

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

**For Office Use Only**

(Revised 1-11)

Zoning Official BLK 1 July 2011

Building Official 7.C. 6-29-11

AP# 1106-47

Date Received 6/23

By JW

Permit # 29551

Flood Zone X

Development Permit N/A

Zoning RSF/mh2

Land Use Plan Map Category RES Low Den.

Comments Replacing existing mth

FEMA Map# N/A

Elevation N/A

Finished Floor 1 above

River N/A

In Floodway N/A

☐ Site Plan with Setbacks Shown

☒ EH # 11-0281

☒ EH Release

☐ Well letter

☐ Existing well

☐ Recorded Deed or Affidavit from land owner

☐ Installer Authorization

☐ State Road Access

☒ 911 Sheet

☐ Parent Parcel #

☐ STUP-MH

☐ F W Comp. letter

☒ FWF Form

IMPACT FEES: EMS

Fire

Corr

☒ Out County ☐ In County

Road/Code School = TOTAL Impact Fees Suspended March 2009

not paid

Property ID # 28-35-17-05612-000

Subdivision

Lots 1, 2, 3 EL Patterson

☐ New Mobile Home

☒ Used Mobile Home

MH Size 16x80

Year 2000

Applicant Wendy Grennell

Phone # 386-288-2428

Address 3104 SW Old Wire Rd Ft White FL 32038

Name of Property Owner James Gilbert

Phone # 386-752-2971

911 Address 157 NE William Street Lake City FL 32055

Circle the correct power company -

FL Power & Light

Clay Electric

(Circle One) -

Suwannee Valley Electric

Progress Energy

Name of Owner of Mobile Home James Gilbert

Phone # 386-752-2971

Address 183 NE Williams St. Lake City FL 32055

Relationship to Property Owner same

Current Number of Dwellings on Property 1

Lot Size

Total Acreage 2.4

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 (Paid)

Driving Directions to the Property 90 E to Old Jacksonville turn  
(L) to Granger Mill turn (L) to NE Williams  
Turn (R) to 183 on (L) End property

