PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 30 Oct. 2013 Building Official TM 10/30/13

AP# 1310-60 Date Received 10/29/13 By LH Permit # 31574

Flood Zone X Development Permit N/A Zoning RSF/MH-2 Land Use Plan Map Category Res Low Den.

Comments

FEMA Map# N/A Elevation N/A Finished Floor 1' above Rd River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 13-0578 ☐ EH Release ☐ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Owners Authorization ☑ Installer Authorization ☑ State Rd Access ☑ 911 Sheet

☐ Parent Parcel # Need Bruce Signature ☑ 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 # 17-3S-17-04967-069 Subdivision Lot 9 Unit 2 Five Points Acres S/D

- New Mobile Home Used Mobile Home ✓ MH Size 28x62 Year 1998
- Applicant Gayle Eddy (Duff) Phone # 3524942326
- Address 10237 SW 48TH Terr Lake Butler FL. 32054
- Name of Property Owner Brady, Bruce & Joann Phone# 623-2244
- 911 Address 231 NE Joy Glen, Lake City FL 32055
- Circle the correct power company - (FL Power & Light) - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Bucky Nash Phone # 623-2244
  Address 3624 NW Brown Rd Lake City FL 32055
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 0
- Lot Size Total Acreage 1 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 441 North to Tammy Lane or Target Turn Rt goto Calvin Turn Lt go To Joy Turn Rt 2nd Lot on Lt.
- Name of Licensed Dealer/Installer Gayle Eddy (Duff) Phone # 3524942326
- Installers Address 10237 SW 48TH Terr Lake Butler FL. 32054
- License Number EH1025339 Installation Decal # 19335

11.4.13 IB NOV 720.07 Willcox called (JW)

Left Gayle a message on 10/30/13
Spoke to Gayle on 10/30/13
11.4.13 - Bucky Nash called wanted to know

bnash2488@gmail.com (Emailed form 10/29/13)

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Gayle Eddy (Duff) License # IH1025339

911 Address where home is being installed _____

Manufacturer Redman Length x width 28 X 65

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

New Home ☐ Used Home ☑

Home installed to the Manufacturer's Installation Manual ☐

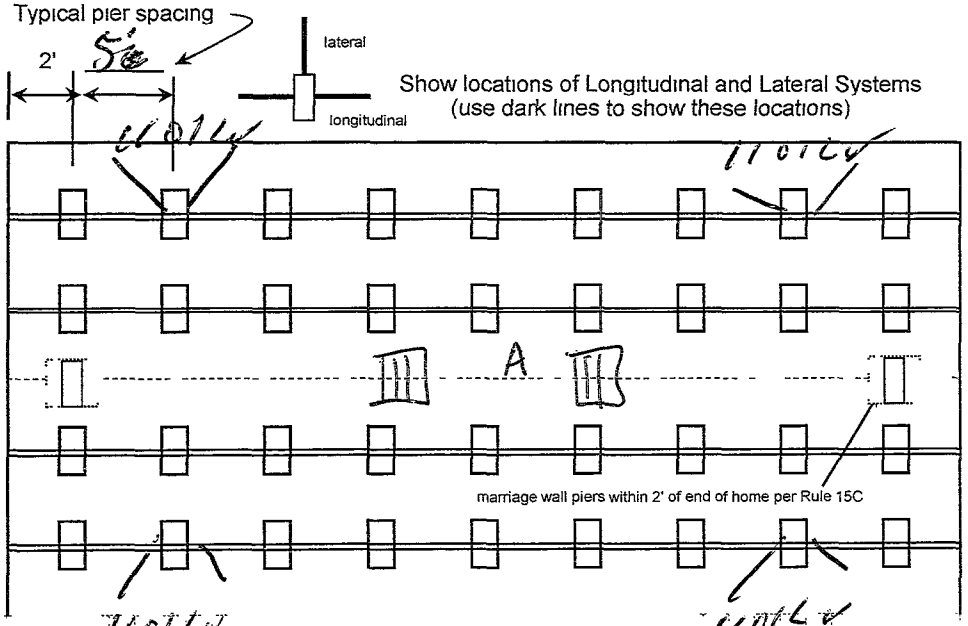
Home is installed in accordance with Rule 15-C ☑

