

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

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

AP# _____ Date Received _____ By _____ Permit # _____

Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____

Comments _____

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

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ 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 _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 01754-001 Subdivision N/A Lot# N/A

- New Mobile Home ☒ Used Mobile Home ☐ MH Size 32x52 Year 2020
 Applicant Jessie Shepard Phone # 386-963-4298
 Address 3360 150th Pl Lake City FL 32024
 Name of Property Owner Jessie R. Newton Phone# 352-895-7763
 911 Address 521 Scarborough Ln Lake City FL 32055
 Circle the correct power company FL Power & Light Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy
 Name of Owner of Mobile Home Jessie R Newton Phone # 352-895-7743
 Address 104 Sniper Dr. Hawthorne FL 32440
 Relationship to Property Owner Self
 Current Number of Dwellings on Property 0
 Lot Size 24AC Total Acreage 24AC
 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 NO
 Driving Directions to the Property Head NE Skamando toward NE Justice St @
NE Madison St @ US-41A / NW Main Blvd @ NW Scarborough Ave
 Name of Licensed Dealer/Installer William R. Price Phone # 386-963-4298
 Installers Address 3360 150th Pl Lake City FL 32024
 License Number 14-1041936 Installation Decal # 70009

009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$3,250	\$3,250
Search Result: 1 of 1					
© Columbia County Property Appraiser Jeff Hampton Lake City, Florida 386-758-1083				by: GrizzlyLogic.com	

Prepared by:
Elaine R. Davis/ Valarie Benz
American Title Services of Lake City, Inc.
321 SW Main Boulevard, Suite 105
Lake City, Florida 32025

File Number: 19-125

Inst: 201912005198 Date: 03/04/2019 Time: 4:16PM
Page 1 of 3 B: 1379 P: 1539 P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy ClerkDoc Stamp-Deed: 315.00

Warranty Deed

Made this March 1, 2019 A.D.

By **FRANKIE M. SCOTT**, 149 NW Paps Court, Lake City, Florida 32055, hereinafter called the grantor,

To **JESSIE R. NEWTON**, whose post office address is: 104 Slipper Drive, Hawthorn, Florida 32460, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

See Attached Schedule "A"

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: 01754-001

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2018.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in my presence:

Valarie Benz
Witness Printed Name: Valarie Benz

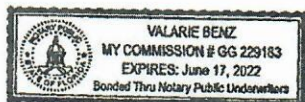
Frankie M. Scott (Seal)
FRANKIE M. SCOTT
Address: 149 NW Paps Court, Lake City, Florida 32055

Jessie R. Moore
Witness Printed Name: Debbie G. Moore

State of Florida

County of Columbia

The foregoing instrument was acknowledged before me this 1st day of March, 2019, by **FRANKIE M. SCOTT**, who is/are personally known to me or who has produced Drivers License as identification.



Valarie Benz
Notary Public
Print Name: Valarie Benz
My Commission Expires: _____

Prepared by:
Elaine R. Davis/ Valarie Benz
American Title Services of Lake City, Inc.
321 SW Main Boulevard, Suite 105
Lake City, Florida 32025

File Number: 19-125

Schedule "A"

PART OF THE EAST 1/2 OF THE NE 1/4 OF SECTION 27, TOWNSHIP 2 SOUTH, RANGE 16 EAST,
COLUMBIA COUNTY, FLORIDA; MORE PARTICULARLY DESCRIBED AS FOLLOWS:

DESCRIPTION:

