. by date/app. by date/app. by 7 FEE \$ | date/app. by ing date/app p. by clab and below wood flate/app. by de/app. by te/app. by te/app. by date/app. by ZONING | Foundation Slab pp. by sulation dat loor C.O. Final M/H tie de e/app. by RV CERTIFICATION FEI | date/app. by date/app. by Elate/app. by date/app. by date/app. by date/app. by owns, blocking, electricity date/app. by E \$ 0.00 FIRE FEE \$ 219.9 | ONLY Monolithic Sheathing/N ectrical rough-in Pool Culvert y and plumbing Re-roof SURCHARGE 98 WASTE | date/app. by FEE \$ 0.00 |
| Under slab rougher Framing | date/ap bing above s et date/app. by date/app. by date/app. by GRMIT FEE \$ 300.00 | date/app. by ing Instance p. by date/app. by date/app. by de/app. by Le/app. by Le/app. by Utility Pole date/app. by DP & FLOOI DP & FLOOI DP & FLOOI | Foundation Slab pp. by sulation dat loor C.O. Final M/H tie de e/app. by RV CERTIFICATION FEI CERT. FEE \$ 50.00 D ZONE FEE \$ 25.00 | date/app. by date/app. by Elate/app. by date/app. by date/app. by date/app. by owns, blocking, electricity date/app. by E \$ 0.00 FIRE FEE \$ 219.9 CULVERT FEE \$ | Monolithic Sheathing/N ectrical rough-in Pool Culvert y and plumbing Re-roof SURCHARGE 98 WASTE TOTA | date/app. by Alteres 0.00 EFEE \$ 0.00 EFEE \$ 193.00 AL FEE 787.98 |
| Under slab rougher Framing | date/ap bing above s et date/app. by date/app. by date/app. by GRMIT FEE \$ 300.00 FEE \$ DDITION T S PROPERT DTHER APP | date/app. by ing Instance p. by date/app. by date/app. by date/app. by date/app. by date/app. by Decapp. by De | Foundation Slab Slab Slab Sp. by sulation Deri. beam (Linter C.O. Final M/H tie der Evapp. by RV CERTIFICATION FEI CERT. FEE \$ 50.00 DISTRIBUTION THE PUBLICATION | date/app. by date/app. by Elate/app. by date/app. by date/app. by date/app. by owns, blocking, electricity date/app. by E \$ 0.00 FIRE FEE \$ 219.9 CULVERT FEE \$ | ONLY Monolithic Sheathing/N ectrical rough-in Pool Culvert y and plumbing Re-roof SURCHARGE 98 WASTE TOTA ITIONAL RESTRICTIONAL RESTRICTIONAL | date/app. by Alteres 0.00 EFEE \$ 0.00 EFEE \$ 193.00 ALFEE 787.98 |

RE 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 COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUM | MBER(| 709-169 | CONTRACTOR | formiz 1 | S.:sa | PHONE | |
|------------------------------------|-----------------------------|--|---|---------------------------------------|---------------------------------|-------------------------------------|-------|
| | <i>x</i> : | (80) | | | | | |
| | | THIS FORM MUST BE | SUBMITTED PRIOR TO | THE ISSUANCE OF | A PERMIT | | |
| | | | | | | | |
| records of the Ordinance 89- | subcontract 6, a contrac | ermit will cover all tra tors who actually did to tor shall require all su y insurance and a vali | the trade specific w bcontractors to pro | ork under the pe | ermit. Per Flo f workers' co | rida Statute 440 and mpensation or | Į |
| Any changes, t start of that su | the permitte ibcontracto | ed contractor is respo r beginning any work | nsible for the corre | ected form being sult in stop work | submitted to corders and/ | o this office prior to or fines. | the |
| ELECTRICAL | Print Name | Glen W | othinatur | Signature / | Venn (1) | 94 | |
| | , | C 1300295 | () | Phone #: 380 | 1 0 . | - 400) I | |
| | License II. | | lifier Form Attached | | 207 | 1401 | |
| | | | | | | | |
| MECHANICAL/ | Print Name | | | Signature | | | |
| A/C | License #: | Oua | lifier Form Attached | Phone #: | | | |
| | | | · | | | | |
| | | | | | | | |
| | | | | | | | |
| Qualifier Forn | ns cannot b | e submitted for any | Specialty License | • | | | |
| Specialty Li | cense | License Number | Sub-Contractors P | rinted Name | Sub-C | ontractors Signature | Jy. R |
| MASON | | | | * | | | |
| CONCRETE FIN | IISHER | | | | 10 | | |
| applying for an compensation | d receiving for its empl | mits; identification of a building permit, sho oyees under this chap for a building permit. | w proof and certify ter as provided in s | to the permit is | suer that it h | as secured | |
| Revised 10/30/ | 2015 | | | | | | |

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUM | IBER 1709-Le9 CONTRACTOR | Plonge Noris PHONE | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|
| THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT | | | | | | | | | | | |
| records of the solution of the | Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have ecords of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County. Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines. | | | | | | | | | | |
| ELECTRICAL | Print Name License #:Qualifier Form Attached | Signature | | | | | | | | | |
| MECHANICAL/ | Print Name Million A. Boland License #: 181714 Qualifier Form Attached | Signature 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | | | |

Qualifier Forms cannot be submitted for any Specialty License.

| Specialty License | License Number | Sub-Contractors Printed Name | Sub-Contractors Signature |
|-------------------|----------------|------------------------------|---------------------------|
| MASON | | | |
| CONCRETE FINISHER | | | |

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.

Revised 10/30/2015



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, ROWNIE NOSKS | give this authority fo | or the job address show below | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|
| only, | Job Address LOOP | , and I do certify that | | | | | | | | |
| the below referenced person(s) listed on this form is/are under my direct supervision and control | | | | | | | | | | |
| and is/are authorized to purcha | se permits, call for inspections and | d sign on my behalf. | | | | | | | | |
| Printed Name of Authorized Person | Signature of Authorized Person | Authorized Person is (Check one) | | | | | | | | |
| Sorp Crews | Sonia Crews | Agent Officer Property Owner | | | | | | | | |
| Linda Craft | Linda Craft | Agent Officer Property Owner | | | | | | | | |
| | , | Agent Officer Property Owner | | | | | | | | |
| under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed | t I am responsible for all permits presponsible for compliance with a nsing Board has the power and authorized by him/her or by his/her authorized sponsibility for compliance grante | Il Florida Statutes, Codes, and uthority to discipline a license diperson(s) through this | | | | | | | | |
| License Holders Signature (Not NOTARY INFORMATION: STATE OF: Florida The above license holder, whose personally appeared before me | arized) License Nu COUNTY OF: Columbia Be name is Runnic Norm | <u> </u> | | | | | | | | |
| yardı Eduşbeth NÖTARY'S SIGNATURE | and is known by me or has produ on this 2 c day | | | | | | | | | |