Name of Licensed Dealer/Installer Robert Sheppard

Phone # 386-623-2203

Installers Address 6355 NE CR 245 Lake City FL 32025

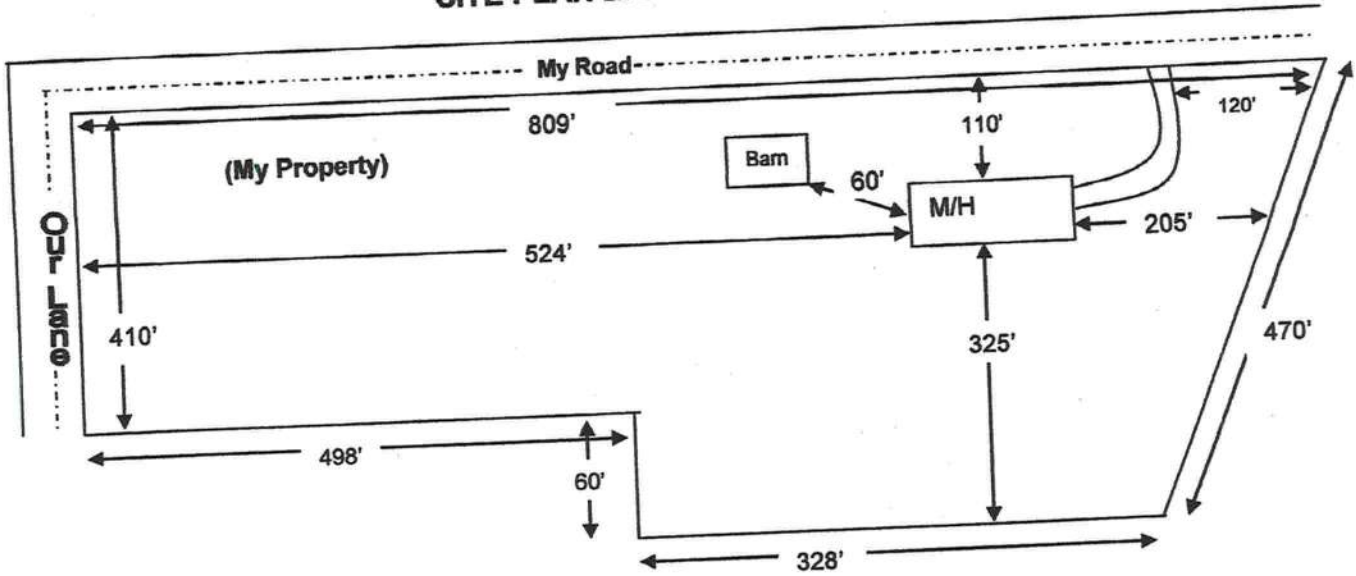
License Number JH1025386

Installation Decal # 6518

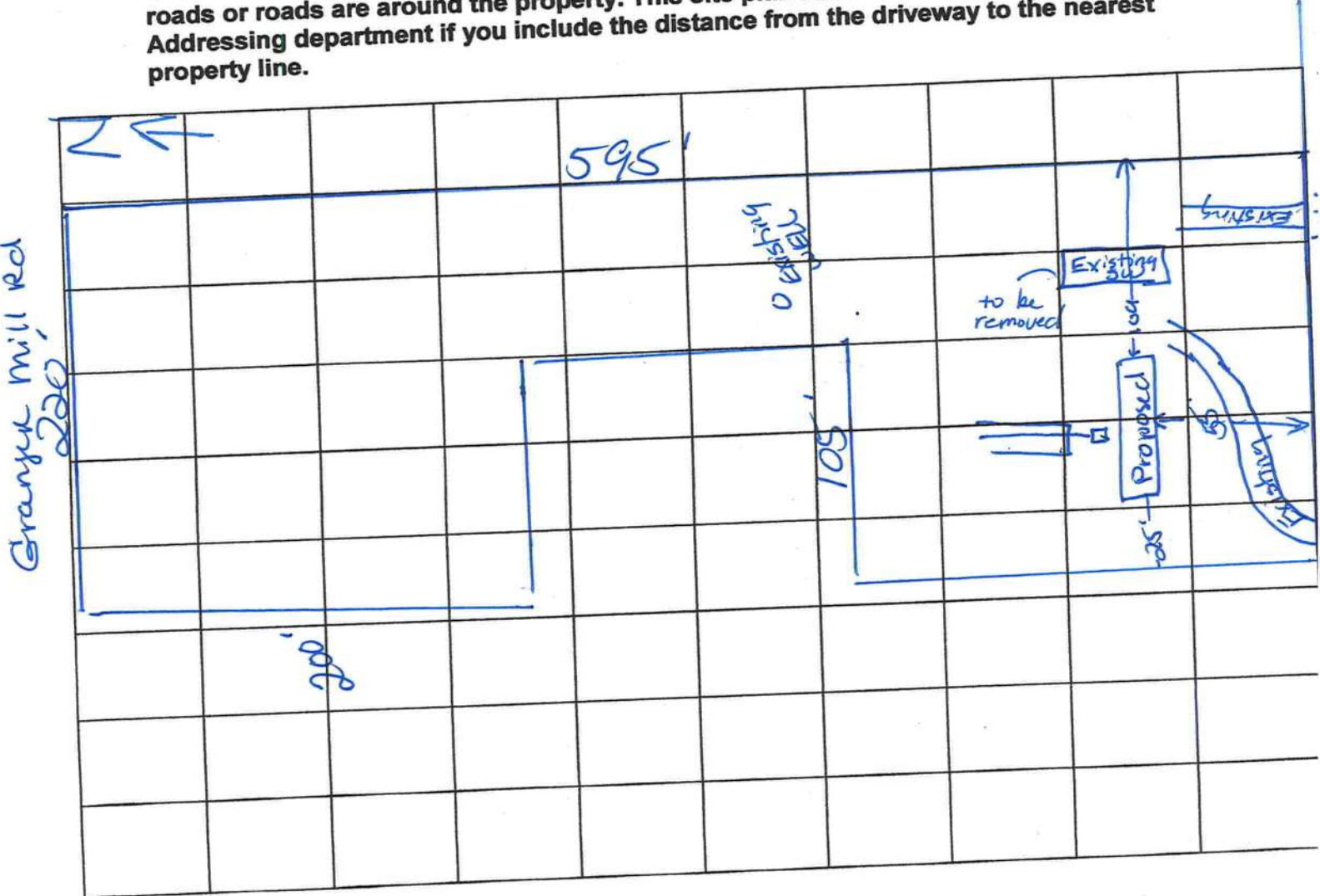
Sheppard Wendy 706.11

\$ 325.00  
Left a message on  
7-15-11

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



## Permit Application Number

11-028

Gilbert

## PART II - SITEPLAN

WSS 200' ←

MAN  
MADE  
FOND

FUDGE & GLFEN

၂၀

ment

NOT  
A  
PAGE

GRANGER MILK ROAD

WELL  
735

SEP 50  
1970

Diagram showing a right triangle with a vertical side of 105', a horizontal side of 150', and a hypotenuse of 165'. The angle between the vertical and hypotenuse is labeled 'WALL' and the angle between the horizontal and hypotenuse is labeled 'SHRO'.

105'

40

|    |  |  |  |
|----|--|--|--|
| 9m |  |  |  |
|----|--|--|--|

776 4214

SHEO

→ 5 SEPTICS WITHIN 3D OF Prophylaxis

NORTH

Slope →

**Notes:**

210 Williams St

**Site Plan submitted by:**

Plan Approved X

By

Not Applicable

**Columbia CHD**

**MASTER CONTRACTOR**

Date 6/16/11

**County Health Department**

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

OH 4015, 06/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-5.001, FAC  
(Stock Number: 6744-002-4015-6)

Page 2 of 4

| THE E 105 FT OF LOT 1 & THE S 210 FT OF THE W 105 FT OF THE E 210 FT OF LOT 1 & THE E 105 FT OF THE S 150 FT OF LOT 2 & |      |      |              |     |     |      |     |    |      | GILBERT JAMES R<br>183 NE WILLIAMS ST<br>LAKE CITY, FL 32055 |         |    |       |     |       |    |      |   |        | 28-3S-17-05612-000         |       |  |  |  |  |  |  |  |  | Columbia County 2011 R<br>CARD 001 of 001<br>BY JEFF |  |  |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------|------|------|--------------|-----|-----|------|-----|----|------|--------------------------------------------------------------|---------|----|-------|-----|-------|----|------|---|--------|----------------------------|-------|--|--|--|--|--|--|--|--|------------------------------------------------------|--|--|--|--|--|--|--|--|--|
|                                                                                                                         |      |      |              |     |     |      |     |    |      | PRINTED 5/03/2011 12:38<br>APPR 9/08/2005 TWDF               |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| BUSE 000800 MOBILE HME                                                                                                  |      |      |              |     |     |      |     |    |      | AE? Y 588 HTD AREA 102.900 INDEX 28317.01 PATTERSON          |         |    |       |     |       |    |      |   |        | PUSE 000200 MOBILE HOME    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| MOD 2 MOBILE HME BATH 2.00                                                                                              |      |      |              |     |     |      |     |    |      | 588 EFF AREA 23.667 E-RATE 100.000 INDX STR 28- 3S- 17       |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| EXW 26 ALM SIDING FIXT                                                                                                  |      |      |              |     |     |      |     |    |      | 13916 RCN 1987 AYB MKT AREA 06                               |         |    |       |     |       |    |      |   |        | 5,148 BLDG                 |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| % N/A BDRM 2                                                                                                            |      |      |              |     |     |      |     |    |      | 37.00 %GOOD 5,148 B BLDG VAL 1987 EYB (PUD1                  |         |    |       |     |       |    |      |   |        | 1,440 XFOB                 |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| RSTR 03 GABLE/HIP RMS                                                                                                   |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | AC 2.400 18,957 LAND       |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| RCVR 01 MINIMUM UNTS                                                                                                    |      |      |              |     |     |      |     |    |      | FIELD CK:                                                    |         |    |       |     |       |    |      |   |        | NTCD 0 CLAS                |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| % N/A C-W% 3                                                                                                            |      |      |              |     |     |      |     |    |      | LOC: 157 WILLIAMS ST NE LAKE CITY                            |         |    |       |     |       |    |      |   |        | APPR CD 0 MKTUSE           |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| INTW 04 PLYWOOD HGHT 3                                                                                                  |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | CNDO 25,545 JUST           |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| % N/A PMTR 3                                                                                                            |      |      |              |     |     |      |     |    |      | +-----49-----+                                               |         |    |       |     |       |    |      |   |        | SUBD 25,545 APPR           |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| FLOR 14 CARPET STYS 1.0                                                                                                 |      |      |              |     |     |      |     |    |      | IBAS1993                                                     |         |    |       |     |       |    |      |   |        | BLK                        |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| 10% 08 SHT VINYL ECON 3                                                                                                 |      |      |              |     |     |      |     |    |      | 1                                                            |         |    |       |     |       |    |      |   |        | LOT 0 SOHD                 |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| HTTP 04 AIR DUCTED FUNC 3                                                                                               |      |      |              |     |     |      |     |    |      | 2                                                            |         |    |       |     |       |    |      |   |        | MAP# 0 ASSD                |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| A/C 02 WINDOW SPCD 3                                                                                                    |      |      |              |     |     |      |     |    |      | I                                                            |         |    |       |     |       |    |      |   |        | HX WR 0 EXPT               |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| QUAL 05 05 DEPR 09 3                                                                                                    |      |      |              |     |     |      |     |    |      | +-----49-----+                                               |         |    |       |     |       |    |      |   |        | TXDT 002 0 COTXBL          |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| FNDN N/A UD-1 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| SIZE N/A UD-2 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | ----- BLDG TRAVERSE -----  |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| CEIL N/A UD-3 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | BAS1993=W49 S12 E49 N12\$. |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| ARCH N/A UD-4 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| FRME 01 NONE UD-5 N/A 3                                                                                                 |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| KTCH 01 01 UD-6 N/A 3                                                                                                   |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| WNDO N/A UD-7 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| CLAS N/A UD-8 N/A 3                                                                                                     |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| OCC N/A UD-9 N/A 3                                                                                                      |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| COND 03 03 % N/A 3                                                                                                      |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| SUB A-AREA % E-AREA SUB VALUE 3                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | PERMITS                    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| BAS93 588 100 588 5148 3                                                                                                |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | NUMBER DESC AMT ISSUED     |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | SALE                       |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | BOOK PAGE DATE PRICE       |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | GRANTOR                    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | GRANTEE                    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | GRANTOR                    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
|                                                                                                                         |      |      |              |     |     |      |     |    |      |                                                              |         |    |       |     |       |    |      |   |        | GRANTEE                    |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| TOTAL 588 588 5148                                                                                                      |      |      |              |     |     |      |     |    |      | -----                                                        |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| EXTRA FEATURES                                                                                                          |      |      |              |     |     |      |     |    |      | FIELD CK:                                                    |         |    |       |     |       |    |      |   |        |                            |       |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| AE                                                                                                                      | BN   | CODE | DESC         | LEN | WID | HGHT | QTY | QL | YR   | ADJ                                                          | UNITS   | UT | PRICE | ADJ | UT    | PR | SPCD | % | %GOOD  | XFOB                       | VALUE |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |
| Y                                                                                                                       | 0294 |      | SHED WOOD/VI | 12  | 16  |      | 1   |    | 2005 | 1.00                                                         | 192.000 | SF | 7.500 |     | 7.500 |    |      |   | 100.00 |                            | 1,440 |  |  |  |  |  |  |  |  |                                                      |  |  |  |  |  |  |  |  |  |

| LAND<br>AE CODE                            | DESC      | ZONE<br>TOPO | ROAD<br>UTIL | {UD1<br>{UD2 | {UD3<br>{UD4 | FRONT<br>BACK | DEPTH<br>DT | FIELD CK:<br>ADJUSTMENTS |      |      |      | UNITS | UT | PRICE    | ADJ | UT      | PR | LAND  | VALUE |
|--------------------------------------------|-----------|--------------|--------------|--------------|--------------|---------------|-------------|--------------------------|------|------|------|-------|----|----------|-----|---------|----|-------|-------|
| Y 000000                                   | VAC RES   | 00           |              |              |              |               |             | 1.00                     | 1.00 | 1.00 | 1.00 | 1.000 | AC | 6232.950 |     | 6232.95 |    | 6,232 |       |
| Y 009945                                   | WELL/SEPT | 00           |              |              |              |               |             | 1.00                     | 1.00 | 1.00 | 1.00 | 1.000 | UT | 2000.000 |     | 2000.00 |    | 2,000 |       |
| Y 000200                                   | MBL HM    | 00           |              |              |              |               |             | 1.00                     | 1.00 | 1.00 | 1.00 | .430  | AC | 6232.950 |     | 6232.95 |    | 2,680 |       |
| Y 009945                                   | WELL/SEPT | 00           |              |              |              |               |             | 1.00                     | 1.00 | 1.00 | 1.00 | 1.000 | UT | 2000.000 |     | 2000.00 |    | 2,000 |       |
| Y 000100                                   | SFR       | 00           |              |              |              |               |             | 1.00                     | 1.00 | 1.00 | 1.00 | .970  | AC | 6232.950 |     | 6232.95 |    | 6,045 |       |
| L003 - COMBINED FROM 05611-000 - MULTI-USE |           |              |              |              |              |               |             |                          |      |      |      |       |    |          |     |         |    |       |       |

# 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: 6/14/2011 DATE ISSUED: 6/15/2011

### ENHANCED 9-1-1 ADDRESS:

157 NE WILLIAMS ST

LAKE CITY FL 32055

### PROPERTY APPRAISER PARCEL NUMBER:

28-3S-17-05612-000

### 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.**

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1106-47 CONTRACTOR Robert Sheppard PHONE 356-623-2235

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.

|                                 |                                   |                                   |
|---------------------------------|-----------------------------------|-----------------------------------|
| ELECTRICAL<br>234 ✓             | Print Name <u>Michael Conner</u>  | Signature <u>Michael A Conner</u> |
|                                 | License #: <u>EK13013192</u>      | Phone #: <u>356-758-2233</u>      |
| MECHANICAL/<br>A/C <u>701</u> ✓ | Print Name <u>Robert Grant</u>    | Signature <u>Robert Grant</u>     |
|                                 | License #: <u>CAC1814931</u>      | Phone #: <u>800-859-3708</u>      |
| PLUMBING/<br>GAS <u>678</u> ✓   | Print Name <u>Robert Sheppard</u> | Signature <u>Robert Sheppard</u>  |
|                                 | License #: <u>IH1025346</u>       | Phone #: <u>356-623-2235</u>      |

|                   |  |  |  |
|-------------------|--|--|--|
| MASON             |  |  |  |
| CONCRETE FINISHER |  |  |  |

F. S. 440.100 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.

Contractor Approval Signature/Date/Print Name 12/13

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

Robert Skelton

License #

TH1025386

911 Address where home is being installed.

1572 NE Williams St.  
Lake City FL 32055

Manufacturer

Homes of merit

Length x width

16x80

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

Typical pier spacing

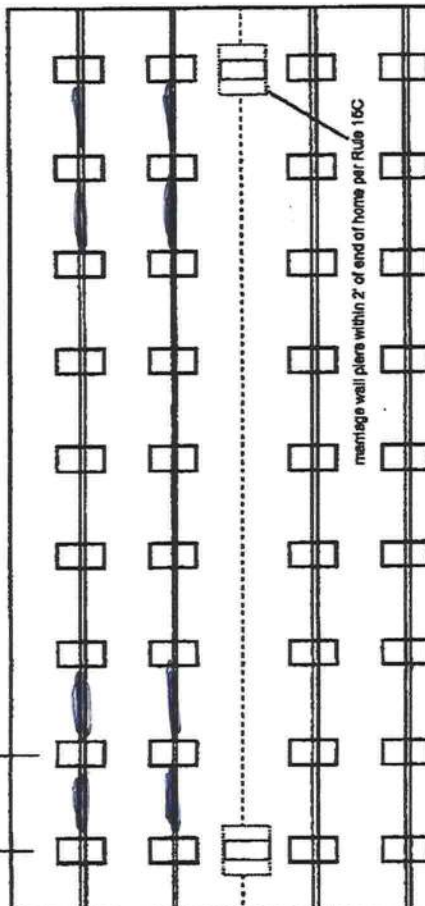
2'

6'0"

lateral

longitudinal

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



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 dsf              | 3"                  | 4"              | 4"                      | 5"              | 6"               | 7"               | 8"              |
| 1500 dsf              | 4"                  | 6"              | 6"                      | 7"              | 8"               | 8"               | 8"              |
| 2000 dsf              | 6"                  | 8"              | 8"                      | 8"              | 8"               | 8"               | 8"              |
| 2500 dsf              | 7"                  | 8"              | 8"                      | 8"              | 8"               | 8"               | 8"              |
| 3000 dsf              | 8"                  | 8"              | 8"                      | 8"              | 8"               | 8"               | 8"              |
| 3500 dsf              | 8"                  | 8"              | 8"                      | 8"              | 8"               | 8"               | 8"              |

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

425

PIER PAD SIZES

I-beam pier pad size

17x25

Perimeter pier pad size

17x25

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1900 X 1800 X 1900

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 1900 X 1800 X 1900

TORQUE PROBE TEST

The results of the torque probe test is 300 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 requires anchors with 4000 lb holding capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Robert Sheppard  
6-5-11

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. 29

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

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 \_\_\_\_\_

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 ✓ 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: \_\_\_\_\_

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

Installer Signature

Robert Sheppard Date 6-5-11

**MOBILE HOME INSTALLER AFFIDAVIT**

As per Florida Statutes Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, Robert Steppard, license number IH1025386

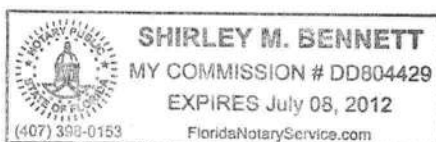
state that the installation of the manufactured home for owner

James Gilbert at911 Address: 157 NE Williams City Lake City

will be done under my supervision.

Signed: Robert Steppard  
Mobile Home InstallerSworn to and described before me this 8 day of June 2011Shirley M. Bennett  
Notary publicShirley M. Bennett Personally known ☒  
Notary Name

DL ID \_\_\_\_\_



CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7-14-11 BY 44 1106-47 IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO  
OWNERS NAME James Gilbert PHONE 252-2971 CELL \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
MOBILE HOME PARK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_  
DRIVING DIRECTIONS TO MOBILE HOME Williams Road

MOBILE HOME INSTALLER Robert Sheppard PHONE \_\_\_\_\_ CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2000 SIZE 16 X 80 COLOR \_\_\_\_\_  
SERIAL No. HMT15449 GA  
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

☒ 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

Date of Payment: \_\_\_\_\_

Paid By: \_\_\_\_\_

Notes: \_\_\_\_\_

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 402 DATE 7-14-11



Ronnie Brannon  
Proudly Serving Columbia County,  
Florida

Site Provided by...  
governmax.com 1.11

Tax Record

print 1 of 1 Account Number

Last Update: 7/11/2011 4:00:40 PM EDT

Details

Tax Record

» Print View

- Legal Desc.
- Appraiser Data
- Tax Payment
- Payment History
- Print Tax Bill NEW!

Ad Valorem Taxes and Non-Ad Valorem Assessments  
The information contained herein does not constitute a title search and should not be relied on as such.

| Account Number         | Tax Type      | Tax Year |
|------------------------|---------------|----------|
| R05612-000             | REAL ESTATE   | 2010     |
| Mailing Address        |               |          |
| GILBERT JAMES R        |               |          |
| 183 NE WILLIAMS ST     |               |          |
| LAKE CITY FL 32055     |               |          |
| Property Address       |               |          |
| 157 NE WILLIAMS ST LKC |               |          |
| GEO Number             |               |          |
| 283S17-05612-000       |               |          |
| Exempt Amount          | Taxable Value |          |
| See Below              | See Below     |          |

Searches

Account Number

- GEO Number
- Owner Name
- Property Address
- Mailing Address

Exemption Detail      Millage Code      Escrow Code  
HX      15257      002  
Legal Description (click for full description)  
17-3S-28 0200/0200 2.40 Acres THE E 105 FT OF LOT 1 & THE S 210 FT OF  
THE W 105 FT OF THE E 210 FT OF LOT 1 & THE E 105 FT OF THE S 150 FT  
OF LOT 2 & THE E 100 FT OF THE N 50 FT OF LOT 2 & E1/2 OF LOT 3, ALL  
IN BLOCK B, E L PATTERSON S/D ORB 451-499, 451-634, 500-96, See Tax  
Roll For Extra Legal

Site Functions

- Tax Search
- Local Business Tax
- Tax Sale List
- Contact Us
- County Login
- Home

| Ad Valorem Taxes              |        |                |                  |               |              |
|-------------------------------|--------|----------------|------------------|---------------|--------------|
| Taxing Authority              | Rate   | Assessed Value | Exemption Amount | Taxable Value | Taxes Levied |
| BOARD OF COUNTY COMMISSIONERS | 7.8910 | 15,257         | 15,257           | \$0           | \$0.00       |
| COLUMBIA COUNTY SCHOOL BOARD  |        |                |                  |               |              |
| DISCRETIONARY                 | 0.9980 | 15,257         | 15,257           | \$0           | \$0.00       |

