

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official _____ Building Official T.C. 8-8-11
 AP# 1108-06 Date Received 8/3 By JW Permit # 29646
 Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments Need recorded Family Relationship Affidavit ☒
 FEMA Map# N/A Elevation N/A Finished Floor _____ River N/A In Floodway N/A
☒ Site Plan with Setbacks Shown ☒ EH # 11-327 ☒ EH Release ☒ Well letter ☒ Existing well
☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☐ State Road Access ☒ 911 Sheet
☐ Parent Parcel # _____ ☒ STUP-MH 1108-25 ☐ F W Comp. letter ☒ VF Form
 IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Out County ☒ In County
 Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009

pd 8-4-11
form in
packet

Property ID # 24-45-15-00389-052 Subdivision Burles JACT UNREG. - LOT 23

- New Mobile Home _____ Used Mobile Home X MH Size 16x80 Year 1996
 Applicant Patricia T. Reece Phone # 386-758-8558
 Address 267 S.W. Tall Pine Ct. Lake City, FL 32024
 Name of Property Owner Patricia T. Reece Phone# 758-8558
 911 Address 265 S.W. Tall Pine Ct. Lake City, FL 32024
 Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
 Name of Owner of Mobile Home Patricia T. - Reece Phone # 386 758-8558
 Address 267 S.W. Tall Pine Ct. Lake City, FL 32024
 Relationship to Property Owner Self
 Current Number of Dwellings on Property 1
 Lot Size _____ Total Acreage 8.98 (Owes)
 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 - 2nd Unit
 Driving Directions to the Property From Branford Hwy South to 242 Right
approx. 2 miles on Right to "Tall Pine Ct. Right.
5th place down on Right "267" on Archway & Mailbox.
 Name of Licensed Dealer/Installer Dale Houston Phone # 386-752-7814
 Installers Address 136 SW Barriglen Lake City FL 32024
 License Number TH1025142 Installation Decal # 6064

JW LEFT MSG: 8.17.11
spoke to mr Reese 8-17-11

\$ 371.34
12.84 / 33.50

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

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 the 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 Dave Houston

Date Tested 7/18/11

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. N/A

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 42

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 4

Strip Preparation

Debris and organic material removed _____ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: _____ Length: _____ Spacing: _____

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 DH

Installed:

Type gasket _____ Pg. _____
Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes _____ Pg. 42
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 Dave Houston Date 7/18/11

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

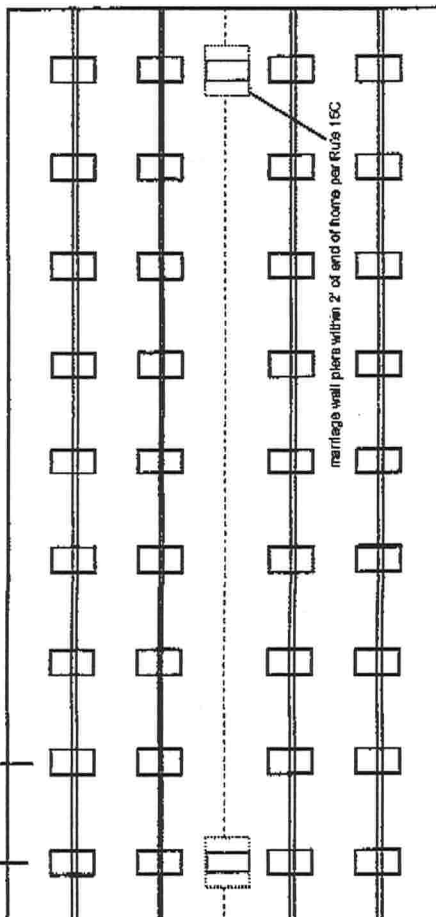
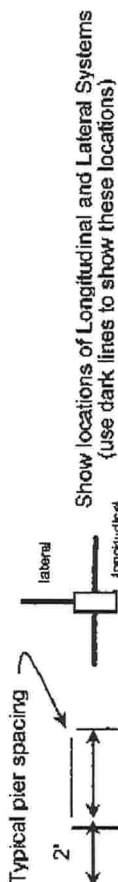
These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Dale Houston License # TH028142
 911 Address where home is being installed. 267 SW 1st Ave G
C.C. FL 32029
 Manufacturer Liberty Length x width 76x16

