

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

ck# 2350

*For Office Use Only* (Revised 7-1-15) Zoning Official SM Building Official SM

AP# 1907-87 Date Received 7/22/19 By MG Permit # 38513

Flood Zone X Development Permit \_\_\_\_\_ Zoning A-3 Land Use Plan Map Category A8

Comments Replacing existing Mobile Home, floor one foot above the road

FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor 1160 ft River \_\_\_\_\_ In Floodway \_\_\_\_\_

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0623 ☐ Well letter OR

☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid *de-bur*

☐ DOT Approval ☐ Parent Parcel # \_\_\_\_\_ ☐ STUP-MH \_\_\_\_\_ ☐ 911 App *Sm's Address*

☐ Ellisville Water Sys ☒ Assessment Paid on Property ☐ Out County ☐ In County ☒ Sub VF Form *ms*

Property ID # 24-7S-16-04310-006 Subdivision NA Lot# NA

- New Mobile Home X Used Mobile Home \_\_\_\_\_ 44 x 76 DW w/Tag MH Size \_\_\_\_\_ Year 2019
- Applicant Dale Burd Phone # 386-365-7674
- Address 20619 County Road 137, Lake City, FL, 32024
- Name of Property Owner Keri Sherriffe Phone# 732-672-8635
- 911 Address 228 SW Hidden Court, Fort White, FL 32038
- Circle the correct power company - FL Power & Light - ( Clay Electric )  
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Keri Sherriffe Phone # 732-672-8635
- Address 228 SW Hidden Court, Fort White, FL, 32038
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1
- Lot Size 328 x 663 Total Acreage 5.02
- 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 SR 47 South, TL US 27, TR Shiloh St, TL Spirit Ave, TL Majestic Glen, TR Hidden Court. To end on right
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245, Lake City, FL, 32025
- License Number IH-1025386 Installation Decal # 49872

*UH - Emailed Dale 8/6/19*

**Columbia County Property Appraiser**

Jeff Hampton

**2018 Tax Roll Year**

updated: 6/25/2019

Parcel: << **24-7S-16-04310-006** >>

Aerial Viewer Pictometry Google Maps

**Owner & Property Info**

Result: 1 of 1

Owner	SHERRIFFE KERI 228 SW HIDDEN CT FORT WHITE, FL 32038		
Site	228 HIDDEN CT, FORT WHITE		
Description*	E1/2 OF SE1/4 OF NW1/4 OF NE1/4. 881-2570, 954-896, 971 -896, WD 1148-2419, ESMT 1297- 2171, QC 1297-2170, WD 1305-2614,		
Area	5.02 AC	S/T/R	24-7S-16
Use Code**	MOBILE HOM (000200)	Tax District	3

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

**Property & Assessment Values**

2018 Certified Values		2019 Working Values	
Mkt Land (2)	\$31,863	Mkt Land (2)	\$33,113
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$39,920	Building (1)	\$45,878
XFOB (1)	\$1,000	XFOB (1)	\$1,000
Just	\$72,783	Just	\$79,991
Class	\$0	Class	\$0
Appraised	\$72,783	Appraised	\$79,991
SOH Cap [?]	\$2,412	SOH Cap [?]	\$8,283
Assessed	\$70,371	Assessed	\$71,708
Exempt	HX H3 \$45,371	Exempt	HX H3 \$46,708
Total Taxable	county:\$25,000 city:\$25,000 other:\$25,000 school:\$45,371	Total Taxable	county:\$25,000 city:\$25,000 other:\$25,000 school:\$46,708

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
11/30/2015	\$49,900	1305/2614	WD	V	Q	03
7/6/2015	\$100	1297/2170	WD	V	U	11
4/17/2008	\$100	1148/2419	WD	V	U	01
5/25/1999	\$18,500	881/2570	WD	V	U	03

**▼ Building Characteristics**

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	2	SFR MANUF (000200)	2006	1512	1512	\$45,878

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

**▼ Extra Features & Out Buildings (Codes)**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
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## Legend

