

DATE 11/23/2009

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000028238

APPLICANT ROBERT MINNELLA PHONE 352 472-6010
ADDRESS 25743 SW 22ND PLACE NEWBERRY FL 32669
OWNER JAMES MARCUS BRYAN PHONE 731 217-7686
ADDRESS 490 SW UNCLE REMUS GLEN FT. WHITE FL 32038
CONTRACTOR ERNEST JOHNSON PHONE 352 494-8099
LOCATION OF PROPERTY 47S, TR WILSON SPRINGS, TL BRIAR PATCH TERR.,VEAR
RIGHT AT FORKS, TO THE END 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 A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 05-7S-16-04138-105 SUBDIVISION BRIAR PATCH EST
LOT 5 BLOCK PHASE UNIT TOTAL ACRES 5.00

IH0000359
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
PRIVATE 09-578 BK WR N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 5020

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 \$ 70.62 WASTE FEE \$ 184.25
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 629.87 ✓
INSPECTORS OFFICE CLERKS OFFICE

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-10-08) Zoning Official BK 11.11.09 Building Official W 11/18/09

AP# 0911-31 Date Received 11/17 By JW Permit # 28238

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

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☒ Site Plan with Setbacks Shown ☒ EH # 09-0578 ☒ 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 Suspended

Property ID # 05-75-16-04138-105 Subdivision Briar Patch Est Lot 5

- New Mobile Home ☒ Used Mobile Home _____ MH Size 28x44 Year 2010
- Applicant Robert Minnella Phone # (352) 472-6010
- Address 25743 SW 22 PL Newberry, FL 32669
- Name of Property Owner James Marcus Bryan Phone # (731) 217-7686
- 911 Address 490 SW Uncle Remus Glen, Ft. 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 James Marcus Bryan Phone # (731) 217-7686
Address 4685 W main St ste 105-214, Lake City, FL 32025
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 657x668 = 10 ACRES Total Acreage 5
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home no (Owes)
- Driving Directions to the Property 4750. to Wilson Spruce Rd. (TR) to 1 1/2 miles to Briar Patch Terr (TL) Go to right at fork and follow to end on left Green flag
- Name of Licensed Dealer/Installer Ernest S. Johnson Phone # (352) 494-8099
- Installers Address 22214 SE US Hwy 301 Hawthorne, FL 32640
- License Number TH0000359 Installation Decal # 306184

Spoke to Nancy
11/19/09

PERMIT NUMBER

PERMIT WORKSHEET

Installer Ernest S. Johnson License # TH0000359

Address of home being installed 490 Uncle Remus Gl.
Ft. White, FL

Manufacturer Iron Thones Length x width 28' x 44'

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 EJ

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 # 306184

Triple/Quad ☐ Serial # Ordered

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 dsf	3'	4'	5'	6'	7'	8'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17 1/2 x 25 1/2