TOWNSHIP 2 SOUTH, RANGE 16 EAST

SECTION 27: COMMENCE AT A NAIL AND DISC IN THE PAVEMENT OF NW SCARBOROUGH LANE, A PUBLIC ROAD, SAID NAIL AND DISC MARKING THE SOUTHEAST CORNER OF THE EAST 1/2 OF NE 1/4 OF SECTION 27, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, THENCE NORTH 00°15'20" EAST, ALONG THE MONUMENTED EAST LINE OF SAID NE 1/4, A DISTANCE OF 974.92 FEET TO THE NORTHEAST CORNER OF LANDS DESCRIBED IN OFFICIAL RECORDS BOOK (ORB) 1140, PAGES 1220 - 1222, OF THE OFFICIAL RECORDS OF COLUMBIA COUNTY, FLORIDA; THENCE SOUTH 89°32'40" WEST, ALONG THE NORTH LINE OF SAID LANDS, 40.00 FEET TO A POINT ON THE WEST LINE OF THE EAST 40 FEET OF SAID E 1/2 OF THE NE 1/4, AS DESCRIBED IN ORB 1265, PAGE 510, OF SAID OFFICIAL RECORDS; THENCE CONTINUE SOUTH 89°32'40" WEST, 559.94 FEET TO A POINT ON THE CENTERLINE OF A PERPETUAL NON-EXCLUSIVE EASEMENT FOR INGRESS AND EGRESS RESERVED UNTO THE GRANTORS AND THEIR HEIRS AND ASSIGNS, AS RECORDED IN ORB 1263, PAGE 510 OF SAID OFFICIAL RECORDS AND THE POINT OF BEGINNING OF THE HEREIN DESCRIBED LANDS; THENCE NORTH 06°53'39" EAST, ALONG THE CENTERLINE OF SAID EASEMENT, 888.96 FEET TO A BEND IN SAID CENTERLINE; THENCE NORTH 06°36'56" EAST, STILL ALONG SAID CENTERLINE, 542.71 FEET TO A BEND IN SAID CENTERLINE; THENCE NORTH 19°29'37" WEST, STILL ALONG SAID CENTERLINE, 344.31 FEET TO A POINT ON THE NORTH LINE OF SAID NE 1/4; THENCE SOUTH 89°13'35" WEST, 351.36 FEET, TO A 5/8" IRON ROD, LS 4708, MARKING THE NORTHEAST CORNER OF LANDS DESCRIBED IN ORB 1263, PAGE 509 OF SAID OFFICIAL RECORDS; THENCE SOUTH 00°34'44" WEST, 536.60 FEET TO A 5/8" IRON ROD, LS 4708, MARKING THE SOUTHEAST CORNER OF SAID LANDS DESCRIBED IN ORB 1263, PAGE 509; THENCE SOUTH 89°13'35" WEST, ALONG THE SOUTH LINE OF SAID LANDS, 406.00 FEET TO A 5/8" IRON ROD, LS 4708, ON THE WEST LINE OF THE E 1/2 OF THE NE 1/4 OF SAID SECTION 27; THENCE SOUTH 00°34'44" WEST, ALONG SAID WEST LINE, 1116.38 FEET TO A 5/8" IRON ROD, LS 4708, MARKING THE NORTHWEST CORNER OF LANDS DESCRIBED IN ORB 1135, PAGE 1069 OF SAID OFFICIAL RECORDS; THENCE NORTH 72°37'47" EAST, ALONG THE NORTH LINE OF SAID LANDS, 719.46 FEET TO A 5/8" IRON ROD, LS 4708, MARKING THE NORTHEAST CORNER OF SAID LANDS DESCRIBED IN ORB 1135, PAGE 1069; THENCE SOUTH 00°34'41" WEST, ALONG THE EAST LINE OF SAID LANDS, 226.13 FEET TO A 5/8" IRON ROD, LS 4708, MARKING THE NORTHWEST CORNER OF LANDS DESCRIBED IN ORB 1140, PAGE 1220 OF SAID OFFICIAL RECORDS; THENCE NORTH 89°42'40" EAST, ALONG THE NORTH LINE OF SAID LANDS, 43.99 FEET TO THE POINT OF BEGINNING. IN COLUMBIA COUNTY, FLORIDA.

SUBJECT TO AND TOGETHER WITH:

A 30 FOOT WIDE PERPETUAL NON-EXCLUSIVE EASEMENT FOR INGRESS AND EGRESS RESERVED UNTO THE GRANTOR AND THEIR HEIRS OR ASSIGNS, SAID EASEMENT'S CENTERLINE IS DESCRIBED AS FOLLOWS:

