	y Building Permit PERMIT
This Permit Expires One APPLICANT STACY BECKHAM	Year From the Date of Issue 000024418 PHONE 352.745.2738
ADDRESS 269 SW PARKER LANE	LAKE CITY FL 32024
OWNER VELMA THOMAS (SHANNON THOMAS M/H)	PHONE 752.0730
ADDRESS 784 SW THOMAS TERRACE	LAKE CITY FL 32024
CONTRACTOR STACY BECKHAM	PHONE 352.745.2738
LOCATION OF PROPERTY 90-W TO 4 MLS PAST I-75 T	TO THOMAS TERRACE,TL AND
IT'S APPROX. 1 MILE ON T	
TYPE DEVELOPMENT M/H & UTILITY	ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL	AREA HEIGHT STORIES
FOUNDATION WALLS	ROOF PITCH FLOOR
LAND USE & ZONING A-3	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30	0.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 31-3S-16-02419-000 SUBDIVI	SION
LOT BLOCK PHASE UNIT	TOTAL ACRES 40.00
	// Ve mil
IH0000512	
Culvert Permit No. Culvert Waiver Contractor's License	
EXISTING 06-0406-E BLK Driveway Connection Septic Tank Number LU & Z	JTH N
Driveway Connection Septic Tank Number LU & Z	oning checked by Approved for Issuance New Resident
COLORENTE 1 FOOT ABOVE BOAD BEDI ACDIC EVICEDIC	
COMMENTS: 1 FOOT ABOVE ROAD. REPLACING EXISTING	
COMMENTS: 1 FOOT ABOVE ROAD. REPLACING EXISTING	
	M/H. 1 UNIT CHARGED. Check # or Cash 780
FOR BUILDING & ZOI	M/H. 1 UNIT CHARGED. Check # or Cash 780 NING DEPARTMENT ONLY (footer/Slab)
	M/H. 1 UNIT CHARGED. Check # or Cash VING DEPARTMENT ONLY Monolithic Monolithic
FOR BUILDING & ZOI Temporary Power Foundation	Check # or Cash Check # or Cash WING DEPARTMENT ONLY Monolithic date/app. by date/app. by
Temporary Power Foundation date/app. by Under slab rough-in plumbing Sla	Check # or Cash Check # or Cash WING DEPARTMENT ONLY Monolithic date/app. by date/app. by
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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.

INSPECTORS OFFICE

"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."

CLERKS OFFICE

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 6-23-05) Zoning Official State Building Official OK 37 H 4-77-1
AP# 0 604 - 40 Date Received 4-17-56 By 614 Permit # 24418
Flood Zone Development Permit Zoning A-3 Land Use Plan Map Category A-3
Comments Replacing am existing
Pre-mil duyed (D, F)
FEMA Map# Elevation Finished Floor River In Floodway
Site Plan with Setbacks Shown DEH Signed Site Plan DEH Release Well letter Existing well
Copy of Recorded Deed or Affidavit from land owner A Letter of Authorization from installer
V pA sity sheet
- 12 12 12 14 03410 - 100 0
■ Property ID# <u>B-35-16-02419 -000</u> Must have a copy of the property deed
New Mobile Home Used Mobile Home Year_ 52
- Applicant Stacy Beckham Phone # 352-745-278
- Address deg See Bote My hate Co. A. Dowy
Name of Property Owner Velma Thomas Phone# 752 - 0770
- 911 Address 784 Sw Thomas Jem. L.C. Fl. 32024
Circle the correct power company -
(Circle One) - Suwannee Valley Electric - Progress Energy
Name of Owner of Mobile Home Shan Non Thomas Phone # 623-6762
Address 784 Scu Thomas Tem L.C. 71. 32024
Relationship to Property Owner
Current Number of Dwellings on Property
- Lot Size Total Acreage 40.00
Do you : Have at Existing Drive or need a <u>Culvert Permit</u> or a <u>Culvert Waiver</u> (Circle one)
Is this Mobile Home Replacing an Existing Mobile Home 985
- Driving Directions to the Property Hung 50 west 4 miles Doest
I 75 (Ila on Thomas Fair agray Inhe
on At.
JESESSMENT
CNAIGED
Name of Licensed Dealer/Installer Steel Bukham Phone # 352. 745. 2738
- Installers Address Dag Sul Ponter LN Lake C. f. A- Joonf
License Number <u>THOO's G17</u> Installation Decal # <u>209543</u>

		martiage wall pleas within 2 of end of home per Rule 15C		Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	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 Typical pier spacing > Installer's initials	Installer Say Rutham License # IHBBO 5/2 Address of home By Sw Manufacturer Heal 2004 Length x width 14470 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
Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Manufacturer Spaced at 5 4 00 OTHER TIES Number Number Number Number Sidewall Longitudinal Shearwall Shearwall	Opening Pier pad size 4 ft 5 ft FRAME TIES within 2' of end of hoppe	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.	Pad Size 25 Pad Size Sq Pad Size S	By 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Footer 16" x 16" 18 1/2" x 18 1/2" 20" x 20" 22" x 22" 24" (490) psf 3 4' 5 6'	New Home

PERMIT NUMBER

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

XXXX

POCKET PENETROMETER TESTING METHOD

- 1. Test the perimeter of the home at 6 locations
- 'n Take the reading at the depth of the footer
- 3. Using 500 lb. increments, take the lowest reading and round down to that increment

TORQUE PROBE TEST

showing 275 inch pounds or less will require 4 foot anchors. here if you are declaring 5' anchors without testing The results of the torque probe test is SON inch pounds or check

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

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

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

Connect all sewer drains to an existing sewer tap or septic tank. Pg.

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

> Walls Roof Floor: Water drainage: Natural Debris and organic material removed 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 For used homes a min. 30 gauge, 8" wide, galvanized metal strip Type Fastener: Type Fastener Type Fastener Gasket (weatherproofing requirement) Fastening multi wide units Swale Site Preparation Length: Length: Length Pad Spacing Spacing

a result of a poorly installed or no gasket being installed. I understand a strip Type gasket of tape will not serve as a gasket homes and that condensation, mold, meldew and buckled marriage walls are understand a properly installed gasket is a requirement of all new and used nstaller's initials nstalled: Bottom of ridgebeam Yes Between Walls Between Floors ĕs Yes

Weatherproofing

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

Miscellaneous

Range downflow vent installed outside of skirting. Skirting to be installed. Yes Electrical crossovers protected. Drain lines supported at 4 foot intervals. Dryer vent installed outside of skirting. Yes 8 S ₹

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

Date SILE

0

STR	PARCEL_I	ADDRESS	NEWCITY	NE NEWZI
313s16	02419-000	784 SW THOMAS TER	LAKE CITY	FL 32024
1	records selected	_		

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406-45-16-02182-000

February 22, 2006

Building & Zoning Department P.O. Drawer 1529 Lake City, FL 32055

Dear Mr. Kepner:

I, Velma Thomas give my permission for my granddaughter, Shannon Thomas to live on my property. The parcel # is 06-4S-16-02782-000.

Thanks,

Velma Thomas

720 SW Gabriel Place

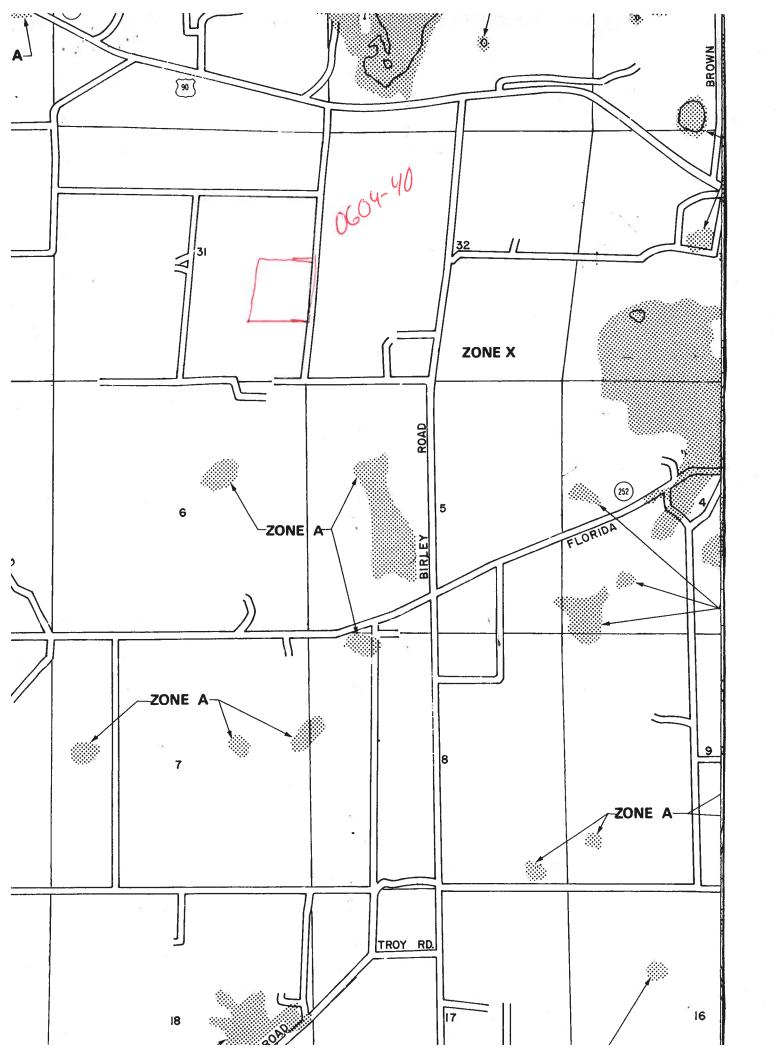
Velma Thomas

Lake City, FL 32055

:gt

BETTY DIANE RUSS
MY COMMISSION # DD463946
EXPIRES: Aug. 21, 2009
(407) 398-0153 Florida Notary Service.com

Betty Vian Luss





STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-0406E

BADU BADU 2 Paper c.	Plan submitted by: Approved	N. Allenn	Signature Not Approved		Date_	Title 4/7460 Co
September 10 water 10		1		2 people		
216) September 100 water 11 au 11 au 12	8					
210° Seption 100 water W at The seption 100 water BARNU						
Septe Si o vell						
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	316	1		S1' 0 WELL		
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			\$16 ⁻¹			

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT