

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>BLK 16 MAY 2012</u>		Building Official <u>T.C. 5-15-12</u>	
AP# <u>1205-31</u>	Date Received <u>5/14</u>	By <u>N</u>	Permit # <u>030177</u>		
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>		
Comments <u>Replacing existing MH</u>					
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>12' 6"</u>	River <u>N/A</u>	In Floodway <u>N/A</u>	
☒ Site Plan with Setbacks Shown	☒ EH # <u>12-0258</u>	☒ EH Release	☒ Well letter	☒ Existing well	
☒ Recorded Deed or Affidavit from land owner	☒ Installer Authorization	☐ State Rd Access	☒ 911 Sheet		
☐ Parent Parcel # _____	☐ STUP-MH _____	☐ F W Comp. letter	☒ App Fee Pd	☒ VF Form	
IMPACT FEES: EMS _____		Fire _____	Corr _____	☒ Out County	☒ In County <u>pd</u>
Road/Code _____	School _____	= TOTAL _____		Suspended March 2009 ☐ Ellisville Water Sys	

Property ID # 05-65-17-09607-003 Subdivision _____

- New Mobile Home _____ Used Mobile Home X MH Size 16x68 Year 1993
- Applicant ROLAND TARDIE Phone # 386365-8533
- Address 4078 NEW COUNTY PUB. Lake City, Fla. 32025
- Name of Property Owner Same Robert & Cindi Bennett Phone # 386. 867/211
- 911 Address Same 10159 NW TUSENBERG AVE. FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home Same Phone # _____
 Address _____

▪ Relationship to Property Owner N/A

▪ Current Number of Dwellings on Property 1

▪ Lot Size 39.66 acres Total Acreage 39.66

▪ 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 415. to CR 131 go South to Property
Go 415. To CR 131 go South approx 7 miles to Property on East side.

▪ Name of Licensed Dealer/Installer Bernie Thrift Phone # 623-0046

▪ Installers Address 8557 NW Falling creek rd White Springs FL 32096

672 ☒ License Number TH 1025155 Installation Decal # 5612

Tw spoke w/ Roland 5.17.12

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Bernie Thrift License # IH1025155

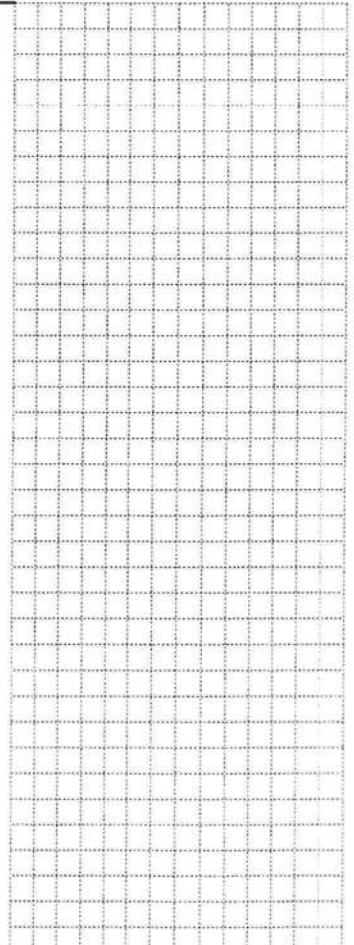
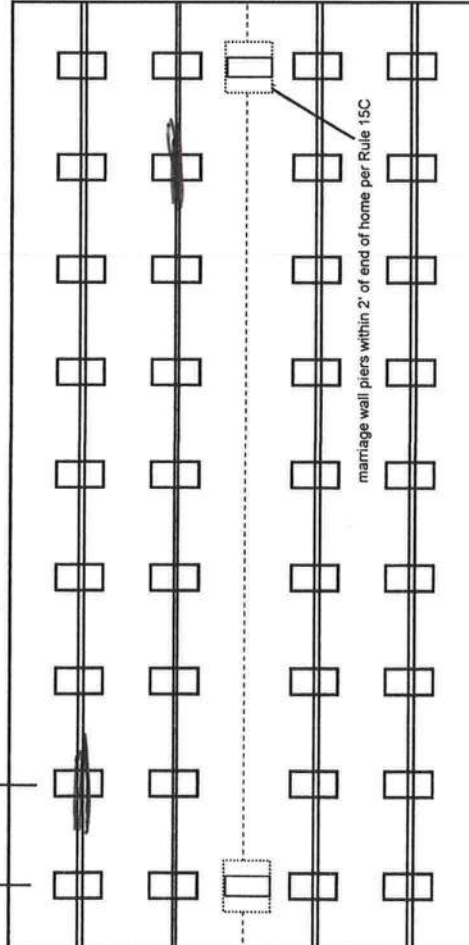
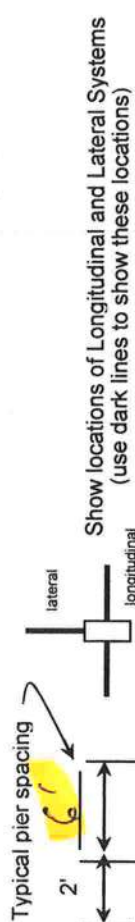
911 Address where home is being installed. 10157 SW CR131 Trustenuggen RD

Manufacturer Mobility Home Length x width 16x68

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 BT



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 # 5612
Triple/Quad ☐ Serial # 10L22973

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'	4'	5'	6'	7'	8'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x22
Perimeter pier pad size 16x16
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 AA Pier pad size _____

4 ft ☒ 5 ft _____

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer node 1101v

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall NA
Shearwall 1

Oliver Systems

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil without testing.

X 2000 X 2500 X 2500

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 2000 X 2000 X 2500

TORQUE PROBE TEST

The results of the torque probe test is 296 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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernie Thrift

Date Tested

5-14-12

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. 5

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. 5

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: NA Length: Spacing:
Walls: Type Fastener: NA Length: Spacing:
Roof: Type Fastener: NA Length: Spacing:
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

Type gasket NA
Pg.

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 12
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 No ✓ N/A
Range downflow vent installed outside of skirting. Yes No ✓ N/A
Drain lines supported at 4 foot intervals. Yes No ✓
Electrical crossovers protected. Yes NA
Other:

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

Installer Signature

Bernie Thrift

Date

5-14-12

Prepared by and Return to:
REGIONAL TITLE COMPANY
2015 SOUTH FIRST STREET
P.O. BOX 1672
LAKE CITY, FLORIDA 32055
NARTHA J. TLEDDER, by: KLS

executive line

This Indenture,

(The terms "grantor" and "grantee" herein shall be construed to include all parties and singular or plural as the context indicates)

3560

2012-4 11 07

Made this 3rd day of April
Jimmy R. Martin and Carol D. Martin, his wife

of the County of Columbia, State of Florida
Robert L. Brennan and Cynthia A. Brennan, his wife

whose post-office address is Rt. 14, Box 285, Lake City, Florida, 32055
of the County of Columbia, State of Florida

Witnesseth: That said grantor, for and in consideration of the sum of Ten and 00/100 Dollars, and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantor's heirs, successors and assigns forever, the following described land, situate, lying and being in COLUMBIA County, Florida, to-wit:

COUNTY TAX PARCEL NUMBER 5-6S-17-09607-000

A part of the W $\frac{1}{4}$ of Section 5, Township 6 South, Range 17 East, more particularly described as follows: Commence at the SW Corner of the NW $\frac{1}{4}$ of said Section 5 and run N 89°51'45" E along the South line thereof, 40.0 feet to a point on the East right of way line of State Road No. 131 and the POINT OF BEGINNING. Thence N 0°24'48" E, along said E right of way line, 100.0 feet; thence N 89°51'45" E, 1201.58 feet; thence N 0°24'24" E, 361.44 feet; thence N 89°51'45" E, 1398.74 feet; thence S 1°01'48" E, 483.63 feet; thence N 86°14'37" W, 2.81 feet; thence S 0°42'44" E, 348.70 feet; thence S 89°52'34" W, 2606.49 feet to a point on the said East right of way line of State Road No. 131; thence N 0°24'48" E, along said right of way, 370.05 feet to the POINT OF BEGINNING. Columbia County, Florida. Containing 39.66 acres, more or less.

