

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

325.00

For Office Use Only (Revised 7-1-15) Zoning Official LN Building Official 2/18

AP# 1808-83 Date Received 8/28 By JW Permit # 27304

Flood Zone X Development Permit Zoning A3 Land Use Plan Map Category A

Comments Existing w/H Park

FEMA Map# Elevation Finished Floor 1" above road River In Floodway

☐ Recorded Deed or ☒ Property Appraiser PO ☐ Site Plan ☒ EH # 18-0820 ☐ Well letter OR

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

☐ DOT Approval ☐ Parent Parcel # ☐ STUP-MH ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment N/A ☐ Out County ☐ In County ☒ Sub VF Form 3821

Property ID # 34-45-17-09016-000 Subdivision Mt Park Heritage Way Lot# 193

- New Mobile Home ☒ Used Mobile Home MH Size 14x80 Year
- Applicant Oda Price Phone # 386-931-9678
- Address 3360 150th Place Lake City FL 32024
- Name of Property Owner Gregory Real Estate Holdings LLC Phone# 904-224-5409
- 911 Address 193 Shady Oaks Loop Lake City FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home Gregory Real Estate Holdings LLC Phone # 904-224-5409
- Address 6157 Deer Creek Rd MacClenny FL 32063
- Relationship to Property Owner Owner

- Current Number of Dwellings on Property
- Lot Size 5 Total Acreage 5
- 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
- Driving Directions to the Property 6 miles, turn right 29th, then left 1.1m to 252
turn right 57 miles SW Deputy Davis, 0.9 turn left 252B, head to Hwy 90W
merge 175 S towards Alachua take 423 to SW stop 47 left then right 242A to
US 441 turn right 1.9 miles left on to Shady Loop
- Name of Licensed Dealer/Installer William Price Phone # 407-448-0953
- Installers Address 3360 150th Pl Lake City FL 32024
- License Number IT-1041936 Installation Decal # 52334

Spoke w/ Oda 8.29.18 + 9.27.18 (Need E11)
W spoke to Jamie 10-8-18 + JW spoke to Oda 10-9-18 + sent email

SCANNED

Mobile Home Permit Worksheet

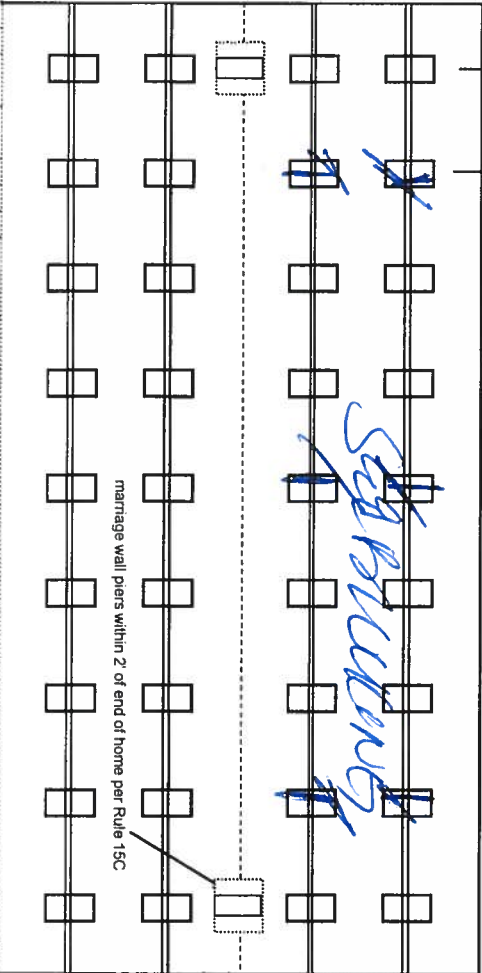
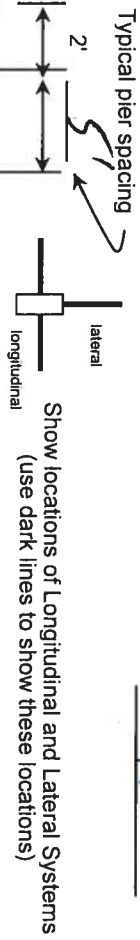
Application Number: _____ Date: _____

Installer: William R. Miller License # TH-1041930
Address of home being installed: 173 S. S. Shady Oak Loop
Lake City, TN 38024

Manufacturer: LOH Length x width: 16' x 80'

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: WPM



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 # 52234
Triple/Quad ☐ Serial # 10 H9421833495

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (sq in)	16' x 16" (256)	18 1/2" x 18 (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'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 16x25
Perimeter pier pad size 16x14
Other pier pad sizes (required by the mfg.) _____

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

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 _____

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 _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____
Sidewall _____
Longitudinal Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 380 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb. holding capacity.

WLC Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

William L. Welch

Date Tested

8-20-18

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. ✓

Plumbing

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

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 WLC
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, 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 _____

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 ✓

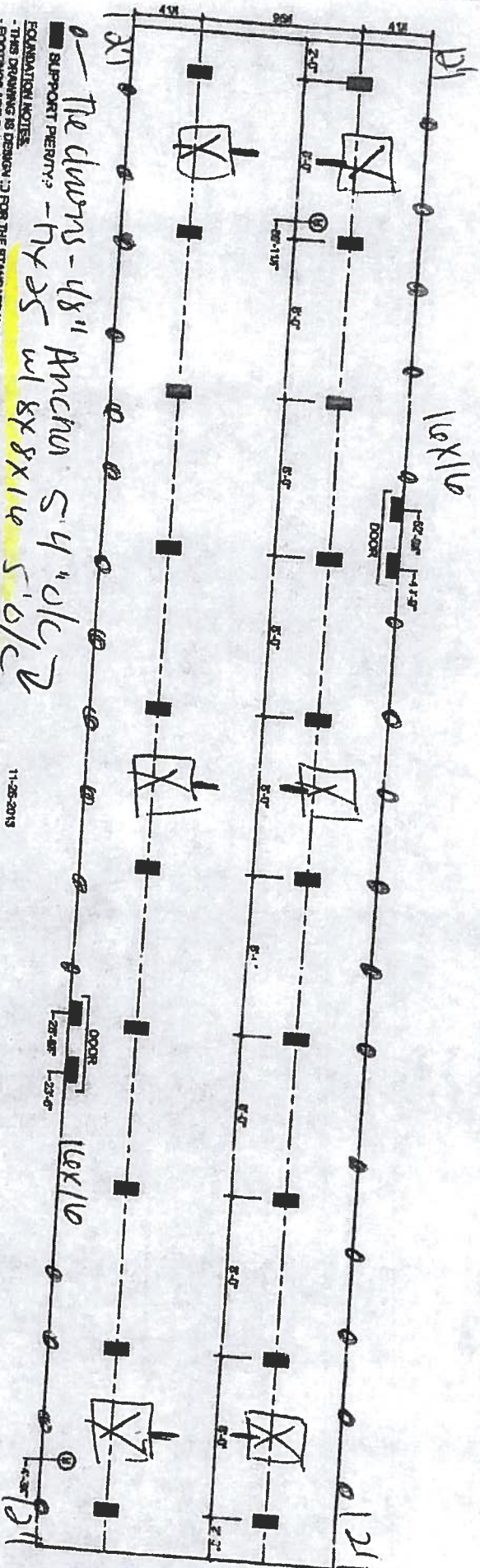
Miscellaneous

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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Date 8-20-18



0 - The columns - 4x4" Anchor 5'4" o/c 2
 - 7x25 w/ 8x8x14 5'0" o/c

11-25-2015

FOUNDATION NOTES:
 - THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE 2, AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
 - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. SPACING MAY VARY BASED ON WIND TYPE, SOIL CONDITION, ETC.
 - FOOTINGS ARE REQUIRED AT SUPPORT POSTS. SEE INSTALLATION MANUAL FOR REQUIRED ENDS.

Live Oak Homes
MODEL: L-57631 - 16 X 16
3-BEDROOM / 2-BATH

- ① MAIN ELECTRICAL
- ② ELECTRICAL CROSSOVER
- ③ WATER INLET
- ④ WATER CROSSOVER (IF ANY)
- ⑤ GAS INLET (IF ANY)
- ⑥ GAS CROSSOVER (IF ANY)
- ⑦ DUCT CROSSOVER
- ⑧ SEWER DROPS
- ⑨ RETURN AIR (HWOPT. HEAT PUMP ON DUCT)
- ⑩ SUPPLY AIR (HWOPT. HEAT PUMP ON DUCT)

☒ - 41 Mer

* All parameters shown 16x16 w/ 8x8x14

L-57631

OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM
MODEL 1101"V" (STEPS 1-15)
LONGITUDINAL ONLY: FOLLOW STEPS 1-9
FOR ADDING LATERAL ARM : Follow Steps 10-15
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS 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 76" 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-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE 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 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4" . 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 "U" 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 degree 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 3/4" 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 5'4".

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 per Florida Code.
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 3/4" self-tapping screws in pre-drilled holes.



OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone 931-796-4555
Fax: 931-796-8811
www.olivertechnologies.com

INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.
- The concrete shall be minimum 2500 psi mix
 - A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer **OR** When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

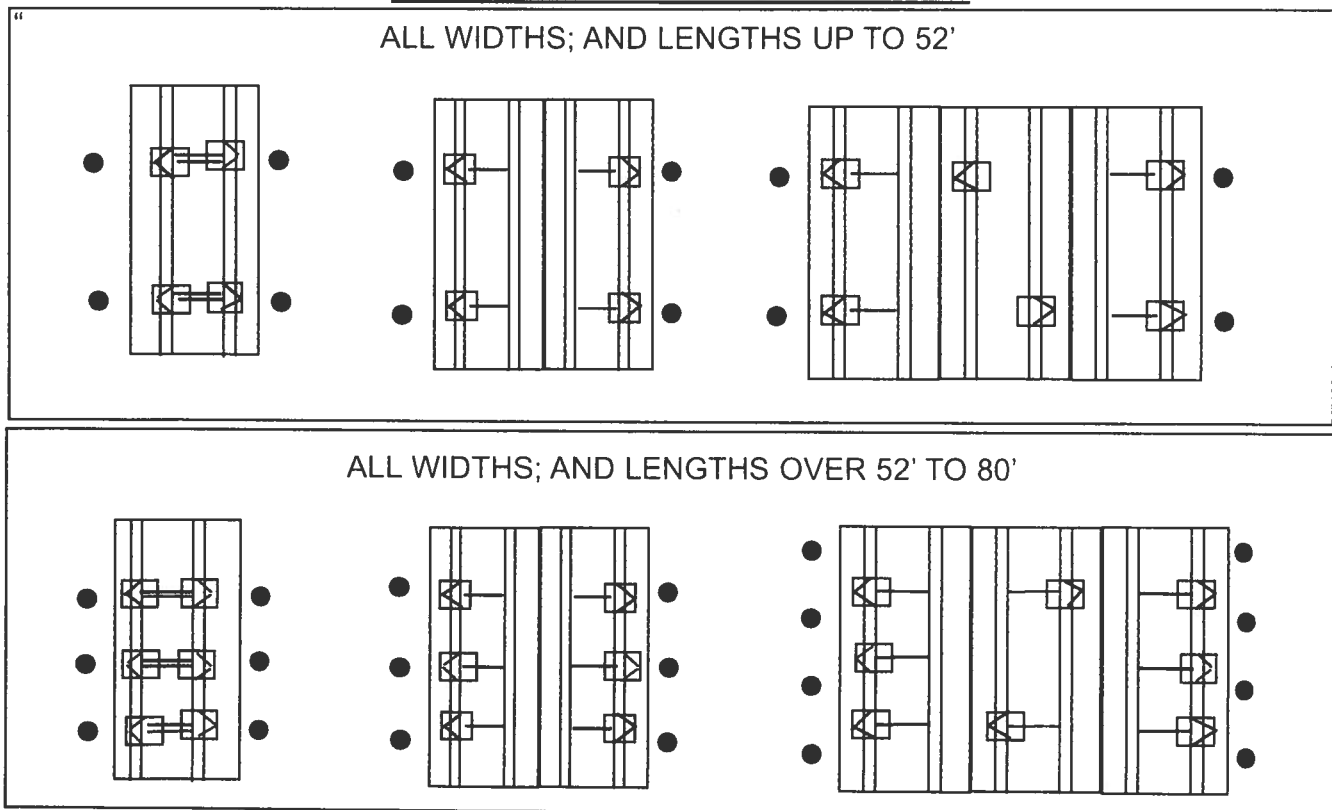
LATERAL: (Model 1101 TC "V")

