

Parcel:

07-7S-17-09936-003 (45216)

Owner & Property Info

Result: 1 of 2

Owner **GIMENEZ JOSHUA P**
366 SW ROCK WAY
FORT WHITE, FL 32038-8114

Site

Description* COMM SE COR OF NW1/4 OF SW1/4, N 371.97 FT FOR POB, CONT N 135.35 FT, W 321.83 FT, S 135.35 FT, E 321.83 FT TO POB. CT 1281-601, WD 1285-1673, QC 1462-1219

Area 1 AC

S/T/R 07-7S-17

Use Code** VACANT (0000)

Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Brent Strickland PHONE 386-365-7043

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

Joshua Gimenez

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>James Dale Williams</u> Signature 
	License #: <u>EC 13007092</u> Phone #: <u>386-362-2035</u> Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/ A/C	Print Name <u>Michael Boland</u> Signature 
	License #: <u>CAC 1817716</u> Phone #: <u>352-351-3926</u> Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



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

LICENSED QUALIFIER AUTHORIZATION

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

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dale Ford</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Ricky Ford</u>	3. <u>[Signature]</u>
4.	4.
5.	5.

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

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

[Signature] License Qualifiers Signature (Notarized) CA1817716 License Number ES120920 Date 11/17/15

NOTARY INFORMATION:
 STATE OF: Florida COUNTY OF: Marion

The above license holder, whose name is Michael A. Boland personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 17th day of November, 2015

[Signature]
 NOTARY'S SIGNATURE

(Seal/Stamp)





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

I, Dale Williams (license holder name), licensed qualifier

for Affordable Electric (company name), do certify that

the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burd	1.
2.	2.
3.	3.
4.	4.
5.	5.

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

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

James D. Williams License Holders Signature (Notarized) EC13007092 License Number 1-07-19 Date

NOTARY INFORMATION:

STATE OF Florida COUNTY OF Columbia

The above license holder, whose name is James D. Williams personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 7th day of January, 2019

Charlotte R. DeDane (Harold)
 NOTARY'S SIGNATURE (Seal/Stamp)



PERMIT NUMBER

Installer Brent Strickland License # IH 1104218

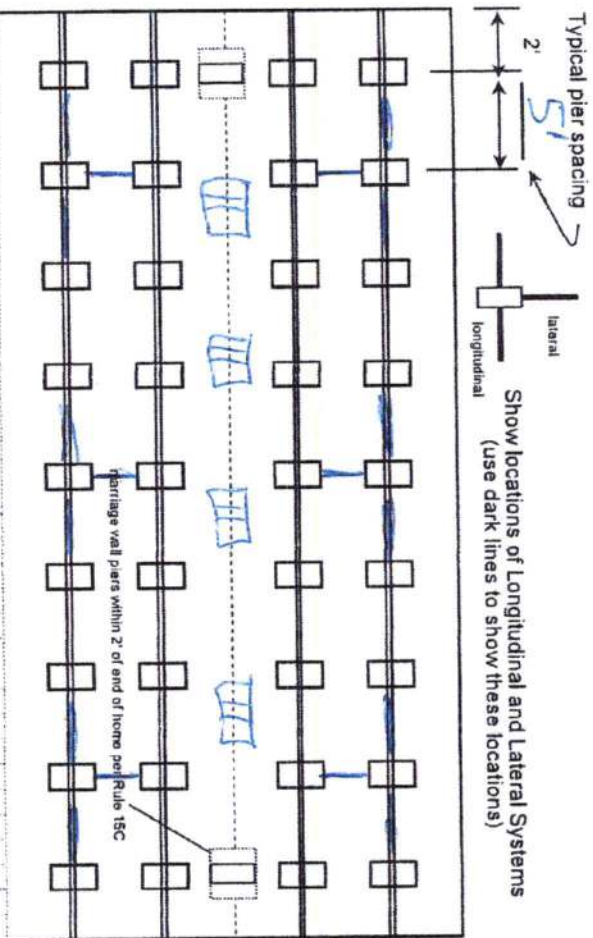
Installer Mobile Phone # 386-365-7043

Address of home being installed 426 SW Rock Way, Fort White, FL 32038

Manufacturer Live Oak Length x width 56x28

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 P.S.



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 # 88690

Triple/Quad Serial # LDHGA20037605AB

Roof System: Typical Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4.6"	6'	7'	8'	8'	8'
2000 dsf	6"	8'	8'	8'	8'	8'
2500 dsf	7.6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17x25
 Perimeter pier pad size 16x16
 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 _____

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

ANCHORS

4 ft 5 ft _____

FRAME TIES

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

OTHER TIES

Number _____

TIEDOWN COMPONENTS

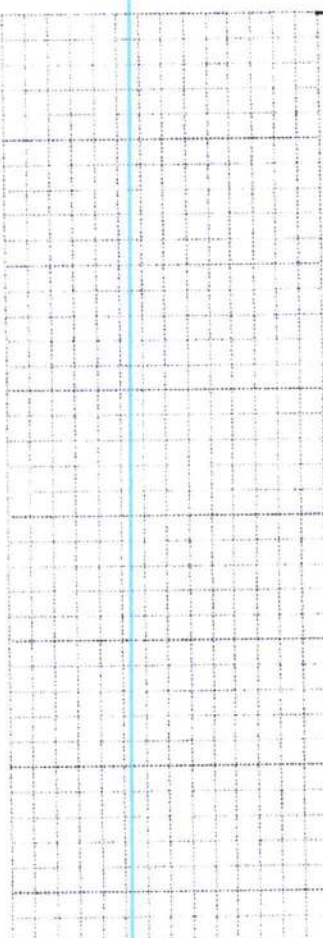
Longitudinal Stabilizing Device (LSD) _____

Manufacturer Driver 110N

Sidewall _____

Longitudinal Marriage wall _____

Shearwall _____



PERMIT NUMBER

POCKET PENETROMETER TEST

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

X 1000 X 1000 X 1000

- 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 1000 X 1000 X 1000

TORQUE PROBE TEST

The results of the torque probe test is 240 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.

BS. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Brent Strickland
Date Tested 4-20-22

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. 28
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

Site Preparation

Debris and organic material removed Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: lags Length: 5" Spacing: 16"
 Walls: Type Fastener: anchors Length: 4" Spacing: 16"
 Roof: Type Fastener: lags Length: 8" Spacing: 16"
 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 BS.

