

DATE 12/30/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022652

APPLICANT FRANK RUSSELL PHONE 850.843.1361
 ADDRESS 2549 SYDNEY BANTON ROAD PERRY FL 32347
 OWNER SIDNEY PUTNEL, JR PHONE 386.288.5371
 ADDRESS 543 SW INFINITI PLACE LAKE CITY FL 32024
 CONTRACTOR FRANK RUSSELL PHONE 850.843.1361

LOCATION OF PROPERTY 47-S TO C-240, R OLD WIRE ROAD, TO INFINITI PLACE, TL THEN TO 2ND LOT ON , ALMOST TO END, PAST BEYOND DRIVE.

TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 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. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 24-5S-16-03707-030 SUBDIVISION _____

LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 5.05


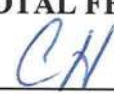
IH0000645 
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 04-1205MD BLK HD N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: DAMAGED BY WIND & RAIN
NO CHARGE. (NOT FLOOD)

FEMA TOTALED..... Check # or Cash NO OHARGE

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power _____ Foundation _____ Monolithic _____ (footer/Slab)
 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 _____ Rough-in plumbing above slab and below wood floor _____
 date/app. by _____ date/app. by _____
 Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Permanent power _____ C.O. Final _____ Culvert _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ Pool _____
 date/app. by _____ date/app. by _____
 Reconnection _____ Pump pole _____ Utility Pole _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H Pole _____ Travel Trailer _____ Re-roof _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$.00 ZONING CERT. FEE \$ _____ FIRE FEE \$ _____ WASTE FEE \$ _____
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE .00
 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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only Zoning Official BLK 22.12.04 Building Official NO 12-29-04
 AP# 0412-47 Date Received 12-15-04 By LH Permit # # 22652
 Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments NO CHARGE
 FEMA Map # _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
 Site Plan with Setbacks shown Environmental Health Signed Site Plan Env. Health Release
 Well letter provided Existing Well
 Revised 9-23-04

- Property ID 24-55-16-63707-030 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home Year 1999
- Subdivision Information _____
- Applicant Frank Russell Phone # 850-843-1361
Sidney Puttnell Phone # 386-288-5371
- Address 543 SW Infinity Place LAKE CITY, FL 32024
- Name of Property Owner Sidney Puttnell Phone# 850-386-288-5371
- 911 Address 543 SW Infinity Place
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progressive Energy
- Name of Owner of Mobile Home Sidney Puttnell Phone # 386-288-5371
- Address 543 SW Infinity Place LAKE CITY, FL 32024
- Relationship to Property Owner SAB
- Current Number of Dwellings on Property 1 (FEMA Totald)
- Lot Size 515.67 x 463 Total Acreage 5.05
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
- Driving Directions 475, L 240, R OLD Wire Rd, (3 to 3.5 miles a row of mailboxes) go L SW Infinity Place then 2nd lot on Left almost to End past Beyond drive
- Is this Mobile Home Replacing an Existing Mobile Home Yes Damaged by wind & Rain (not Flood)
- Name of Licensed Dealer/Installer Frank Russell Phone # 850 843-1361
- Installers Address 2549 Sydney B Landon Rd Perry, FL 32347
- License Number FH0000645 Installation Decal # 232588

PERMIT NUMBER

PERMIT WORKSHEET

Installer FRANK RUSSELL License # FL1000645

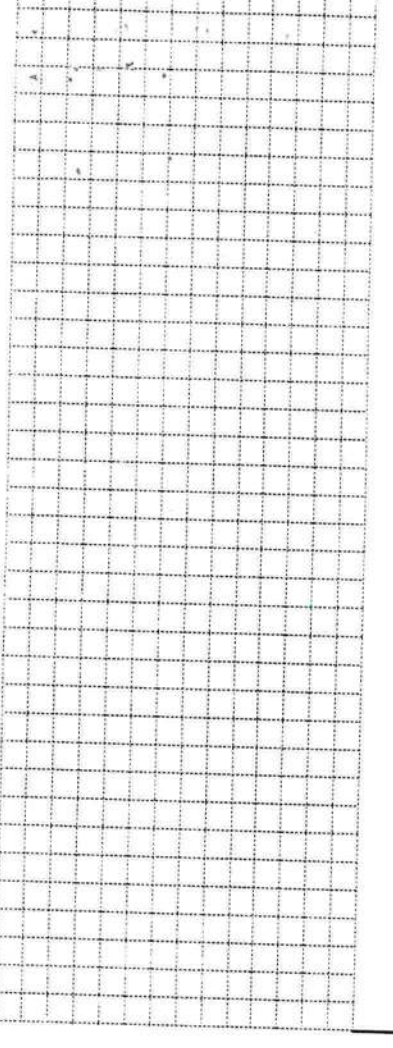
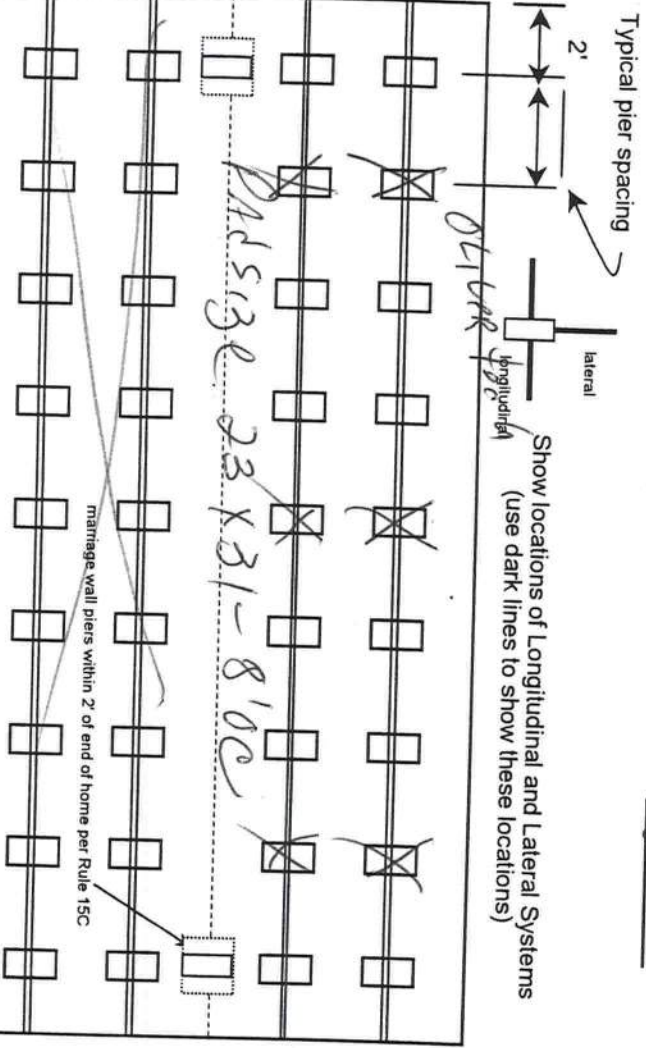
Address of home being installed 5435W InFurnch R WAKENHUT 3202

Manufacturer Redman Length x width 16x76

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 [Signature]



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

Double wide Installation Decal # 232582

Triple/Quad Serial # 11433777

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4'6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7'6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 23x31

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) N/A

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 DLTAR

OTHER TIES

Sidewall _____ Number _____
 Longitudinal Marriage wall _____
 Shearwall _____

POCKET PENETROMETER TEST

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

X 2500 X 2600 X 2700

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 2800 X 2700 X 2500

TORQUE PROBE TEST

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

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 understrand 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 Frank Kesselle
Date Tested 12-14-09

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. _____

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 54

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 54

Site Preparation

Debris and organic material removed Yes
Water drainage: Natural 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

