

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official BLK 2612-7 Building Official OK JTH 12-19-07

AP# 0712-56 Date Received 12/18/07 By TS Permit # 26566

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Dedicating 5 acres for dwelling unit

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

Site Plan with Setbacks Shown EH Signed Site Plan EH Release Well letter Existing well

Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer

State Road Access Parent Parcel # _____ STUP-MH _____

NEED Affidavit from Father - received

Property ID # 05-65-16-03778-002 Subdivision _____

New Mobile Home _____ Used Mobile Home _____ Year 2003

Applicant John A Hancock Phone # 386 497 2846

Address 2257 SW Drew Feagle Ave

Name of Property Owner Wayne H Hancock Sr Phone # 386 497 3209

911 Address 2123 SW Drew Feagle Ave, Ft White FL 32038

Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

Name of Owner of Mobile Home John A Hancock Phone # 386 497 2846

Address _____

Relationship to Property Owner Son

Current Number of Dwellings on Property 1 (Dedicating 5 Acres)

Lot Size _____ Total Acreage 15

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 No (ONES)

Driving Directions to the Property From Lake City take 47 south between Columbia City and Ft White Herlong Road turn Right. Follow Herlong Road will 90° turn to the Right and become SW Drew Feagle Ave. 0.5 mile on Right 2257 address marker turn Right. 50 yards Home on Right.

Name of Licensed Dealer/Installer Shawn Shayens Summerfield Phone # 386 864 4648

Installers Address 7093 133rd Rd Live Oak FL 32060

License Number I H0000782 Installation Decal # on order 293498

Call 5750 * left message w/ Shawn

PERMIT NUMBER

PERMIT WORKSHEET

Installer Shawn Sumner Field License # IH0000782

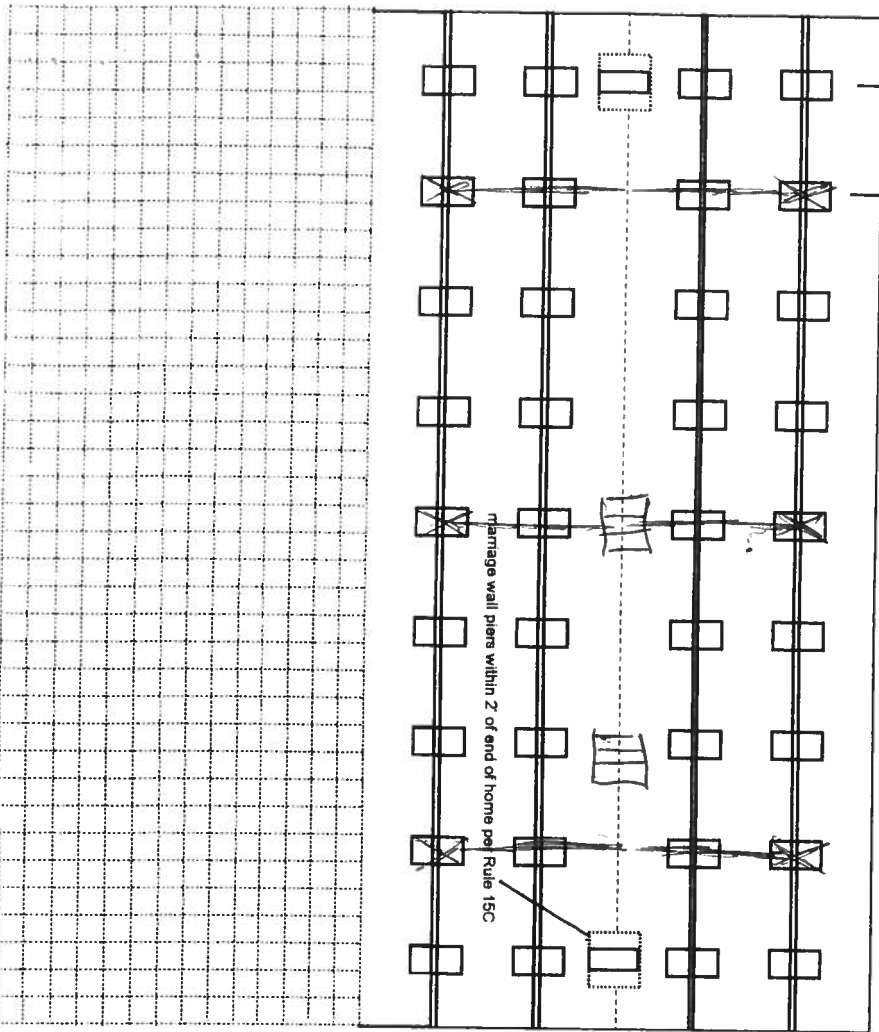
Address of home being installed X

Manufacturer Homes of Merit Length x width 32x60

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 SRS



- 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 # on order
- Triple/Quad Serial # XELHM1388424 26490A-B