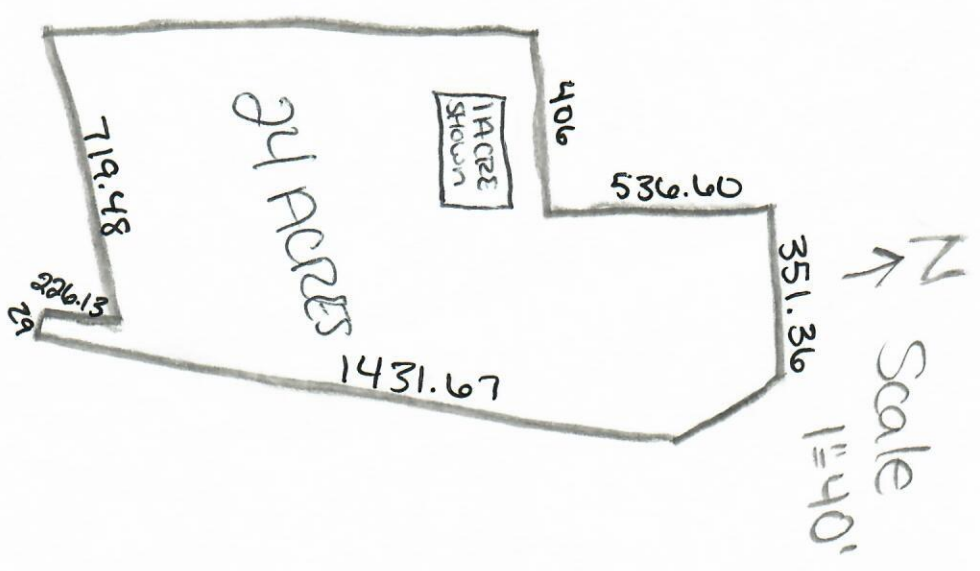
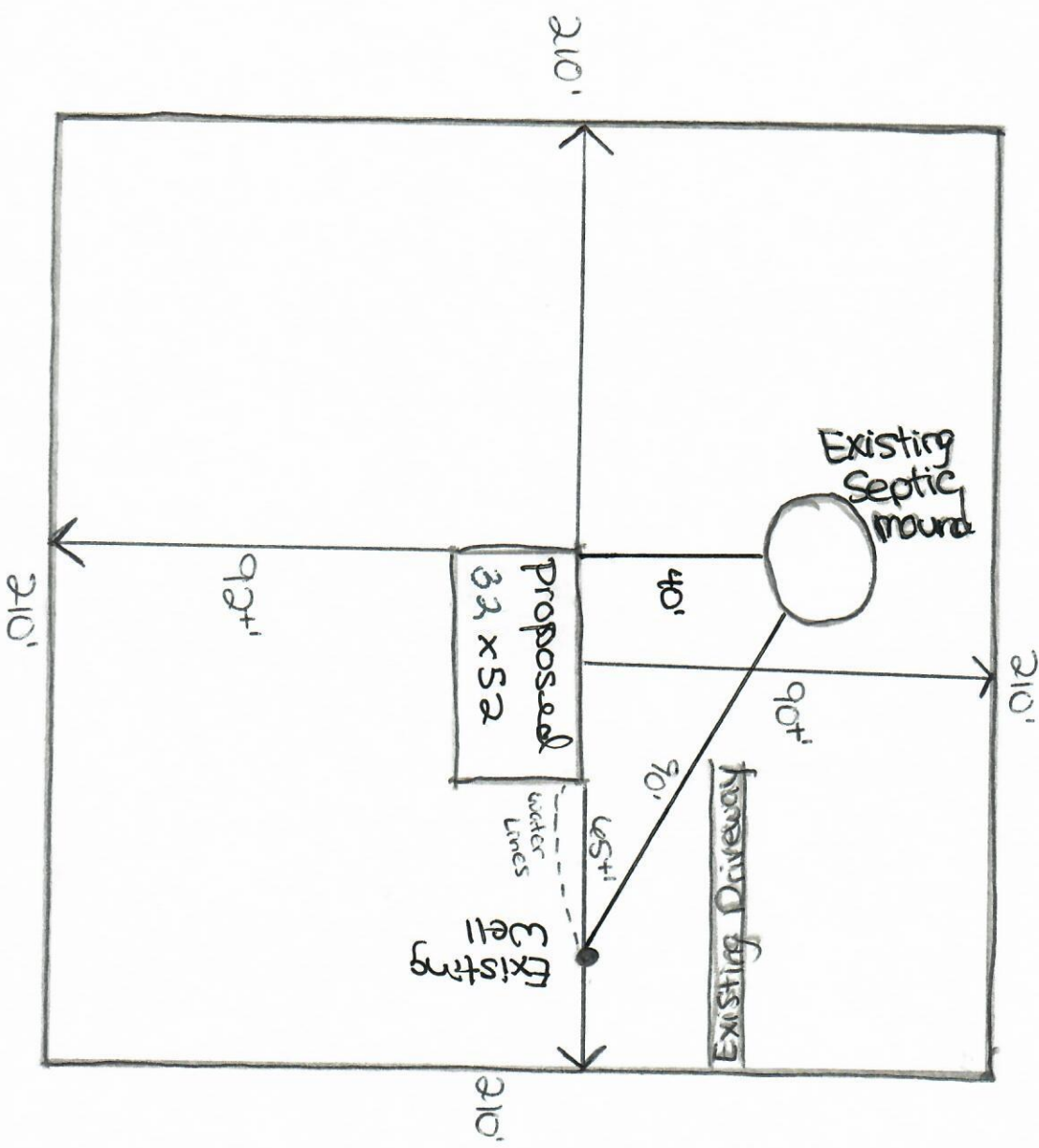
SECTION 27: COMMENCE AT A NAIL AND DISC IN THE PAVEMENT OF NW SCARBOROUGH LANE, A PUBLIC ROAD, SAID NAIL AND DISC MARKING THE SOUTHEAST CORNER OF THE EAST 1/2 OF NE 1/4 OF SECTION 27, TOWNSHIP 2 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA; THENCE SOUTH 89°33'33" WEST, ALONG THE SOUTH LINE OF SAID NE 1/4, A DISTANCE OF 736.10 FEET TO A POINT ON THE CENTERLINE OF A 30 FOOT WIDE EASEMENT FOR INGRESS AND EGRESS AS RECORDED IN OFFICIAL RECORDS BOOK (ORB) 1140, PAGE 1220, OF THE OFFICIAL RECORDS OF COLUMBIA COUNTY, FLORIDA, AND BEING THE POINT OF BEGINNING OF THE HEREIN DESCRIBED CENTERLINE; THENCE NORTH 12°36'20" EAST, ALONG SAID CENTERLINE, 602.65 FEET; THENCE NORTH 00°02'46" EAST, DEPARTING SAID CENTERLINE OF THE EASEMENT DESCRIBED IN SAID ORB 1140, PAGE 1220, A DISTANCE OF 49.85 FEET TO A

Prepared by:
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321 SW Main Boulevard, Suite 105
Lake City, Florida 32025

File Number: 19-125

POINT ON THE SOUTH LINE OF SAID LANDS DESCRIBED IN ORB 1140, PAGE 1220; THENCE CONTINUE NORTH 00°02'46" EAST, 265.72 FEET; THENCE NORTH 06°53'39" EAST, 72.63 FEET, TO A POINT ON THE NORTH LINE OF SAID LANDS DESCRIBED IN ORB 1140, PAGE 1220; THENCE CONTINUE NORTH 06°53'39" EAST, 816.33 FEET; THENCE NORTH 06°36'56" EAST, 542.71 FEET; THENCE NORTH 19°29'37" WEST, 328.48 FEET TO A POINT ON A LINE LYING 15.00 FEET SOUTH OF AND PARALLEL TO THE NORTH LINE OF THE NE ¼ OF THE NE ¼ OF SAID SECTION 27; THENCE SOUTH 89°13'35" WEST, PARALLEL TO SAID NORTH LINE OF THE NE ¼ OF THE NE ¼, A DISTANCE OF 356.80 FEET TO A POINT ON THE EAST LINE OF THE WEST 406.00 FEET OF SAID NE ¼ OF THE NE ¼, AND THE POINT OF TERMINATION OF SAID EASEMENT CENTERLINE. IN COLUMBIA COUNTY, FLORIDA.

THE SIDE LINES OF THE ABOVE DESCRIBED EASEMENT ARE TO BE LENGTHENED OR SHORTENED AS REQUIRED TO CREATE A CONTINUOUS CORRIDOR FOR INGRESS AND EGRESS FROM THE SOUTH LINE OF THE EAST ½ OF THE NE ¼ OF SAID SECTION 27 (SAID SOUTH LINE IS WITHIN THE MAINTAINED PUBLIC RIGHT-OF-WAY OF SW SCARBOROUGH LANE) AND THE EAST LINE OF THE WEST 406.00 FEET OF THE NE ¼ OF THE NE ¼ OF SECTION 27, TOWNSHIP 2 SOUTH, RANGE 16 EAST. IN COLUMBIA COUNTY, FLORIDA.



Site Plan

Cole Paris
3/23/2020

Jessie Newton

521 Scarborough Lane
Lake City FL 32055

27-28-16-01754-001 parcel #

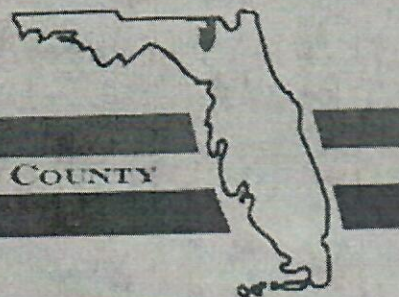
Install 28x52

Double wire
mobile home

No Wall on Septic
w/ 75'

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Rocky Nash
District No. 4 - Toby Wirt
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: 8/19/2019 4:11:13 PM
Address: 521 NW SCARBOROUGH Ln
City: LAKE CITY
State: FL
Zip Code: 32055
Parcel ID: 01754-001

REMARKS: Address for proposed structure on parcel.

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



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, 521 Scarborough Lane 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 type="checkbox"/> Property Owner
<u>Jessie Shepard</u>	<u>J. Shepard</u>	<input checked="" 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)
1H-1041936
License Number
3-23-20
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is William R. Price, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 23rd day of Oct, 2020.

John Davis
NOTARY'S SIGNATURE





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 AGENT AUTHORIZATION

I, William R. Price, give this authority and I do certify that the below
Installers Name
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	Agents Company Name
Oda Price	<i>Oda Price</i>	Price Life Enterprises Inc.
Jessie Shepard	<i>Jessie Shepard</i>	Price Life Enterprises Inc.

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.

License Holders Signature (Notarized)

14-1041936
License Number

3-23-20
Date

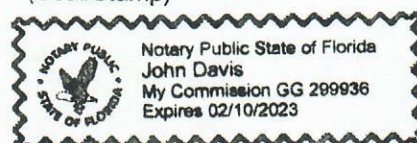
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is William R. Price,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 23rd day of March, 20 20.

NOTARY'S SIGNATURE

(Seal/Stamp)



Newton

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

William Price

PHONE

407-448-0957

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 <u>Glenn Whittington</u> Signature <u>Glenn Whittington</u></p> <p>License #: <u>EC13002957</u> Phone #: <u>386 972 1700</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.

LIMITED POWER OF ATTORNEY

I Glenn Whittington DO HEREBY AUTHORIZE Oda Price or
Jessie Shepard

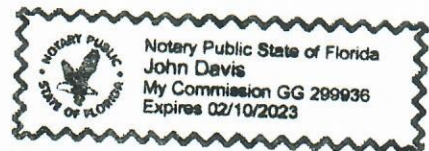
TO FILL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

Glenn Whittington
SIGNATURE

3/23/20
DATE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 23 DAY OF March 2020

John Davis
NOTARY PUBLIC



MY COMMISSION EXPIRES: 02/10/2023
COMMISSION NO. GG 299936
PERSONALLY KNOWN: X
PRODUCED ID. (TYPE): _____



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS LICENSING BOARD

THE ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

WHITTINGTON, GLENN

WHITTINGTON ELECTRIC INC
164 QUEENS COUNTRY RD
INTERLACHEN FL 32148

LICENSE NUMBER: EC13002957

EXPIRATION DATE: AUGUST 31, 2020

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Newton

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ 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/ AC _____	<p>Print Name <u>Ronald E Bonds SR</u> Signature <u>Ronald E Bonds SR</u></p> <p>License #: <u>CAC1817658</u> Phone #: <u>850.769.1453</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.



Date: DECEMBER 13TH, 2019

State of Florida

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding electrical permit needed for ANY HVAC install in the STATE OF FLORIDA, on behalf of Stylecrest, Inc.

ODA PRICE

JESSE SHEPARD

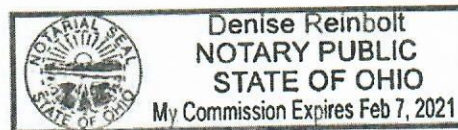
This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

Contractor's Signature

Sworn to and subscribed to before me this 18th day of December, 2019 by RONALD E BONDS, SR who is personally known to me or has produced _____ as identification and who did/did not take an oath.

Notary Public

My commission expires: 2-7-21





RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

THE CLASS B AIR CONDITIONING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

BONDS, RONALD EDWARD SR

STYLE-CREST, INC.

2901 E 15TH ST

PANAMA CITY FL 32405

LICENSE NUMBER: CAC1817658

EXPIRATION DATE: AUGUST 31, 2020

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

Mobile Home Permit Worksheet

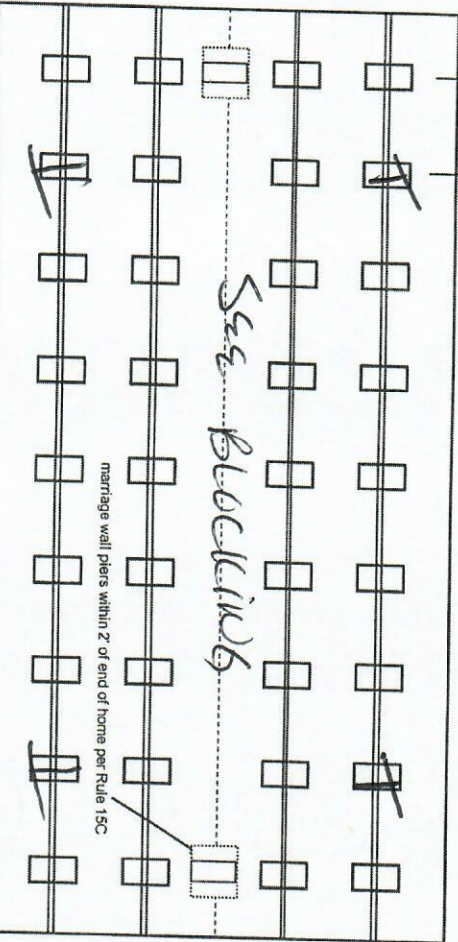
Installer: William R. Price License # 14-1041436

Address of home being installed: 321 NW Scarborough Lane
Lake City FL 32053

Manufacturer: LOH Length x width: 32x52

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.

Typical pier spacing: 2' 5" Installer's initials: WRP



451101V
Clutter System

Application Number: _____ Date: _____

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 # 70009

Triple/Quad ☐ Serial # 71561

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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: 17x25

Perimeter pier pad size: 16x16

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: 14x8 Pier pad size: 23x31

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

Longitudinal Stabilizing Device (LSD) Manufacturer: Clutter System

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer: Clutter Tech

OTHER TIES

Number: 8

Side wall Longitudinal Marriage wall Shearwall ☒

PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psi 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 885 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 locations the points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

WEL Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

William W. Price

Date Tested

3/23/20

Electrical

Contact electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 1

Plumbing

Contact all sewer drains to an existing sewer tap or septic tank. Pg. 1

Contact all potable water supply piping to an existing water, water tap, or other independent water supply system. Pg. 1

Site Preparation

Debris and organic material removed 90% Swale XX Pad XX Other XX

Fastening multi wide units

Floor: Type Fastener 1415 Length: 18"
Walls: Type Fastener 1415 Length: 18"
Roof: Type Fastener 1415 Length: 18"
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 fastening proofing requirements

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled mastic 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 WEL

Type gasket FOAM Installed: Between Floors Yes ✓
Pg. 111 Between Walls Yes ✓
Bottom of ridgebeam Yes ✓

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 1
Siding on walls is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

Miscellaneous

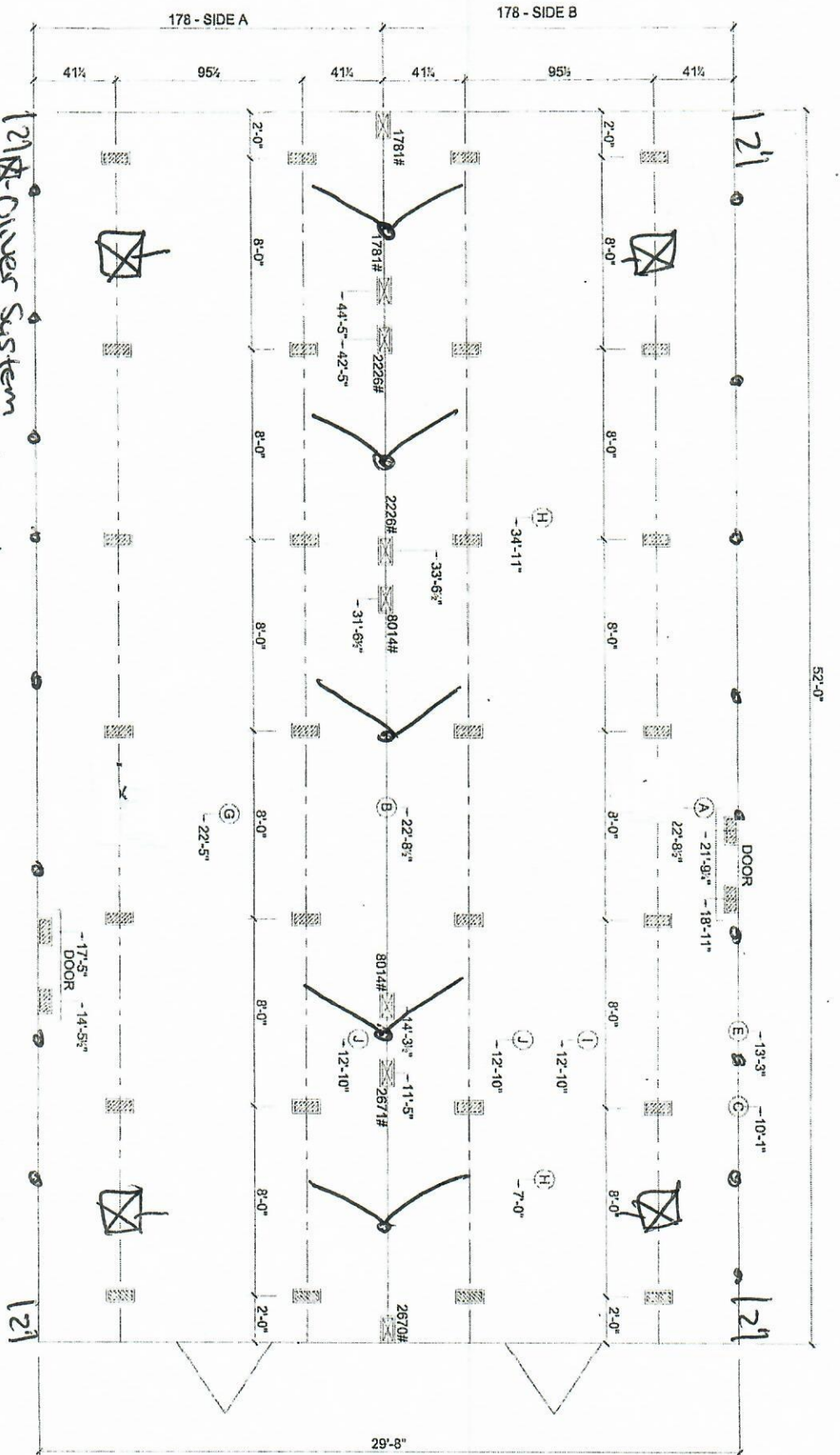
Skirting to be installed. Yes ✓ No XX
Dryer vent installed outside of skirting. Yes ✓ N/A XX
Range downflow vent installed outside of skirting. Yes ✓ N/A XX
Drain lines supported at 4 foot intervals. Yes ✓ N/A XX
Electrical crossovers protected. Yes ✓ N/A XX
Other: XX

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 WEL

Date 3-23-20



THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS. FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.

FOOTINGS ARE REQUIRED AT SUPPORT POSTS. SEE INSTALLATION MANUAL FOR REQUIREMENTS.

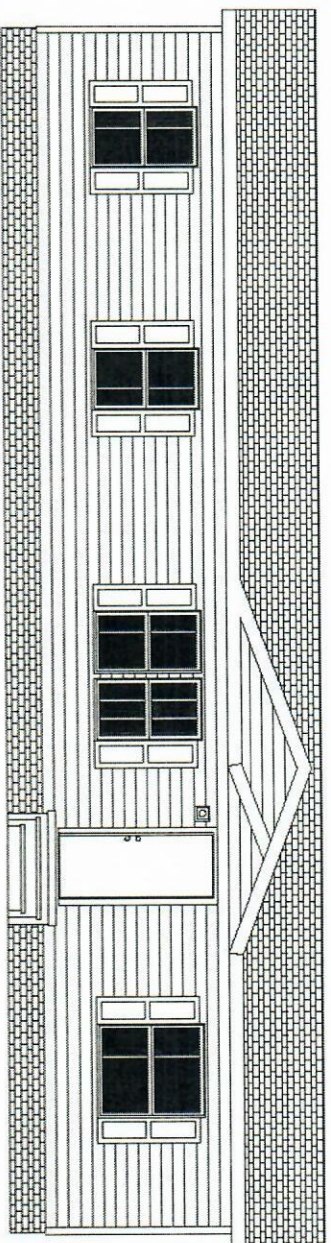
Double frame tie 5' removed from 10' of

Live Oak Homes

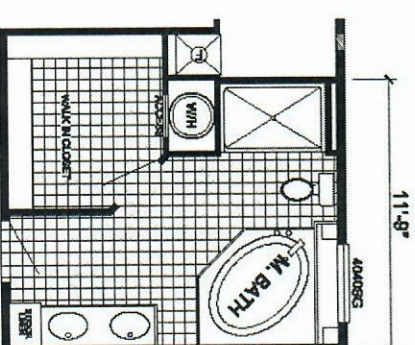
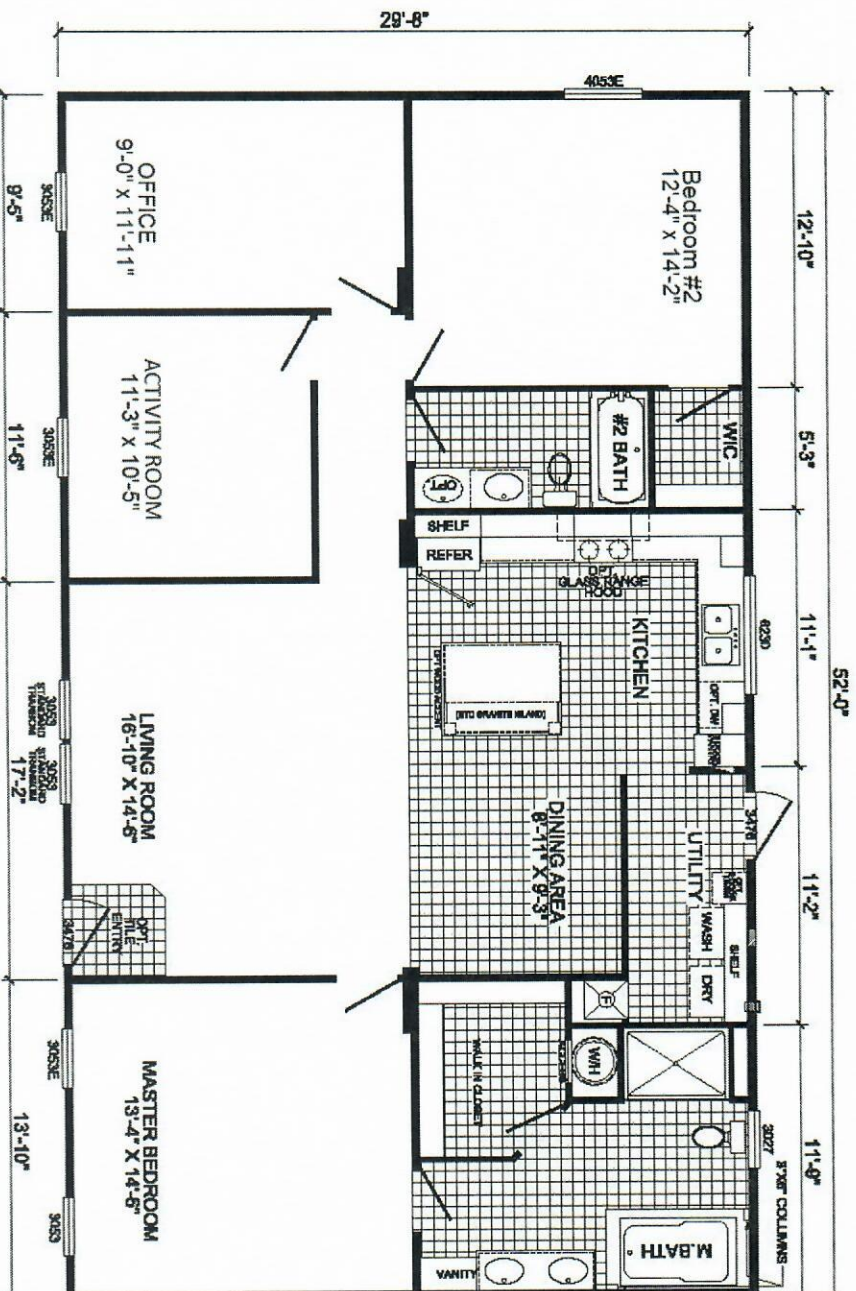
MODEL: L-3524F - 32 X 52

BEDROOM / 2-BATH

- | | | | |
|---|--------------------------|---|---------------------------------------|
| A | MAIN ELECTRICAL | G | DUCT CROSSOVER |
| B | ELECTRICAL CROSSOVER | H | SEWER DROPS |
| C | WATER INLET | I | RETURN AIR (W/OPT. HEAT PUMP ON DUCT) |
| D | WATER CROSSOVER (IF ANY) | J | SUPPLY AIR (W/OPT. HEAT PUMP ON DUCT) |
| E | GAS INLET (IF ANY) | | |
| F | GAS CROSSOVER (IF ANY) | | |



Raport



OPTIONAL MASTER BATH

L-3524F-OAK 2-BEDROOM / 2-Bath 32 X 56 - Approx. 1525 Sq. Ft.