Subject to: Right of way in O.R. Book 34, pages 255 & 270, public records of Columbia County, Florida.

Subject to: Oil and gas in O.R. Book 345, page 111 and O.R. Book 44, page 533, public records of Columbia County, Florida.

Subject to: Right of way for State Road #131.

Robert L. Brennan Social Security Number [REDACTED]

Cynthia A. Brennan Social Security Number [REDACTED]

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

In Witness Whereof, Grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Witness Martina J. Leiber
Balzer A. Fraddosio

Witness Jimmy R. Martin (Seal)
Carol D. Martin (Seal)

Witness DOCUMENTARY STAMP 38.25

Witness INTANGIBLE TAX

Witness P. DEWITT CASON, CLERK OF

Witness COURTS, COLUMBIA COUNTY

STATE OF Florida BY [Signature]

COUNTY OF Columbia NOTARY PUBLIC

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared

Jimmy R. Martin and Carol D. Martin, his wife

to me known to be the person(s) described in and who executed the foregoing instrument and acknowledged before me the execution of same.

WITNESS my hand and official seal in the County and State last aforesaid this 3rd day of April, 1989.

Notary Public

My commission expires: Aug 10, 1991

Columbia County Property Appraiser

CAMA updated: 5/2/2012

2011 Tax Year

Parcel: 05-6S-17-09607-003

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

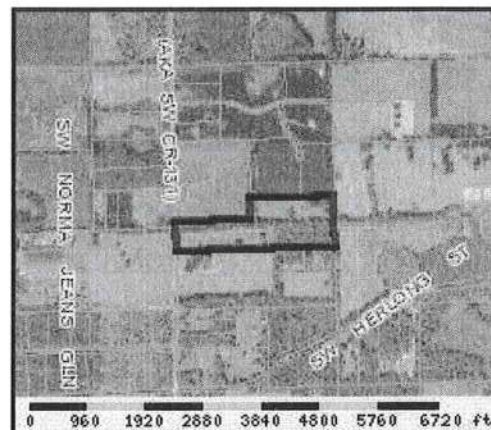
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	BRENNAN ROBERT L & CYNTHIA A		
Mailing Address	10157 SW TUSTENUGGEE AVE LAKE CITY, FL 32024		
Site Address	10157 SW TUSTENUGGEE AVE		
Use Desc. (code)	IMPROVED A (005000)		
Tax District	3 (County)	Neighborhood	5617
Land Area	39.660 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
COMM SW COR OF NW1/4, RUN E 40 FT TO E R/W CR-131 FOR POB, N ALONG R/W 100 FT, E 1201.58 FT, N 361.44 FT, E 1388.74 FT, S 483.63 FT, W 2.81 FT, S 348.70 FT, W 2606.49 FT TO E R/W CR-131, N ALONG R/W 370.05 FT TO POB. ORB 680-756.			



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (1)	\$17,870.00
Ag Land Value	cnt: (3)	\$7,532.00
Building Value	cnt: (1)	\$98,136.00
XFOB Value	cnt: (10)	\$27,648.00
Total Appraised Value		\$151,186.00
Just Value		\$247,979.00
Class Value		\$151,186.00
Assessed Value		\$138,151.00
Exempt Value	(code: HX)	\$50,000.00
Total Taxable Value	Cnty: \$88,151 Other: \$88,151 Schl: \$113,151	

2012 Working Values

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
4/3/1989	680/756	WD	V	Q		\$69,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1992	(31)	2344	2812	\$96,553.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0180	FPLC 1STRY	0	\$2,000.00	0000001.000	0 x 0 x 0	(000.00)
0030	BARN,MT	1994	\$9,600.00	0001200.000	30 x 40 x 0	(000.00)
0280	POOL R/CON	1995	\$6,758.00	0000512.000	32 x 16 x 0	(000.00)
0166	CONC,PAVMT	1995	\$800.00	0000001.000	0 x 0 x 0	(000.00)
0294	SHED WOOD/	1997	\$600.00	0000001.000	0 x 0 x 0	(000.00)



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, Bernie Thrift, give this authority for the job address show below
Installer License Holder Name

only, 10157 SW 02131 Lake City, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
ROLAND L. TARDIF	<i>Roland L. Tardif</i>	☒ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

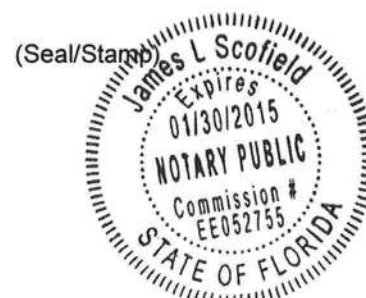
Bernie Thrift License Holders Signature (Notarized) LH1025155 License Number 5-14-12 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: COLUMBIA

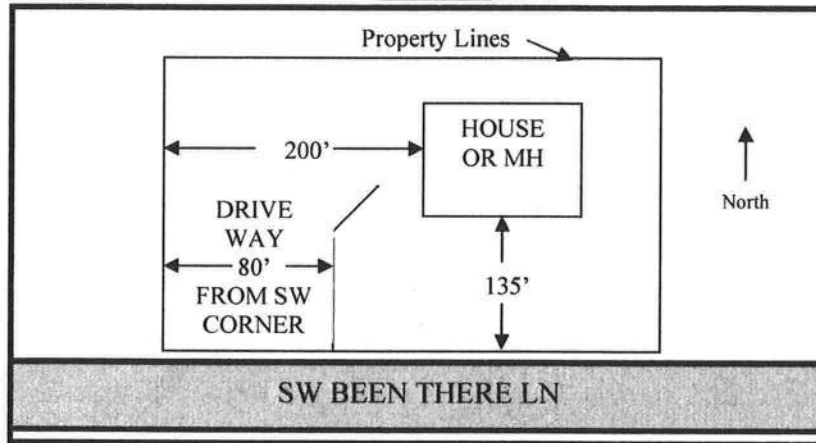
The above license holder, whose name is Bernie Thrift,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 14 day of May, 2012.

James L. Scofield
NOTARY'S SIGNATURE

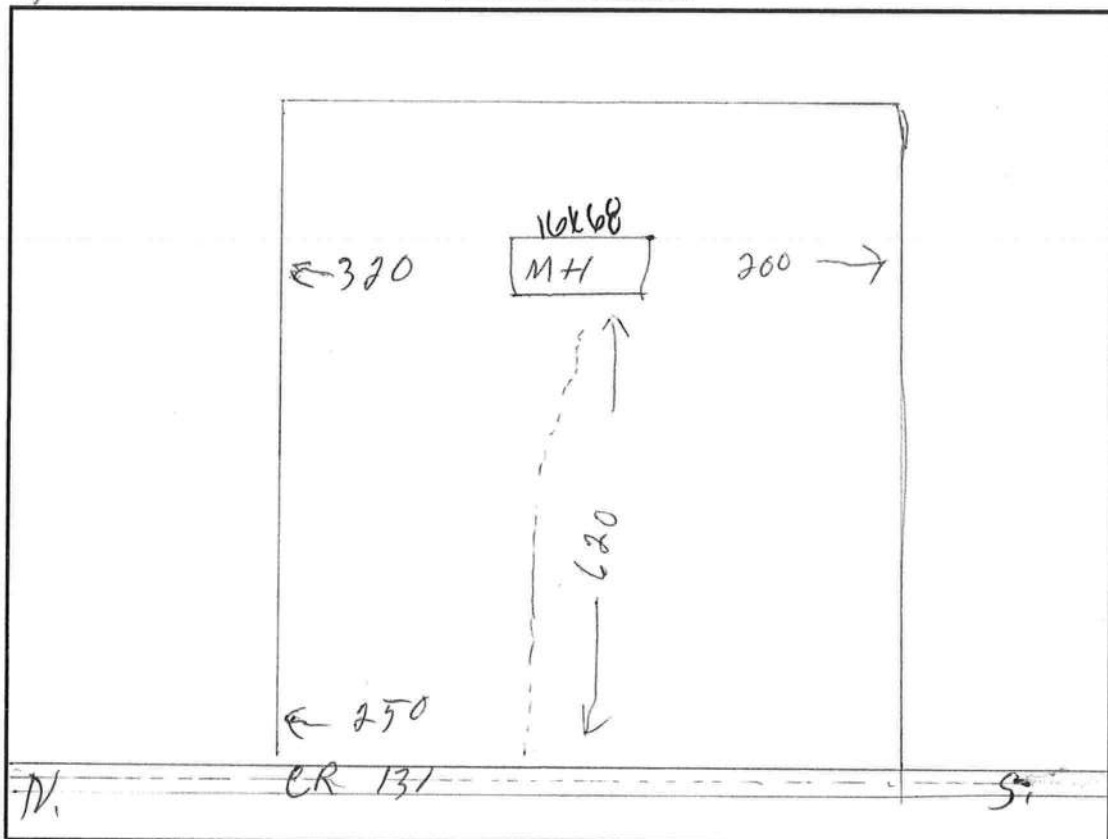


1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 5-11-12 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Robert & Linda Brennan PHONE 386-755-0927 CELL _____

ADDRESS 10157 SE CR 131

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME US 90 E south on Country Club RD first Driveway
South of CR 252 on Right

MOBILE HOME INSTALLER Bernie Thruft PHONE _____ CELL 386-223-0046

MOBILE HOME INFORMATION

MAKE 1993 Mobility Home YEAR _____ SIZE 16 x 68 COLOR Beige

SERIAL No. 10L22973

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

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

P SMOKE DETECTOR () OPERATIONAL () MISSING
P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
P DOORS () OPERABLE () DAMAGED
P WALLS () SOLID () STRUCTURALLY UNSOUND
P WINDOWS () OPERABLE () INOPERABLE
P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
P CEILING () SOLID () HOLES () LEAKS APPARENT
P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
P ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Cn ID NUMBER 304 DATE 5-14-12

Panel 50.00 on
5-11-12
(Island Tardip)

COLUMBIA COUNTY 9-1-1 ADDRESSING

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

PHONE: (386) 758-1125 * 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 REQUESTED: 5/7/2012 DATE ISSUED: 5/14/2012

ENHANCED 9-1-1 ADDRESS:

10159 SW TUSTENUGGEE AVE
LAKE CITY FL 32024
PROPERTY APPRAISER PARCEL NUMBER:
05-6S-17-09607-003

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL. 2ND LOCATION
ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

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



1205-31

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 12-0258 CONTRACTOR Bernie Shier PHONE 386.623.0046

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

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>ROBERT M BRENNAN</u>	Signature <u>Robert B</u>	Phone #: <u>386-867-1211</u>
MECHANICAL/ A/C	Print Name <u>ROBERT M BRENNAN</u>	Signature <u>Robert B</u>	Phone #: <u>386-867-1211</u>
PLUMBING/ GAS	Print Name <u>ROBERT M BRENNAN</u>	Signature <u>Robert B</u>	Phone #: <u>386-867-1211</u>

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.

Contractor Forms: Subcontractor form: 1/11

CR # 10-5442

 PERMIT NO. 62-0258
 DATE PAID: 5/11/12
 FEE PAID: 310.00
 RECEIPT #: 1892748
APR 21 2012

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

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐
APPLICANT: ROBERT & CINDI BRENNANAGENT: PAUL LLOYDTELEPHONE: (386) 752-3571MAILING ADDRESS: 10157 SE CR 131LAKE CITYFL 32024

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____PROPERTY ID #: 05-6S-17-09607-003 ZONING: AG I/M OR EQUIVALENT: ☐ NO ☐PROPERTY SIZE: 39.660 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FTPROPERTY ADDRESS: 10157 SE CR 131DIRECTIONS TO PROPERTY: 441 SOUTH TURN RIGHT ON CR 131 PAST CR 240 ON LEFT.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
1	<u>MOBILE HOME</u>	<u>3</u>	<u>1,001</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Paul LloydDATE: 5/11/12

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

UNPAVED DRIVE

NORTH



Site Plan Submitted By Raul Rios Date 5/11/12
Plan Approved X Not Approved _____ Date 5/16/12
By [Signature] Cdewitt CPHU
Notes: _____