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 DH



16x76 - 1000 DOW 23X31
Piers 11 per side - 7' 0" OC
Anchor 14 per side 5' 4" OC
Longitudinal Lateral System

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 # 6064
 Triple/Quad ☐ Serial # A10L 24787

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' | 4' | 5' | 6' | 7' | 8' |
| 1500 dsf | 4' 6" | 6' | 6' | 7' | 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

t-beam pier pad size

23x31

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

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 Overseas Technology

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

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 24-4S-15-00384-052

Building permit No. 000029646

Permit Holder DALE HOUSTON

Owner of Building PATRICIA REECE/ SHANNON TOWNSEND

Location: 265 SW TALL PINE CRT, LAKE CITY, FL 32025



Date: 08/31/2011

Greg Lee

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

DATE 08/22/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029646

APPLICANT PATRICIA REECE PHONE 758-8558

ADDRESS 267 SW TALL PINE CT LAKE CITY FL 32024

OWNER PATRICIA REECE/SHANNON TOWNSEND PHONE 758-8558

ADDRESS 265 SW TALL PINE CT LAKE CITY FL 32024

CONTRACTOR DALE HOUSTON PHONE 752-7814

LOCATION OF PROPERTY 247 S, R 242, R TALL PINE COURT, 5TH ON RIGHT SEE
ARCHWAY & MAILBOX WITH 267 ON IT

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 Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

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

PARCEL ID 24-4S-15-00384-052 SUBDIVISION BUIES TRACT UNREC.

LOT 23 BLOCK PHASE UNIT TOTAL ACRES 4.00

 IH1025142 Patricia T. Reece

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

EXISTING 11-327 BK TC N

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

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

SPECIAL TEMPORARY FAMILY LT 1108-25,AFFIDAVIT ON FILE FOR DAUGHTER

SHANNON TOWNSEND Check # or Cash 6693

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

Permanent power C.O. Final Culvert

 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 \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 12.84 WASTE FEE \$ 33.50

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 371.34

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.

AFFIDAVIT AND AGREEMENT OF SPECIAL
TEMPORARY USE FOR IMMEDIATE
FAMILY MEMBERS FOR
PRIMARY RESIDENCE

STATE OF FLORIDA
COUNTY OF COLUMBIA

18 Not: 201112012872 Date: 8/22/2011 Time: 4:09 PM
DC, P. DeWitt Cason, Columbia County Page 1 of 2 B: 1220 P: 23

BEFORE ME the undersigned Notary Public personally appeared.

Patricia Reece (Townsend), the Owner of the parcel which is being used to place an additional dwelling (mobile home) as a primary residence for a family member of the Owner, and Shannon Townsend, the Family Member of the Owner, who intends to place a mobile home as the family member's primary residence as a temporarily use. The Family Member is related to the Owner as Daughter, and both individuals being first duly sworn according to law, depose and say:

1. Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 24-45-15-00384-052.
4. No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for 5 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.
6. This Special Temporary Use Permit on Parcel No. 24-45-15-00384-052 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.
7. The site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.
8. The parent parcel owner shall be responsible for non ad-valorem assessments.

9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.
10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).
13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

| | |
|---|--|
| <u>Patricia T. - Reece</u> Owner | <u>Shannon Townsend</u> Family Member |
| <u>Patricia T. - Reece</u> Typed or Printed Name | <u>Shannon Townsend</u> Typed or Printed Name |

Subscribed and sworn to (or affirmed) before me this 17 day of August, 2011, by Patricia Reece (Owner) who is personally known to me or has produced FLDL as identification.

Laurie Hodson
Notary Public



Subscribed and sworn to (or affirmed) before me this 17 day of August, 2011, by Shannon Townsend (Family Member) who is personally known to me or has produced FLDL as identification.

Laurie Hodson
Notary Public



COLUMBIA COUNTY, FLORIDA

By: Brian L. Kepner
Name: BRIAN L. KEPNER
Title: LAND DEVELOPMENT REGULATION ADMINISTRATOR

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
APPLICATION

Permit No. STUP - 1108-25 Date 8-4-11

Fee 450.00 Receipt No. 4243 Building Permit No. _____

Name of Title Holder(s) Patricia Reece

Address 267 SW Tall Pine Ct City Lake City FL

Zip Code 32024

Phone (758-8558)

NOTE: If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator **MUST** be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) N/A

Address _____ City _____

Zip Code _____

Phone ()

Paragraph Number Applying for 7

Proposed Temporary Use of Property Mobile Home for Daughter

Proposed Duration of Temporary Use 5 years

Tax Parcel ID# 24-45-15-00384-052

Size of Property 8.98

Present Land Use Classification A-3

Present Zoning District A-3

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
6. In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;

- c. Site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building;
- d. Responsibility for non ad-valorem assessments;
- e. Inspection with right of entry onto the property by the County to verify compliance with this section. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section and;
- f. Shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- g. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- h. Requirements upon expiration of permit. Unless extended as herein provided, once a permit expires the mobile home shall be removed from the property within six (6) months of the date of expiration.

The property owner may apply for one or more extensions for up to two (2) years by submitting a new application, appropriate fees and family relationship residence affidavit agreement to be approved by the Land Development Regulations Administrator.

Previously approved temporary use permits would be eligible for extensions as amended in this section.

- 8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
- 9. In agriculture and environmentally sensitive area districts: a single recreational vehicle as described on permit for living, sleeping, or housekeeping purposes for one-hundred eighty (180) consecutive days from date that permit is issued, subject to the following conditions:
 - a. Demonstrate a permanent residence in another location.
 - b. Meet setback requirements.

- c. Shall be hooked up to or have access to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.

Upon expiration of the permit the recreational vehicle shall not remain on property parked or stored and shall be removed from the property for 180 consecutive days.

Temporary RV permits are renewable only after one (1) year from issuance date of any prior temporary permit.

Temporary RV permits existing at the effective date of this amendment may be renewed for one (1) additional temporary permit in compliance with these land development regulations, as amended. Recreational vehicles as permitted in this section are not to include RV parks.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

Patricia Reece

Applicants Name (Print or Type)

Patricia Reece

Applicant Signature

8-4-11

Date

Approved

X BLK

OFFICIAL USE

11 Aug. 2011

Denied _____

Reason for Denial _____

Conditions (if any) _____

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 8-16-11 BY UH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Patricia Reese PHONE 758-8588 CELL _____

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 247, @ 242, @ Tall Pine Ct, 5th
place on @ - Drive is marked 267

MOBILE HOME INSTALLER Dale Houston PHONE 752-7814 CELL _____

MOBILE HOME INFORMATION

MAKE Liberty YEAR 96 SIZE 16 X 76 COLOR _____

SERIAL No. 10124787

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

\$50.00

☒ SMOKE DETECTOR () OPERATIONAL () MISSING

Date of Payment: 8-4-11

☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____

Paid By: Patricia Reese

☒ DOORS () OPERABLE () DAMAGED

Notes: ~~Not to be used~~

☒ WALLS () SOLID () STRUCTURALLY UNSOUND

☒ WINDOWS () OPERABLE () INOPERABLE

☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

☒ CEILING () SOLID () HOLES () LEAKS APPARENT

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

EXTERIOR:

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

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

☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Glen Rinnell per phone ID NUMBER 402 DATE 8-22-11

CUST - Tedric T. Reese

Sent: 8.9.11

CODE ENFORCEMENT DEPARTMENT # 1108-06
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM ALACHUA
OWNERS NAME 13th Street Homes PHONE 386-416-0434 CELL 386-752-7814
INSTALLER Dale Haxton PHONE 386-752-7814 CELL 386-623-6521
INSTALLERS ADDRESS 136 SW Barnes Glen Lake City FL 32724

MOBILE HOME INFORMATION

MAKE Liberty YEAR 1996 SIZE 12 x 80
COLOR Clay SERIAL NO. 10L2A787
WIND ZONE II SMOKE DETECTOR Y/N
INTERIOR:
FLOORS GOOD
DOORS GOOD
WALLS GOOD
CABINETS GOOD
ELECTRICAL (FIXTURES/OUTLETS) GOOD
EXTERIOR:
WALLS / SIDING GOOD
WINDOWS GOOD
DOORS GOOD
STATUS:
APPROVED ☒ NOT APPROVED ☐

NOTES:
INSTALLER OR INSPECTORS PRINTED NAME DALE Haxton
Installer/Inspector Signature Dale Haxton License No. TH1025142 Date 8/8/11

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.
NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED IN 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 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approver Signature [Signature] Date 8-10-11



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

CR # 10-5264

PERMIT NO.

DATE PAID: 7.28.11FEE PAID: 310.00RECEIPT #: 12 BID 1741

APPLICATION FOR:

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

APPLICANT: PATERICA TOWNSEND-REESEAGENT: PAUL LLOYDTELEPHONE: (386) 758-8558MAILING ADDRESS: 267 SW TALL PINE CT.LAKE CITYFL 32024

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: 23 BLOCK: N/A SUBDIVISION: BUIE'S TRACK UNRECORDED PLATTED: _____PROPERTY ID #: 24-4S-15-00384-052 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐PROPERTY SIZE: 8.860 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FTPROPERTY ADDRESS: 267 SW TALL PINE CT.DIRECTIONS TO PROPERTY: 90 WEST TURN LEFT ON CR 247 TURN RIGHT ON CR 242 TURN RIGHT ON TALL PINE CT. 2ED ON RIGHT.BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

| Unit No. | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|----------|-----------------------|-----------------|--------------------|--|
| 1 | <u>MOBILE HOME</u> | <u>3</u> | <u>1,178</u> | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Paul LloydDATE: 7/27/11

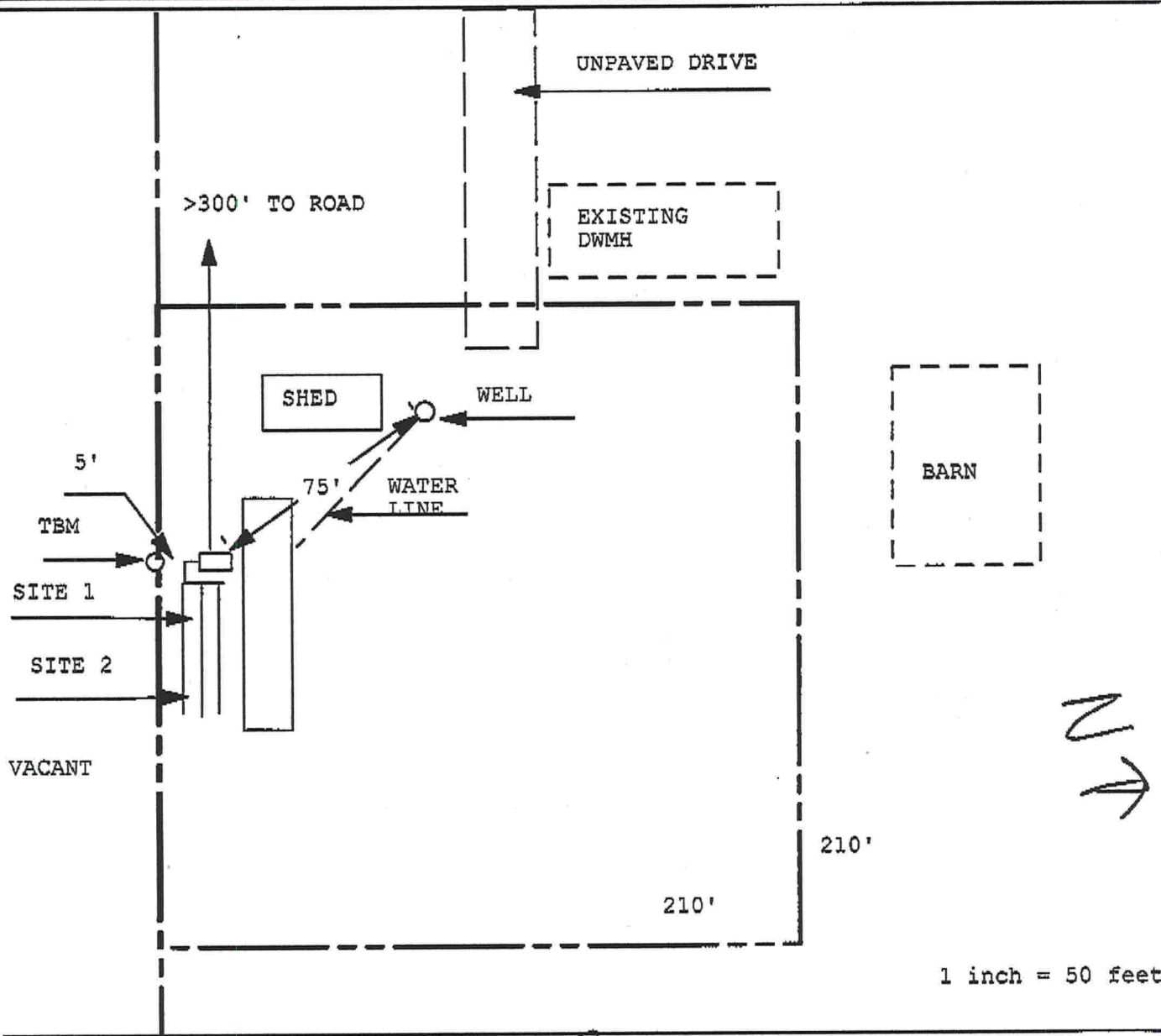
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001 FAC

