

DATE 05/19/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021885

APPLICANT JEFF HARDEE PHONE 352 490-5418
 ADDRESS 6450 NW 72ND LANE CHIEFLAND FL 32626
 OWNER DOROTHY ROBAN PHONE 454-3095
 ADDRESS 2836 SW CR 138 FT. WHITE FL 32038
 CONTRACTOR BEN CREAMER PHONE _____
 LOCATION OF PROPERTY 47S, TL ON CR 138, ABOUT 4.5 MILES ON RIGHT

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 _____
 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 26-7S-16-04327-001 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 30.00

IH0000344
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number IH0000344 Applicant/Owner/Contractor [Signature]
 EXISTING 04-0542-N BK HD N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 5542

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only Zoning Official BLK 17.05.04 Building Official HD 5-17-04
 AP# 0405-32 Date Received 5-10-04 By LH Permit # 21885
 Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments _____

- Site Plan with Setbacks shown Environmental Health Signed Site Plan Env. Health Release
- Need a Culvert Permit Need a Waiver Permit Well letter provided Existing Well

- Property ID 26-7-16-04327-001 Must have a copy of the property deed
- New Mobile Home Used Mobile Home _____ Year _____
- Subdivision Information N/A
- Applicant Jeff Hardee Phone # 352-490-5418
- Address 6450 NW 72 Ln chiefland FL 32626
- Name of Property Owner Dorothy F Roban Phone# 386-454-3095
- 911 Address 2836 SW CR 138 Ft white
- Name of Owner of Mobile Home same Phone # _____
- Address _____
- Relationship to Property Owner same
- Current Number of Dwellings on Property 1
- Lot Size 1320 x 1320 Total Acreage 30
- Explain the current driveway Existing DW Replacement
- Driving Directions 47 S @ CR 138 go 4.5 miles property on RT
- Is this Mobile Home Replacing an Existing Mobile Home Yes This is true JH
- Name of Licensed Dealer/Installer Ben Creamer Phone # (386)362-9392
- Installers Address 2101 NW 11th Drive chiefland FL 32626
- License Number IH000344 Installation Decal # 221226

UNIT NUMBER

Installer Ben Creamer License # IHD000344

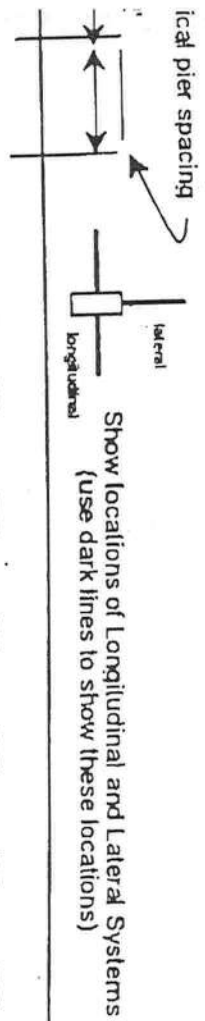
Address of home 2836 Sw Cr 138
 City installed FL White Fl 32038

Manufacturer Fleetwood Length x width 32X56

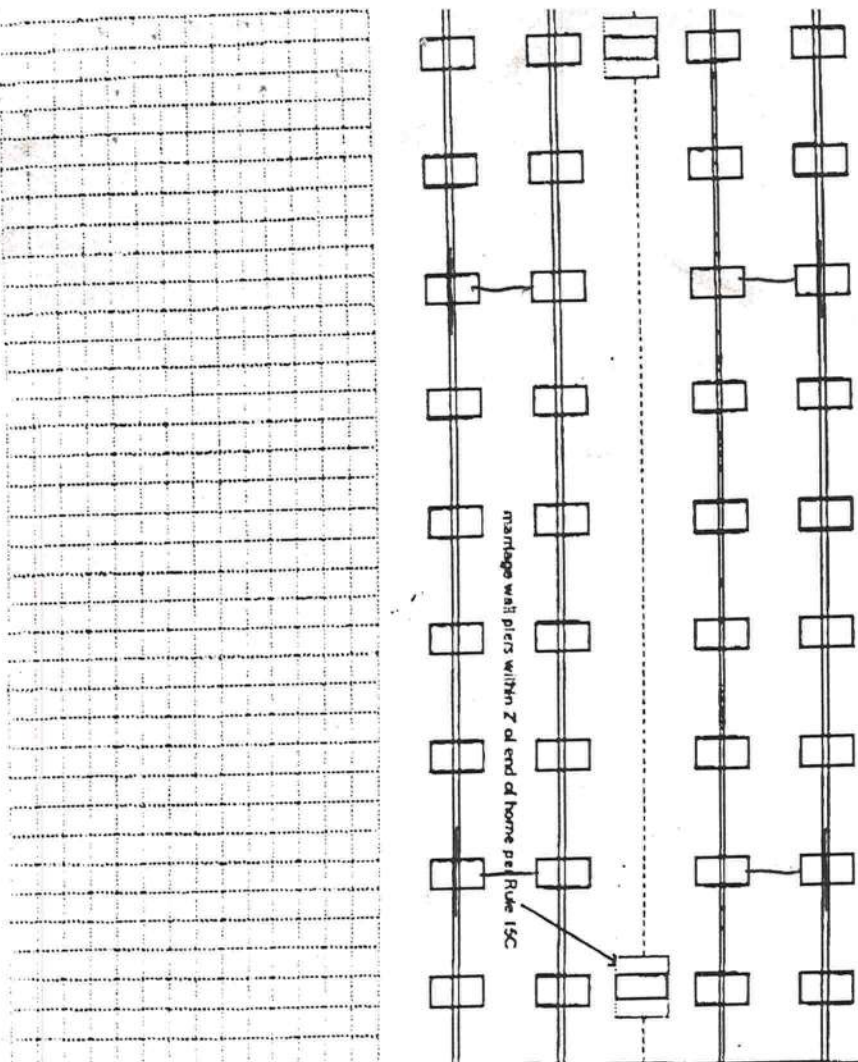
NOTE: *if home is a single wide fill out one half of the blocking plan*
if home is a triple or quad wide sketch in remainder of home

Understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall lies exceed 5 ft 4 in.

Installer's initials BC



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



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 # 221 227

Triple/Quad Serial #

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Fooler 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 17X25

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) 22X32

POPULAR PAD SIZES

Pad Size	Sq Ft
16 x 16	256
18 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 14' Pier pad size 22X32

ANCHORS

4 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

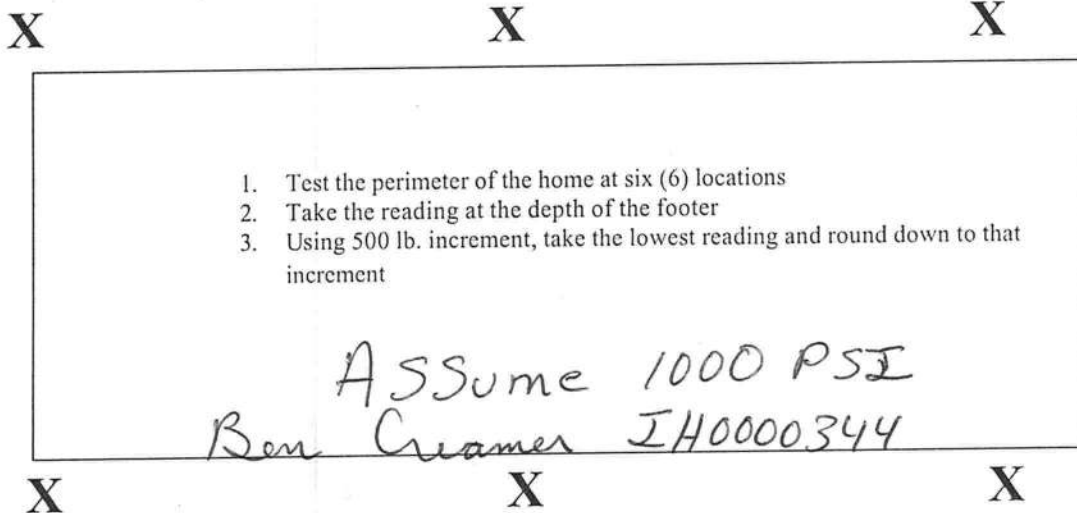
Longitudinal Stabilizing Device (LSD)
 Manufacturer Oliver Tech

OTHER TIES

Sidewall
 Longitudinal Marriage wall
 Shearwall
 Number 26
10

Minimum Permitting Requirements : A building permit by the local building authority must be obtained prior to the installation of any new or used mobile/manufactured home. The building permit application shall include, but not limited to a scale drawing of all pier block locations and foundation or footer dimensions and the soil load bearing capacity at the installation site. The soil load bearing capacity can be determined by a penetrometer test performed by a licensed installer, a general soil load bearing capacity declaration by a local building official or a test performed by a geotechnical testing company. When the soil load bearing capacity is not known, pier placement shall be based on soil load bearing capacity of 1,000 psf. (See example of pocket penetrometer test)

POCKET PENETROMETER TEST

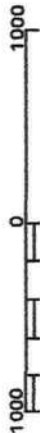


X - Test locations around perimeter of home

0405-32



APPROXIMATE SCALE IN FEET



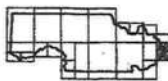
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 270 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0270 B

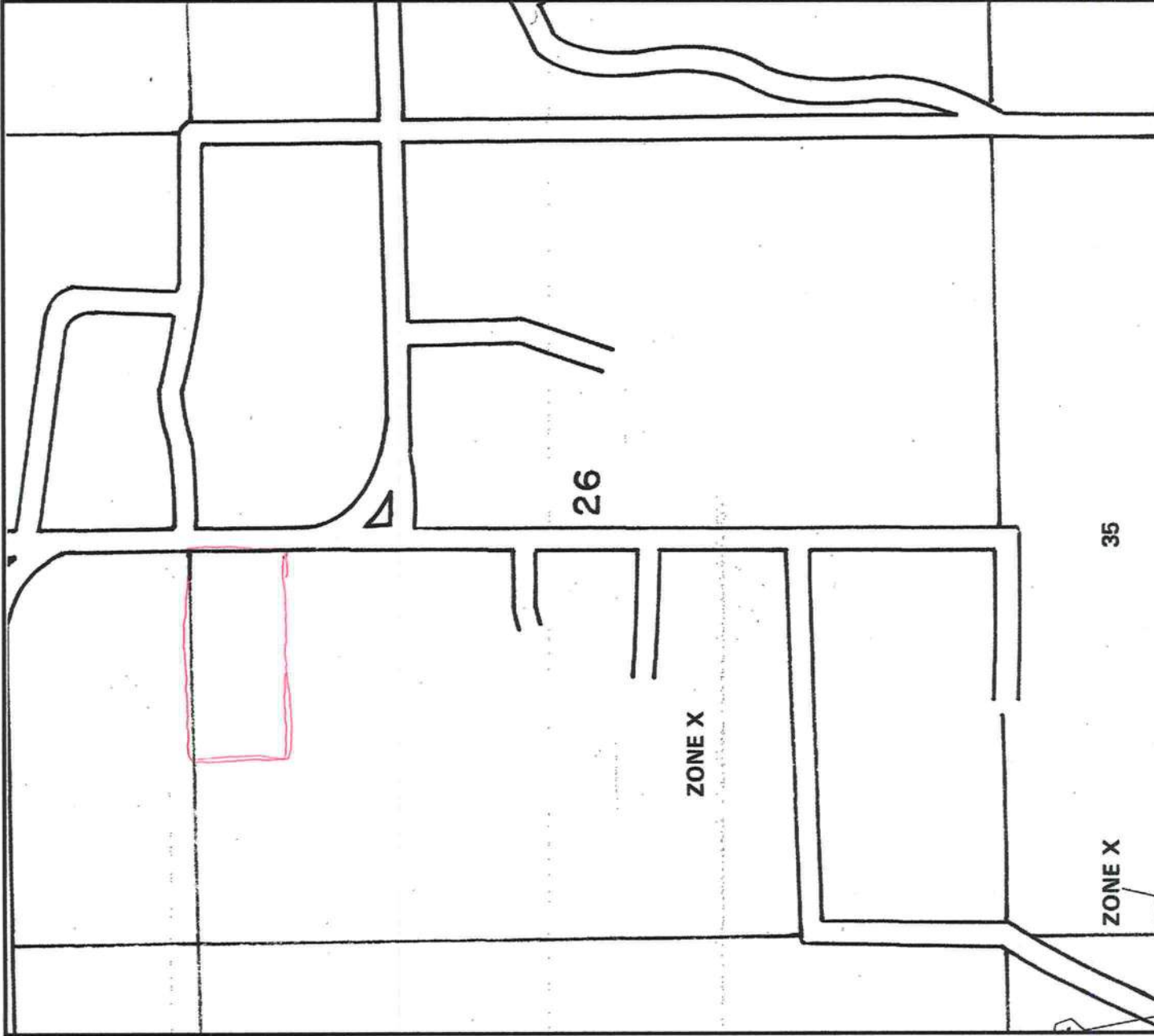
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nif/ftsd.

Print Date: 5/17/2004 (printed at scale and type A)



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

ENGINEER STAMP

ENGINEER 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 78' 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-half inch (1/2") before home is lowered completely on to piers, complete steps 4 through 9 below.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE MODEL 1101-L"V" 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 & 270 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 270 & 330 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 54". 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 "J" 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 degrees 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 3/16" 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 54".
FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

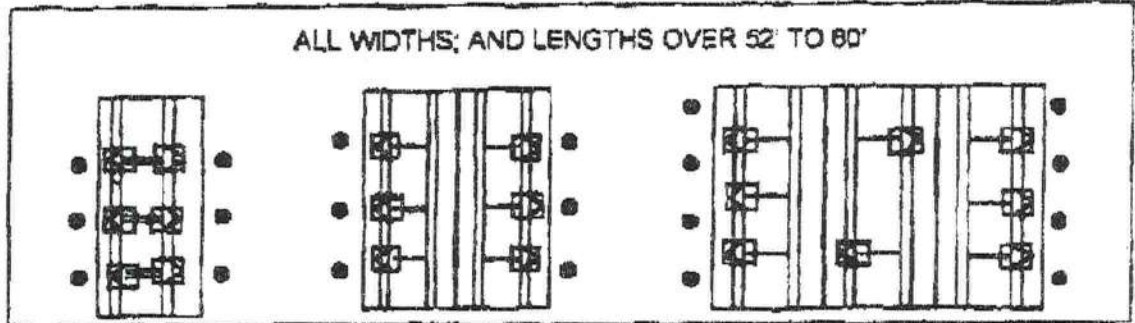
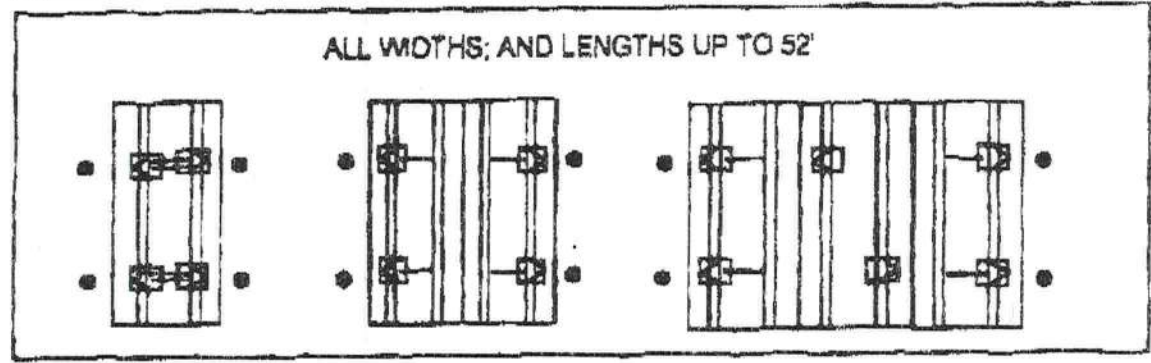
10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor.
11. NOTE: Each system 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 3/16" self-tapping screws in pre-drilled holes.



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

Telephone: 931-796-4855
Fax: 931-786-5811
www.olivertechnologies.com

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



HOUSES 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 manufacturer's specifications for sillpost usage are in excess of 4,000 lbs. These locations require a 5" anchor.

PATENT PENDING

REVISIONS INSTRUCTIONS 4/23/03

LEGEND:

- C = GROUND PAN
- D = GROUND PAN CONNECTOR U BRACKETS
- E = TELESCOPING V BRACE TUBE ASSEMBLY WITH 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

NOTES:

1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
2. ● = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18" from center of ground pan)
3. [Symbol] = LOCATION OF ASF MODEL 1101 "V" (LATERAL & LONGITUDINAL BRACING).
4. [Symbol] = LOCATION OF MODEL 1101 "L" (LONGITUDINAL BRACING ONLY).

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

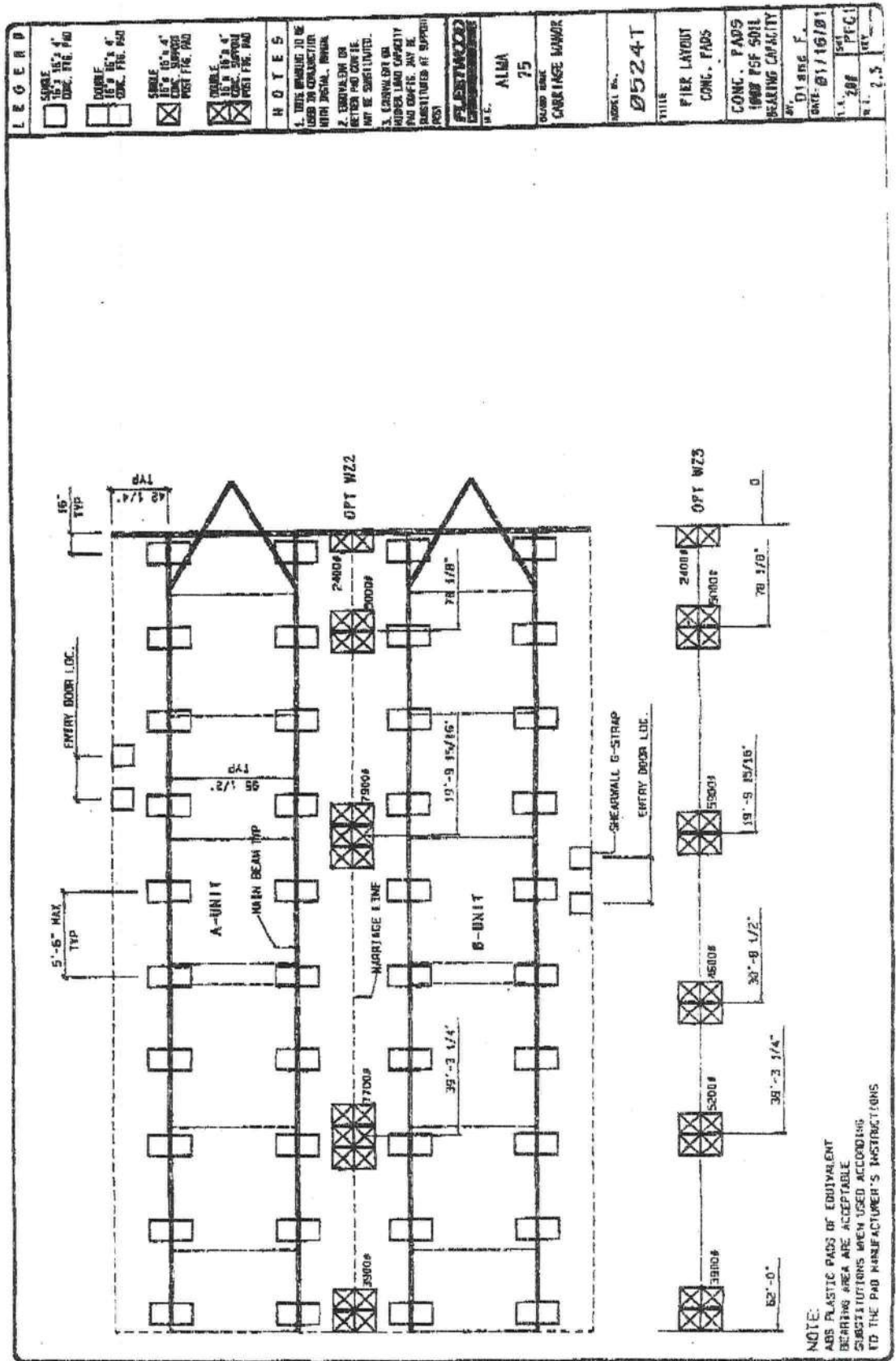
Telephone: 931-786-4555
 Fax: 931-795-8811
 www.olivertech.com



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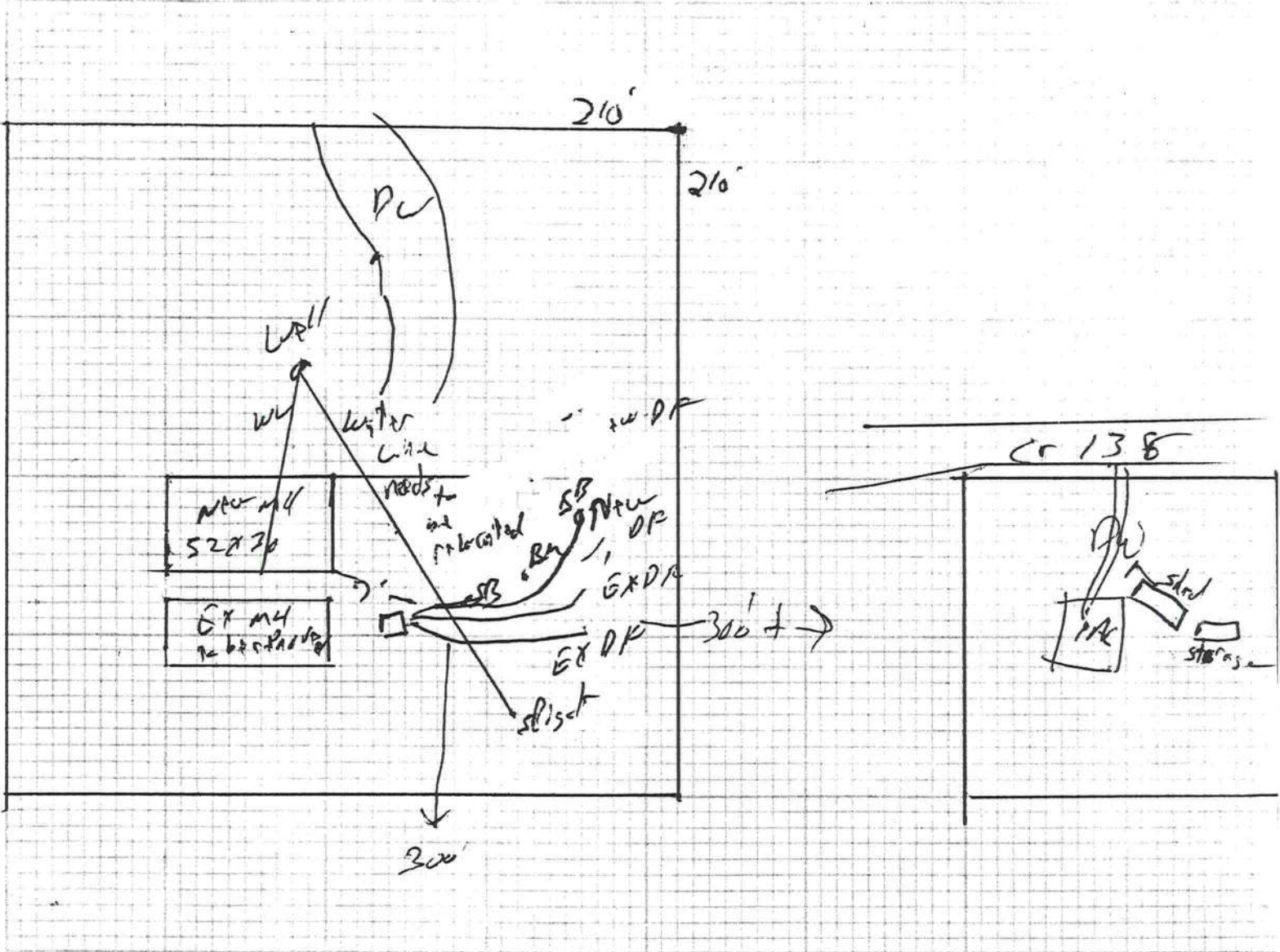
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-0542-N

PART II - SITE PLAN

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



Notes: unable to locate original permit
1 of 30 Acres

Site Plan submitted by: Maryann Rodriguez Signature _____ Title _____
 Plan Approved Not Approved _____ Date 5-11-04
 By Ruthann Smith County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

GERBANYNICK & ALVINEY
OPEN

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 26-7S-16-04327-001

Building permit No. 000021885

Permit Holder BEN CREAMER

Owner of Building DOROTHY ROBAN

Location: 2836 SW CR 138, FT. WHITE, FL 32038

Date: 06/10/2004

Horney 1/104

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)