|                               |        |        |        |     |        |
|-------------------------------|--------|--------|--------|-----|--------|
| LOCAL                         | 5.4140 | 15,257 | 15,257 | \$0 | \$0.00 |
| CAPITAL OUTLAY                | 1.5000 | 15,257 | 15,257 | \$0 | \$0.00 |
| SUMANNEE RIVER WATER MGT DIST | 0.4399 | 15,257 | 15,257 | \$0 | \$0.00 |
| LAKE SHORE HOSPITAL AUTHORITY | 0.9620 | 15,257 | 15,257 | \$0 | \$0.00 |
| COLUMBIA COUNTY INDUSTRIAL    | 0.1240 | 15,257 | 15,257 | \$0 | \$0.00 |

|               |         |             |        |
|---------------|---------|-------------|--------|
| Total Millage | 17.3289 | Total Taxes | \$0.00 |
|---------------|---------|-------------|--------|

Non-Ad Valorem Assessments

| Code | Levying Authority    | Amount   |
|------|----------------------|----------|
| FFIR | FIRE ASSESSMENTS     | \$77.00  |
| GGAR | SOLID WASTE - ANNUAL | \$201.00 |

|                     |            |
|---------------------|------------|
| Total Assessments   | \$278.00   |
| Taxes & Assessments | \$278.00   |
| If Paid By          | Amount Due |
|                     | \$0.00     |

| Date Paid | Transaction | Receipt      | Item | Amount Paid |
|-----------|-------------|--------------|------|-------------|
| 1/21/2011 | PAYMENT     | 3202445.0001 | 2010 | \$266.88    |

Prior Years Payment History

|                      |
|----------------------|
| Prior Year Taxes Due |
| NO DELINQUENT TAXES  |

Print | << First < Previous Next > Last >>



App # 1106-47

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

faxed to CE  
7-14-11

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwannee  
OWNERS NAME James Gilbert PHONE 752-2971 CELL \_\_\_\_\_  
INSTALLER Robert Sheppard PHONE \_\_\_\_\_ CELL 623-2203  
INSTALLERS ADDRESS 6355 NE CR 245 Lake City FL 32025

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2000 SIZE 16 x 80  
COLOR \_\_\_\_\_ SERIAL No. HMT154496A

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 \_\_\_\_\_

NOTES: \_\_\_\_\_

INSTALLER OR INSPECTORS PRINTED NAME Robert Sheppard

Installer/Inspector Signature Robert Sheppard License No. JH1025386 Date 7-12-11

**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 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.**

Code Enforcement Approval Signature \_\_\_\_\_ Date \_\_\_\_\_

# COLUMBIA COUNTY OFFICE

## M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

### Department of Building and Zoning Inspection

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 28-3S-17-05612-000

Building permit No. 000029551

Permit Holder ROBERT SHEPPARD

Owner of Building JAMES GILBERT

Location: 157 NE WILLIAMS STREET, LAKE CITY, FL 32055

Date: 08/01/2011

Building Inspector

*Joe Curran*



POST IN A CONSPICUOUS PLACE  
(Business Places Only)

DATE 07/15/2011

**Columbia County Building Permit**  
This Permit Must Be Prominently Posted on Premises During Construction**PERMIT**  
**000029551**

APPLICANT WENDY GRENNELL PHONE 288-2428  
ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038  
OWNER JAMES GILBERT PHONE 752-2971  
ADDRESS 157 NE WILLIAM STREET LAKE CITY FL 32055  
CONTRACTOR ROBERT SHEPPARD PHONE 386-623-2203  
LOCATION OF PROPERTY 90 E, L OLD JAX HWY, L GRANGER MILL, R WILLIAMS,  
2ND PROPERTY ON LEFT  
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 RSFMH-2 MAX. HEIGHT 35  
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00  
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.                     

PARCEL ID 28-3S-17-05612-000 SUBDIVISION EL PATTERSON LOTS 1,2,3  
LOT 1,2,3 BLOCK                      PHASE                      UNIT                      TOTAL ACRES 2.40

IH1025386  
Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor Wendy Grennell  
EXISTING                      11-0281 BK TC N  
Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                     

COMMENTS: RPLACING EXISTING MH  
FLOOR ONE FOOT ABOVE THE ROAD

Check # or Cash 1297**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

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

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00  
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$                       
FLOOD DEVELOPMENT FEE \$                      FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$                      **TOTAL FEE** 325.00  
INSPECTORS OFFICE                      CLERKS OFFICE                     

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

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 RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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