DATE 10/24/2005

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT 000023754

APPLICANT ED PICKLES PHONE 758-9900

ADDRESS 136 DEPUTY JEFF DAVIS LANE LAKE CITY FL 32024

OWNER SUSAN NEILSON PHONE

ADDRESS 189 SW CELINE CT LAKE CITY FL 32024

CONTRACTOR CORBETTS PHONE 758-9900

LOCATION OF PROPERTY 247 S, L 242, L INTO BLAINE ESTATES, R SW BUCHANAN DR, R SW CELINE COURT, 3RD ON THE RIGHT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION .00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING RR MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE XPP DEVELOPMENT PERMIT NO.

PARCEL ID 22-4S-16-03090-121 SUBDIVISION BLAINE ESTATES

LOT 1 BLOCK PHASE 2 UNIT TOTAL ACRES 1.01

		DIH000060		
Culvert Permit No.	Culvert Waiver	Contractor's License Number		Applicant/Owner/Contractor
EXISTING	05-0928-N	BK	HD	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

AFFIDAVIT FROM LAND OWNER GIVEN

Check # or Cash 7857

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 $ 71.00 WASTE FEE $ 147.00

FLOOD DEVELOPMENT FEE $ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ **TOTAL FEE** 493.00

INSPECTORS OFFICE 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.

7857

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 6-23-05) Zoning Official BLK 10.10.05 Building Official HD 10-14-05

AP# 0509-79 Date Received 9-28-05 By LH Permit # 23754

Flood Zone X Shaded Development Permit N/A Zoning RR Land Use Plan Map Category RES U.L.DEN.

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☑ Site Plan with Setbacks Shown ☑ EH Signed Site Plan ☐ EH Release ☑ Well letter ☐ Existing well

☑ Copy of Recorded Deed or Affidavit from land owner ☐ Letter of Authorization from Installer

Lot 1, Block 1, Blaine Estates, Phase 2

- Property ID # 22-4S-16-03990-121 Must have a copy of the property deed
- New Mobile Home YES J. JACOBSEN Used Mobile Home _____ Year 05
- Applicant ED Pickles Phone # 758-9900
- Address 136 Deputy J. Davis Lane, Lake City FL 32024
- Name of Property Owner SUSAN NELSON Phone# _____
- 911 Address 189 SW Celia Ct Lake City FL 32024
- Circle the correct power company - (Celine) FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home SUSAN NELSON Phone # 755-7870
  Address 189 SW Celia Ct. Lake City FL. 32024
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property NONE
- Lot Size 1.01 Lot 1 Blk 1 Total Acreage 1.01
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO - (OWES)
- Driving Directions to the Property Take Hwy 247 Towards Branford Second SS store Take [redacted] Left at 242 Go around 1 mile Blaine Estates on Left. Lot 1 Block 1
- Name of Licensed Dealer/Installer Corbetts Phone # 758-9900
- Installers Address 136 Deputy J Davis Lane Lake City FL 32024
- License Number EH 0000060 Installation Decal # 27896

FROM :COLUMBIA CO BUILDING + ZONING FAX NO. :386-758-2160 Sep. 15 2005 12:58PM P2

PERMIT WORKSHEET

PERMIT NUMBER

Installer Wallace E Pudlock License # 0000060

Address of home being installed 189 SW Cyling Lake City Fl. 32024

Manufacturer Jacobsen Length x width 28X60

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 W.E.P.

