PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 10 April 2012 Building Official T.C. 4-9-12

AP# 1204-04 Date Received 4-2-12 By LH Permit # 300666

Flood Zone X Development Permit N/A Zoning RR Land Use Plan Map Category RES, LL. DEN

Comments Section 2.3.8 MH Parks

FEMA Map# N/A Elevation N/A Finished Floor 1' above Rd River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 11-0294-M ☐ EH Release ☑ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Installer Authorization ☑ State Road Access ☑ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☑ VF Form

IMPACT FEES: EMS Fire Corr ☐ Out County ☑ In County Done

Road/Code School = TOTAL _ Impact Fees Suspended March 2009_

Property ID # 12-35-16 02080-000 Subdivision Lot 4

- New Mobile Home Used Mobile Home ✓ MH Size 16x80 Year
- Applicant Jay Davis Phone # 386 961 1482
- Address PO Box 1508 LCF/32056-1508
- Name of Property Owner Phone#
- 911 Address 130 NW Kenny Ct Lake City FL 32055
- Circle the correct power company - (FL Power & Light) - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home SAME Phone #
  Address
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 4
- Lot Size 200x871 Total Acreage 4AC.
- Do you : Have (Existing Drive) (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO (Pd)
- Driving Directions to the Property 441 N (L) 25A (R) Roll (L) Maxmore (L) Kenny Ct 4th on left
- Name of Licensed Dealer/Installer Robert Sheffield Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
- License Number IH1025386 Installation Decal # 278546

Left Message 4-11-12

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Robert Sheffield License # IH1025386

911 Address where home is being installed. 130 NW Kenny Ct

Manufacturer Oakwood Length x width 16x80

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 RS

New Home ☐ Used Home ☑

Home installed to the Manufacturer's Installation Manual ☑

Home is installed in accordance with Rule 15-C ☐

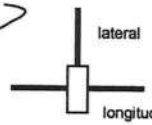
Single wide ☑ Wind Zone II ☑ Wind Zone III ☐

Double wide ☐ Installation Decal # Z78546

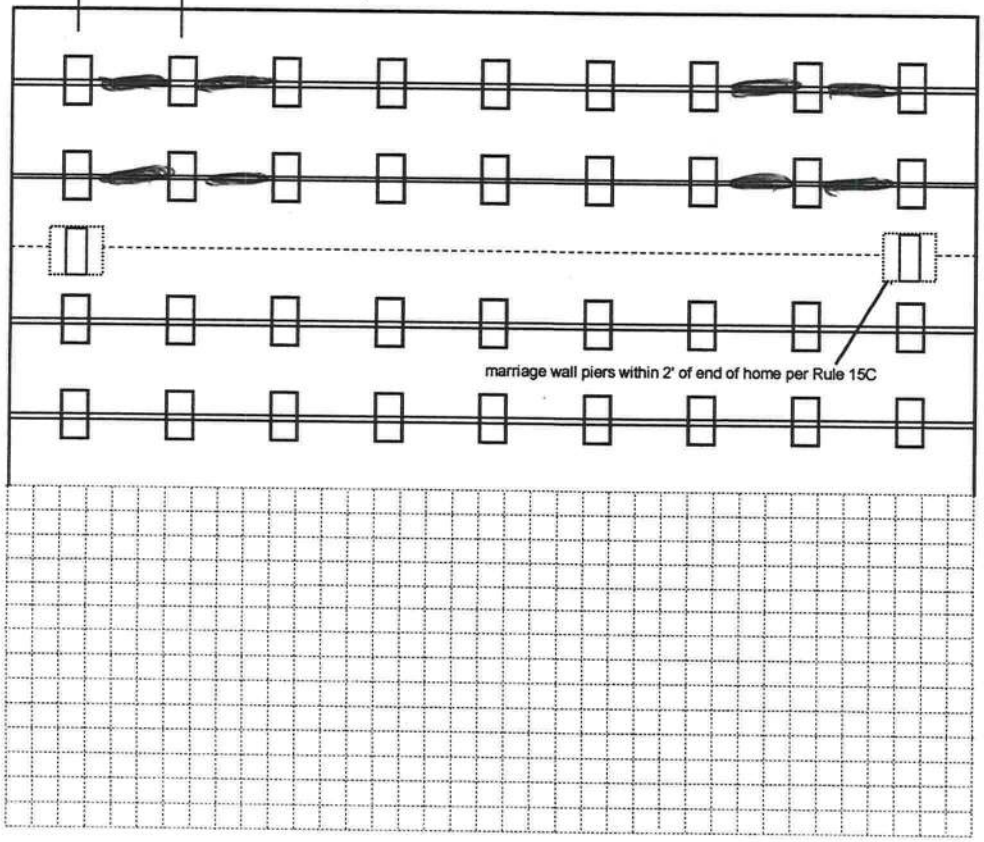
Triple/Quad ☐ Serial # OW5852I

425 provided

Typical pier spacing 2' 6'0



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



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (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 17x25

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 ____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Oliver 1101 LV

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer ____

OTHER TIES

	Number
Sidewall	24
Longitudinal	4
Marriage wall	
Shearwall	4

COLUMBIA COUNTY PERMIT WORKSHEET

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil _____ without testing.

x 1700 x 1800 x 1900

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 1700 x 1700 x 1200

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 requires anchors with 4000 lb holding capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Sheffield

Date Tested 3-30-12

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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. 28

Site Preparation

Debris and organic material removed ✓.
Water drainage: Natural _____ Swale _____ Pad ✓ Other _____.

Fastening multi wide units

Floor:	Type Fastener: _____	Length: _____	Spacing: _____
Walls:	Type Fastener: _____	Length: _____	Spacing: _____
Roof:	Type Fastener: _____	Length: _____	Spacing: _____

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, meldew 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 _____

Type gasket _____
Pg. _____

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

Installer Signature Robert Sheffield **Date** 3-30-12

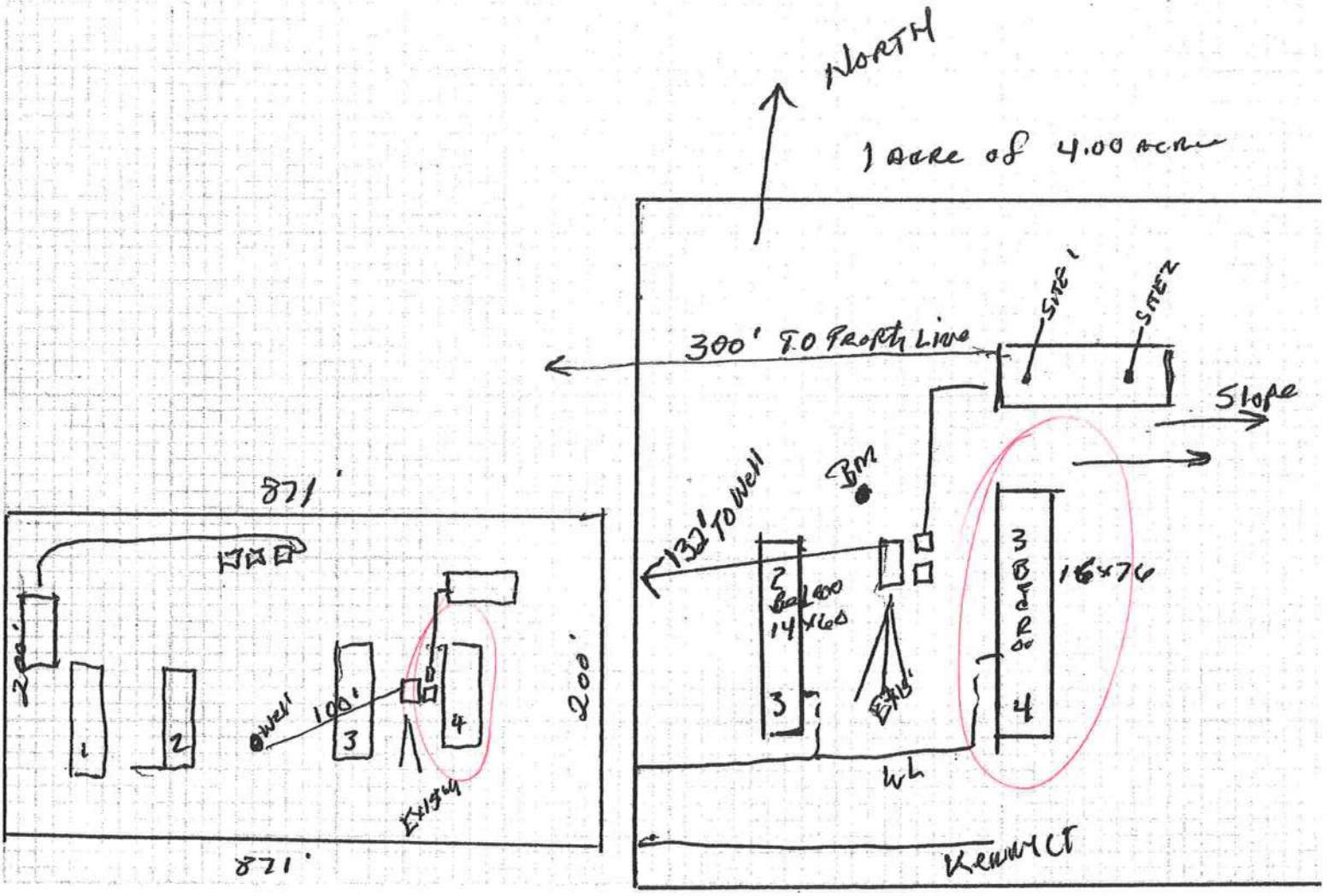
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-0294-M

PART II - SITE PLAN

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



Notes:

JAY DAVIS

12-35-16-08080-000

4.00 ACRES M/H PARK

Site Plan submitted by: Robert W Fuehrer (Signature) Agent (Title)

Plan Approved ✓ Not Approved ____ Date 6-28-11

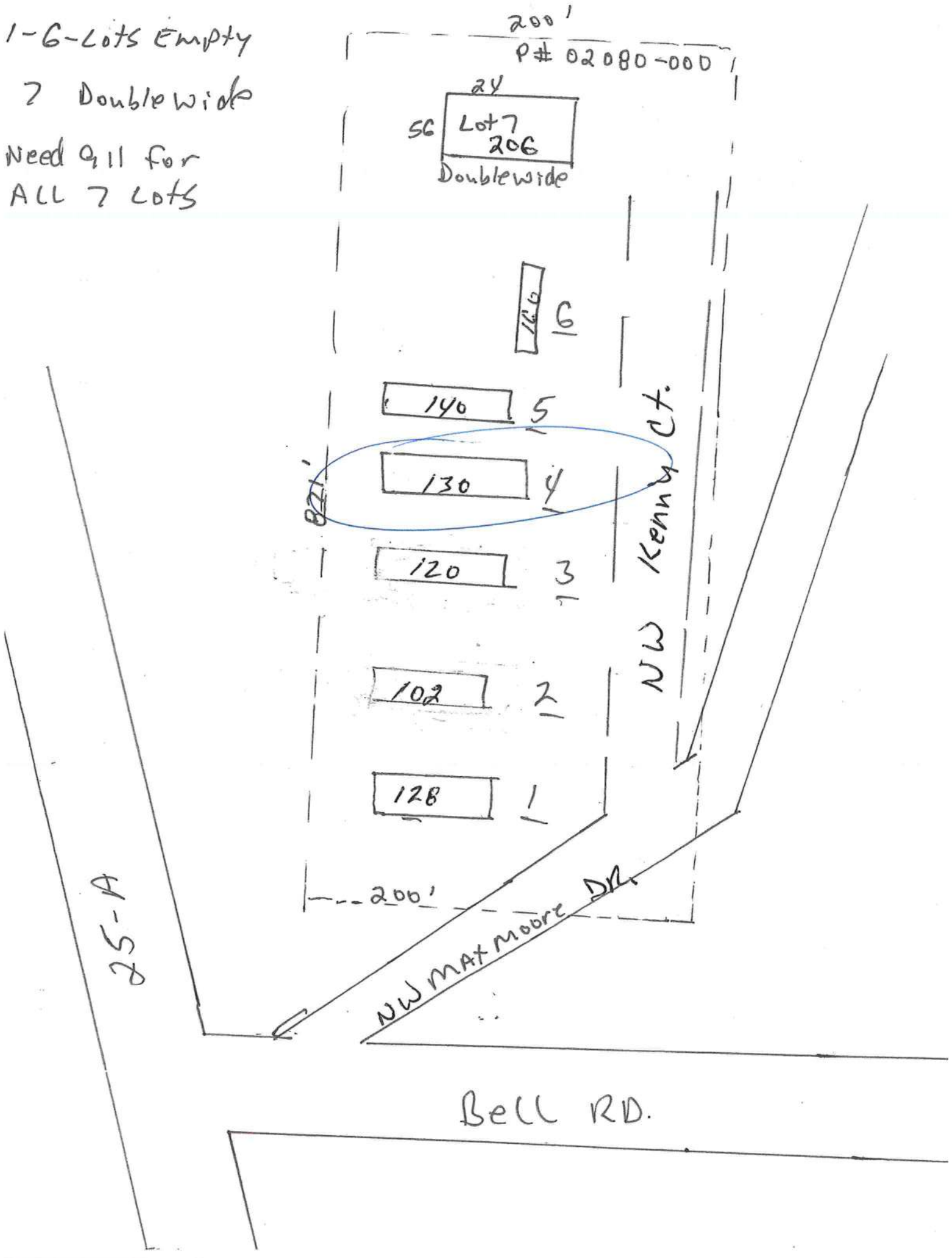
By Sallie Ford Env Health Director County Health Departmer

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1-6-Lots Empty

7 Doublewide

Need 911 for ALL 7 Lots



08-04-10:03:24PM:

11-0294-M

LC

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

PERMIT NO. AP 1039787
DATE PAID: 6/24/11
FEE PAID: 205.00
RECEIPT #: 12-PAID-1656939

APPLICATION FOR:
[ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] MODIFICATION

APPLICANT: JAY DAVIS

AGENT: Robert Ford MFST Inc TELEPHONE: 755-6372

MAILING ADDRESS: 580 NW Guerdon Rd LC 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: 344 BLOCK: - SUBDIVISION: M/H Park 12-55-16 PLATTED: _____

PROPERTY ID #: 02080-000 ZONING: M/H I/M OR EQUIVALENT: [Y (N)]

PROPERTY SIZE: 4.00 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 120 NW Kenny Ct 130 NW Kenny Ct.

DIRECTIONS TO PROPERTY: Hwy 441 North Take 25-1 To left Go to Bell Rd T.R Take Immediate left Septic on left

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	M/H	2	14x60 (840)	
2	M/H	3	16x76 (1216)	
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify) _____

SIGNATURE: Robert W Ford Jr DATE: 6/23/11

DH 4015, 09/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

RECEIVED 6/24/11

ENTERED 6/24/11

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1204-04 CONTRACTOR Robert Sheffield PHONE 386-623-220.

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.

ELECTRICAL	Print Name Jay Davis License #:	Signature Phone #:
MECHANICAL/ A/C _____	Print Name Jay Davis License #:	Signature Phone #:
PLUMBING/ GAS	Print Name Robert Sheffield License #: FH 1025386	Signature Phone #: 386-623-2203

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.

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 5/11/2011 **DATE ISSUED:** 5/23/2011

ENHANCED 9-1-1 ADDRESS:

130 NW KENNY CT

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

12-3S-16-02080-000

Remarks:

LOT 4 ON PARCEL

Address Issued By: _____

Columbia County 9-1-1 Addressing / GIS Department

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

1987

TAX DEED

State of Florida ***County of Columbia***

Cert. No. 466 of 2008
Parcel No. 02080-000

The following Tax Certificate numbered 466 issued on May 31, 2008 was filed in the office of the Tax Collector of this County and application made for the issuance of a Tax Deed, the applicant having paid or redeemed all other taxes or tax certificates on the land described as required by law to be paid or redeemed, and the costs and expenses of this sale, and due notice of sale having been published as required by law, and no person entitled to do so having appeared to redeem said land; such land was on the 28th day of February, 2011, offered for sale as required by law for cash to the highest bidder and was sold to **Jay S. Davis,** whose mailing address is, 1925 NW Lake Jeffery Road, Lake City, FL 32055, being the highest bidder and having paid the sum of his/her bid as required by the Laws of Florida.

NOW, on this 28th day of February, 2011, in the County of Columbia, State of Florida, in consideration of the sum of ($8,525.00) ***eight thousand five hundred twenty-five dollars and zero cents***, being the amount paid pursuant to the Laws of Florida, does hereby sell the following lands situated in the County and State aforesaid and described as follows:

SEC 12 TWN 3S RNG 16 PARCEL NUMBER: 02080-000

BEG SE COR OF SW ¼ OF SE ¼, RUN W 200 FT, N 871 FT, E 200 FT, S 871 FT TO POB. ORB 652-467

P. DeWitt Cason
Clerk of the Circuit Court
Columbia County, Florida

Witness:
Kathy B. Ford
Katrina Veach

Inst:201112003018 Date:3/1/2011 Time:8:22 AM
Doc Stamp-Deed:60.20
DC,P.DeWitt Cason,Columbia County Page 1 of 3 B:1210 P:1394

State of Florida
County of Columbia

On this 28TH day of February, 2011, before me personally appeared P. DeWitt Cason, Clerk of Circuit Court in and for Columbia County Florida, known to me to be the person described in, and who executed the foregoing instrument, and acknowledged the execution of this instrument to be his own free act and deed for the use and purposes therein mentioned. Witness my hand and official seal date aforesaid.

F VONCILE DOW
Notary Public - State of Florida
My Comm. Expires Oct 3, 2014
Commission # EE 27026
Bonded Through National Notary Assn.

F Voncile Dow
NOTARY PUBLIC

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

— NO APP Yet —

DATE RECEIVED 3-13-12 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Jay Davis PHONE _____ CELL _____

ADDRESS 130 NW Kenny Crt Lake City Fl 32055

MOBILE HOME PARK Jay Davis Rentals #4 SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 N, (R) 25-A, (R) Bell, (L) Maxmore, (L) Kenny Crt, 4th on Left

MOBILE HOME INSTALLER Robert Sheppard PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Oakwood YEAR 98 SIZE 16 X 80 COLOR White / Red

SERIAL No. OWS85721

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

$50.00

Date of Payment: 3-13-12

Paid By: Jay Davis

Notes: _____

P — SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

P — FLOORS ( ) SOLID ( ) WEAK ( ) HOLES (DAMAGED LOCATION)

P — DOORS ( ) OPERABLE ( ) DAMAGED

P — WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P — WINDOWS ( ) OPERABLE ( ) INOPERABLE

P — PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

P — CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

P — ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P — WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P — WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

P — ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: Fix Spot master B.R. Floor

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [signature] ID NUMBER 304 DATE 3-14-12

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, Robert Sheppard, give this authority for the job address show below
Installer License Holder Name

only, 130 NW Kenny Ct.
Job Address

, and I do certify that 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)
Jay Davis		___ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ 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.

Robert Sheppard — License Holders Signature (Notarized)
FH1025386 — License Number
3-30-12 — Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: COLUMBIA

The above license holder, whose name is ROBERT SHEPPARD, personally appeared before me and is known by me or has produced identification (type of I.D.) P. KNOWN on this 2nd day of APRIL, 20 12.

Leslie Dow
NOTARY'S SIGNATURE

(Seal/Stamp)

LESLIE DOW
MY COMMISSION # EE 000274
EXPIRES: June 14, 2014
Bonded Thru Notary Public Underwriters