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

Double wide ☑ Installation Decal # 19335

Triple/Quad ☐ Serial # FLA446U5585AE1

Typical pier spacing



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 18x18

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
A	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 Olivier Tec

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

	Number
Sidewall	18
Longitudinal	N/A
Marriage wall	2 min
Shearwall	4

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 280 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 Dayle Eddy / Gayle Duff

Date Tested 10/2/13

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 15

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg 15

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	Lag	Length	6"	Spacing 12"
Walls	Type Fastener	Screw	Length	4"	Spacing 12"
Roof	Type Fastener	Lag Nail	Length	4"	Spacing 24"

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 DE

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 _____
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 Owner No _____ home owner
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 Dayle Eddy / Gayle Duff **Date** 10/2/13

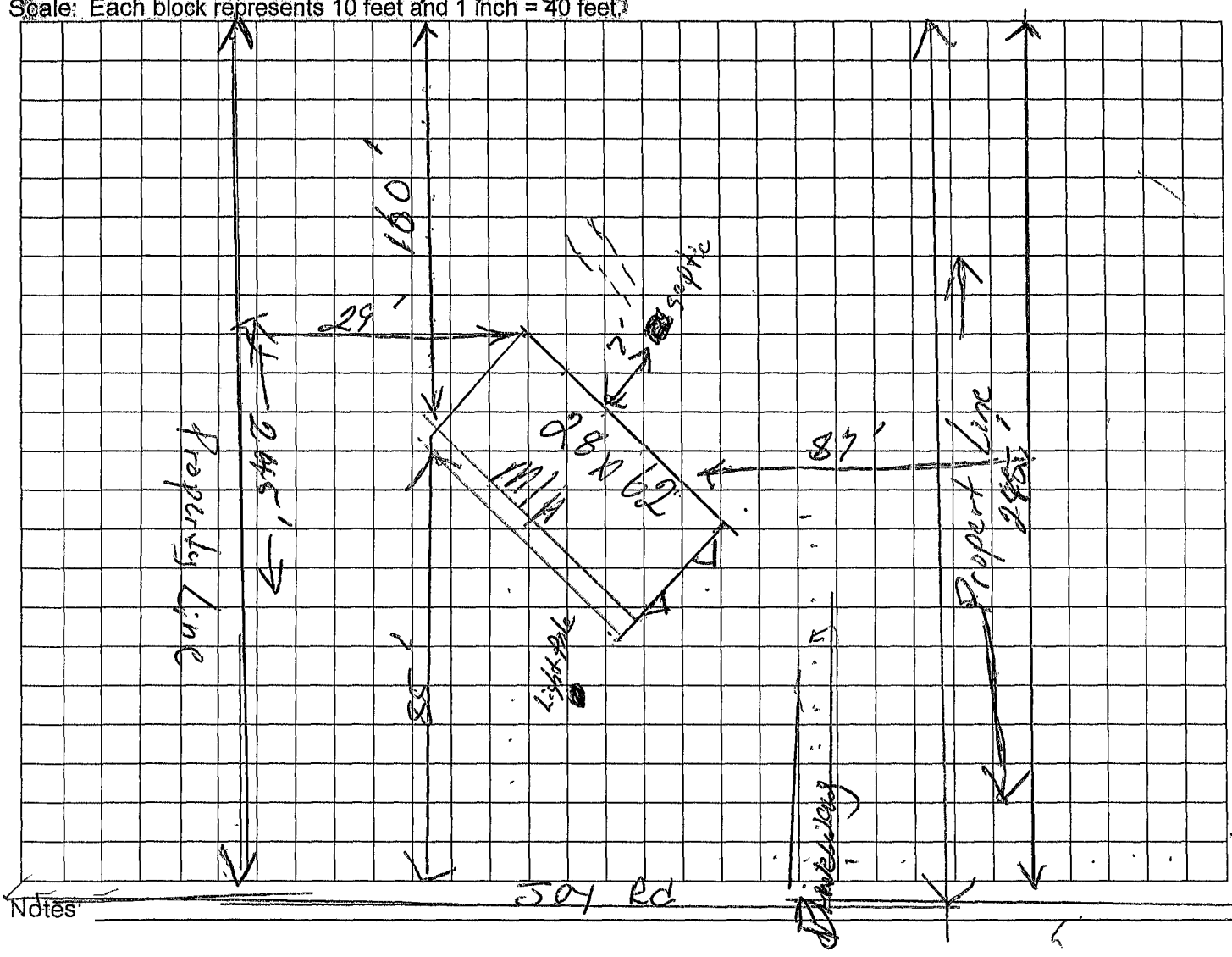
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

