

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

<b>For Office Use Only</b> (Revised 7-1-15)		Zoning Official <u>LN</u>	Building Official <u>MM</u>
AP# <u>1810-63</u>	Date Received <u>10/19/18</u>	By <u>UH</u>	Permit # <u>37423</u>
Flood Zone <u>X</u>	Development Permit _____	Zoning <u>A3</u>	Land Use Plan Map Category <u>A</u>
Comments <u>2nd Mobile Home on property</u>			
FEMA Map# _____	Elevation _____	Finished Floor <u>11 above road</u>	River _____ In Floodway _____
<input type="checkbox"/> Recorded Deed or <input checked="" type="checkbox"/> Property Appraiser PO	<input type="checkbox"/> Site Plan	<input checked="" type="checkbox"/> EH # <u>18-0831</u>	<input type="checkbox"/> Well letter OR
<input checked="" type="checkbox"/> Existing well	<input type="checkbox"/> Land Owner Affidavit	<input checked="" type="checkbox"/> Installer Authorization	<input type="checkbox"/> FW Comp. letter <input checked="" type="checkbox"/> App Fee Paid
<input type="checkbox"/> DOT Approval	<input type="checkbox"/> Parent Parcel # _____	<input type="checkbox"/> STUP-MH _____	<input checked="" type="checkbox"/> 911 App
<input type="checkbox"/> Ellisville Water Sys	<input checked="" type="checkbox"/> Assessment <u>Already paying for 2 Homes</u>	<input type="checkbox"/> Out County	<input type="checkbox"/> In County <input checked="" type="checkbox"/> Sub VF Form

Property ID # 12-45-17-08332-048 Subdivision Price Creek Acres Unit 24 Lot# 18

- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 60x32 Year 2019
- Applicant Larry F. Ostendorf Phone # 386-288-3484
- Address 594 SW Kirby Ave Lake City FL 32024
- Name of Property Owner Larry + Theresa Ostendorf Phone # 386-288-3484
- ☒ 911 Address 982 SE Rossi Dr. Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Larry + Theresa Ostendorf Phone # 386-288-3484  
Address 594 SW Kirby Ave Lake City FL 32024
- Relationship to Property Owner Same
- Current Number of Dwellings on Property (1) SW
- Lot Size 3.88 AC Total Acreage 3.88 AC
- 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 - Already removed
- Driving Directions to the Property HWY 100 East to Pounds Hamack  
on Rossi Dr. on R (Near College)
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
- License Number I H1025386 Installation Decal # 49673

Larry is aware of what's needed 10.19.18 \$375.00  
 JW spoke w/ Larry 11.8.18 (in person)

# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

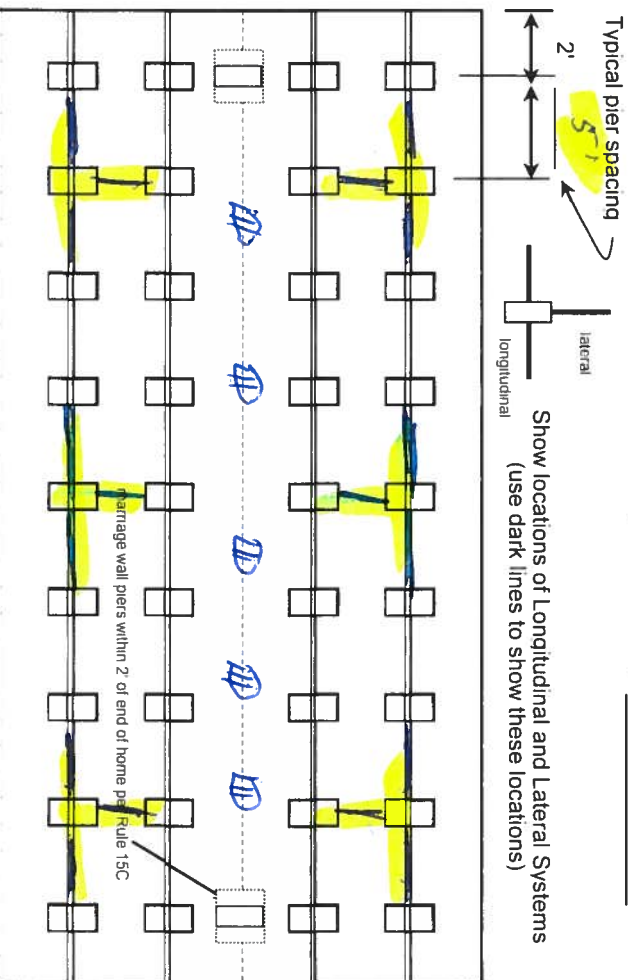
Date: \_\_\_\_\_

Installer: Robert Shippard License # TH1025386  
 Address of home being installed: \_\_\_\_\_

Manufacturer: Orshing Length x width: 32x60

**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: ES



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 # 49726  
 Triple/Quad ☐ Serial # \_\_\_\_\_

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (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'
1500 psf	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

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

## PIER PAD SIZES

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

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.

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

## POPULAR PAD SIZES

### ANCHORS

4 ft ☒ 5 ft ☐

### FRAME TIES

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

### OTHER TIES

Longitudinal Stabilizing Device (LSD)  
 Manufacturer \_\_\_\_\_  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer Orshing 11/21/17

Sidewall 26  
 Longitudinal Marriage wall 6  
 Shearwall 4

# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

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

X 1500 X 1500 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 require anchors with 4000 lb holding capacity.

RS Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Shppard

Date Tested 10-16-18

## 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. 28

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

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

## Site Preparation

Debris and organic material removed ☒ Swale ☐ Pad ☒ Other ☐

### Fastening multi wide units

Floor: Type Fastener: scars Length: 5 Spacing: 16"  
Walls: Type Fastener: scars Length: 4 Spacing: 16"  
Roof: Type Fastener: scars Length: 4 Spacing: 16"  
For used homes: 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 RS

Type gasket Pg. \_\_\_\_\_ Installed: ☒ 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 ☒

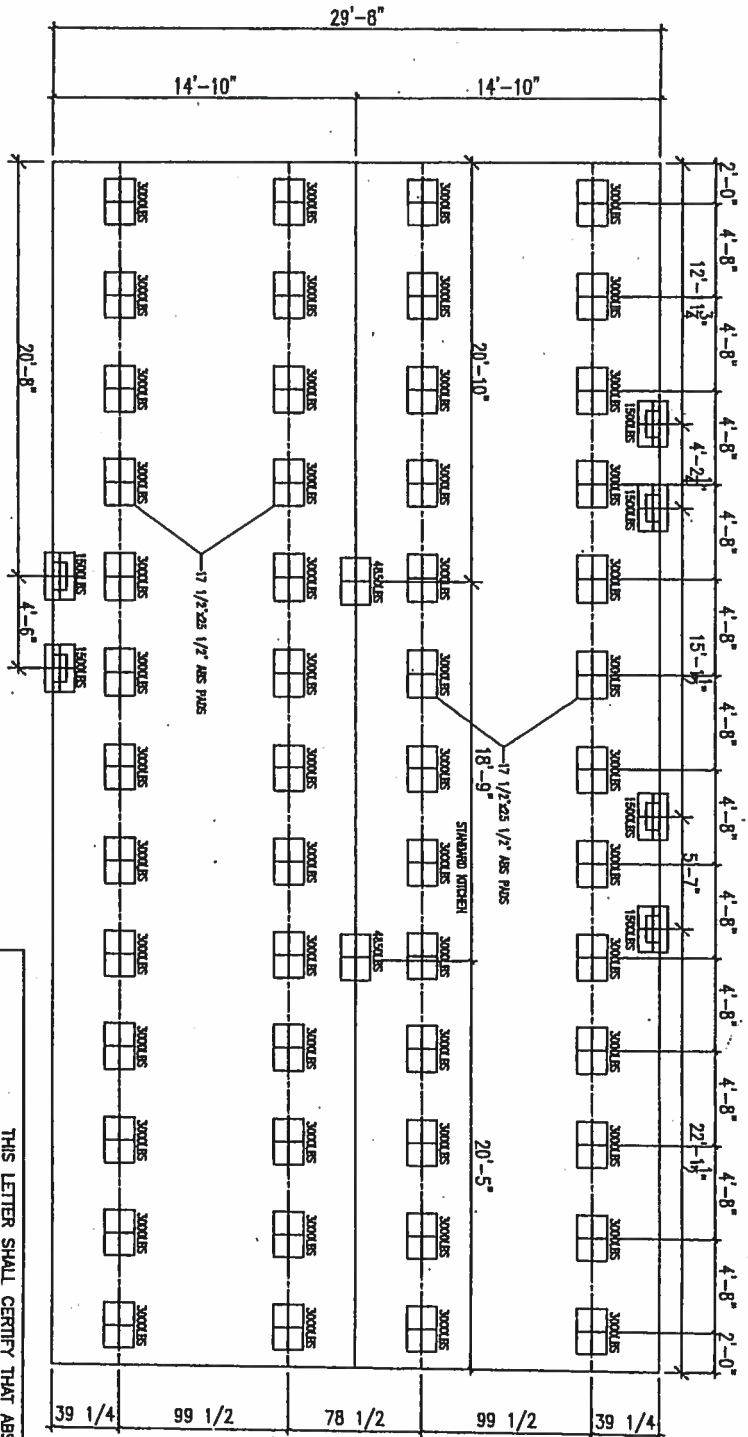
### Miscellaneous

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 Robert Shppard Date 10-16-18

SOIL BEARING LOAD: 1000LBS PSF  
 1500LBS=16"x16" OR 16"x18.5" ABS PAD FOOTER  
 3000LBS=17.25"x25.5" ABS PAD FOOTER  
 4000LBS=21"x29" ABS PAD FOOTER  
 4800LBS=23.25"x31.25" ABS PAD FOOTER



MAXIMUM SPAN BETWEEN PILES UNDER - BEAMS (FEET)				MAXIMUM CLEAR SPAN FOR LACING LINE SUPPORTS (FEET)			
PAD SIZE	PAD AREA (SQ. FT.)	SINGLE WIDE	DOUBLE WIDE	PAD SIZE	PAD AREA (SQ. FT.)	SINGLE WIDE	DOUBLE WIDE
16"x16.5"	2.00	3.30	2.97	16"x16.5"	2.00	3.30	2.97
17.25"x25.5"	3.00	4.95	3.66	17.25"x25.5"	3.00	4.95	3.66
21"x29"	4.00	6.61	5.83	21"x29"	4.00	6.61	5.83
23.25"x31.25"	4.80	7.93	7.12	23.25"x31.25"	4.80	7.93	7.12
16"x16"	1.78	2.94	2.64	16"x16"	1.78	2.94	2.64
17.25"x25.5"	2.35	3.88	3.48	17.25"x25.5"	2.35	3.88	3.48
21"x29"	3.38	5.33	4.48	21"x29"	3.38	5.33	4.48
23.25"x31.25"	4.59	6.54	5.24	23.25"x31.25"	4.59	6.54	5.24
16"x16.5"	2.00	3.30	2.97	16"x16.5"	2.00	3.30	2.97
17.25"x25.5"	3.00	4.95	3.66	17.25"x25.5"	3.00	4.95	3.66
21"x29"	4.00	6.61	5.83	21"x29"	4.00	6.61	5.83
23.25"x31.25"	4.80	7.93	7.12	23.25"x31.25"	4.80	7.93	7.12

MAX. LOAD FOR MAX. LOAD FOR MAX. LOAD FOR				MAX. LOAD FOR MAX. LOAD FOR MAX. LOAD FOR			
SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY	SOIL CAPACITY
1000 PSF	1500 PSF	2000 PSF	2500 PSF	1000 PSF	1500 PSF	2000 PSF	2500 PSF
1.778	2.667	3.556	4.444	1.778	2.667	3.556	4.444
2.333	3.500	4.667	5.833	2.333	3.500	4.667	5.833
2.778	4.167	5.556	6.944	2.778	4.167	5.556	6.944
3.333	5.000	6.667	8.333	3.333	5.000	6.667	8.333
3.778	5.667	7.556	9.722	3.778	5.667	7.556	9.722
4.444	6.667	8.889	11.111	4.444	6.667	8.889	11.111
5.000	7.500	10.000	12.500	5.000	7.500	10.000	12.500
5.556	8.333	11.111	13.889	5.556	8.333	11.111	13.889
6.111	9.167	12.222	15.278	6.111	9.167	12.222	15.278
6.667	10.000	13.333	16.667	6.667	10.000	13.333	16.667
7.222	10.833	14.444	18.056	7.222	10.833	14.444	18.056
7.778	11.667	15.556	19.444	7.778	11.667	15.556	19.444
8.333	12.500	16.667	20.833	8.333	12.500	16.667	20.833
8.889	13.333	17.778	22.222	8.889	13.333	17.778	22.222
9.444	14.167	18.889	23.611	9.444	14.167	18.889	23.611
10.000	15.000	20.000	25.000	10.000	15.000	20.000	25.000

250 RW BRYANT ROAD  
 MOUNTAIN VIEW, GEORGIA 31768  
 PHONE: 1-866-742-6600

1000LBS ABS PAD FOUNDATION PLAN

DATE: 8/14/06

DESIGNED: 1-1-C17

PROJECT: TUBERLINE ELITE

BOOK NO. E643-1124-96

30. FT. 1800

THIS LETTER SHALL CERTIFY THAT ABS FOUNDATION PADS MANUFACTURED BY OLIVER TECHNOLOGIES, INC. MAY BE USED IN THE LIEU OF POURED CONCRETE FOOTINGS AS A SUPPORT FOR SINGLE & DOUBLE STACKED FOUNDATION PERS PROVIDED THE FOLLOWING CRITERIA ARE MET:

- THE ABS PADS MUST BE INSTALLED PER OLIVER TECHNOLOGIES INSTALLATION INSTRUCTIONS.
- THE PIER LOADS APPLIED TO THE ABS PADS MAY NOT EXCEED THE VALUES LISTED IN THE CHART BELOW.
- THE ABS PADS MAY BE USED TO SUPPORT A CONTINUOUS FOUNDATION WALL. THE PADS MAY ONLY BE USED FOR INDIVIDUAL FOUNDATION PERS.
- ABS PADS MAY BE COMBINED TO COVER A LARGER AREA IN THE CASE THE MAX. ALLOWABLE LOADS WERE COMBINED AS WELL.
- IF THE REQUIREMENTS OF DESTINY IND. INSTALLATION MANUAL CONFLICT WITH THE REQUIREMENTS OF THE OLIVER TECHNOLOGIES INSTALLATIONS, THE OLIVER TECHNOLOGIES INSTALLATIONS SHALL BE USED.

DESIGNED BY: Jerry Benton



**Columbia County Property Appraiser**

Jeff Hampton

**2017 Tax Roll Year**

updated: 8/1/2018

Parcel: &lt;&lt; 12-4S-17-08332-048 &gt;&gt;

Aerial Viewer Pictometry Google Maps

**Owner & Property Info**

Result: 1 of 1

Owner	OSTENDORF LARRY FRANCIS & THERESA BROWN OSTENDORF 594 SW KIRBY AVENUE LAKE CITY, FL 32024		
Site	984 ROSSI DR, LAKE CITY		
Description*	COMM SE COR OF SW1/4 OF SE1/4, RUN W ALONG S LINE 477.58 FT FT FOR POB, CONT W 322.62 FT, N 445.31 FT TO SE'LY R/W CO RD, RUN NE ALONG R/W 375.87 FT, S 634.91 FT TO POB. (AKA LOT 18 PRICE CREEK ACRES S/D UNIT 2 UNREC) EX ADD RD R/W DESC 758-339, 460-653, Q ...more>>>		
Area	3.88 AC	S/T/R	12-4S-17
Use Code**	MOBILE HOM (000202)	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**

2017 Certified Values		2018 Working Values	
Mkt Land (5)	\$19,604	Mkt Land (5)	\$21,267
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$4,495	Building (1)	\$5,386
XFOB (3)	\$800	XFOB (3)	\$800
Just	\$24,899	Just	\$27,453
Class	\$0	Class	\$0
Appraised	\$24,899	Appraised	\$27,453
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$24,899	Assessed	\$27,453
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$24,899 city:\$24,899 other:\$24,899 school:\$24,899	Total Taxable	county:\$27,453 city:\$27,453 other:\$27,453 school:\$27,453

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
12/18/2017	\$32,000	1350/1127	WD	I	Q	01
2/16/2016	\$100	1309/1946	QC	V	U	11

**▼ Building Characteristics**

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1970	772	872	\$5,386

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

**▼ Extra Features & Out Buildings (Codes)**


## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 18 10-63 CONTRACTOR Robert Stefford PHONE 386-623-2763

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.*

<b>ELECTRICAL</b>   	Print Name <u>Larry Ostendorf</u> License #: <u>N/A Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386-288-3484</u>
<b>MECHANICAL/</b> <b>A/C</b> <u>B</u> <u>770</u>	Print Name <u>Shatto Heating &amp; Air</u> License #: <u>CAC057375</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>496-8224</u>

**F. S. 440.103 Building permits; identification of minimum premium policy.**--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.



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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Shepherd, give this authority for the job address show below  
Installer License Holder Name  
only, 982 Rossi Dr. Lake City Fl. 32025 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)
<u>Larry Ostendorf</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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

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

Robert Shepherd License Holders Signature (Notarized)  
FFH1025386 License Number  
10-16-18 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Shepherd, personally appeared before me and is known by me or has produced identification (type of I.D.) \_\_\_\_\_ on this 16<sup>th</sup> day of October, 2018.

[Signature]  
NOTARY'S SIGNATURE





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

APPLICATION FOR CONSTRUCTION PERMIT

CR # 10-6979

PERMIT NO. 18-083  
DATE PAID: 10/9/18  
FEE PAID: 38.00  
RECEIPT #: 13e2913

APPLICATION FOR:

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

APPLICANT: LARRY FRANCIS & THERESA OSTENDORF

AGENT: PAUL LLOYD

TELEPHONE: (386) 288-3484

MAILING ADDRESS: 589 SE KIRBY AVE.

LAKE CITY

FL 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: 18 BLOCK: N/A SUBDIVISION: PRICE CREEK ACERS UNIT 2 URSD PLATTED: \_\_\_\_\_

PROPERTY ID #: 12-4S-17-08332-048 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 3.880 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 984 ROSSIE DR. LAKE CITY

DIRECTIONS TO PROPERTY: 90 EAST TURN RIGHT ON HWY 100, TURN RIGHT ON CR 245A TURN LEFT ON ROSSIE RD. SITE ON RIGHT

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>1,800</u>	
2				
3				
4				

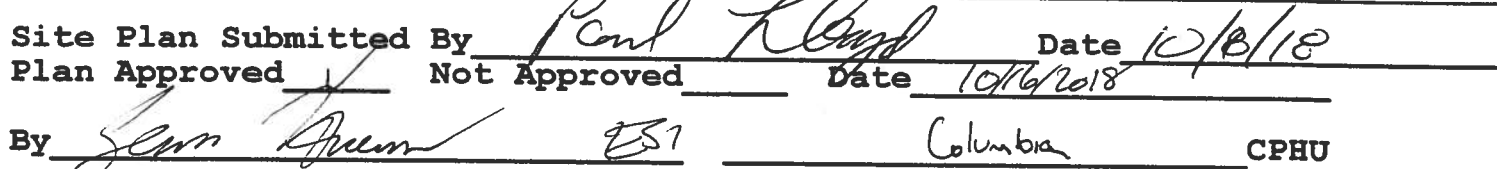
☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: Paul Lloyd

DATE: 10/8/18



**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT**





0 53 106 159 212 265 318 371 424 477 530 ft

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

**PARCEL: 12-4S-17-08332-048** | MOBILE HOM (000202) | 3.88 AC  
 COMM SE COR OF SW1/4 OF SE1/4, RUN W ALONG S LINE 477.58 FT FOR POB, CONT W 322.62 FT, N 445.31 FT TO  
 SELY R/W CO RD, RUN NE ALONG R/W 375.87 FT.

**Ow ner:** OSTENDORF LARRY FRANCIS &  
 THERESA BROWN OSTENDORF  
 594 SW KIRBY AVENUE  
 LAKE CITY, FL 32024  
**Site:** 984 ROSSI DR, LAKE CITY  
**Sales** 12/18/2017 \$32,000 I (Q)  
**Info** 2/16/2016 \$100 V (U)

2017 Certified Values			
Mkt Lnd	\$21,267	Appraised	\$27,453
Ag Lnd	\$0	Assessed	\$27,453
Bldg	\$5,386	Exempt	\$0
XFOB	\$800	county:	\$27,453
Just	\$27,453	Total	city:\$27,453
		Taxable	other:\$27,453
			school:\$27,453

NOTES:



This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.



For Proof of m/H's on property.

(Owner said  
5 total.)

Close

OSTDS Final Approval  
Page # 1Rotate: ☐ Left 90° ☐ Right 90° ☐ 180° ☐ Normal

Permit

No. 75-68COLUMBIA COUNTY HEALTH DEPARTMENT  
COURT HOUSE  
LAKE CITY, FLORIDA 32055County Health Department  
3 BR. m H.DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES  
DIVISION OF HEALTH  
Application and Permit  
of  
Individual Sewage Disposal Facilities

## Section I - Instructions:

1. Percolation test data, soil profile and water table elevation information must be attached. (Note: Test must be made at proposed location of system).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location. (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.

5. Indicate name and date of recording of subdivision. If not recorded, attach notes and bounds description.
6. Complete the following information section.

## Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call 752-3113 and give this office a 24-hour notice when ready for inspection.

4. 3 Number of Systems

## Section II - Information:

1. Property Address (Street & House No.)  
Lot 18 Block 2 Subdivision Price Creek Acres 2  
Date Recorded \_\_\_\_\_ Directions to Job \_\_\_\_\_
2. Owner or Builder David & Mary Jewell  
P.O. Address Box 703 City Lake City, Florida 32055
3. Specifications \_\_\_\_\_

Scale 1" = 50'

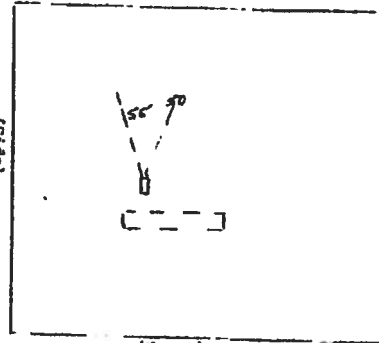
(Rear)

900 Minimum Jack Size  
105 Minimum Ft. of Drainfield  
210 Square Feet of Drainfield

All drain lines must be 24 inches deep, 24 inches wide, and have a minimum of twelve (12) inches of gravel.

Distribution boxes are required where two or more drain lines are used. Lines must not be more than 100 feet long.

(Name of Street or State Road)



(Name of Street or State Road)

Applicant: MARY V JEWELL  
Please PrintSignature: Mary V Jewell

(Name of Street or State Road)

Date: 2/3/75

\*\*\*\*\* DO NOT WRITE ABOVE THIS LINE \*\*\*\*\*

## Section III - Application Approval &amp; Construction Authorization

Installation subject to following special conditions:  
Before it is covered, it must be at least 10 feet from any well.

The above signed application has been found to be in compliance with Chapter 17-13, Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions.

By: Ken M. Cook County Health Dept. Columbia Date 2-10-75

## Section IV - Final Construction Approval

Construction or installation approved: ☒ Yes ☐ No  
Date: 2-18-75 By: Ken M. Cook  
FHA No. \_\_\_\_\_ VA No. \_\_\_\_\_

TEMPORARY  
SAN 428  
REV. 7/1/73

B &amp; H 4:30

Close

OSTDS Final Approval  
Page # 1Rotate: ☐ Left 90° ☐ Right 90° ☐ 180° ☐ Normal

PERMIT NO.

84-406

STATE OF FLORIDA  
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICESAPPLICATION FOR SEPTIC TANK PERMIT  
AND FINAL INSPECTION FORM

COLUMBIA COUNTY PUBLIC HEALTH UNIT

Authority:  
Chapter 381, 386, 387, FS  
Chapter 10D-8, FAC

## Section I - Information

Owner David Jewell Occupant \_\_\_\_\_  
 P. O. Address 14.7 Box 280 City Lake City  
 Property Address (Street & House No.) \_\_\_\_\_ P.M. 752. 568.  
 Lot 18 Block \_\_\_\_\_ Unit 2 Subdivision Price Creek Acres  
 Date Platted \_\_\_\_\_ Directions to Job \_\_\_\_\_  
4-2 RR M.R.  
 House BR Mobile Home 9 BR Other \_\_\_\_\_ Power Co. FFL  
 Type of Business \_\_\_\_\_ No. Toilets \_\_\_\_\_ No. Wash Basins \_\_\_\_\_  
 No. Employees \_\_\_\_\_ Total Square Ft. in Building \_\_\_\_\_

Approval of this installation does not imply that a disposal system will perform satisfactorily  
 for any specific period of time.

Signature of Applicant David Jewell Date 9-2-84

\*\*\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

## Section II - Soil Profile

Water Table At 18 Inches  
 Hard Pan At \_\_\_\_\_ Inches  
 Clay At \_\_\_\_\_ Inches  
 Muck At \_\_\_\_\_ Inches  
 Other At \_\_\_\_\_ Inches  
 Soil Classification Sandy

Contractor \_\_\_\_\_

Distance to Sanitary Sewer N/ADistance to Public Water Supply N/AIs Area Subject to Flooding? N/A

Elevation MSL \_\_\_\_\_

## Section III - Specifications

- 2- 1050 gallon tank with 600 square feet of drain-field with at least 4" inside diameter pipe.
- Sand filter size \_\_\_\_\_
- Provide a suitable fill in the area of the system installation, 27 inches above present grade.
- Filled area to be \_\_\_\_\_ square feet.
- Mechanically compact filled area.
- The bottom of the septic tank outlet must be placed 12 inches above existing grade.
- Other \_\_\_\_\_

## Section IV

The above signed application has been found to be in compliance with Chapter 10D-6, Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions:

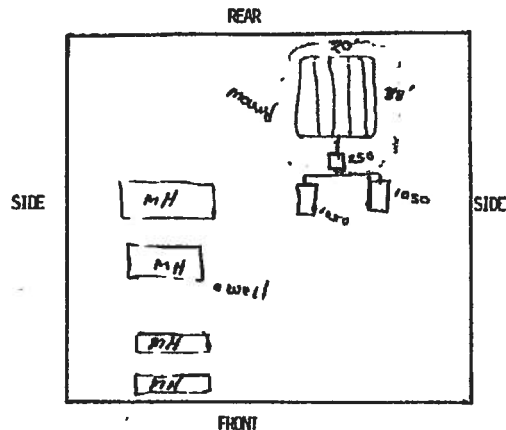
By: K. M. Carr Columbia County Public Health Unit Date 9-2-84

## Section V - Final Construction Approval

Construction of installation approved: \_\_\_\_\_ Yes \_\_\_\_\_ No

By: Richard Land Date 10-5-84

Installed by: B & H Receipt # 17125





Map  
Attachment

11.8.18

AS PER MATT CREWS !!