### Parcels

2018Aerials



Addresses

SRWMD Wetlands



LidarElevations



Roads

Roads

others

Dirt

Interstate

Main

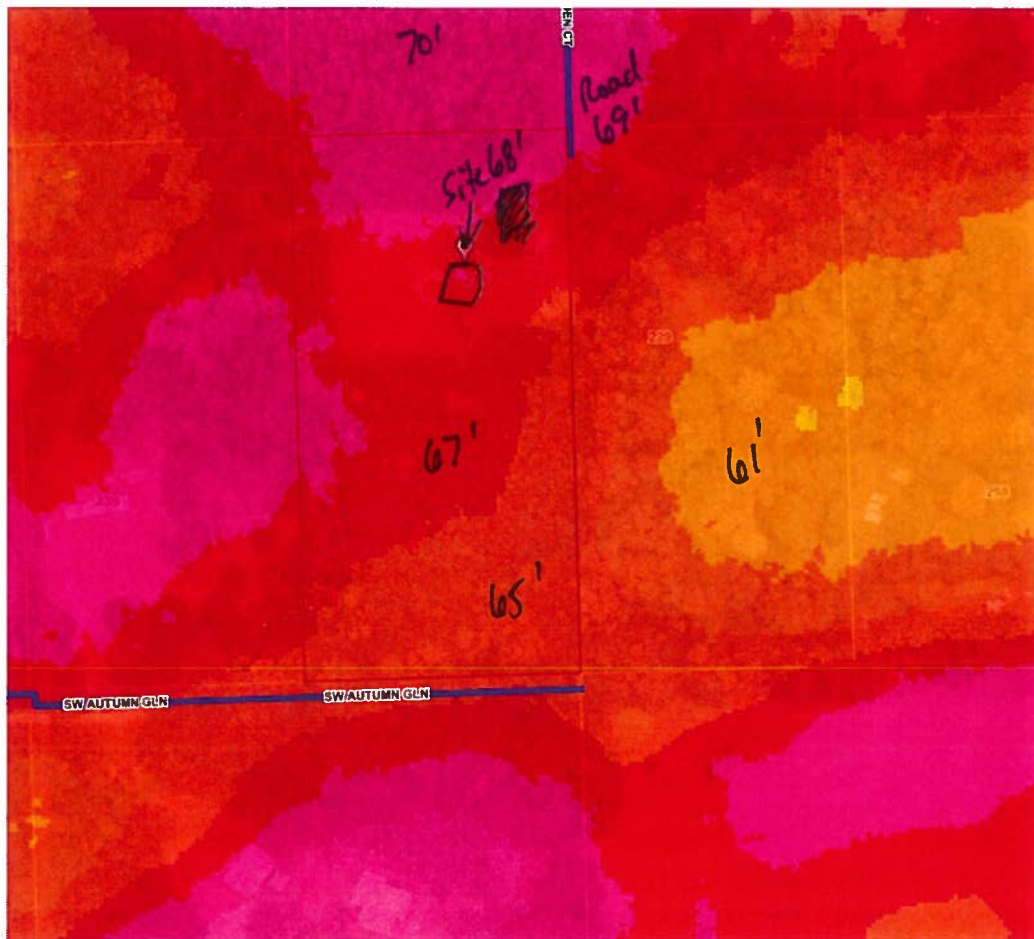
Other

Paved

Private

# Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Aug 06 2019 10:10:48 GMT-0400 (Eastern Daylight Time)



## Parcel Information

Parcel No: 24-7S-16-04310-006

Owner: SHERRIFFE KERI

Subdivision:

Lot:

