

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>BLK 12 July 2012</u>		Building Official <u>[Signature]</u>	
AP# <u>1207-16</u>	Date Received <u>7/9/12</u>	By <u>LL</u>	Permit # <u>30313</u>		
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>		
Comments <u>Replacing existing MH</u>					
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1st floor</u>	River <u>N/A</u>	In Floodway <u>N/A</u>	
☒ Site Plan with Setbacks Shown	☒ EH # <u>12-0335</u>	☐ EH Release	☐ Well letter	☒ Existing well	
☒ Recorded Deed or Affidavit from land owner	☐ Installer Authorization	☒ State Rd Access	☐ 11 Sheet		
☐ Parent Parcel # _____	☐ STUP-MH _____	☐ F W Comp. letter	☒ App Fee Pd	☐ VF Form	
IMPACT FEES: EMS _____		Fire _____	Corr _____	☒ Out County	☐ In County
Road/Code _____	School _____	= TOTAL _____		Suspended March 2009 <u>N/A</u> <u>Ellisville Water Sys</u>	

- Property ID # 21-55-16-03671-016 Subdivision Southern Hills Lot 16 B1KA
- New Mobile Home _____ Used Mobile Home ☒ MH Size 28X66 Year 2006
 - Applicant Robert Minnella Phone # (352) 472-6010
 - Address 25743 SW 22 PL Newberry, FL 32469
 - Name of Property Owner Marsha Giorgianni Phone # (386) 288-5179
 - 911 Address 789 SW Sebastian Cir, 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 Marsha Giorgianni Phone # (386) 288-5179
 Address 789 SW Sebastian Circle
 - Relationship to Property Owner Same
 - Current Number of Dwellings on Property 1
 - Lot Size 363 x 486 Total Acreage 4.01
 - 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 SR 47 Spast I-75 to Bedrock (TR) to Sebastian (Wick) (TL) Follow around corner to prop on left.
 - Name of Licensed Dealer/Installer Rusty L Knowles Phone # (386) 397-0886
 - Installers Address 5801 SW SR 47 Lake City, FL 32024
 - License Number IT 1038219 Installation Decal # 8968

I called + spoke w/ Nancy 7.11.12

OK # 6026

Columbia County Property Appraiser

CAMA updated: 6/7/2012

2011 Tax Year

Parcel: 21-5S-16-03671-016

[<< Next Lower Parcel] [Next Higher Parcel >>]

[Tax Collector] [Tax Estimator] [Property Card]

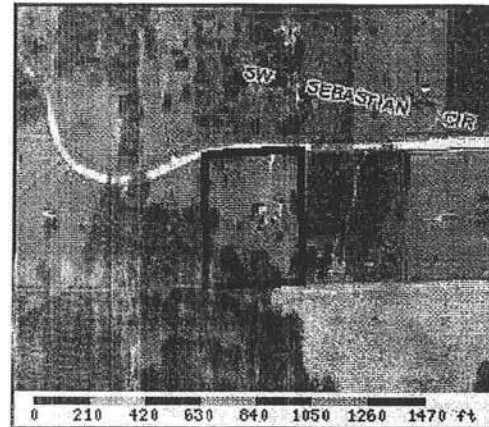
[Parcel List Generator]

[Interactive GIS Map] [Print]

Owner & Property Info

Owner's Name	GIORGIANNI CHARLES ROBERT &		
Mailing Address	MARSHA W 789 SW SEBASTIAN CIRCLE LAKE CITY, FL 32024		
Site Address	789 SW SEBASTIAN CIR		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	21516
Land Area	4.010 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. LOT 16 BLOCK A SOUTHERN HILLS S/D. ORB 637-749, 695-490, WD 844-2120.		

<< Prev Search Result: 10 of 13 Next >>

**Property & Assessment Values**

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$26,624.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$16,228.00
XFOB Value	cnt: (3)	\$5,508.00
Total Appraised Value		\$48,360.00
Just Value		\$48,360.00
Class Value		\$0.00
Assessed Value		\$48,360.00
Exempt Value	(code: HX)	\$25,000.00
Total Taxable Value		Cnty: \$23,360 Other: \$23,360 Schl: \$23,360

2012 Working Values**NOTE:**

2012 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
11/23/1987	637/749	QC	V	U		\$11,800.00
11/23/1987	695/490	AG	V	U		\$11,735.00
11/1/1985	609/294	AA	V	Q		\$12,100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1993	AL SIDING (26)	1130	1180	\$15,109.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2006	\$2,304.00	0000192.000	12 x 16 x 0	(000.00)
0070	CARPORT UF	2006	\$900.00	0000360.000	18 x 20 x 0	(000.00)
0296	SHED METAL	2006	\$2,304.00	0000192.000	12 x 16 x 0	(000.00)

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 Rush L. Knowles License # JH-1033219
 914 Address where home is being installed 289 SW Sebastian Circle
Lake City, FL
 Manufacturer Footcalt Length x width 20' x 66' Box

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

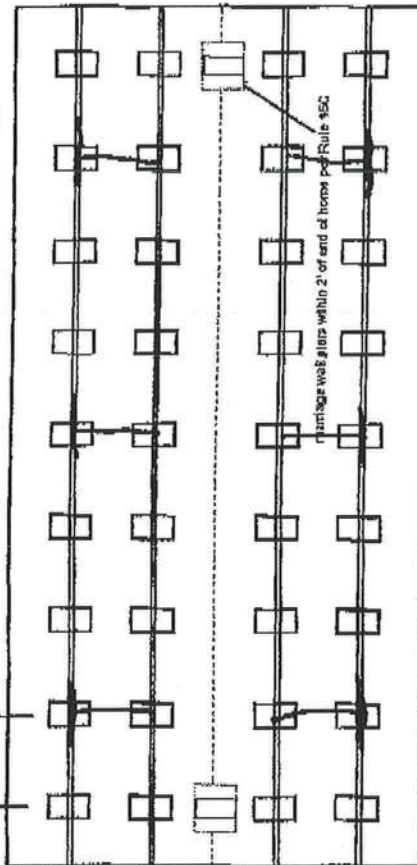
I understand Lateral Arm Systems cannot be used on any home (new or used)
 where the sidewall ties exceed 5 ft 4 in.

Installer's Initials RL

Typical pier spacing

2' 8'

Show locations of Longitudinal and Lateral Systems
 (use dark lines to show these locations)



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 # 8968
 Triple Quad ☐ Serial # SBWGA109061567AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	18" x 18" (258)	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'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

L-beam pier pad size 23' 1/4" x 3' 1/4"
 Perimeter pier pad size NA
 Other pier pad sizes required by the mfg. 16' x 16'

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show fire piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening

20'

Pier pad size

24' x 24'

ANCHORS

4 R

5 R

FRAME TIES

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

OTHER TIES

Number
 Sidewall 2
 Longitudinal Marriage wall 2
 Shearwall 2

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer Plow Tech 10 10 10

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

x 1.0 x 1.0 x 1.0

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 1.0 x 1.0 x 1.0

TORQUE PROBE TEST

The results of the torque probe test is 275 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

Date Tested

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. 15C-1

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C-1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C-1

Site Preparation

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

Fastening multi-wide units

Floor: Type Fastener: 6" SS Length: 6" Spacing: 20"
Wall: Type Fastener: 3/4" x 3" Length: 4" Spacing: 24"
Roof: Type Fastener: 3/4" x 3" Length: 3 3/4" Spacing: 48"
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: Roll form Installed: Between Floors Yes ☒
Pg. 15C-1 Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 15C-1
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

Miscellaneous

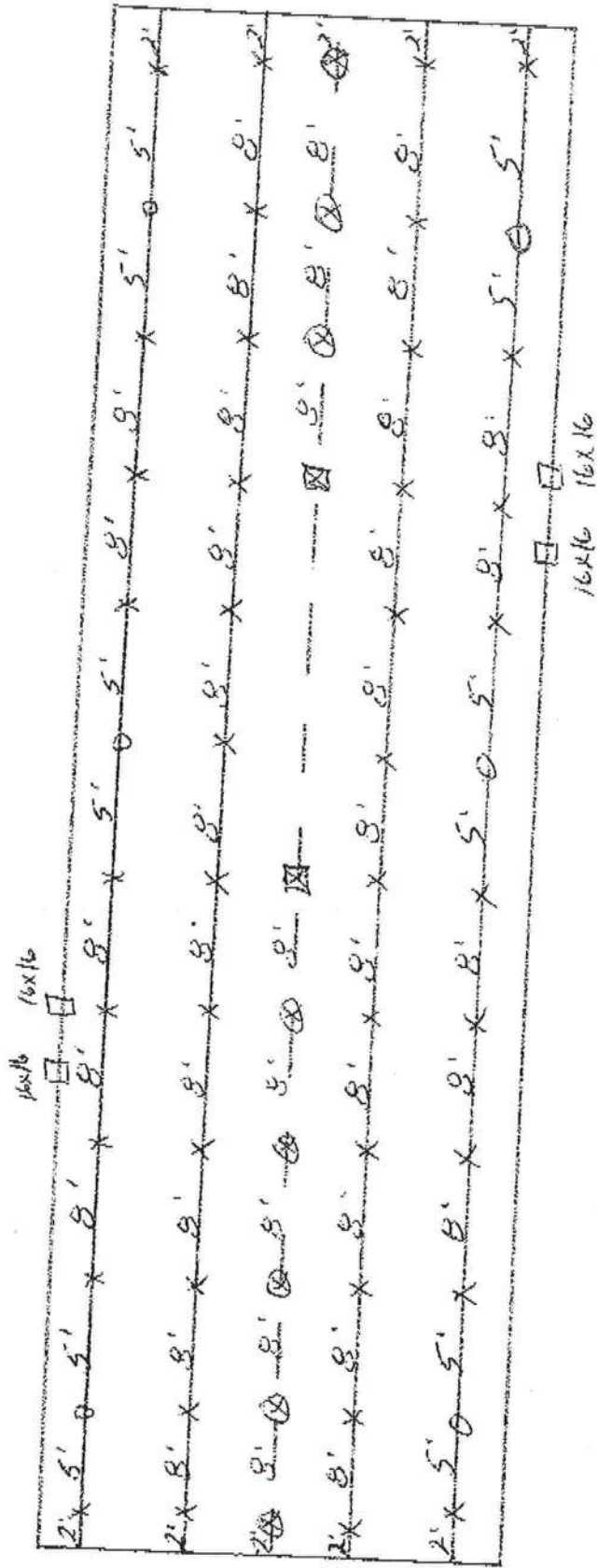
Skirting to be installed. Yes ☒ No ☒
Dryer vent installed outside of skirting. Yes ☒ No ☒
Range downflow vent installed outside of skirting. Yes ☒ No ☒
Drain lines supported at 4 foot intervals. Yes ☒ No ☒
Electrical crossovers protected. Yes ☒ No ☒
Other: 15C-1 may or may not have page #s

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Date

7-3-12



- 0 - 6 - 1101 V All steel foundations from Oliver Technology
- X - I Beam piers 8' o.c. using 23 1/4 x 31 1/4 lbs pds
- ⊗ - Center line piers 8' o.c. using 16 x 16 lbs pds
- ⊗ - Center line piers on opening greater than 15' - 24 x 24 lbs pds

X - 7 beam pier, 8' o.c. w/ 23 1/4 x 31 1/4 lbs pads

⑧ - Center line pier 8' O.C. using 16 x 16 Angs piers

Box - Center line pieces are opening greater than 15" - 24x24 Abs pads

ScotBilt
Homes, Inc.

CHALLENGER
Series

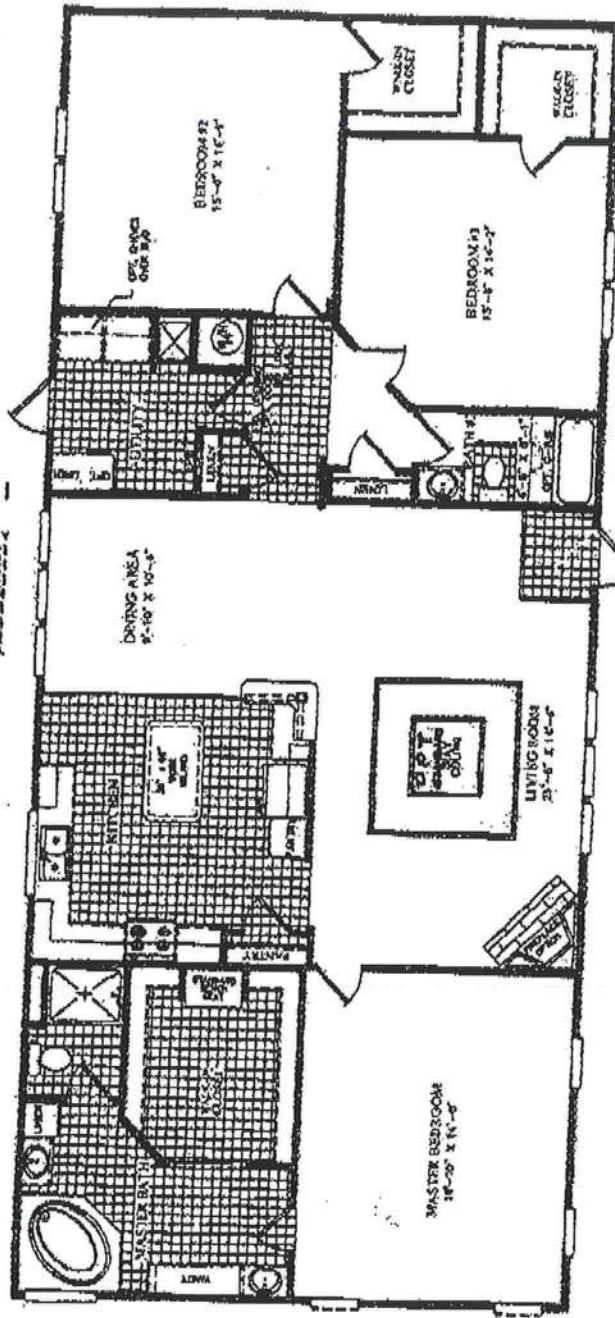
3 BEDROOM

326673CHA
2 BATH • 1958 sq. ft.
32 x 70 • 10/01/2009

Heritage 1221

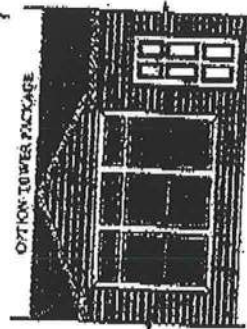
66'-0"

OPTIONAL SIDE PORCH



Lake City

Rusty This is
Almost Exact
Floor plan



OPTION TOWER PACKAGE

- All room dimensions include closet space if applicable and are approximate.
- Square footage shown does not include porch, if applicable.
- Materials and specifications subject to change without notice.
- Certain features shown may not be standard.

R.6 3 Nasty Home Real ONE

PERMIT NUMBER: _____

TORQUE TEST AFFIDAVIT

I, Rusty L. Knowles, Have personally performed the Torque Test at the following property location:

911 or legal description_____
Property Owner

I have made the following determination as follows:

Torque Value: NA ^{US: 11014} Inch pounds 485 FT. Anchors

[Signature]
SignatureIH-1038219
License Number7-3-12
Date**PENETROMETER TEST AFFIDAVIT**

I, Rusty L. Knowles, Have personally performed the penetrometer test at the following property location:

911 or legal description_____
Property Owner

I have made the following determination:

Soil load bearing capacity: _____, Or assumed 1000 PSF.

[Signature]
SignatureIH-1038219
License Number7-3-12
Date

Penetrometer/Torque Test

1000 Lbs. 1000 Lbs. 1000 Lbs.
 X 1.0 inch pounds X 1.0 inch pounds X 1.0 inch pounds



1000 Lbs. 1000 Lbs. 1000 Lbs.
 X 1.0 inch pounds X 1.0 inch pounds X 1.0 inch pounds

Test the perimeter of the home at six (6) locations

Take the reading at the depth of the footer

Using 500lb. Increment, take the lowest reading and round down to that increment

1. This document is a Warranty Deed and is subject to the provisions of the Florida Statutes, Chapter 689, and the provisions of the Florida Constitution, Article X, Section 10.

WARRANTY DEED
INDIVID. TO INDIVID.

RANCO FORM 01

John H. Deas
184 Palm Circle
Lake City FL 32055
Documentary Stamp: \$526.00
P. DeWitt Cassin
Clerk of Court
By: *[Signature]* J.C.

This instrument Prepared by:

John H. Deas
184 Palm Circle
Lake City FL 32055

Property Appraiser's Parcel Identification (Folio Number):
21-5s-16-03671-016

Grantor's S.S. #1: 265-94-2898 & 261-70-3279

SPACE ABOVE THIS LINE FOR PROCESSING DATA

97-12197

FILED AND RECORDED IN
RECORDS OF COLUMBIA COUNTY, FLORIDA

1997 SEP -2 AM 9:54

RECORDED
CLERK OF RECORDS
COLUMBIA COUNTY, FLORIDA
BY: *[Signature]* J.C.

This Warranty Deed Made the 26th day of August A.D. 19 97 by Audrey S. Bullard and John H. Deas, an unmarried widower and surviving spouse of Bettie H. Deas, who died on July 8, 1997. hereinafter called the grantor, to CHARLES ROBERT GIORGIANNI AND MARSHA W. GIORGIANNI, his wife whose post office address is Rt 14 Box 342-AA, Lake City FL 32024 hereinafter called the grantee:

Witnesseth: That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, alien, remises, releases, conveys and confirms unto the grantee all that certain land situate in Columbia County, State of Florida, viz: Lot #15 Block A, Southern Hills, a subdivision as recorded in Plat Book 5, pages 63 & 63 A, public records of Columbia County, Florida.

N.B.: The purpose of this conveyance is to fulfill the terms and conditions of that certain Agreement for Deed between the grantor and the grantee hereinabove, dated November 23, 1987, recorded August 31, 1989, in Official Records Book 695, pages 490-492, public records of Columbia County, Florida.

This Warranty Deed is given subject to the oil, gas and mineral rights and easements of record, if any.

Together, with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 89.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

[Signature] Connie B. Roberts

[Signature] Sue D. Lane

[Signature] Sue D. Lane

[Signature] Connie B. Roberts

[Signature] Sue D. Lane

[Signature] Connie B. Roberts

[Signature] Sue D. Lane

[Signature] Sue D. Lane

[Signature] Connie B. Roberts

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[Signature] Connie B. Roberts

[Signature] Sue D. Lane

[Signature] Connie B. Roberts

[Signature] Sue D. Lane

[Signature] Connie B. Roberts

EX 0844 PG 2120
[Signature] Audrey S. Bullard
Audrey S. Bullard
184 Palm Circle, Lake City FL 32055
Post Office Address

[Signature] John H. Deas
John H. Deas
184 Palm Circle, Lake City FL 32055
Post Office Address

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

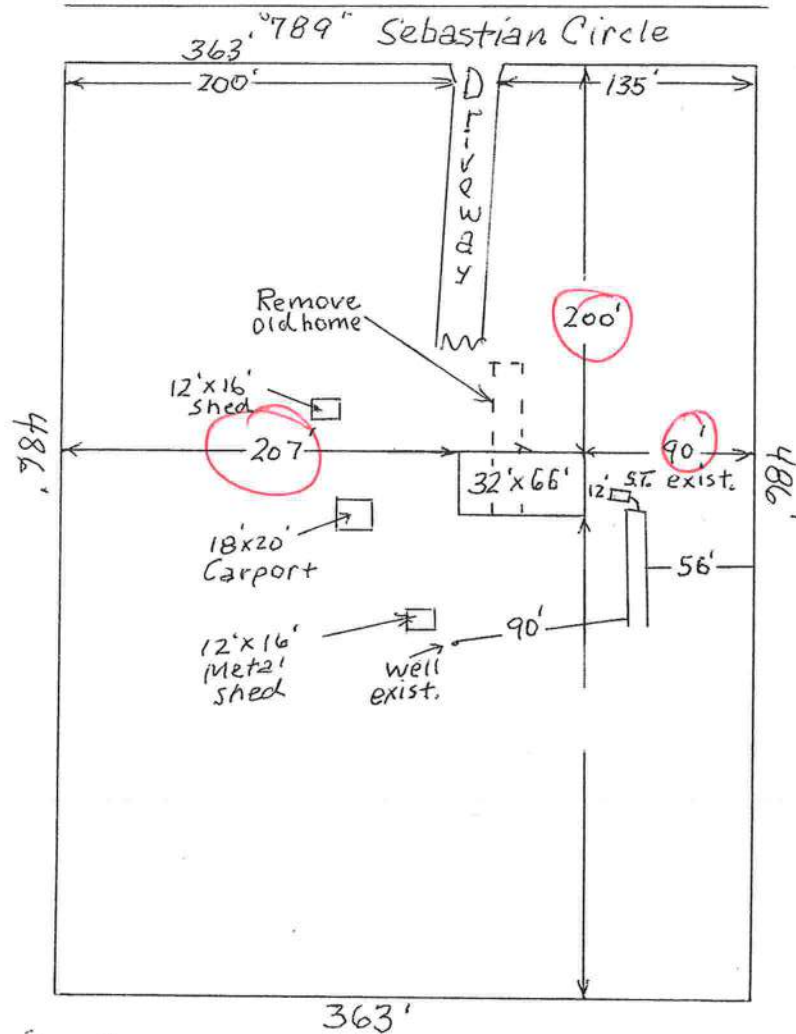
Audrey S. Bullard and John H. Deas known to me to be the person or persons described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, that I relied upon the following form of identification of the above-named person or persons and that an oath (or oaths) was (or were) taken.

Witness my hand and official seal in the County and State last aforesaid this 26th day of August, A.D. 19 97.
[Signature] James L. Daugherty
James L. Daugherty
Notary Public for the State of Florida
Commission No. CC 617912
My Commission exp. 04/13/2001

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number _____

----- PART II - SITEPLAN ----- 1 inch = 100 Feet -----



Notes: No pertinent offsite features

Site Plan submitted by: Robert Merrill 07-06-12

Plan Approved _____ Not Approved _____

By _____ Date _____ Agent _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1207-16

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: 7/10/2012 **DATE ISSUED:** 7/12/2012**ENHANCED 9-1-1 ADDRESS:**

789 SW SEBASTIAN CIR

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

21-5S-16-03671-016

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE ON PARCEL.

Address Issued By: SIGNED: RONAL N. CROFT
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.**

2012-07-11 06:20 ACE

07/10/2012 19:53 3524720104
Wayne P. Hanna

ROB AND NANCY
388-325-0811

PAGE 01/02
P.1

MECHANICAL INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1207-16 CONTRACTOR Rusty L. Keador PHONE
Col. Higgins

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 22-0, a contractor must 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.

684 ok
1126 ok
OK

ELECTRICAL	Print Name <u>Wayne J. Hanna</u> Signature <u>Wayne J. Hanna</u> License #: <u>RC 10002157</u> Phone #: <u>886-987-3802</u>
MECHANICAL A/C &	Print Name <u>Randall S. Means</u> Signature <u>Randall S. Means</u> License #: <u>CAC 054737</u> Phone #: <u>352-274-9326</u>
PLUMBING/ GAS	Print Name <u>Rusty L. Keador</u> Signature <u>Rusty L. Keador</u> License #: <u>TH-1038219</u> Phone #: <u>386-755-1044</u>

Trade	Trade Number	Subcontractor Name	Subcontractor License
MASON			
CONCRETE FINISHER			

§ 2. 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 §§ 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Ordinance 22-0, Chapter 2012-01

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Gainesville
OWNERS NAME Giorgianni PHONE 386 288 5179 CELL _____
INSTALLER Rusty L Knowles PHONE 386 397 0886 CELL _____
INSTALLERS ADDRESS 5801 SW SR 47 Lake City, FL 32024

MOBILE HOME INFORMATION

MAKE Scotbuilt YEAR 2006 SIZE 28 x 66
COLOR _____ SERIAL No. SB6A109061567AB
WIND ZONE II SMOKE DETECTOR _____

INTERIOR:

FLOORS Good
DOORS Good
WALLS Good
CABINETS Good
ELECTRICAL (FIXTURES/OUTLETS) Good

EXTERIOR:

WALLS / SIDING Good
WINDOWS Good
DOORS Good

INSTALLER: APPROVED ☒ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Rusty L. Knowles

Installer/Inspector Signature [Signature] License No. IH-1038219 Date 7-3-12

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.

Code Enforcement Approval Signature [Signature] Date 7-16-12

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7/23/12 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Giorgianni PHONE 288-5179 CELL _____

ADDRESS 789 SW Sebastain Cir. Lake City FL 32024

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 47 S, @ Bedrock, @ Sebastian Circle,
Follow around curve to property on left.