Date: 07/16/19

* All room dimensions include closets and square footage figures are approximate.
* Trexium windows and available on optional 8'-0" widehouse only.

AKS
Signature
Series

Newton

Col.

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

Order #: 4362	Label #: 70009	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

70009

LABEL #

DATE OF INSTALLATION

WILLIAM R PRICE

NAME

IH / 1041936 / 1

4362

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
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PRODUCE COPIES WHEN
REQUESTED.

LIMITED POWER OF ATTORNEY

I Jessie Newton DO HERBY AUTHORIZE
ODA PRICE
JESSIE SHEPARD

TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

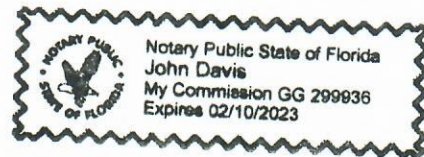
[Signature]
SIGNATURE
3-18-20
DATE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 18th DAY OF March 2020

[Signature]
NOTARY PUBLIC

(STAMP)

John Davis
NOTARY PUBLIC PRINT



MY COMMISSION EXPIRES: 02/10/2023
COMMISSION NO: GG 299836
PERSONALLY KNOWN: xy
PRODUCED ID. (TYPE): _____



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
EXISTING SYSTEM AND SYSTEM REPAIR EVALUATION

PERMIT # _____

APPLICANT: 8981 South SE 121 Macclary Rd
CONTRACTOR / AGENT: DARRELL CREWS 32063
LOT: _____ BLOCK: _____ SUBDIV: _____ ID#: _____

=====

TO BE COMPLETED BY FLORIDA REGISTERED ENGINEER, DEPARTMENT EMPLOYEE, SEPTIC TANK CONTRACTOR OR OTHER CERTIFIED PERSON. SIGN AND SEAL ALL SUBMITTED DOCUMENTS. COMPLETE ALL APPLICABLE ITEMS. COMPLETE TANK CERTIFICATION BELOW OR NOTE IN REMARKS WHY THE TANKS CANNOT BE CERTIFIED.

=====

EXISTING TANK INFORMATION

[2500] GALLONS SEPTIC TANK/GPD ATU LEGEND: N/A MATERIAL: Concrete BAFFLED: [Y] / N]
[] GALLONS SEPTIC TANK/GPD ATU LEGEND: _____ MATERIAL: _____ BAFFLED: [Y / N]
[] GALLONS GREASE INTERCEPTOR LEGEND: _____ MATERIAL: _____
[300] GALLONS DOSING TANK LEGEND: N/A MATERIAL: Concrete # PUMPS: [1]

I CERTIFY THAT THE LISTED TANKS WERE PUMPED ON 3/26/20 BY DARRELL CREWS, HAVE THE VOLUMES SPECIFIED AS DETERMINED BY [DIMENSIONS / FILLING] LEGEND [], ARE FREE OF OBSERVABLE DEFECTS OR LEAKS, AND HAVE A [SOLIDS DEFLECTION DEVICE / OUTLET FILTER DEVICE] INSTALLED.
SIGNATURE OF LICENSED CONTRACTOR DARRELL CREWS SEPTIC TANK SERVICE LLC 3.26.20
BUSINESS NAME DATE

EXISTING DRAINFIELD INFORMATION

[630] SQUARE FEET PRIMARY DRAINFIELD SYSTEM NO. OF TRENCHES [3] DIMENSIONS: 3' x 70'
[] SQUARE FEET SYSTEM NO. OF TRENCHES [] DIMENSIONS: _____ x _____
TYPE OF SYSTEM: [] STANDARD [] FILLED [] MOUND []
CONFIGURATION: [] TRENCH [] BED []
DESIGN: [] HEADER [] D-BOX [] GRAVITY SYSTEM [] DOSED SYSTEM
ELEVATION OF BOTTOM OF DRAINFIELD IN RELATION TO EXISTING GRADE 18 INCHES [ABOVE] / BELOW

SYSTEM FAILURE AND REPAIR INFORMATION

[] SYSTEM INSTALLATION DATE
[] GPD ESTIMATED SEWAGE FLOW BASED ON TYPE OF WASTE [] DOMESTIC [] COMMERCIAL
[] METERED WATER [] TABLE 1, 64E-6, FAC
SITE [] DRAINAGE STRUCTURES [] POOL [] PATIO / DECK [] PARKING
CONDITIONS: [] SLOPING PROPERTY []
NATURE OF [] HYDRAULIC OVERLOAD [] SOILS [] MAINTENANCE [] SYSTEM DAMAGE
FAILURE: [] DRAINAGE / RUN OFF [] ROOTS [] WATER TABLE []
FAILURE [] SEWAGE ON GROUND [] TANK [] D BOX/HEADER [] DRAINFIELD
SYMPTOM: [] PLUMBING BACKUP []

REMARKS/ADDITIONAL CRITERIA

Septic System Looks Fine at time of Pump out.

SUBMITTED BY: DARRELL CREWS TITLE/LICENSE SR0041453
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

DATE: 3.26.20