18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

- LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- ☐ = LOCATION OF LONGITUDINAL BRACING ONLY
- ☐ = TRANSVERSE & LONGITUDINAL LOCATIONS

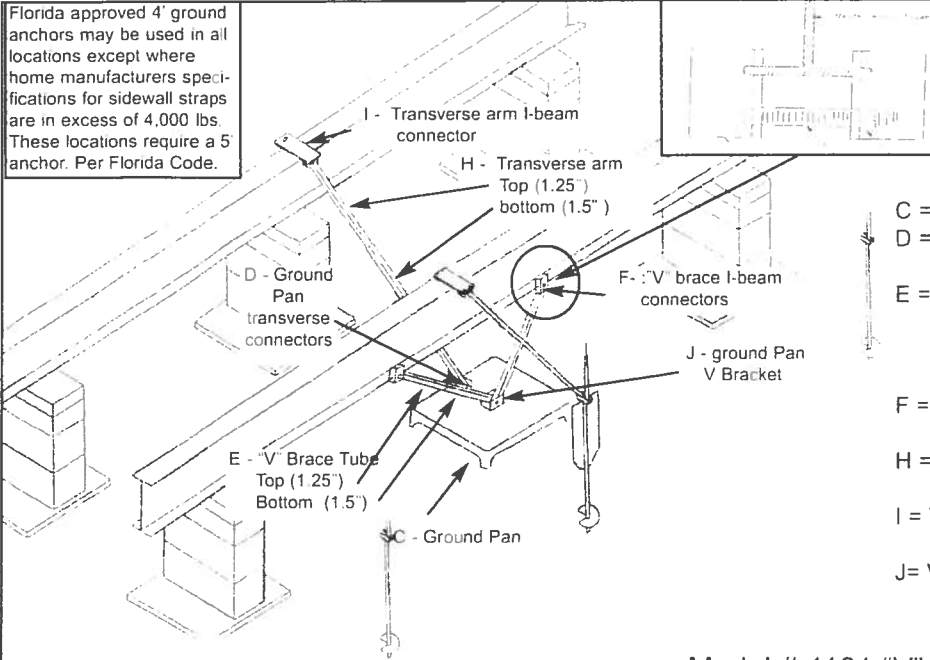
REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



HOMES 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 80'. One stabilizer plate and frame tie required at each lateral bracing system.

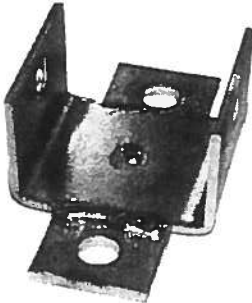
Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.



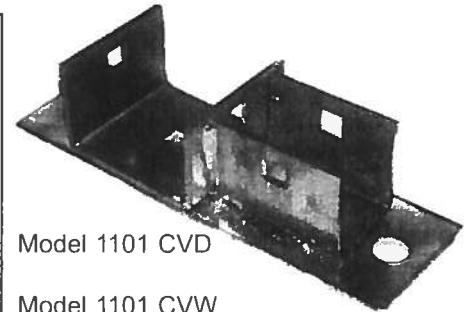
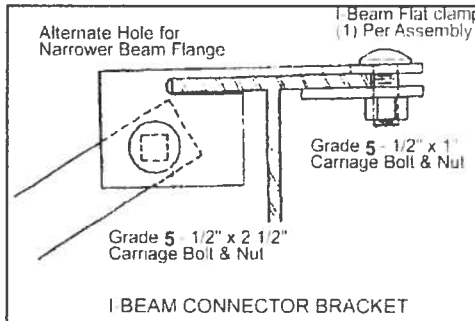
- C = GROUND PAN
- D = GROUND PAN CONNECTOR
- U BRACKETS TRANSVERSE
- E = TELESOPING V BRACE
- TUBE ASSEMBLY W/ 1.5 BOT-
- TOM TUBE AND 1.25 TUBE
- INSERT
- F = "V" BRACE I-BEAM CONNEC-
- TORS ASSEMBLY
- H = TELESOPING TRANSVERSE
- ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM
- CONNECTOR
- J= V PAN BRACKET

Model # 1101 "V"

Longitude dry
concrete bracket
part # 1101 D-CPCA



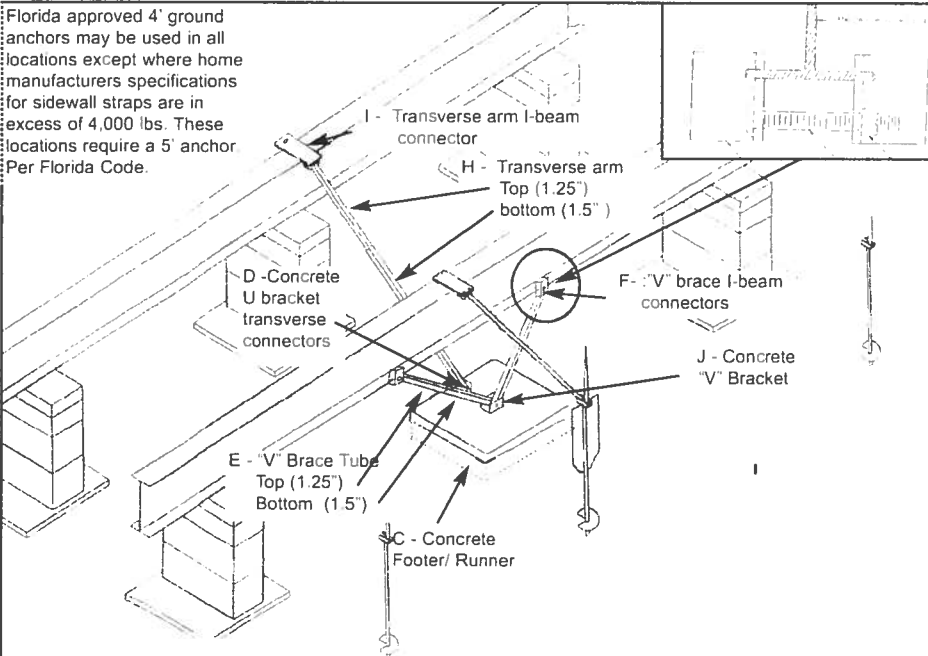
Wet bracket part #
1101 W-CPCA not
shown



Model 1101 CVD

Model 1101 CVW
not shown

Florida approved 4" ground
anchors may be used in all
locations except where home
manufacturers specifications
for sidewall straps are in
excess of 4,000 lbs. These
locations require a 5" anchor.
Per Florida Code.



- C = CONCRETE FOOTER/RUNNER
- D = CONCRETE U BRACKET TRANSVERSE
- CONNECTOR (connects with grade 5 - 1/2" x 2
- 1/2" carriage bolt & nut)
- E = TELESOPING V BRACE
- TUBE ASSEMBLY W/ 1.5 BOT-
- TOM TUBE AND 1.25 TUBE
- INSERT
- F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY
- (connects with grade 5 - 1/2" x 4" carriage bolt
- & nut)
- H = TELESOPING TRANSVERSE ARM
- ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- (connects with grade 5 - 1/2" x 2 1/2" carriage bolt
- & nut)
- J= CONCRETE "V" BRACKET (connects with
- grade 5 - 1/2" x 4" carriage bolt & nut)

Model # 1101 C "V"



OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone: 931-796-4555
Fax: 931-796-8811
www.olivertechnologies.com

Gregory Holding

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1808-83 CONTRACTOR William Price PHONE 407-448-0953

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 ✓ 1079	<p>Print Name <u>Glenn Whittington</u> Signature <u>Glenn Whittington</u></p> <p>License #: <u>EC13002957</u> Phone #: <u>386 972 1500</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>
MECHANICAL/ A/C _____	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>

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.

Gregory Holdings

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 180883 CONTRACTOR William Price PHONE 407-448-0953

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	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>
MECHANICAL/ A/C <u>1669</u>	<p>Print Name <u>Ronald E Bonds SR</u> Signature <u>Ronald E Bonds SR</u></p> <p>License #: <u>CAC1817658</u> Phone #: <u>850-269-1453</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>

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 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, William R. Price, give this authority for the job address show below
Installer License Holder Name
only, 193 Shady Oak Loop Lake City FL 32055, and I do certify that
Job Address

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)
<u>Oda Price</u>	<u>Oda Price</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
<u>Jesse M Shepard</u>	<u>Jesse M Shepard</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

William R. Price
License Holders Signature (Notarized)
TH-1041936
License Number
8-20-18
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is William Price,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally on this 20th day of August, 20 18.

Jessica Prescott
NOTARY'S SIGNATURE



JESSICA PRESCOTT
Notary Public, State of Florida
My Comm. Expires Oct. 1, 2019
Commission No. FF 923361

Detail by Entity Name

Florida Limited Liability Company

GREGORY REAL ESTATE HOLDINGS, LLC

Filing Information

Document Number	L17000100846
FEI/EIN Number	82-1467198
Date Filed	05/05/2017
State	FL
Status	ACTIVE
Last Event	LC STMNT OF RA/RO CHG
Event Date Filed	05/25/2017
Event Effective Date	NONE

Principal Address

6157 DEERCREEK LN
MACCLENLY, FL 32063

Mailing Address

6157 DEERCREEK LN
MACCLENLY, FL 32063

Registered Agent Name & Address

GREGORY, DAVID
6157 DEERCREEK LN
MACCLENLY, FL 32063

Name Changed: 05/25/2017

Address Changed: 05/25/2017

Authorized Person(s) Detail

Name & Address

Title AMBR

GREGORY, DAVID
6157 DEERCREEK LN
MACCLENLY, FL 32063

Title AMBR

GREGORY, SANDRA
6157 DEERCREEK LN
MACCLENLY, FL 32063

Annual Reports

Report Year	Filed Date
2018	03/20/2018

Document Images

Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year

updated: 8/1/2018

Retrieve Tax Record

2018 TRIM (pdf)

Property Card

Parcel List Generator

Show on GIS Map

Print

Parcel: << 34-4S-17-09016-000 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

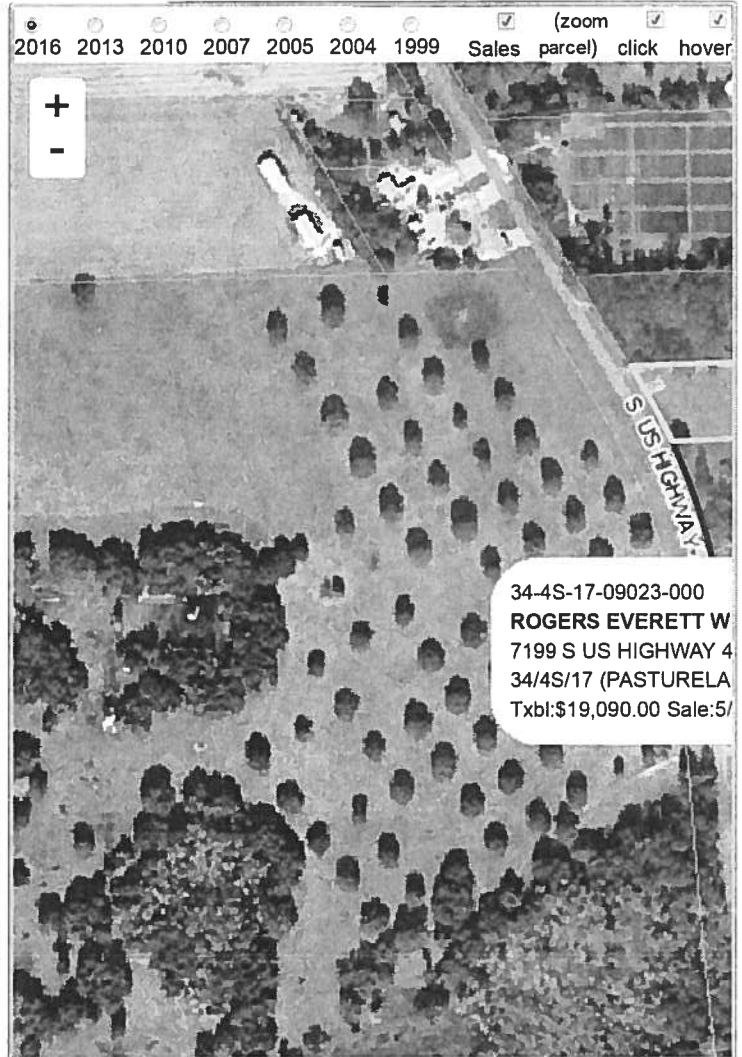
Owner	GREGORY REAL ESTATE HOLDINGS LLC 6157 DEERCREEK LANE MACCLENNY, FL 32063		
Site	173 SHADY OAKS LP, LAKE CITY		
Description*	COMM INTERS E R/W US-441 & N LINE SW1/4, RUN S 317 FT, E 1572 FT, S 853 FT, W 1189 FT TO E R/W US-441 FOR POB, RUN N ALONG R/W 600 FT, E 362 FT, S 600 FT, W 362 FT TO POB. 522-194, 727-640, 792-1679, 916-494, WD 1087-1301, WD 1137-529, CT 1171-2765, WD 1182-34 WD 1191-2751, WD 1210-961, WD 1292-540, WD 1340-1961, <<<less		
Area	5 AC	S/T/R	34-4S-17
Use Code**	MH PARK (002802)	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

2017 Certified Values		2018 Working Values	
Mkt Land (2)	\$30,457	Mkt Land (2)	\$33,303
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (3)	\$55,572	Building (4)	\$126,177
XFOB (3)	\$18,700	XFOB (7)	\$20,000
Just	\$104,729	Just	\$179,480
Class	\$0	Class	\$0
Appraised	\$104,729	Appraised	\$179,480
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$104,729	Assessed	\$179,480
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$104,729 city:\$104,729 other:\$104,729 school:\$104,729	Total Taxable	county:\$179,480 city:\$179,480 other:\$179,480 school:\$179,480



34-4S-17-09023-000
ROGERS EVERETT W
7199 S US HIGHWAY 4
34/4S/17 (PASTURELA
Txbl:\$19,090.00 Sale:5/

Sales History

Show Similar Sales within 1/2 mile Fill out Sales Questionnaire

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/14/2017	\$247,000	1340/1961	WD	I	Q	01
3/27/2015	\$94,500	1292/0540	WD	I	Q	01
2/18/2011	\$245,000	1210/0961	WD	I	Q	01
4/5/2010	\$100	1191/2751	WD	I	U	11
10/5/2009	\$140,000	1182/0034	WD	I	U	12
4/8/2009	\$100	1171/2765	CT	I	U	18
11/20/2007	\$224,000	1137/0529	WD	I	U	03
6/21/2006	\$99,000	1087/1301	WD	I	Q	
12/12/2000	\$80,000	916/0494	WD	I	U	03
7/1/1994	\$330,000	792/1679	WD	I	U	35
8/1/1990	\$45,000	727/0640	WD	I	Q	

Gregory / WFMACECenny / Columbia

License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE

Order #: 3364

Label #: 52336

Manufacturer:

(Check Size of Home)

Homeowner:

Year Model:

Single _____

Address:

Length & Width:

Double _____

Triple _____

City/State/Zip:

Type Longitudinal System:

HUD Label #:

Phone #:

Type Lateral Arm System:

Soil Bearing / PSF:

Date Installed:

New Home: _____ Used Home: _____

Torque Probe / in-lbs:

Installed Wind Zone:

Data Plate Wind Zone:

Permit #:

Note:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

52336

LABEL #

DATE OF INSTALLATION

WILLIAM R PRICE

NAME

IH / 1041936 / 1

3364

LICENSE #

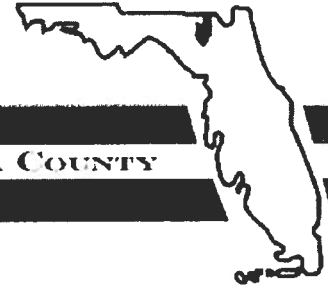
ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
MOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:	8/22/2018 12:55:17 PM
Address:	193 SE SHADY OAKS Loop
City:	LAKE CITY
State:	FL
Zip Code	32025
Parcel ID	09016-000

REMARKS: Address for proposed structure on parcel. 8th address (MH Park).

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

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

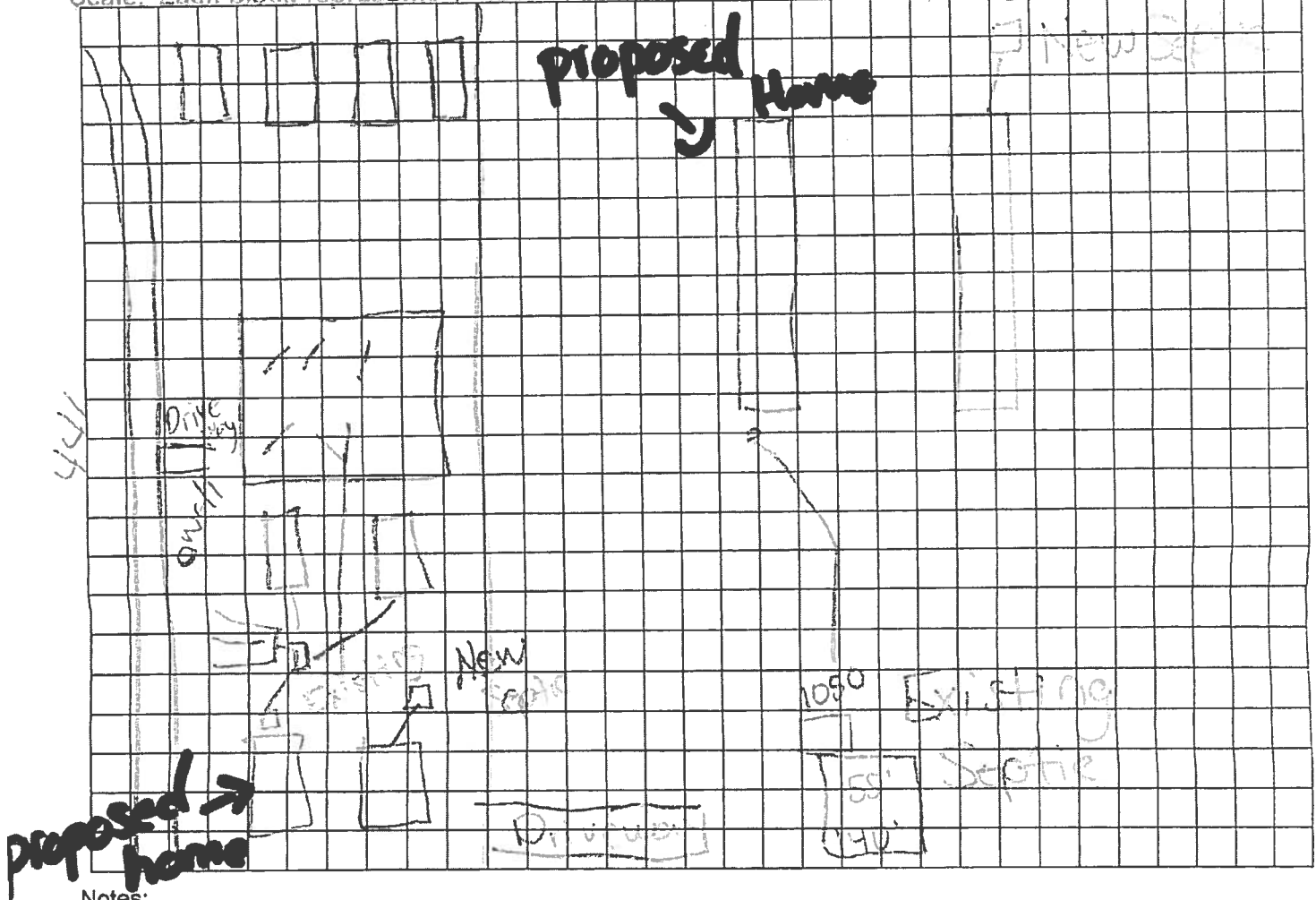
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0520

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.

210 x 210 1 acre of S



Notes:

Gregory Reed Estate

5.00 Acres Shady Oaks

34-45-17-09016-000

Site Plan submitted by: Oda Price

Plan Approved ☒

Not Approved ☐

Date 10/8/15

By [Signature] [Signature] [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 18-08310
DATE PAID: 10/2/18
FEE PAID: 12,000
RECEIPT #: 1367219

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Gregory Real Estate

AGENT: Coda Price / Jessie Sheppard TELEPHONE: 386 963-4298

MAILING ADDRESS: 741 SE State Rd 100 LC FL 32028

=====

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: _____ BLOCK: _____ SUBDIVISION: Heritage MHP PLATTED: 2005

PROPERTY ID #: 34-45-17-09016-000 ZONING: S/P I/M OR EQUIVALENT: ☐ Y / ☒ N

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y / ☐ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 193 Sharkey Oaks Loop

DIRECTIONS TO PROPERTY: Hwy 441 S to Site on Left

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>SW m/home</u>	<u>3</u>	<u>1180</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: [Signature] DATE: 9/25/18