

OK # 2503 / 2518

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official LW / CH

Building Official MS

AP#

44464

Date Received

1/24/2020

By CH

Permit #

39255

Flood Zone

X

Development Permit

Zoning A-3

Land Use Plan Map Category

Ag

Comments

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☒

Recorded Deed or

☒

Property Appraiser PO

☒

Site Plan

☒

EH #

20-0079

☐

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 Paid on Property

☐

Out County

☐

In County

☒

Sub VF Form

Property ID #

17-5S-16-03641-003

Subdivision

NA

Lot# NA

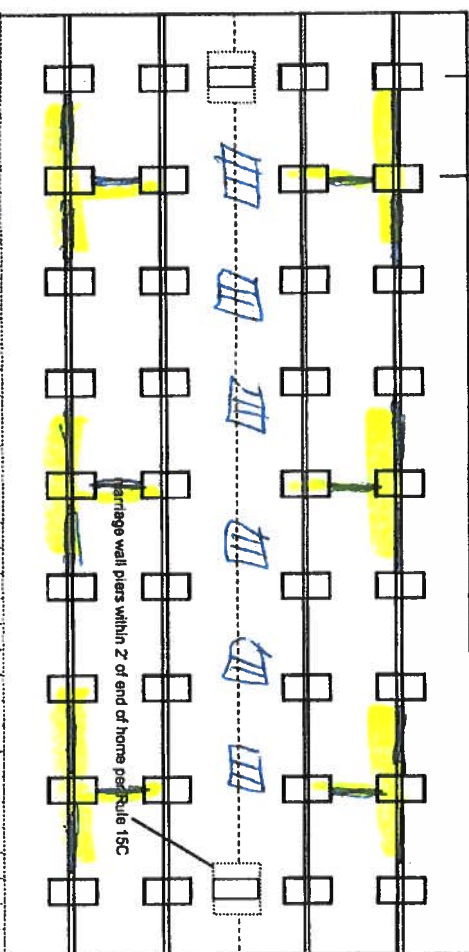
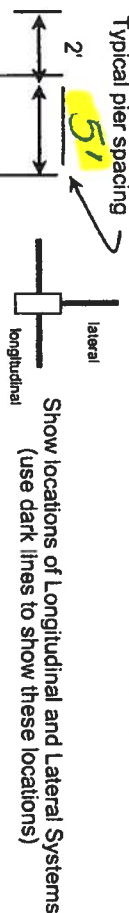
- New Mobile Home X Used Mobile Home _____ MH Size 28 x 76 Year 2020
- Applicant Dale Burd Phone # 386-365-7674
- Address 20619 County Road 137, Lake City, FL, 32024
- Name of Property Owner Christopher Moon & Samantha Evans Phone# 386-984-9171
- 911 Address 1023 SW Carpenter Rd LC, FL 32024
- Circle the correct power company - FL Power & Light - (Clay Electric)
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Same Phone # 386-984-9171
Address 1023 SW Carpenter Road, Lake City, FL, 32024
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1 (1 to be removed)
- Lot Size 289 x 1006 Total Acreage 6
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Driving Directions to the Property SR 47 South TR CR 240, TL Carpenter Raod, 9/10ths mile on Left
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245, Lake City, FL, 32025
- License Number IH-1025386 Installation Decal # 65803

2/4 - MG emailed Dale

Date:

Manufacturer	Length x width
Dish Homes	16x28

Installer's initials K.O.



Triple/Quad	Serial #
<input type="checkbox"/>	HL19LC1344

Load bearing capacity (sq in)	Footer size (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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

interpolated from Rule 15C-1 pier spacing table

1-beam pier pad size	18x25
Perimeter pier pad size	16x16
Other pier pad sizes (required by the mfg.)	17x25

**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
12 in.	12 in.
18 in.	18 in.
24 in.	24 in.
30 in.	30 in.
36 in.	36 in.
42 in.	42 in.
48 in.	48 in.
54 in.	54 in.
60 in.	60 in.
66 in.	66 in.
72 in.	72 in.
78 in.	78 in.
84 in.	84 in.
90 in.	90 in.
96 in.	96 in.
102 in.	102 in.
108 in.	108 in.
114 in.	114 in.
120 in.	120 in.
126 in.	126 in.
132 in.	132 in.
138 in.	138 in.
144 in.	144 in.
150 in.	150 in.
156 in.	156 in.
162 in.	162 in.
168 in.	168 in.
174 in.	174 in.
180 in.	180 in.
186 in.	186 in.
192 in.	192 in.
198 in.	198 in.
204 in.	204 in.
210 in.	210 in.
216 in.	216 in.
222 in.	222 in.
228 in.	228 in.
234 in.	234 in.
240 in.	240 in.
246 in.	246 in.
252 in.	252 in.
258 in.	258 in.
264 in.	264 in.
270 in.	270 in.
276 in.	276 in.
282 in.	282 in.
288 in.	288 in.
294 in.	294 in.
300 in.	300 in.
306 in.	306 in.
312 in.	312 in.
318 in.	318 in.
324 in.	324 in.
330 in.	330 in.
336 in.	336 in.
342 in.	342 in.
348 in.	348 in.
354 in.	354 in.
360 in.	360 in.
366 in.	366 in.
372 in.	372 in.
378 in.	378 in.
384 in.	384 in.
390 in.	390 in.
396 in.	396 in.
402 in.	402 in.
408 in.	408 in.
414 in.	414 in.
420 in.	420 in.
426 in.	426 in.
432 in.	432 in.
438 in.	438 in.
444 in.	444 in.
450 in.	450 in.
456 in.	456 in.
462 in.	462 in.
468 in.	468 in.
474 in.	474 in.
480 in.	480 in.
486 in.	486 in.
492 in.	492 in.
498 in.	498 in.
504 in.	504 in.
510 in.	510 in.
516 in.	516 in.
522 in.	522 in.
528 in.	528 in.
534 in.	534 in.
540 in.	540 in.
546 in.	546 in.
552 in.	552 in.
558 in.	558 in.
564 in.	564 in.
570 in.	570 in.
576 in.	576 in.
582 in.	582 in.
588 in.	588 in.
594 in.	594 in.
600 in.	600 in.
606 in.	606 in.
612 in.	612 in.
618 in.	618 in.
624 in.	624 in.
630 in.	630 in.
636 in.	636 in.
642 in.	642 in.
648 in.	648 in.
654 in.	654 in.
660 in.	660 in.
666 in.	666 in.
672 in.	672 in.
678 in.	678 in.
684 in.	684 in.
690 in.	690 in.
696 in.	696 in.
702 in.	702 in.
708 in.	708 in.
714 in.	714 in.
720 in.	720 in.
726 in.	726 in.
732 in.	732 in.
738 in.	738 in.
744 in.	744 in.
750 in.	750 in.
756 in.	756 in.
762 in.	762 in.
768 in.	768 in.
774 in.	774 in.
780 in.	780 in.
786 in.	786 in.
792 in.	792 in.
798 in.	798 in.
804 in.	804 in.
810 in.	810 in.
816 in.	816 in.
822 in.	822 in.
828 in.	828 in.
834 in.	834 in.
840 in.	840 in.
846 in.	846 in.
852 in.	852 in.
858 in.	858 in.
864 in.	864 in.
870 in.	870 in.
876 in.	876 in.
882 in.	882 in.
888 in.	888 in.
894 in.	894 in.
900 in.	900 in.
906 in.	906 in.
912 in.	912 in.
918 in.</	

4 ft 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer
Manufacturing Stabilizing Device w/ 1 stored Arms

Manufacturer
A-1000-110117

OTHER TIES

Sidewall 24

Longitudinal

Shearwall

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

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

X 1500 X 1600 X 1600

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X 1500 X 1500 X 1600

TORQUE PROBE TEST

The results of the torque probe test is 295 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 requires anchors with 4000 lb. holding capacity.

L.S. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

1-22-2020

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. 29

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Application Number: _____

Date: _____

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16"
Walls: Type Fastener: scows Length: 4 Spacing: 16"
Roof: Type Fastener: lags Length: 6 Spacing: 16"
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 L.S.

