

For Office Use Only (Revised 7-1-15) Zoning Official JMS Building Official JMS
AP# 1807-45 Date Received 7-16-18 By UH Permit # 37128
Flood Zone A Development Permit _____ Zoning A-3 Land Use Plan Map Category ESA
Comments Need Elevation Letter before power.
_____ per plat on lot 2
FEMA Map# _____ Elevation _____ Finished Floor 57.50' River _____ In Floodway _____
☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 18-0620 ☒ 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 owed ☐ ~~Out County~~ ☐ ~~In County~~ ☒ Sub VF Form

New Mobile Home ☒ Used Mobile Home ☐ MH Size 16x80 Year 2018
 Applicant Wendy Grennell Phone # 386-288-2428
 Address 3104 SW Old Wire Rd Fort White FL 32038
 Name of Property Owner Subrandy Limited Partnership Phone# 386-752-8585
 911 Address 225 SW Tara Ct Fort White FL 32038
 Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy
 Name of Owner of Mobile Home Robin Karoly Phone # 904-708-9833
 Address 2671 Drury Ferry Lane Hilliard FL 32046
 Relationship to Property Owner Lease agreement
 Current Number of Dwellings on Property 2
 Lot Size _____ Total Acreage 5.01
 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 No
 Driving Directions to the Property SR 47 South to Sunview St turn (R)
to SW Tara Ct turn (R) to lot 2 on (R)
 Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
 Installers Address 6305 SE CR 245 Lake City FL 32025
 License Number TH1025386 Installation Decal # 48967

MI-Spoke to Mrs. Karoly 8-6-19 E.H. 11.11.19

4393.02

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer:

Robert Shepard

License #

ILH 1025386

Address of home being installed

225 3rd Tara Ct.

Est White FL 32035

Manufacturer

Champion

Length x width

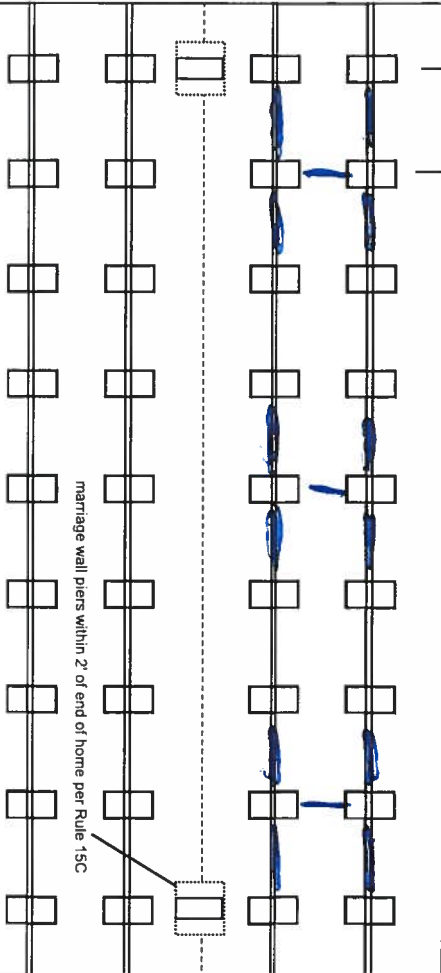
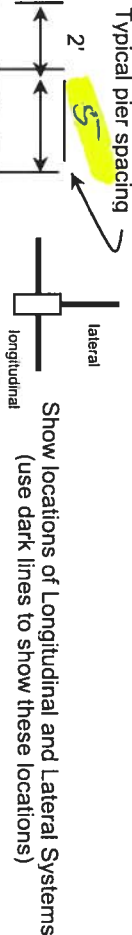
16x76

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

RS



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 #

48967

Triple/Quad ☐

Serial #

PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity | Footer size (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' | 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

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.

Opening

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

Oliver 1101V

OTHER TIES

Number 28

Sidewall

Longitudinal

Marriage wall

4

Shearwall

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X 1600 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 1700 X 1700 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.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

6-15-18

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. 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

Site Preparation

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

Fastening multi wide units

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

RS

Type gasket FOAM
Pg. 22

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: _____

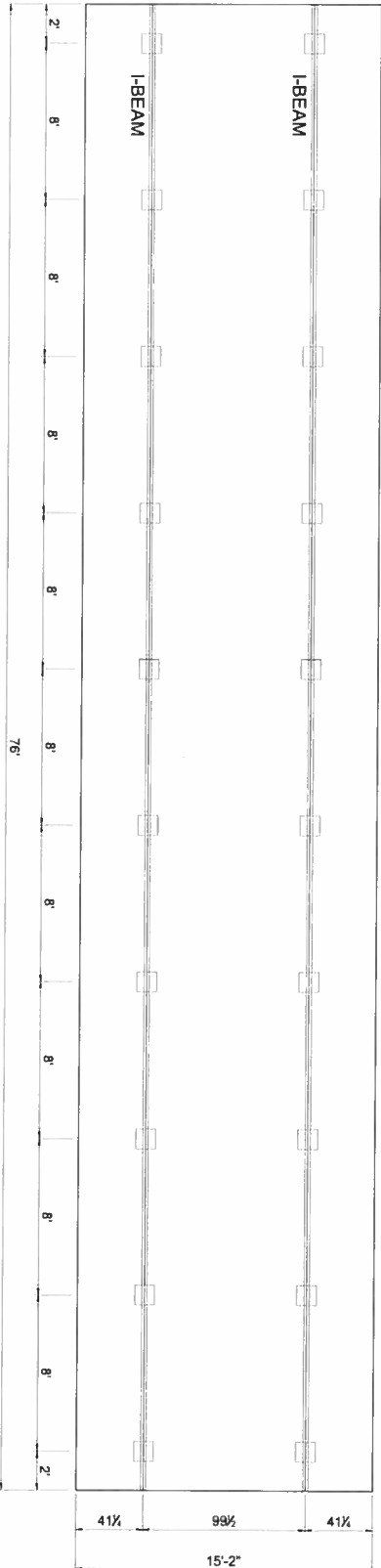
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Robert Shepard

