Renewed Permit ##

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

31143

For Office Use Only (Revised 1-11) Zoning Official BLK 2 Aug 12 Building Official T.C. 8-16-12

AP# 1208-31 Date Received 8/10/12 By JW Permit# 30482

Flood Zone X Development Permit N/A Zoning RR Land Use Plan Map Category RES. U.L. DEV.

Comments Plat requires MFE of 126 feet elevation conformation letter required before permanent power

FEMA Map# N/A Elevation N/A Finished Floor 126' River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 12-0167 ☑ EH Release ☑ Well letter ☑ Existing well WATER SUPPLY

☑ 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

Road/Code School = TOTAL Suspended March 2009 ☑ Ellisville Water Sys

Property ID # 15-4S-17-08355-444 Subdivision EAGLES RIDGE; LOT 14 (USE)

- New Mobile Home Used Mobile Home ✓ MH Size 24-52 Year 1996
- Applicant Wayne Wilbert Austin Phone # 352-494-2326
- Address 149 NE Empire Drive Lake City FL 320
- Name of Property Owner Janeasha Taylor Phone# 386-292-2275
- 911 Address 289 SE Cheddar Ct, Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Janeasha Taylor Phone # 386-292-2275
  Address 3373 172nd St Lake City FL 32025
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 0
- Lot Size Total Acreage 1.00 Acre
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 90 East to Price Creek Rd To Approx 1½ mile to Sharon Ln turn Rt Hidden Acres go to Bonnie Ln Lt go to Bonnie Rt go to Cheddar Court
- Name of Licensed Dealer/Installer Gayle Eddy Phone # 3524942326
- Installers Address 10237 SW 40TH Terr Lake Butler FL. 32054
  - License Number IH1025339 Installation Decal # 10897

TR, 500 ft. down on the L.

Spoke to Gayle 9-6-12

Spoke to Gayle 8-21-12 $398.17

DATE 06/14/2013

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000031143

APPLICANT FRANKIE GAINES PHONE 386-292-3786

ADDRESS 289 SE CHEDDAR CRT LAKE CITY FL 32025

OWNER JANEASHA TAYLOR PHONE 386.292.3786

ADDRESS 289 SE CHEDDAR COURT LAKE CITY FL 32025

CONTRACTOR GAYLE EDDY PHONE 352.494.2326

LOCATION OF PROPERTY PRICE CREEK TO SR 100,TR TO SHARON LN,TR TO HIDDEN ACRES TO BONNE,TL TO BENNIE,TR TO CHEDDAR,TR AND IT'S 500' ON L.

TYPE DEVELOPMENT RENEW EXPIRED 30482 ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES ____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING RR MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 15-4S-17-08355-414 SUBDIVISION EAGLES RIDGE

LOT 14 BLOCK ____ PHASE 1 UNIT ____ TOTAL ACRES 1.00

		IH1025339		
Culvert Permit No.	Culvert Waiver	Contractor's License Number		Applicant/Owner/Contractor
EXISTING	12-0167	BK	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: PLAT REQUIRES MFE 126'. ELEVATION CONFIRMATION LETTER REQUIRED BEFORE PERMANENT POWER RELEASED.

REPLACES EXPIRED PERMIT 30482 Check # or Cash CASH REC'D

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power _____ date/app. by

Foundation _____ date/app. by (footer/Slab)

Monolithic _____ date/app. by

Under slab rough-in plumbing _____ date/app. by

Slab _____ date/app. by

Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by

Insulation _____ date/app. by

Rough-in plumbing above slab and below wood floor _____ date/app. by

Electrical rough-in _____ date/app. by

Heat & Air Duct _____ date/app. by

Peri. beam (Lintel) _____ date/app. by

Pool _____ date/app. by

Permanent power _____ date/app. by

C.O. Final _____ date/app. by

Culvert _____ date/app. by

Pump pole _____ date/app. by

Utility Pole _____ date/app. by

M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Reconnection _____ date/app. by

RV _____ date/app. by

Re-roof _____ date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 300.00 ZONING CERT. FEE $ ____ FIRE FEE $ 0.00 WASTE FEE $ _____

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Gayle Eddy License # IH1025339

911 Address where home is being installed. 289 SE Cheddar Ct, Lake City, fl 32025

Manufacturer Nobility Length x width 28x52

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

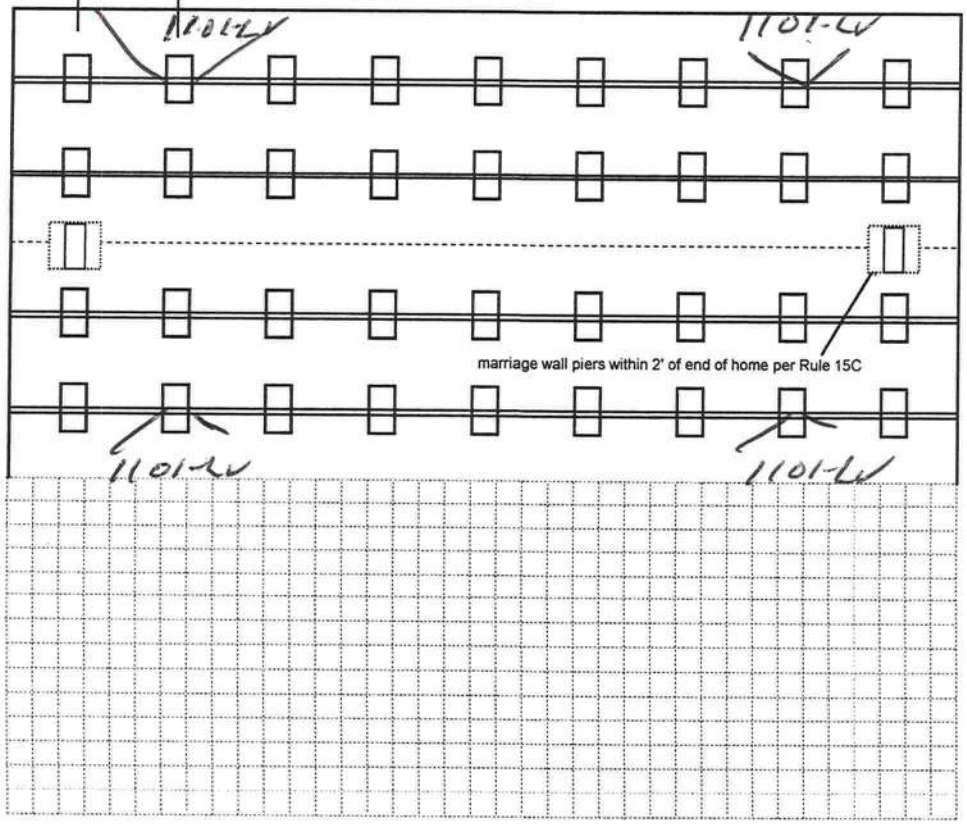
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials GE

Typical pier spacing 2' 4'5"

lateral / longitudinal

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



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 # 10897

Triple/Quad ☐ Serial # NH87225 AEB *

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'
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 18 1/2 X 18 1/2

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	Pier pad size
10	18 1/2 X 18 1/2

POPULAR PAD SIZES

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

ANCHORS

4 ft ✓ 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Olivel Tec

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

OTHER TIES

	Number
Sidewall	0
Longitudinal	4
Marriage wall	
Shearwall	

COLUMBIA COUNTY PERMIT WORKSHEET

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 1500

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 1500

TORQUE PROBE TEST

The results of the torque probe test is 290 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 Gayle Eddy

Date Tested 7/18/12

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. _____

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. 15

Site Preparation

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

Fastening multi wide units

Floor:	Type Fastener: Lags	Length: 6"	Spacing: 12" & 19"
Walls:	Type Fastener: screw	Length: 3"	Spacing: 12" & 11"
Roof:	Type Fastener: Lag	Length: 6	Spacing: 12" & 11"

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, meldew 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 GE

Type gasket ~~Foam~~ Pg. 15

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓. Pg. 15
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