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (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 psf	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 22x22
 Perimeter pier pad size 16x16
 Other pier pad sizes (required by the mfg.) 23x31

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

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 13'4" Pier pad size 23x31

ANCHORS

FRAME TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer Vectors
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer Vectors

OTHER TIES

within 2' of end of home spaced at 5' 4" oc 15

Sidewall Longitudinal Marriage wall Shearwall
 Number 15
4
4

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to without testing. with testing. psf

- 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 350 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.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Shawn Summerville
 Date Tested 12/15/07

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 Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: LAG Length: 5" Spacing: 18" o.c.
 Walls: Type Fastener: LAG Length: 6" Spacing: 18" o.c.
 Roof: Type Fastener: LAG Length: 6" Spacing: 18" o.c.
 For used homes a mid 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.

Type gasket Foam Installer's initials SPS
 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

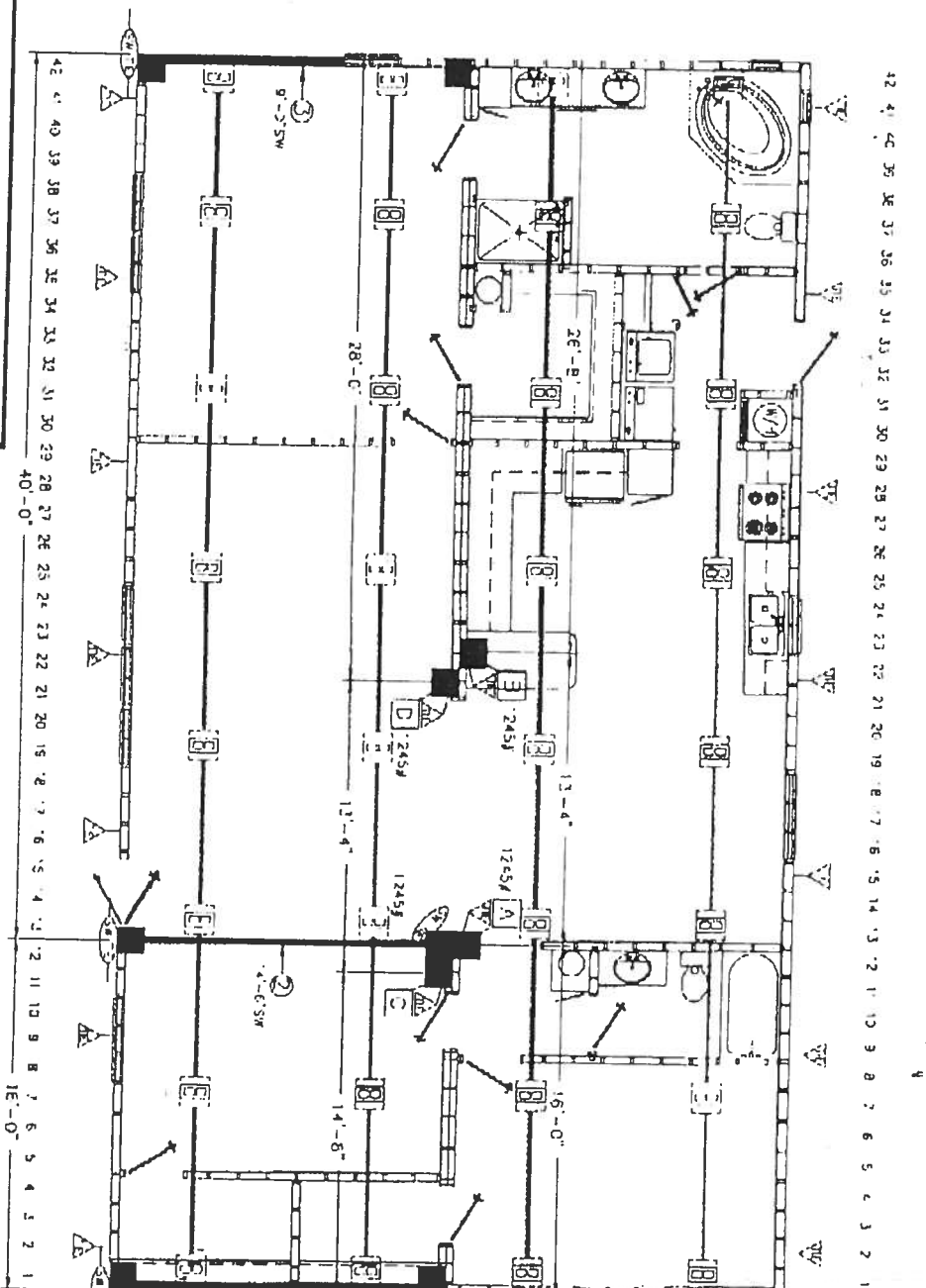
Skirting to be installed. Yes No
 Dryer vent installed outside of skirting. Yes N/A
 Range downflow vent installed outside of skirting. Yes N/A
 Drain lines supported at 4 foot intervals. Yes N/A
 Electrical crossovers protected. Yes

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 [Signature] Date 11/15/07

LENGTH 60'

CAT-D32 THROUGH OUT
NO. 1 WIDE PLATE



42 41 40 39 38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1

42 41 40 39 38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1

WIDTH 32'

BEDROOMS 3
SQUARE FOOTAGE OF
LIVING AREA 1920

SOIL BEARING CAPACITY CHARTS FOR
BLOCK SPACING AT FRAME
COLUMN & SHEARWALL BLOCK PIER
VERTICAL AT SHEARWALL AND COLUMN LOCATION
CENTER LINE LOCATING AT COLUMNS & SHEARWALLS
ONLY WITH 2x8 FLOOR JOIST.
SIDEWALL OPENINGS 4'-0" OR GREATER
REQUIRED BLOCKING EACH SIDE

VERTICAL
MAX SPACING 10'-4" CENTER TO CENTER
MAX 2'-0" FROM ENDS OF HOME
(SHEATHING INSTALLATION AT FACTORY)

		HOME OF MERIT INC. P.O. BOX 2087 HWY. 102 EAST LAKE CITY, FLORIDA 32055	
DATE: 11-97 C/A: STAFF PROJECT: 111C CODE: 9 (36)		REVISIONS: 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.	
DRAWN BY: EAY MANOR (3211) 1-18 CHECKED BY: BOBZ 308 28 FR		PRINT:	



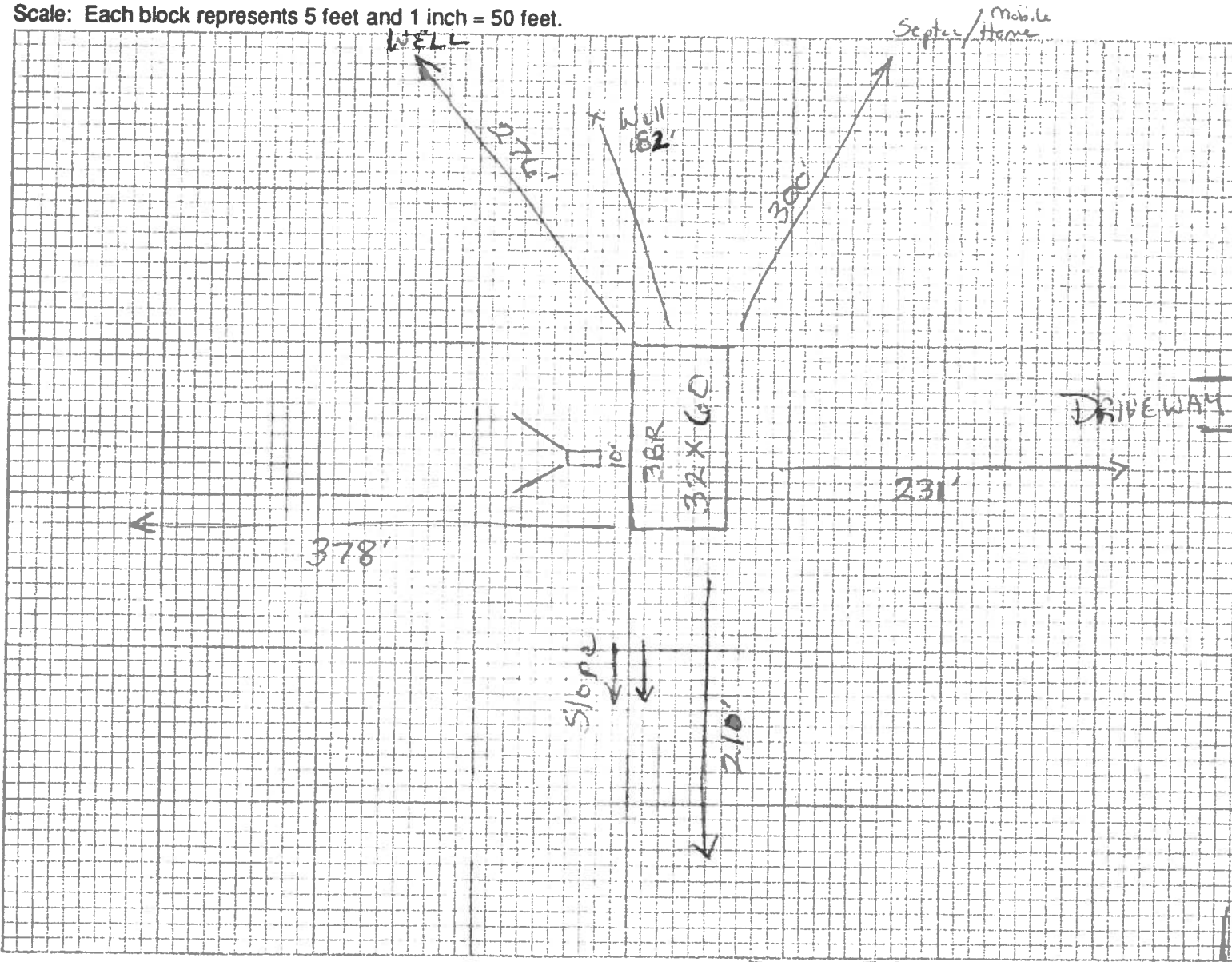
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: 15 acres

SW DREW FEAGLE AVE

Site Plan submitted by: _____

Wayne H. Hancock
Signature

Owner
Title

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

293498

LABEL #

DATE OF INSTALLATION

~~Shawn K. Summerfield~~

~~LP# 00782~~

~~12800~~ DER #

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

FORT WHITE WELL & PUMP

11814 NW 202 STREET
ALACHUA, FLORIDA 32615

(386) 497-BEST (2378)

PHONE 497 2378/497 2378 DATE 12/18/07

NAME John Hancock

ADDRESS 2257 SW Drew Eagle Ave
Fort White FL 32028

QTY.	DESCRIPTION	PRICE	AMOUNT
	Well 72'		
	Casing 69'		
	Water Level 48'		
	Pump Setting 65'		
1	4" Well, 1hp Stainell pump, 60 gallon standard tank, Cycle Stop Valve		3050 00
1	1/2" Flow Filter		125 00
	12 MONTH WARRANTY on System Cap on pump; Excludes Taxes LABOR		
	Thank you call anytime 497 2378 (Best)		
		TAX	
RECEIVED BY	<u>John Hancock 12/18/07</u>	TOTAL	3175 00

5% INTEREST WILL BE CHARGED
AFTER 30 DAYS.

THANK YOU

@ CAM112M01	S	CamaUSA Appraisal System		Columbia County
12/19/2007 11:23		Legal Description Maintenance	92000	Land 002
Year T Property		Sel		AG 000
2008 R 05-6S-16-03778-002		...	27120	Bldg 001 *
		2257 DREW FEAGLE AVENUE FW		Xfea 000 *
HX		HANCOCK WAYNE H SR & F JOYCE	119120	TOTAL B

1	N1/2 OF NW1/4 OF SW1/4, EX	N1/2 OF NE1/4 OF NW1/4 OF	2
3	SW1/4. (AKA PART OF N1/2 OF	LOT 11 ODOM ICHETUCKNEE FARM	4
5	S/D UNR) ORB 761-1032, 879-781		6
7			8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

Mnt 12/03/2001 WANDA

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

COLUMBIA COUNTY 9-1-1 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * E-mail: ron_croft@columbiacountyfla.com

ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

Residential or Other Structure on Parcel Number:
05-6S-16-03778-002

Address Assignments:
2123 SW DREW FEAGLE AVE, FORT WHITE, FL, 32038

Note: This is an existing address. The property owner is relocating the home. They will be utilizing the same access, no change in the address is necessary.

Any questions concerning this information should be referred to the Columbia County 9-1-1 Addressing / GIS Department at the address or telephone number above.

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), Wayne H. Hancock + Joyce Hancock
owner of the below described property:

Tax Parcel No. 05-65-16-03778-002

Subdivision (name, lot, block, phase) _____

Give my permission to John A. Hancock to place a
mobile home travel trailer/single family home (circle one) on the above mentioned
property.

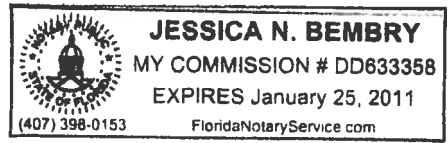
I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Wayne H Hancock Sr
Owner

Joyce Hancock
Owner

SWORN AND SUBSCRIBED before me this 20th day of December,
20 07. This (these) person(s) are personally known to me or produced
ID _____.

Jessica N. Bembry
Notary Signature
Jessica N. Bembry



CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

APP RECEIVED BY IS THE MH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?

OWNER NAME John Harrock PHONE 497-2846 CELL _____

ADDRESS 2123 SW Drew Forks Ave, Ft. White

MOBILE HOME PARK N/A SUBDIVISION N/A

DRIVING DIRECTIONS TO MOBILE HOME 475, TR Hecmont, becomes Drew Forks, 1/2 mile on right (2257) so go on right

MOBILE HOME INSTALLER Shawn Sumner PHONE 386 264-4648 CELL _____

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2003 SIZE 32 x 60 COLOR White

SERIAL NO XFLHML3B8424264 29 A+13

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR

PASS = PASS F = FAILED

- 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 401 DATE 12-20-07

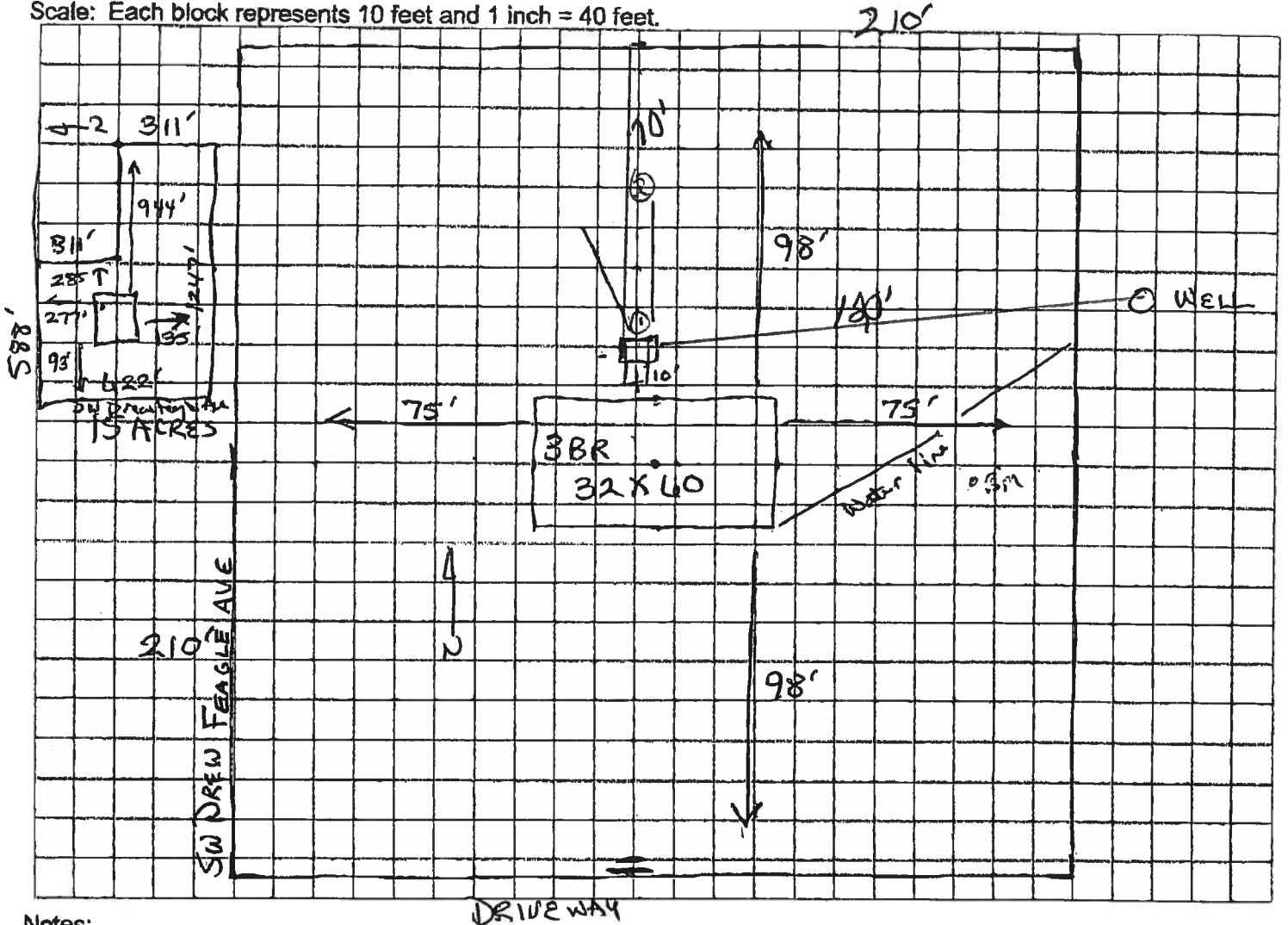
Hancock

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

Permit Application Number 17-0987-N

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

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



Notes: _____

Site Plan submitted by: John A Hancock
 Plan Approved: [Signature]
 By: [Signature]

APPROVED Not Approved
Columbia CHD

Date 12/26/07
 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

REC
RIN 2/1/07

LETTER OF AUTHORIZATION

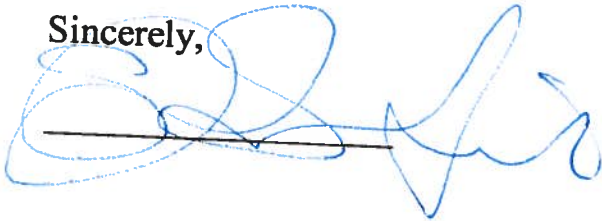
Date: 12/31/07

Columbia County Building Department
P.O. Drawer 1529
Lake City, FL 32056

I Shawn Sommerfield, License No. IHC000782 do hereby

Authorize John Hancock to pull and sign permits on my
behalf.

Sincerely,



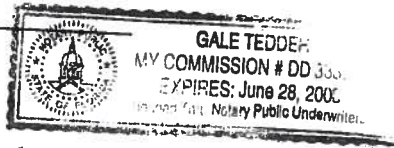
Sworn to and subscribed before me this _____ day of _____, 2007

Notary Public: Gale Tedder

My commission expires: _____

Personally Known _____

Produced Valid Identification: DC



CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12/31 BY JW IS THE MM ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?

OWNERS NAME John Harlock PHONE 497-2846 CELL _____

ADDRESS 2123 SW Daew Feathe Ave, Ft. White

MOBILE HOME PARK _____ N/A _____ SUBDIVISION _____ N/A _____

DRIVING DIRECTIONS TO MOBILE HOME 475, TR Herlong, becomes Daew Feathe, 1/2 mile on right (2257) SO gets on right

MOBILE HOME INSTALLER Shawn Summitt PHONE 386-864-4448 CELL _____

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2003 SIZE 32 x 60 COLOR White

SERIAL No. XFLHML3B842426429 A+13

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

- P F SMOKE DETECTOR () OPERATIONAL () MISSING
- P F FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
- P F DOORS () OPERABLE () DAMAGED
- P F WALLS () SOLID () STRUCTURALLY UNSOUND
- P F WINDOWS () OPERABLE () INOPERABLE
- P F PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
- P F CEILING () SOLID () HOLES () LEAKS APPARENT
- P F ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

- P F WALLS/SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
- P F WINDOWS () CRACKED/BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
- P F ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS: _____

SIGNATURE D. Fletcher ID NUMBER _____ DATE _____

Dany 401 12-31-07

COLUMBIA COUNTY OPEN CALLENDAR

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 05-6S-16-03778-002

Building permit No. 000026566

Permit Holder SHAWN SUMMRFIELD

Owner of Building WAYNE H. HANCOCK, SR. (SON'S M/H-JOHN)

Location: 2123 SW DREW FEAGLE RD, FT WHITE, FL 32038

Date: 02/08/2008

Shawn Summerville

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)