MOBILE HOME INSTALLER Rusty Knowles PHONE 397-0886 CELL _____

MOBILE HOME INFORMATION

MAKE Scott Built YEAR 06 SIZE 28 X 66 COLOR ?

SERIAL No. 50GA109061567 A/B

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

Date of Payment: 7-12-12

Paid By: Robert Minnello

Notes: #1631

_____ SMOKE DETECTOR () OPERATIONAL () MISSING

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

_____ DOORS () OPERABLE () DAMAGED

_____ 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 [Signature] ID NUMBER 302 DATE 7/23/12

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

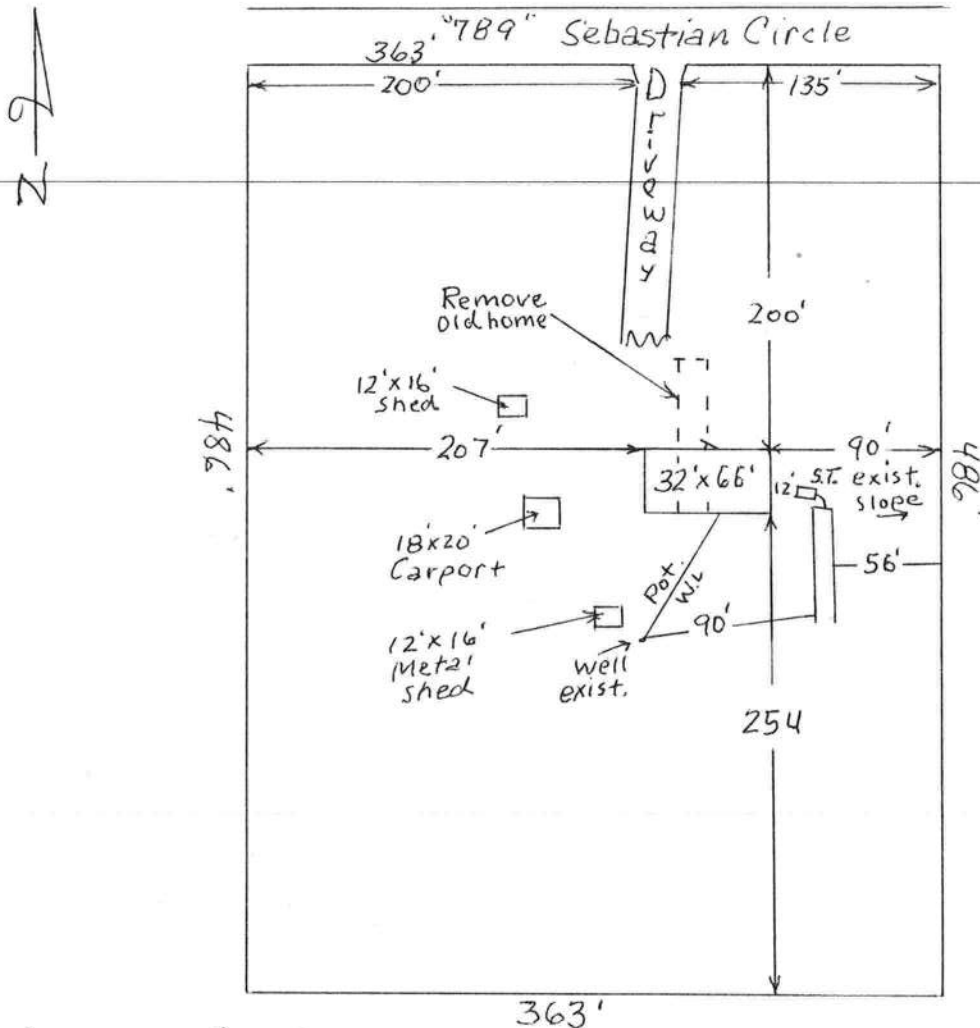
Permit Application Number

12-2335E

Giorgianni, Marsha

PART II - SITEPLAN

1 inch = 100 Feet



Notes: No pertinent offsite features

Site Plan submitted by:

Paul W. Smith

07-06-12

Agent

Plan Approved

X

Not Approved

Date 7/23/12

By

C. D. W. Smith

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT