

DATE 08/18/2004

# Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022205

APPLICANT BELINDA CRUSE PHONE 454-5265  
 ADDRESS PO BOX 2784 HIGH SPRINGS FL 32655  
 OWNER KENNETH & BELINDA CRUSE PHONE 454-5265  
 ADDRESS 387 HAPPY VALLEY GLN HIGH SPRINGS FL 32655  
 CONTRACTOR DONNIE PERKINS PHONE 352-598-8830  
 LOCATION OF PROPERTY 441 SOUTH, L HAPPY VALLEY GLEN, 7TH LOT ON LEFT  
ABOUT 1/4 MILE DOWN

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION .00  
 HEATED FLOOR AREA \_\_\_\_\_ TOTAL AREA \_\_\_\_\_ HEIGHT .00 STORIES \_\_\_\_\_  
 FOUNDATION \_\_\_\_\_ WALLS \_\_\_\_\_ ROOF PITCH \_\_\_\_\_ FLOOR \_\_\_\_\_  
 LAND USE & ZONING A-3 MAX. HEIGHT 35  
 Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
 NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. \_\_\_\_\_

PARCEL ID 15-7S-17-09986-010 SUBDIVISION HAPPY VALLEY  
 LOT 9 BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 2.00

IH0000460 Belinda Cruse  
 Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_  
 EXISTING \_\_\_\_\_ 04-0832-E BK RK N  
 Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: FLOOR 1 FOOT ABOVE THE ROAD  
 LETTER OF AUTHORIZATION GIVEN \_\_\_\_\_

Check # or Cash 1021

## 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 \_\_\_\_\_ Rough-in plumbing above slab and below wood floor \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
 Electrical rough-in \_\_\_\_\_ Heat & Air Duct \_\_\_\_\_ Peri. beam (Lintel) \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
 Permanent power \_\_\_\_\_ C.O. Final \_\_\_\_\_ Culvert \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
 M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_ Pool \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
 Reconnection \_\_\_\_\_ Pump pole \_\_\_\_\_ Utility Pole \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
 M/H Pole \_\_\_\_\_ Travel Trailer \_\_\_\_\_ Re-roof \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

BUILDING PERMIT FEE \$ .00 CERTIFICATION FEE \$ .00 SURCHARGE FEE \$ .00  
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ \_\_\_\_\_ WASTE FEE \$ \_\_\_\_\_  
 FLOOD ZONE DEVELOPMENT FEE \$ \_\_\_\_\_ CULVERT FEE \$ \_\_\_\_\_ TOTAL FEE 250.00

INSPECTORS OFFICE [Signature] CLERKS OFFICE CH

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."

### This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

1041  
**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

**For Office Use Only**      Zoning Official BLK 16.08.04      Building Official RK 8-17-04  
 AP# 0408-19      Date Received 8/5/04      By GT      Permit # 22205  
 Flood Zone X      Development Permit N/A      Zoning A-3      Land Use Plan Map Category A-3  
 Comments \_\_\_\_\_  
 \_\_\_\_\_ ASSESSMENT charged  
 \_\_\_\_\_ for 1 UNIT  
 Site Plan with Setbacks shown N/A       Environmental Health Signed Site Plan       Env. Health Release  
 Need a Culvert Permit N/A       Need a Waiver Permit N/A       Well letter provided       Existing Well  
need de-inspection  
LH ok LH

- Property ID 15-7S-17-09986-010HX      Must have a copy of the property deed
- New Mobile Home \_\_\_\_\_      Used Mobile Home       Year 2002
- Subdivision Information lot 9 Happy Valley S/D
- Applicant Kenneth E + Belinda Cruse      Phone # cell 352-745-0115  
home 386-454-5265
- Address mailing P.O. Box 2784  
High Springs, FL 32643
- Name of Property Owner Kenneth E. + Belinda Cruse      Phone # 352-745-0115
- 911 Address 387 Happy Valley Glw. High Springs, FL 32655
- Name of Owner of Mobile Home Kenneth E. + Belinda Cruse      Phone # 352-745-0115
- Address P.O. Box 2784 High Springs, FL 32655
- Relationship to Property Owner owner
- Current Number of Dwellings on Property 1 M/A which will be removed
- Lot Size \_\_\_\_\_      Total Acreage 2
- Explain the current driveway Existing
- Driving Directions take HWY 17 South from Lake City to Happy Valley  
Glw turn left residence is 1/4 mile on left 7th lot on left.
- Is this Mobile Home Replacing an Existing Mobile Home yes
- Name of Licensed Dealer/Installer Donnie Perkins      Phone # 352-598-8830  
352-622-5905
- Installers Address 2713 NE Hwy 329 - Anthony, FL 32617
- License Number IHO000460      Installation Decal # 227653

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SHANNONS

**PERMIT NUMBER**

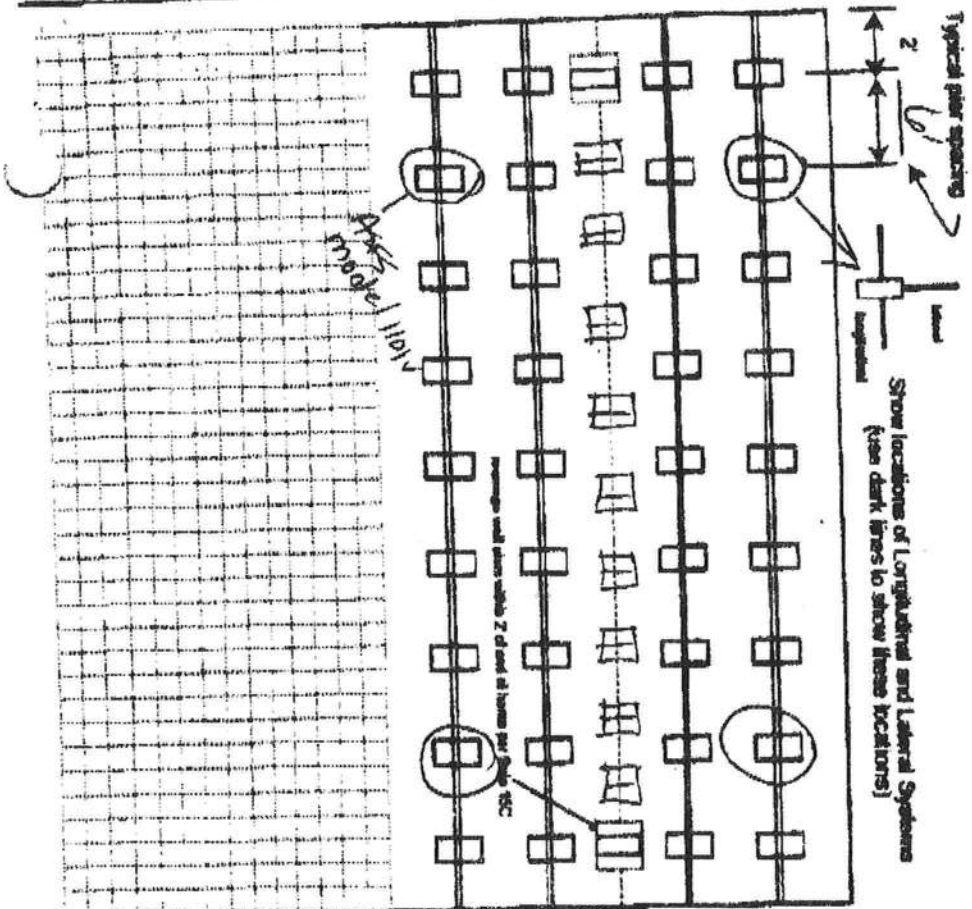
Installer Donald Perkins License # IKK00000

Address of home being installed High Springs Fl.

Manufacturer Palm Harbor Length x width 60 x 32

NOTE: If home is a single wide fill out one half of the following plan. If home is a triple or quad wide submit in remainder of house.

1. Underlaid Lateral Arm Systems cannot be used on any home (new or used) where the shortest line exceed 5 ft 4 in. Installer's initials DP



PERMITS: W/UNDERLAYS

Page 1 of 4

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 # 227653

Triple/Quad  Serial # PH0213402 P/B FL

**PIER SPACING TABLE FOR USED HOMES**

| Load bearing capacity (sq ft) | Feeder size (sq in) | 16' x 16' (256) | 16 1/2' x 16 1/2' (264) | 20' x 20' (400) | 22' x 22' (484) | 24' x 24' (576) | 28' x 28' (784) |
|-------------------------------|---------------------|-----------------|-------------------------|-----------------|-----------------|-----------------|-----------------|
| 1000 pad                      | 7/8"                | 4               | 4                       | 5               | 5               | 7               | 8               |
| 1200 pad                      | 7/8"                | 5               | 5                       | 7               | 7               | 8               | 8               |
| 2000 pad                      | 1"                  | 6               | 6                       | 8               | 8               | 8               | 8               |
| 2500 pad                      | 1 1/8"              | 7               | 7                       | 8               | 8               | 8               | 8               |
| 3000 pad                      | 1 1/4"              | 8               | 8                       | 8               | 8               | 8               | 8               |
| 3500 pad                      | 1 1/2"              | 8               | 8                       | 8               | 8               | 8               | 8               |

**PIER PAD SIZES**

I-beam pier pad size 21 x 29

Perimeter pier pad size N/A

Other pier pad sizes (regulated by the city) N/A

**POPULAR PAD SIZES**

| Pad Size          | Sq ft |
|-------------------|-------|
| 16 x 16           | 256   |
| 16 1/2 x 16 1/2   | 264   |
| 18 1/2 x 18 1/2   | 342   |
| 18 x 22 1/2       | 396   |
| 17 x 22           | 374   |
| 13 1/4 x 26 1/4   | 348   |
| 20 x 20           | 400   |
| 17 5/16 x 20 3/16 | 441   |
| 17 1/2 x 25 1/2   | 441   |
| 24 x 24           | 576   |
| 25 x 28           | 676   |

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

Opening 5' center Pier pad size 21 x 29

21 x 29 pier pad 6'

**MEDIUM COMPONENTS**

Longitudinal Spacing Device (LSD) Manufacturer QINVEL - ABS Model

Longitudinal Spacing Device for Lateral Arms Manufacturer ABS Model 110V

**OTHER TEES**

Subvent 110V Manufacturer 18 1/2 x 24

Longitudinal Marriage wall 4'

Shaveoff 4'

Site Attached

PERMIT NUMBER \_\_\_\_\_

PERMIT WORKSHEET

page 2 of 2

**POCKET PENETROMETER TEST**

The pocket penetrometer tests are rounded down to \_\_\_\_\_ psi or check here to disclose 1000 lb. soil \_\_\_\_\_ without testing.

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

**POCKET PENETROMETER TESTING METHOD**

- 1 Test the penetrometer of the home at 8 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 to \_\_\_\_\_ inch piers or check here if you are declaring 5 anchors without testing \_\_\_\_\_ A test showing 275 inch piers or less will require 4 foot anchors.

Note: A scale supported lateral arm system is being used and 4 ft. anchors are allowed at the selected locations. 1 standard 5 ft. anchors are required at all corners the 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 \_\_\_\_\_

Insulated \_\_\_\_\_

Connect electrical conduits 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 \_\_\_\_\_ Part \_\_\_\_\_ Other \_\_\_\_\_

**Foundation wall details**

Floor: \_\_\_\_\_  
Walls: Type Fastener:  $\phi 10.9$  Length:  $\frac{3}{8}$  Spacing:  $16"$   
Type Fastener: D 5000 Length: 8" ID Spacing: 12"  
Roof: Type Fastener: NAIL Length: 30 Gauge, 8" wide, galvanized metal strip  
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with gwy.  
Roofing nails at 2' on center on both sides of the centerline.

**General Insulating Requirements**

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, moisture and ducted methane leaks 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: *DP*

Type gasket: Foam Installed:   
Pg. 10-13 Between Floors: Yes   
Between Walls: Yes   
Bottom of ridgebeam: Yes

**Sub-roofing**

The battboard will be repaired and/or lapped. Yes  Pg. 10-13  
Sealing on urals is installed to manufacturer's specifications. Yes   
Freeston chimney installed so as not to allow infusion of rain water. Yes

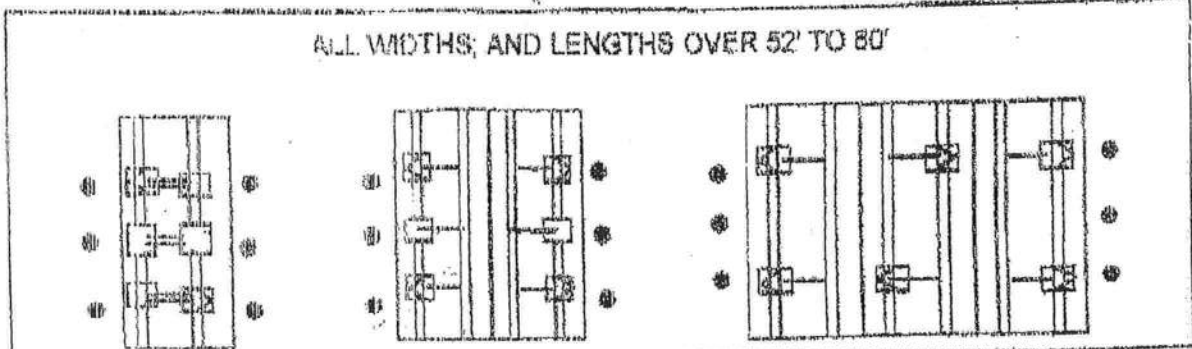
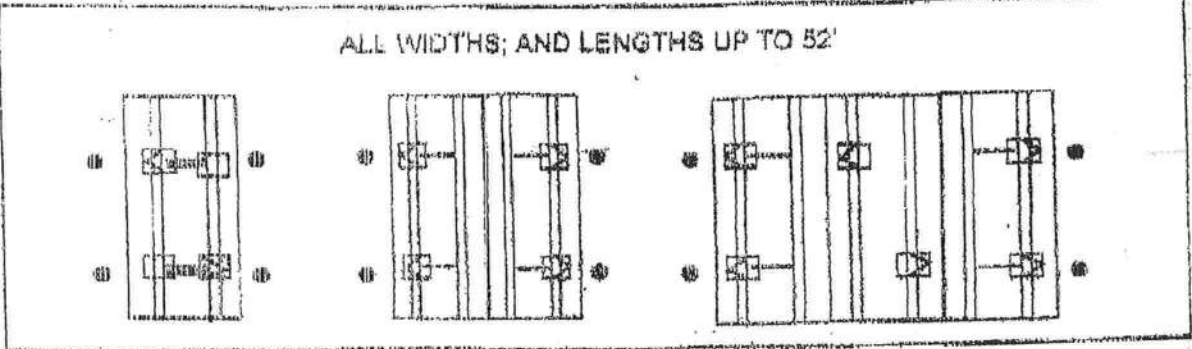
**Weatherstripping**

Starting to be installed. Yes  No \_\_\_\_\_  
Dryer vent installed outside of shirting. Yes \_\_\_\_\_ N/A  
Range downflow vent installed outside of shirting. Yes \_\_\_\_\_ N/A  
Drain lines supported at 4 foot intervals. Yes \_\_\_\_\_  
Electrical crossovers provided. Yes \_\_\_\_\_  
Other: \_\_\_\_\_

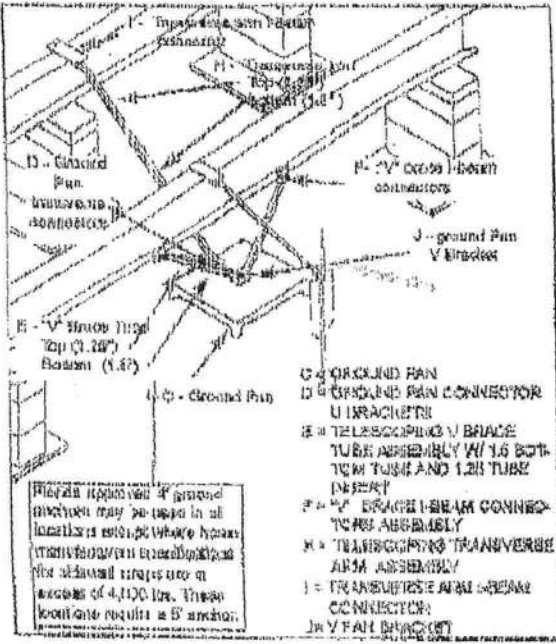
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and/or Rule 19C-1 & 2

Installer Signature: *Dunnie Perkins* 12/20/04

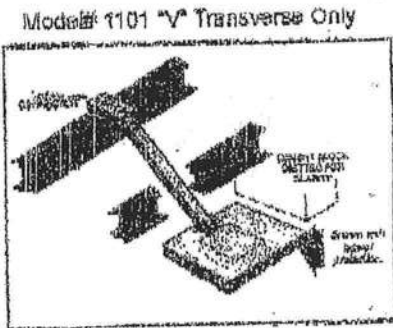
**REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" BRACES FOR UP TO 4/12 ROOF PITCH**



**HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS**  
 6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'. One stabilizer plate and frame tie required at each lateral bracing system.