Date

6-15-18



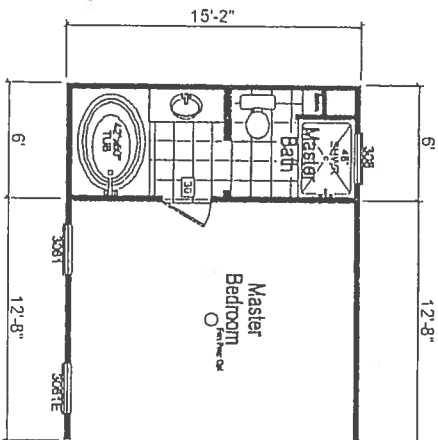
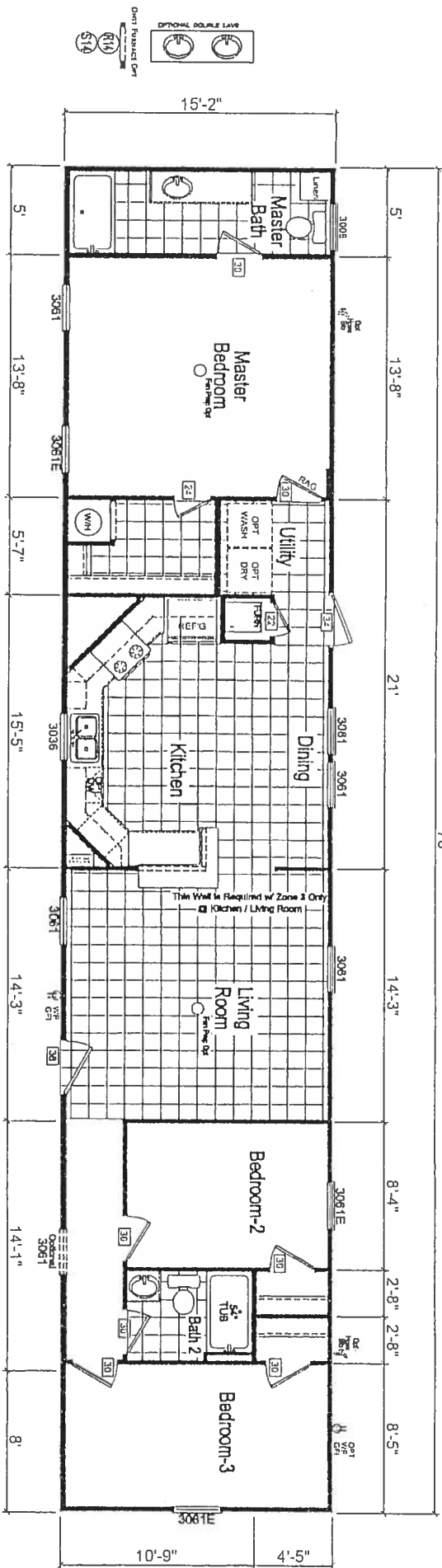
1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS GREATER WILL REQUIRE BLOCKING ON EACH SIDE.

| | | | | |
|--|------------|---------------|---|-------------|
| CHAMPION <small>P.O. BOX 2097 HWY 100 EAST LAKE CITY, FL 32056</small> | DAPIA SEAL | MODIFICATIONS | MODEL: 261-RH2763B TITLE: PIER FOUNDATION DRAWN BY: ROD DATE: 12-15-16 | SHEET: S-20 |
|--|------------|---------------|---|-------------|

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MODEL 261-RH2763B

3 BEDROOM, 2 BATH
ACTUAL SIZE: 76'-0" x 15'-2"
TOTAL AREA: 1,152 SQ. FT.



CHAMPION

18

DARIA SEAL

MODIFICATIONS

1 WH move - Window change 1x4x0 ROD B3-18-16

MODEL: 261-RH2763B

SHEET:

TITLE: Blackline

L-101

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DRAWN BY: ROD DATE: 12-15-16

OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM
MODEL 1101"V" (STEPS 1-15)
LONGITUDINAL ONLY: FOLLOW STEPS 1-9
FOR ADDING LATERAL ARM : Follow Steps 10-15
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - **STOP! Contact Oliver Technologies at 1-800-284-7437 :**
a) Pier height exceeds 48" b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96"
e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C) .
3. Place ground pan (C) directly below chassis I-beam . Press or drive pan firmly into soil until flush with or below soil.
SPECIAL NOTE: The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4" . VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.) .

4. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

| PIER HEIGHT (Approx. 45 degrees Max.) | 1.25" ADJUSTABLE Tube Length | 1.50" ADJUSTABLE Tube Length |
|--|---------------------------------|---------------------------------|
|--|---------------------------------|---------------------------------|

| | | |
|--------------------|-----|-----|
| 7 3/4" to 25" | 22" | 18" |
| 24 3/4" to 32 1/4" | 32" | 18" |
| 33" to 41" | 44" | 18" |
| 40" to 48" | 54" | 18" |

5. Install (2) of the 1.50" square tubes (E {18" tube}) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.
8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.

NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. **NOTE:** Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
11. **NOTE:** Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.



OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone 931-796-4555
Fax 931-796-8811
www.olivertechnologies.com

INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.
- The concrete shall be minimum 2500 psi mix
 - A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required.. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer OR When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

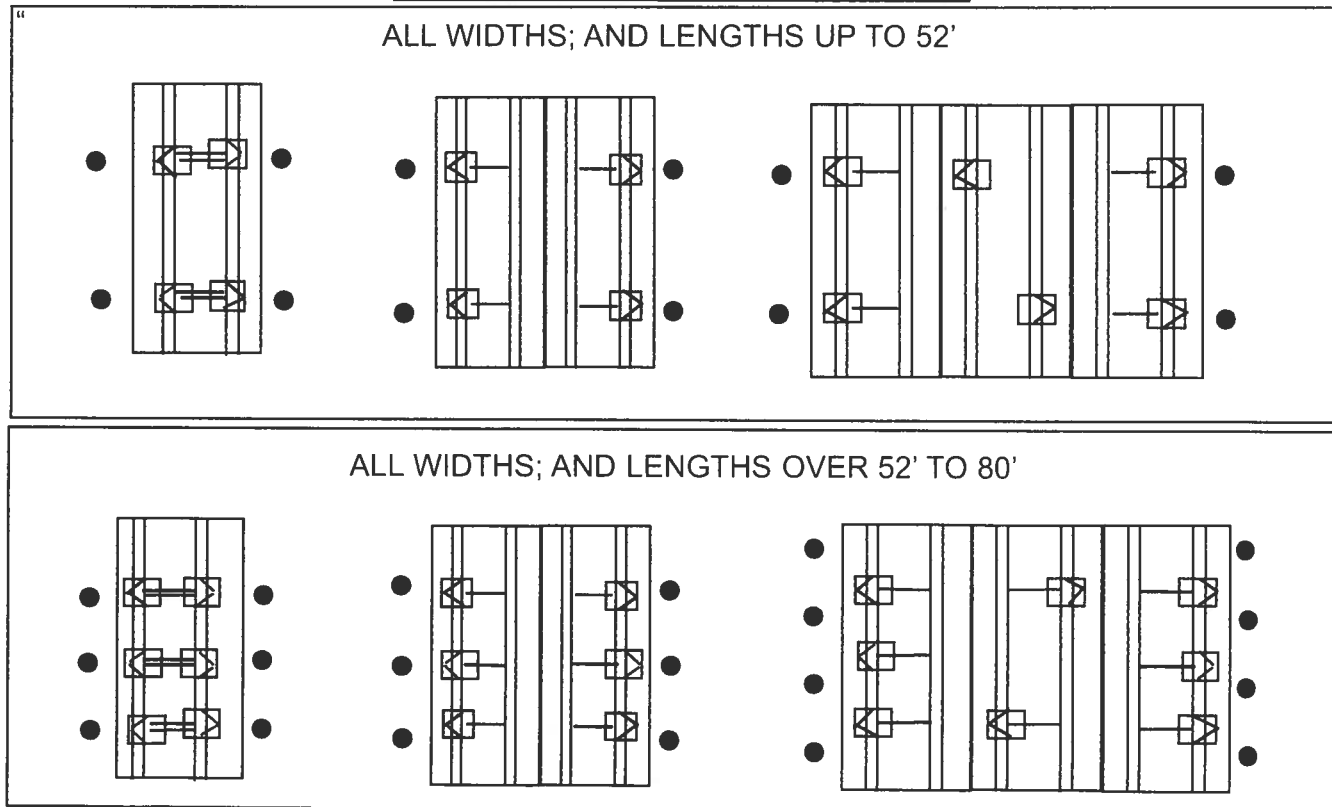
LATERAL: (Model 1101 TC "V")

18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

- LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- ☐ = LOCATION OF LONGITUDINAL BRACING ONLY
- ☐ = TRANSVERSE & LONGITUDINAL LOCATIONS

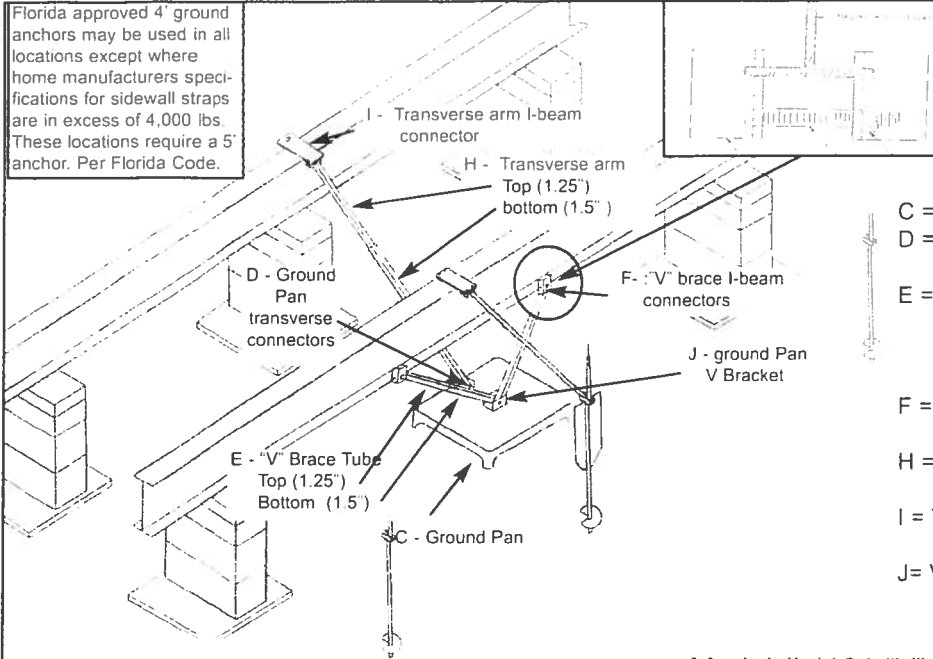
REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS

6 systems for home lengths up to 52' and 8 systems for homes over 52' and up to 80'. One stabilizer plate and frame tie required at each lateral bracing system.