Perimeter pier pad size Doors

Other pier pad sizes (required by the mfg.) NA

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 Pier Load Diagram

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

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Oliver 1101V

OTHER TIES

Number

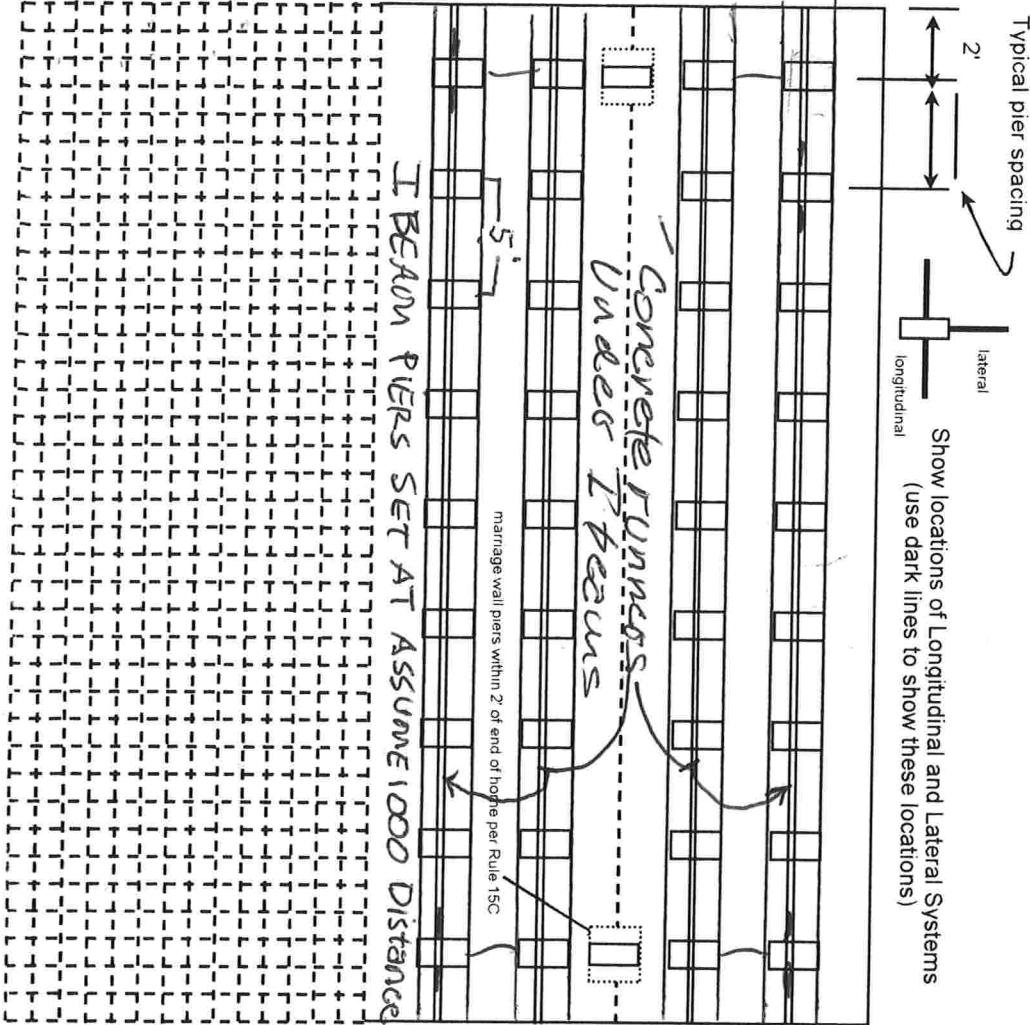
Sidewall

Longitudinal

Marriage wall

Shearwall

NA



POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf 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 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 require anchors with 4000 lb holding capacity.

Assume 1000
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. *SV34*

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. *SV36*

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. *SV43*

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: *Lag* Length: *3/8" x 5"* Spacing: *2'*
Walls: Type Fastener: *"* Length: *"* Spacing: *2'*
Roof: Type Fastener: *"* Length: *1"* 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 (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials *sy*