Acres: 5.047118

Deed Acres: 5.02 Ac

District: District 2 Rocky Ford

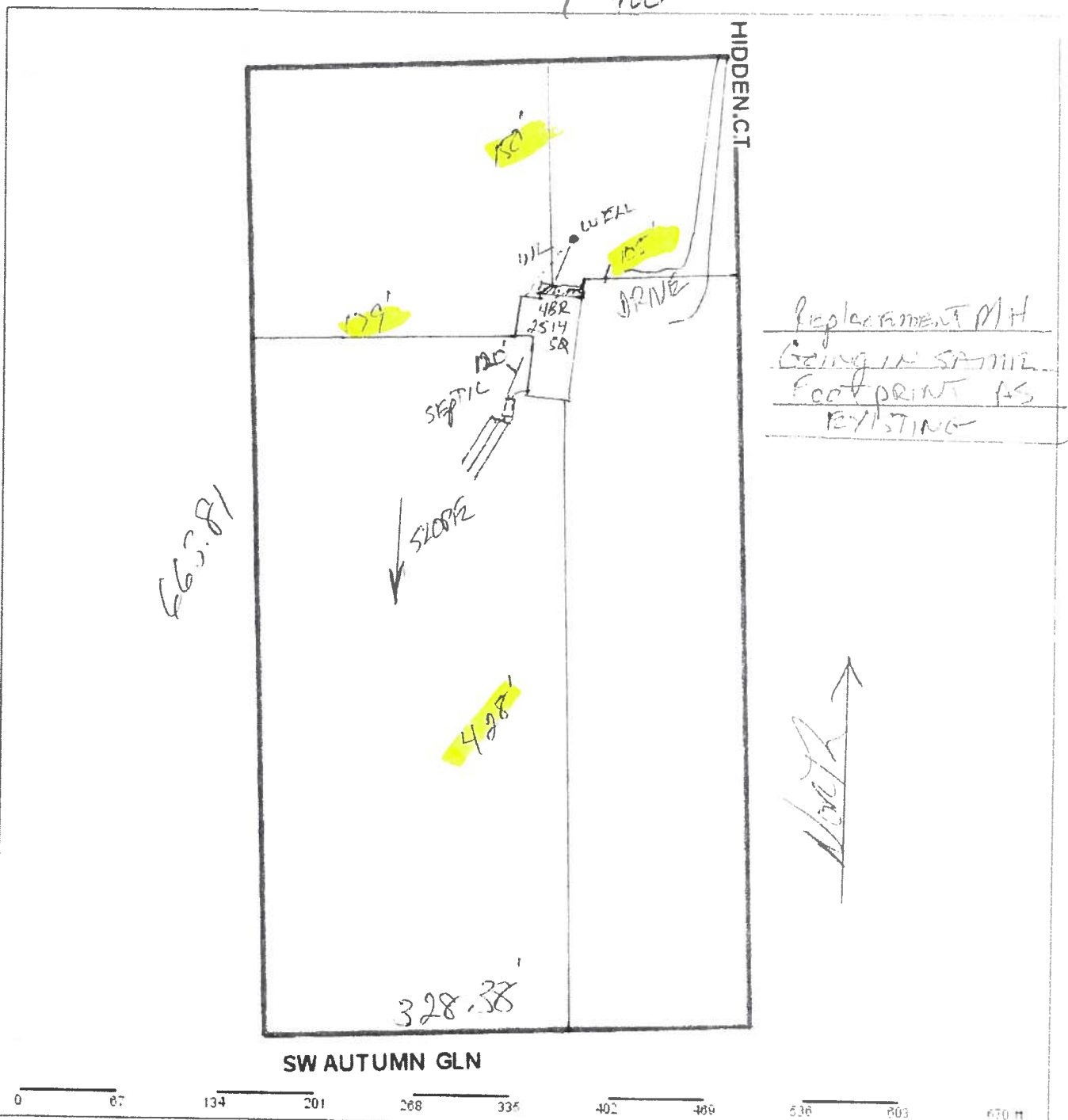
Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

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### Columbia County Property Appraiser

Jeff Hampton | Lake City, Florida | 386-758-1083

**PARCEL: 24-7S-16-04310-006 HX H3** | MOBILE HOM (000200) | 5.02 AC

E1/2 OF SE1/4 OF NW1/4 OF NE1/4 881-2570, 954-896, 971-896, WD 1148-2419, ESMT 1297-2171, QC 1297-2170, WD 1305-2614.

#### SHERRIFFE KERI

Owner: 228 SW HIDDEN CT  
FORT WHITE, FL 32038

Site: 228 HIDDEN CT, FORT  
WHITE

Sales Info: 11/30/2015 \$49,900 V (Q)  
7/6/2015 \$100 V (U)  
4/17/2008 \$100 V (U)

#### 2018 Certified Values

Mkt Lnd	\$33,113	Appraised	\$79,991
Ag Lnd	\$0	Assessed	\$71,708
Bldg	\$45,878	Exempt	\$46,708
XFOB	\$1,000		
Just	\$79,991	Total Taxable	county: \$25,000 city: \$25,000 other: \$25,000 school: \$46,708

#### NOTES:

Columbia County, FL

# PERMIT WORKSHEET

page 1 of 2

## PERMIT NUMBER

Installer Robert Sheppard License # IH 1025386

Installer Mobile Phone # 386-623-2203

Address of home being installed

225 SW 11th Ave  
Fort Lauderdale, FL 33308

Manufacturer Live Oak Length x width 32x80

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 # 49872

Triple/Quad ☒ Serial # LOH64-1189451 A8C

Roof System: ☒ Typical ☐ Hinged

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (sq in)	18" 1/2" x 18"	20" x 20"	22" x 22"	24" x 24"	28" x 28"
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	6'	7'	8'	9'	10'
2000 psf	6'	8'	9'	10'	11'	12'
2500 psf	7' 6"	9'	10'	11'	12'	13'
3000 psf	8'	10'	11'	12'	13'	14'
3500 psf	8'	10'	11'	12'	13'	14'

\* 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.) 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

4 ft 5 ft

FRAME TIES

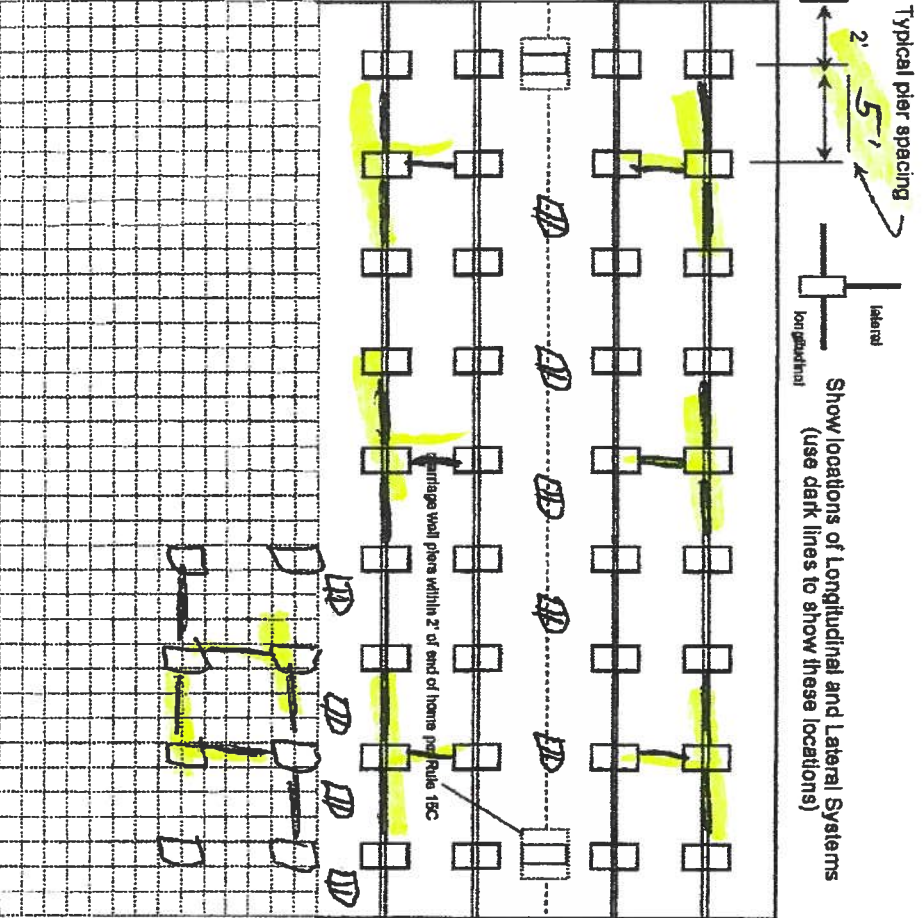
within 2' of end of home spaced at 5' 4" oc

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
Manufacturer Live Oak  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer Live Oak

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall  
Number 32  
4



# PERMIT NUMBER

# PERMIT WORKSHEET

page 2 of 2

## POCKET PENETROMETER TEST

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

X 2700 X 1600 X 1600

## 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 1600 X 1600

## 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. 1 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 holding capacity.

KS Installer's Initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shupard

Date Tested

6-10-19

## 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. 24

## 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 ✓ Swale ✓ Pad ✓ Other \_\_\_\_\_

## Fastening multi wide units

Floor: Type Fastener: 1/4x5 Length: 5" Spacing: 16"  
Walls: Type Fastener: 3/8x5 Length: 6" Spacing: 16"  
Roof: Type Fastener: 1/4x5 Length: 6" 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, 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 KS

Type gasket Foam  
Pg. 29

Installed:  
Between Floors Yes ✓  
Between Walls Yes ✓  
Bottom of ridgebeam Yes ✓

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 29  
Siding on units is installed to manufacturer's specifications. Yes ✓  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

## Miscellaneous

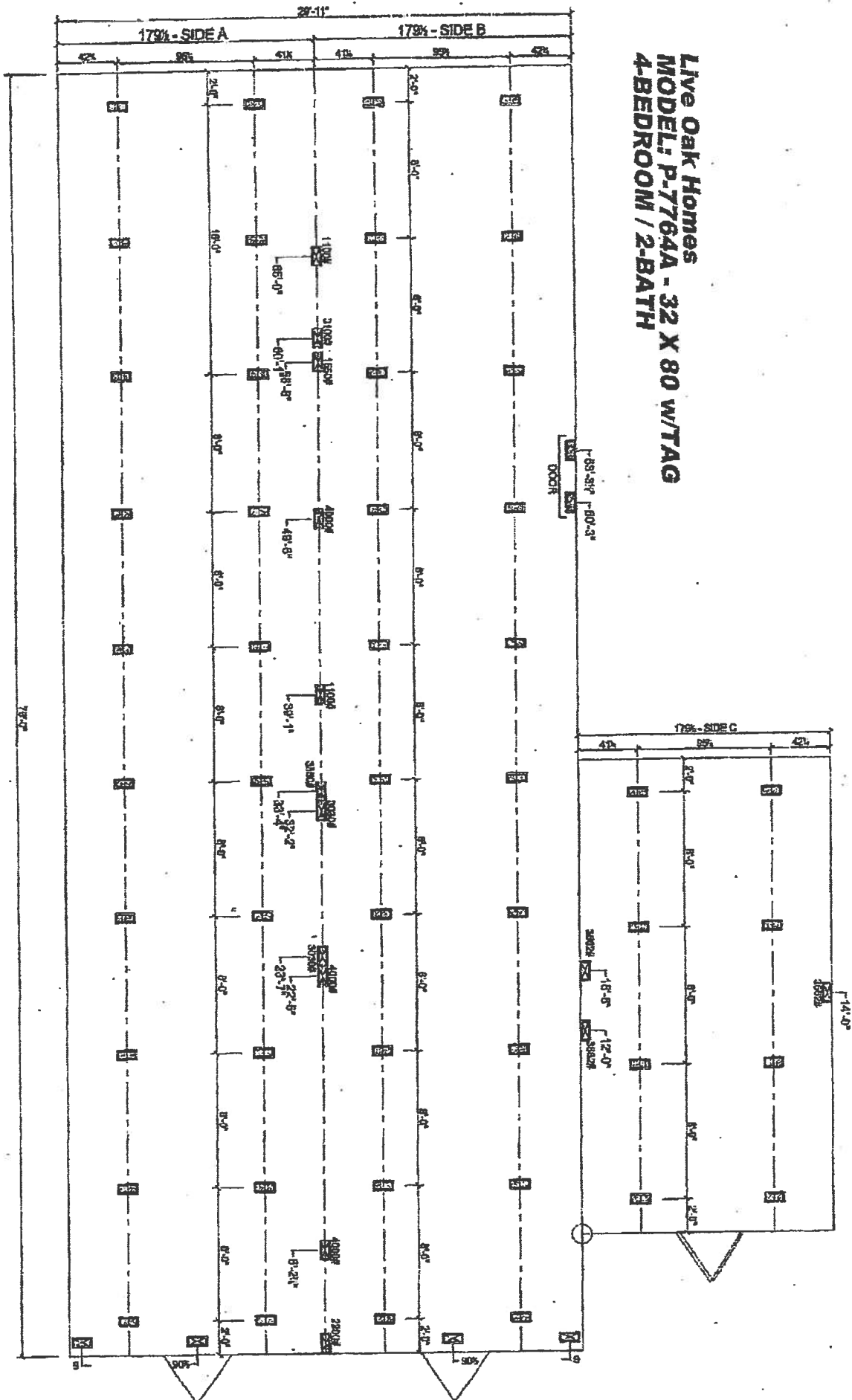
Skirting to be installed. Yes ✓ No \_\_\_\_\_  
Dryer vent installed outside of skirting. Yes \_\_\_\_\_ N/A ✓  
Range downflow vent installed outside of skirting. Yes \_\_\_\_\_ N/A ✓  
Drain lines supported at 4 foot intervals. Yes \_\_\_\_\_  
Electrical crossovers protected. Yes ✓  
Other: \_\_\_\_\_