Type gasket Pg. 22

Foam

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 22
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

Miscellaneous

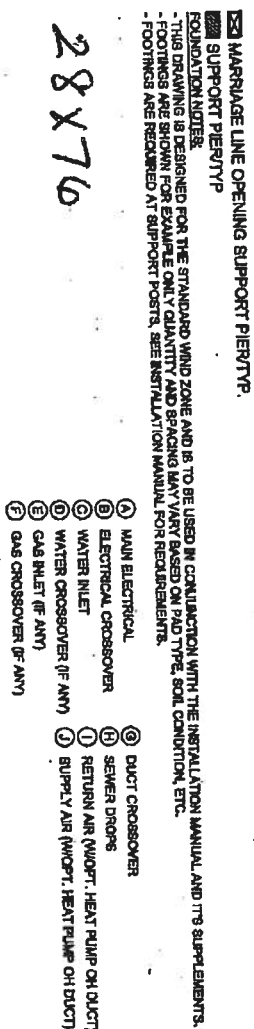
Skirting to be installed. Yes ✓ No ✓
Dryer vent installed outside of skirting. Yes ✓ N/A ✓
Range downflow vent installed outside of skirting. Yes ✓ N/A ✓
Drain lines supported at 4 foot intervals. Yes ✓
Electrical crossovers protected. Yes ✓
Other: ✓