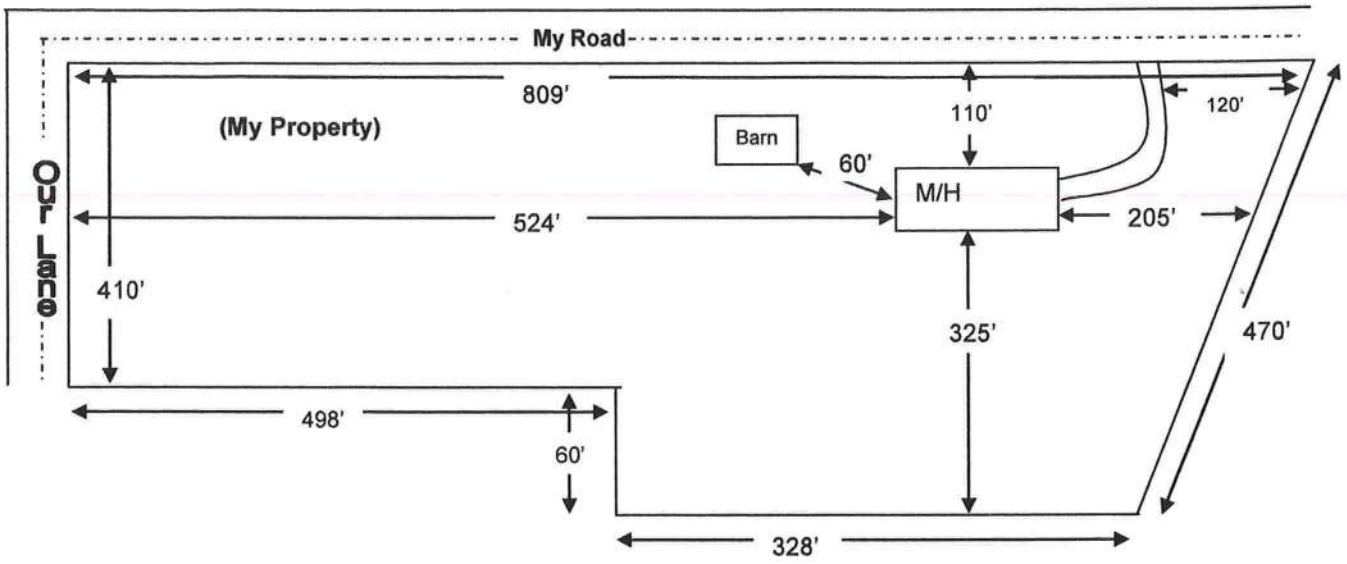
Miscellaneous

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 : _____

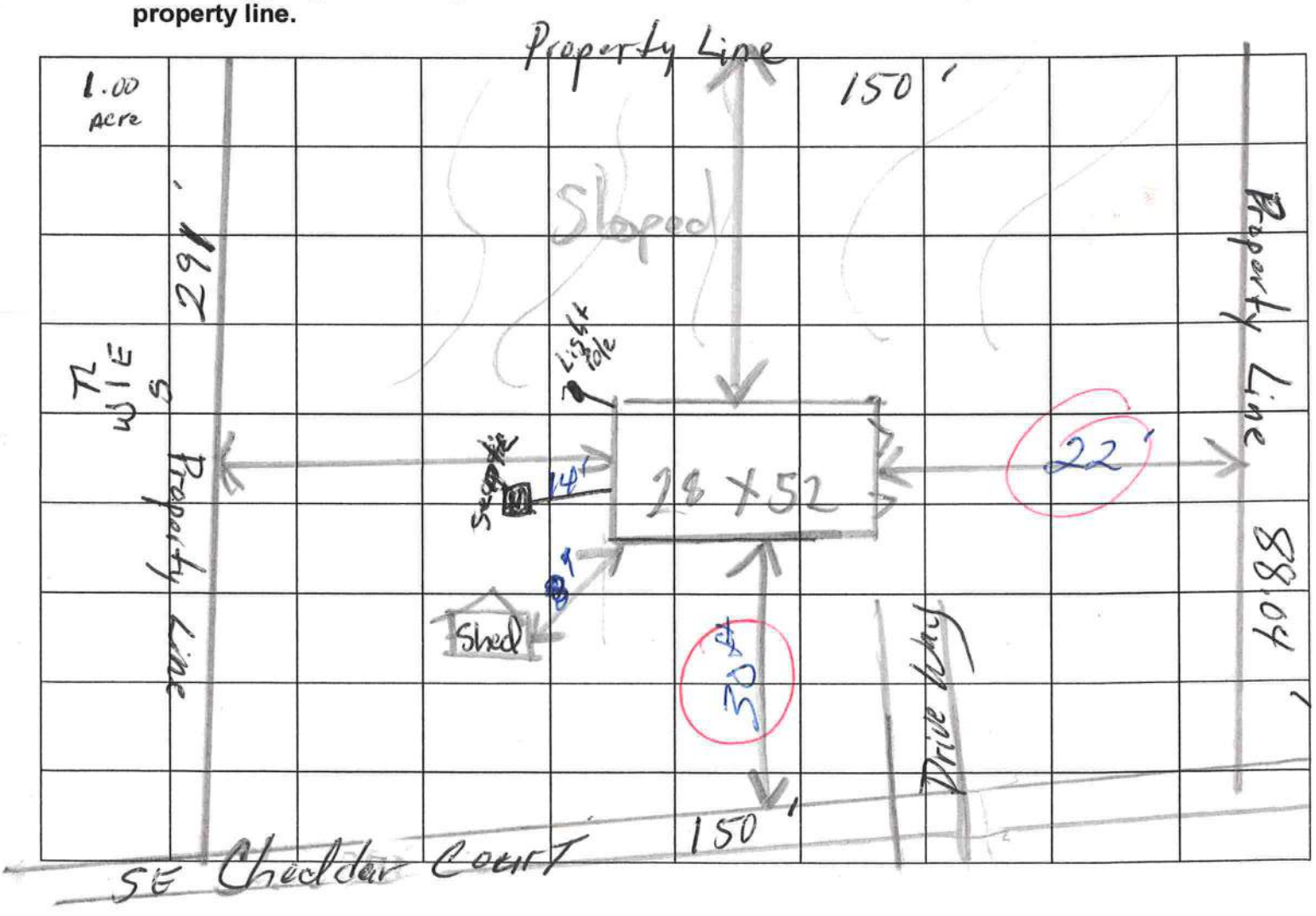
Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Gayle Eddy **Date** 8/10/12

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1208-31 CONTRACTOR Gayle Eddy PHONE 3524942329

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 Janeasha Taylor License #:	Signature Janeasha Taylor Phone #: 386-292-2275
MECHANICAL/ A/C _____	Print Name Janeasha Taylor License #:	Signature Janeasha Taylor Phone #: 386-292-2275
PLUMBING/ GAS	Print Name Janeasha Taylor License #:	Signature Janeasha Taylor Phone #: 386-292-2275

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.

Columbia County Property Appraiser

CAMA updated: 6/7/2012

2011 Tax Year

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print

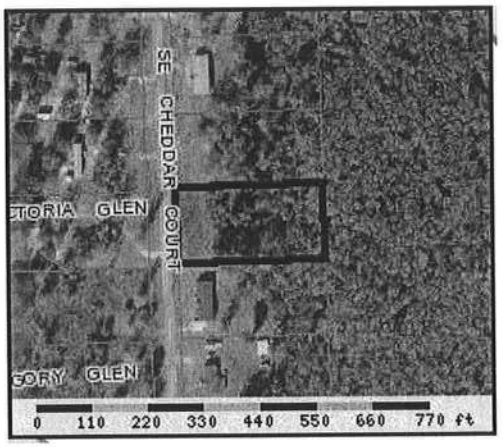
Parcel: 15-4S-17-08355-414

<< Next Lower Parcel | Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	SUBRANDY LIMITED PARTNERSHIP		
Mailing Address	P O BOX 513 LAKE CITY, FL 32056		
Site Address	289 SE CHEDDAR CT		
Use Desc. (code)	VACANT (000000)		
Tax District	2 (County)	**Neighborhood**	15417
Land Area	1.000 ACRES	**Market Area**	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 14 EAGLES RIDGE S/D PHASE 1. AFD 1054-1160,QC 1204-2103			



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	$18,000.00
Ag Land Value	cnt: (1)	$0.00
Building Value	cnt: (0)	$0.00
XFOB Value	cnt: (0)	$0.00
Total Appraised Value		$18,000.00
Just Value		$18,000.00
Class Value		$0.00
Assessed Value		$18,000.00
Exempt Value		$0.00
Total Taxable Value		Cnty: $18,000 Other: $18,000 | Schl: $18,000

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
11/1/2010	1204/2103	QC	V	U	12	$100.00
2/22/2005	1054/1160	AG	V	U	01	$17,000.00

Building Characteristics

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

Extra Features & Out Buildings

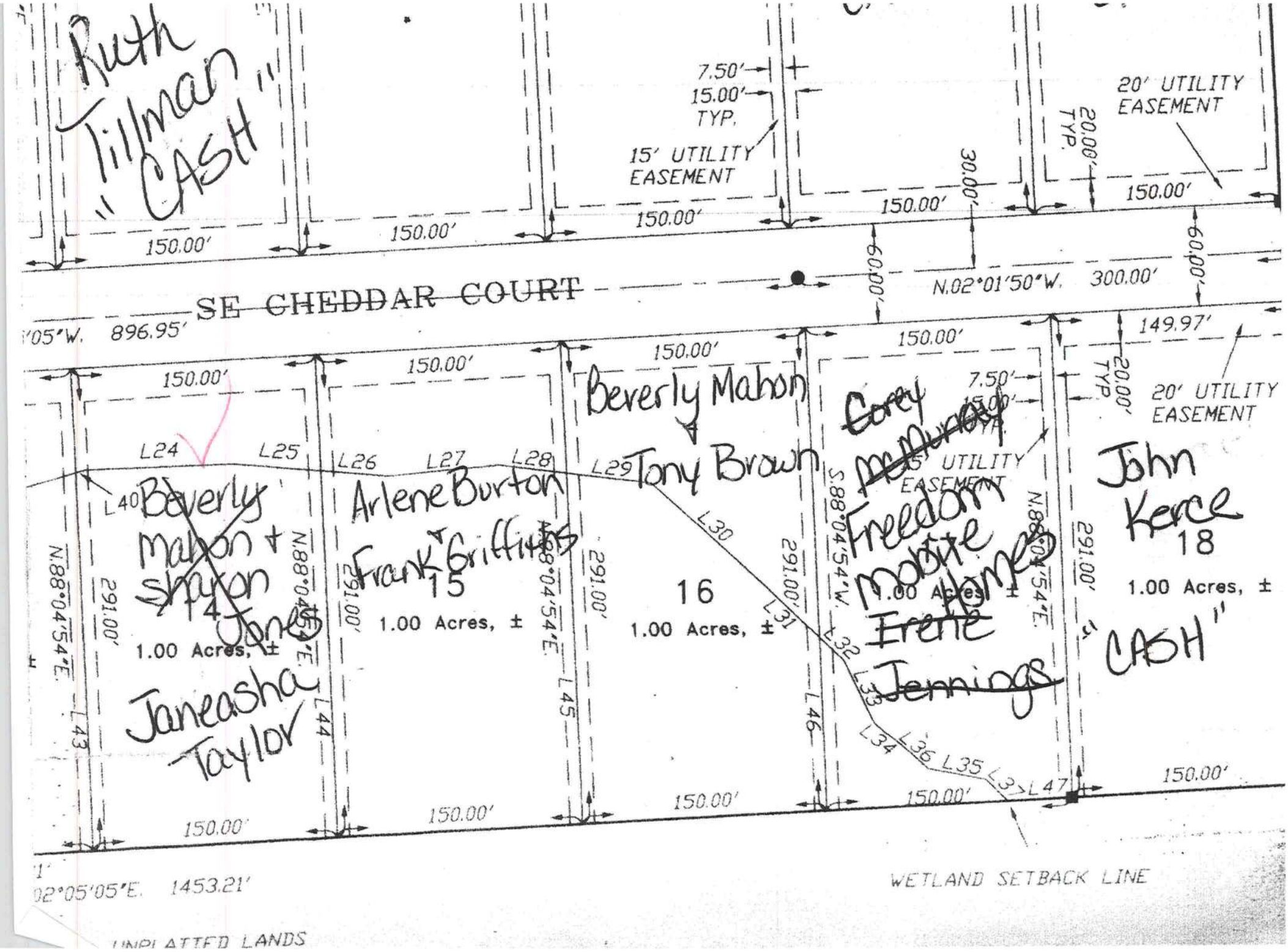
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1 LT	1.00/1.00/1.00/1.00	$14,400.00	$14,400.00

Columbia County Property Appraiser

CAMA updated: 6/7/2012


Ruth Tillman "CASH"
7.50'
15.00' TYP.
15' UTILITY EASEMENT
20' UTILITY EASEMENT
20.00' TYP.
30.00'
150.00'
150.00'
150.00'
150.00'
60.00'
60.00'
N.02°01'50"W. 300.00'
SE CHEDDAR COURT
'05"W. 896.95'
149.97'
150.00'
150.00'
150.00'
150.00'
L24
L25
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L37
L40
L43
L44
L45
L46
L47
Beverly Mahon
Tony Brown
Corey McMurray
Freedom mobile Homes
Irene Jennings
John Kerce
18
1.00 Acres, ±
"CASH"
Beverly Mahon + Sharon Jones
1.00 Acres, ±
Janeasha Taylor
Arlene Burton
Frank Griffin
15
1.00 Acres, ±
16
1.00 Acres, ±
1.00 Acres, ±
N.88°04'54"E.
S.88°04'54"W.
N.88°04'54"E.
291.00'
291.00'
291.00'
291.00'
02°05'05"E. 1453.21'
WETLAND SETBACK LINE
UNPLATTED LANDS

STATE OF FLORIDA

Mail Lien Satisfaction to: Dept of Highway Safety and Motor Vehicles, Neil Kirkman Building, Tallahassee, FL 32399-0500

T# 716243125
B# 1646707

Identification Number	Year	Make	Body	WT-L-BHP	Vessel Regis. No.	Title Number
N87225B	1996	KING	HS	52'		72427605

Registered Owner:

GREEN TREE SERVICING LLC
9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

Date of Issue 07/13/2012

Lien Release
Interest in the described vehicle is hereby released
By
Title
Date

IMPORTANT INFORMATION

1. When ownership of the vehicle described herein is transferred, the seller MUST complete in full the Transfer of Title by Seller section at the bottom of the certificate of title.
2. Upon sale of this vehicle, the seller must complete the notice of sale on the reverse side of this form.
3. Remove your license plate from the vehicle.
4. See the web address below for more information and the appropriate forms required for the purchaser to title and register the vehicle, mobile home or vessel: http://www.hsmv.state.fl.us/html/titlinf.html

Mail To:

GREEN TREE SERVICING LLC
9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

LIEN SATISFACTION

CERTIFICATE OF TITLE

Identification Number	Year	Make	Body	WT-L-BHP	Vessel Regis. No.	Title Number
N87225B	1996	KING	HS	52'		72427605

Prev State	Color	Primary Brand	Secondary Brand	Non-Conf Brands	Use	Prev Issue Date
FL	UNK				PRIVATE	04/27/1999

Odometer Status of Vessel Manufacturer or CH use	Hull Material	Prop	Date of Issue
			07/13/2012

Lien Release
Interest in the described vehicle is hereby released
By
Title
Date

Registered Owner:

GREEN TREE SERVICING LLC
9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

1st Lienholder
NONE

DIVISION OF MOTORIST SERVICES TALLAHASSEE FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Boyd Walden
Director

Julia L. Jones
Executive Director

Control Number 107512714
3 /8 107512714

TRANSFER OF TITLE BY SELLER (This section must be completed at the time of sale.)

Federal and/or state law require that the seller state the mileage, purchaser's name, selling price and date sold in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

The title is warranted to be free from any liens except as noted on the face of the certificate, and the motor vehicle or vessel described is hereby transferred to:

Seller Must Enter Purchaser's Name: Address:

Seller Must Enter Selling Price: Seller Must Enter Date Sold:

I/We state that this [ ] 5 or [ ] 6 digit odometer now reads [| | | | | |] [X] (no tenths) miles, date read and I hereby certify that to the best of my knowledge the odometer reading:

[ ] 1. reflects ACTUAL MILEAGE [ ] 2. is IN EXCESS OF ITS MECHANICAL LIMITS [ ] 3. is NOT THE ACTUAL MILEAGE.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SELLER Must Sign Here: CO-SELLER Must Sign Here:

Print Here: Print Here:

Selling Dealer's License Number: Tax No.: Tax Collected:

Auction Name: License Number:

PURCHASER Must Sign Here: CO-PURCHASER Must Sign Here:

Print Here: Print Here:

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE.

5101 3rd St Bradenton FL

HSMV 82150 REV 04/08 STATE OF FLORIDA

VOID IF ALTERED

VOID IF ALTERED

STATE OF FLORIDA

Mail Lien Satisfaction to: Dept of Highway Safety and Motor Vehicles, Neil Kirkman Building, Tallahassee, FL 32399-0500

T# 716242982
B# 1646707

Identification Number	Year	Make	Body	WT-L-BHP	Vessel Regis. No.	Title Number
N87225A	1996	KING	HS	52'		72427604

Registered Owner:

GREEN TREE SERVICING LLC
9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

Date of Issue 07/13/2012

Lien Release
Interest in the described vehicle is hereby released
By_____
Title_____
Date_____

Mail To:

GREEN TREE SERVICING LLC
9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

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LIEN SATISFACTION

CERTIFICATE OF TITLE

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Date_____

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9119 CORPORATE LAKE DR STE 175
TAMPA, FL 33634

1st Lienholder
NONE

DIVISION OF MOTORIST SERVICES TALLAHASSEE FLORIDA

Boyd Walden
Director

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Julie L. Jones
Executive Director

Control Number 107512713
3 /8 107512713

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This title is warranted to be free from any liens except as noted on the face of the certificate and the motor vehicle or vessel described is hereby transferred to:

Seller Must Enter Purchaser's Name: Address:

Seller Must Enter Selling Price: Seller Must Enter Date Sold:

I/We state that this [ ] 5 or [ ] 6 digit odometer now reads [ ][ ][ ][ ][ ][ ] (no tenths) miles, date read: and I hereby certify that to the best of my knowledge the odometer reading is:

[ ] 1. reflects ACTUAL MILEAGE. [ ] 2. is IN EXCESS OF ITS MECHANICAL LIMITS. [ ] 3. is NOT THE ACTUAL MILEAGE.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SELLER Must Sign Here: CO-SELLER Must Sign Here:

Print Here: Print Here:

Selling Dealer's License Number: Tax No: Tax Collector:

Auction Name: License Number:

PURCHASER Must Sign Here: CO-PURCHASER Must Sign Here:

Print Here: Print Here:

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE.

Elizabeth Thomas

HSMV 82050 (REV. 04/08)

STATE OF FLORIDA

VOID IF ALTERED

VOID IF ALTERED

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, Gayle Eddy (Installer License Holder Name), give this authority for the job address show below only, 3371 172ND ST. Lake City, FL. (Job Address), and I do certify that the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Wilbert Austin	Wilbert Austin	___ 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.

Gayle Eddy — License Holders Signature (Notarized)
FH1025339 — License Number
8-10-12 — Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Union

The above license holder, whose name is Gayle Eddy, personally appeared before me and is known by me or has produced identification (type of I.D.) personally Known on this 10 day of Aug 2012.

Patricia Benefield
NOTARY'S SIGNATURE

PATRICIA ANN BENEFIELD
MY COMMISSION # DD 888776
EXPIRES: May 11, 2013
Bonded Thru Notary Public Underwriters
(Seal/Stamp)

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT 1208-31

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwannee

OWNERS NAME Janeasha Taylor PHONE 386-292-2276 CELL

INSTALLER Gayle Eddy PHONE 3524942326 CELL

INSTALLERS ADDRESS 10237 SW 40TH Terr Lake Butler Fl. 32054

MOBILE HOME INFORMATION

MAKE Mobility YEAR 1996 SIZE 28 X 52

COLOR Grey SERIAL No. D87225-A&B

WIND ZONE 2 SMOKE DETECTOR

INTERIOR:
FLOORS Good

DOORS Good

WALLS Good

CABINETS Good

ELECTRICAL (FIXTURES/OUTLETS) Good

EXTERIOR:
WALLS / SIDDING Good

WINDOWS Good

DOORS Good

INSTALLER: APPROVED ✓ NOT APPROVED

INSTALLER OR INSPECTORS PRINTED NAME

Installer/Inspector Signature Gayle Eddy License No. IH1025339 Date 8/18/12

NOTES:

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [signature] Date 8-10-12

1208-31

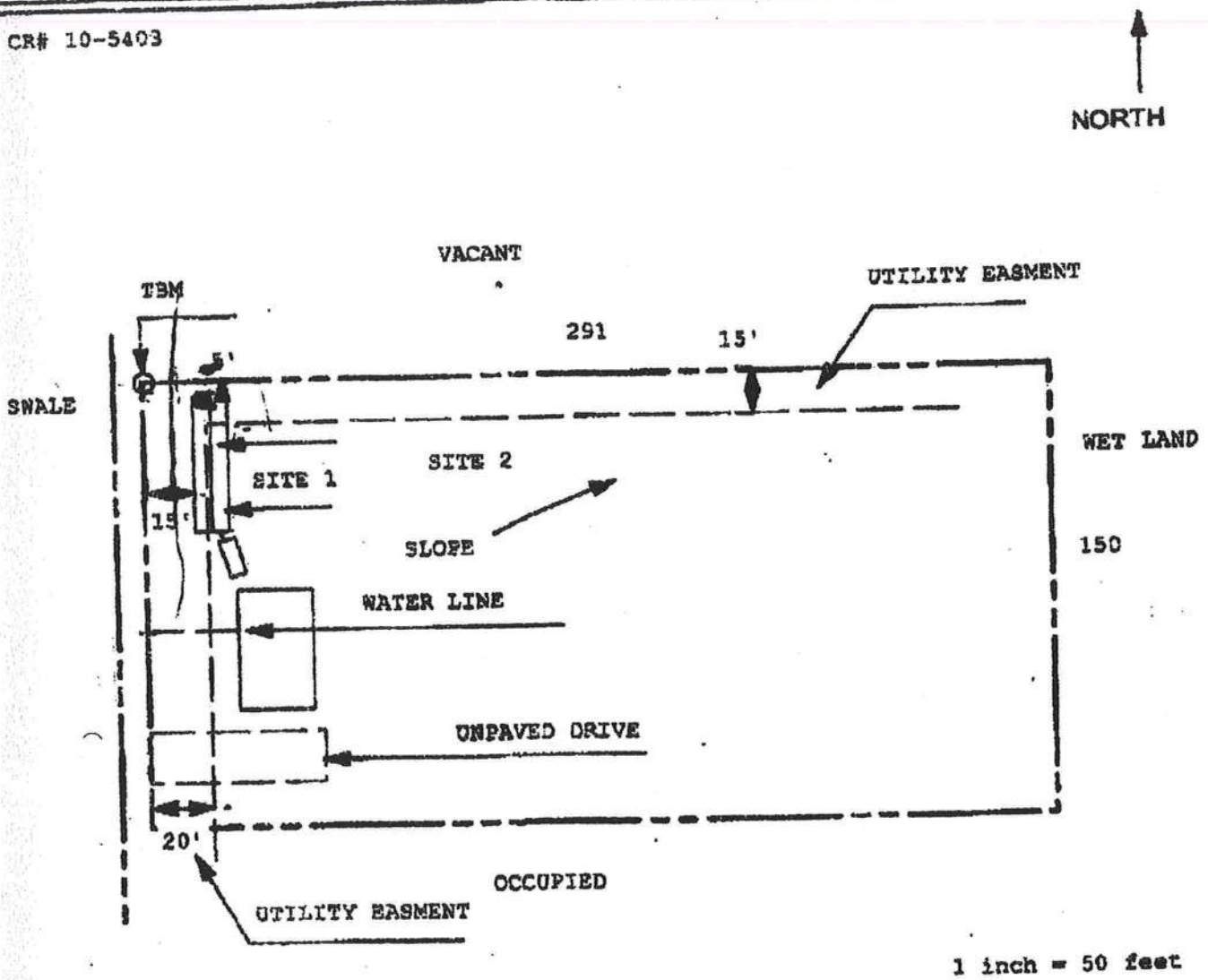
07-29-12;10:55AM;

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

Permit Application Number: 12-0167

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

CR# 10-5403



1 inch = 50 feet

Site Plan Submitted By Paul Kelly Date 7/29/12

Plan Approved ✓ Not Approved ____ Date ____

By Sallie Food Env Health Director CPHU
Columbia

Notes: ____

JDV

CR # 10-5403

PERMIT NO. 12-0167
DATE PAID: 3/29/12
FEE PAID: 375.00
RECEIPT #: 19298

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

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: JANEASHA TAYLOR & FRANKIE GAINES

AGENT: PAUL LLOYD TELEPHONE: _____

MAILING ADDRESS: 380 DOUBLE RUN RD. LAKE CITY FL 32055

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: 14 BLOCK: N/A SUBDIVISION: EAGLES RIDGE UNIT 1 PLATTED: 2004

PROPERTY ID #: 15-4S-17-08366-414 ZONING: RES I/M OR EQUIVALENT: [NO]

PROPERTY SIZE: 1.000 ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ]<=2000GPD [X]>2000GPD

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

PROPERTY ADDRESS: 289 SE CHEDDAR CT. LAKE CITY

DIRECTIONS TO PROPERTY: 90 EAST TURN RIGHT ON HWY 100, TURN RIGHT ON PRICE CREEK RD., TURN RIGHT ON SHARON LN., TURN LEFT ON BONNIE RD., TURN RIGHT ON BENNIE LN., TURN LEFT ON CHEDDAR CT. LOT ON LEFT.

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	MOBILE HOME	3	960	Held for signed site plan
2				Rec'd 3-29-12
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify) _____

SIGNATURE: Paul Lloyd DATE: 3/20/12

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

1208-31

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF COLUMBIA

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

Tax Parcel No. R08355-414

Subdivision (name, lot, block, phase) LOT 14, Eagles Ridge Ph. 1

Give my permission to Janeasha Taylor to place a mobile home/travel trailer/single family home (circle one) on the above mentioned property.

I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property.

Bradley N Dicks
Owner

Owner

SWORN AND SUBSCRIBED before me this 22nd day of August, 2012. This (these) person(s) are personally known to me or produced ID _____.

Nanci Brinkley
Notary Signature

NANCI L. BRINKLEY
MY COMMISSION # DD 932450
EXPIRES: December 26, 2013
Bonded Thru Notary Public Underwriters

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: 8/22/2012 **DATE ISSUED:** 9/5/2012

ENHANCED 9-1-1 ADDRESS:

289 SE CHEDDAR CT

LAKE CITY FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

15-4S-17-08355-414

Remarks:

ADDRESS FOR PROPOSED STRUCTURE 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.

2342

CODE ENFORCEMENT

PRELIMINARY MOBILE HOME INSPECTION REPORT

1208-46

DATE RECEIVED 8-6-12 BY UH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME Janeasha Taylor PHONE 386-292-2275 CELL

ADDRESS 3373 172nd L/O Luella Thomas Lake City, FL 32025

MOBILE HOME PARK SUBDIVISION Eagles Ridge

DRIVING DIRECTIONS TO MOBILE HOME Go 90 E to 441 to 760 to Price Creek Rd Lt 2 miles to Rt on Sharon to Bonnie Lt to Bennie Rt to Cheddar Lt then 1st on (L)

MOBILE HOME INSTALLER Gayle Eddy PHONE 3524942336 CELL

MOBILE HOME INFORMATION

MAKE Mobility Homes YEAR 1996 SIZE 28 X 52 COLOR Grey

SERIAL No. TN87225 AEB

WIND ZONE 2 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 (P) OPERATIONAL ( ) MISSING

P FLOORS (P) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION

P DOORS (P) OPERABLE ( ) DAMAGED

P WALLS (P) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS (P) OPERABLE ( ) INOPERABLE

P PLUMBING FIXTURES (P) OPERABLE ( ) INOPERABLE ( ) MISSING

P CEILING (P) SOLID ( ) HOLES ( ) LEAKS APPARENT

P ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

P ROOF (P) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS:

NOT APPROVED ____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS

SIGNATURE Jay Cu ID NUMBER 304 DATE 9-10-12

DATE 09/24/2012

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000030482

APPLICANT WILBERT AUSTIN PHONE 386.697.5037

ADDRESS 149 NE EMPIRE DRIVE LAKE CITY FL 32055

OWNER JANEASHA TAYLOR PHONE 386.292.2275

ADDRESS 289 SE CHEDDAR COURT LAKE CITY FL 32025

CONTRACTOR GAYLE EDDY PHONE 352.494.2326

LOCATION OF PROPERTY PRICE CREEK TO SR 100,TR TO SHARON LN,TR TO HIDDEN ACRES TO BONNE,TL TO BENNIE,TR TO CHEDDAR,TR AND IT'S 500' ON L.

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES ____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING RR MAX. HEIGHT _____

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 15-4S-17-08355-414 SUBDIVISION EAGLES RIDGE

LOT 14 BLOCK ____ PHASE 1 UNIT ____ TOTAL ACRES 1.00

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
		IH1025339	
EXISTING	12-0167	BLK	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: PLAT REQUIRES MFE OF 126'. ELEVATION CONFIRMATION LETTER REQUIRED BEFORE PERMANENT POWER.

Check # or Cash CASH REC'D.

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ date/app. by

Foundation _____ date/app. by

Monolithic _____ date/app. by

Under slab rough-in plumbing _____ date/app. by

Slab _____ date/app. by

Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by

Insulation _____ date/app. by

Rough-in plumbing above slab and below wood floor _____ date/app. by

Electrical rough-in _____ date/app. by

Heat & Air Duct _____ date/app. by

Peri. beam (Lintel) _____ date/app. by

Pool _____ date/app. by

Permanent power _____ date/app. by

C.O. Final _____ date/app. by

Culvert _____ date/app. by

Pump pole _____ date/app. by

Utility Pole _____ date/app. by

M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Reconnection _____ date/app. by

RV _____ date/app. by

Re-roof _____ date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 300.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 6.42 WASTE FEE $ 16.75

FLOOD DEVELOPMENT FEE $ _____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ _____ **TOTAL FEE** 398.17

INSPECTORS OFFICE _____ CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

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

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.