- NOTES:**
1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
  2. ○ = STABILIZER PLATE AND FRAME TIE LOCATION
  3. [Symbol] = LOCATION OF ASF MODEL 1101 "V" (LATERAL & LONGITUDINAL BRACING)
  4. [Symbol] = LOCATION OF MODEL 1101-L "V" (LONGITUDINAL BRACING ONLY)
  5. [Symbol] = LOCATION OF MODEL 1101 "V" (LATERAL ARM ONLY)



PATENT PENDING      REVISED INSTRUCTIONS 8/15/02

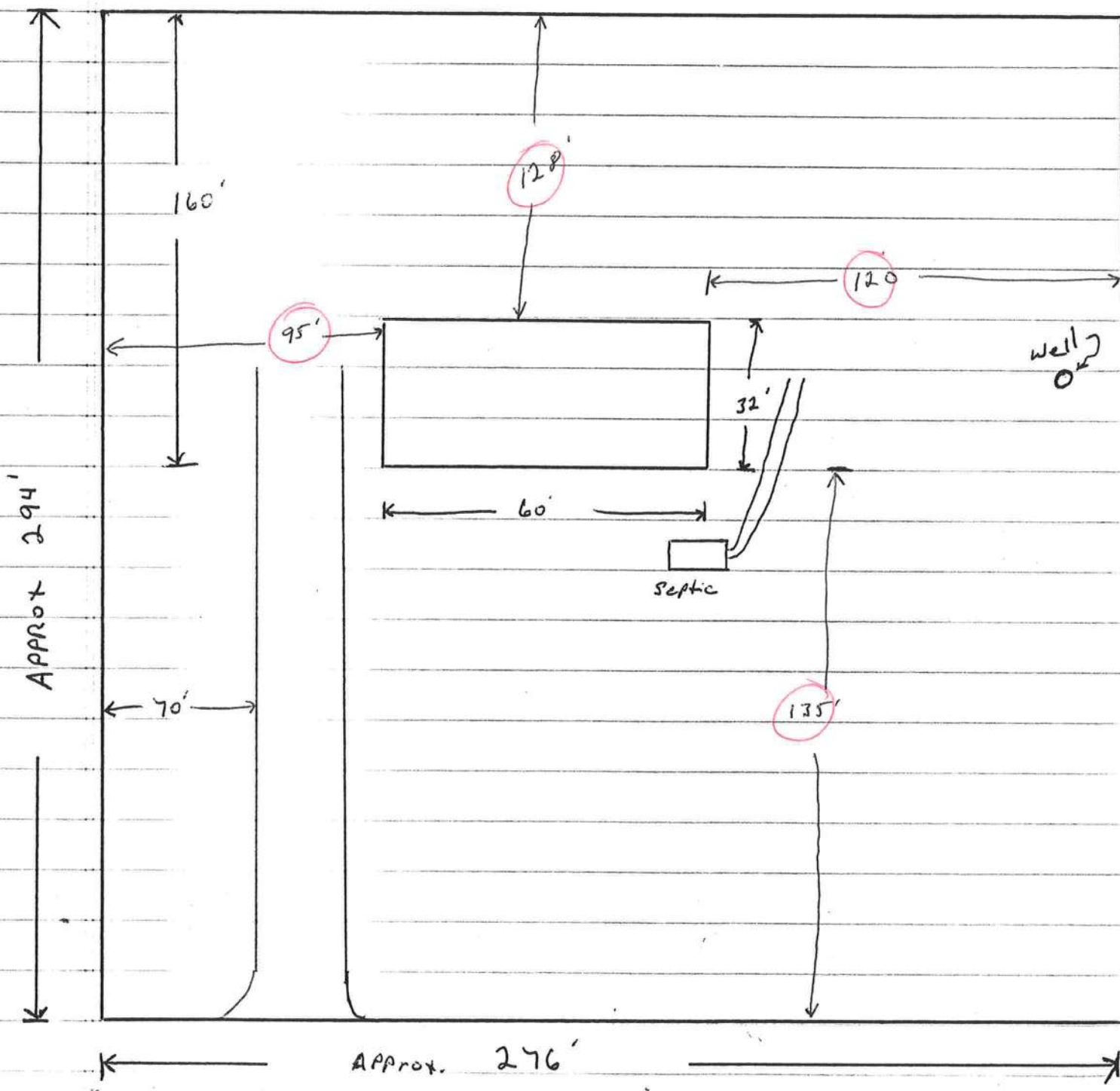


MANUFACTURED HOUSING FOUNDATION SYSTEMS  
 A DIVISION OF OLIVER TECHNOLOGIES, INC.  
 1-800-284-7437

Telephone: 888-798-4656  
 Fax: 888-756-8811  
 www.olivertechnologies.com

Parcel # 15-75-17-09986-010

Lot 9 of Happy Valley Subdivision



# WARRANTY DEED

This Indenture made this 4th day of August, 2004 BETWEEN CHANDLER L. DANIELS, a Single Man, and RITA C. MOSELEY, a Single Woman, GRANTOR\*, whose post office address is P.O. BOX 1864, HIGH SPRINGS, FL 32655 and KENNETH E. CRUSE and BELINDA G. CRUSE, HUSBAND AND WIFE, GRANTEE\*, whose post office address is P.O. BOX 2784, HIGH SPRINGS, FL 32655.

WITNESSETH. That said Grantor, for and in consideration of the sum of TEN AND 00/100'S (\$10.00) Dollars and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the grantee and grantee's heirs forever the following described land located in the County of COLUMBIA, State of Florida. to-wit:

Lot Nine (9), of HAPPY VALLEY SUBDIVISION, according to map or plat thereof recorded in Plat Book 4, Page 43, of the Public Records of Columbia County, Florida.

TOGETHER with 1973 "DNMR" Mobile Home having ID#'s G7867A & B and Florida Title #'s 00193576 & 11093577.

SUBJECT TO covenants, restrictions and easements of record, if any; however, this reference thereto shall not operate to reimpose same.

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; that the grantor hereby fully 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, 2003.

\*Singular and plural are interchangeable as context requires.

IN WITNESS WHEREOF. Grantor has hereunto set grantor's hand and seal this day and year first above written.

WITNESSES

*Jannette S. Boyd*  
Typed Name: Jannette S. Boyd

*Chandler L. Daniels*  
CHANDLER L. DANIELS

*Crystal L. Norton*  
Typed Name: Crystal L. Norton

*Rita C. Moseley*  
RITA C. MOSELEY

COUNTY OF Columbia  
STATE OF FLORIDA

THE FOREGOING INSTRUMENT was acknowledged before me on August 4th, 2004 by CHANDLER L. DANIELS, a Single Man, and RITA C. MOSELEY, a Single Woman, who is/are personally known to me or have produced their Driver's Licenses as identification.



Jannette S. Boyd  
MY COMMISSION # DD230332 EXPIRES  
August 7, 2007  
BONDED THRU TROY FAIN INSURANCE, INC.

*Jannette S. Boyd*  
NOTARY PUBLIC, STATE OF \_\_\_\_\_ AT LARGE  
Name: \_\_\_\_\_  
COMMISSION EXPIRATION: \_\_\_\_\_

Permit Authorization

I, Donnie Perkins hereby authorize  
\_\_\_\_\_ to obtain a permit in my behalf  
under my license # ZH 0000460 for the job described  
below: Owner Kenneth E. or Belinda Cruse  
Site Address 387 Happy Valley Gln  
High Springs, FL 32643  
Tax Parcel # 19-78-17-09986-010

Donnie Perkins  
License Signature

State of Florida  
County of Marion

Affirmed and subscribed before me this 5 of August, 2004  
by Donnie Perkins who is personally known to me or who  
has produced \_\_\_\_\_

Marguerite Shannon - \_\_\_\_\_



Marguerite S. Shannon  
Commission # DD 059834  
Expires Nov. 2, 2005  
Bonded Thru  
Atlantic Bonding Co., Inc.