

DATE 09/29/2010

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028895

APPLICANT ROBERT MINNELLA PHONE 352-472-6010

ADDRESS 25743 SW 22ND PLACE NEWBERRY FL 32669

OWNER TIMOTHY & LINDA HIATT PHONE 386-454-8208

ADDRESS 316 SW SPOONBILL CT FORT WHITE FL 32038

CONTRACTOR DALE HOUSTON PHONE 752-7814

LOCATION OF PROPERTY 47 S, L 138, L SPIRIT AVE, L LIGHTWOOD PL, L SPOONBILL CT,
4TH DRIVE ON LEFT

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING AG-3 MAX. HEIGHT 35

Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 24-7S-16-04313-020 SUBDIVISION RUM ISLAND WOODS

LOT 18 BLOCK PHASE UNIT TOTAL ACRES 4.00

IH0000040 X Rahel Minnella

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

EXISTING 10-0439-M BK HD N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD, EXISTING MH MUST BE REMOVED 45 DAYS
AFTER CO

Check # or Cash 5328

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by

Framing Insulation
date/app. by date/app. by

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

Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by

Reconnection RV Re-roof
date/app. by date/app. by 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 \$ 0.00 WASTE FEE \$

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 375.00

INSPECTORS OFFICE Zai Haba 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.

COLUMBIA COUNTY
FLORIDA

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 24-7S-16-04313-020

Building permit No. 000028895

Permit Holder DALE HOUSTON

Owner of Building TIMOTHY & LINDA HIATT

Location: 316 SW SPOONBILL CT., FT. WHITE, FL



Date: 10/04/2010

Tony Dicker

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

ck#5328

For Office Use Only (Revised 1-10-08) Zoning Official BLK 2307.10 Building Official NO 9-21-10

AP# 1009-35 Date Received 9/20/10 By GP Permit # 28895

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Existing MH must be removed 45 days after CO

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

☒ Site Plan with Setbacks Shown ☒ EH # 10-0439-M ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter _____

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL N/A Replacing Existing Serial # mt

Property ID # 24-75-16-04313-020 Subdivision Bum Island Woods Lot 18

- New Mobile Home ☒ Used Mobile Home _____ MH Size 28x56 Year 2010
- Applicant Robert Minnella Phone # (352) 472-6010
- Address 25743 SW 22 PL, Newberry FL 32669
- Name of Property Owner Timothy & Linda Hiatt Phone # (386) 454-8208
- 911 Address 316 SW Spoonbill Ct Fort White FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Same Phone # _____
 Address _____
- Relationship to Property Owner _____
- Current Number of Dwellings on Property 1 - to be replaced Paid
- Lot Size 715 x 245 Total Acreage 4
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
 (Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Driving Directions to the Property 47 South to C138 (TL) to SW Spirit Ave (TL) to 6/10 mile to Light Wood PL (TL) to SW Spoonbill Ct (TL) Property is 4th driveway on left.
- Name of Licensed Dealer/Installer Dale Houston Phone # (386) 752-7814
- Installers Address 136 SW Barrs Glen Lake City, FL 32024
- License Number TH000040 Installation Decal # 1606

9-24-10 Spoke to Robert

(352)172-0104

p.2

Sep 16 10 10:30a Rob/Nancy

PERMIT WORKSHEET

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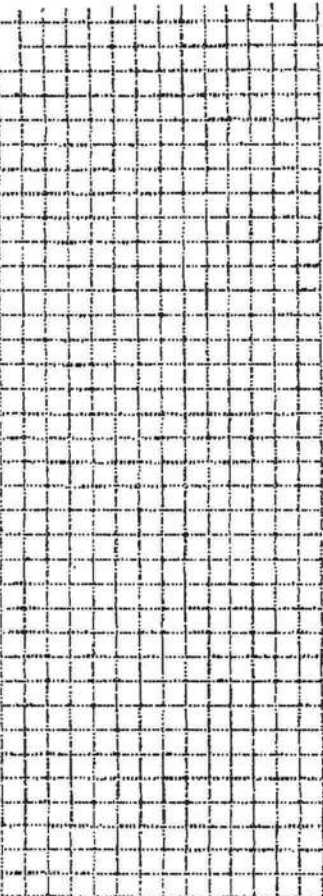
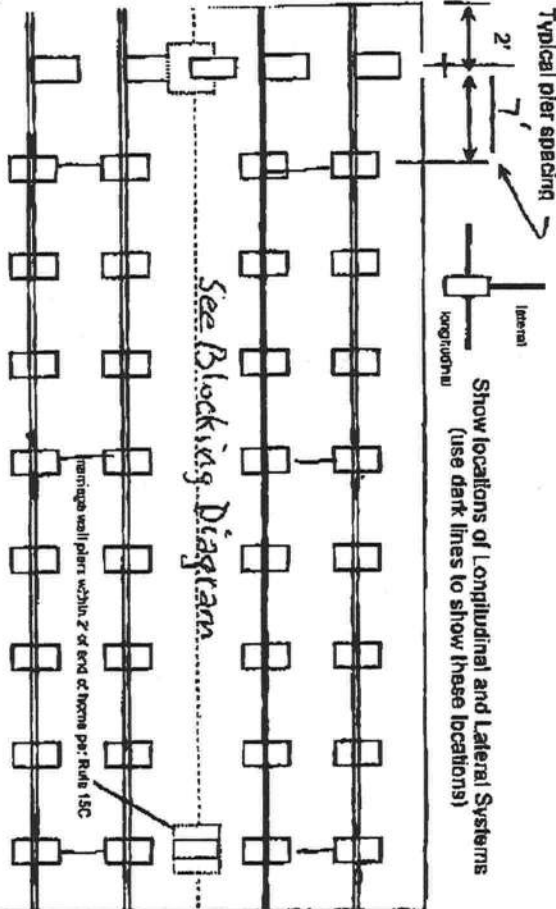
Installer Dale Houston License # TH10261421Manufacturer Live Oak Homes Length x Width 56x28Name of Owner of this Mobile Home Timothy HattPhone 386-454-8208Address 316 S.W. Spoonbill Ct. Ft. White FL 32038

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 _____



New Home ☒ Used Home ☐ Year 2010

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 # 1606

Triple/Quad ☐ Serial # 11011802

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	18' x 16" (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

I-beam pier pad size 23x31Perimeter pier pad size N/AOther pier pad sizes (required by the mfg.) 16x16 Doors

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 _____

See Detailed diagram

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Oliver 1101V

OTHER TIES

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

POPULAR PAD SIZES

Pad Size	Sq. in
16 x 16	256
18 x 18	324
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 28 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	448
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

Sep 16 10 10:30a

Rob/Nancy

PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is _____ inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

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. 5045.47

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5044.2

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5044

Site Preparation

Debris and organic material removed ☒ Yes ☐ No
Water drainage: Natural ☒ Swale ☐ Pad ☒ Other

Fastening multi wide units

Floor: Type Fastener: 6" x 3/8" Length: 6" Spacing: 2'
 Walls: Type Fastener: " Length: 6" Spacing: 2'
 Roof: Type Fastener: " Length: 6" Spacing: 2'
 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 (manufacturer's 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

Installed:

Type gasket Form
 Pg. N/A in Manual
 Between Floors Yes ☒
 Between Walls Yes ☒
 Bottom of ridgebeam Yes ☒

Weatherproofing

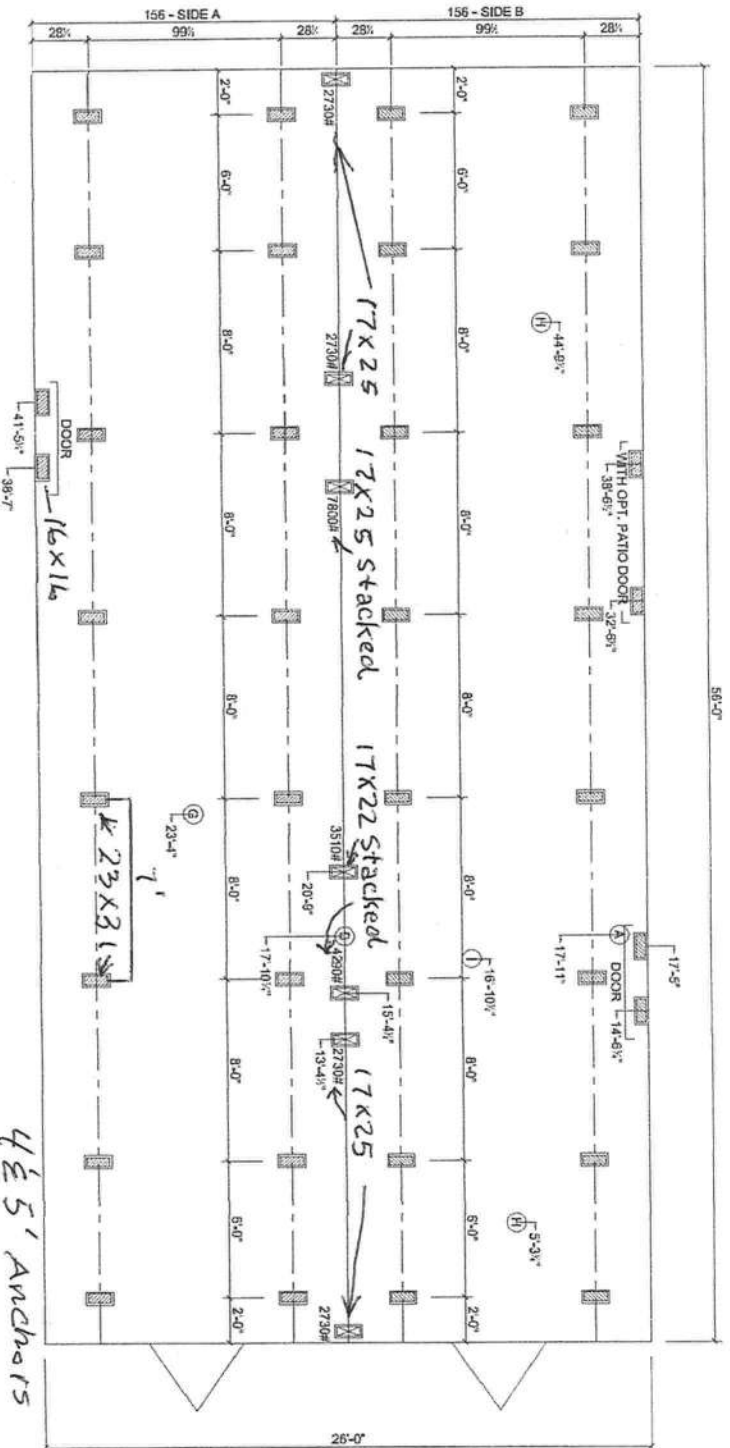
The bottomboard will be repaired and/or taped. Yes ☒ Pg. 5044.1
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

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 Rob Nancie Date 9-17-10



- TIEDOWN LOCATIONS (FOR CONCRETE SLAB SET)
- MARRIAGE LINE OPENING SUPPORT PIER/TYP
- SUPPORT PIER/TYP

2/5/08

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS. SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: S-2563C - 28 X 56
3-BEDROOM / 2-BATH

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (V/OPT, HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (V/OPT, HEAT PUMP OH DUCT)

S-2563C



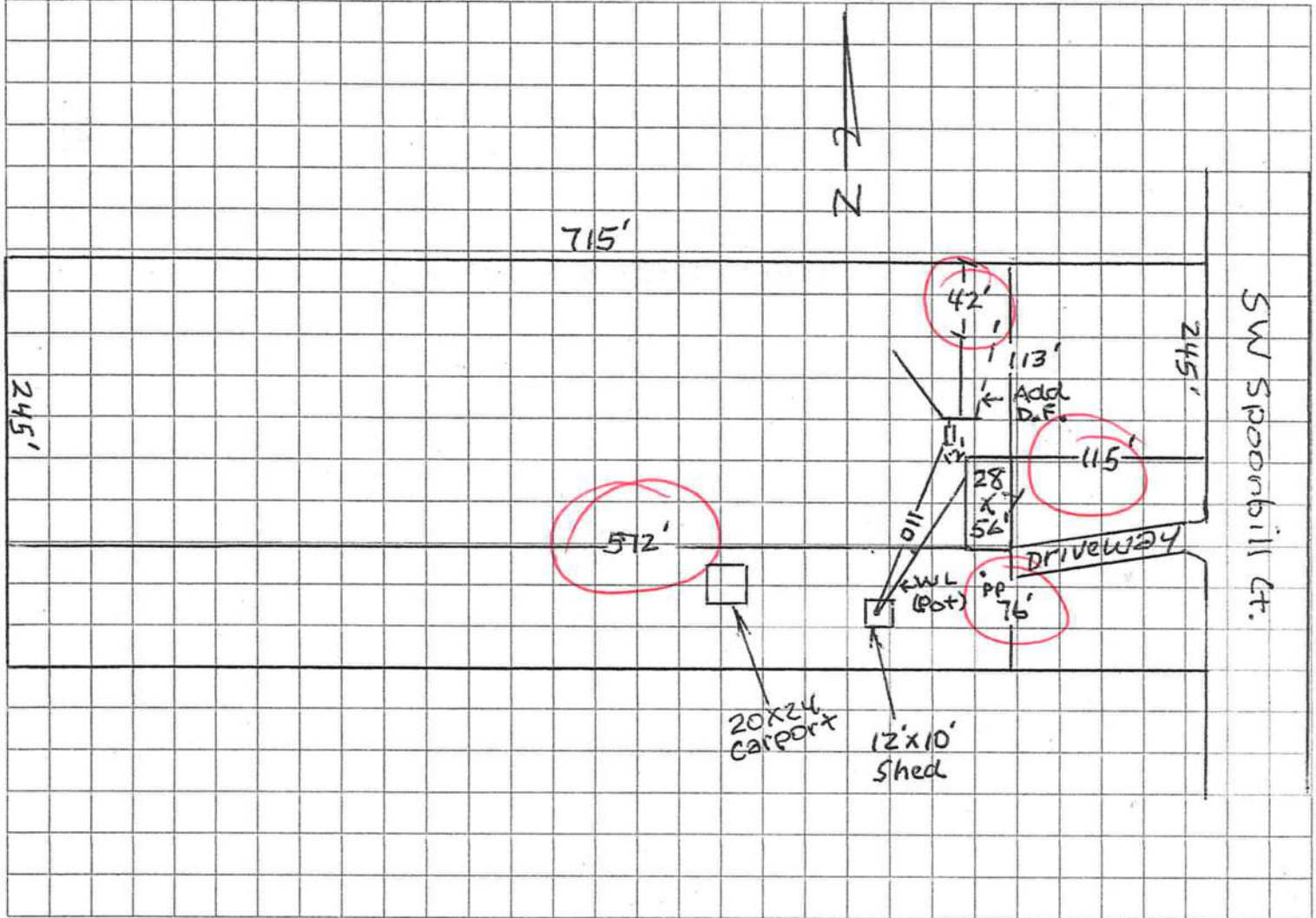
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Hiatt, Timothy & Linda PART II - SITEPLAN

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



Notes: Add D.F. Going from 2 bedroom to 3 bedroom

Site Plan submitted by: Randy Merrill 09-16-10

Plan Approved _____ Signature _____ Not Approved _____

By _____ Date _____ Title _____ Agent _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR Dale Houston

PHONE (386) 752-7814

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 89-8, 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.

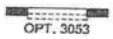
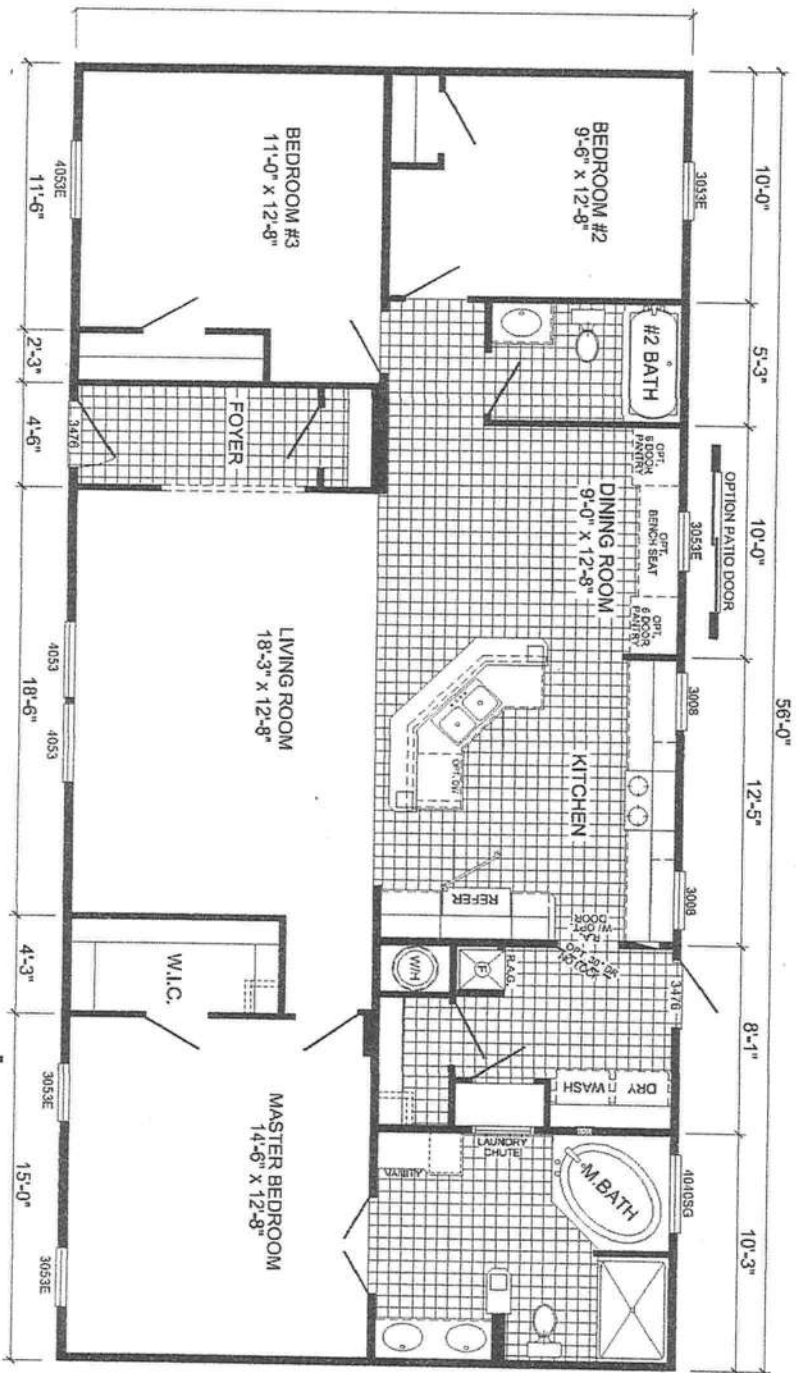
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL <u>684 OK</u>	Print Name: <u>Wayne J. Placena</u> License #: <u>EC0007157</u>	Signature: <u>[Signature]</u> Phone #: <u>386 937-3002</u>
MECHANICAL/ A/C <u>OK</u>	Print Name: <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature: <u>[Signature]</u> Phone #: <u>800 859 3708</u>
PLUMBING/ GAS <u>OK</u>	Print Name: <u>Dale Houston</u> License #: <u>TH000040</u>	Signature: <u>[Signature]</u> Phone #: <u>(386) 752-7814</u>
ROOFING	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SHEET METAL	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SOLAR	Print Name: _____ License #: _____	Signature: _____ Phone #: _____

Specialty Trade	License Number	Subcontractor's Contact Name	Sub-Contractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

(This section has been deleted by House Bill 1000)



OPT. UTILITY ROOM

Columbia County Property Appraiser

DB Last Updated: 8/5/2010

2009 Tax Roll Year

Parcel: 24-7S-16-04313-020

<< Next Lower Parcel

Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

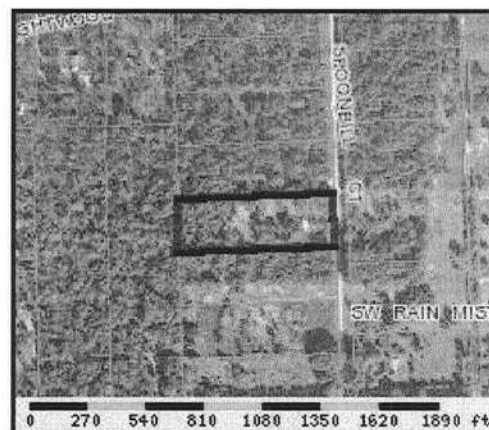
Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	HIATT TIMOTHY I & LINDA F		
Mailing Address	316 SW SPOONBILL CT FT WHITE, FL 32038		
Site Address	316 SW SPOONBILL CT		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	24716
Land Area	0.000 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 18 RUM ISLAND WOODS S/D. ORB 825-1002, 840-1188, 866-385, 893-1371, WD 1000-2427.		



Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$30,800.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$18,138.00
XFOB Value	cnt: (1)	\$1,800.00
Total Appraised Value		\$50,738.00
Just Value		\$50,738.00
Class Value		\$0.00
Assessed Value		\$46,295.00
Exempt Value	(code: HX SX)	\$46,295.00
Total Taxable Value	Cnty: \$0 Other: \$21,295 Schl: \$21,295	

2010 Working Values

NOTE:
2010 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
11/25/2003	1000/2427	WD	I	Q		\$47,000.00
12/13/1999	893/1371	WD	I	Q		\$35,000.00
9/10/1998	866/385	WD	V	Q		\$17,200.00
6/1/1997	840/1188	WD	I	Q		\$18,500.00
7/22/1996	825/1002	CT	I	U	11	\$0.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1993	AL SIDING (26)	924	1460	\$16,313.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0040	BARN,POLE	1997	\$1,800.00	0000720.000	0 x 24 x 30	(000.00)

A-11

This Document prepared by
William J. Haley
Brannon, Brown, Haley, Robinson & Bullock, P.A.
116 NW Columbia Avenue
Post Office Box 1029
Lake City, FL 32056

Inst:2003025590 Date:11/26/2003 Time:09:43
Doc Stamp-Deed : 329.00
ML DC, P. DeWitt Cason, Columbia County B:1000 P:2427

Parcel ID Number: R04313-020

Warranty Deed

This Indenture, Made this 25th day of November, 2003 A.D., Between
Richard Crabtree and Eunice M. Crabtree, his wife

of the County of Columbia, State of Florida, grantors, and
Timothy I. Hiatt and Linda F. Hiatt, his wife

whose address is: 466 SW Boston Terrace, Fort White, FL 32038

of the County of Columbia, State of Florida, grantees.

Witnesseth that the GRANTORS, for and in consideration of the sum of

-----TEN DOLLARS (\$10)----- DOLLARS,
and other good and valuable consideration to GRANTORS in hand paid by GRANTEES, the receipt whereof is hereby acknowledged, have
granted, bargained and sold to the said GRANTEES and GRANTEES' heirs, successors and assigns forever, the following described land, situate,
lying and being in the County of Columbia State of Florida to wit:
Lot 18, RUM ISLAND WOODS, a Subdivision according to the Plat thereof
recorded in Plat Book 5, Page 48, of the Public Records of Columbia
County, Florida.

Together with a 1993 West HS ID # GAFLP75A19147WE, which is
permanently affixed to the land above described and, as such, is
deemed to be a fixture and a part of the real estate.

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

In Witness Whereof, the grantors have hereunto set their hands and seals the day and year first above written.

Signed, sealed and delivered in our presence:

Joyce Y. Oliver
Printed Name: Joyce Y. Oliver
Witness

Robin S. Sumner
Printed Name: Robin S. Sumner
Witness

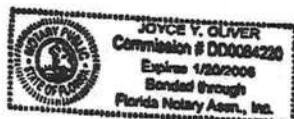
Richard Crabtree (Seal)
Richard Crabtree
P.O. Address: 316 SW Spoonbill Court, Fort White, FL 32038

Eunice M. Crabtree (Seal)
Eunice M. Crabtree
P.O. Address: 316 SW Spoonbill Court, Fort White, FL 32038

STATE OF Florida
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 25th day of November, 2003 by
Richard Crabtree and Eunice M. Crabtree, his wife

who are personally known to me or who have produced their Florida driver's license as identification.



Joyce Y. Oliver
Joyce Y. Oliver
Notary Public
My Commission Expires: 01/20/06

HIATT

Laser Generated by © Display Systems, Inc., 2000 (800) 763-5555 Form FL-WD-1

jyo

As described in said Mortgage.

Witness its hand and seal, this 15th day of March A. D. 2004.

Signed, Sealed and Delivered in Presence of:

COLUMBIA COUNTY BANK

Marge Vergauwen
Witness Marge Vergauwen

BY: Gerald H. Gray
Gerald H. Gray, Sr. Vice President

Joan D. Crusaw
Witness Joan D. Crusaw

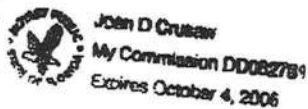
Attest: Angela Land
Angela Land, Loan Operations Manager

STATE OF FLORIDA,
County of COLUMBIA

I HEREBY CERTIFY that on this day, before me, an Officer duly authorized the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared Gerald Gray, Sr. Vice President and Angela Land, Loan Operations Manager, personally known to me to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

Witness my hand and official seal in the County and State last aforesaid this 15th day of March, A.D. 2004.

Notary Seal



Joan D. Crusaw
NOTARY

This Instrument prepared by: Joan D. Crusaw
Address: Columbia County Bank P.O. Box 1609 Lake City, FL. 32056-1609

09-29-10; 08:58AM;

ROB AND NANCY : 386 758-2187

2/ 2



app# 1009-35

STATE OF FLORIDA
DEPARTMENT OF HEALTH

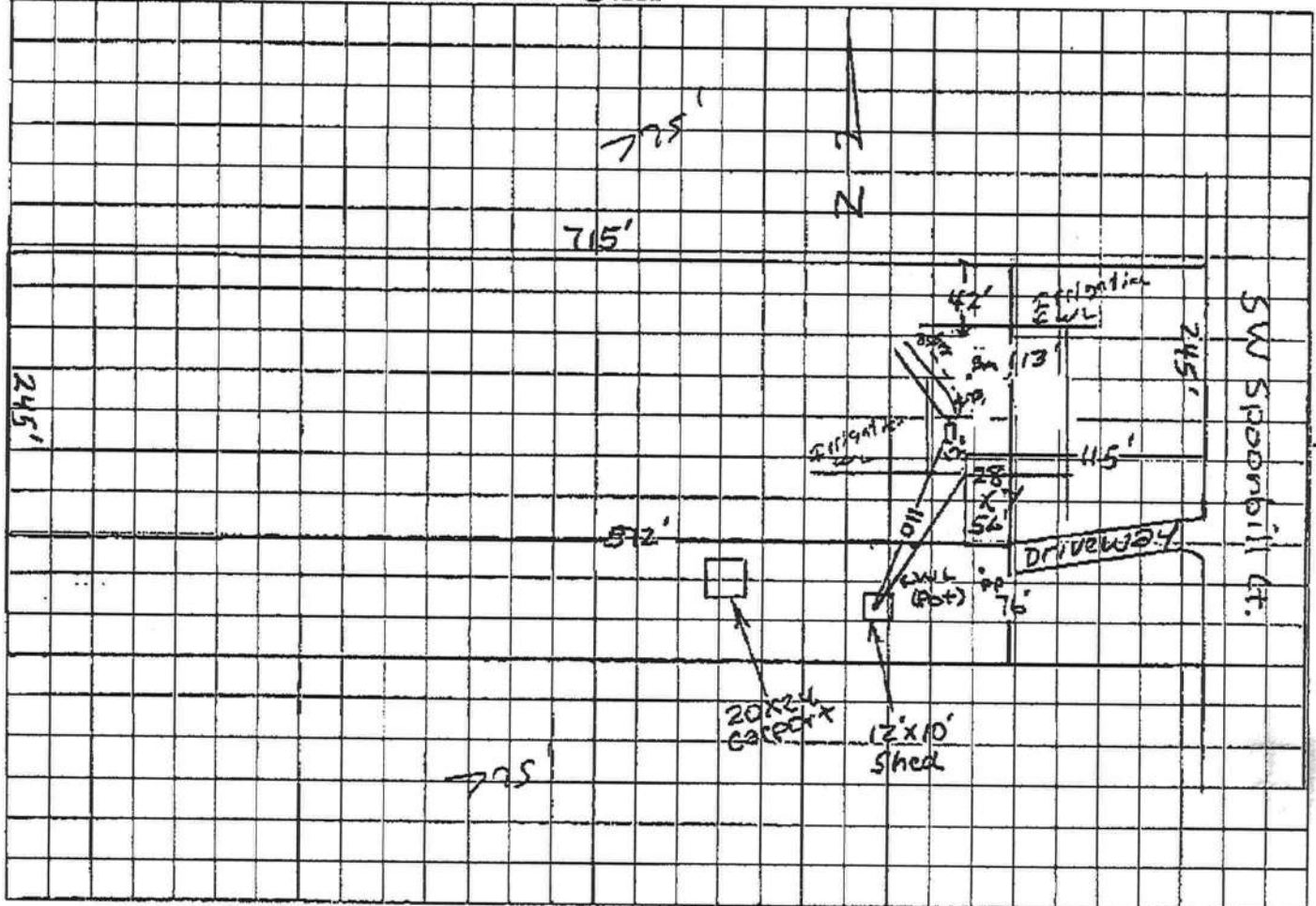
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10-0439M

Hiatt, Timothy & Linda

- PART II - SITEPLAN

Scale: Each block represents ~~10~~¹⁰⁰ feet and 1 inch = ~~40~~⁴⁰⁰ feet.



Notes: Add D.E. Going from 2 bedroom to 3 bedroom
Irrigation water lines not connected

Site Plan submitted by: Robert M. Smith 09-16-10
Signature

Plan Approved X Signature _____
Not Approved _____

By Silvi Ford, LM Director.

Agent

Date 9.29.10

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4016 which may be used)
 (Stock Number: 5744-002-4015-6)

Page 2 of 4

Columbia CHD