Type gasket *Fealun*
Pg. *SV21*

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

Weatherproofing

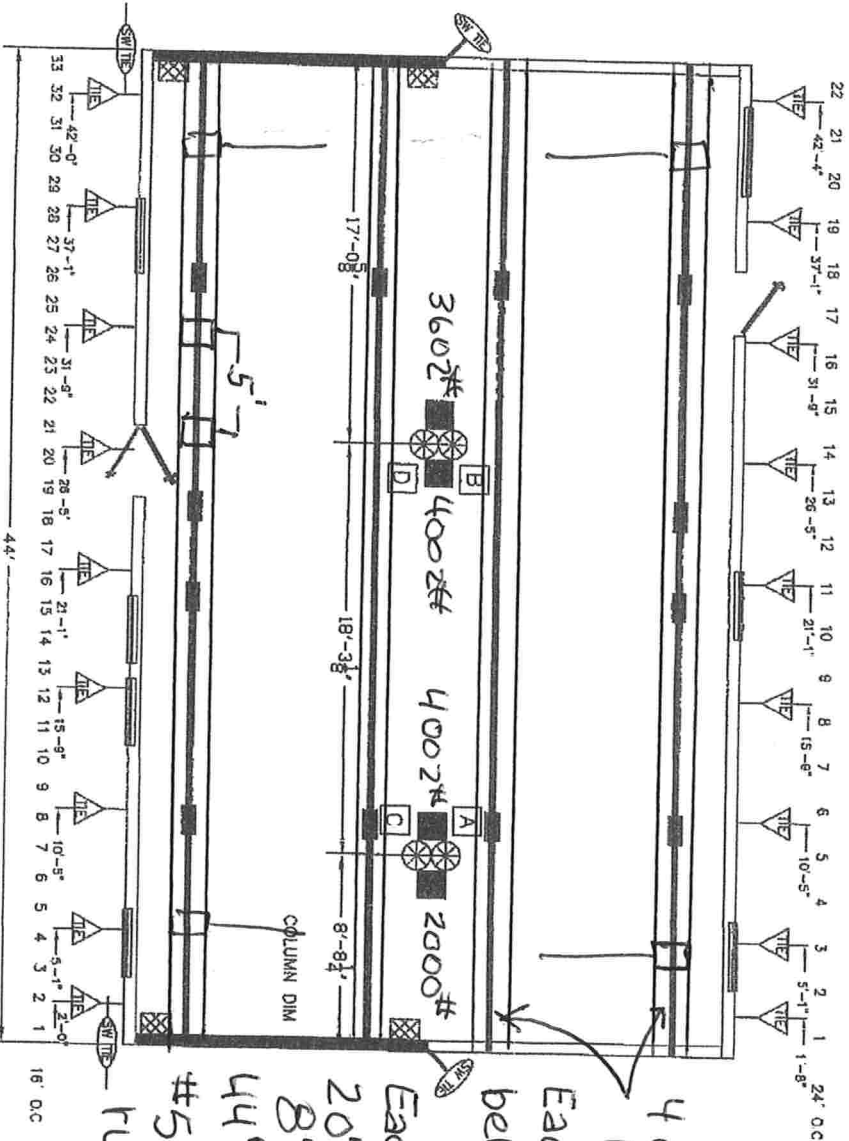
The bottomboard will be repaired and/or taped. Yes _____ Pg. _____
Siding on units is installed to manufacturer's specifications. Yes _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

Miscellaneous

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

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

Installer Signature *Ernest O. Delacruz* Date *11/16/09*



4 concrete Runners
Each to be positioned below an I-BEAM
Each runner is 20" wide 8" Deep 44' long with #5 Rebar (2) per runner

- 1-BEAM BLOCKING SEE SOIL BEARING CAPACITY CHARTS FOR SPACING
- COLUMN BLOCKING SEE SOIL BEARING CAPACITY CHARTS FOR PAD SIZE
- SHEARWALL BLOCKING
- SHEARWALL FRAME TIE
- CENTER LINE TIES
- VERTICAL TIE MAX SPACING 8'-9" CENTER TO CENTER
- LONGITUDINAL TIES

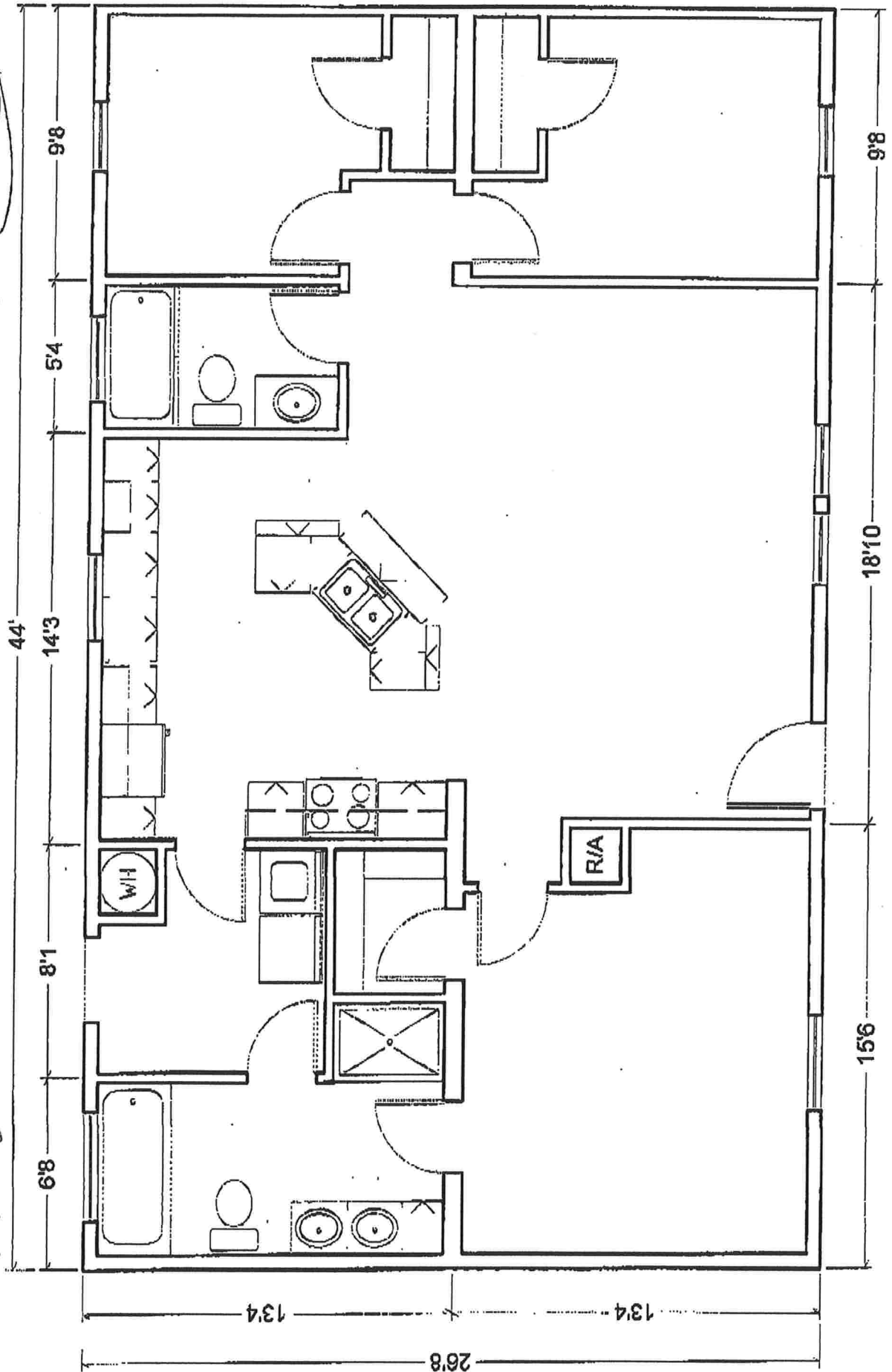
SHEARWALL TIE

BLOCKING LEGEND:

- 1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS 48" OR GREATER WILL REQUIRE BLOCKING ON EACH SIDE
- 2) 32" WIDE HOMES REQUIRED TO BE BLOCKED MIN 8'-0" ON CENTER BETWEEN COLUMNS

		Date: 11-10-09	
		Revisions	
Dr'n: RO8		Code: 2849A	
Parent: NEW		Code: T (08)	
Model: 2849-235		Print: BLOCKING PLAN	

Town Home
 26'8" x 44'
 3 bedrooms
 1174 58 sq. ft.



Handwritten signature and initials.