N W E S

Permit Application Number_____

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes:

Site Plan submitted by: Willard Austin

Plan Approved_____ Not Approved_____ Date 10-28-13

By_____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1310-60 CONTRACTOR Boyle Eddy Duff PHONE [redacted] 386-249-4-2326

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 Bucky Nash License #:	Signature Bucky Nash Phone #: 386-623-2244
MECHANICAL/ A/C _____	Print Name Bucky Nash License #:	Signature Bucky Nash Phone #: 623-2244
PLUMBING/ GAS	Print Name Bucky Nash License #:	Signature Bucky Nash Phone #: 386-623-2244

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.

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

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwannee

OWNERS NAME Bucky Nash PHONE 3864541111 CELL

INSTALLER Gayle Eddy (Duff) PHONE CELL 352 494 2326

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

MOBILE HOME INFORMATION

MAKE Redman YEAR 1998 SIZE 28 X 65

COLOR white SERIAL No FLA 1461585 A/B

WIND ZONE II SMOKE DETECTOR 2

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 Gayle Eddy

Installer/Inspector Signature Gayle Eddy License No IH1025339 Date 10/2/13

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 Date 10/29/13

FORM 109 Florida Photostat QUIT CLAIM DEED.

executive line

Prepared by and Return to:
Regional Title Company
2015 South 1st St.
P.O. Box 1672
Lake City, Florida 32055
Martha J. Tedder, by:

This Indenture

OR 0749 PG 1828

OFFICIAL RECORDS

Wherever used herein, the term "party" shall include the heirs, personal representatives, successors and/or assigns of the respective parties hereto, the use of the singular number shall include the plural, and the plural the singular, the use of any gender shall include all genders and, if used the term "note" shall include all the notes herein described if more than one

Made this 16th *day of* August *A. D. 19* 91

Between

Mark D. Rice and Mary L. Rice, his wife

Columbia *and State of* Florida *, of the County of , party of the first part,*

and

Bruce Brady and Joann Brady, his wife
Rt. 7, Box 417-X, Lake City, Florida 32055
Columbia *and State of* Florida *, of the County of , party of the second part,*

Witnesseth, *that the said party of the first part, for and in consideration of the sum of* TEN AND NO/100'S---------- *Dollars, in hand paid by the said party of the second part, the receipt whereof is hereby acknowledged, has remised, released and quitclaimed, and by these presents does remise, release and quitclaim unto the said party of the second part all the right, title, interest claim and demand which the said party of the first part has in and to the following described lot , piece or parcel of land, situate lying and being in the County of* COLUMBIA *State of Florida, to wit:*

COUNTY TAX PARCEL NUMBER 17-3S-[redacted]

Lot 9, Unit 2, FIVE POINTS ACRES, a recorded subdivision as recorded in Plat Book 4, page 111, public records of Columbia County, Florida.

FILED AND RECORDED

91-11927

1991 AUG 26 PM 1:55

FILED
CLERK OF COURTS
COLUMBIA COUNTY FLORIDA
BY D.C.

Mark D. Rice Social Security Number [redacted]
Mary L. Rice Social Security Number [redacted]
Bruce Brady Social Security Number [redacted]
Joann Brady Social Security Number [redacted]

To Have and to Hold *the same, together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest and claim whatsoever of the said party of the first part, either in law or equity, to the only proper use, benefit and behoof of the said party of the second part.*

In Witness Whereof, *the said party of the first part has hereunto set his hand and seal the day and year first above written.*

Signed, Sealed and Delivered in Our Presence:

Witness (Martha J. Tedder)

Witness (Kim Watson)

Mark D Rice (L.S.)
Mark D. Rice

Mary L. Rice (L.S.)
Mary L Rice

DOCUMENTARY STAMP 30.00
INTANGIBLE TAX 0
P. DeWITT CASON, CLERK OF COURTS, COLUMBIA COUNTY
BY D.C.

(L.S.)

State of Florida,
County of Columbia

I HEREBY CERTIFY, *That on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments,*

Mark D. Rice and Mary L. Rice, his wife

to me well known to be the person described in and who executed the foregoing instrument and they *acknowledged before me that* they *executed the same freely and voluntarily for the purposes therein expressed.*

WITNESS *my hand and official seal at* Lake City *County of* Columbia *, and State of Florida, this* 16th *day of* August *A. D. 19* 91.

Notary Public
My Commission Expires Aug 6 1995

R-795 MW

Columbia County Property Appraiser

CAMA updated 9/23/2013

2013 Tax Year

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

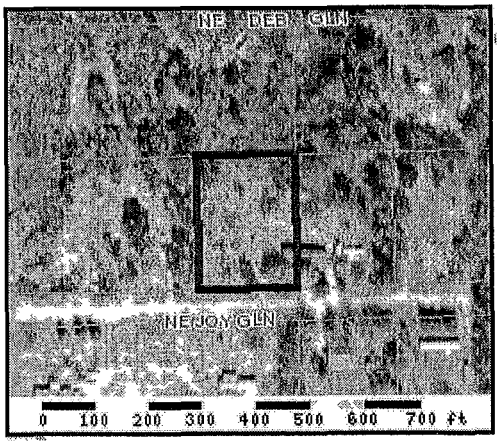
Parcel: 17-3S-17-04967-069

<< Next Lower Parcel | Next Higher Parcel >>

Search Result 1 of 1

Owner & Property Info

Owner's Name	BRADY BRUCE & JOANN		
Mailing Address	C/O BUCKY NASH 3624 NW BROWN RD LAKE CITY, FL 32055		
Site Address	231 NE JOY GLN		
Use Desc. (code)	VACANT (000000)		
Tax District	2 (County)	**Neighborhood**	17317
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 9 FIVE POINTS ACRES S/D UNIT 2 ORB 524-57, 749-1828			



Property & Assessment Values

2013 Certified Values		
Mkt Land Value	cnt (0)	$8,806.00
Ag Land Value	cnt (2)	$0.00
Building Value	cnt (0)	$0.00
XFOB Value	cnt (0)	$0.00
Total Appraised Value		$8,806.00
Just Value		$8,806.00
Class Value		$0.00
Assessed Value		$8,806.00
Exempt Value		$0.00
Total Taxable Value		Cnty: $8,806 Other: $8,806 | Schl: $8,806

2014 Working Values

NOTE:
2014 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
8/16/1991	749/1828	WD	I	Q		$5,000.00
8/1/1983	537/57	AD	V	Q		$3,000.00
9/1/1982	496/107	AG	V	Q		$3,000.00

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 AC	1.00/1.00/1.00/0.75	$6,806.00	$6,806.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	$2,000.00	$2,000.00

1310-60

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Bruce and Joann Brady,

as the owner(s) of the below described property:

Property tax Parcel ID number 17-3S-17-04967-069

Subdivision (Name, lot, Block, Phase) Five Point Acres S/d Lot 9 Unit 2

Give my permission for Bucky Nash to place a

Circle one - Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home.

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.

Joann Brady 10-30-13
Owner Signature Date

Owner Signature Date

Owner Signature Date

Sworn to and subscribed before me this 30 day of October, 2013. This

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

Notary Public Signature Laurie Hodson
Notary Printed Name

Notary Stamp/

LAURIE HODSON
MY COMMISSION # EE 214728
EXPIRES. July 14, 2016
Bonded Thru Notary Public Underwriters

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Bruce & Joann Brady,

as the owner of the below described property:

Property tax Parcel ID number 17-3S-17-04967-069

Subdivision (Name, lot, Block, Phase) Five Point Acres Sb Lot 9 Unit 2

Give my permission for Bucky Nash to place a

Circle one - Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home.

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.

Owner Signature — Date 10-30-13

Owner Signature — Date

Owner Signature — Date

Sworn to and subscribed before me this 30th day of October, 2013. This

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

Notary Public Signature — Notary Printed Name: Debra Lee

Notary Stamp/

DEBRA M LEE
MY COMMISSION # EE146834
EXPIRES November 13, 2016
(407) 398-0153 FloridaNotaryService.com

- Bucky NASH - SAID MH IS NEW

CODE ENFORCEMENT

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 11/4 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES

OWNERS NAME Bucky NASH PHONE 623-2244 CELL

ADDRESS

MOBILE HOME PARK SUBDIVISION 5 PTS ACRES

DRIVING DIRECTIONS TO MOBILE HOME 441-N TO TAMMY TR TO COLVIN TL TO JOY TR, 2ND LOT ON L.

MOBILE HOME INSTALLER BRADLEE E. DIFF PHONE CELL 352 494 2326

MOBILE HOME INFORMATION

MAKE REDMAN YEAR 1998 SIZE 28 X ~~60~~ COLOR WHITE

SERIAL No. FLA1461158 5A/B

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

INSPECTION STANDARDS

INTERIOR:

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

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING 1310-60

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

P DOORS ( ) OPERABLE ( ) DAMAGED

P WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS ( ) OPERABLE ( ) INOPERABLE

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

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

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

EXTERIOR:

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

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

P ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS:

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS

SIGNATURE JW ID NUMBER DATE

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: 10/22/2013 **DATE ISSUED:** 10/23/2013

ENHANCED 9-1-1 ADDRESS:

231 NE JOY GLN

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

17-3S-17-04967-069

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE ON PARCEL.

Address Issued By: _____

Columbia County 9-1-1 Addressing / GIS Department

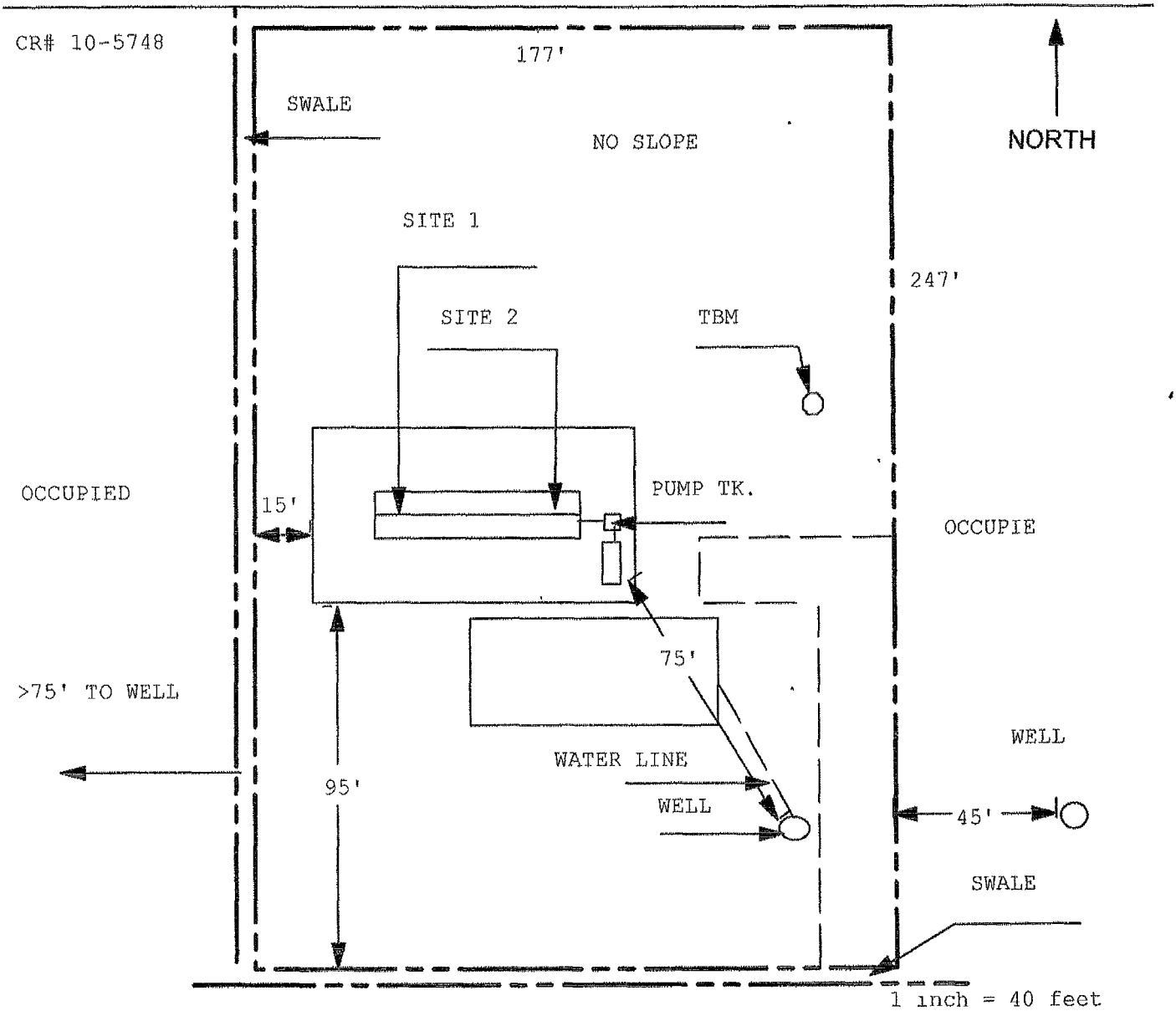
NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

2672

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

Permit Application Number: 13-0578

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul Ellzey Date 11-5-13

Plan Approved X Not Approved ____ Date 11/6/13

By _____ Columbia CPHU

Notes: _____

CR # 10-5748

PERMIT NO. 19-0578
DATE PAID: 11/5/13
FEE PAID: 310.00
RECEIPT #: 1455526

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: BRUCE & JOANN BRADY & BUCKY NASH

AGENT: PAUL LLOYD TELEPHONE: (386) 752-3571

MAILING ADDRESS: 3624 NW BROWN 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: 5 BLOCK: N/A SUBDIVISION: FIVE POINTS ACRES UNIT 2 PLATTED: 9/14/78

PROPERTY ID #: 17-3S-17-04967-069 ZONING: RES I/M OR EQUIVALENT: [NO]

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

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

PROPERTY ADDRESS: 231 NE JOY GLEN

DIRECTIONS TO PROPERTY: 41 NORTH, TURN RIGHT ON TAMMY LN. TURN LEFT ON CALVIN, TURN RIGHT ON JOY GLENN, 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	4	1,749	
2				
3				
4				

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

SIGNATURE: Paul Lloyd DATE: 11/5/13

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