clf 6239

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

| | For Office Use Only (Revised 7-1-15) Zoning Official Building Official Top 10/9/17 |
|----|--|
| | AP# 17 69 - 109 Date Received 9/25/17 By UH Permit # 35 873 |
| | Flood Zone Development Permit Zoning Land Use Plan Map Category |
| | Comments |
| F | FEMA Map# Elevation Finished Floor 146000 River In Floodway |
| | Recorded Deed or Deroperty Appraiser PO Site Plan FH # 17 - 06 9 Well letter OR |
| | Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid |
| | DOT Approval Parent Parcel # STUP-MH 911 App |
| [| Ellisville Water Sys Assessment Out County In County Sub VF Form |
| | |
| Pr | operty ID # 31-58-17-09465-015 Subdivision Meadow West Estates Lot# 5 |
| • | New Mobile Home MH Size 28 X44 Year 2018 |
| • | Applicant Sonya Crews/Linda Copt Phone # 863-517-5701 |
| • | Address 825 NW Turner Ave Apt 102 Lake City F1 32055 |
| • | Name of Property Owner Michael + Shirley DeHer Phone # 865 - 360 - 6280 |
| • | 911 Address 534 SW Galilee Loop lata City fl 32024 |
| • | Circle the correct power company - <u>FL Power & Light</u> - <u>Clay Electric</u> |
| | (Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u> |
| | Name of Owner of Mobile Home Michael & Shirley Dethone # 865-360-6280 |
| | Address 2940 SE October Rd Lot 2 lake City |
| | Relationship to Property Owner |
| | Current Number of Dwellings on Property |
| × | Lot Size Total Acreage5 |
| ٠ | Do you : Have Existing Drive 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 NO |
| | Driving Directions to the Property on NE madisn 1st Don N Marion |
| | 20 (B) on W Duval, (D) on N 1st St. (B) on SW |
| | Tustenuggee (R) on Sw Galilee Loop, property on |
| -2 | New of the state o |
| | Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716 Installers Address 1004 Sw Charles Terr (all City) |
| | License Number PH 10 25 145 Installation Decal # 45037 |
| | |
| | Emailed Songa 10-2-17 20 SODKE IN DETER - 10.1117 |
| | ((0- 3-1) |

| Installer verifies all information given with this permit workshee | Plumbing |
|---|--|
| | Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg |
| Other: | Electrical |
| 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 | Date Tested 2- 2C-017 |
| Miscellaneous Skirting to be installed. YesNo | Installer Name |
| 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 | reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 benoting capacity. Installer's initials |
| Weatherproofing | anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test |
| Type gasket Installed: Pg Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes | - 10 |
| a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket. | x1500 x1500 x1500 |
| 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 | 3. Using 500 lb. increments, take the lowest reading and round down to that increment. |
| | |
| Type Fastener: Length: Spacing: Type Fastener: Length: Spacing: Spacing: For used homes a Min. 30 gauge, 8" wide, galvanized will be centered over the peak of the roof and fastened | POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations. |
| Floor: Type Fastener: $\angle R$ Length: C Spacing: 27 | × LSW × KW × KW |
| Water drainage: Natural Swale Pad Other | The pocket penetrometer tests are rounded down to Le psf or check here to declare 1000 lb. soil without testing. |
| Site risparation | POCKET PENETROMETER TEST |
| Cito Deparation | |

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

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

home suns

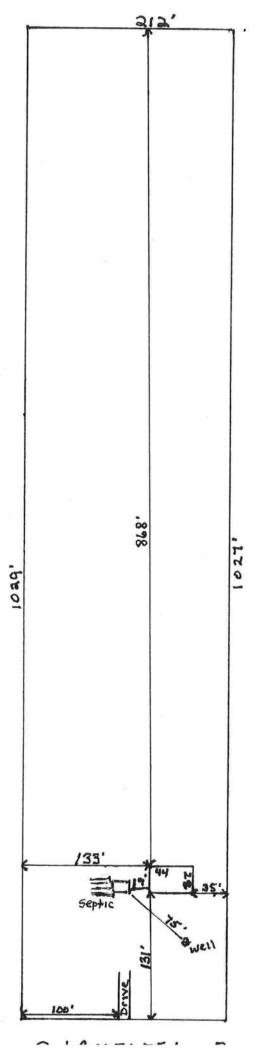
Installer Signature

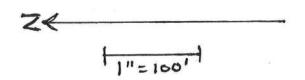
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.

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

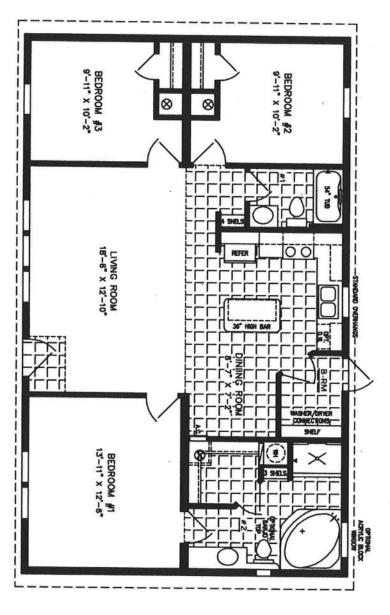
Pg.