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

Robert Shepard

Date 1-22-2020



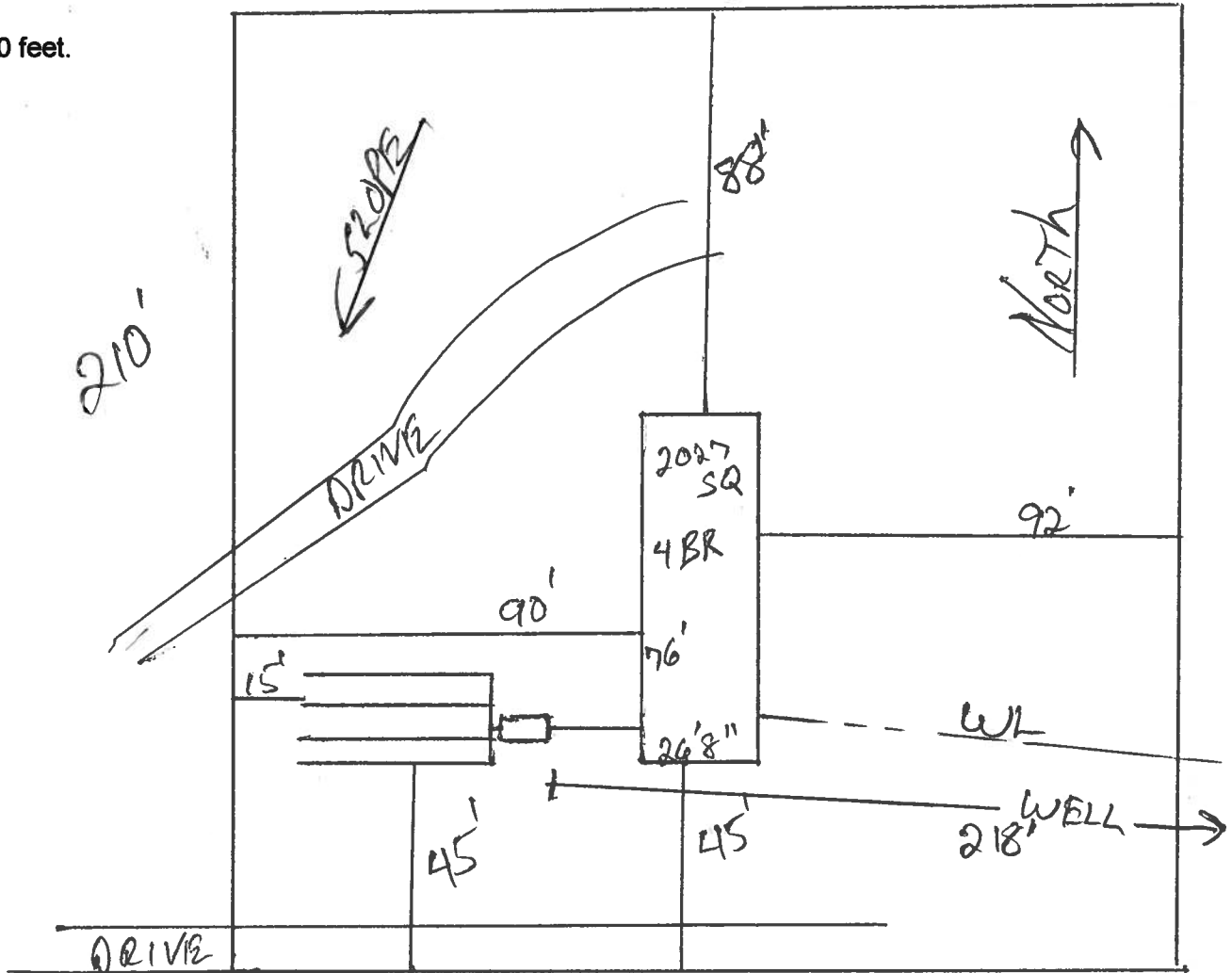
28X76

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT**

Permit Application Number _____

----- *Moan* ----- **PART II - SITEPLAN** ----- *210'* -----

Scale: 1 inch = 40 feet.



Notes: *1 of 6 Acres SRR Attached*

Site Plan submitted by: *[Signature]* CONTRACTOR
 Plan Approved _____ Not Approved _____ Date _____
 By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Legend

2018Aerials

LidarElevations



SectionTownshipAndRange

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Lake City Limits

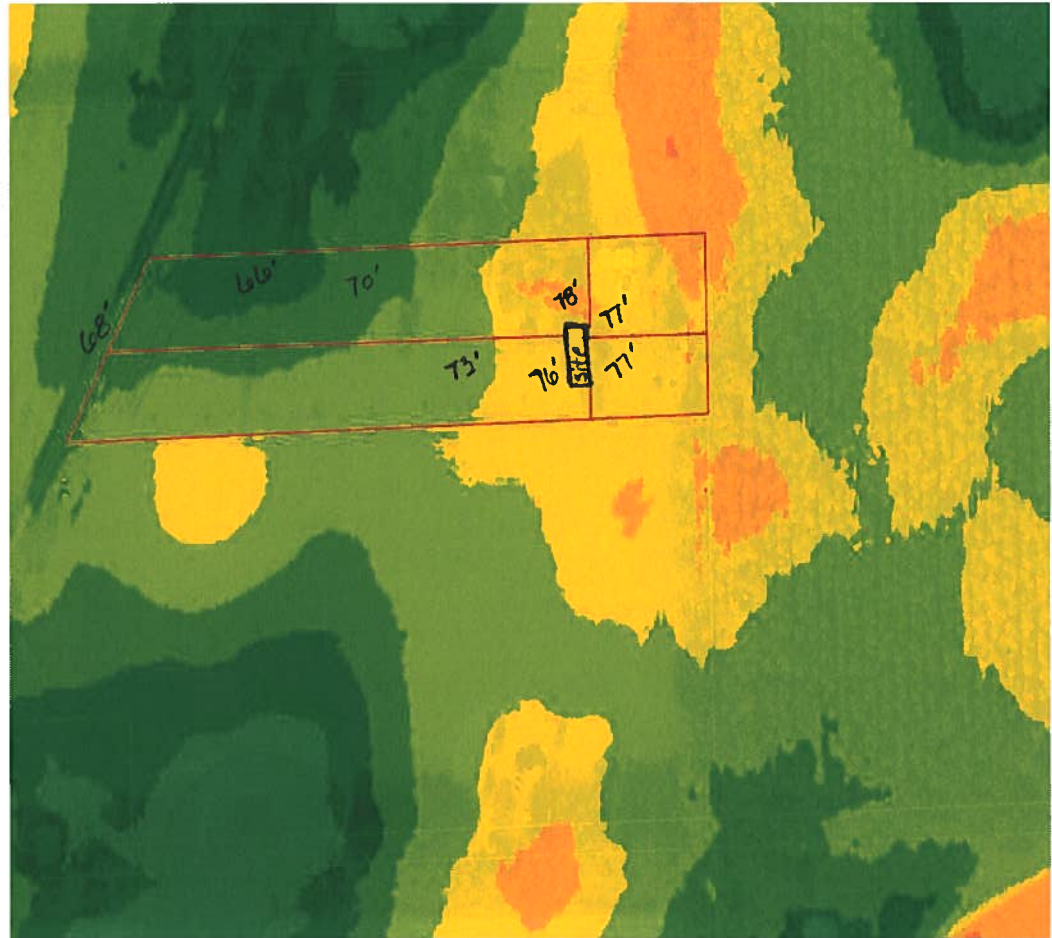
Parcels

Roads

others

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Jan 30 2020 08:45:09 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 17-5S-16-03641-003

Owner: DEES MICHAEL D

Subdivision:

Lot:

Acres: 6.110985

Deed Acres: 6 Ac

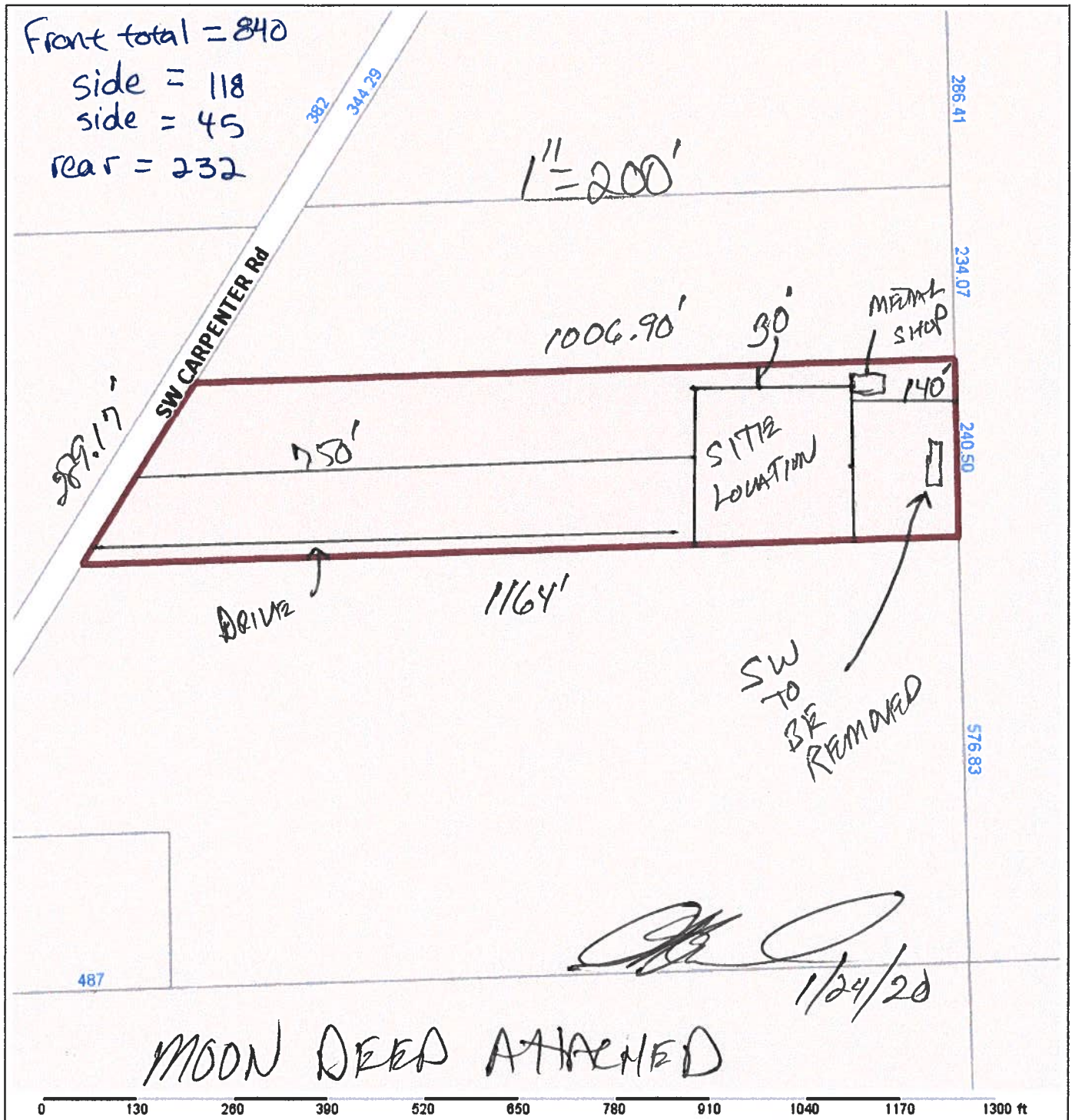
District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3, Environmentally Sensitive Areas -1

Flood Zones: A,

Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.



Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 17-5S-16-03641-003 HX H3 | MOBILE HOM (000200) | 6 AC
COMM NE COR OF S1/2 OF SW1/4, RUN S 520.48 FT FOR POB, CONT S 240.50 FT, W 1166.21 FT TO E LINE OF CO RD, RUN NE 289.07 FT, E 1009.06 FT TO POB. ORB 4

Owner: DEES MICHAEL D		2020 Working Values			
1023 SW CARPENTER RD		Mkt Lnd	\$31,883	Appraised	\$40,180
LAKE CITY, FL 32024		Ag Lnd	\$0	Assessed	\$37,883
Site:	1023 CARPENTER RD, LAKE CITY	Bldg	\$4,797	Exempt	\$25,000
		XFOB	\$3,500	county:	\$12,883
Sales Info	11/17/2006			Total	city: \$12,883
	2/21/1997			Taxable	other: \$12,883
	7/10/1981	Just	\$40,180		school: \$12,883

NOTES:



Columbia County, FL

This Instrument Prepared by & return to:

Name: Karen, an employee of
Osceola Land Title, Inc.
Address: 577 South 6th Street
Macclenny, Florida 32063
16557-19
Parcel I.D. #: 17-SS-16-03641-003

Inst: 202012001870 Date: 01/23/2020 Time: 11:48AM
Page 1 of 2 B: 1404 P: 69, P.DeWitt Cason, Clerk of Court Colum
County, By: BD
Deputy ClerkDoc Stamp-Deed: 406.00

Grantee S.S. #:

Grantor S.S. #:

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 16th day of January, A.D. 2020, by **MICHAEL D DEES**, an unmarried man, hereinafter called the grantor, to **CHRISTOPHER M MOON and SAMANTHA EVANS, husband and wife**, whose post office address is 1023 SW Carpenter Rd, Lake City, FL 32024, 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 **\$58,000.00** 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:

A part of the South 1/2 of the SW 1/4 of Section 17, Township 5 South, Range 16 East, more particularly described as follows:

Commence at the Northeast corner of said S 1/2 of the SW 1/4 and run S 0°15'10" E along the East line thereof, 520.48 feet for a Point of Beginning; thence continue S 0°15'10" E, 240.50 feet, thence S 88°58'11" W, 1166.21 feet to the East line of a county graded road; thence N 32°40'28" E along said road, 289.07 feet; thence N 88°58'11" E, 1009.06 feet to the Point of Beginning.

SUBJECT TO TAXES FOR THE YEAR 2020 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

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 he is lawfully seized of said land in fee simple; that he 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, 2019.

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:

Tracy Archambault
Witness Signature (as to first Grantor)

Tracy Archambault
Printed Name

[Signature]
Witness Signature (as to first Grantor)

Karen Thomas
Printed Name

Michael D Dees L.S.
Michael D Dees
Address:
1023 SW Carpenter Rd, Lake City, FL 32024

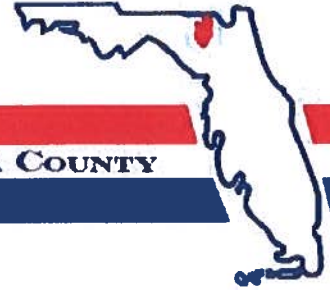
State of Florida
County of Baker

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online
notarization, this 16th day of January, 2020, by Michael D Dees, who is known to me or who has produced
FL DL as identification.



Tracy Archambault
Signature of Acknowledger
My commission expires _____

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
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: **1/29/2020 8:52:17 PM**
Address: **1023 SW CARPENTER Rd**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **03641-003**

REMARKS: Address Verification.

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

Parcel: 17-5S-16-03641-003

Owner & Property Info

Owner	DEES MICHAEL D 1023 SW CARPENTER RD LAKE CITY, FL 32024		
Site	1023 CARPENTER RD, LAKE CITY		
Description*	COMM NE COR OF S1/2 OF SW1/4, RUN S 520.48 FT FOR POB, CONT S 240.50 FT, W 1166.21 FT TO E LINE OF CO RD, RUN NE 289.07 FT, E 1009.06 FT TO POB. ORB 471-434, 835-371 DC 1098-1995 (IRENE ANDERSON)		
Area	6 AC	S/T/R	17-5S-16
Use Code**	MOBILE HOM (000200)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2019 Certified Values		2020 Working Values	
Mkt Land (2)	\$31,883	Mkt Land (2)	\$31,883
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$4,572	Building (1)	\$4,797
XFOB (1)	\$3,500	XFOB (1)	\$3,500
Just	\$39,955	Just	\$40,180
Class	\$0	Class	\$0
Appraised	\$39,955	Appraised	\$40,180
SOH Cap [?]	\$3,175	SOH Cap [?]	\$2,297
Assessed	\$36,780	Assessed	\$37,883
Exempt	HX H3 \$25,000	Exempt	HX H3 \$25,000
Total	county:\$11,780 city:\$11,780	Total	county:\$12,883 city:\$12,883
Taxable	other:\$11,780 school:\$11,780	Taxable	other:\$12,883 school:\$12,883

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM


APPLICATION NUMBER 44404 CONTRACTOR Robert Sheppard PHONE 386-623-2203

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Christopher Moon

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	Print Name <u>Christopher Moon</u>	Signature _____
	License #: <u>Owner</u>	Phone #: <u>386-984-9171</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Ronald Bonds Sr.</u>	Signature 
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

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

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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 ✓	Print Name <u>Christopher Moon</u>	Signature <u>[Signature]</u>
	License #: <u>Owner</u>	Phone #: <u>386-984-9171</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL ✓ MC 6 1669	Print Name <u>Ronald Bonds Sr.</u>	Signature _____
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

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

LICENSED QUALIFIER AUTHORIZATION

I, Ronald E Bonds Sr (license holder name), licensed qualifier for Style Crest Enterprises, Inc (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burd	1.
2. Rocky Ford	2.
3. Kelly Bishop	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized) CRC 1817658 2-16-16
License Number Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Bay

The above license holder, whose name is Ronald Edward Bonds Sr personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 16th day of FEB, 20 16.

Stacey Ann Hopkins
NOTARY'S SIGNATURE

(Seal/Stamp)





STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 20-0079
DATE PAID: 1/31/20
FEE PAID: 310.00
RECEIPT #: 14165046

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Christopher Moon

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: NA BLOCK: NA SUB: NA PLATTED: _____

PROPERTY ID #: 17-58-16-03641-003 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 6 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y / ☐ N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 1023 SW Carpenter Rd, Lake City, FL

DIRECTIONS TO PROPERTY: Head W on NE Franklin St, TL onto NW Main Blvd, slight right onto FL-47S, TR onto Co. Rd. 240, TL onto Carpenter Rd.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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1	SF Residential <u>MH</u>	<u>4</u>	<u>2021</u>	
2				
3				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: William D. Bishop II DATE: 1/29/2020

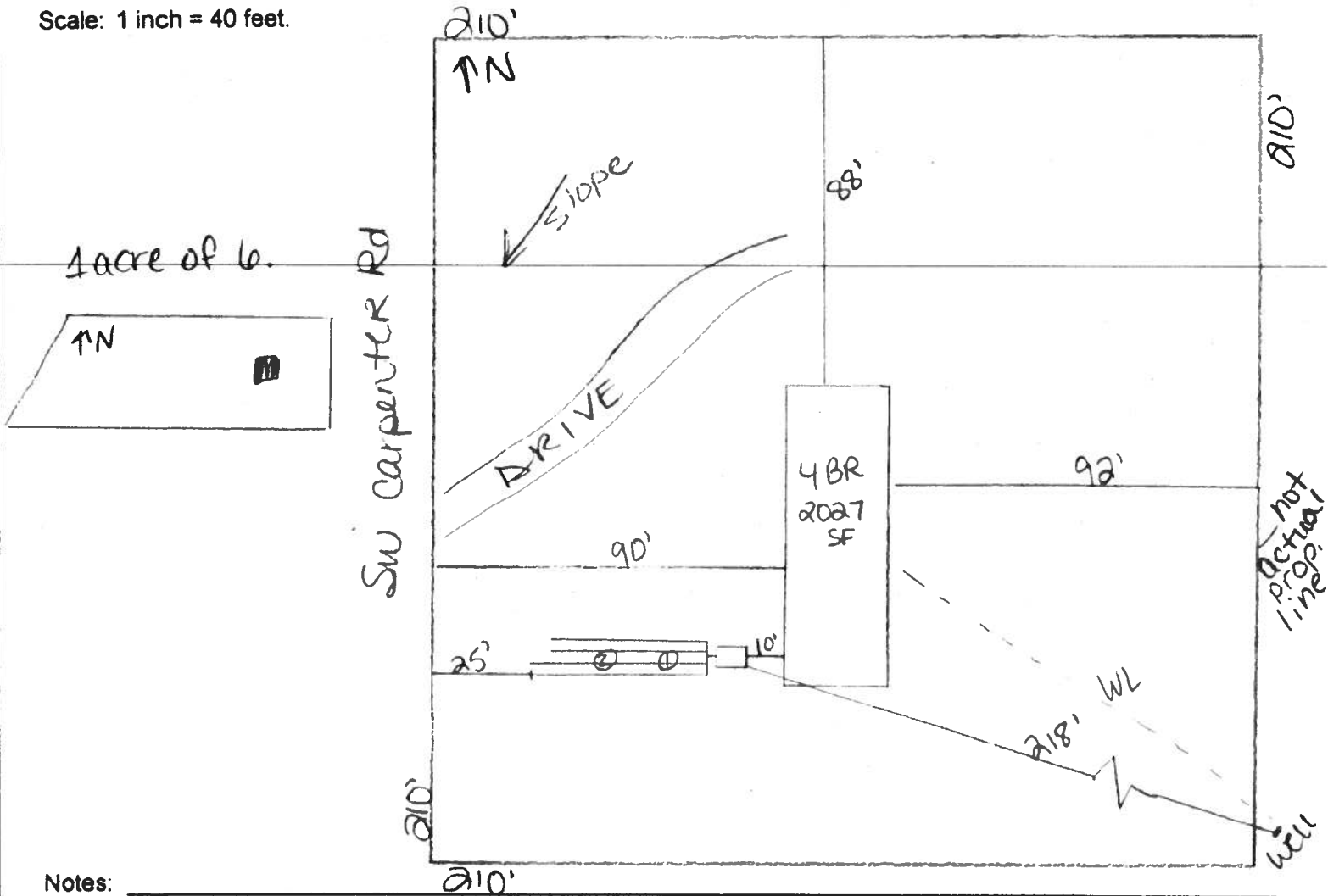
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 20-0079

Christopher Moon

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

1 acre of 6.

Site Plan submitted by: William A. Bishop II

Plan Approved X

Not Approved

By [Signature]

Columbier

MASTER CONTRACTOR

Date 1-29-20

County Health Department

2/3/20

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT