

DATE 01/08/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021402

APPLICANT WILBERT AUSTIN, JR./B. JENKINS PHONE 386.755.1826
ADDRESS 149 NE EMPIRE DRIVE LAKE CITY FL 32055
OWNER DANIEL & GRACE BOONE PHONE _____
ADDRESS RT. 16, BOX 631 LAKE CITY FL 32055
CONTRACTOR WILBERT AUSTIN, JR. PHONE 386.755.1826

LOCATION OF PROPERTY 441-N UNDER I-10 GO 3 MILES NORTH OF I-10, LEFT SIDE LOOK FOR
BOONE'S TRANSMISSION. GO PAST SHOP, LOT ON CORNER.

TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00
HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____
FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
LAND USE & ZONING A-3 MAX. HEIGHT 35
Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 29-2S-17-04786-001 SUBDIVISION _____
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 15.00

IH0000403
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
EXISTING 01-0504-N BLK _____ RK _____ N _____
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FOOT ABOVE ROAD

LETTER OF AUTHORIZATION FROM LAND OWNER FOR BILL JENKINS TO REPLACE MH

REPLACING BURN'T UNIT. PRE/MH OKAYED PER BILLY D. Check # or Cash NO CHARGE

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____
Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by _____ date/app. by _____ date/app. by _____
Framing _____ Rough-in plumbing above slab and below wood floor _____
date/app. by _____ date/app. by _____
Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
date/app. by _____ date/app. by _____ date/app. by _____
Permanent power _____ C.O. Final _____ Culvert _____
date/app. by _____ date/app. by _____ date/app. by _____
M/H tie downs, blocking, electricity and plumbing _____ Pool _____
date/app. by _____ date/app. by _____
Reconnection _____ Pump pole _____ Utility Pole _____
date/app. by _____ date/app. by _____ date/app. by _____
M/H Pole _____ Travel Trailer _____ Re-roof _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$.00 ZONING CERT. FEE \$.00 FIRE FEE \$ _____ WASTE FEE \$ _____
FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE .00 n/c
INSPECTORS OFFICE _____ CLERKS OFFICE _____

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 INCONVENIENCE, 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.

left message 1/7/03
G

*** The well affidavit, from the well driller, is required before the permit can be issued.***

***This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted.

Using existing well on property

For Office Use Only

Zoning Official BLK

Building Official AK-7-C

AP# 0312-62 Date Received 12/29/03 By JW Permit # 21402
Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-
Comments _____

Property ID # 29-25-17-0478-001 *(Must have a copy of the property d

New Mobile Home _____ Used Mobile Home ☒ Year 1985

Applicant Wilbert Austin Jr Phone # 755-1826

Address 149 N.E. Empire Dr

Name of Property Owner Bill Jackson (owner) JENKINS (owner) BOONE (owner) Phone# 785-3716

Address Box 3854, LAKE CITY, FL 32055 (Box 631 - Lake City)

(911-) 7044 N. US 441 - LAKE CITY, FL 32055

Name of Owner of Mobile Home Same Bill JENKINS Phone # _____

Address _____

Relationship to Property Owner CARETAKER

Current Number of Dwellings on Property 1

Lot Size _____ Total Acreage 15 Acres

Current Driveway connection is Existing

Is this Mobile Home Replacing an Existing Mobile Home YES (REPLACING BURN'T UNIT)

Name of Licensed Dealer/Installer Wilbert Austin Jr Phone # 755-1826

Installers Address 149 N.E. Empire Dr Lake City, FL 32055

License Number TH 0000403 Installation Decal # 9184

The Permit Worksheet (2 pages) must be submitted with this application.

Installers Affidavit and Letter of Authorization must be notarized when submitted.