Page 1 of 4

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 11-327.

Permit Application Number: 11-327.

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul K. Boyd Date 7/27/11
Plan Approved X Not Approved _____ Date _____
By Sallie Ford, Env Health Director Columbiana CPHU

| | | | | |
|---------------|---|--------------|--|------|
| Plan Approved | X | Not Approved | | Date |
|---------------|---|--------------|--|------|

By Julie Ford, PhD Health Director  CPHU

Notes:

7/27/11
Columbia CHL
CPHU



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 AGENT AUTHORIZATION

I, DALE Houston, give this authority and I do certify that the below
Installers Name

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 | Agents Company Name |
|-----------------------------------|--------------------------------|---------------------|
| Patricia Reece | Patricia T. - Reece | 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.

Dale Houston

License Holders Signature (Notarized)

IH1025142

License Number

8-4-11

Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is _____,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 8 day of August, 2011.

Laurie Hodson
NOTARY'S SIGNATURE



(Seal/Stamp)

BK 0897 PG 1282

OFFICIAL RECORDS

Department of Health • Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
 TYPE IN UPPER CASE
 USE BLACK INK
 This license not valid unless seal of Clerk,
 Circuit or County Court, appears thereon.

00-03174

(STATE FILE NUMBER)
 FILED AND RECORDED IN PUBLIC
 RECORDS OF COLUMBIA COUNTY, FL.

'00 FEB 23 PM 12:11

RECORD VERIFIED

MCK

(APPLICATION NUMBER)

APPLICATION TO MARRY

| | | | | | |
|---|--|-------------------------------|---|--|---|
| 1. GROOM'S NAME (First, Middle, Last) MICHAEL GLENN REECE | | | 2. DATE OF BIRTH (Month, Day, Year) Mar. 03, 1954 | | |
| 3a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE CITY | | 3b. COUNTY COLUMBIA | 3c. STATE FLORIDA | | 4. BIRTHPLACE (State or Foreign Country) TENNESSE |
| 5a. BRIDE'S NAME (First, Middle, Last) PATRICIA TAGLIONE TOWNSEND | | | 5b. MAIDEN SURNAME (If different) TAGLIONE | | 6. DATE OF BIRTH (Month, Day, Year) Jan. 24, 1958 |
| 7a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE CITY | | 7b. COUNTY COLUMBIA | 7c. STATE FLORIDA | | 8. BIRTHPLACE (State or Foreign Country) FLORIDA |

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

| | | | |
|--|--|---|--|
| 9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Michael G. Reece</i> | | 10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) Feb. 11, 2000 | |
| 11. TITLE OF OFFICIAL P. Dewitt Cason, Clerk of Cir Crt | | 12. SIGNATURE OF OFFICIAL (Use black ink) <i>Mandy Stader D.C.</i> | |
| 13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Patricia T. Townsend</i> | | 14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) Feb. 11, 2000 | |
| 15. TITLE OF OFFICIAL P. Dewitt Cason, Clerk of Cir Crt | | 16. SIGNATURE OF OFFICIAL (Use black ink) <i>Mandy Stader D.C.</i> | |

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

| | | | |
|--|--|--|-------------------------------------|
| 17. COUNTY ISSUING LICENSE COLUMBIA | 18. DATE LICENSE ISSUED 1-00 | 19a. DATE LICENSE EFFECTIVE 1-00 | 19b. EXPIRATION DATE 1-00 |
| 20a. SIGNATURE OF COURT CLERK OR JUDGE <i>P. Dewitt Cason</i> | | 20b. TITLE CLERK OF CIRCUIT CRT | 20c. BY D.C. <i>mck</i> |

