

New Blocking forms & New Authorization form

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

7-16-18

For Office Use Only (Revised 7-1-15) Zoning Official LD Building Official WD 6-21-18

AP# 1806-53 Date Received 6/18 By [Signature] Permit # 36974

Flood Zone X Development Permit _____ Zoning RSE-MH#2 Land Use Plan Map Category RCD

Comments replacing existing mobile home

FEMA Map# _____ Elevation _____ Finished Floor 1 above grade River _____ In Floodway _____

Recorded Deed or Property Appraiser PO Site Plan EH # 18-0505 Well letter OR

Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid

DOT Approval Parent Parcel # _____ STUP-MH _____ 911 App

Ellisville Water Sys Assessment _____ Out County In County 7-9-18 Sub VF Form

Property ID # 17-35-17-04967-152 Subdivision FIRE PINE APNS Lot# 11-U-3

- New Mobile Home _____ Used Mobile Home X MH Size 24x40 Year 1991
- Applicant Bill Harvey JR. Phone # 985-513-9587
- Address 690 NE Colvin Ave Lake City FL 32055
- Name of Property Owner Bill Harvey Phone# 985-513-9587
- 911 Address 690 NE Colvin Ave Lake City FL 32055
- Circle the correct power company - XFL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home JAMES AS ALLEN Phone # SAME AS ABOVE
Address _____
- Relationship to Property Owner SELF/OWNER
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 1 acre
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Driving Directions to the Property Take 441 N To Tammy Lane TAKE Tammy Down to Colvin Ave TURN LEFT on Colvin And its the first place on the left (CORNER of Colvin & Ralph Green)
- Name of Licensed Dealer/Installer Brent Stoddard Phone # 365-7043
- Installers Address 1294 NW Hamp Farms Rd Lake City FL 32055
- License Number EH 1104218 Installation Decal # 43905

Installer - wj
7-6-18

Ut - Left a message for the Installer 6-21-18 - Spoke to Installer 6-21-18
Ut - Spoke to Mr. Harvey 6-25-18 Spoke w/ Bill 6-26-18 6-27-18

Mobile Home Permit Worksheet

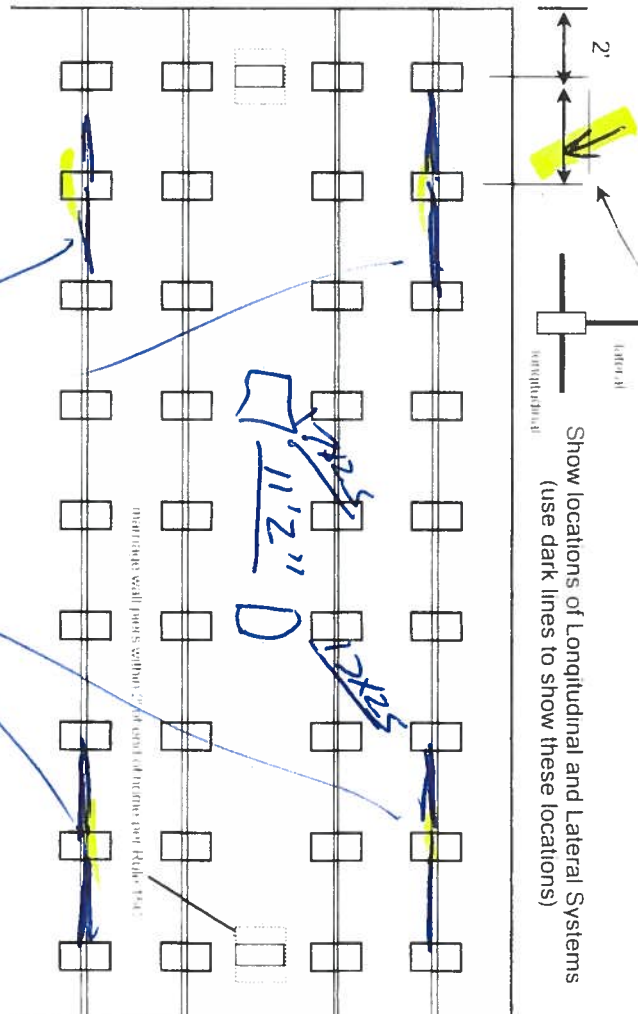
Application Number: _____ Date: _____

Installer Brant Stitzel License # TH1104218
 Address of home being installed 690 N.E. Calvin Ave
Lake City FL 32055