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.

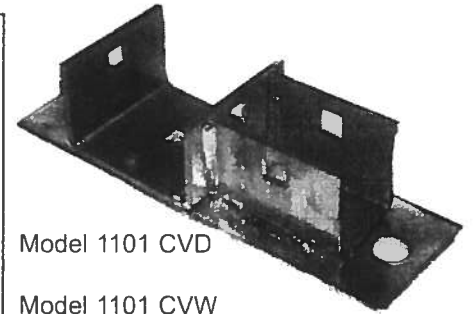
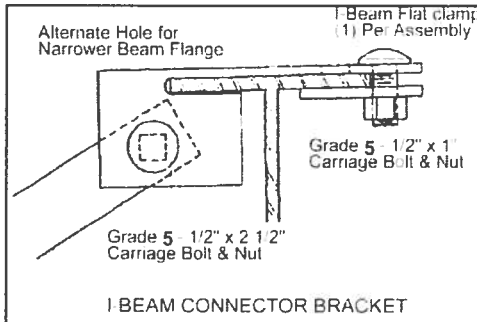
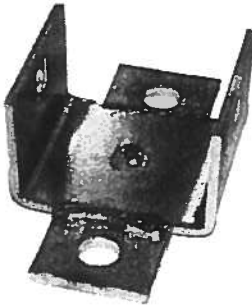


- C = GROUND PAN
- D = GROUND PAN CONNECTOR
- U BRACKETS TRANSVERSE
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTORS ASSEMBLY
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- J = V PAN BRACKET

Model # 1101 "V"

Longitude dry concrete bracket part # 1101 D-CPCA

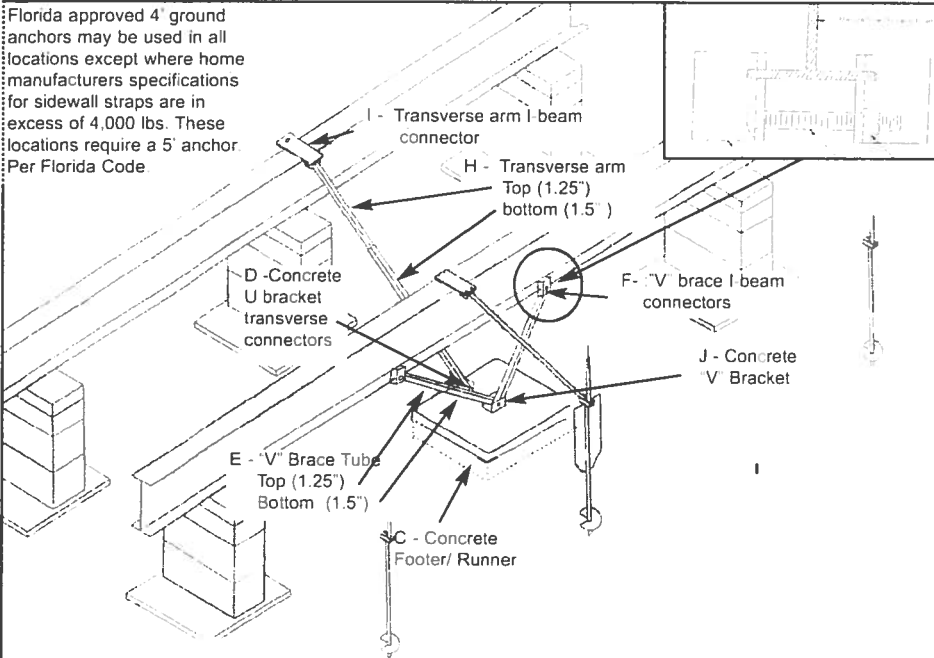
Wet bracket part # 1101 W-CPCA not shown



Model 1101 CVD

Model 1101 CVW not shown

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code



- C = CONCRETE FOOTER/RUNNER
- D = CONCRETE U BRACKET TRANSVERSE CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY (connects with grade 5 - 1/2" x 4" carriage bolt & nut)
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- J = CONCRETE "V" BRACKET (connects with grade 5 - 1/2" x 4" carriage bolt & nut)

Model # 1101 C "V"



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Columbia County Property Appraiser

updated: 6/4/2018

2017 Tax Year**Parcel:** 33-5S-16-03745-302

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

2017 TRIM (pdf)

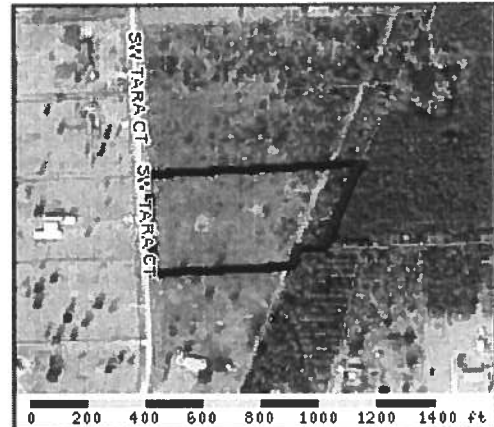
Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

| | | | |
|-------------------------|--|---------------------|-------|
| Owner's Name | SUBBRANDY LIMITED PARTNERSHIP | | |
| Mailing Address | P O BOX 513 LAKE CITY, FL 32056 | | |
| Site Address | 225 SW TARA CT | | |
| Use Desc. (code) | VACANT (000000) | | |
| Tax District | 3 (County) | Neighborhood | 33516 |
| Land Area | 5.010 ACRES | Market Area | 02 |
| Description | NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. LOT 2 SUNVIEW ESTATES ADDITION S/D. AFD 1026-1868, QC 1232- 1162, WD 1290-70, QC 1312-99, | | |