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

Weatherproofing

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

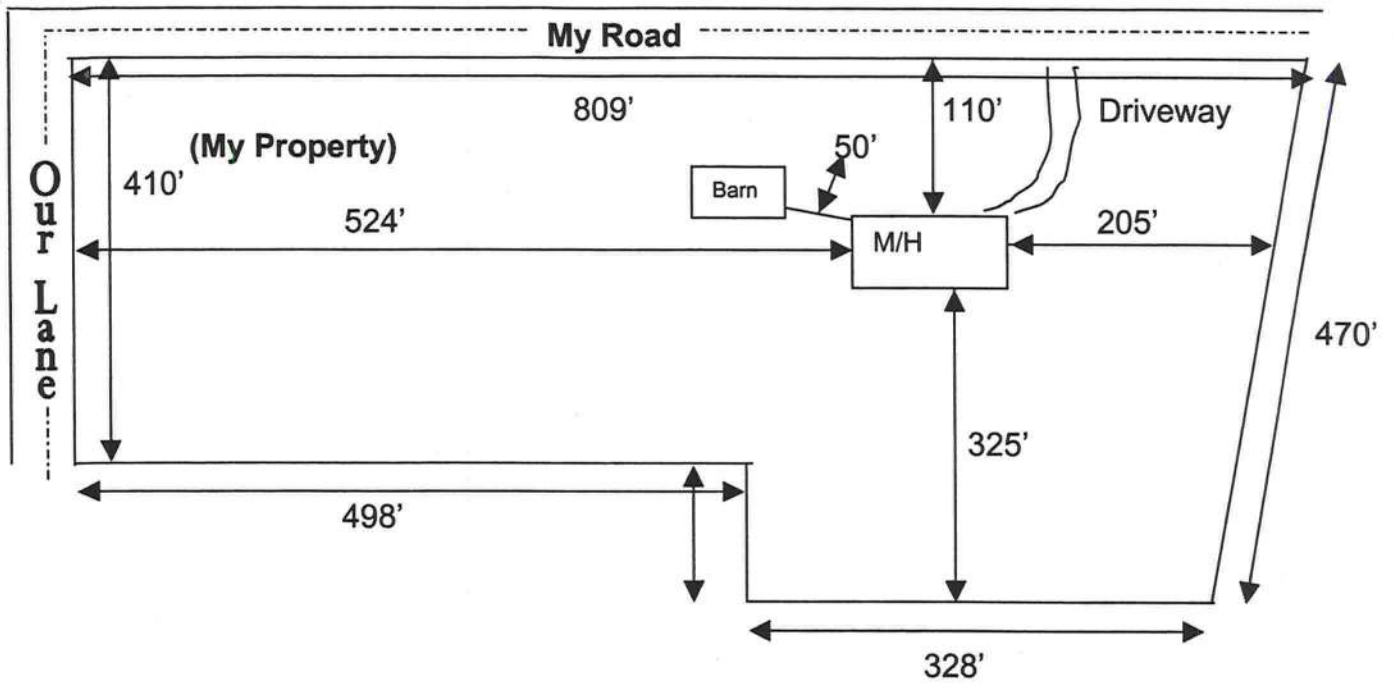
Miscellaneous

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:

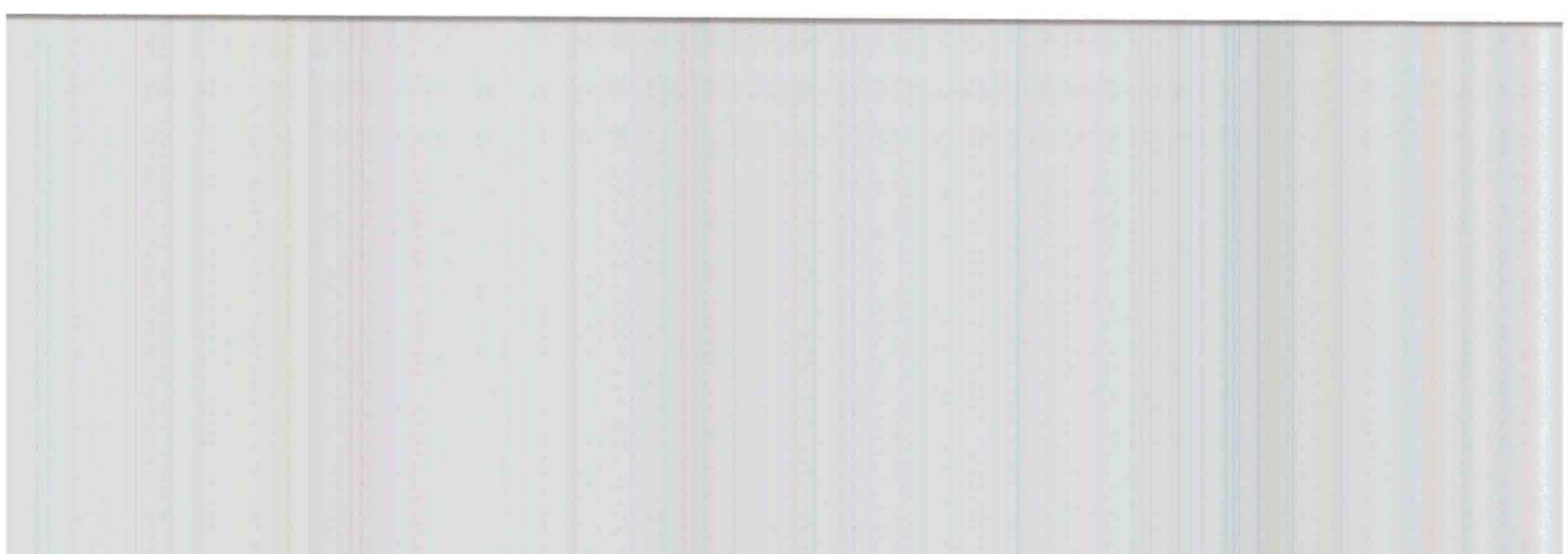
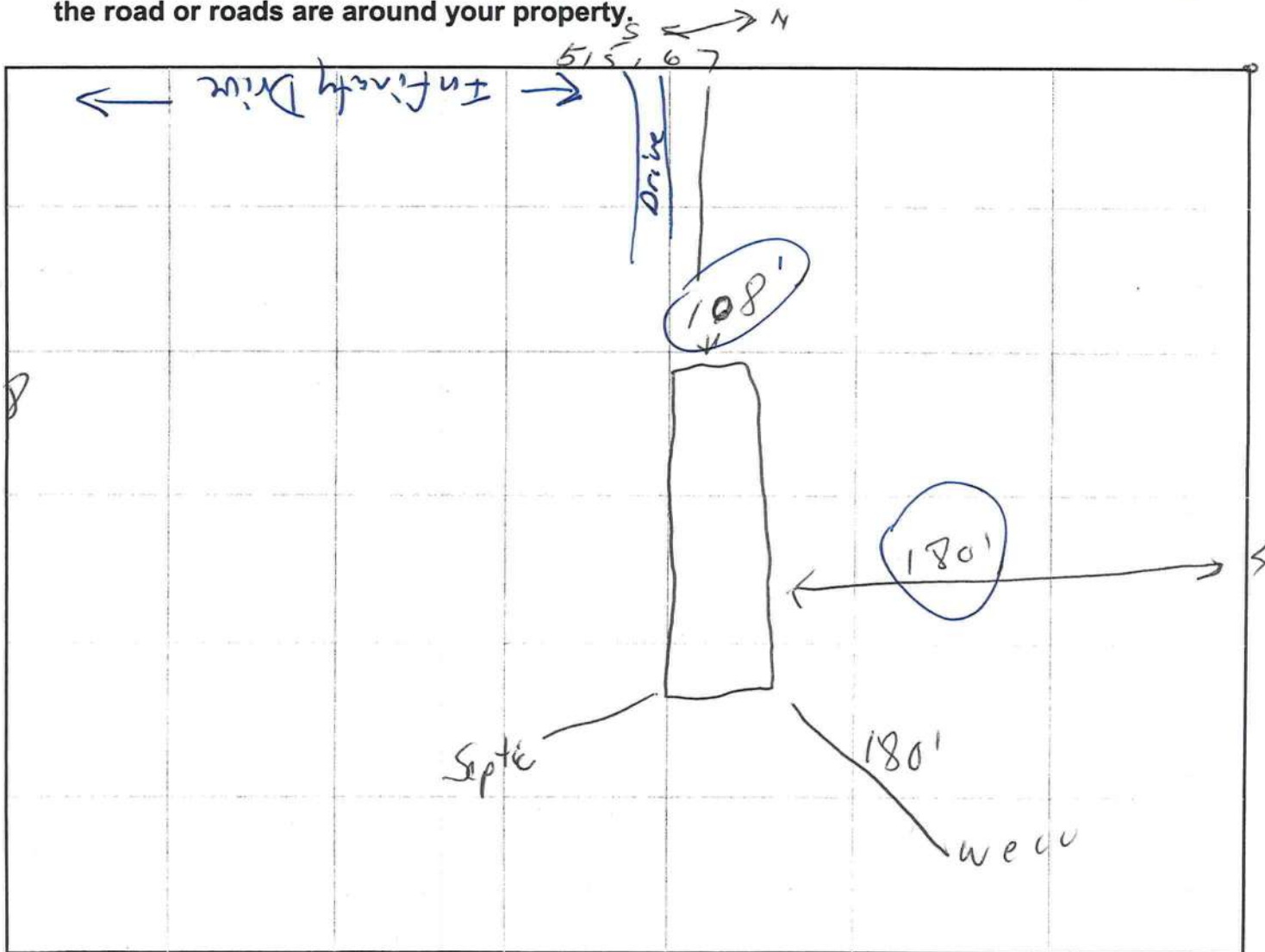
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature [Signature] Date 12-14-09

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the road or roads are around your property.





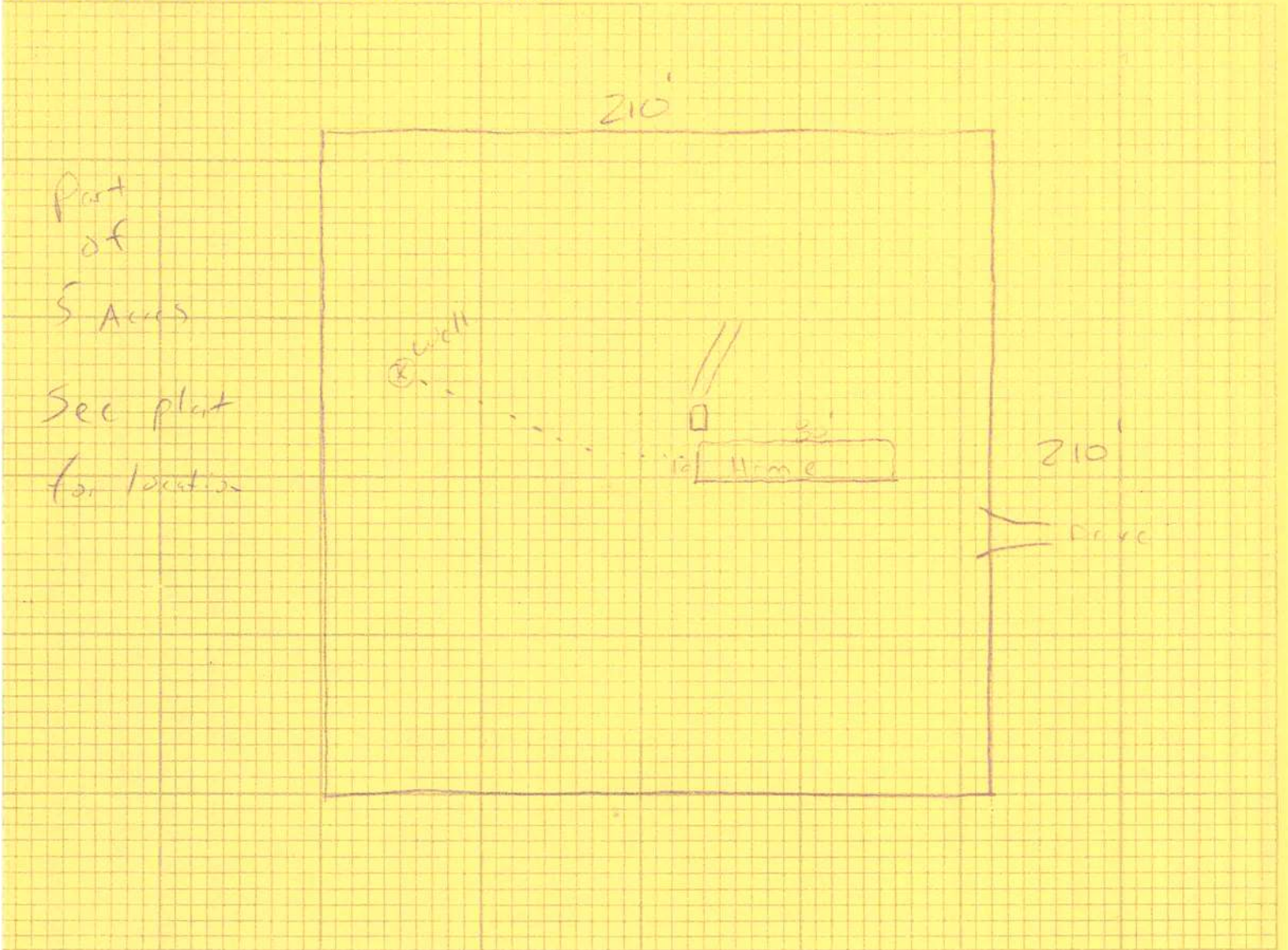
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-1205-MD

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Sidney S. Putney Signature _____ Title Owner

Plan Approved Not Approved _____ Date 12-15-04

By [Signature] _____ Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

ACCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R03707-030		19,675	0	19,675	003

R

0023575 01 FP 0.352 **PRSR T7 0 0810 32024-12

PUTNEL SIDNEY S JR & RUBY V
RT 14 BX 817
LAKE CITY FL 32024

24-5S-16 9900/0200 5.05 Acres
COMM NE COR OF SW1/4, RUN S
515.67 FT FOR POB, CONT S
473.80 FT, W 463.0 FT, N 476.2
FT, E 462.99 FT TO POB.
(AKA TRACT 11-B GREAT SOUTH)

AD VALOREM TAXES

TAXING AUTHORITY	MILLAGE RATE (DOLLARS PER \$1,000 OF TAXABLE VALUE)	TAXES LEVIED
C001 BOARD OF COUNTY COMMISSIONERS	3.7260	171.68
S002 COLUMBIA COUNTY SCHOOL BOARD		
DISCRETIONARY	.7600	14.95
LOCAL	5.5320	108.84
CAPITAL OUTLAY	2.0000	39.35
W SR SUWANNEE RIVER WATER MGT DIST	.4914	9.67
HLSH SHANDS AT LAKE SHORE	1.5000	29.51
IIDA INDUSTRIAL DEVELOPEMENT AUTH	.1380	2.72

*Replacing w/H
Storm Damage*

TOTAL MILLAGE 19.1474 AD VALOREM TAXES \$376.72

NON-AD VALOREM ASSESSMENTS

LEVYING AUTHORITY	RATE	AMOUNT
FFIR FIRE ASSESSMENTS		68.00
GGAR SOLID WASTE - ANNUAL		147.00

Already Paying Assessments

NON-AD VALOREM ASSESSMENTS \$215.00

COMBINED TAXES AND ASSESSMENTS \$591.72 PAY ONLY ONE AMOUNT See reverse side for important information.

IF PAID BY PLEASE PAY	Nov 30	Dec 31	Jan 31	Feb 28	Mar 31
	568.05	573.97	579.89	585.80	591.72

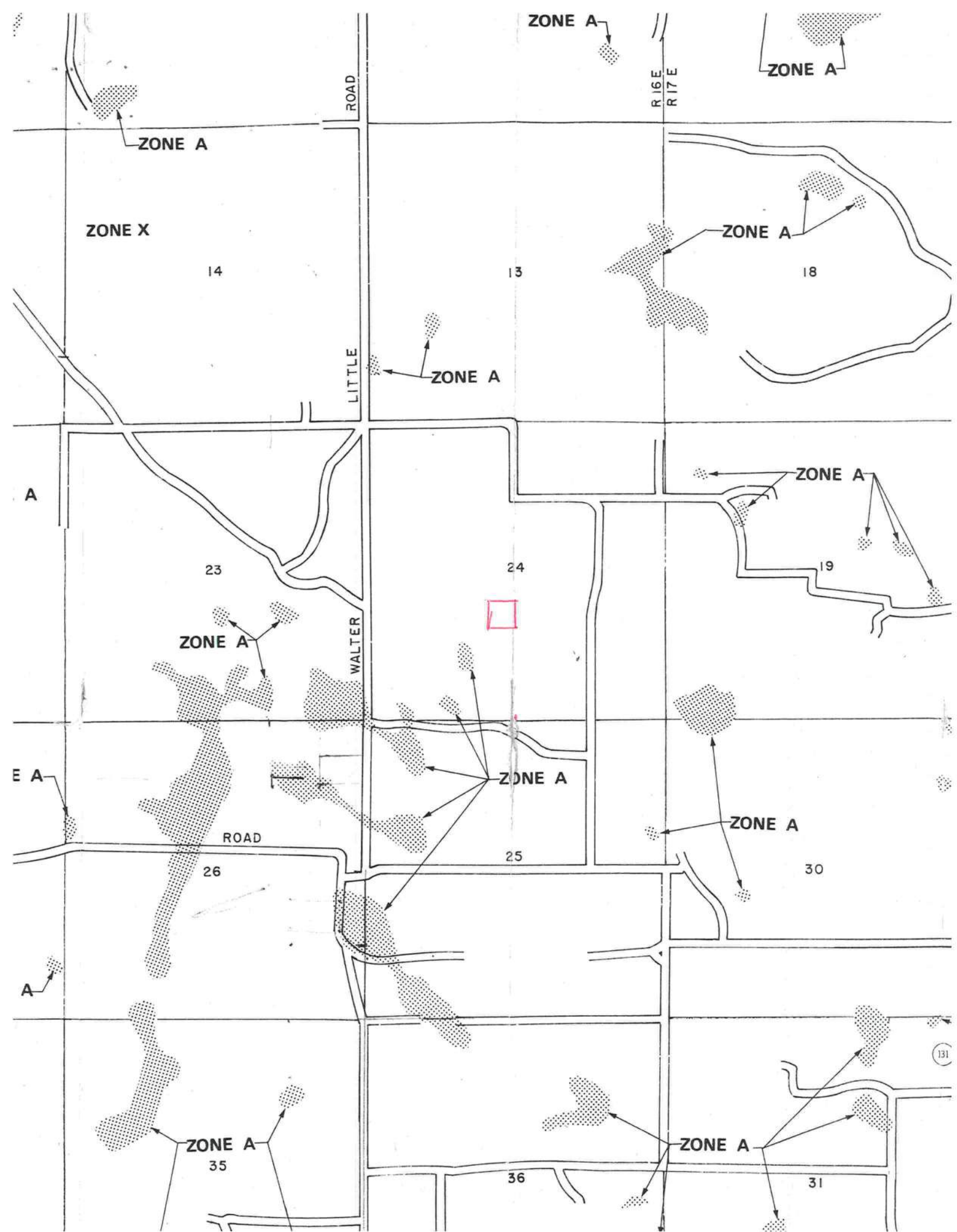
RETAIN THIS PORTION FOR YOUR RECORDS

IF PAID BY

ACCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
R03707-030		19,675	0	19,675	003

FP0023575 R
PUTNEL SIDNEY S JR & RUBY V
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LAKE CITY FL 32024

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FT, E 462.99 FT TO POB.
(AKA TRACT 11-B GREAT SOUTH)



DEPARTMENT OF
CODE ENFORCEMENT
COLUMBIA COUNTY, FLORIDA

Emergency

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12/21/04 BY JW

IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____

OWNERS NAME _____ PHONE _____ CELL _____

911 ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME _____

See Attached Sheet

CONTRACTOR _____ PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE _____ YEAR _____ SIZE _____ X _____

COLOR _____ SERIAL No. _____

WIND ZONE _____ SMOKE DETECTOR Yes

INTERIOR:
FLOORS

DOORS

WALLS

CABINETS

ELECTRICAL (FIXTURES/OUTLETS)

EXTERIOR:
WALLS / SIDING

WINDOWS

DOORS

STATUS:
APPROVED WITH CONDITIONS: None

NOT APPROVED _____ NEED REINSPECTION _____

INSPECTOR SIGNATURE Billy Dula NUMBER 307