Date 9-26-017





The Imperial Limited





NOTE:
OPEN WIR WAR SULFRENCH
TO BENTEY OFWAR HELS
THAT ARE OF THE FIRST

28' X 44'

1,174 SQUARE FEET

Model IMLT-4448B-691

600 Packard Court ■ Safety Harbor, Florida 34695 ■ Telephone (727) 726-1138 www.jachomes.com/Floor-Plans 2014

DESIGNED FOR ZONES II & III (ALL SIZES ARE APPROX.)

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

| | | AD | N MAPE DITION | NO - I R TO I | BEE N | 07E 1 -000 | O. S POI | i VINE. | | | | AB-T | REFE | R TO / | ND-TO | -OMESI LUMIN | D THE ANCE | CAJAN IOR 6 | i IXMS. | | | | | |
|---|--------------|-------------|---------------------|------------------|-------------|---------------|-------------|---|-------------------------------------|----------------------------------|---|-------------|---------------------|--------------------------------|--------------------|-----------------|-------------------|----------------|-------------------|--|--|------------------|--|--|
| СОРУЯДВИТ | (a) | (P) | (E) | © | (C) | (B) | (3) | s | | a | | ⊕ | ⊘ | ⊘ | ⊘ | \Diamond | ⊘ | ⊘ | \Diamond | COL. NUM. | COLUI | | | |
| © 2013, J | 676 s | 576 s | 432.875 | 400 sq. in | 396 sq. in | 342.25 | 256 sq. | SIZE (sq.in.) | MINIMUM PIER PAD | Q, | Q. | O, | O, | 0" | O. | 0" | O. | 18'-6" | 18'-6" | SPAN | COLUMN INFO. | | | |
| 2013, JACOBSEN HOMES, | sq. in. | sq. in. | sq. in. | q. in. | q. in. | sq. in. | q. in. | .) | | ° | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4575 | 4575 | LOAD (IN POUNDS) | TABLE | | | \$3 <u></u> |
| | 87 W | 74 | 54 | 40 1/0 | 40 | 1 | M | 1000 part SOIL | | l ° | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 659 | 659 | 1000 par son | COL | WW. | | JACOBSEN HO PO BOX 368, 600 PACK SAPETY HARBOR, FLORIDA |
| TY HARBO | COGN | NIO OIN | 8 | W 24 | WA 22 | 24 89 | 3/1 00- | 1500 per soil | I-BE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 439 | 439 | 1500 par soil | UMN P | w.Ja | (727) |)BS |
| BAFETY HARBOR, FLORIDA | NIIO DIIN | N N | OLN eBBI | OIN OIN | OLN SEER | 301 T/E | 201 SE | 2000 par son | I-BEAM PIER | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 329 | 329 | 2000 per son | COLUMN PAD - MIN. | Chon | 726 | ROEN ROEN |
| È | CHEN | CHIN | OUN | DRM | DIEN | NIO OIN | 8 | 2500 per son | R SPA | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 264 | 264 | 2500 per son | | www.jachomes.com | (727) 726-1138 | PA T |
| M SLHein | N NO | N N N | NIO OIN | ONN | NIO | NIO | OIN | 3000 per son | SPACING | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 264 | 264 | 3000 par Soil | SIZES (sq. | | _ | 5 > |
| RESERVED. | OIN CHIN | NIO | ORN | OIN | OWN | ORN | Oth | 3500 per soil | , | e | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 264 | 264 | 3500 per soil | in.) | | | NES |
| HUB | 84 | 84 | 84 | 84 | 84 | 84 | 84 | 1000 per son | | | | , | F 8 | | , , | p p | p r | S | 6 | |) J J | - | 522 | 2821 |
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REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)



Jacobsen Homes of Lake City

PURCHASE AGREEMENT

Locally Owned and Operated

agreement the same as though it were printed above

the signatures: that buyers are of statutory age or older; of have been legally emancipated; that the within described merchandise, the optional equipment and accessories thereon and, insurance if included, has been voluntarily purchased.

The property being traded in is free from all encumbrances

3973 W. U.S. Hwy. 90 Lake City, Florida 32055

Ph. 386-438-8458 Fax: 386-438-8472

| | | | - | | | | | |
|--|-----------------|-------------|----------|--|-------------------------|--|--|-------------|
| SOLD TO michael & Shirle De | tte | PHON | E | 865 - 36 | 0-6 | 280 DAT | E 9-26-17 | Ä |
| ADDRESS 2960 St October By. Lale | G. L. L. | , | ΠY | Columbia | 12 | SALESMA | | 5 |
| Subject to the Terms and Conditions Stated on Both Sides of this Agreement: | Spiller Agreeme | | | | grees to Pr | urchase the Following I | Described Presents | |
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| | | | L | ASH DOWN AYMENT | 73. | 874 - | | |
| Land Tryronands Trille: | | | 2.1 | ESS TOTAL CREI | OTTS | | | |
| 4' well up to 100 ft | | | _ | INPAID BALANCE | | • 2 | \$ 0 | |
| 900 gallon Standard Septic (| not 1 | wond) | P | irchase price ther | efor is p | aid in full in cash | Seller until the a | n of a |
| installed with required drawlish | | | R(b) | tail Installment Co a financing age | ontract, on ncy; the | or a Security Agree reupon title to the | ement and its acception | tance |
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| & wind & fill hooken | | | de | livery may not be | made u | intil a later date. | REEMENT IS SUBJEC | - |
| Driving or Colvert itsegred | | | N | CESSARY CORREC | CTIONS, A | AND ADJUSTMENTS | CONCERNING CHAI | NGES |
| Colombia Count Permits | | | P | ırchaser represen | ts he/sh | e examined the p | roduct and found it is of acceptable qu | suit- |
| H.V.D Look Horre Pal | | | ar | d that purchaser aking this determ | relied u | pon his/her judge | ement and inspection | on in |
| | | | p | nere is no assur aced, upon any | ance a surface | mobile home cother than of bla | an remain level v | vhen e. |
| Seller is not permitted to make plumbing or electrical connections, or connect | ng of certain | natural gas | Ph | urchasers ceri | ify tha | t the matter p | orinted on the b | eck this |

or propane appliances where state or local ordinances require a licensed plumber or electrician so to

do. Special building ordinances or laws requiring plumbing, electrical or construction changes are not the responsibility of Selfer or the manufacturer. Selfer is not responsible for obtaining health or sanitation permits, nor for local, county or state permits involving restrictive zoning. Cost of changes needed for compliance must be borne by Buyer. It is solely the Buyers responsibility to assure their chosen home site

is acceptable for home placement without violation of any local, state, or federal guidelines.

Andrews Site Prep, Inc. 8230 SW State Road 121 Lake Butler, Fl. 32054 386-867-0572 Well Lic # 2688

May 12, 2017

To: Whom it may concern,

We will be drilling a 4" well for Detter located at SW Galilee Loop Lake City, FL. Parcel 31-5S-17-09465-015. The well should go approximately 120 feet with a casing depth of 84 feet. We will install a 1hp aermotor submersible pump and a 32 gallon challenger bladder tank.

lup Andrews

Thank you,

Danielle Andrews



COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125 x 1 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.com



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:

10/5/2017 9:24:06 AM

Address:

534 SW GALILEE Loop

City:

LAKE CITY

State:

FL

Zip Code

32024

Pracel ID

09465-015

REMARKS: Address for proposed structure on parcel.

Address Issued By:

Signed:/ Ronal N. Croft

Columbia County GIS/911 Addressing Department

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.



