

DATE 07/28/2017

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000035623

APPLICANT JAY DAVIS PHONE 386.961.1482
 ADDRESS POB 1508 LAKE CITY FL 32056
 OWNER JAY DAVIS PHONE 386.961.1482
 ADDRESS 345 SE BEADIE DR LAKE CITY FL 32025
 CONTRACTOR ROBERT SHEPPARD PHONE 386.623.2203

LOCATION OF PROPERTY E. BAYA TO COUNTRY CLUB TR TO BEADIE TR AND IT'S 3RD ON R.

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 RSE-MH-2 MAX. HEIGHT

Minimum Set Back Requirements: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE All DEVELOPMENT PERMIT NO. 17-012

PARCEL ID 09-4S-17-08301-166 SUBDIVISION HIGH HAMMOCK

LOT 16 BLOCK C PHASE UNH TOTAL ACRES 1.23

111025386
 Culvert Permit No. Culvert Waiver Contractor's License Number Jay Davis Applicant/Owner/Contractor

EXISTING 17-0388-1 BMS TM N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident Time STUP No.

COMMENTS: NEED ELEVATION CERTIFICATE INCLUDING MACHINERLY BEFORE POWER IS RELEASED.

Check # or Cash 4028

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 (Intel) 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 MH 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 CRT. FEE \$ 50.00 HRF FEE \$ 45.84 WASTE FEE \$ 48.27

PLAN REVIEW FEE \$ PP & FLOOD ZONE FEE \$ 75.00 CULVERT FEE \$ TOTAL FEE 519.11

INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

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. NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

"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 RECEIVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECEIVED AN APPROVED INSPECTION WITHIN 180 DAYS OF THE PREVIOUS INSPECTION.

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

1' ft rise letter OK 4028

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official [Signature] Building Official JM 6/12/17

AP# 1706-26 Date Received 6-8-17 By UH Permit # 35623

Flood Zone AH Development Permit 17-012 Zoning RSE/AM-2 Land Use Plan Map Category R6D

Comments Must have Elevation Cert. & 1' rise Cert
need Elevation Cert including Machinery before Power is released.

FEMA Map# 0311C Elevation 103.5' Finished Floor 104.5' River NA In Floodway NA

Recorded Deed or Property Appraiser PO Site Plan EH # 17-0388-E Well letter OR

Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid

DOT Approval Parent Parcel # _____ STUP-MH _____ 911 App See Attached Sheet

Ellisville Water Sys Assessment owed Out County In County Sub VF Form

Property ID # 09-45-17 08301-166 Subdivision High Hammock Lot# 16 BLK 1

- New Mobile Home _____ Used Mobile Home _____ MH Size 28x36 Year 2004
- Applicant JAY DAVIS Phone # 961-1482
- Address PO Box 1508 Lake City FL 32056
- Name of Property Owner JAY DAVIS Phone# 961-1482
- 911 Address 345 SE Beadie Dr Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home JAY DAVIS Phone # _____
- Address PO Box 1508

- Relationship to Property Owner owner
- Current Number of Dwellings on Property 0
- Lot Size 130 x 419 Total Acreage 1.23
- 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 _____
- Driving Directions to the Property BAYA (R) Old County Club
(R) Beadie 3rd on (R)

- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL, 32025
- License Number IH1025382 Installation Decal # 43707

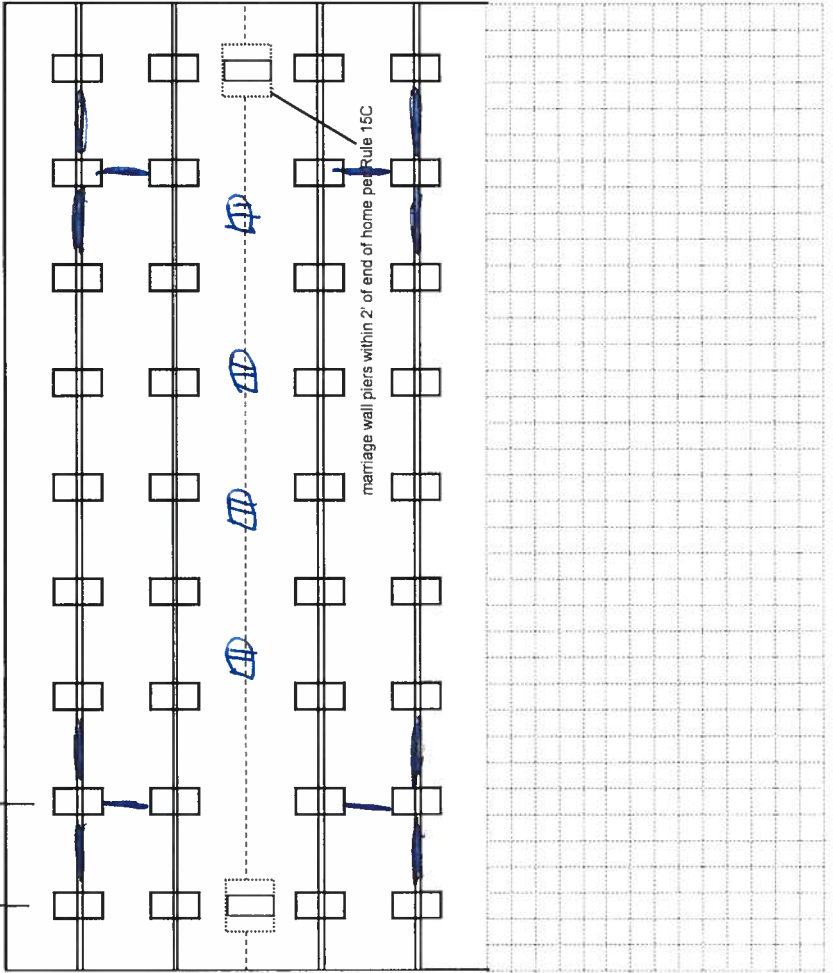
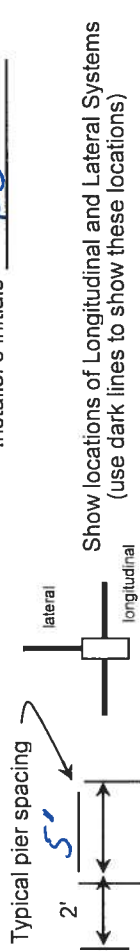
Spoke to Jay on 6-8-17

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

Installer: Robert Sheppard License # IL1025386
 Address of home being installed: 2455 E Beaudette Dr
 Manufacturer: Skyline Length x width: 28x36

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: RS



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 # 43707

Triple/Quad Serial # N 811641 A 4 B

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

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

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

PIER PAD SIZES

I-beam pier pad size 17x25
 Perimeter pier pad size 16x16
 Other pier pad sizes (required by the mfg.) 17x25

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 _____

ANCHORS

FRAME TIES _____

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

Number _____

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Oliver 1101K

Mobile Home Permit Worksheet

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 280 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.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Sheppard Installer's initials RS
 Date Tested 5-31-17

- 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. 27
- Plumbing: Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28
- Other: Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Application Number: _____ Date: _____

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 1995 Length: 5" Spacing: 16"
 Walls: Type Fastener: Scras Length: 4" Spacing: 16"
 Roof: Type Fastener: 1995 Length: 6" Spacing: 16"
 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 RS

Type gasket Foam Installed: _____
 Pg. 22 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 _____ 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 Robert Sheppard Date 5-31-17

1706-26

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

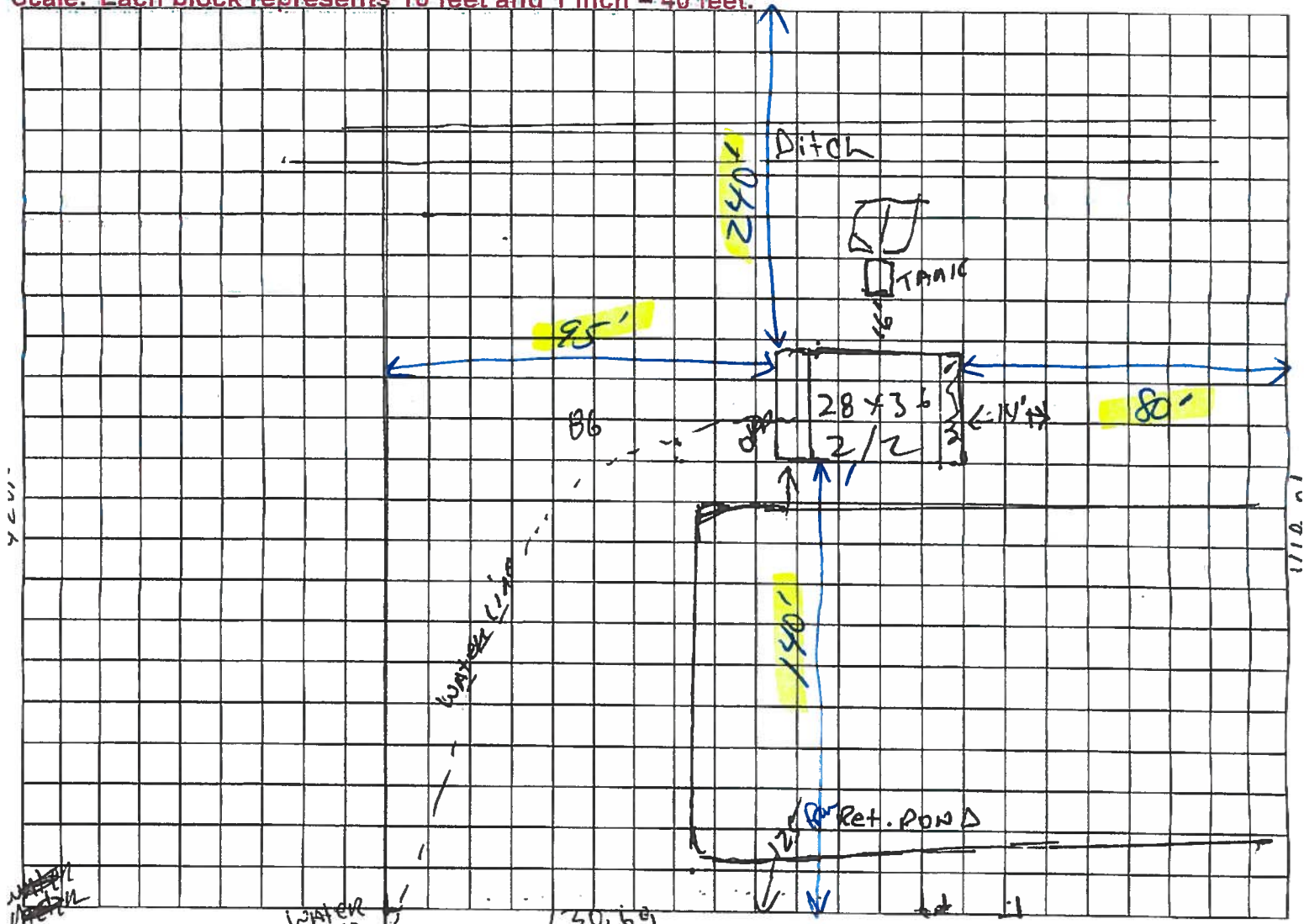
Permit Application Number _____

Site Plan

----- PART II - SITEPLAN -----

128.9

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



Notes: _____

Site Plan submitted by: Jerry Doe

Plan Approved _____ Not Approved _____ Date 5

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6-9-17 BY UH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME JAY DAVIS PHONE 1706-26 CELL 961-1482

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Hwy 100 (R) Rice Creek (L) Robert Sheppard yard 2nd MH on right

MOBILE HOME INSTALLER _____ PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE King YEAR 2004 SIZE 26 x 36 COLOR yellow

SERIAL No. NB11641 A13

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

- P SMOKE DETECTOR () OPERATIONAL () MISSING
- P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
- P DOORS () OPERABLE () DAMAGED
- P WALLS () SOLID () STRUCTURALLY UNSOUND
- P WINDOWS () OPERABLE () INOPERABLE
- P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
- P CEILING () SOLID () HOLES () LEAKS APPARENT
- P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

- P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
- P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
- P ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Cr ID NUMBER 306 DATE 6-9-17

Legend

Parcels

County Districts

Official Zoning Atlas

- others
- A-1
- A-2
- A-3
- CG
- CHI
- CI
- CN
- CSV
- ESA-2
- I
- ILW
- MUD-1
- PRD
- PRRD
- RMF-1
- RMF-2
- RO
- RR
- RSF-1
- RSF-2
- RSF-3
- RSF/MH-1
- RSF/MH-2
- RSF/MH-3
- DEFAULT

Flood Zones

- 0.2 PCT ANNUAL CHANCE
- A
- AE
- AH

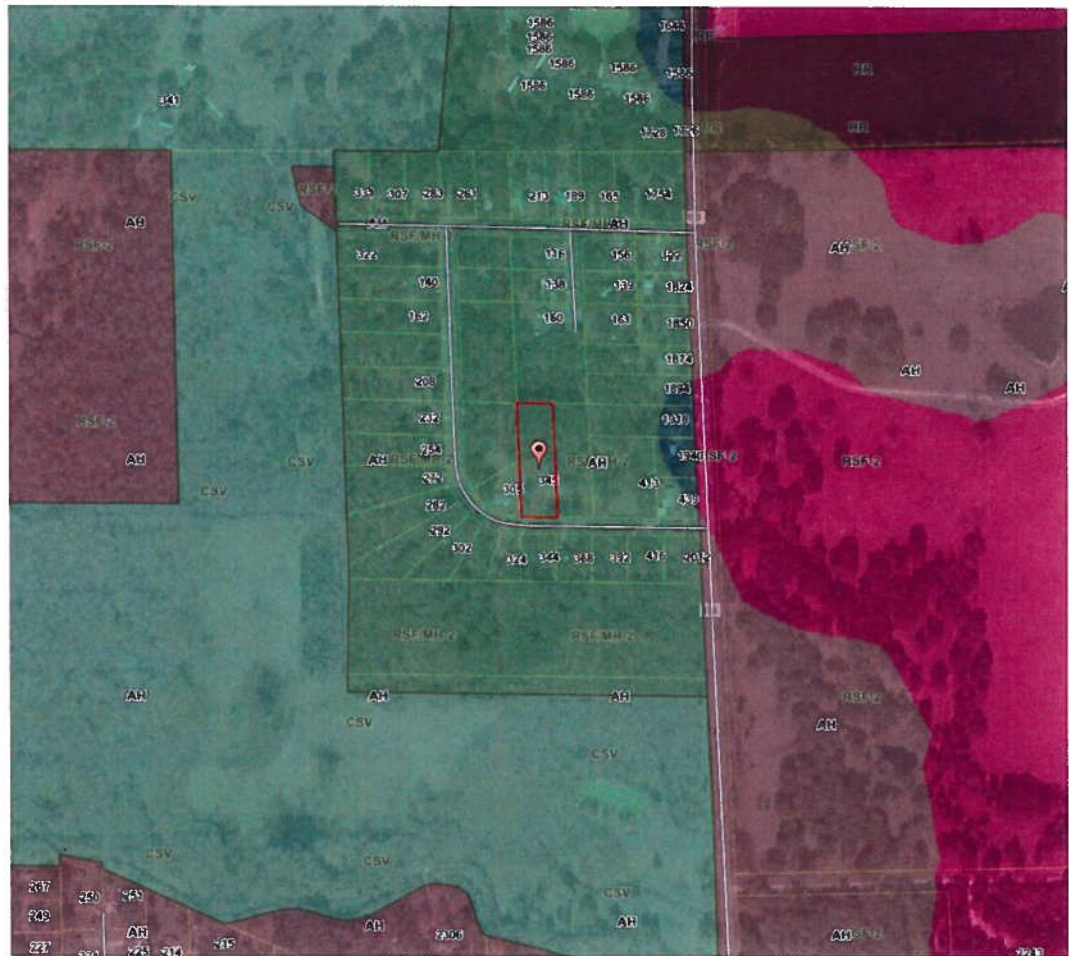
House Number Labels

Roads

- Private
- Dirt
- Other
- Paved
- Main
- Interstates

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Jun 08 2017 08:41:32 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 09-4S-17-08301-166

Owner: DAVIS JAY S

Subdivision:

Lot:

Acres: 1.23549616

Deed Acres: 1.24 Ac

District: 5 Tim Murphy (386)-758-1005 or (386)-961-1330

Future Land Uses: Residential - Low

Flood Zones: AH

Official Zoning Atlas: RSF/MH-2

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FLA makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.



MAP SCALE 1" = 500'



NFIP

PANEL 0311C

FIRM

FLOOD INSURANCE RATE MAP
COLUMBIA COUNTY,
FLORIDA
AND INCORPORATED AREAS

PANEL 311 OF 552
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
COLUMBIA COUNTY	120070	0311	C
LAKE CITY, CITY OF	120426	0311	C

Notice to User: The Map Number shown below should be used when placing map orders. The Community Number shown below should be used on insurance applications for the subject community.



MAP NUMBER
12023C0311C

EFFECTIVE DATE
FEBRUARY 4, 2009

Federal Emergency Management Agency

NATIONAL FLOOD INSURANCE PROGRAM

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov



Columbia County Property Appraiser

updated: 6/6/2017

2016 Tax Year

Tax Collector Tax Estimator Property Card

Parcel List Generator

Parcel: 09-4S-17-08301-166

<< Next Lower Parcel Next Higher Parcel >>

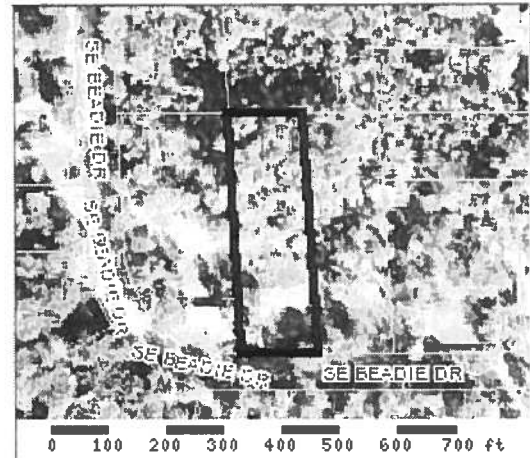
2016 TRIM (pdf)

Interactive GIS Map

Print

Search Result: 1 of 1

Owner's Name	DAVIS JAY S		
Mailing Address	P O BOX 1508 LAKE CITY, FL 32056		
Site Address	345 SE BEADIE DR		
Use Desc. (code)	VACANT (000000)		
Tax District	2 (County)	Neighborhood	9417
Land Area	1.230 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 16 BLK C HIGH HAMMOCK. WD 1106-1939, QC 1239-2332, WD 1312-2534,			



Mkt Land Value	cnt: (0)	\$3,402.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$3,402.00
Just Value		\$3,402.00
Class Value		\$0.00
Assessed Value		\$3,402.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$3,402 Other: \$3,402 Schl: \$3,402

Mkt Land Value	cnt: (0)	\$3,402.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$3,402.00
Just Value		\$3,402.00
Class Value		\$0.00
Assessed Value		\$3,402.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$3,402 Other: \$3,402 Schl: \$3,402

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Similar Sales w ithin 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
4/6/2016	1312/2534	WD	I	U	37	\$2,000.00
8/6/2012	1239/2332	QC	I	U	11	\$4,300.00
12/1/2006	1106/1939	WD	V	U	03	\$12,000.00

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1706-26 CONTRACTOR _____ PHONE _____

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.

<p>ELECTRICAL</p>	<p>Print Name <u>JAY DAVIS</u> License #: <u>owner</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature <u>[Signature]</u> Phone #: <u>961-1482</u></p>
<p>MECHANICAL/ A/C</p>	<p>Print Name <u>JAY DAVIS</u> License #: <u>owner</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature <u>[Signature]</u> Phone #: <u>961-1482</u></p>

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.



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, Robert Sheppard, give this authority for the job address show below
Installer License Holder Name
 only, ZYSSE Bendie DR, 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)
JAY DAVIS	<i>Jay Davis</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" 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.

Robert Sheppard
 License Holders Signature (Notarized) JH1025386 5-7-17
 License Number Date

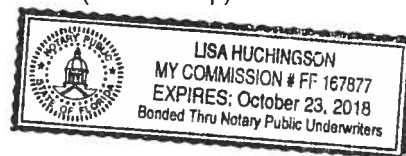
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 2 day of June, 2017.

Lisa Hutchingson
 NOTARY'S SIGNATURE

(Seal/Stamp)

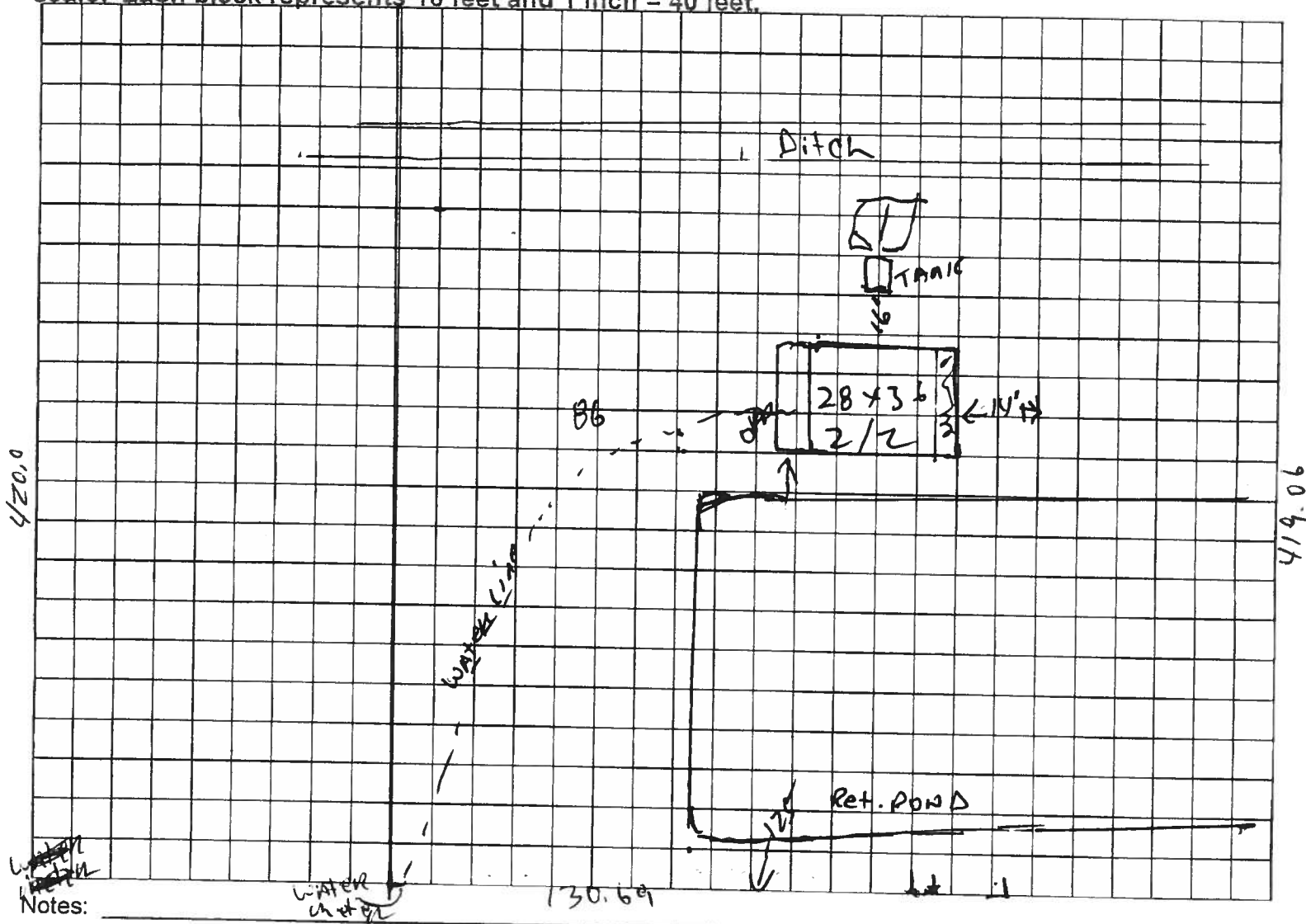


STATE OF FLORIDA
 DEPARTMENT OF HEALTH
 APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 17-0388E

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet. 128.9



Notes:

Site Plan submitted by: [Signature]
 Plan Approved [Signature] Not Approved _____
 By [Signature] Date 6/8/17
 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 17-0388E
 DATE PAID: 6/3/17
 FEE PAID: 600.00
 RECEIPT #: 1994207

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Jay S. Davis

AGENT: _____ TELEPHONE: 386 961-1482

MAILING ADDRESS: P O Box 1508 (CF) 32056

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: 16 BLOCK: C SUBDIVISION: High Hammock PLATTED: 8/12/57

PROPERTY ID #: 094517 R08301-166 ZONING: Res. I/M OR EQUIVALENT: Y N

PROPERTY SIZE: 1.23 AC ACRES WATER SUPPLY: PRIVATE PUBLIC <=2000GPD >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? Y N DISTANCE TO SEWER: 1000 FT

PROPERTY ADDRESS: 345 SE Beadie Dr

DIRECTIONS TO PROPERTY: Baya @ Old Country Club @ Beadie Dr
3 on @ 345 Beadie

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	M.H.	2	864	ORIGINAL ATTACHED
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Jay Davis DATE: 5-20-17

ONE FOOT RISE CERTIFICATION

OWNER: Jay Davis

DESCRIPTION: Lot 16, Block C of High Hammock Subdivision, Columbia
County, Florida PIN # 09-04S-17-08301-166

BASE FLOOD ELEVATION: 103.5'

COMMUNITY PANEL NUMBER: 12023C0311C dated 02/04/2009

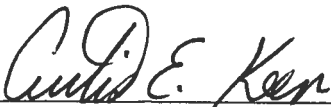
PROJECT: 28' x 36' MANUFACTURED HOME PLACED ON AN EXISTING GROUND
ELEVATION OF APROXIMATELY 99.6 FEET.

FLOOD AREA (isolated) AT BASE FLOOD ELEVATION= 118 ACRES

FILL OF FLOODPLAIN: APPROXIMATELY 146 CUBIC YARDS

LOWEST GROUND ELEVATION AT BUILDING = 99.6'

I hereby certify that the placement of the 1,008 s.f. manufactured home with skirting will increase the 100 year floodplain in the 345 SE Beadie Drive area less than one foot at the project location. The lowest ground elevation at the manufactured home location is 99.6' per FEMA Elevation Certificate by Mark D. Duren and Associates, Inc..



Curtis E. Keen, PE #23836
EB #3761

Date: 07/28/2017

Copy: Jay Davis

ONE FOOT RISE CERTIFICATION

OWNER: Jay Davis

DESCRIPTION: Lot 16, Block C of High Hammock Subdivision, Columbia
County, Florida PIN # 09-04S-17-08301-166

BASE FLOOD ELEVATION: 103.5'

COMMUNITY PANEL NUMBER: 12023C0311C dated 02/04/2009

PROJECT: 28' x 36' MANUFACTURED HOME PLACED ON AN EXISTING GROUND
ELEVATION OF APPROXIMATELY 99.6 FEET.

FLOOD AREA (isolated) AT BASE FLOOD ELEVATION= 118 ACRES


FILL OF FLOODPLAIN: APPROXIMATELY 146 CUBIC YARDS

LOWEST GROUND ELEVATION AT BUILDING = 99.6'

This project will be located in the flood area of 345 SE Beadie Drive and not a floodway. No step
backwater calculations are required. The calculations are based on the amount of floodplain volume
removed if the manufactured home is constructed with skirting beneath.

% FLOODPLAIN AREA REMOVED = $1,008 \text{ s.f.} / 43,560 \text{ s.f.} = 0.0002 \%$
118 acres

FLOODPLAIN LEVEL INCREASE = $1,008 \text{ s.f.} \times 3.90 \text{ feet} / 118 \text{ ac.} \times 43,560 \text{ s.f.} = 0.00077 \text{ foot}$



Curtis E. Keen, PE #23836
EB #3761

Date: 07/28/2017

Copy: Jay Davis

**Columbia County Building Department
Flood Development Permit**

**Development Permit
F 023- 17-012**

DATE 07/28/2017 BUILDING PERMIT NUMBER 000035623
APPLICANT JAY DAVIS PHONE 386.961.1482
ADDRESS POB 1508 LAKE CITY FL 32056
OWNER JAY DAVIS PHONE 386.961.1482
ADDRESS 345 SE BEADIE DR LAKE CITY FL 32025
CONTRACTOR ROBERT SHEPPARD PHONE 386.623.2203
ADDRESS 6355 SE CR 245 LAKE CITY FL 32025
SUBDIVISION HIGH HAMMOCK Lot 16 Block C Unit Phase
TYPE OF DEVELOPMENT MH/UTILITY PARCEL ID NO. 09-4S-17-08301-166

FLOOD ZONE AH BY BMS 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0311-C
FIRM 100 YEAR ELEVATION 103.5' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 104.5'
IN THE REGULATORY FLOODWAY YES or NO RIVER
SURVEYOR / ENGINEER NAME CURTIS E. KEEN LICENSE NUMBER FE 23836

ONE FOOT RISE CERTIFICATION INCLUDED
 ZERO RISE CERTIFICATION INCLUDED
 SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

INSPECTED DATE _____ BY _____

COMMENTS _____

135 NE Hernando Ave., Suite B-21
Lake City, Florida 32055
Phone: 386-758-1008
Fax: 386-758-2160



PERMIT EXPIRES ONE YEAR FROM THE DATE OF ISSUANCE