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 # 277996

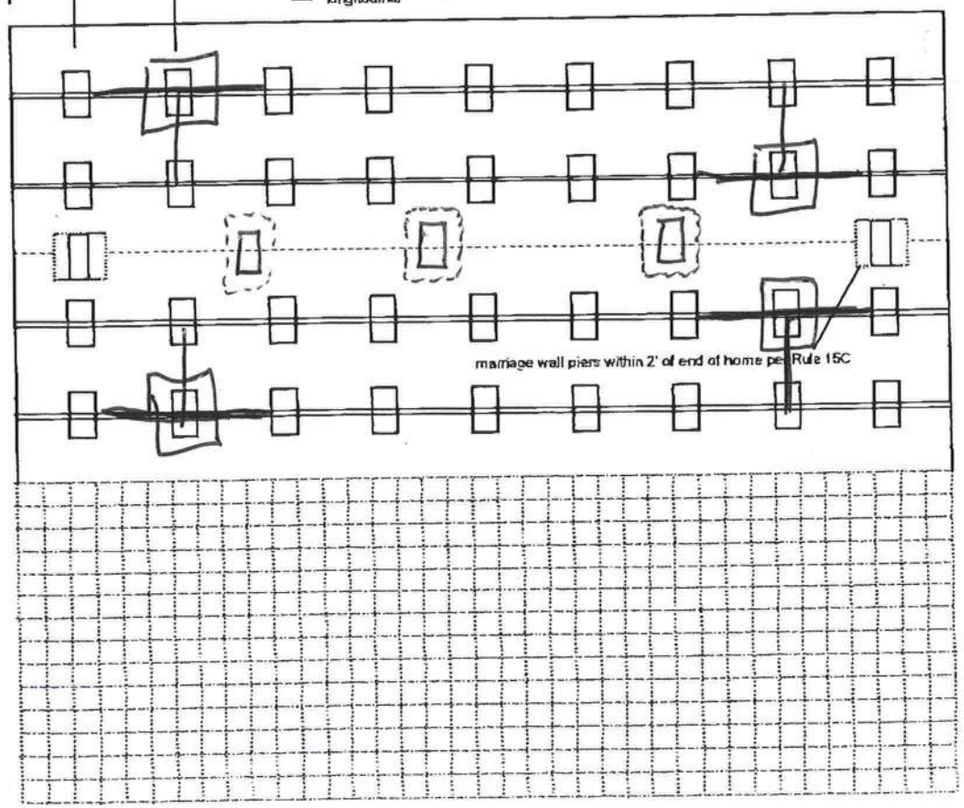
Triple/Quad ☐ Serial # 24565 A-B

Typical pier spacing 2' 6

lateral

longitudinal

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 17 x 22

Perimeter pier pad size 17 x 22

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	Pier pad size
8 ft	17 x 22

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
Sidewall	11
Longitudinal	4
Marriage wall	4
Shearwall	

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver System

PERMIT WORKSHEET

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 2000 X 2000 X 2000

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 2000 X 2000 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 300 inch pounds or check here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 4 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 4000lb holding capacity.

W.E.P. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Walter E Pittman Jr.

Date Tested Sept 9 / 9 / 2005

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.

Plumbing

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

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 ✓
Water drainage: Natural ✓ Swale Pad Other

Fastening multi wide units

Floor:	Type Fastener:	Lag	Length:	5"	Spacing: 16"
Walls:	Type Fastener:	Lag	Length:	5"	Spacing: 16"
Roof:	Type Fastener:	Lag	Length:	5"	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, 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 W.E.P.

Type gasket Spray Foam 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 manufacturer's installation instructions and or Rule 15C-1 & 2

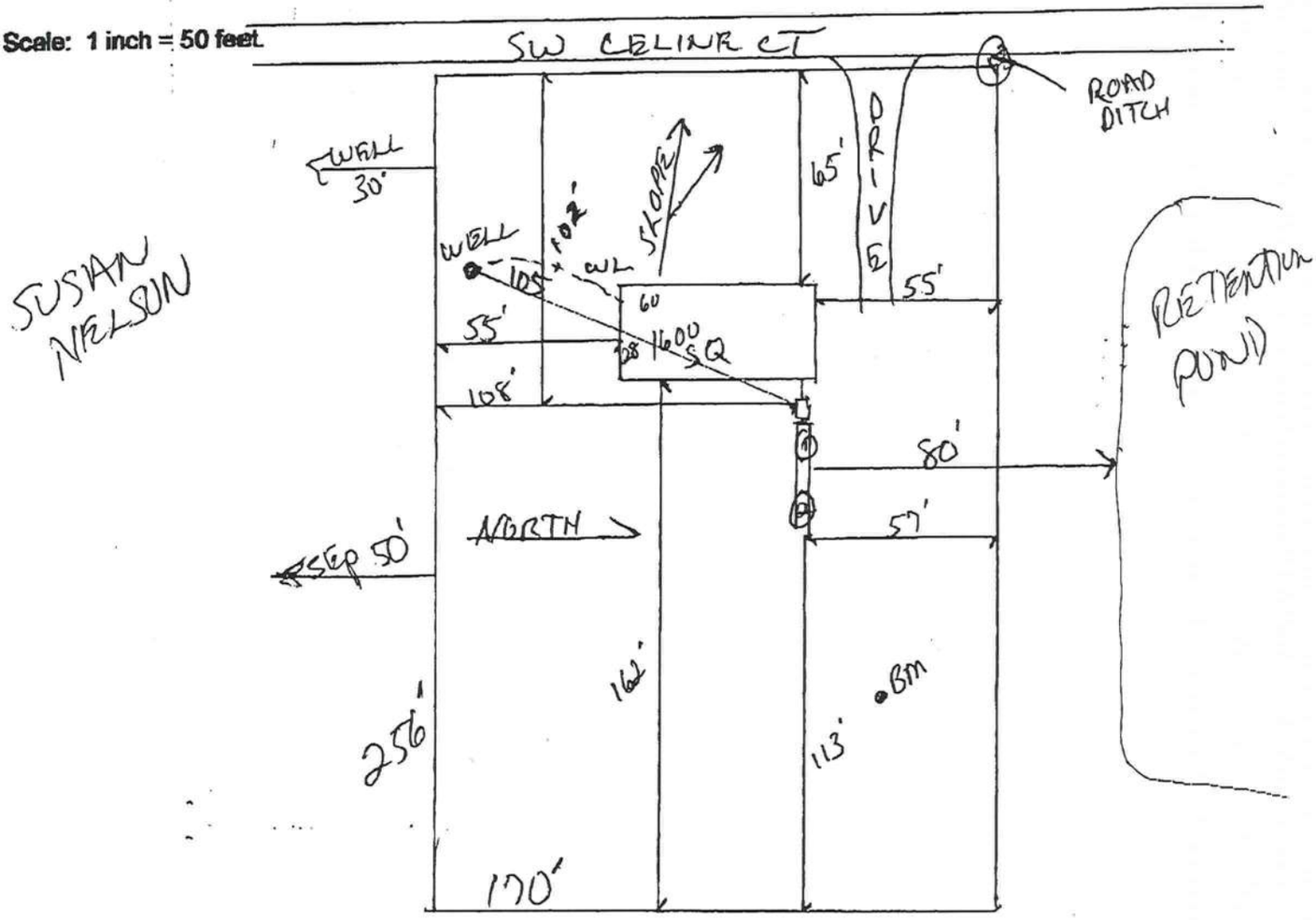
Installer Signature Walter E Pittman Jr. Date 9/9/2

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

Permit Application Number_____

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

Scale: 1 inch = 50 feet



Notes: _____

Site Plan submitted by: _____ MASTER CONTRACTOR

Plan Approved_____ Not Approved_____ Date_____

By_____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1 Block 1

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * 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 ISSUED: August 10, 2005

ENHANCED 9-1-1 ADDRESS:

189 SW CELINE CT (LAKE CITY, FL 32024)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS:

PROPERTY APPRAISER PARCEL NUMBER: 22-4S-16-03090-121

Other Contact Phone Number (If any):

Building Permit Number (If known):

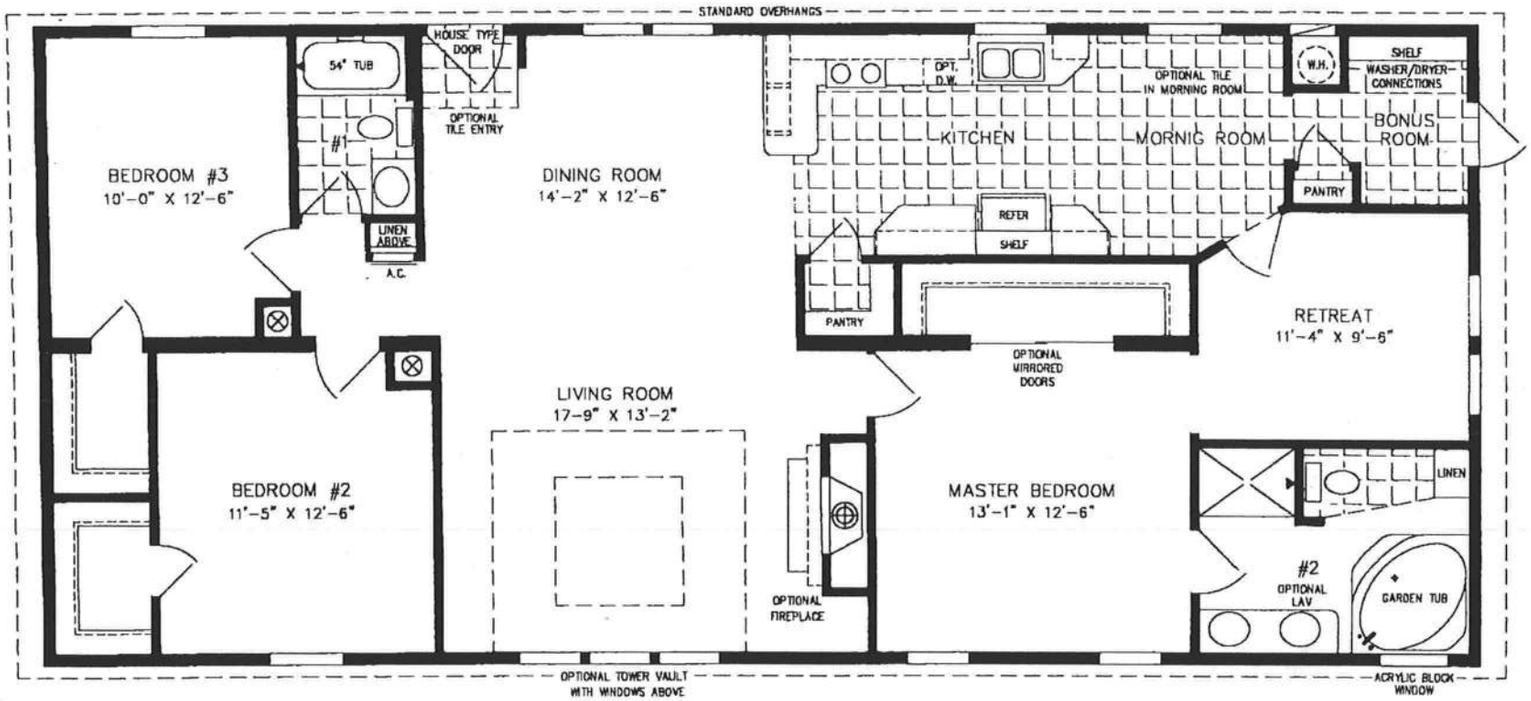
Remarks: LOT 1 BLOCK 1 BLAINE ESTATES PHASE 2

Address Issued By: Ronald N Croft
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.

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

The Classic II



28' X 60'

1,600 SQUARE FEET

Model CL2-46012B

2006

(ALL SIZES ARE APPROX.)

DESIGNED FOR ZONES II & III

JACOBSEN HOMES

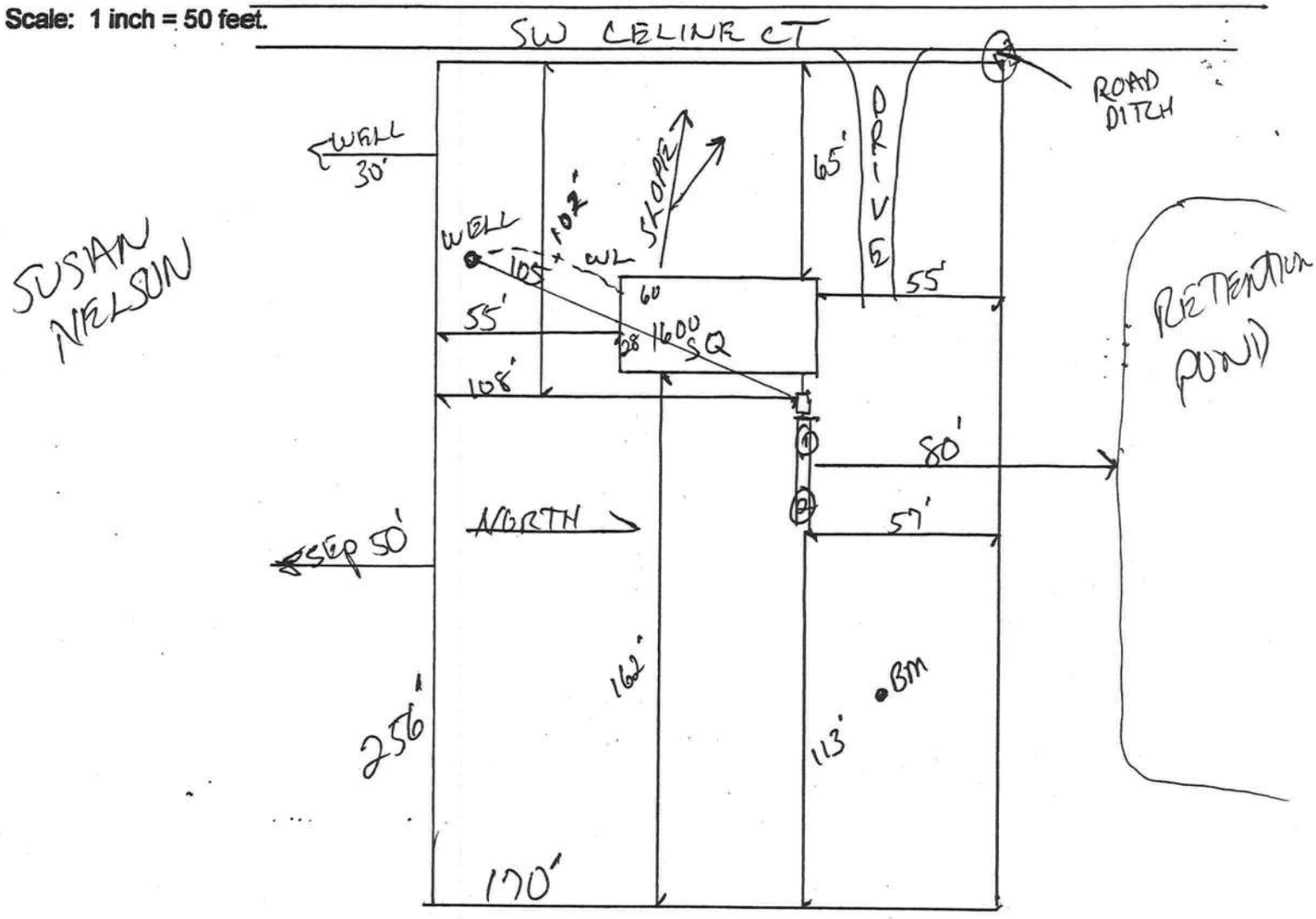
600 Packard Court ■ Safety Harbor, Florida 34695 ■ Telephone (727) 726-1138

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

Permit Application Number 05-0928N

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

Scale: 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Rock D Tyo MASTER CONTRACTOR

Plan Approved ✓ Not Approved ____ Date 9-13-05

By Mrs S Lee Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

RON E. BIAS WELL DRILLING
RT.2 BOX 5340
FT. WHITE, FLORIDA 32038
(904) 497-1045
MOBILE: 364-9233

TO: Columbia County Building Department

Description of well to be installed for Customer: Susan Nelson
Located at Address: 189 S.W. Celine Ct

1 hp – 1 ¼" drop over 86 gallon tank, 250 gallon equivalent captive with back flow preventer. 35-gallon draw down with check valve pass requirements.

Ron E Bias
Ron Bias

STATE OF FLORIDA
COUNTY OF COLUMBIA

AFFIDAVIT

This is to certify that I, (We), Jewel Crapp Agnew, as the seller, by an **Agreement for Deed**, of the below described property:

Tax Parcel No. 22-4S-16-03090-121

Subdivision (Name, lot, Block, Phase) Lot 7 Block 1 Blair II Acres Unit 2

Give my permission for Jessica Newberry to place a (Mobile Home / Travel Trailer / Single Family Home)

I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property.

Jewel Crapp Agnew
(1) Seller Signature

(2) Seller Signature

Sworn to and subscribed before me this 26 day of October, 20 05. This (These) person (s) are personally known to me or produced ID _____.
(Type)

Rebecca L. Gallina
Notary Public Signature

Rebecca L. Gallina
Notary Printed Name

State of Florida
My commission expires:

REBECCA L. GALLINA
MY COMMISSION # DD 253343
EXPIRES: September 25, 2007
Bonded Thru Notary Public Underwriters

FAXED 1-20-06

CERTIFICATE OF

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 22-4S-16-03090-121 **Building permit No.** 000023754

Permit Holder CORBETTS

Owner of Building SUSAN NEILSON

Location: 189 SW CELINE COURT(BLAINE EST., LOT 1)

Date: 01/03/2006

COLUMBIA COUNTY · GATEWAY TO FLORIDA ·

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)