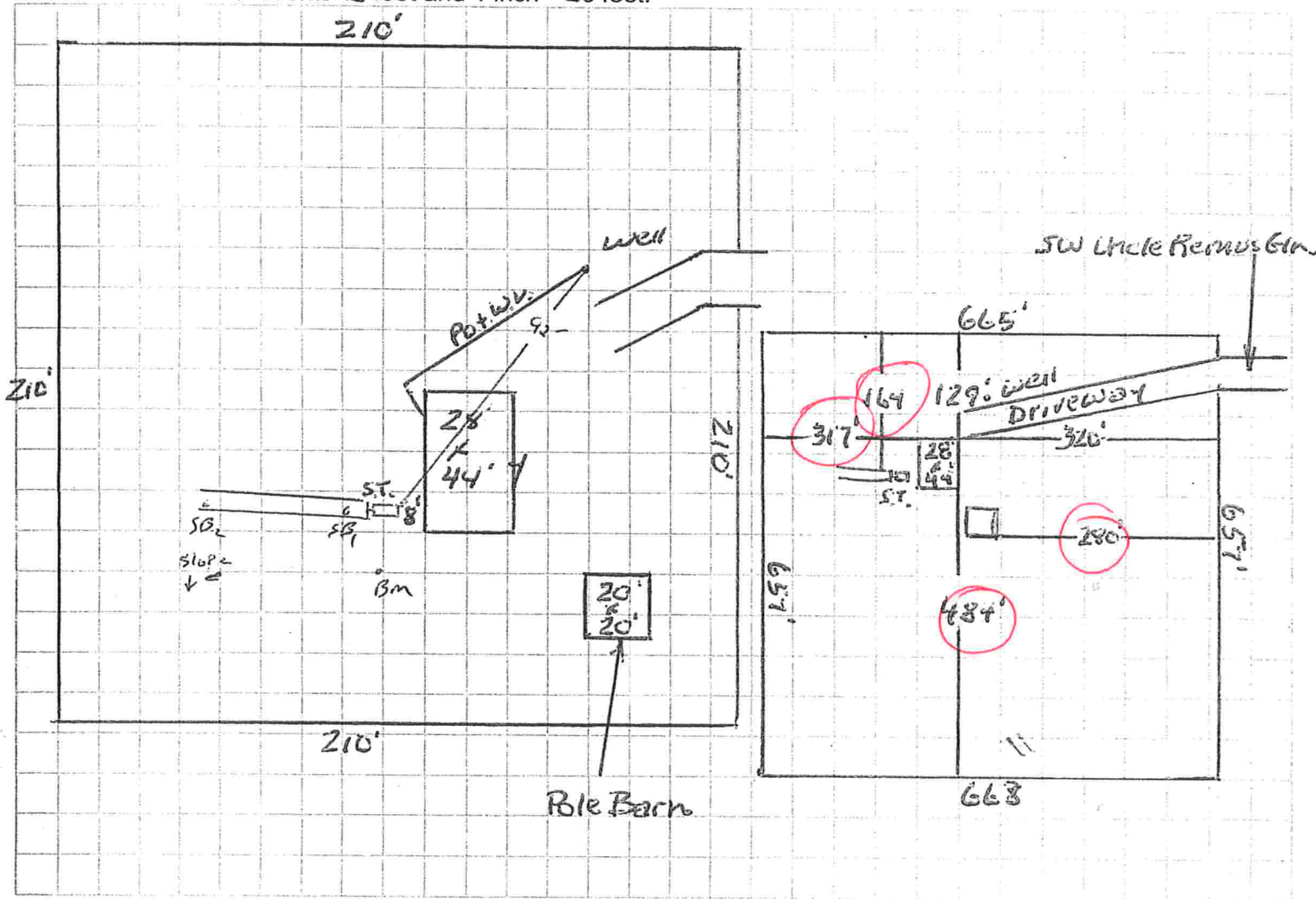


STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Mark Bryan ----- PART II - SITEPLAN -----

Scale: Each block represents ~~10~~⁵⁰ feet and 1 inch = ~~40~~⁵⁰ feet.



Notes: _____

Site Plan submitted by: Robert M. Murrell 11-10-09
Signature Date

Plan Approved _____ Not Approved _____

By _____ Date _____ Title _____
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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: 10/30/2009 DATE ISSUED: 11/4/2009

ENHANCED 9-1-1 ADDRESS:

490 SW UNCLE REMUS

GLN

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

05-7S-16-04138-105

Remarks:

LOT 5 BRIAR PATCH ESTATES UNREC

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.

1566



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, Ernest S. Johnson, give this authority for the job address show below
Installer License Holder Name

only, 409 SW Uncle Remus Glen, and I do certify that
Job Address

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)
Robert Minnella	<i>Robert Minnella</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

Ernest S. Johnson
 License Holders Signature (Notarized)

JH0000359
 License Number

11-10-09
 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ernest S. Johnson, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 10 day of Nov, 2009.

Nancy S. Phelps
 NOTARY'S SIGNATURE

(Seal/Stamp)
 NANCY S. PHELPS
 PUBLIC - STATE OF FLORIDA
 COMMISSION # DD666995
 EXPIRES 5/10/2011
 BONDED THRU 1-888-NOTARY1

This Instrument Prepared By:
Michael H. Harrell
Abstract & Title Services, Inc.
PO Box 7175
Lake City, Florida 32055
ATS# 17764

Inet:200912018866 Date:11/10/2009 Time:9:00 AM
Doc Stamp-Deed:316.00
DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1183 P:2836

GENERAL WARRANTY DEED

Individual to Individual (or Corporation/LLC)

This Warranty Deed made this 30th day of October, 2009 by

Troy T Johnson, and his wife, Leona J Johnson

hereinafter called the Grantor, to

James Marcus Bryan *JB*

whose post office address is 1468 SW Main Ste 105-214, Lake City, FL 32025, hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of Individuals, and the successors and assigns of Corporation.)

The Grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, unto the Grantee all that certain land, situate in Columbia County, Florida, viz: TAX ID: R04138-105 :

See Exhibit "A" attached hereto and by this reference made a part hereof.

Together with all the tenements, hereditaments, and appurtenances thereto belonging or in anyways 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, and hereby 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, 2008.

In witness whereof, the said Grantor has signed and sealed these presents the day and year first above written.

WITNESS

Printed Name:

Donna Cox
Donna Cox

WITNESS

Printed Name:

Traci Landry
Traci Landry

WITNESS

Printed Name:

Troy T Johnson
Troy T Johnson

WITNESS

Printed Name:

Leona J Johnson
Leona J Johnson

State of Florida
County of Columbia

I hereby certify that on this 30th day of October, 2009, before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared Troy T Johnson, and his wife, Leona J Johnson, who is personally known to me or produced a *DL* for identification, and known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he/she/they executed the same, and an oath was not taken.

(SEAL)

Donna Cox
NOTARY PUBLIC

My Commission Expires:



DONNA COX
Notary Public, State of Florida
My Comm. Expires Jan. 18, 2010
Commission No. DD 907081
Bonded thru Notary Public Underwriters

17764

Exhibit "A"

Commence at the Northeast Corner of the SW $\frac{1}{4}$, Section 5, Township 7 South, Range 16 East, Columbia County, Florida and run thence S $0^{\circ}15'45''$ E along the East line of said SW $\frac{1}{4}$, 657.48 feet; thence S $89^{\circ}15'34''$ W 1991.64 feet to the Point of Beginning; thence continue S $89^{\circ}15'34''$ W 665.41 feet to the West line of said Section 5; thence S $0^{\circ}00'14''$ W along said West line 657.51 feet; thence N $89^{\circ}15'34''$ E 668.47 feet; thence N $0^{\circ}15'45''$ W 657.48 feet to the Point of Beginning. Said lands being subject to a cul-de-sac easement for ingress and egress in the Northeast Corner thereof.

Also known as Parcel 5, Briar Patch Estates Unrecorded.

TOGETHER WITH an easement for ingress and egress described as follows:

A strip of land 60 feet in width being 60 feet to the right of a line described as follows:

Commence at the Northeast Corner of the NW $\frac{1}{4}$, Section 5, Township 7 South, Range 16 East, Columbia County, Florida and run thence S $0^{\circ}14'05''$ E along the East line of said NW $\frac{1}{4}$, 51.29 feet to the South line of Wilson Springs Road and to the Point of Beginning; thence continue S $0^{\circ}14'05''$ E along the East line, 2534.56 feet to the Northeast Corner of the SW $\frac{1}{4}$ of said Section 5; thence S $0^{\circ}15'45''$ E along the East line of said SW $\frac{1}{4}$, 657.48 feet to reference point "A"; thence continue S $0^{\circ}15'45''$ E along said East line, 1292.93 feet to reference point "B"; thence continue S $0^{\circ}15'45''$ E along said East line, 30.00 feet to the Point of Termination. Also a strip of land 60 feet in width being 30 feet each side of a centerline described as follows: Begin at reference point "A" and run thence S $89^{\circ}15'34''$ W 2031.64 feet to the center point of a cul-de-sac having a radius of 50 feet and the Point of Termination. Also a strip of land 60 feet in width being 30 feet each side of a centerline described as follows: Begin at reference point "B" and run thence S $89^{\circ}15'34''$ W, 1382.98 feet to the Point of Termination.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Ernest S. Johnson PHONE (352) 494-8099

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

ELECTRICAL ✓	Print Name <u>James Marcus Bryan</u> License #: <u>owner</u>	Signature <u>[Signature]</u> Phone #: <u>(731) 217-7686</u>
MECHANICAL/ A/C ✓	Print Name <u>Rick Frazey</u> License #: <u>CAC050446</u>	Signature <u>[Signature]</u> Phone #: <u>(850) 576-5113</u>
PLUMBING/ GAS ✓	Print Name <u>Ernest S Johnson</u> License #: <u>IT10000359</u>	Signature <u>Ernest S Johnson</u> Phone #: <u>(352) 494-8099</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 License	License Number	Sub-Contractors Printed Name	Sub-Contractors 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.

Andrews Site Prep, Inc.

Phone 386-867-0572
Fax 386-496-0985
Paul Stofel Lic # 2901

8230 SW SR 121
Lake Butler, Florida 32054

App# 0911-31

November 17, 2009

To: Columbia County Environmental Health

We will be drilling a well for Mark Bryan on SW Uncle Remus Gln. in Ft. White. The well should go approximately 100 feet with a casing depth of 85 feet. We will install a 1hp acornotor pump and a 33 gallon challenger tank.

Thank You,

Robert Stofel

*Ok
Per Mr. Bloom
✓*

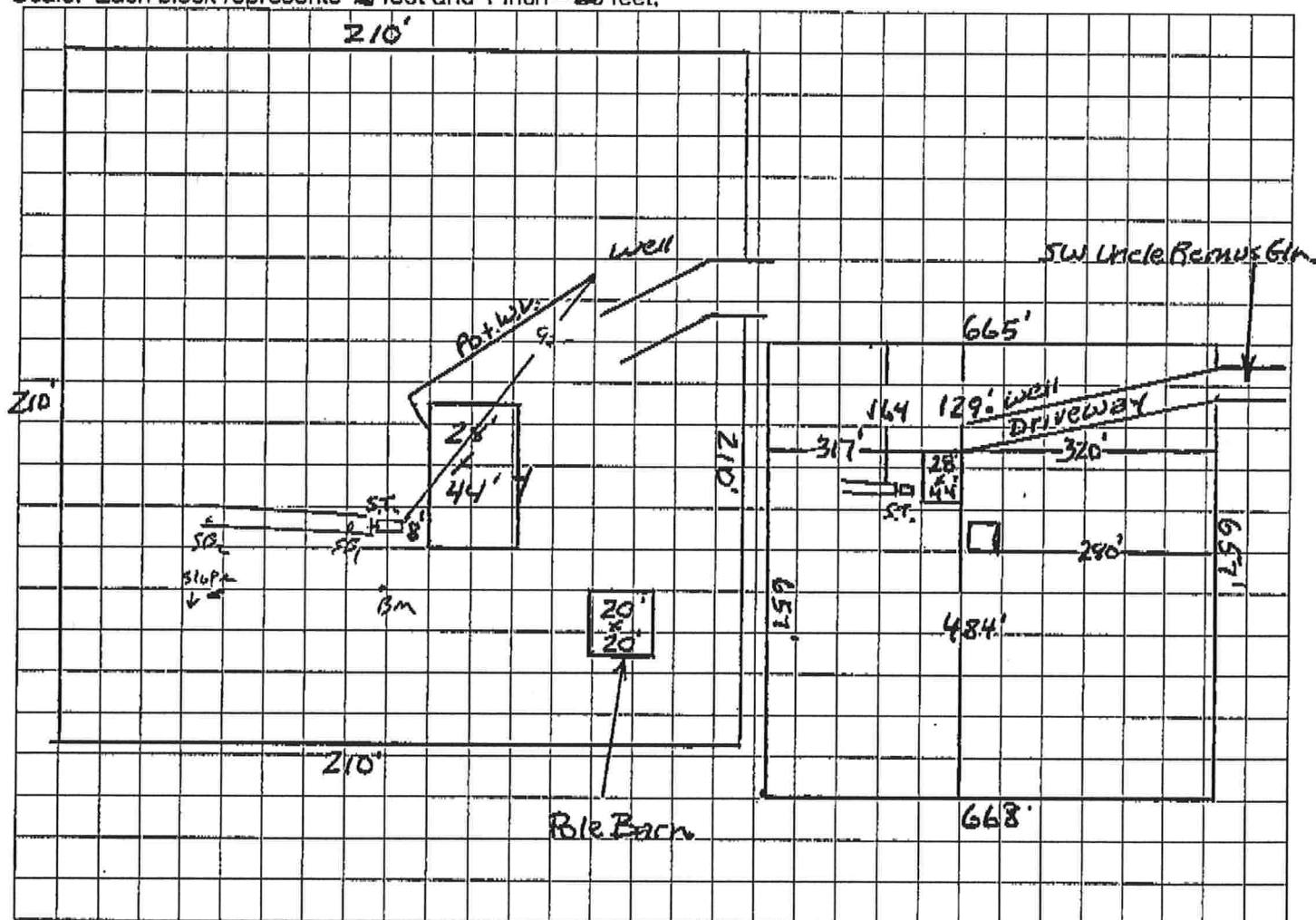


STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-0578

Mark Bryan ----- PART II - SITEPLAN -----

Scale: Each block represents ~~10~~ feet and 1 inch = ⁵⁰~~100~~ feet.



Notes: _____

Site Plan submitted by: Read Minnie 11-18-09

Plan Approved X

By [Signature]

Signature

Not Approved _____

Columbia

Agent

Title

Date 11/19/09

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

[Signature]



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 942837
DATE PAID: 11/17/09
FEE PAID: 350.00
RECEIPT #: 1204278

Jeff Hardee Soils

APPLICATION FOR:

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

APPLICANT: Bryan, Mark

AGENT: Robert Minnella TELEPHONE: 352-472-6010

MAILING ADDRESS: 25743 SW 22 PL, Newberry, FL 32669

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.

PROPERTY INFORMATION

LOT: 5 BLOCK: _____ SUBDIVISION: Briar Patch Estates (Unrec) PLATTED: _____

PROPERTY ID #: 05-07-016-04138-105 ZONING: Res. I/M OR EQUIVALENT: (Y) ☒ (N)

PROPERTY SIZE: 10 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 490 SW Uncle Remus Gl. Ft. White, FL 32038

DIRECTIONS TO PROPERTY: SR 47 South to Wilson Springs Rd (TR) Go about two miles to SW Briar Terr. (TL) Go about 1/2 mile and fork to right and follow to the end to driveway on left. Green Flag

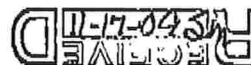
BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sq Ft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>MH</u>	<u>3</u>	<u>1174</u>	<u>2 people</u>
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Robert Minnella DATE: 11-09-09



GERBANDENIC AVENUE
DE

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 05-7S-16-04138-105

Building permit No. 000028238

Permit Holder ERNEST JOHNSON

Owner of Building JAMES MARCUS BRYAN

Location: 490 SW UNCLE REMUS GLEN, FT. WHITE, FL

Date: 12/07/2009



Wayne D. Run

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)