911 ADDRESS - Letter of Authorization from owner
to place unit on.

PERMIT NUMBER

Installer William Foster Jr License # TH0000403

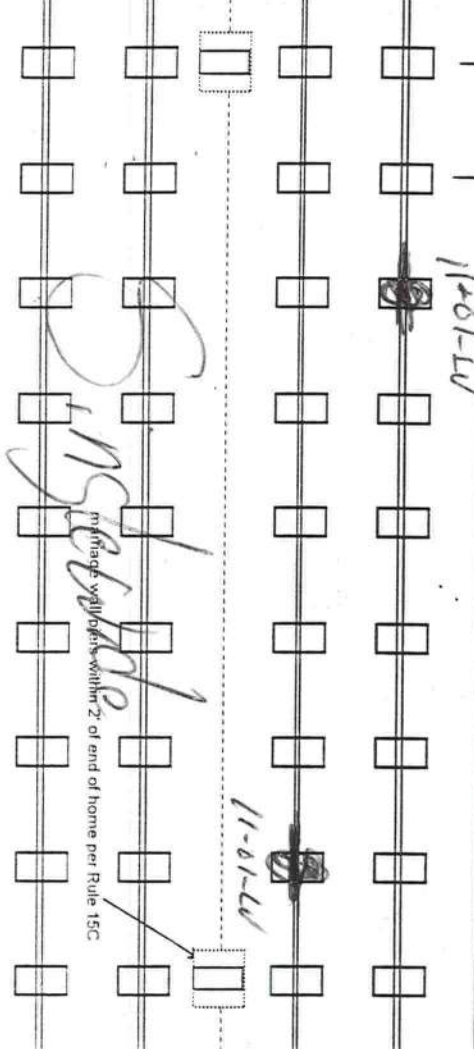
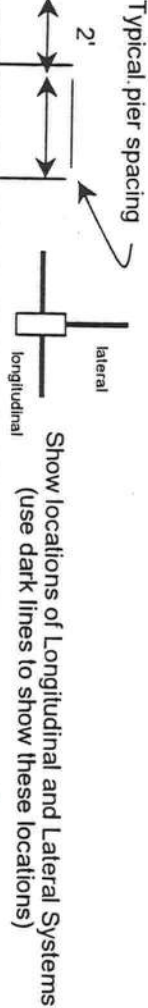
Address of home being installed 1

Manufacturer Skyline Length x width 14x20

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 WJF



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 # 9184

Triple/Quad ☐ Serial # 5894

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 4x16x16

Perimeter pier pad size 16x16

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

ANCHORS

4 ft ☒ 5 ft _____

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD) _____ Number 2

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms _____

Manufacturer _____

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 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.

TORQUE PROBE TEST

The results of the torque probe test is 290 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 slate 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 locations where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

WLD Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Wilbert Castro Jr.

Date Tested

12-07-03

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 _____
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, 6" 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 _____

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 W
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

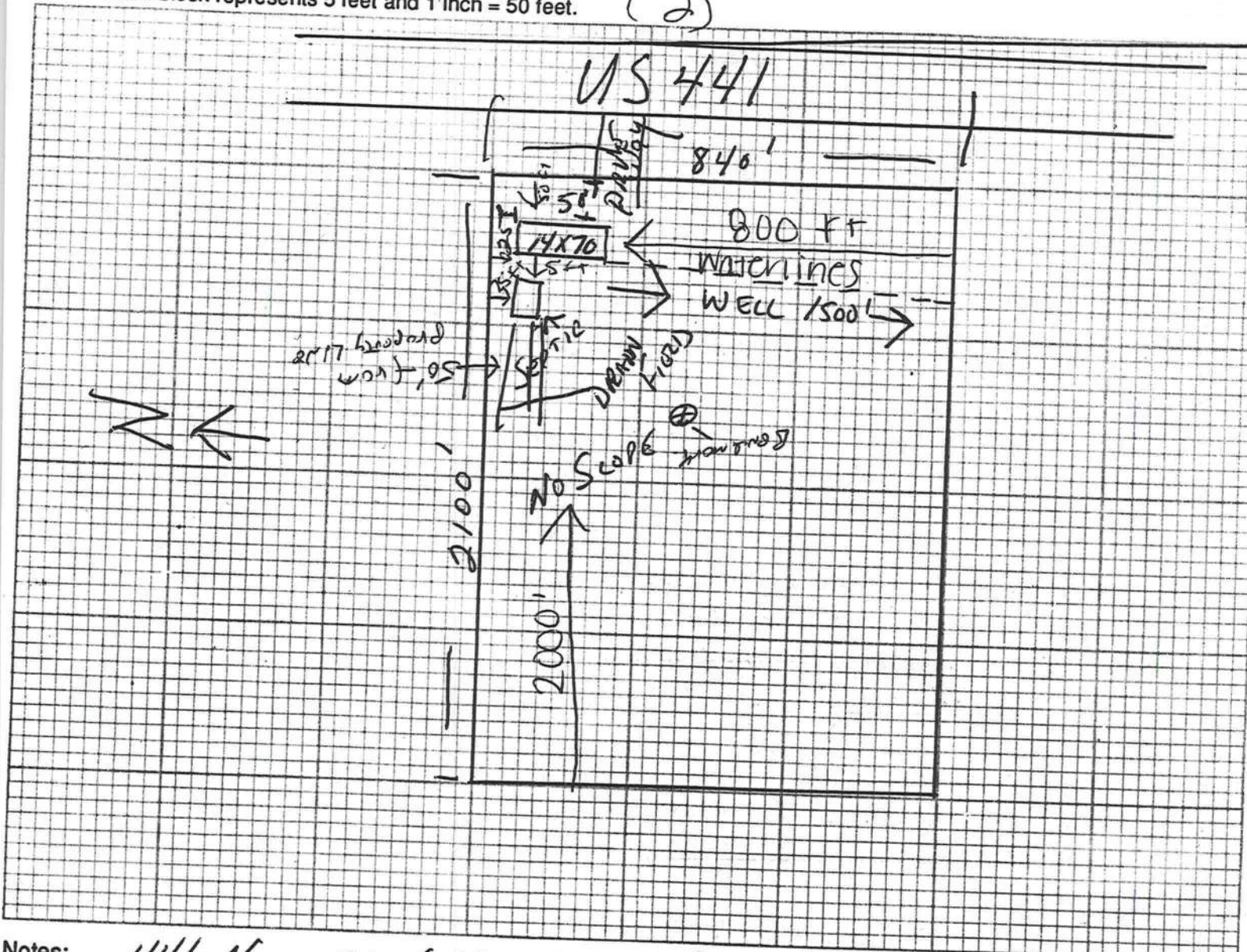
Wilbert Castro Jr.

Date 12-07-03



PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet. (2)



Notes: 441 N 30 UNDER I-10 3 MILES NORTH
OF I-10 ON LEFT AND SIDE LOOK FOR
BOONES TRANS. SHOP SO PAST YOU WILL SEE
PINE TREES LOT ON CORNER

Site Plan submitted by [Signature]
Signature

Plan Approved ☒ Not Approved ☐

by [Signature] Columbia

owner
Title

Date 6/18/01

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

14015, 10/96 (Replaces HRS-H Form 4015 which may be used)
lock Number: 5744-002-4015-6)



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS

CENTRAX #: 12-SC-02606
DATE PAID: 6-15-01
FEE PAID: \$ 200.00
RECEIPT:
OSTDSNBR: 01-0504-N

released
7/11/01

01-0504-N

APPLICATION FOR:

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

[] Innovative

APPLICANT: Boone, Daniel

TELEPHONE: 904 755-9305

AGENT: OWNER, Property Owner, Owner

MAILING ADDRESS: Rt 16 Box 631 Lc 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 64E-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: BLOCK: SUBDIVISION: Not Applicable

PLATTED:

PROPERTY ID #: 29-2S-17-04786-001

ZONING:

I / M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 15.00 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: [X] PRIVATE [] PUBLIC

IS SEWER AVAILABLE AS PER 381.0065, FLORIDA STATUTES? [Y / N] DISTANCE TO SEWER: FT

PROPERTY STREET ADDRESS: 441 N, Lake City

DIRECTIONS TO PROPERTY:

441n, 3 miles after i-10 look for boones trans, look for pine trees after shop, property on corner

BUILDING INFORMATION

[X] RESIDENTIAL

[] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
12	2 Bdrm Single/Multi Fa	2	970	3	

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

APPLICANT'S SIGNATURE:

H 4015, 03/97 (Obsoletes previous editions which may not be used)
Stock Number: 5744-001-4015-1 [ostds_appl_4015-1]

DATE: 6/15/01



Columbia County Property Appraiser - Interactive Record Search & GIS Mapping System -

[New Search](#)[Search Results](#)[Parcel Details](#)[GIS Map](#)[Home](#)[Property Search](#)[Agriculture Classification](#)[Amendment 10](#)[Exemptions](#)[Tangible Property Tax](#)[Tax Rates](#)[Report & Map Pricing](#)[Important Dates](#)[Office Directory](#)[E-mail us Comments](#)**Parcel ID:** 29-2S-17-04786-001

Columbia County Property Appraiser

Owner & Property InfoShow: [Tax Info](#) | [GIS Map](#) | [Property Card](#)

Owner's Name	BOONE DANIEL W & GRACE D
Site Address	---
Mailing Address	ROUTE 16 BOX 631 LAKE CITY, FL 320559716
Brief Legal	THE N 15 AC OF S1/2 OF SW1/4 OF NE1/4. ORB 528-355, 690-480,

Use Desc. (code)	IMPROVED A (005000)
Neighborhood	29217.00
Tax District	3
UD Codes	
Market Area	03
Total Land Area	15.000 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (3)	\$6,250.00
Ag Land Value	cnt: (1)	\$3,542.00
Building Value	cnt: (2)	\$10,711.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$20,503.00

Just Value	\$44,961.00
Class Value	\$20,503.00
Assessed Value	\$20,503.00
Exempt Value	\$0.00
Total Taxable Value	\$20,503.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
7/3/1989	690/480	WD	V	U		\$30,000.00
9/1/1982	496/24	WD	V	Q		\$7,100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1978	WD or PLY (08)	924	1980	\$8,194.00
2	MOBILE HME (000800)	1970	Alum Siding (26)	768	768	\$2,517.00
Note: All S.F. calculations are based on exterior building dimensions.						

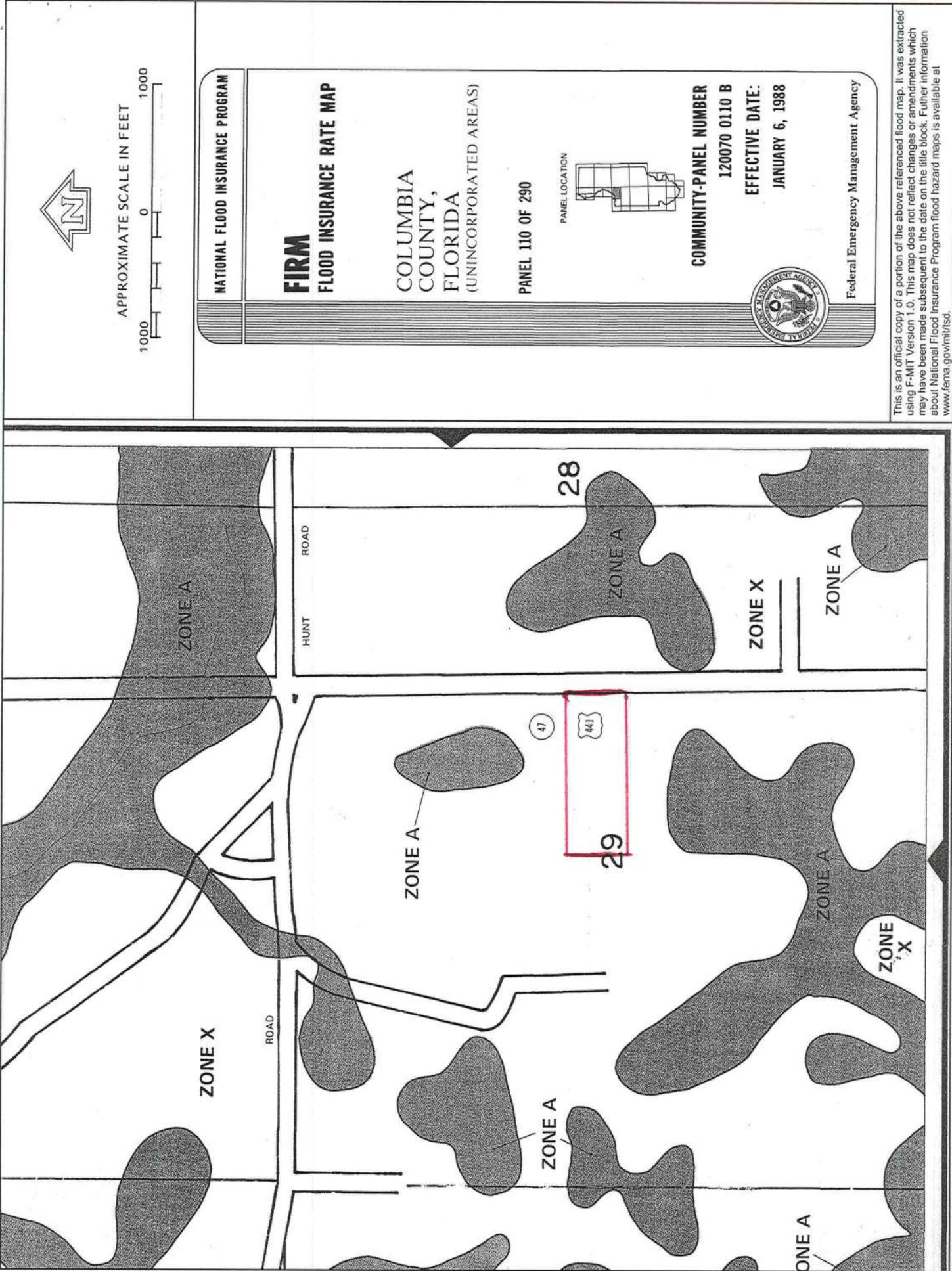
Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
005500	TIMBER 2 (AG)	14.000 AC	1.00/1.00/1.00/1.00	\$253.00	\$3,542.00
009910	MKT.VAL.AG (MKT)	14.000 AC	1.00/1.00/1.00/1.00	\$0.00	\$28,000.00
000200	MBL HM (MKT)	1.000 AC	1.00/1.00/.75/1.00	\$5,250.00	\$5,250.00
009947	SEPTIC (MKT)	1.000 UT - (.000AC)	1.00/1.00/1.00/1.00	\$500.00	\$500.00

03/2-62



APPROXIMATE SCALE IN FEET
1000 0 1000

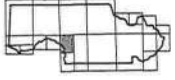
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 110 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER

120070 0110 B

EFFECTIVE DATE:

JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nfls.