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

| CR# | 10-6616 | |
|------------|----------|---|
| PERMIT NO. | 17-06191 | < |
| DATE PAID: | 9/25/17 | 1 |
| FEE PAID: | 310.00 | |
| RECEIPT #: | 1308612 | |

| SYSTEM | E TREATMENT AND | 1 | RECEIPT | 130861 |
|---|--|---|----------------------------|---------------------|
| [X] New System [] E | FOR CONSTRUCTION XISTING System bandonment TER | [] Holding T | ank [] | Innovative |
| AGENT: PAUL LLOYD | | | TELEPHONE: (| 865) 360-6280 |
| MAILING ADDRESS: 2960 SE OCTO | BER RD. | LAKI | E CITY | |
| TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUES | PROVIDE DOCUMENT | OR 489.552, FLOR | RIDA STATUTES | IT IS THE |
| PROPERTY INFORMATION | | | | |
| LOT: 5 BLOCK: N/A | SUBDIVISION: MEAD | OW WEST EST. UNRE | EC PL | ATTED: LUK |
| PROPERTY ID #: 31-5S-17-09465-0 | 15 zo | ONING: I/ | M OR EQUIVAL | LENT: [NO] |
| PROPERTY SIZE: 5.000 ACRES | WATER SUPPLY: [X |] PRIVATE PUBLIC | : []<=2000G | PD [1>2000Gpn |
| IS SEWER AVAILABLE AS PER 381 | | | | |
| PROPERTY ADDRESS: SE GA | | | | |
| DIRECTIONS TO PROPERTY: 441 S | OUTH, TURN RIGHT O | ON TUSTENUGGE RD. SITE ON LEFT. | TURN RIGHT O | ON GALILEE ST. |
| BUILDING INFORMATION [X] F | RESIDENTIAL [] | COMMERCIAL | | |
| Unit Type of No. Establishment | No. of Buildi Bedrooms Area S | ng Commercial/In qft Table 1, Chap | stitutional ster 64E-6, F7 | System Design AC |
| MOBILE HOME | 31, | 174 | | |
| 2 | | | | |
| 3 | | | 29614 | |
| 4 | | | | |
| [] Floor/Equipment Drains | [] Other (Speci | ify) | | |
| SIGNATURE: | | | DATE: | |



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT #: 12-SC-1791859

APPLICATION #: AP1308612

DATE PAID: 917-117

FEE PAID: 3391588

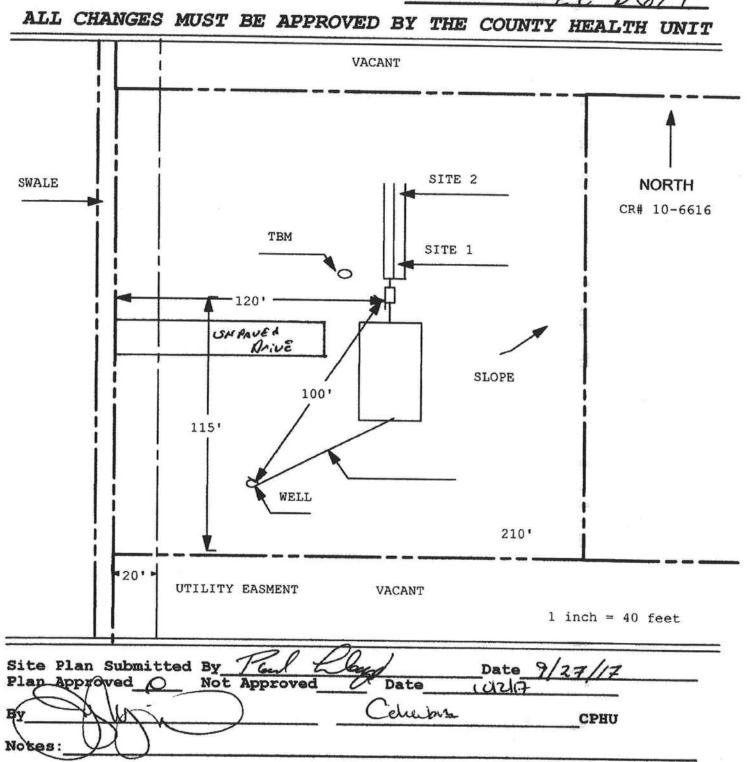
DOCUMENT #: PR1077100

| CONSTRUCTION PERMIT FOR: OSTDS New |
|--|
| APPLICANT: MIKE**17-0619 DETTER |
| PROPERTY ADDRESS: SE GALILEE St Lake City, FL 32025 |
| LOT: 5 BLOCK: SUBDIVISION: MEADOWS WEST ESTATES |
| PROPERTY ID #: 09465-015 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER] [OR TAX ID NUMBER] |
| SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY. |
| SYSTEM DESIGN AND SPECIFICATIONS |
| T [900] GALLONS / GPD |
| D FILL REQUIRED: [6.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES 1.) The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd. 2.) A 911 address shall be required prior to final approval. |
| E R |
| SPECIFICATIONS BY: PAUL LLOYD TITLE: PSE |
| APPROVED BY: TIME: Environmental Specialist I Columbia |
| DATE ISSUED: D/OP/2017 EXPIRATION DATE: 04/02/2019 |
| DH 4016, 08/09 (Obsoletes all previous editions which may not be used) Incorporated: 64E-6.003, FAC Page 1 of 3 |

AP1308612

SE1048629

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



Inst. Number: 201712017478 Book: 1344 Page: 2049 Page 1 of 2 Date: 09/26/2017 Time: 12:51 PM

P. DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 227.50

Prepared by and Return to: Crystal L. Curran, an employee of Alachua Title Services, LLC, 16407 N.W. 174th Drive, Suite C Alachua, Florida 32615 386-418-8183

File Number:17-255

al year W

Warranty Deed

Made on September 19, 2017 A.D. by and between **Keith F. Orman**, whose address is 135 SW REGIMENT PLACE, Lake City, Florida 32024, hereinafter called the "grantor", to **Michael Detter and Shirley Detter, husband and wife**, whose post office address is 2690 SE OCTOBER ROAD, Lake City, Florida 32025, hereinafter called the "grantee":

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations).

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **Columbia** County, Florida, to-wit:

Lot 5, of Meadow West Estates, an unrecorded subdivision more particularly described as follows: Commence at the Northeast corner of the Southeast 1/4 of the Northeast 1/4 of Section 31, Township 5 South, Range 17 East, Columbia County, Florida, and run S 0°18'08" E along the East line of said Section 31 a distance of 21.77 feet; thence S 88°29'51" W, 40.00 feet to the West right-of-way line of County Road No. 131 and the South right-of-way line of Galilee Church Road (a county maintained graded road); thence continue S 88°29'51" W along said South right-of-way 260.06 feet; thence S 0°18'08" W, 898.79 feet to the Point of Beginning; thence continue S 0°18'08" W, 212.45 feet; thence S 89°38'19" W, 1029.64 feet to the East right-of-way of said county grade; thence N 2°05'54" E along said right-of-way, 100.68 feet; thence N 0°08'40" W along said right-of-way, 111.86 feet; thence N 89°38'19" E, 1027.24 feet to the Point of Beginning.

Parcel Identification Number: R09465-015

Grantor, Keith Orman, warrants that this is not his homestead property nor contiguous to his homestead property.

Subject to covenants, conditions, restrictions and easements of record.

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 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; that the grantor 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, 2016.

Inst. Number: 201712017478 Book: 1344 Page: 2050 Page 2 of 2 Date: 09/26/2017 Time: 12:51 PM P. DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 227.50

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 these witnesses:

Witness Signature

Print Name:

Witness Signature Print Name:

Keith F. Orman

135 SW REGIMENT PLACE, Lake City, Florida 32024

State of Florida County of Alachua

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED before me on September 19, 2017, by Keith F. Orman, who has produced a valid driver's license as identification.

Notary Print Name

My Commission Expires

CRYSTAL L. CURRAN Commission # FF 128806 Expires June 18, 2018