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

| | | | |
|--|--|---|--|
| 21. DATE OF MARRIAGE (Month, Day, Year) 2-19-00 | 22. CITY, TOWN, OR LOCATION OF MARRIAGE Rope The Wind Ranch - Rt 11 Box 599, Tall Pine Drive LAKE CITY, FL 32024 | | |
| 23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Rev. Robert V. Cason</i> | 23b. ADDRESS (Of person performing ceremony) Rt 11 Box 599 Tall Pine Dr. Lake City FL 32024 | | |
| 23c. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) ORDAINED MINISTER I VARY PALACE Church International Ministry Nahunta, GA 31553 | | 24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Patricia M. Taglione</i> | |
| | | 25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Robert V. Cason</i> | |

INFORMATION BELOW FOR USE BY VITAL

Columbia County Property Appraiser

DB Last Updated: 6/22/2011

2010 Tax Year

Parcel: 24-4S-15-00384-052

[<< Next Lower Parcel](#)
[Next Higher Parcel >>](#)
[Tax Collector](#)
[Tax Estimator](#)
[Property Card](#)
[Parcel List Generator](#)
[Interactive GIS Map](#)
[Print](#)

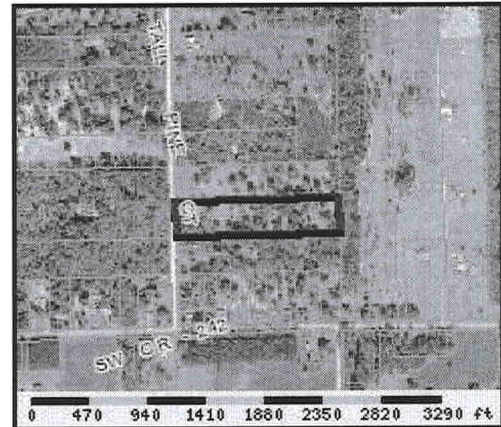
<< Prev

Search Result: 47 of 60

Next >>

Owner & Property Info

| | | | |
|-------------------------|--|---------------------|-------|
| Owner's Name | TOWNSEND PATRICIA TAGLIONE | | |
| Mailing Address | 267 SW TALL PINE COURT LAKE CITY, FL 32024 | | |
| Site Address | 267 SW TALL PINE CT | | |
| Use Desc. (code) | MOBILE HOM (000200) | | |
| Tax District | 3 (County) | Neighborhood | 24415 |
| Land Area | 8.860 ACRES | Market Area | 02 |
| Description | NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. N 291.30 FT OF S 1032.60 FT OF SE1/4 OF SE1/4, EX 30 FT OFF W SIDE. (AKA LOT 23 BUIE'S TRACT UNREC) ORB 590-98, 598-348, 782-1891 | | |



Property & Assessment Values

| 2010 Certified Values | | |
|------------------------------|--|-------------|
| Mkt Land Value | cnt: (0) | \$48,019.00 |
| Ag Land Value | cnt: (2) | \$0.00 |
| Building Value | cnt: (1) | \$34,545.00 |
| XFOB Value | cnt: (3) | \$2,000.00 |
| Total Appraised Value | | \$84,564.00 |
| Just Value | | \$84,564.00 |
| Class Value | | \$0.00 |
| Assessed Value | | \$72,341.00 |
| Exempt Value | (code: HX) | \$47,341.00 |
| Total Taxable Value | Cnty: \$25,000 Other: \$25,000 Schl: \$47,341 | |

2011 Working Values

NOTE:
2011 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 |
|------------|--------------|---------|-------------------|----------------|------------|-------------|
| 11/23/1993 | 782/1891 | WD | I | Q | | \$32,000.00 |
| 7/1/1986 | 590/98 | WD | V | U | 01 | \$30,000.00 |
| 2/1/1983 | 506/126 | WD | V | Q | | \$15,000.00 |
| 5/24/1900 | 686/433 | 89 | I | Q | | \$26,500.00 |

Building Characteristics

| Bldg Item | Bldg Desc | Year Blt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
|---|---------------------|----------|------------|-------------|-------------|-------------|
| 1 | MOBILE HME (000800) | 1997 | (31) | 1782 | 1782 | \$33,144.00 |
| Note: All S.F. calculations are based on exterior building dimensions. | | | | | | |

Extra Features & Out Buildings

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|------------|----------|----------|-------------|-----------|--------------------|
| 0294 | SHED WOOD/ | 0 | \$300.00 | 0000001.000 | 0 x 0 x 0 | (000.00) |
| 0040 | BARN,POLE | 1997 | \$500.00 | 0000001.000 | 0 x 0 x 0 | (000.00) |

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1108-06

CONTRACTOR

Dale Hunter

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 89-6, 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>MICHAEL G. REECE</u> | Signature <u>Michael G. Reece</u> | Phone #: <u>758-8558</u> | OWNER |
| MECHANICAL/ A/C 701 ✓ | Print Name <u>Robert Grant</u> | Signature <u>Robert Grant</u> | Phone #: <u>800-859-3708</u> | |
| PLUMBING/ GAS ✓ | Print Name <u>Dale Hunter</u> | Signature <u>Dale Hunter</u> | Phone #: <u>386-752-7814</u> | |

| 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.

Contractor Form; Subcontractor form: 2/17

Pg: 5/7 07-18-11 05:47

THIRTEENTH ST HOMES

Fax sent by : 13864180423

Pg: 2/2 07-21-11 07:16

THIRTEENTH ST HOMES

Fax sent by : 13864180423

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: 7/26/2011 DATE ISSUED: 7/29/2011

ENHANCED 9-1-1 ADDRESS:

265 SW TALL PINE CT

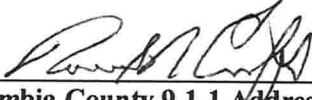
LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

24-4S-15-00384-052

Remarks:

ADDRESS FOR PROPOSED NEW STRUCTURE ON PARCE. 2ND
LOCATION ON PARCEL

Address Issued By: 

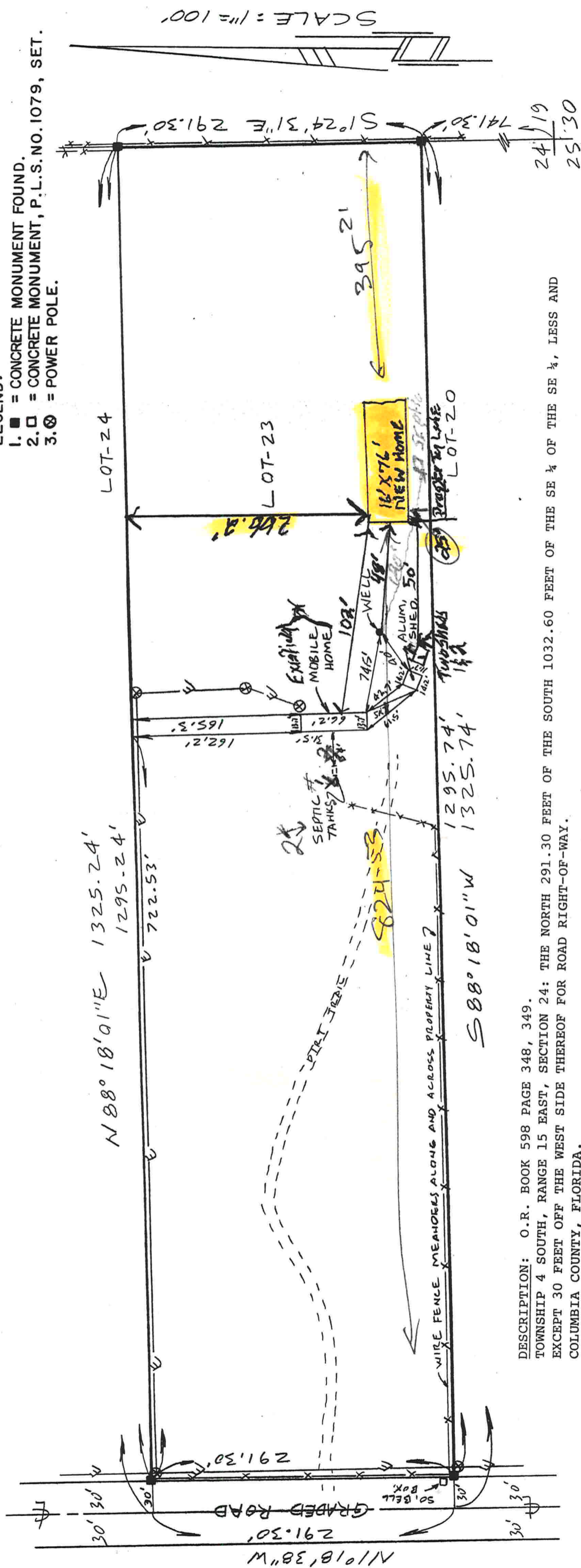
Columbia County 9-1-1 Addressing / GIS Department

**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.**

BOUNDARY SURVEY IN SECTION 24, TOWNSHIP 4 SOUTH
RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA.

LEGEND:

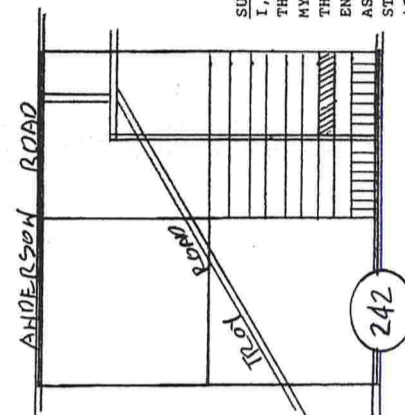
1. ■ = CONCRETE MONUMENT FOUND.
2. □ = CONCRETE MONUMENT, P.L.S. NO. 1079, SET.
3. ⊗ = POWER POLE.



DESCRIPTION: O.R. BOOK 598 PAGE 348, 349.
TOWNSHIP 4 SOUTH, RANGE 15 EAST, SECTION 24: THE NORTH 291.30 FEET OF THE SOUTH 1032.60 FEET OF THE SE ¼ OF THE SE ¼, LESS AND EXCEPT 30 FEET OFF THE WEST SIDE THEREOF FOR ROAD RIGHT-OF-WAY.
COLUMBIA COUNTY, FLORIDA.

SURVEYOR'S NOTES:

1. BOUNDARY BASED ON MONUMENTATION FOUND IN ACCORDANCE WITH THE RETRACEMENT OF "BUIE TRACT" AN UNRECORDED SUBDIVISION SIGNED BY L.L. LEE, P.L.S. 1950 DATED 12 JULY 1974.
2. BEARINGS BASED ON SAID UNRECORDED SUBDIVISION.
3. THIS PARCEL IS IN ZONE "X" AND IS DETERMINED TO BE OUTSIDE THE 500 YEAR FLOOD PLAIN AS PER FLOOD INSURANCE RATE MAP, DATED 6 JAN. 1988 COMMUNITY PANEL NO. 120070 0175 B.
4. THE IMPROVEMENTS INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
5. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.
6. THIS OFFICE ACCEPTS NO RESPONSIBILITY FOR ANY SURVEY DRAWING UNLESS IT IS SIGNED AND A SEAL EMBOSSED THEREON.
7. CERTIFIED TO:
 - A. C.N.B. NATIONAL BANK.
 - B. TRI-COUNTY TITLE SERVICES OF LAKE CITY, INC.
 - C. FIDELITY NATIONAL TITLE.
 - D. PATRICIA TAGLIONE TOWNSEND.



LOCATION SKETCH
NOT TO SCALE
SECTION 24,
T4S, R15E.

SURVEYOR'S CERTIFICATION:
I, THE UNDERSIGNED REGISTERED LAND SURVEYOR, HEREBY CERTIFY THAT A SURVEY OF THE ABOVE DESCRIBED PROPERTY WAS MADE UNDER MY DIRECTION AND THAT THIS IS A TRUE AND CORRECT REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN AND THAT THE IMPROVEMENTS ARE AS INDICATED HEREON. THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS FOR LAND SURVEYING IN THE STATE OF FLORIDA.
(CHAPTER 21 HH-6 FLORIDA ADMINISTRATIVE CODE)

LAUREN E. BRITT, P.L.S.
FLA. CERT. NO. 1079

FIELD SURVEY DATE 29 OCT. 1993
DRAWING DATE 2 NOV. 1993
F.B. 144 PAGE 67
FOR: TOWNSEND

BRITT SURVEYING
1426 WEST DUVAL STREET
LAKE CITY, FLORIDA. 32055
(904) 752-7163

L-5933