

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

PRE MH - 50.00
11.18.19

For Office Use Only (Revised 7-1-15) Zoning Official SW Building Official SW
 AP# 44044 Date Received 11/15 By JW Permit # 39215
 Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
 Comments See Computer Note
 FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
 Recorded Deed or Property Appraiser PO Site Plan EH # 19-0820 Well letter OR
 Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
 DOT Approval Parent Parcel # _____ STUP-MH 911 App
 Ellisville Water Sys Assessment _____ Out County In County Sub VF Form

Property ID # 04-45-110-02772-058 Subdivision Shady Oaks MHC Lot# 2

- New Mobile Home _____ Used Mobile Home MH Size 14x52 Year 1980
- Applicant Jessie Shepard Phone # 386-963-4298
- Address 3360 150th Place Lake City FL 32024
- Name of Property Owner Shady Oaks MHC Phone# 386-963-4298
- 911 Address 213 Joyful Loop Lake City FL 32024 lot 2
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy

• Name of Owner of Mobile Home Shady Oaks MHC LLC Phone # 386-963-4298
 Address 1619 SW 19th St. Miami FL 33145

• Relationship to Property Owner Owner / Self
 • Current Number of Dwellings on Property 13
 • Lot Size _____ Total Acreage 2.16 AC

• 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 Yes
 • Driving Directions to the Property Head N on NE Hernandez to NE Justice St @
onto NE Madison St @ N Marion Ave @ onto US 90 W/W Duval St @ CR 252B
@ SW Deputy Davis Lane @ Pinemount @ SW Joyful Ct

• Name of Licensed Dealer/Installer William R Price Phone # 207-448-0953
 • Installers Address 3360 150th Place Lake City FL 32024
 • License Number LF-1041936 Installation Decal # 59463

JW sent email 11.15.19

SW spoke w/ JESSIE 12.3.19 - RE PRE MH

Mobile Home Permit Worksheet

Application Number: _____

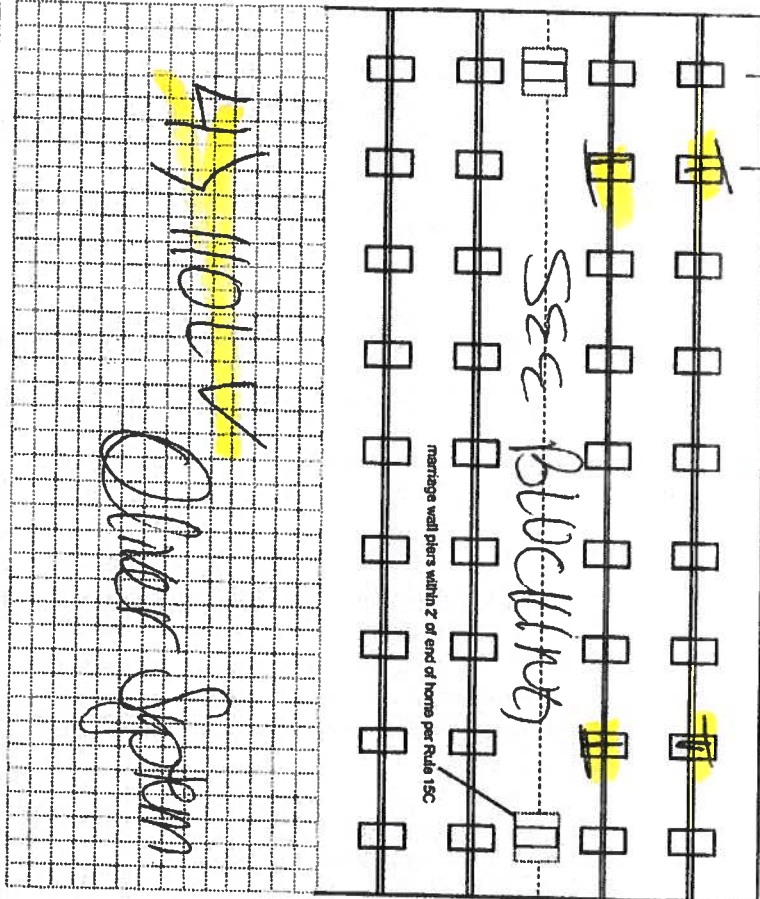
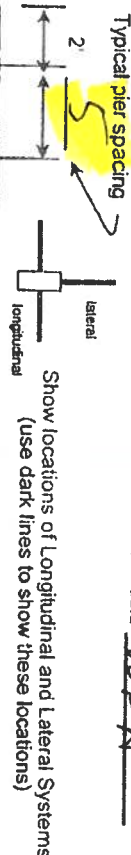
Date: _____

Installer: William R. Price License # 14-1041936
 Address of home being installed: 215 Joffe Loop W #2 Snodgrass
Lawrence

Manufacturer: Sumner Length x width: 44x52

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: WRP



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 # 59443
 Triple/Quad Serial # H1165115

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (sq in)	18 1/2" x 18	20" x 20"	22" x 22"	24" x 24"	26" x 26"
1000 psf	3"	4"	5"	6"	7"	8"
1500 psf	4" 6"	6"	7"	8"	9"	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

1-beam pier pad size: 17x35
 Perimeter pier pad size: hex 16
 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: large Pier pad size: 23x31

ANCHORS

4 ft 11 5 ft 11

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 _____

OTHER TIES

Sidewall _____
 Longitudinal _____
 Marriage wall _____
 Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

x 1000 x 1000 x 1000

POCKET PENETROMETER TESTING METHOD

1. Test the penetrometer 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 1000 x 1000 x 1000

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 requires anchors with 4000 lb pulling capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

William R. Price

Date Tested

11/5/19

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. _____

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

Site Preparation

Debris and organic material removed _____
Water drainage: Natural _____ Swale _____ Pad _____ Other 90%

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 Pg. _____

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 _____ 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

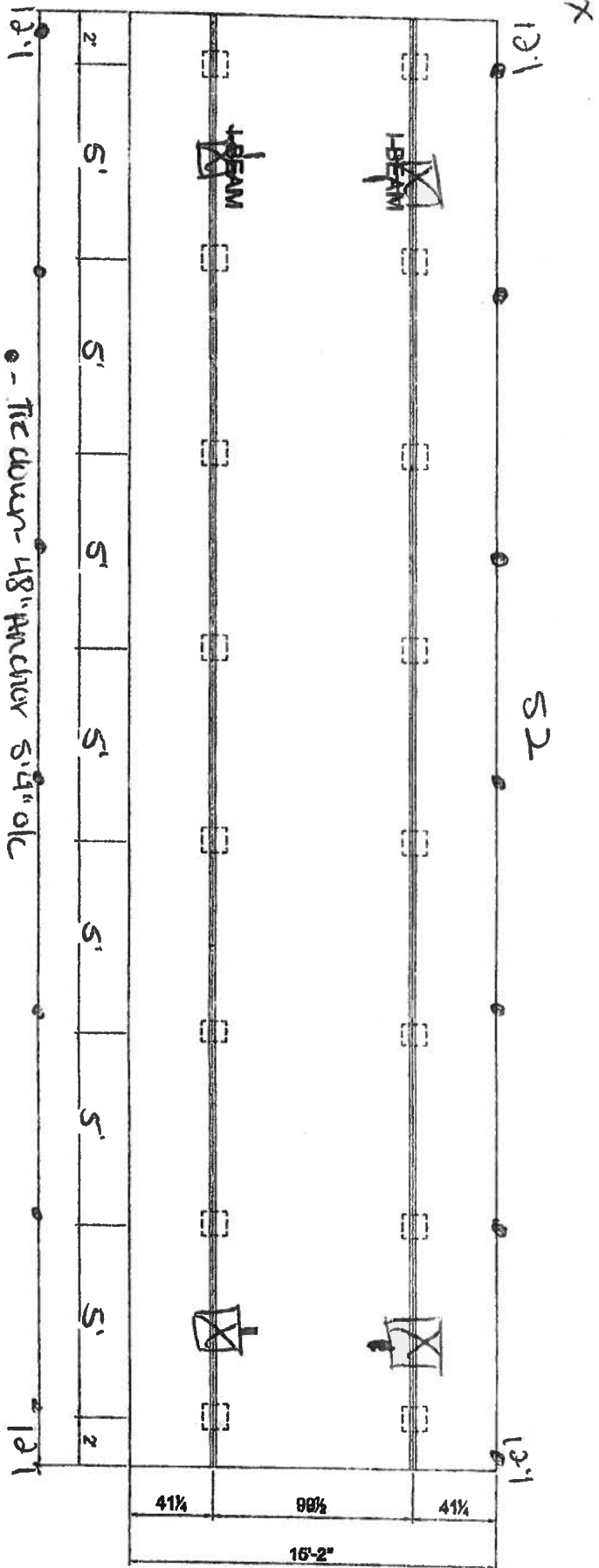
Installer Signature _____

Date _____

11/5/19

DRIVING WALKS MANUFACTURE
 215 JEFFERSON LOOP LOT #2
 LAKE CITY FL 32034
 1980 SUMNER HS 14X52

14



□ BLOCKING
 - 17K25 HOS w/ 8x8x1/2
 S.O.C

ITI - OMER SYSTEM
 * All perimeter doors
 heavy

1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED
 SIDEWALLS AND EXTERIOR WALL OPENINGS 48"
 OR GREATER, WILL REQUIRE BLOCKING ON EACH SIDE.

HOME

Record Search Search Results Parcel Details GIS Map

Columbia County Property Appraiser
 Jeff Hampton

2019 Preliminary Certified Values
 updated 8/14/2019

Retrieve Tax Record 2019 TRIM (pdf) Property Card Parcel List Generator Show on GIS Map Print

Parcel: << 04-4S-16-02772-058 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 2 >>

Owner	SHADY OAKS MHC, LLC 1619 SW 19TH ST MIAMI, FL 33145		
Site	119 JOYFUL LOOP, LAKE CITY		
Description*	COMM NW COR OF E 446.41 FT OF W 1339.22 FT OF SE1/4 OF NW1/4 AS LIES N OF CR-252, RUN S ALONG W LINE 313.10 FT FOR POB, RUN E 223.96 FT, SE 273.37 FT TO N R/W CR-252, SW ALONG R/W 317.93 FT, N 421.32 FT TO POB. 460-377, 727-239, 784-1552, 802-1893, 810-2 .more>>		
Area	2.16 AC	S/T/R	04-4S-16
Use Code**	MH PARK (002802)	Tax District	2
*The Description above is not to be used as the Legal Description for this parcel in any legal transaction. **The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information			

Property & Assessment Values

2018 Certified Values		2019 Preliminary Certified	
Mkt Land (1)	\$17,133	Mkt Land (1)	\$32,400
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (13)	\$75,704	Building (13)	\$83,963
XFOB (1)	\$55,900	XFOB (1)	\$55,900
Just	\$148,737	Just	\$172,263
Class	\$0	Class	\$0
Appraised	\$148,737	Appraised	\$172,263
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$148,737	Assessed	\$172,263
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$148,737 city:\$148,737 other:\$148,737 school:\$148,737	Total Taxable	county:\$172,263 city:\$172,263 other:\$172,263 school:\$172,263



Sales History

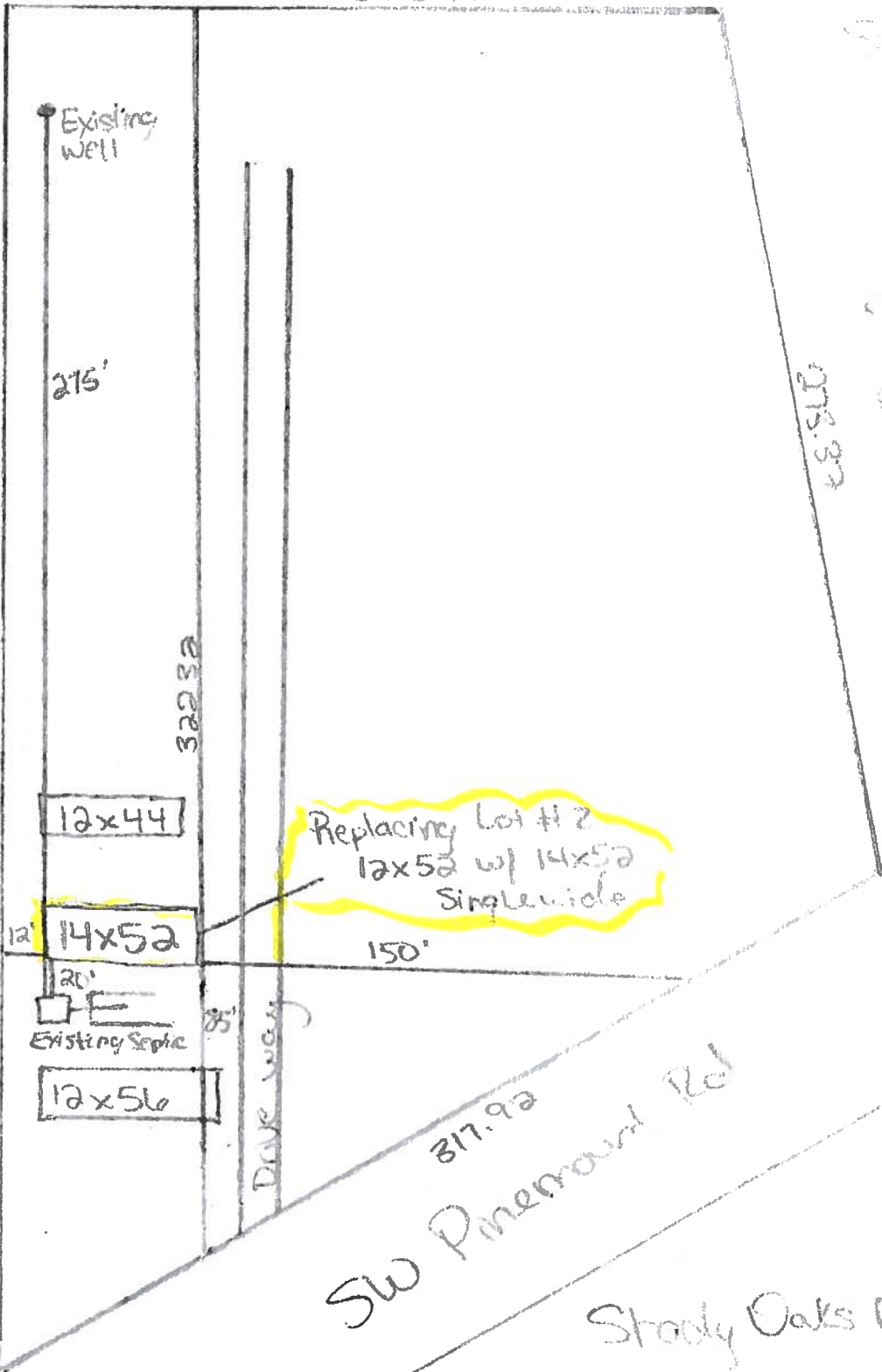
Show Similar Sales within 1/2 mile Fill out Sales Questionnaire

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
11/28/2018	\$307,000	1373/1156	WD	I	Q	01
11/26/2003	\$159,900	1000/2829	WD	I	Q	
5/31/2000	\$100,000	903/1140	WD	I	Q	
8/31/1995	\$95,000	810/0244	WD	I	U	12
12/1/1994	\$80,000	802/1893	WD	I	Q	
12/30/1993	\$82,000	784/1552	WD	I	U	06
12/30/1991	\$100,000	755/0583	WD	I	U	06
8/3/1990	\$85,000	727/0239	WD	I	U	06

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1968	672	720	\$6,690
Sketch	10	MOBILE HME (000800)	1972	672	672	\$6,573
Sketch	11	MOBILE HME (000800)	1972	672	736	\$6,729
Sketch	12	MOBILE HME (000800)	1971	672	736	\$6,729
Sketch	13	MOBILE HME (000800)	1962	672	736	\$6,603
Sketch	2	MOBILE HME (000800)	1974	552	588	\$5,333
Sketch	3	MOBILE HME (000800)	1969	528	528	\$5,019
Sketch	4	MOBILE HME (000800)	1968	672	720	\$6,565
Sketch	5	MOBILE HME (000800)	1969	672	672	\$6,450

223.76



Replacing Lot #2
12x52 w/ 14x52
Singlewide

SW Pinemound Rd

Steady Oaks MHIC, LLC
215 Sayful Loop
Lake City, TN

parcel # 04-45-16-02788-058

Detail by Entity Name

Florida Limited Liability Company

SHADY OAKS MHC, L.L.C.

Filing Information

Document Number L18000257955
FE/EIN Number 82-2524166
Date Filed 11/06/2018
State FL
Status ACTIVE

Principal Address

1619 SW 19TH ST
 MIAMI, FL 33145

Mailing Address

1619 SW 19TH ST
 MIAMI, FL 33145

Registered Agent Name & Address

BARRIENTOS, PABLO
 1619 SW 19TH ST
 MIAMI, FL 33145

Authorized Person(s) Detail

Name & Address

Title MGRM

BARRIENTOS, PABLO
 1619 SW 19TH ST
 MIAMI, FL 33145

Title MGRM

BARRIENTOS, RENE
 1619 SW 19TH ST
 MIAMI, FL 33145

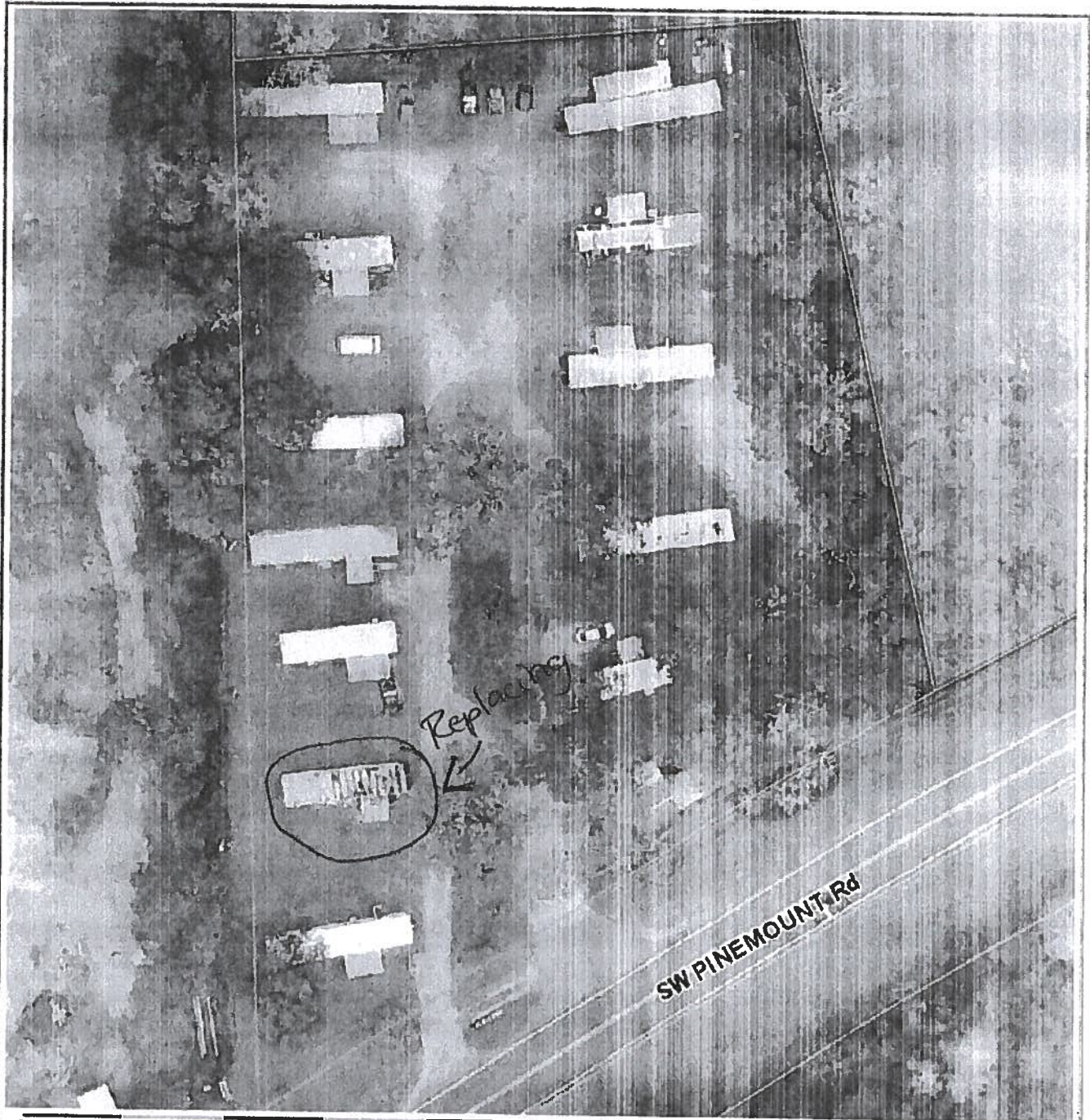
Annual Reports

Report Year	Filed Date
2019	02/18/2019

Document Images

[02/18/2019 -- ANNUAL REPORT](#) [View image in PDF format](#)

[11/06/2018 -- Florida Limited Liability](#) [View image in PDF format](#)



Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 04-4S-16-02772-005 | MOBILE HOM (000200) | 4.42 AC
 THE E 446.41 FT OF W 1339.22 FT OF SE 1/4 OF NW 1/4 LYING N OF CR-252, EX RD RW & EX 2 AC IN SW COR. 747-849, 877-874 WD 1273-88, QC 1350-1101,

NOTES:

Owner: ROBERTS MICHAEL JR
 320 SW MABRY GLN
 LAKE CITY, FL 32024
Site: 1322 PINEMOUNT RD, LAKE CITY

2020 Working Values			
Mkt Lnd	\$8,859	Appraised	\$25,939
Ag Lnd	\$0	Assessed	\$25,939
Bldg	\$15,880	Exempt	\$0
XFOB	\$1,200		
Just	\$25,939	Total	county: \$25,021
		Taxable	city: \$25,021
			other: \$25,021
			school: \$25,939

Sales Info
 12/20/2017 \$100 V (U)
 3/25/2014 \$100 I (U)
 6/18/1991 \$55,500 I (Q)



Columbia County, FL

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

GrizzlyLogic.com

215 SW Joyful Ln

SHADY OAKS MHC, LLC



Pablo

LIMITED POWER OF ATTORNEY

I Pablo Barrientos DO HERBY AUTHORIZE
ODA PRICE
JESSIE SHEPARD

**TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.**



SIGNATURE

10/16/2019

DATE

SWORN TO AND SUBSCRIBED BEFOR ME ON THIS 16th DAY OF October 20 19

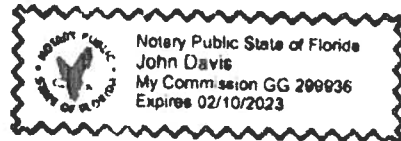


NOTARY PUBLIC

(STAMP)

John Davis

NOTARY PUBLIC PRINT



MY COMMISSION EXPIRES: 02/10/2023

COMMISSION NO: GG 295536

PERSONALLY KNOWN: X

PRODUCED ID. (TYPE): FDLR 6536610 105-057-0

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

44044

CONTRACTOR

William Price

PHONE

386.963.4298

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 59-6, 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>✓ 535</p>	<p>Print Name: <u>THOMAS S. THOMAS</u></p> <p>License #: <u>EC-0001121</u></p>	<p>Signature: <u>[Signature]</u></p> <p>Phone #: <u>386 757 5125</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>
<p>MECHANICAL</p> <p>✓ A/C</p>	<p>Print Name: <u>Window Units</u></p> <p>License #: <u>Window Unit</u></p>	<p>Signature: <u>Window Unit</u></p> <p>Phone #: <u>Window Unit</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>

§ 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.

Pablo
Shady Oaks



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

1. William R. Price give this authority for the job address show below
Installer License Holder Name
 215 only, 119 Joyful Loop Lake City FL, and I do certify that
Job Address Shady Oaks MHC

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)
<u>Oda Price</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
<u>Jessie Shepard</u>	<u>[Signature]</u>	<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

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.

William R. Price License Holders Signature (Notarized) 1H-104936 License Number 10/28/19 Date

NOTARY INFORMATION:
 STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is William R. Price personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 28th day of October, 2019.

[Signature]
 NOTARY'S SIGNATURE

(Seal/Stamp)



Identification Number H18511G	Year 1980	Make SUMM	Body HS	WT-L-BHP 52'	Vessel Regis. No.	Title Number 16909110
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Registered Owner:

Date of Issue **04/27/2012**

**JASON ALLEN GORDON
54334 HERON RD
CALLAHAN FL 32011-7811**

Lien Release

Interest in the described vehicle is hereby released

By _____

Title _____

Date _____

IMPORTANT INFORMATION

- When ownership of the vehicle described herein is transferred, the seller **MUST** complete in full the Transfer of Title by Seller section at the bottom of the certificate of title
- Upon sale of this vehicle, the seller must complete the notice of sale on the reverse side of this form.
- Remove your license plate from the vehicle.
- See the web address below for more information and the appropriate forms required for the purchaser to title and register the vehicle, mobile home or vessel
<http://www.hsmv.state.fl.us/html/titlinf.html>

Mail To:

**JASON ALLEN GORDON
54334 HERON RD
CALLAHAN FL 32011-7811**



CERTIFICATE OF TITLE

Identification Number H18511G	Year 1980	Make SUMM	Body HS	WT-L-BHP 52'	Vessel Regis. No.	Title Number 16909110
Prev. State FL	Color UNK	Primary Brand	Secondary Brand	No. of Brands	Use PRIVATE	Prev. Issue Date 06/28/2005
Odometer Status or Vessel Manufacturer or OH use				Hull Material	Prop.	Date of Issue 04/27/2012

Registered Owner

**JASON ALLEN GORDON
54334 HERON RD
CALLAHAN FL 32011-7811**

1st Lienholder

NONE

DIVISION OF MOTORIST SERVICES

TALLAHASSEE

FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Clayton B. Walden Control Number **106293610**

Clayton Boyd Walden
Director

Julie Jones

Julie L. Jones
Executive Director

TRANSFER OF TITLE BY SELLER (This section must be completed at the time of sale.)

Federal and/or state law require that the seller state the mileage, purchaser's name, selling price and date sold in connection with the transfer of ownership.

Seller here to complete or providing a false statement may result in fines and/or imprisonment.

This title is warranted to be free from any liens except as noted on the face of the certificate and the motor vehicle or vessel described is hereby transferred to:

Seller Must Enter Purchaser's Name:

Address: **54334 Heron Rd. Callahan FL 32011**

Seller Must Enter Selling Price:

Seller Must Enter Date Sold: **10-25-15**

I/We state that this 3 or 6 digit odometer now reads _____ and I hereby certify that to the best of my knowledge the odometer reading:

- 1. reflects ACTUAL MILEAGE.
- 2. is IN EXCESS OF ITS MECHANICAL LIMITS.
- 3. is NOT THE ACTUAL MILEAGE.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SELLER Must Sign Here: *Jason Allen Gordon*
Print Here: **JASON ALLEN GORDON**

CO-SELLER Must Sign Here: _____
Print Here: _____

Selling Dealer's License Number: _____

Tax No.:

Tax Collected:

Buyer's Name: _____

License Number: _____

PURCHASER Must Sign Here: _____

CO-PURCHASER Must Sign Here: _____

Print Name: _____

Print Name: _____

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE

STATE OF FLORIDA

LIEN SATISFACTION

VOID IF ALTERED

VOID IF ALTERED

Papir - 1100

*Garden
14x52*

*Columbia
Shady Creek*

License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE

Order #: 3766

Label #: 59463

Manufacturer:

(Check Size of Home)

Homeowner:

Year Model:

Single _____

Address:

Length & Width:

Double _____

City/State/Zip:

Type Longitudinal System:

Triple _____

Phone #:

Type Lateral Arm System:

HUD Label #:

Date Installed:

New Home: _____ Used Home: _____

Soil Bearing / PSF:

Installed Wind Zone:

Data Plate Wind Zone:

Torque Probe / in-lbs:

Permit #:

Note:

**STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL**

59463

LABEL #	DATE OF INSTALLATION
WILLIAM R PRICE	
NAME	
IH / 1041936 / 1	3766
LICENSE #	ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.



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

PERMIT NO. 19-0821
DATE PAID: 11/11/19
FEE PAID: 1200.00
RECEIPT #: 452921

APPLICATION FOR:
 New System
 Existing System
 Repair
 Abandonment
 Holding Tank
 Temporary
 Innovative

APPLICANT: Shady Oaks MHC LLC
 AGENT: Oda Price TELEPHONE: 306-963-4248
 MAILING ADDRESS: 3360 150th Pl Lake City FL 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: 2 BLOCK: _____ SUBDIVISION: Shady Oaks MHC PLATTED: /
 PROPERTY ID #: 04-4516-02712-058 ZONING: / I/M OR EQUIVALENT: Y N
 PROPERTY SIZE: 2.16 ACRES WATER SUPPLY: PRIVATE PUBLIC <=2000GPD >2000GPD
 IS SEWER AVAILABLE AS PER 381.0065, FS? Y N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 215 Joyful Loop Lake City FL 32024 Lot #2

DIRECTIONS TO PROPERTY: Head N on NE Hernando to NE Justice St (turn to NE Madison St) N. Madison Ave @ onto US 90 w/w Duval St @ CR 2523B @ SW Deputy J Davis Lane @ Pine mountain @ SW Joyful

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>Install SW</u>	<u>2</u>	<u>728</u>	
2	<u>Remove Existing</u>	<u>2</u>	<u>624</u>	
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Oda Price DATE: 11/16/19

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0820

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

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



Notes: _____

Site Plan submitted by: [Signature]
Plan Approved [Signature] Not Approved _____ Date 11/16/19
By [Signature] Columbin County Health Department Date 11/13/19

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

22396

19-0820
Scale
1" = 50'
N
↑

Site Plan
Cadastral
10/21/19

421.32

215'

322.52

213.32

12x44

Replacing Lot #2
12x52 w/ 14x52
Singlewide

12' 14x52

150'

20'
Existing Septic

12x56

DRIVE WAY

317.92
SW Pinemount Rd

Shady Oaks MHC, LLC

215 Joyful Loop
Lake City, FL

parcel # 04-45-16-02772-058



BUILDING DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

Application # 4404A

250.00
IS NEEDED !!
used mn
11.18.19

COUNTY THE MOBILE HOME IS BEING MOVED FROM Duval
OWNERS NAME Shady Oaks MHC PHONE 305-984-5511 CELL _____
INSTALLER William R. Price PHONE 386-963-4298 CELL 407-448-0953
INSTALLERS ADDRESS 3360 150th Place Lake City FL 32024

MOBILE HOME INFORMATION

MAKE Summ YEAR 1980 SIZE 14 x 52
COLOR _____ SERIAL No. H1165116
WIND ZONE # SMOKE DETECTOR Operational Pass

INTERIOR:
FLOORS Solid Pass
DOORS Operable Pass
WALLS Solid Pass
CABINETS Operable Pass
ELECTRICAL (FIXTURES/OUTLETS) Outlet Covers missing Pass

EXTERIOR:
WALLS / SIDING Solid Pass
WINDOWS operable Pass
DOORS Operable Pass

INSTALLER: APPROVED NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME William R. Price
Mobile Home Installer Signature [Signature] License No. 1H-1041936 Date 11/4/19

NOTES: _____
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. 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 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

FOR OFFICE USE
Building Inspectors Signature [Signature] Date 12-3-19

Mobile Home

App# 44044 Applicant: ODA M. PRICE (386.963.4298) Application Date: 11/15/2019

Convert To ▾

Entered By: Janice Williams

Updated By: Melissa Garber on 1/28/2020 3:14 PM

Previous | Next | Last Permits Only

1. JOB LOCATION

2. CONTRACTOR

3. MOBILE HOME DETAILS

4. APPLICANT

5. REVIEW

6. FEES/PAYMENT (\$65.00 - \$65.00 = \$0.00)

7. DOCUMENTS/REPORTS (5)

8. NOTES/DIRECTIONS

9. INSPECTIONS (2)

Completed Inspections

Add Inspection

Release Power

Schedule Inspection (ScheduleInspection.aspx?id=44044)

Inspection	Date	By	Notes
Failed: Mobile Home - In County Pre-Mobile Home before set-up	1/28/2020	Matt Forsyth	NO DATA
Passed: Mobile Home - In County Pre-Mobile Home before set-up	1/28/2020	Matt Forsyth	

The completion date must be set To release Certifications to the public.

Permit Completion Date
(Releases Occupancy and Completion Forms)

Permit Closed On

Incomplete Requested Inspections

Inspection	Date	By	Notes
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