**Property & Assessment Values**

| | | |
|------------------------------|--|-------------|
| 2017 Certified Values | | |
| Mkt Land Value | cnt: (0) | \$27,000.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (0) | \$0.00 |
| XFOB Value | cnt: (0) | \$0.00 |
| Total Appraised Value | | \$27,000.00 |
| Just Value | | \$27,000.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$27,000.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | Cnty: \$27,000 Other: \$27,000 Schl: \$27,000 | |

| | | |
|------------------------------|--|-------------|
| 2018 Working Values | | |
| Mkt Land Value | cnt: (0) | \$27,000.00 |
| Ag Land Value | cnt: (1) | \$0.00 |
| Building Value | cnt: (0) | \$0.00 |
| XFOB Value | cnt: (0) | \$0.00 |
| Total Appraised Value | | \$27,000.00 |
| Just Value | | \$27,000.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$27,000.00 |
| Exempt Value | | \$0.00 |
| Total Taxable Value | Cnty: \$27,000 Other: \$27,000 Schl: \$27,000 | |

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

| Sale Date | OR Book/Page | OR Code | Vacant / Improved | Qualified Sale | Sale RCode | Sale Price |
|-----------|--------------|---------|-------------------|----------------|------------|-------------|
| 3/1/2016 | 1312/99 | QC | V | U | 11 | \$26,100.00 |
| 1/5/2016 | 1312/1284 | AG | I | U | 30 | \$0.00 |
| 1/15/2015 | 1290/70 | WD | V | U | 37 | \$28,000.00 |
| 3/20/2012 | 1232/1162 | QC | V | U | 12 | \$100.00 |
| 12/9/2010 | 1206/740 | TR | V | U | 30 | \$100.00 |
| 2/11/2004 | 1026/1868 | AG | V | U | 01 | \$24,000.00 |

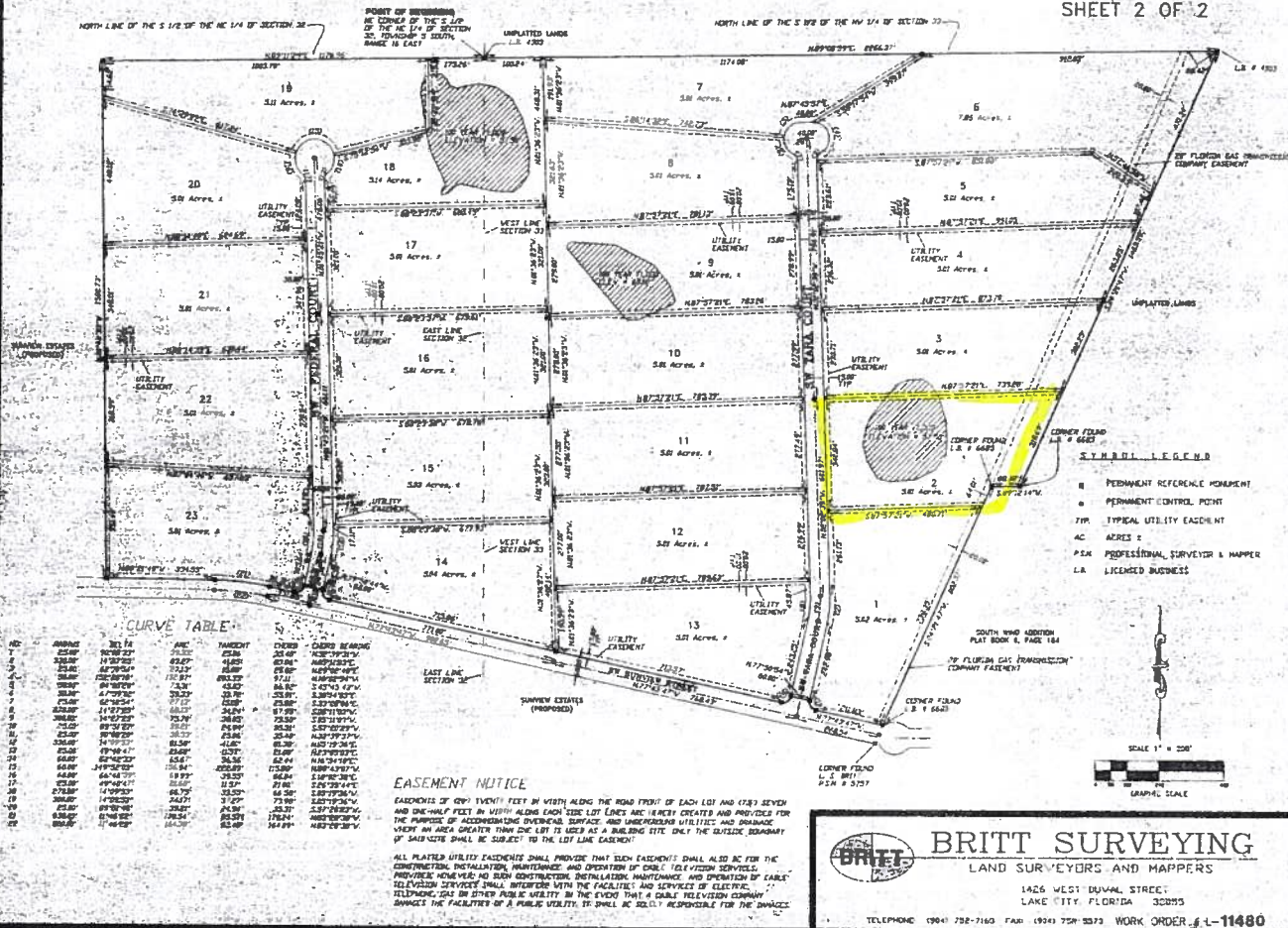
Building Characteristics

| Bldg Item | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
|-----------|-----------|----------|------------|-------------|-------------|------------|
| NONE | | | | | | |

Extra Features & Out Buildings

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|------|----------|-------|-------|------|--------------------|
| NONE | | | | | | |

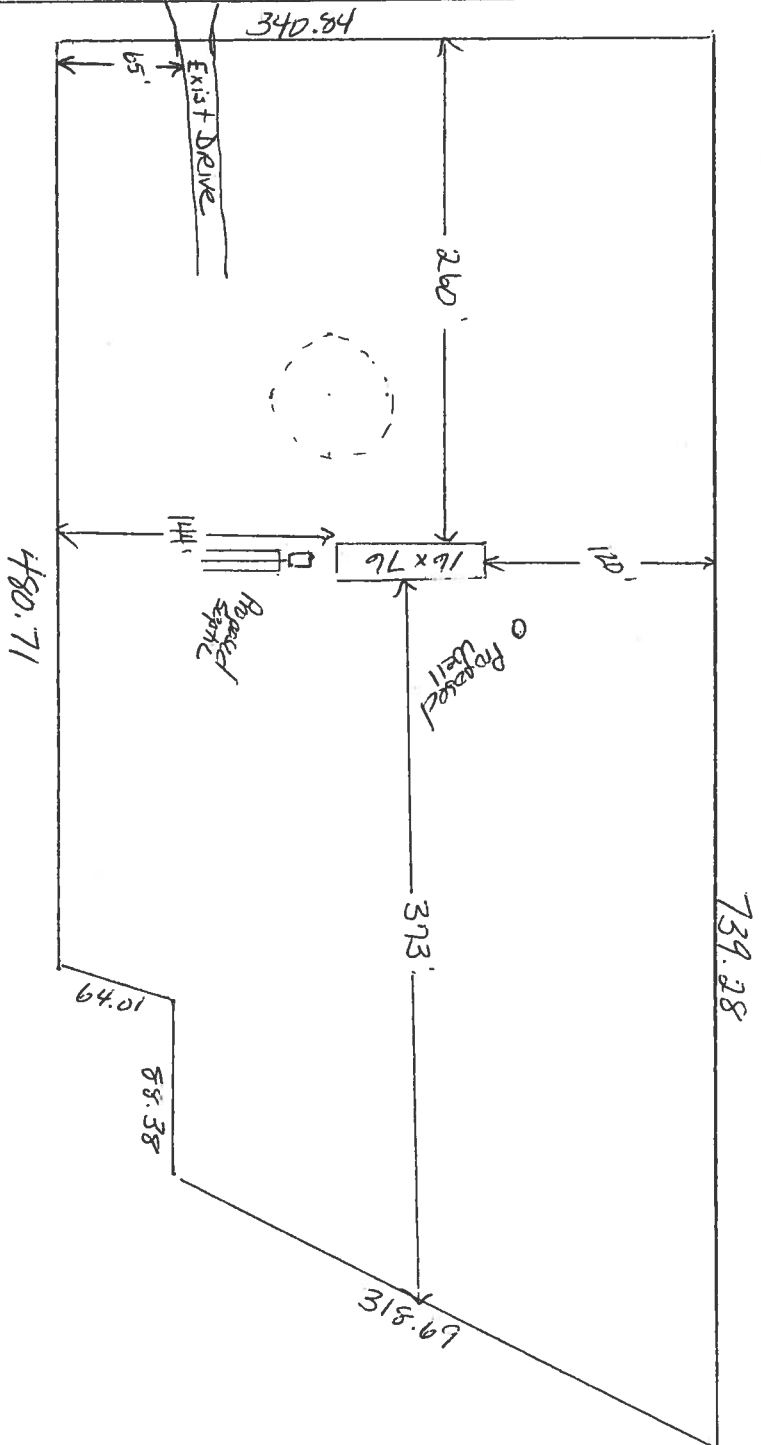
Land Breakdown



Plat Elevation is 57.50' on Lot 2

SW Tara Ct.

Brenda Karoly
 Lot 2 Sunview Estates Add
 225 SW Tara Ct.



N
 ↑

Scale 1" = 100'

Legend

Addresses

2009 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

White

2016 Aerials

Parcels

Development Zones

others

A-1

A-2

A-3

CG

CHI

CI

CN

CSV

ESA-2

I

ILW

MUD-1

PRD

PRRD

RMF-1

RMF-2

RO

RR

RSF-1

RSF-2

RSF-3

RSF/MH-1

RSF/MH-2

RSF/MH-3

DEFAULT

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

Private

Future Land Use Map

Mixed Use Development

Light Industrial

Industrial

Highway Interchange

Commercial

Residential High Density

(< 20 d.u. per acre)

Residential Medium/High Density

(< 14 d.u. per acre)

Residential Medium Density

(< 8 d.u. per acre)

Residential Moderate Density

(< 4 d.u. per acre)

Residential Low Density

(< 2 d.u. per acre)

Residential Very Low Density

(< 1 d.u. per acre)

Agriculture - 3

(< 1 d.u. per 5 acres)

Agriculture - 2

(< 1 d.u. per 10 acres)

Agriculture - 1

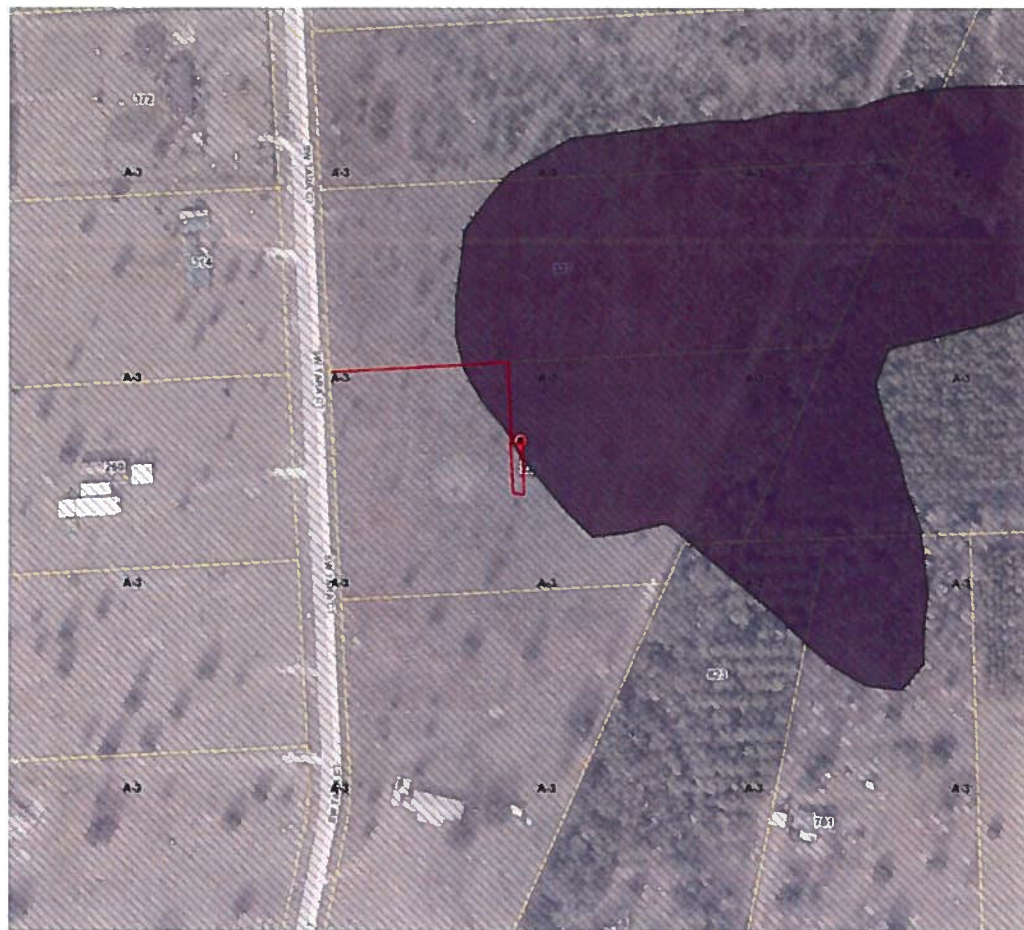
(< 1 d.u. per 20 acres)

Environmentally Sensitive Areas

(< 1 d.u. per 10 acres)

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Jul 19 2018 12:59:29 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 33-5S-16-03745-302

Owner: SUBRANDY LIMITED PARTNERSHIP

Subdivision: SUNVIEW ESTATES ADDITION

Lot: 2

Acres: 5.005413

Deed Acres: 5.01 Ac

District: District 2 Rusty DePratter

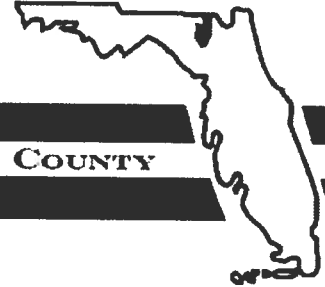
Future Land Uses: Environmentally Sensitive Areas -1

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.

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
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: **6/26/2018 2:05:29 PM**

Address: **225 SW TARA Ct**

City: **FORT WHITE**

State: **FL**

Zip Code **32038**

Parcel ID **03745-302**

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**

Karoly App # 1807-45

A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

(O) 386-758-3409

(F) 386-758-3410

(C) 386-623-3151

7/16/2018

To: Columbia County Building Department

Description of well to be installed for Customer: Karoly

Located at Address: 225 SW TARA COURT

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park

Sincerely
Bruce Park
President



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 AGENT AUTHORIZATION

I, Robert Sheppard, give this authority and I do certify that the below
Installer's Name

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 | Agents Company Name |
|-----------------------------------|--------------------------------|----------------------------------|
| Wendy Grennell | Wendy Grennell | Permit Services of North Florida |
| | | |
| | | |

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.

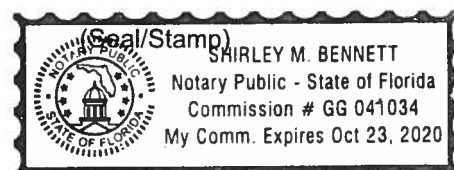
Robert Sheppard License Holders Signature (Notarized) #H1025386 License Number 6-15-18 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 15 day of June, 2018.

Shirley M. Bennett
NOTARY'S SIGNATURE



STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Subrandy Ltd,
as the owner of the below described property:

Property tax Parcel ID number 33-55-16-03745-302

Subdivision (Name, lot, Block, Phase) Sunview Estates Addition Lot 2

Give my permission for Robin + Brenda Karoly to place a

Circle one Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home /
Barn - Shed - Garage / Culvert / Other _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Brenda Karoly
Owner Signature

7-19-18
Date

Owner Signature

Date

Owner Signature

Date

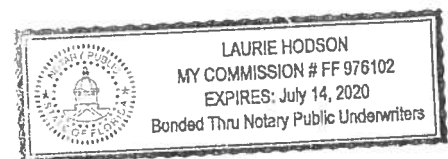
Sworn to and subscribed before me this 19 day of July, 20 18. This

(These) person(s) are personally known to me or produced ID _____
(Type)

[Signature]
Notary Public Signature

Laurie Hodson
Notary Printed Name

Notary Stamp



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1807-45 CONTRACTOR Robert Sheppard PHONE 386-623-2203

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>Robin Karoly</u> License #: <u>OWNER</u> Qualifier Form Attached <input type="checkbox"/> | Signature <u>[Signature]</u> Phone #: <u>904-708-9835</u> |
| MECHANICAL/ A/C <u>/</u> | Print Name <u>Ronald Bonds</u> License #: <u>CAC1817658</u> Qualifier Form Attached <input type="checkbox"/> | Signature <u>[Signature]</u> Phone #: <u>850-769-1453</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.



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

PERMIT NO. 18-0620
 DATE PAID: 7/5/18
 FEE PAID: 310.00
 RECEIPT #: 135683

APPLICATION FOR:

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

APPLICANT: Suhrandy Limited Partnership / KarolyAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING 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) (a) 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: 2 BLOCK: na SUB: Sunview Estates Add PLATTED: _____PROPERTY ID #: 33-58-16-03745-302 ZONING: Res. I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: 5.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ $\leq 2000\text{GPD}$ ☐ $> 2000\text{GPD}$ IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: SW Tara Court, FWDIRECTIONS TO PROPERTY: 47 South, TR TR Sunview St, TR Tara Court, 2nd lot 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 | SF Residential | 3 | 1152 | |
| 2 | | | | |
| 3 | | | | |

| | | | | |
|---|----------------|---|------|--|
| 1 | SF Residential | 3 | 1152 | |
| 2 | | | | |
| 3 | | | | |

N Floor/Equipment Drains ☒ Other (Specify) _____SIGNATURE: Rocky Ford DATE: 7/5/2018

DE 4015, 08/09 (Obsoletes previous editions which may not be used)
 Incorporated 64E-6.001, FAC

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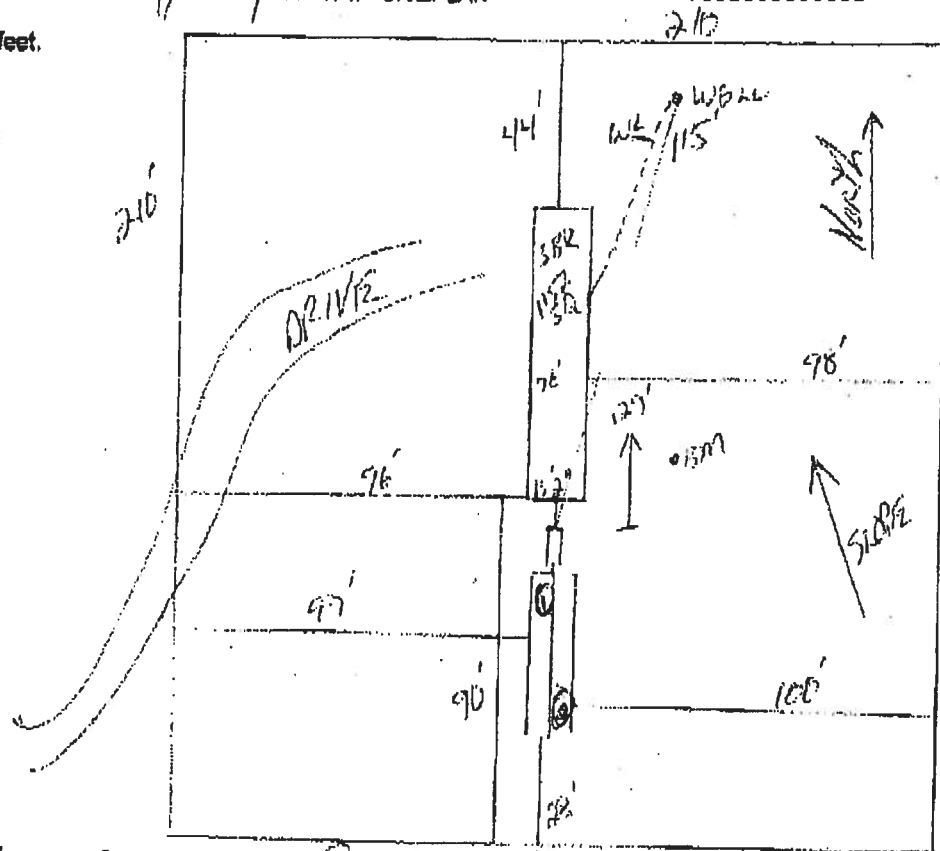
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

78-0620

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: 1. See 101 Area See Attached

Site Plan submitted by:

Rocky D F

Plan Approved

Not Approved

By

Sean M

ESJ

MASTER CONTRACTOR

Date 7/10/18

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-0022-4015-R)

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