Manufacturer Horton Length x width 24x40

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 [Signature]



Model 1101CV other system
I Beam Blocked 5' O.C
17x25 ABS PAD

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 # 43905

Triple/Quad Serial # GIAFLMOSQ18152C14

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (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 17x25
 Perimeter pier pad size 16x16
 Other pier pad sizes (required by the mfg) _____

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 11'2" Pier pad size 17x25

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

FRAME TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____
 Manufacturer OTI
 Longitudinal Stabilizing Device w/ Lateral Arms _____
 Manufacturer _____

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall _____
 Number _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 295 inch pounds or check here if you are declaring 5' anchors without testing A test showing 275 inch pounds or less will require 5 foot anchors

Note: A state approved lateral arm system is being used and 4 ft anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb bonding capacity

BS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Brent Strickland

Date Tested

7/3/18

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 _____

Plumbing

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 Natural Swale Pad Other

Fastening multi wide units

Floor/Walls/Roof	Type Fastener	Length	Spacing
	<u>Lags</u>	<u>4"</u>	<u>24" OC</u>
	<u>Screws</u>	<u>4"</u>	<u>10" OC</u>
	<u>CS</u>	<u>6"</u>	<u>24" OC</u>

For used homes a 4mm 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 Roll foam

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
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

Brent Strickland Date 7-6-18

OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM
MODEL 1101"V" (STEPS 1-15)
LONGITUDINAL ONLY: FOLLOW STEPS 1-9
FOR ADDING LATERAL ARM : Follow Steps 10-15
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - **STOP! Contact Oliver Technologies at 1-800-284-7437 :**
 a) Pier height exceeds 48" b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96"
 e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C) .
 3. Place ground pan (C) directly below chassis I-beam . Press or drive pan firmly into soil until flush with or below soil.
SPECIAL NOTE: The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4" . VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.) .

4. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

PIER HEIGHT (Approx. 45 degrees Max.)	1.25" ADJUSTABLE Tube Length	1.50" ADJUSTABLE Tube Length
--	---------------------------------	---------------------------------

7 3/4" to 25"	22"	18"
24 3/4" to 32 1/4"	32"	18"
33" to 41"	44"	18"
40" to 48"	54"	18"

5. Install (2) of the 1.50" square tubes (E {18" tube}) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
 6. Place I-beam connector (F) loosely on the bottom flange of the I-beam .
 7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.
 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
 9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.

NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. **NOTE:** Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
 11. **NOTE:** Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
 12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
 13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
 14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
 15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.



INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.
- a) The concrete shall be minimum 2500 psi mix
 - b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - c) Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - d) If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.



LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer **OR** When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

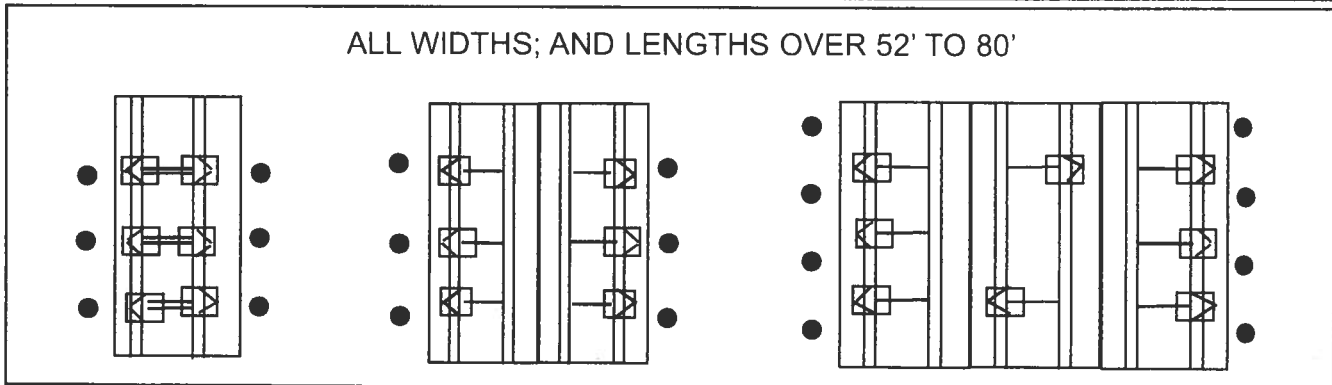
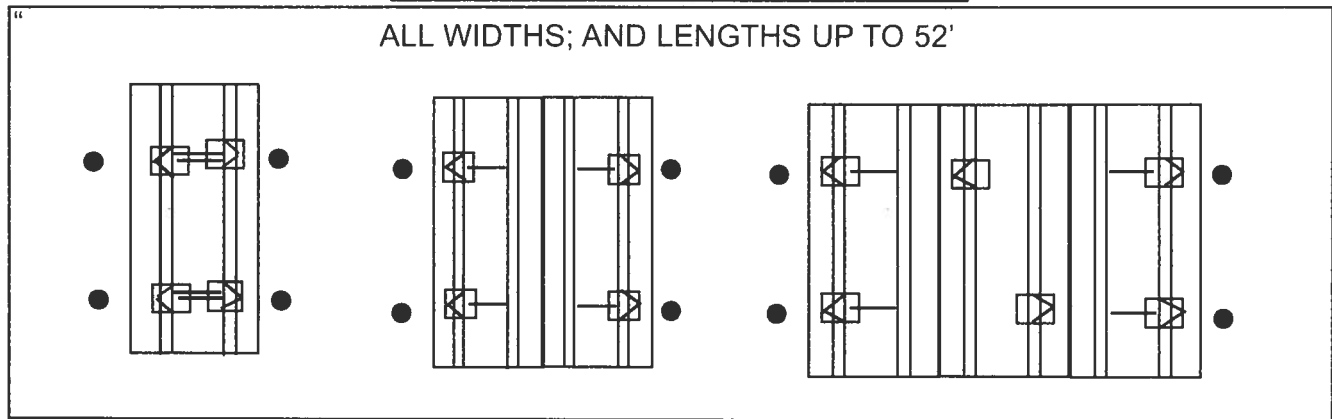
LATERAL: (Model 1101 TC "V")

18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

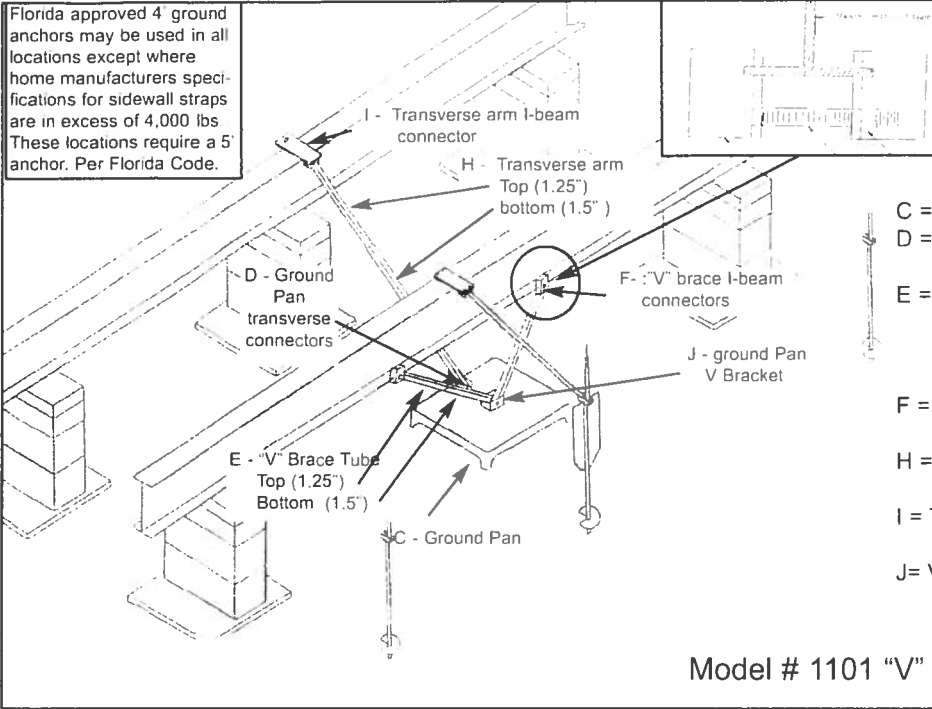
1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
2. ● = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
3.  LOCATION OF LONGITUDINAL BRACING ONLY
4.  = TRANSVERSE & LONGITUDINAL LOCATIONS

REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "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 to 80'. One stabilizer plate and frame tie required at each lateral bracing system.

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.

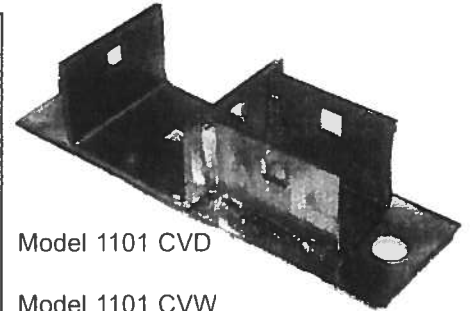
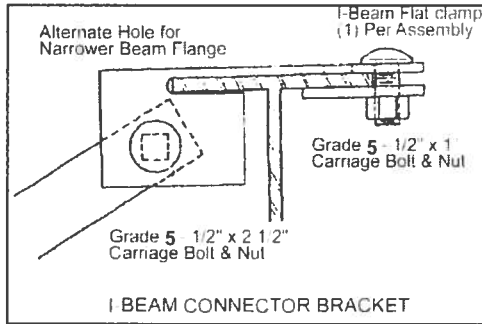
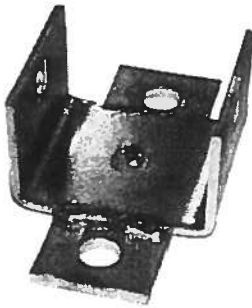


- C = GROUND PAN
- D = GROUND PAN CONNECTOR U BRACKETS TRANSVERSE
- E = TELESCOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTORS ASSEMBLY
- H = TELESCOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- J = V PAN BRACKET

Model # 1101 "V"

Longitude dry concrete bracket part # 1101 D-CPCA

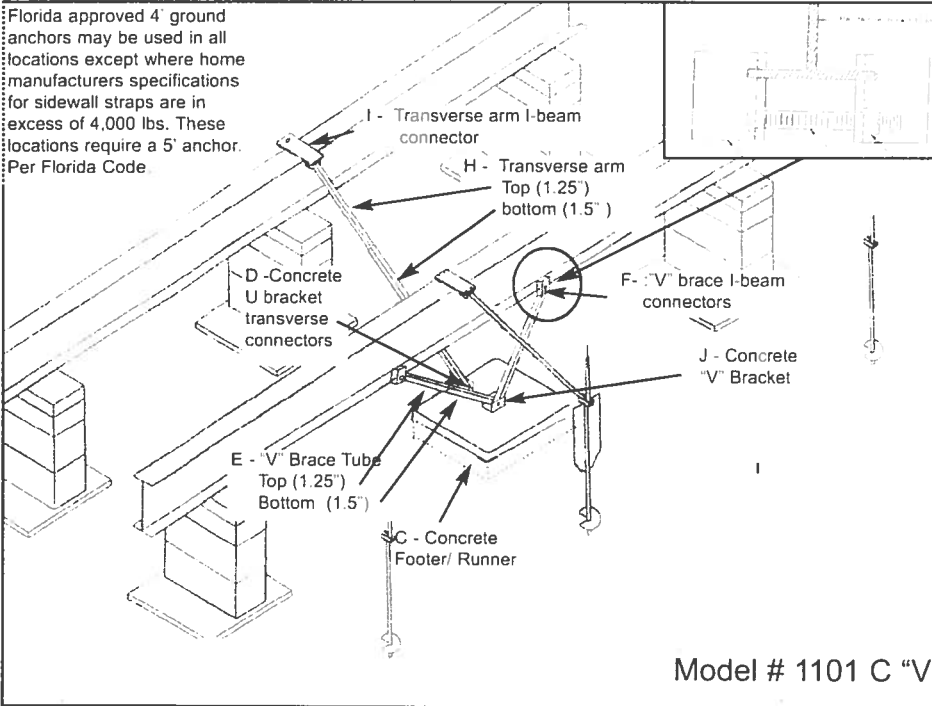
Wet bracket part # 1101 W-CPCA not shown



Model 1101 CVD

Model 1101 CVW not shown

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.



- C = CONCRETE FOOTER/RUNNER
- D = CONCRETE U BRACKET TRANSVERSE CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- E = TELESCOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY (connects with grade 5 - 1/2" x 4" carriage bolt & nut)
- H = TELESCOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- J = CONCRETE "V" BRACKET (connects with grade 5 - 1/2" x 4" carriage bolt & nut)

Model # 1101 C "V"



Mobile Home

Applicant: BILL HARVEY (985-513-9587) Application Date: 7/6/2018

Action ▾

1. JOB LOCATION

Completed Inspections

Add Inspection

Release Power

2. CONTRACTOR

Schedule Inspection ([ScheduleInspection.aspx?id=38827](#))

3. MOBILE HOME
DETAILS

Inspection	Date	By	Notes
Passed: Mobile Home - In County Pre-Mobile Home before set-up	7/9/2018	TROY CREWS	



4. APPLICANT

5. REVIEW

The completion date must be set To release Certifications to the public.

6. FEES/PAYMENT

Permit Completion Date
(Releases Occupancy and Completion Forms)

7.
DOCUMENTS/REPORTS
(1)

Incomplete Requested Inspections

Inspection	Date	By	Notes
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8.
NOTES/DIRECTIONS

9. INSPECTIONS (1)

Columbia County Property Appraiser

updated: 6/4/2018

2017 Tax Year

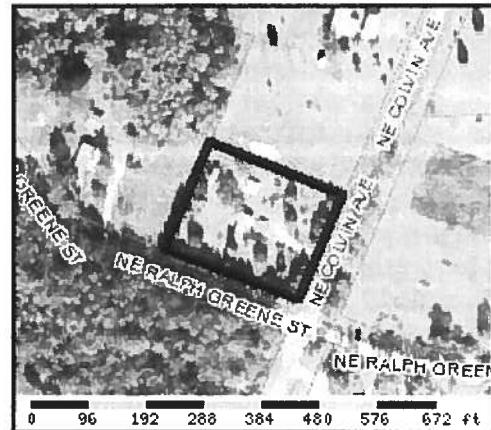
Parcel: 17-3S-17-04967-152

<< Next Lower Parcel Next Higher Parcel >>

<< Prev Search Result: 2 of 9 Next >>

Owner & Property Info

Owner's Name	HARVEY LITTLE BILL JR		
Mailing Address	690 NE COLVIN AVE LAKE CITY, FL 32055		
Site Address	690 NE COLVIN AVE		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	2 (County)	Neighborhood	17317
Land Area	1.040 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 11 UNIT 3 FIVE POINTS ACRES S/D. ORB 805-1632, 907-2508, 931-548, DIV 1143- 1996.			



Property & Assessment Values

2017 Certified Values		
Mkt Land Value	cnt: (0)	\$8,874.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$4,412.00
XFOB Value	cnt: (2)	\$1,136.00
Total Appraised Value		\$14,422.00
Just Value		\$14,422.00
Class Value		\$0.00
Assessed Value		\$14,422.00
Exempt Value	(code: HX H3)	\$14,422.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

2018 Working Values		
Mkt Land Value	cnt: (0)	\$9,561.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$4,758.00
XFOB Value	cnt: (2)	\$1,136.00
Total Appraised Value		\$15,455.00
Just Value		\$15,455.00
Class Value		\$0.00
Assessed Value		\$14,725.00
Exempt Value	(code: HX H3)	\$14,725.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
5/21/2001	931/548	WD	V	U	01	\$3,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1985	BELOW AVG. (03)	672	992	\$4,758.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	2001	\$336.00	0000001.000	0 x 0 x 0	(000.00)
0030	BARN,MT	2001	\$800.00	0000001.000	0 x 0 x 0	(000.00)

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1806-53 CONTRACTOR ANDREWS, JEFF PHONE 386 678-2851

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.

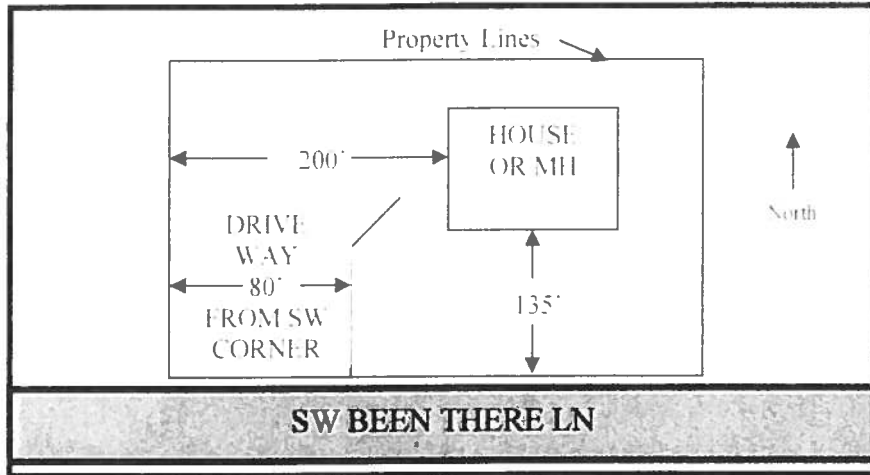
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<p>ELECTRICAL</p>	<p>Print Name <u>Bill Harvey</u></p> <p>License #: <u>—</u></p>	<p>Signature <u>Bill Harvey</u></p> <p>Phone #: <u>985-513-9587</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>
<p>MECHANICAL/ A/C</p>	<p>Print Name <u>Bill Harvey</u></p> <p>License #: <u>—</u></p>	<p>Signature <u>Bill Harvey</u></p> <p>Phone #: <u>985-513-9587</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>

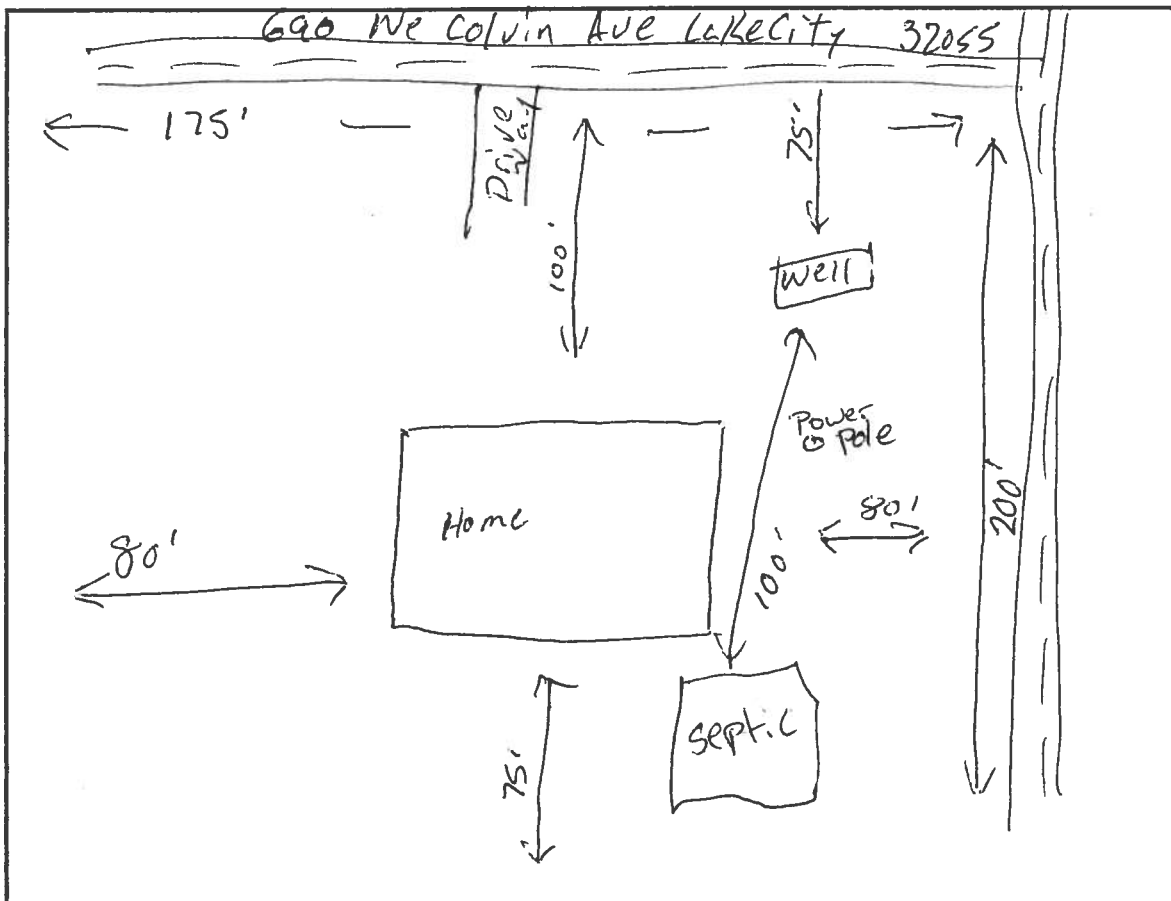
F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10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

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND/OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



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

COUNTY THE MOBILE HOME IS BEING MOVED FROM Swannee county

OWNERS NAME _____ PHONE _____ CELL _____

INSTALLER Jeffery Andrews PHONE 386-628-2851 CELL 386-628-2851

INSTALLERS ADDRESS 9469 NW 44th lane Lake Butler Fl 32054

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1991 SIZE 24 X 40

COLOR grey SERIAL No. GAFlmoSBI8152CH

WIND ZONE II SMOKE DETECTOR NO

INTERIOR:

FLOORS good

DOORS good

WALLS good

CABINETS good

ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:

WALLS / SIDING good

WINDOWS good

DOORS good

INSTALLER: APPROVED NOT APPROVED

INSTALLER OR INSPECTORS PRINTED NAME _____

Installer/Inspector Signature [Signature] License No. 1H/1125170 Date June 18-18

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature] Date 6-25-18



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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Jeffery ANDREWS, give this authority for the job address show below
Installer License Holder Name
 only, 690 NE OLIVIN AVENUE, and I do certify that
Job Address

the below referenced person(s) listed on this form 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 Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Bill Harvey	<i>Bill Harvey</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

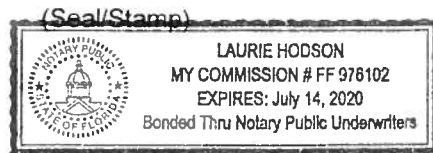
Jeffery Andrews License Holders Signature (Notarized) JH/1125470 License Number 6-18-18 Date

NOTARY INFORMATION:

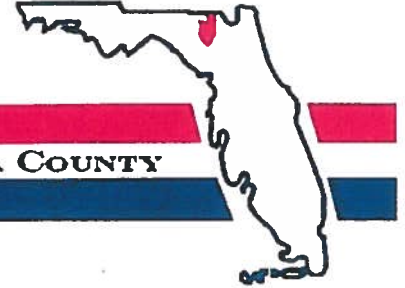
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Jeffery ANDREWS personally appeared before me and is known by me or has produced identification (type of I.D.) DL on this 18th day of JUNE, 2018.

Laurie Hodson
 NOTARY'S SIGNATURE



District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

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: 6/21/2018 9:44:54 AM
Address: 690 NE COLVIN Ave
City: LAKE CITY
State: FL
Zip Code 32055

Parcel ID 04967-152

REMARKS: Address Verification.

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: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

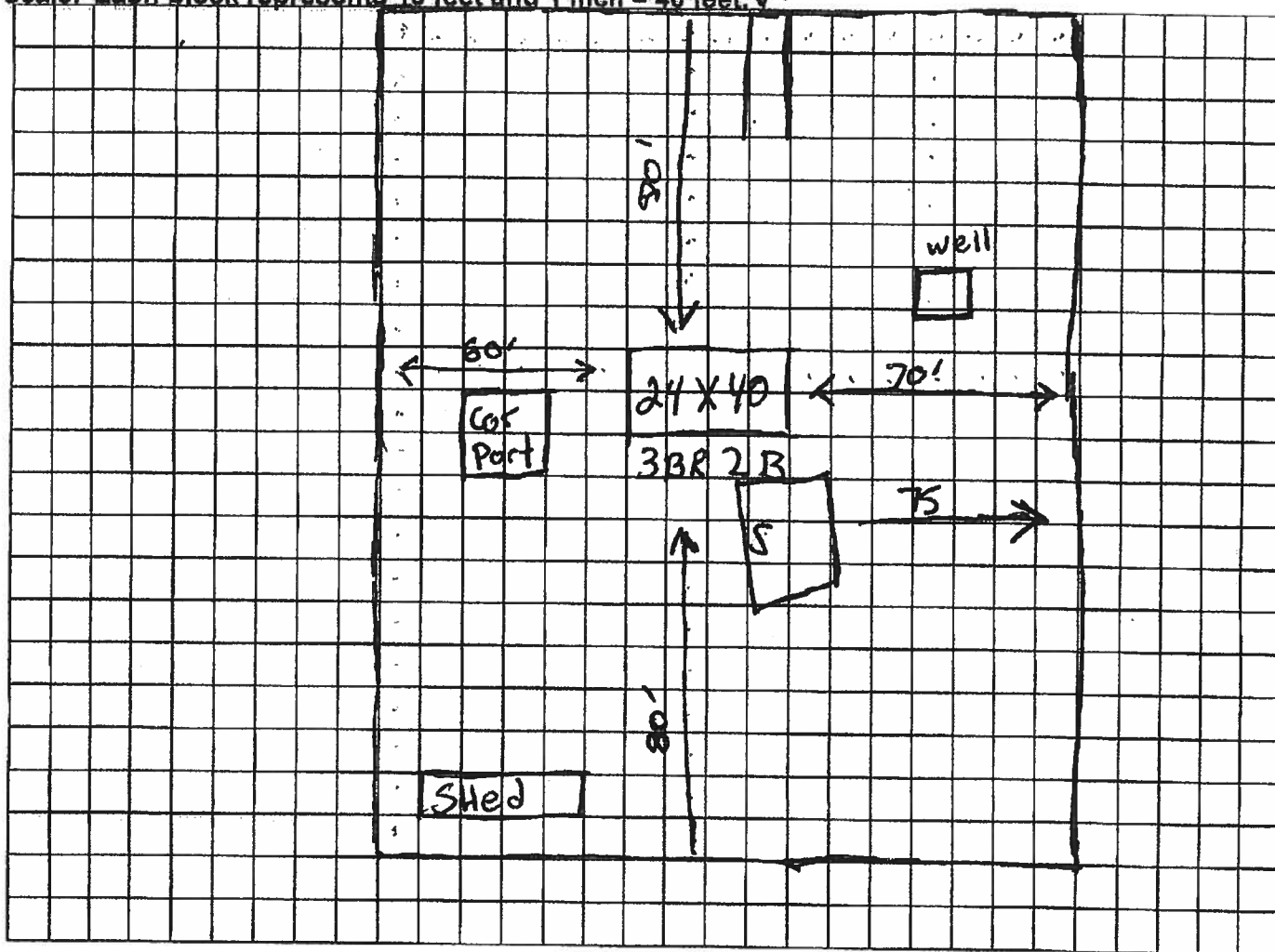
263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0505

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

Scale: Each block represents 10 feet and 1 inch = 40 feet. ^{Driveway}



Notes: _____

Site Plan submitted by: Lutee Bice Hay

Plan Approved Not Approved _____

By: Sally Ind Env Health Director

Date 6-18-18

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 18-0505
DATE PAID: 6/21/18
FEE PAID: 60.00
RECEIPT #: 135100

APPLICATION FOR:

- New System
- Existing System
- Holding Tank
- Innovative
- Repair
- Abandonment
- Temporary

APPLICANT: Bill Harvey

AGENT: _____ TELEPHONE: 985-513-9587

MAILING ADDRESS: 690 NE Colvin Ave, Lake City FL 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 11 BLOCK: 3 SUBDIVISION: Five Point Acres PLATTED: _____

PROPERTY ID #: 17-35-17-0200 ZONING: _____ I/M OR EQUIVALENT: Y N

PROPERTY SIZE: 1.04 ACRES WATER SUPPLY: PRIVATE PUBLIC <=2000GPD >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? Y N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 690 NE Colvin Ave Lake City FL 32055

DIRECTIONS TO PROPERTY: Take 441N To Tammy Lane then turn left on Colvin Ave. And its the first place on the left on the corner of Ralph green Rd and Colvin Ave.

BUILDING INFORMATION

RESIDENTIAL COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>mobile Home</u>	<u>3</u>	<u>960</u>	
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Bill Harvey DATE: 6-18-18



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

1806-53

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, BRENT STRICKLAND, give this authority for the job address show below
Installer License Holder Name

only, 690 NE COLVIN AVE, and I do certify that
Job Address

the below referenced person(s) listed on this form 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 Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
<u>BILL HARVEY</u>		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

[Signature] License Holders Signature (Notarized) IH 1104218 License Number 7.6.18 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: COLUMBIA

The above license holder, whose name is BRENT STRICKLAND personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 6th day of JULY, 2018.

[Signature]
 NOTARY'S SIGNATURE

(Seal/Stamp)

