PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	P# 1803 13 Date Received 3-6-18 By H Permit # 2568/36454
FI	ood ZoneX Development Permit Zoning Land Use Plan Map Category omments
X ni	Recorded Deed or Property Appraiser PO Site Plan Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid DOT Approval Parent Parcel # STUP-MH STUP-MH
	Ellisville Water Sys Assessment Fin on Property Quit County Quit County Sub VF Form
Prop	perty ID #19-2S-17-04736-109 SubdivisionFalling Creek Lot#9
ı	New Mobile Home X Used Mobile Home MH Size 32 x 72 Year 2018
ı	Applicant Dale Burd or Rocky Ford Phone # 386-497-2311
ı	Address 546 SW Dortch Street, Fort White, FL, 32038
	Name of Property Owner Justin Wilson Phone# 904-769-9744 911 Address 1565 NW Mershon St. Luke City for 32055 Circle the correct power company - FL Power & Light - (Clay Electric) (Circle One) - Suwannee Valley Electric - Duke Energy
I	Name of Owner of Mobile Home Same Phone # Same
	Address 10172 80th Terr, Live Oak, FL, 32060
	Relationship to Property Owner Same
	Current Number of Dwellings on Property 0
	Lot Size 200 x 660 Irregular Total Acreage 8.26
	Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one (Not existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home No Driving Directions to the Property 41 North, TR Falling Creek Road, TR Mershon St, 850' to property on left
	Name of Licensed Dealer/Installer Rusty Knowles Phone # 386-397-0886
	Installers Address 5801 SW St Hwy 47, LC, FL, 32024 License Number IH-1038209 Installation Decal # 46077
	In Date Knows what is needed.

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COLUMBIA COUNTY PERMIT WORKSHEET

POPULAR PAD SIZES within 2' of end of home spaced at 5' 4" oc 7 5# 7 FRAME TIES OTHER TIES ANCHORS LOHGA 218 333 ZT 24" X 24" (276)* 16 x 16 16 x 18 18.5 x 18.5 Longitudinal Marriage wall Shearwall Pad Size 3/16 x 25 16×22 Wind Zone III 46077 PIER SPACING TABLE FOR USED HOMES 22" x 22" (484)* 4 ff Home installed to the Manufacturer's Installation Manual Draw the approximate locations of marriage Longitudinal Stabilizing Device w/ Lateral Arms 20" x 20" List all marriage wall openings greater than 4 foot and their pier pad sizes below. (400) wall openings 4 foot or greater. Use this symbol to show the piers. Home is installed in accordance with Rule 15-C 口 ັດ ō 23,44214 Installation Decal # 160110 2.2+×24 interpolated from Rule 15C-1 pier spacing table Pier pad size Longitudinal Stabilizing Device (LSD) Wind Zone II 18 1/2" x 18 TIEDOWN COMPONENTS Used Home 1/2" (342) Serial # PIER PAD SIZES メート・ション Manufacturer 分している 16" x 16" Perimeter pier pad size (256)4.6 7' 6" (required by the mfg.) 7 ōσ I-beam pier pad size Other pier pad sizes 2 (sq in) Footer size Opening Manufacturer Double wide Single wide Triple/Quad New Home 2000 psf 2500 psf 3000 psf 3500 psf 1000 psf 1500 ps capacity bearing Load Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) License # IH 1039, 24 marriage wall piers within 2' of end of home per Rule 15C I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 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 These worksheets must be completed and signed by the installer. Submit the originals with the packet. Marshow ST Installer's initials Length x width longitudinal ateral O.4k 911 Address where home is being installed. Typical pier spacing 660 Manufacturer NOTE: Installer

26" x 26"

(929)

ā ō 34

POCKET PENETROMETER TEST

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

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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.

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X

TORQUE PROBE TEST

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.

RCK Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

1.213 L

Date Tested

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

Electrical

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. ITC-1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. $1/\epsilon$. (

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Debris and organic material removed

Water drainage: Natural Swale Other

Fastening multi wide units

Floor: Type Fastener: 4435 Length: 6" Spacing: 20".

Walls: Type Fastener: 42,62 Length: 1,196,62 Spacing: 25".

Roof: Type Fastener: 42,62 Length: 1,196,62 Spacing: 5,32".

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 RUC

Type gasket A chory

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

Weatherproofing

Miscellaneous

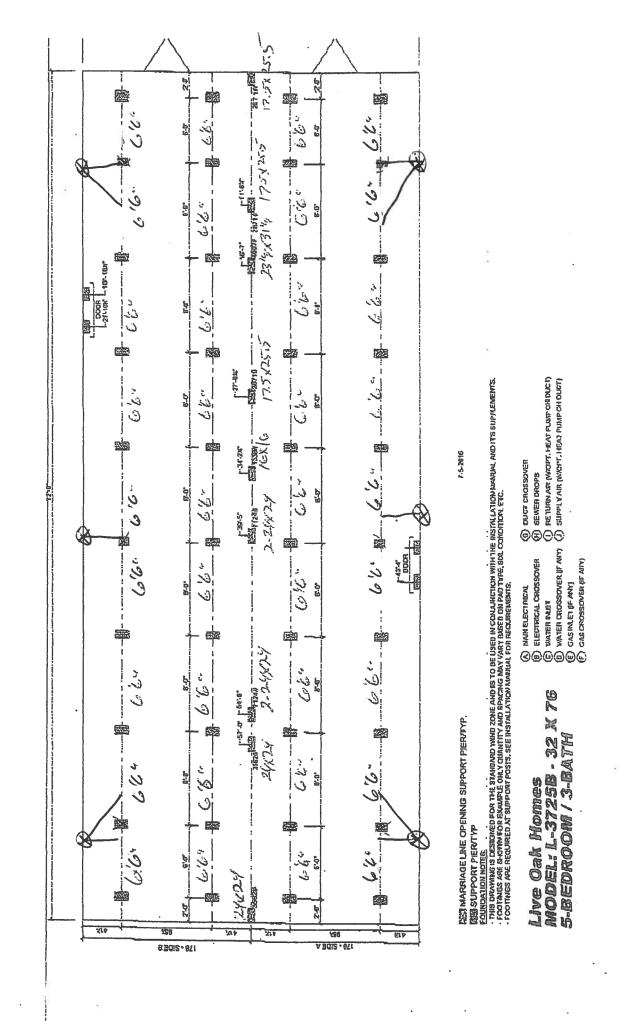
Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes

Electrical crossovers protected. Yes Other:

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

Installer Signature

Date 3-2-13



1 0897 .oN

First Coast Mobile Home Sales

Jul. 27. 2016 1:08PM

P.R.M. MM. FLOOR ELEV. 134.00

1 = 100'
W.150N
Roch D

MAR 0 6 2018

Prepared by:

Heritage Title Services of North Florida, Inc. 201 Parabley Street S.W. Live Oak, Florida 32064

File Number: 18-0033

of 1 B: 1354 P: 2076, P.DeWitt Ca lda, County, By: HD

General Warranty Deed

Made this March 1, 2018 A.D. By James Sistrunk, whose post office address is: 5557 NW Falling Creek, White Springs, Florida 32096, hereinafter called the grantor, to Justin Wilson, whose post office address is: 10172 80th Terrace, Live Oak, Florida 32060, hereinafter called the grantee:

(Whenever used hereis the term "grantor" and "granter" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 9 of Falling Creek Subdivision, a subdivision according to the Plat thereof as recorded in Plat Book 8, Pages 74-78, of the Public Records of Columbia County, Florida.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: 19-28-17-04736-109

Subject to any valid and existing oil, gas or mineral right, reservation, royalty transfer or mineral deed conveying or reserving any interest in the oil, gas or minerals underlying said lands, or any portion thereof, heretofore executed and duly recorded in the public records of said county.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2017.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

James Sistuank Address: 5557 NW Falling Creek, White Springs, Florida 32096

State of Florida County of Suwannee

The foregoing instrument was acknowledged before me this 1st day of March, 2018, by James Sistrumk, who is/are personally known to me or who has produced FL DC as identification.

DEED Individual Warranty Deed With Non-Ho

								
Appraiser updated: 2/1/2018		•					2	017 Tax Yea
Parcel: 19-2S-17-	04736-1	09	DERECATOR	rl	ine)			
Owner & Proper	rty Info	JUS	in Welson				Sea	rch Result: 1 of 1
Owner's Name	SISTRUM	K JAMES						
Mailing Address	II.	W FALLING TY, FL 3209						
Site Address								
Use Desc. (code)	VACANT	(000000)						
Tax District	3 (Coun		Neighborhood	19	217			
Land Area	1		Market Area	+				
Land Area	8.260 A		n is not to be used as the	03				
Description	1000		rcel in any legal transaction	_	ai			
LOT 9 FALLING CREEK	S/D. WD 1	256-1925,						
Property & Asse 2017 Certified Valu			+24 022 ·			Vorking Values		(Hide Values)
Mkt Land Value Ag Land Value		cnt: (0) cnt: (1)	\$24,833. \$0.	_	Mkt Lan Ag Land		cnt: (0)	\$27,316.00 \$0.00
Building Value		cnt: (0)	\$0.0	_	Building		cnt: (0)	\$0.00
XFOB Value		cnt: (0)	\$0.0	_	XFOB V		cnt: (0)	\$0.00
Total Appraised Value			\$24,833.	00	Total Ap	praised Value		\$27,316.00
Just Value			\$24,833.		Just Val			\$27,316.00
Class Value			\$0.0		Class Va			\$0.00
Assessed Value			\$24,833.	_	Assesse			\$27,316.00
Exempt Value			\$0.0 Cnty: \$24,83	_	Exempt			\$0.00 Cnty: \$27,316
Total Taxable Value		Other: \$	524,833 Schl: \$24,83	- 1	Total Ta	kable Value	Other: \$27,	316 Schl: \$27,316
					values	and thereformation	king Values are No ore are subject to ad valorem asse	change before
			j			1	ŀ	1
				A10-27				

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:

3/8/2018 9:26:40 AM

Address:

1565 NW MERSHON St

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

04736-109

REMARKS: Address for proposed structure on parcel.

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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER 1603-13 CONTRACTO	Rusty Knowles	PHONL 386-397-0886					
	THIS FORM MUST BE SUBMITTED F		ermit Wilson					
records of the Ordinance 89- exemption, ge	In Columbia County one permit will cover all trades doing work at the permitted site. It is KEQUIKED 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 Glenn Whittington	Signature						
1079	License #: EC 13002957 Qualifier Form At		972-1700					
MECHANICAL/	Print Name_Michael Boland	Signature	RO					
AC 13	License #: CAC 1817716		274-9326					

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015



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

TO TO THE	
LICENSED QUALIFII	ER AUTHORIZATION
1. MichARLA DolANd	(license holder name), licensed qualifier
for 1 Cir A/C of OCEA	/// (company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said if control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DA/E BAd	1.665
2. Kally Dishap 3. Loin, Fore	2 Kelly Parshop 3.
4.	4.
5.	5.
under my license and fully responsible for completional Ordinances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all prevenauthorized persons to use your name and/or li	and County Licensing Boards have the power and cons committed by him/her, his/her agents, insibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualiflers Signature (Notanzed)	
NOTARY INFORMATION STATE OF VOICE COUNTY OF	mira
The above license holder whose name is Micropersonally appeared before me and is known by (type of I D) on	me or has produced identification this day of New York, 20
NOTARYS SIGNATURE	(Seal/Stamp)
	AMANDA FLOOD MY COMMISSION # FF 106012 EXPIRES April 5, 2018 Bended Thru Notey Public Underwiners



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

LICENSED QUALIFIER AUTHORIZATION

1. CAMULUTITINGTON	(license holder name), licensed qualifier
for WhitIngton ELECKIC ?	(company name), do certify that
the below referenced person(s) listed on this form holder, or is/are employed by me directly or throu officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	ugh an employee leasing arrangement; or, is an n Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. 1850	16
2. Recky Tonal	2. Jones //
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complet Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted officer(s), you must notify this department in write authorization form, which will supersede all prevenuauthorized persons to use your name and/or I	iance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	License Number Date
1 25 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Colmbin
The above license holder, whose name is	me or has produced identification this day of, 20
LILLY ROSHOP NOTARY'S SIGNATURE	Seai/Starke) Y R BISHOP Notary Public - State of Florida Commission # FF 243986 My Comm. Expires Jun 24, 2019

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

3/6/2018

1/1/	
To:	County Building Department
Description of w Located at Addr	ess: Wisher Customer: W
-	bmersible Pump, 1 ¼" drop pipe, 86 gallon captive tank and back With SRWMD permit.
Bruce	Parl
Sincerely	
Bruce Park	

President



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

PERMIT NO.	18-D194
DATE PAID:	317/18
FEE PAID:	371
RECEIPT #:	1321182
	200330

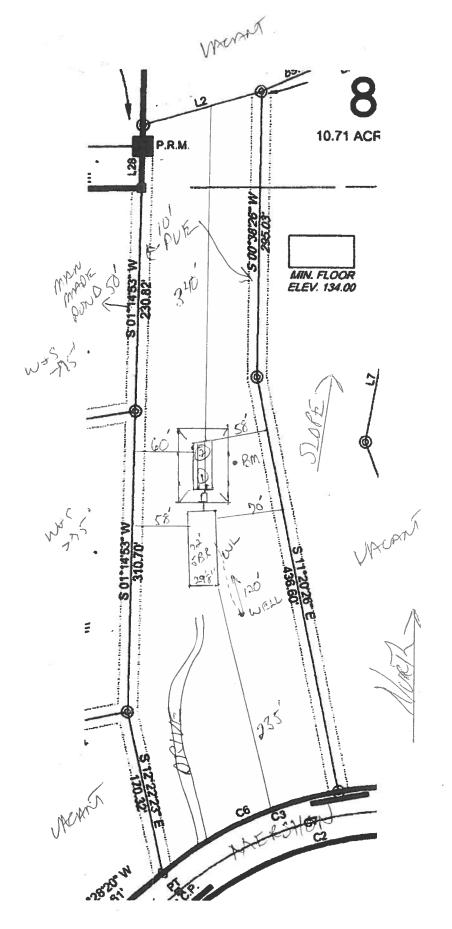
APPLICATION FOR: [New System
APPLICANT: Justin Wilson
AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) 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: 9 BLOCK: na SUB: Falling Creek PLATTED: (C)7)72
PROPERTY ID #: 19-2S-17-04736-109 ZONING: I/M OR EQUIVALENT: [Y N]
PROPERTY SIZE: 8.26 ACRES WATER SUPPLY: [Y] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] DISTANCE TO SEWER: FT
PROPERTY ADDRESS: NW Mershon St, LC, FL
DIRECTIONS TO PROPERTY: 41 North, TR Falling Creek Road, TR Mershon St, 850' on
left
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1
SF Residential 5 2140 2
3
[V] Floor/Equipment Drains [V] Other (Specify)
SIGNATURE: DATE: 3/6/2018_

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

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE	E DISPOSAL	SYSTEM CON	STRUCTION on Number	PERMIT	3194
11.10					(
PAR	Permit Application Number 18-0 PART II - SITEPLAN MASTER CONTRAC Date 3 10-0	-			
Scale: 1 inch = 40 feet.					
	n submitted by: April 1 Not Approved Not Approved Date 3				
Permit Application PART II - SITEPLAN 1 inch = 40 feet.					
PLEASE ATMEN	NE O				
otes:					
	Permit Application Number 18-0194 Permit Application Number 18-0194 MASTER CONTRACTOR				
21 ~	1				
te Plan submitted by:	-0		MASTE	R CONTRA	CTOR
	Approved			4	
	Canh			, ,	
		Ü		y i loaitii Di	-partitietit
/ ALL CHANGES MUST BE ADDROV	IED BY THE	COUNTY HEAD	TH DEDAD	TAC NOT	

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)



1 = 100'

W.150N

Roch D7

MAR 0 6 2018

Columbia County Building Department Culvert Permit

Culvert Permit No. 36454 000002568

DATE 03/16/2018	PARCEL ID#	19-2S-17-04736-	109			
APPLICANT DALE BURD		P	HONE	497-2311		
ADDRESS 546 SW DORTCH ST		FORT W	ните	F	L 32	2038
OWNER JUSTIN WILSON	<u></u>	P	HONE	904-769-9744		
ADDRESS 1565 NW MERSHON ST		LAKE C	ITY	F	<u> 1</u> 3:	2055
CONTRACTOR RUSTY KNOWLES		PI	HONE	397-0886		
LOCATION OF PROPERTY 41 N. R	R FALLING CREEK.	R MERSHON ST.	850' TO I	PROPERTY ON I	EFT	
SUBDIVISION/LOT/BLOCK/PHASE	/UNIT FALLING	G CREEK		9		
INSTALLATION INFORMATION	[SIGNA	ATURE V				
A) A culvert shall be required to be installed as part in Columbia County. Culvert installation for resider permit being issued, an inspection by the Public V Culvert installation for commercial, industrial, and Joint use culverts will comply with Florida Departr	ntial use shall require a p Vorks Department shall l other uses shall conforr	permit issued by the B pe required to determ n to the approved site	uilding and ine the pr	d Zoning Departmen oper size, length, an	t. Prior d locat	to any culvert ion for installation
B) The culvert shall comply and be installed in according Proper installation of the culvert shall be verified by	dance with Columbia Co by a final inspection per	ounty Land Developme formed by the Public	ent Regulat Works Dep	ion, Access Control: artment.	Section	1 4.2.3 standards.
C) All culverts required by this policy shall be installed the facility or facilities being serviced by newly conshall be completed prior to final inspection approximately.	nstructed private drivev					
D) Mitered-end culverts shall be used in the followin (1) When the culvert is to be placed giving access has not reached a "build out" of fifty percent (50 of the final plat to specify culvert diameter and let	to a paved street.; (2) V %) or more.; (3) In all no	ew subdivisions for res	idential us	e. New subdivisions	shall b	e required as part
Culvert installation shall confo	orm to the approv	ved site plan sta	ındards			
Department of Transportation	n Permit installati	on approved sta	andards			
X Shall conform to Public Works	s Determinations	as Stated Belo	w:			
P W Inspectors Name:		Date	:			
Final Inspection Date:	P W Inspectors	Name:		Signature:		
CONTACT FOR REQUIREM PUBLIC WORKS DEPARTMENT	ENTS AND I Phone: 386-		NS:	Amount P	aid	25.00
SCHEDULE INPSECTIONS O				Check No.		18637
	/14E114E			•		·

www.columbiacountyfla.com/PermitSearch/InspectionCalendar.aspx