Type gasket FERM
Pg. 28

Installed:
Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

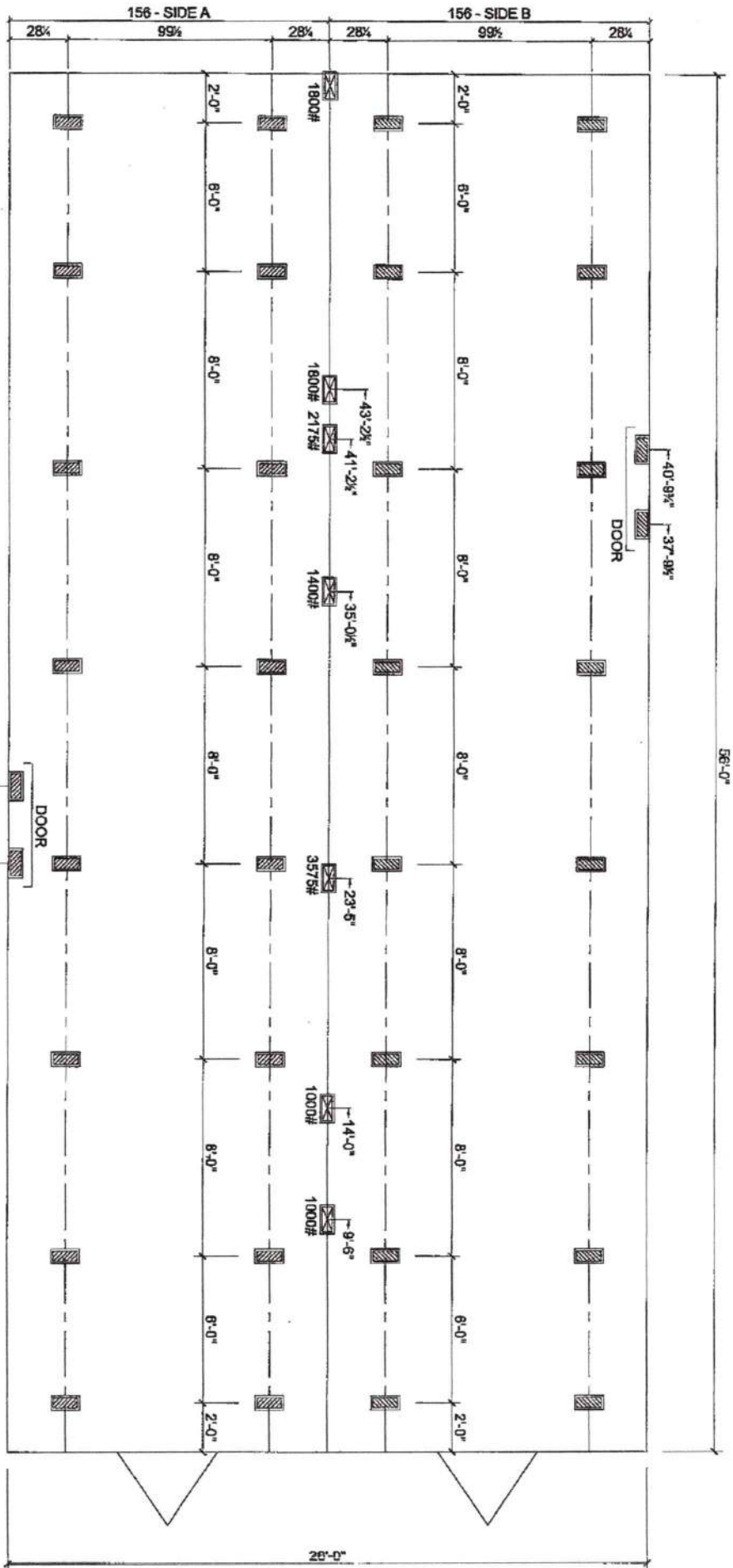
The bottomboard will be repaired and/or taped. Yes Pg. 28
Sliding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

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

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature B. Strickland Date 4-20-22



MARRIAGE LINE OPENING SUPPORT PIERTYP.
 SUPPORT PIERTYP

5-10-2018

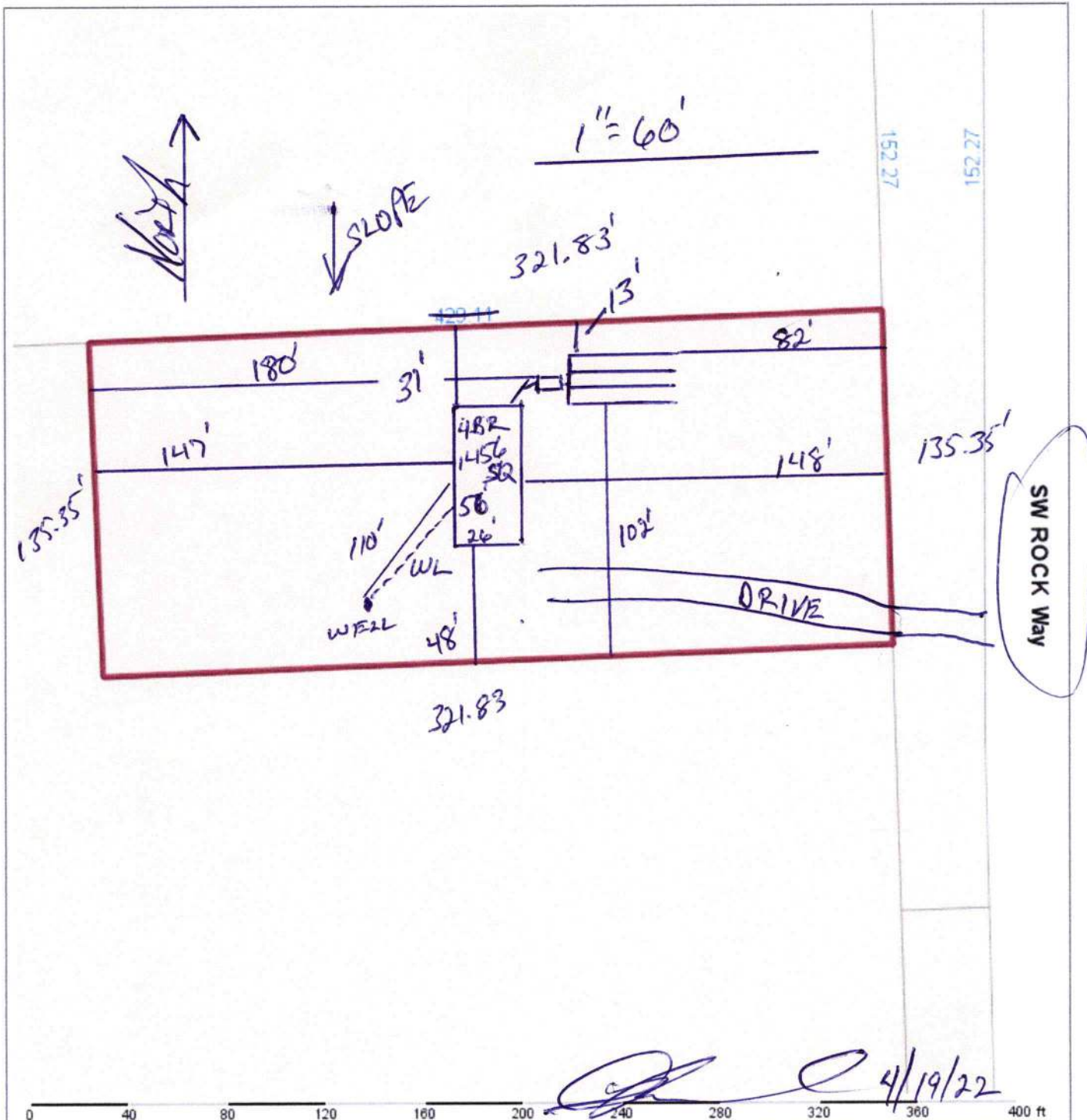
FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: L-2564F - 28 X 56
3-BEDROOM / 2-BATH

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (W/OPT. HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)

L-2564F



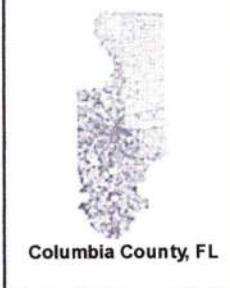
0 40 80 120 160 200 240 280 320 360 400 ft

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

PARCEL: 07-7S-17-09936-003 (45216) | VACANT (0000) | 1 AC
 COMM SE COR OF NW1/4 OF SW1/4, N 371.97 FT FOR POB, CONT N 135.35 FT, W 321.83 FT, S 135.35 FT, E 321.83 FT
 TO POB. CT 1281-601, WD 1285-1673, QC 146

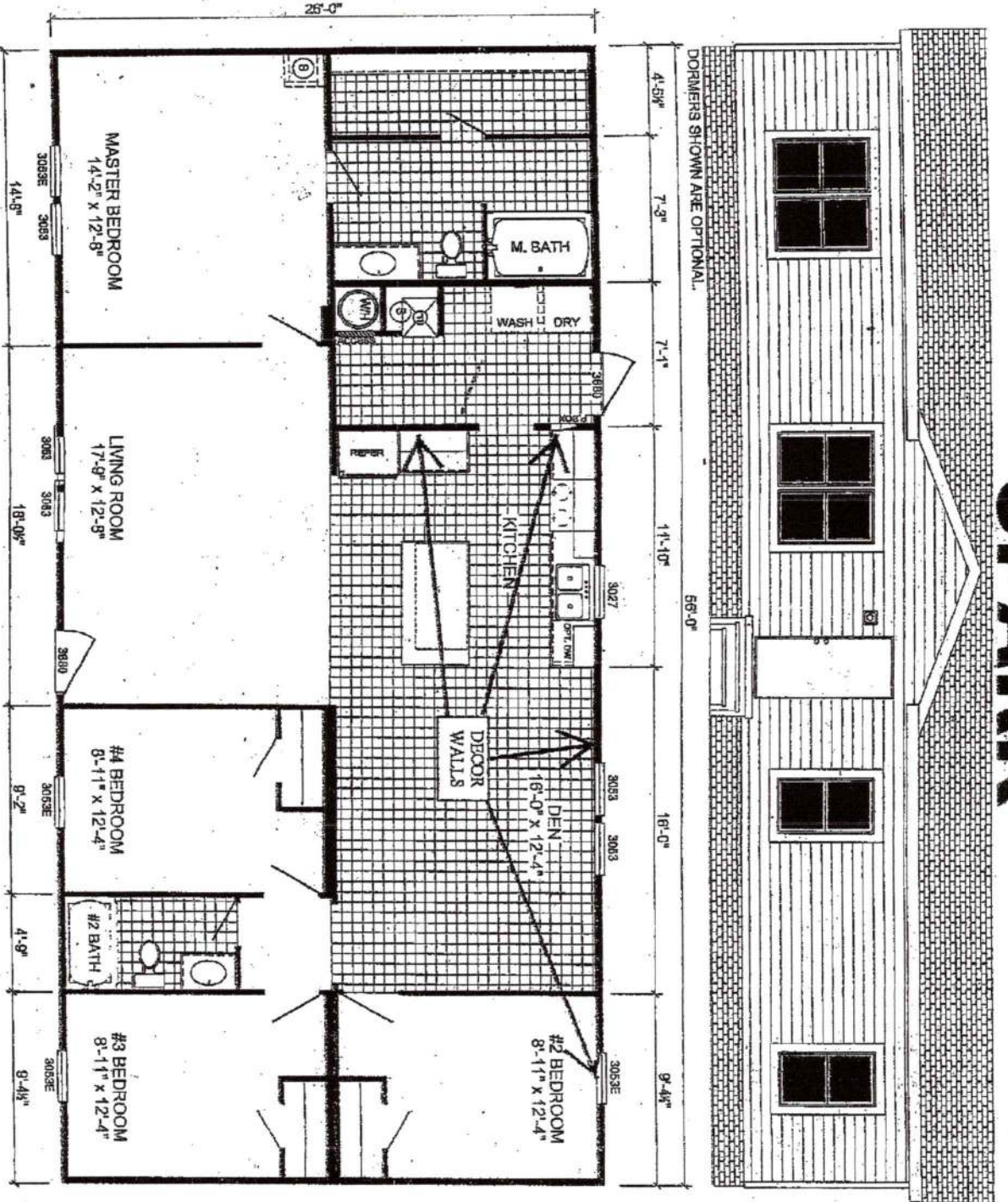
NOTES:

GIMENEZ JOSHUA P		2022 Working Values		
Owner: 366 SW ROCK WAY	Mkt Lnd	\$10,000	Appraised	\$10,000
FORT WHITE, FL 32038-8114	Ag Lnd	\$0	Assessed	\$10,000
Site:	Bldg	\$0	Exempt	\$0
Sales	XFOB	\$0	county:	\$4,769
Info 3/22/2022 \$100 V(U)	Just	\$10,000	city:	\$0
			other:	\$0
			school:	\$10,000
			Total	
			Taxable	



This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com

SPARK



L-2564F

4-BEDROOM / 2-BATH

28 x 60 - Approx. 1456 Sq. Ft.

Date: 4-4-2018

* All room dimensions include closets and square footage figures are approximate.
 * Transom windows are available on optional 9'-0" sided houses only.



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **4/20/2022 11:56:46 AM**

Address: **426 SW ROCK Way**

City: **FORT WHITE**

State: **FL**

Zip Code **32038**

Parcel ID **09936-003**

REMARKS: **New address for Habitable structure (family home, business, etc.) on the parcel.**

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

Address Issued By: **MOORE, DAVID R.**