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

Robert Shupard Date 6-10-19

**Live Oak Homes**  
**MODEL: P-7764A - 32 X 80 w/TAG**  
**4-BEDROOM / 2-BATH**



## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1907-87 CONTRACTOR Robert Sheppard PHONE 386-623-2203

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Keri Sherriffe

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 ✓ 1074	Print Name <u>Glenn Whittington</u>	Signature <u>[Signature]</u>
	License #: <u>EC 13002957</u>	Phone #: <u>386-792-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C ✓ 1069	Print Name <u>Ronald Bonds Sr.</u>	Signature <u>[Signature]</u>
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

*Qualifier Forms cannot be submitted for any Specialty License.*

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.

Revised 10/30/2015

This information was derived from data which was compiled by the Columbia County Property Appraiser's Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. [grizzlylogic.com](http://grizzlylogic.com)





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

LICENSED QUALIFIER AUTHORIZATION

I, Ronald E Board Sr (license holder name), licensed qualifier  
for STYLE CREST ENTERPRISES, INC (company name), do certify that  
the below referenced person(s) listed on this form is/are contracted/hired by me, the license  
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an  
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said  
person(s) is/are under my direct supervision and control and is/are authorized to purchase and  
sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burr	1.
2. Rocky Ford	2.
3. Kelly Bishop	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done  
under my license and fully responsible for compliance with all Florida Statutes, Codes, and  
Local Ordinances. I understand that the State and County Licensing Boards have the power and  
authority to discipline a license holder for violations committed by him/her, his/her agents,  
officers, or employees and that I have full responsibility for compliance with all statutes, codes  
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or  
officer(s), you must notify this department in writing of the changes and submit a new letter of  
authorization form, which will supersede all previous lists. Failure to do so may allow  
unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized) CRC 1817658 2-16-16  
License Number Date

NOTARY INFORMATION

STATE OF: FL COUNTY OF: Bay

The above license holder, whose name is Ronald Edward Board Sr  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) \_\_\_\_\_ on this 16<sup>th</sup> day of FEB, 2016

Stacey Ann Hopkins  
NOTARY'S SIGNATURE

(Seal/Stamp)





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

PERMIT NO. 19-0623  
DATE PAID: 8/19/19  
FEE PAID: 205.00  
RECEIPT #: 142988

APPLICATION FOR:

[ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [X] Modification

APPLICANT: Keri Sheriffe

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: NA BLOCK: NA SUB: NA PLATTED: \_\_\_\_\_

PROPERTY ID #: 24-7S-16-04310-006 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 5.02 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: 228 Hidden Ct, Fort White, FL 32038

DIRECTIONS TO PROPERTY: W on NE Franklin St. toward NE Calhoun Ave, take 47 S to SW Shiloh St, take SW Spirit Ave to SW Hidden Ct.

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	SF Residential	4	2514	
2				
3				

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Rocky D7

DATE: 8/8/2019

DH 4015, 08/09 (Obsoletes previous editions which may not be used)  
Incorporated 64E-6.001, FAC

Page 1 of 4



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

Permit Application Number 19-0623

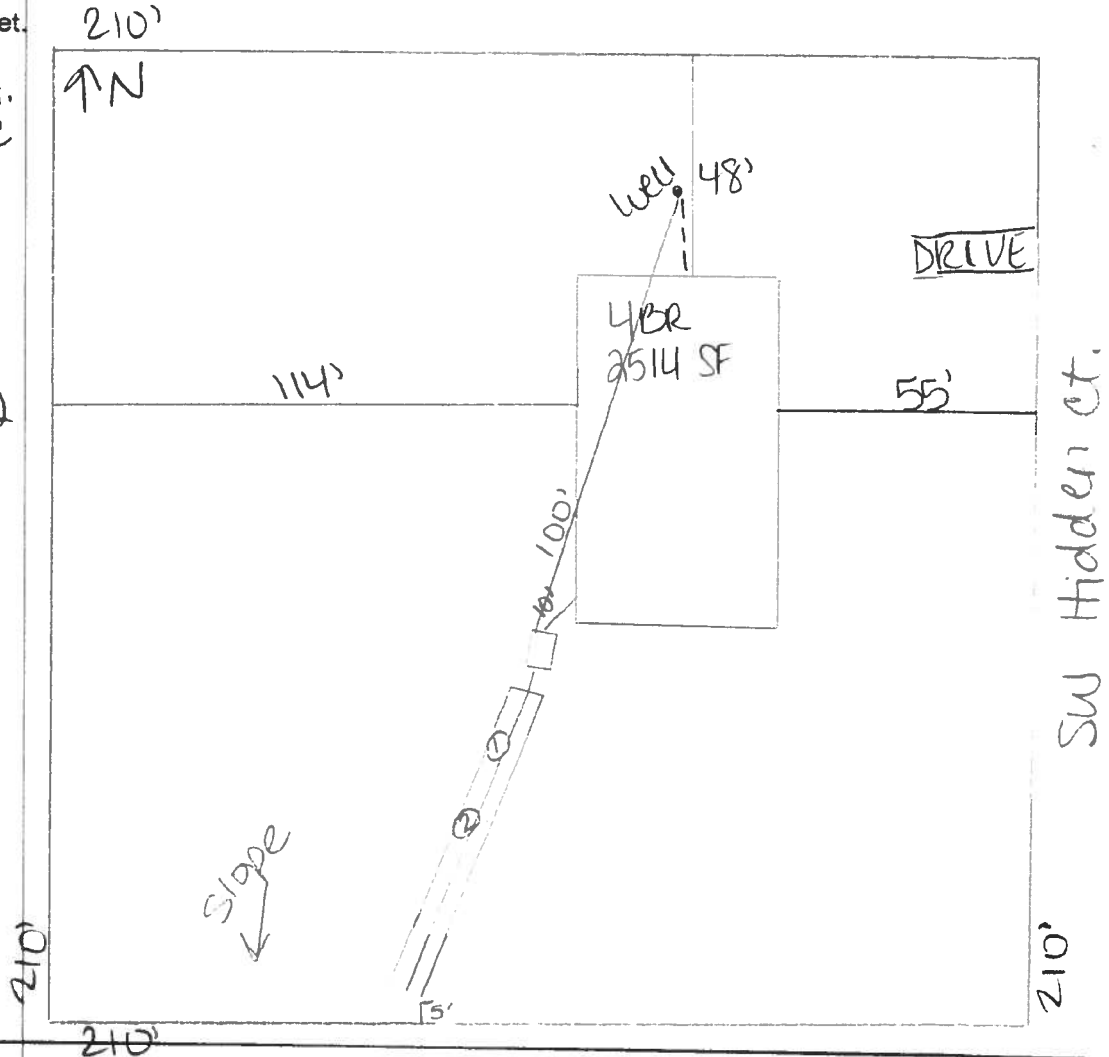
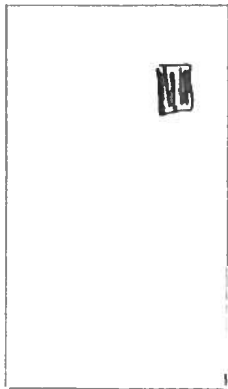
Sheriffe

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

Scale: 1 inch = 40 feet.

Replacement M.H.  
going in same  
footprint as  
existing.

1 acre of 5.02



Notes:

1 acre of 5.02

**REVISED!**

Site Plan submitted by: Rodney D. Z...

Plan Approved ☒

Not Approved ☐

By: Jill...

Ind. Env. Health Director

Columbia

MASTER CONTRACTOR

Date 8/21/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT