

Parcel:
26-7S-16-04322-000 (22966)

Owner & Property Info

Result: 2 of 3

BODEN RUTH ANN

Owner 11066 ORANGE BLVD
WEST PALM BEACH, FL 33412

Site 556 SW NORMANDY Dr, FORT WHITE

Description* COMM NE COR OF NE1/4, RUN W 923.56 FT FOR POB, RUN S 240 FT, W 400 FT, N 240 FT, E 400 FT TO POB. DC 900-293, 917-423, 918-854 THRU 861, WD 1459-472, WD 1462-860

Area 2.2 AC

S/T/R 26-7S-16

Use Code** VACANT (0000)

Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Dale Houston PHONE 386-623-6522

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

Ruth Boden

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>Glen Whittington</u> Signature  |
| | License #: <u>EC 13002957</u> Phone #: <u>386-972-1700</u> Qualifier Form Attached <input checked="" type="checkbox"/> |
| MECHANICAL/ A/C | Print Name <u>Steven Mollman</u> Signature  |
| | License #: <u>CAC 1819696</u> Phone #: <u>352-339-6640</u> Qualifier Form Attached <input checked="" type="checkbox"/> |

Qualifier Forms cannot be submitted for any Specialty License.

| 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.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Glenn Whittington (license holder name), licensed qualifier for Whittington Electric Inc (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

| Printed Name of Person Authorized | Signature of Authorized Person |
|-----------------------------------|--------------------------------|
| 1. <u>Dan Reed</u> | 1. <u>[Signature]</u> |
| 2. <u>Rocky Ford</u> | 2. <u>[Signature]</u> |
| 3. | 3. |
| 4. | 4. |
| 5. | 5. |

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

[Signature] License Number EL13002957 Date 3/7/16
 Licensed Qualifiers Signature (Notarized)

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glenn Whittington, personally appeared before me and is known by me or has produced identification (type of I.D.) FL DL on this 7 day of MARCH, 2016.

[Signature]
 NOTARY'S SIGNATURE





COLUMBIA COUNTY BUILDING DEPARTMENT
 LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

I, Steven Mollman (license holder name), licensed qualifier
 for Mollman Air Conditioning & Refrigeration LLC (company name), do certify that
 the below referenced person(s) listed on this form is/are **employed** by me directly or through an
 employee leasing arrangement; or, is an officer of the corporation, or, partner as defined in
 Florida Statutes Chapter 468, and the said person(s) 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 Person Authorized | Signature of Authorized Person |
|-----------------------------------|--------------------------------|
| 1. Dale Burd | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |
| 5. | 5. |

I, the license holder, realize that I am responsible for all permits purchased, and all work done
 under my license and fully responsible for compliance with all Florida Statutes, Codes, and
 Local Ordinances. I understand that the State and County Licensing Boards have the power and
 authority to discipline a license holder for violations committed by him/her, his/her agents,
 officers, or employees and that I have full responsibility for compliance with all statutes, codes
 and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
 must notify this department in writing of the changes and submit a new letter of authorization
 form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
 use your name and/or license number to obtain permits.

CAC 1819696 3/30/22
 License Holders Signature (Notarized) License Number 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.) DRIVERS LICENSE on this 30th day of March, 20 22

(Seal/Stamp)
 NOTARY'S SIGNATURE

TYLER JAMES GRIFFIN
 Commission # HH 067506
 Expires November 30, 2024
 Bonded Thru Budget Notary Services

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 _____ 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 285 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.
 _____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Dale Houston
 Date Tested 5/11/22

Electrical _____

Plumbing _____

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. _____

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 _____

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

Type gasket Foam
 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

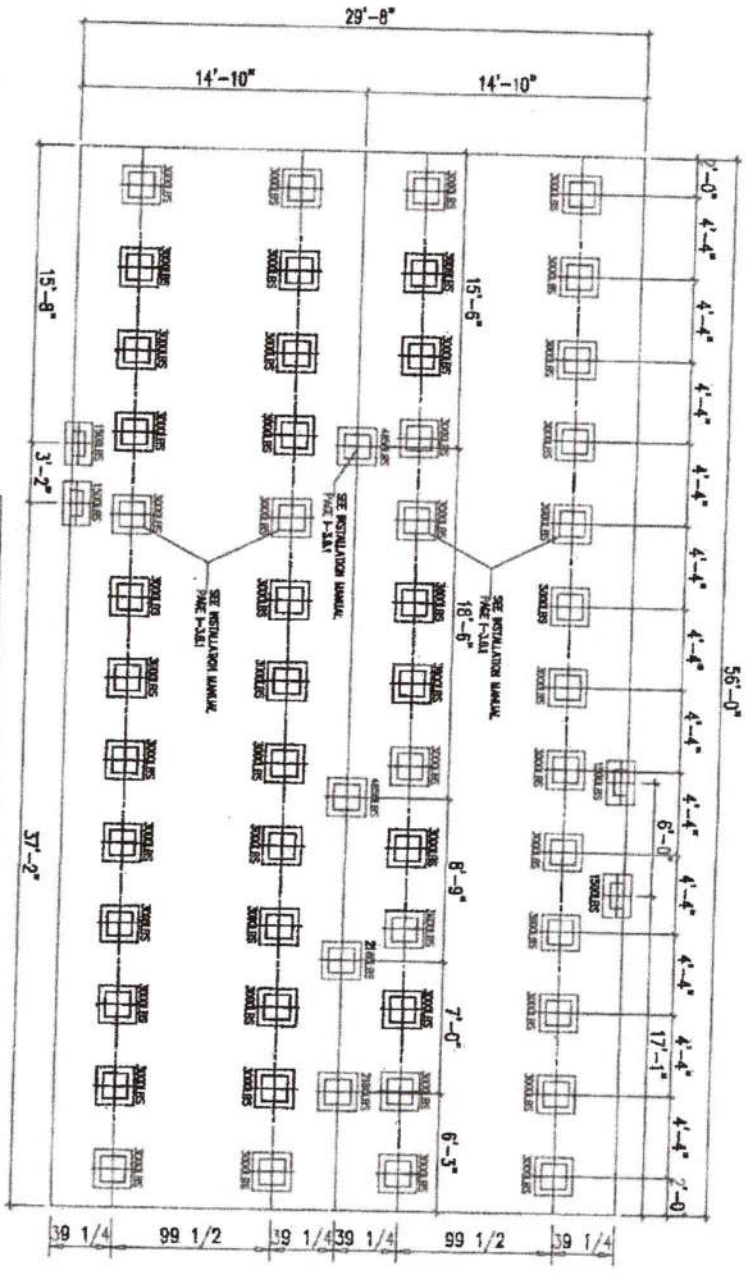
Miscellaneous

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 Dale Houston Date 5/24/22

SOIL BEARING LOAD 1000LBS
 1500LBS=16" x16" ABS FOOTER
 3000LBS=17.5" x25.5" ABS FOOTER



NOT TO SCALE
 NOTE: SEE P-32
 INSTALLATION MANUAL

| MAXIMUM SPAN BETWEEN PERS UNDER I-BEAMS (FEET) | BOX WIDTH (IN.) | BOX HEIGHT (IN.) | MAXIMUM CLEAR SPAN FOR WALKING LINE SUPPORTS (FEET) |
|--|-----------------|------------------|---|
| 15'-11.5" | 14 | 18 | 15'-11.5" |
| 17'-5.5" | 14 | 18 | 17'-5.5" |
| 17'-9.5" | 14 | 18 | 17'-9.5" |
| 21'-9.5" | 14 | 18 | 21'-9.5" |
| 23'-5.5" | 14 | 18 | 23'-5.5" |
| 16'-11" | 14 | 18 | 16'-11" |
| 17'-6" | 14 | 18 | 17'-6" |
| 18'-5.5" | 14 | 18 | 18'-5.5" |
| 20'-7.5" | 14 | 18 | 20'-7.5" |
| 24'-2.5" | 14 | 18 | 24'-2.5" |

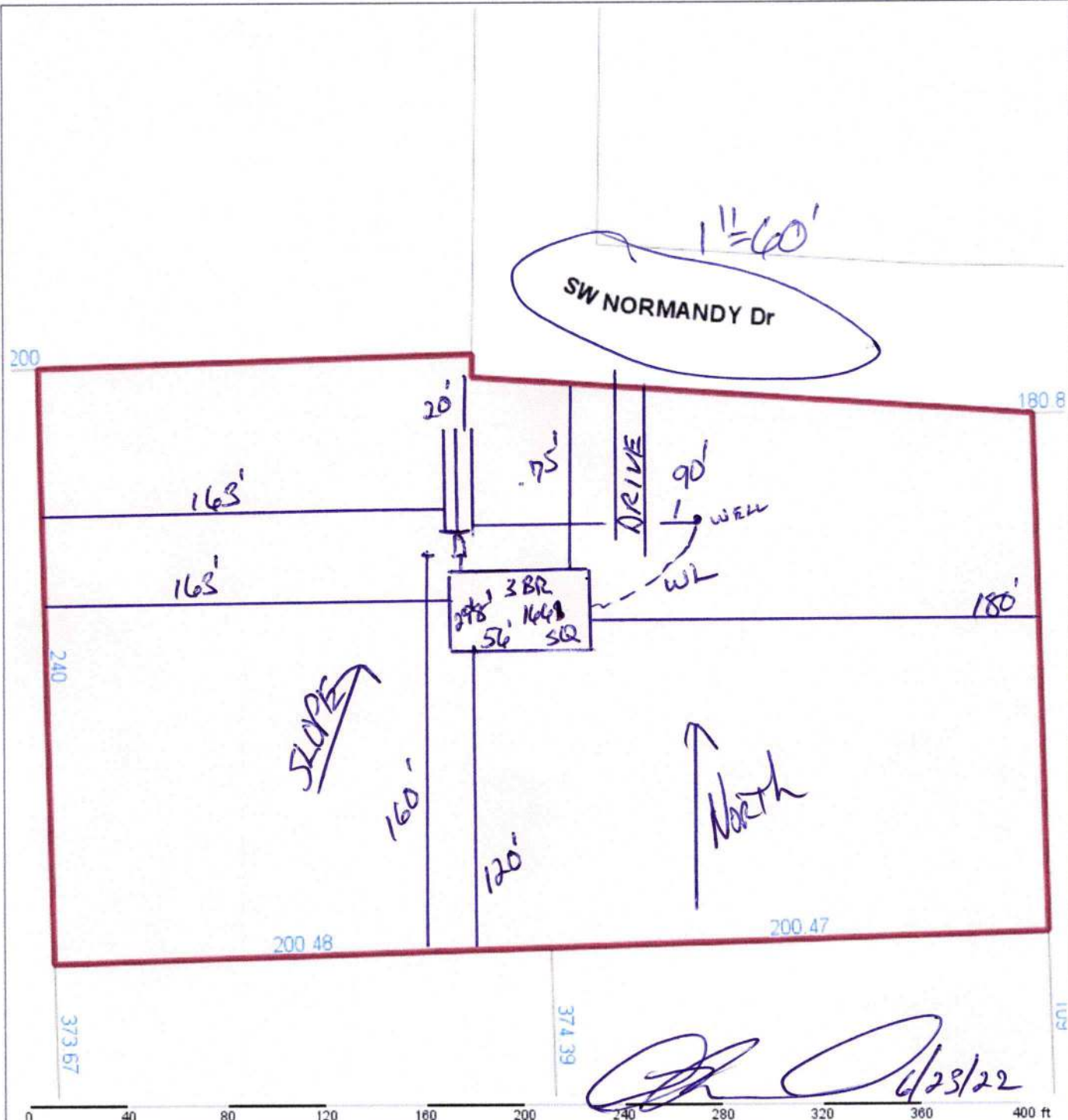
| MAX LOAD PER MAX LOAD PER MAX LOAD PER | MAX LOAD PER MAX LOAD PER MAX LOAD PER | |
|--|--|----------|
| 15'-11.5" | 17'-5.5" | 17'-9.5" |
| 17'-5.5" | 17'-9.5" | 21'-9.5" |
| 17'-9.5" | 21'-9.5" | 23'-5.5" |
| 16'-11" | 17'-6" | 17'-6" |
| 17'-6" | 18'-5.5" | 20'-7.5" |
| 18'-5.5" | 20'-7.5" | 24'-2.5" |

1. THE ABS PADS MUST BE INSTALLED PER DIMENSIONS AND RECOMMENDED INSTALLATION INSTRUCTIONS.
2. THE PER LOADS APPLIED TO THE ABS PADS MAY NOT EXCEED THE VALUES NOTED IN THE CHART BELOW.
3. THE ABS PADS MAY BE USED TO SUPPORT A CONCRETE FOUNDATION WALL. THE PADS MAY ONLY BE USED FOR REMOVAL FOUNDATION PERS.
4. ABS PADS MAY BE COVERED TO COVER A LARGER AREA IN THIS CASE THE MAX. ALLOWABLE LOADS MUST BE COVERED AS WELL.
5. IF THE REQUIREMENTS OF DESTINY AND INSTALLATION MANUAL CONFLICT WITH THE REQUIREMENTS OF THE OTHER TECHNOLOGIES INSTALLATIONS THE MORE STRINGENT REQ. SHALL BE USED.



| REV | DATE | DESCRIPTION |
|-----|---------|--------------------|
| 1 | 5/28/06 | ISSUED FOR PERMITS |
| 2 | 5/28/06 | ISSUED FOR PERMITS |
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| 100 | 5/28/06 | ISSUED FOR PERMITS |

ABS FOUNDATION PLAN
 32X60 3BR-2BA
 JERRY BANTON
 PROVIDENCE
 5/28/06
 1-C17
 290PR3756A
 1161



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

PARCEL: 26-7S-16-04322-000 (22966) | VACANT (0000) | 2.2 AC
 COMM NE COR OF NE 1/4, RUN W 923.56 FT FOR POB, RUN S 240 FT, W 400 FT, N 240 FT, E 400 FT TO POB. DC
 900-293, 917-423, 918-854 THRU 861, WD 1459-472,

BODEN RUTH ANN
 Owner: 11066 ORANGE BLVD
 WEST PALM BEACH, FL 33412
 Site: 556 SW NORMANDY Dr, FORT
 WHITE
 Sales 3/16/2022 \$36,000 I (Q)
 Info 2/17/2022 \$14,000 I (U)
 Info 11/1/2000 \$100 I (U)

| 2022 Working Values | | | |
|---------------------|----------|-----------|-----------------|
| Mkt Lnd | \$19,360 | Appraised | \$22,610 |
| Ag Lnd | \$0 | Assessed | \$22,610 |
| Bldg | \$0 | Exempt | \$0 |
| XFOB | \$3,250 | county: | \$22,610 |
| Just | \$22,610 | Total | city:\$0 |
| | | Taxable | other:\$0 |
| | | | school:\$22,610 |

NOTES:



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, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com



Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **6/22/2020 2:45:07 PM**
Address: **556 SW NORMANDY DR**
City: **FORT WHITE**
State: **FL**
Zip Code **32038**

Parcel ID **26-7S-16-04322-000**

REMARKS: **This address is a verified address in the county's addressing system.**
Verification ID: daf0c023-3dd7-46c9-86ca-514c08d4ba3d

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **GIS Specialist**

Columbia County GIS/911 Addressing Coordinator