PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Serial #'s DESN'T DATA SHEET

For Office Use Only (Revised 7-1-15) Zoning Official ZMB Building Official ZMB DOESN'T MATCH

AP# 44214 Date Received 12-18-19 By LH Permit # 39218

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

Comments See Computer Notes

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

☐ Recorded Deed or ☑ Property Appraiser PO ☑ Site Plan ☑ EH # 19-0556 ☑ Well letter OR

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

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____ ☑ 911 App

Signatures missing

☐ Ellisville Water Sys ☑ Assessment Owed ☑ Out County ☑ In County 12.31.19 ☑ Sub VF Form

Property ID # 25-4S-17-08739-017 Subdivision Huckleberry Hill Lot# 17

- New Mobile Home _____ Used Mobile Home ✓ MH Size 28x70 Year 87
- Applicant Hollie Greene (Eva Greene) Phone # 386-984-7031
- Address 297 Olustee ave Lake City FL 32025
- Name of Property Owner Christopher Sharpe Phone# 386-867-3227
- 911 Address 274 Doppler Ct 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 Hollie Greene Phone # 386-984-7031
  Address 274 Doppler ct Lake City FL
- Relationship to Property Owner lease
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage 2.350
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property Take 100A to price creek rd turn right on price creek go down to duane turn left come to doppler turn left 3rd to last on left side
- Name of Licensed Dealer/Installer Glenn Williams Phone # 386-344-3669
- Installers Address 1000 SE Putnam St Lake City FL 32025
- License Number IH 1054859 Installation Decal # 83771

SCANNED

williams66@yahoo.com

JW spoke w/ Glenn 1.29.20
Glenn knows what is needed. LH

JW spoke w/ Glenn 1.2.20
MG spoke w/ Glenn 1.11.20

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

Installer: Glenn Williams License # IH1054858

Address of home being installed: 274 Doppler ct Lake City FL

Manufacturer: Fleetwood Length x width: 28 x 70

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 # 83771

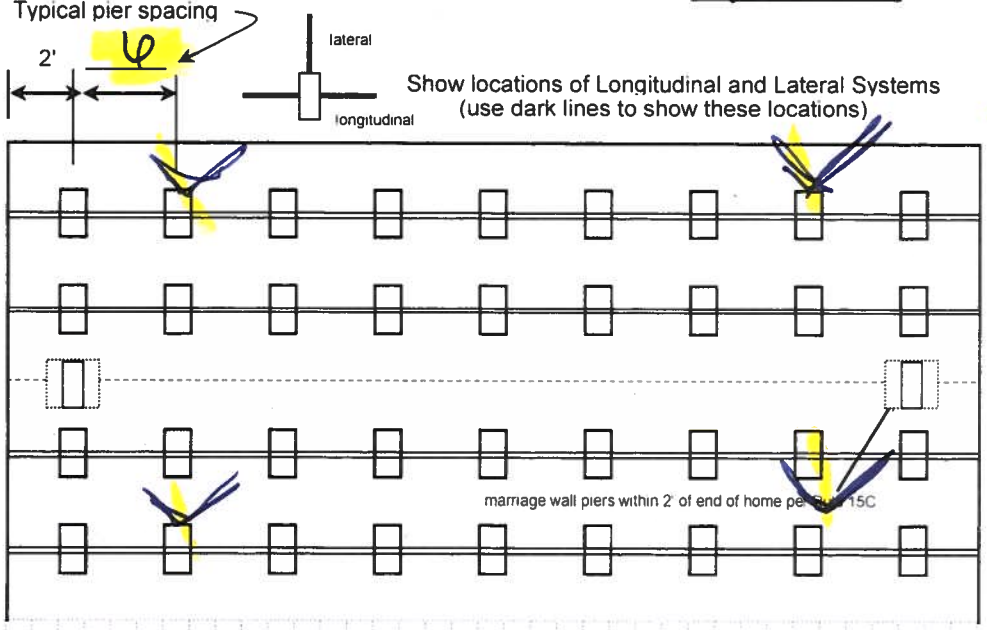
Triple/Quad ☐ Serial # FLHMC0901282AB

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: GW

Typical pier spacing



24 Frame Ties

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: 18.5 x 18.5

Perimeter pier pad size: 16 x 16

Other pier pad sizes (required by the mfg.): _____

☐ Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening	Pier pad size

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: 4

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

OTHER TIES

	Number
Sidewall	0
Longitudinal	24
Marriage wall	2
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 280 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 tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

_____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Glenn Williams

Date Tested 12-17-19

Electrical

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

Plumbing

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

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:	IAJ	Length:	6	Spacing: 24"
Walls:	Type Fastener:	IAJ	Length:	6	Spacing: 24"
Roof:	Type Fastener:	IAJ	Length:	6	Spacing: 24"

For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials GW

Type gasket foam
Pg. 47

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 Glenn Williams Date 12-17-19

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Chris Sharpe.

as the owner of the below described property:

Property tax Parcel ID number 25-4S-17-08739-017

Subdivision (Name, lot, Block, Phase) Huckleberry Hills

Give my permission for Hollie Greene to place a

Circle one (Mobile Home) / Travel Trailer / Utility Pole Only / Single Family Home
Barn - Shed Garage / Culvert / Other _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Chris Sharpe — Owner Signature
12-20-19 — Date

_____ — Owner Signature
_____ — Date

_____ — Owner Signature
_____ — Date

Sworn to and subscribed before me this 20 day of December, 2019. This

(These) person(s) are (personally known) to me or produced ID _____ (Type).

Yvette Bal Tyler — Notary Public Signature
Yvette Bal Tyler — Notary Printed Name

Notary Stamp

YVETTE BAL TYLER
MY COMMISSION # GG 025732
EXPIRES: December 27, 2020
Bonded Thru Notary Public Underwriters

Mobile Home

App# 44214 Applicant: GLENN WILLIAMS JR/HOLLIE GREENE (386-984-7031) Application Date: 12/18/2019

Entered By: Laurie Hodson
Updated By: Janice Williams on 12/30/2019 4:11 PM

Action

Previous | Next | Last Permits Only

1. JOB LOCATION

2. CONTRACTOR

3. MOBILE HOME DETAILS

4. APPLICANT

5. REVIEW

6. FEES/PAYMENT ($65.00 - $65.00 = $0.00)

7. DOCUMENTS/REPORTS (1)

8. NOTES/DIRECTIONS

9. INSPECTIONS (1)

Completed Inspections

Add Inspection | Release Power

Schedule Inspection (ScheduleInspection.aspx?Id=44214)

Inspection	Date	By	Notes
Passed: Mobile Home - In County Pre-Mobile Home before set-up	12/31/2019	TROY CREWS	N E

The completion date must be set To release Certifications to the public.

Permit Completion Date
(Releases Occupancy and Completion Forms)

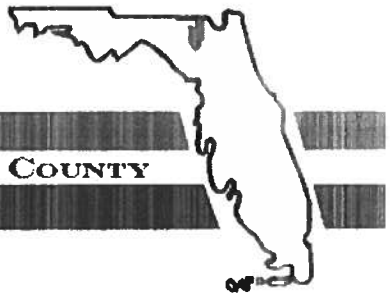
Permit Closed On

Incomplete Requested Inspections

Inspection	Date	By	Notes

44214

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
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:	**1/6/2020 3:13:24 PM**
Address:	**274 SE DOPPLER Ct**
City:	**LAKE CITY**
State:	**FL**
Zip Code	**32025**
Parcel ID	**08739-017**

REMARKS: Address Verification.

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

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

January 8, 2020

To: Columbia County Building Department

Description of Well to be installed for Customer _Chris Sharpe / Holly Green_____

Located @ Address: ___Doppler rd_____

1 HP 15 GPM submersible pump, 1" drop pipe, 35 gallon captive tank, and backflow prevention. With SRWMD permit.

_Bruce Park_____

Sincerely,
Bruce N. Park
President

Columbia County Property Appraiser

Jeff Hampton

2020 Working Values
updated: 11/27/2019

Parcel: << **25-4S-17-08739-017** >>

Aerial Viewer Pictometery Google Maps

Owner & Property Info

Result: 1 of 1

Owner	SHARPE CHRISTOPHER D 366 SW THISTLEDEW GLN LAKE CITY, FL 32024		
Site	274 DOPPLER CT, LAKE CITY		
Description*	LOT 17 HUCKLEBERRY HILL S/D. ORB 337-552, 800-784, 813-1966 958-2198, 2199, 2200.		
Area	2.35 AC	S/T/R	25-4S-17
Use Code**	MISC RES (000700)	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

2019 Certified Values		2020 Working Values	
Mkt Land (1)	$20,504	Mkt Land (1)	$20,504
Ag Land (0)	$0	Ag Land (0)	$0
Building (0)	$0	Building (0)	$0
XFOB (1)	$1,000	XFOB (1)	$1,000
Just	$21,504	Just	$21,504
Class	$0	Class	$0
Appraised	$21,504	Appraised	$21,504
SOH Cap [?]	$0	SOH Cap [?]	$0
Assessed	$21,504	Assessed	$21,504
Exempt	$0	Exempt	$0
Total Taxable	county:$21,504 city:$21,504 other:$21,504 school:$21,504	Total Taxable	county:$21,504 city:$21,504 other:$21,504 school:$21,504

Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/23/2002	$8,900	958/2200	WD	V	U	08
6/27/2002	$100	958/2199	WD	V	U	03
6/11/2002	$100	958/2198	WD	V	U	04
6/23/1995	$10,800	813/1966	AG	V	U	13
1/9/1995	$7,800	800/0784	WD	V	U	12

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0285	SALVAGE	2005	$1,000.00	1.000	0 x 0 x 0	(000.00)

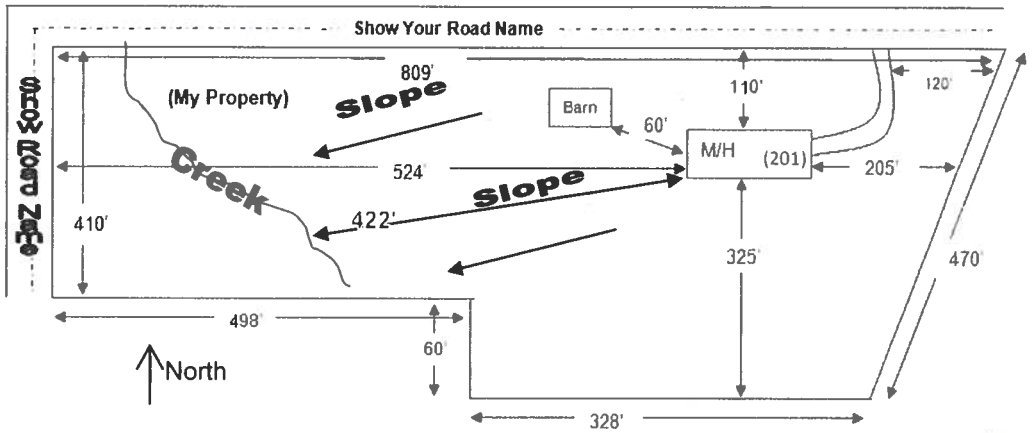
SITE PLAN CHECKLIST

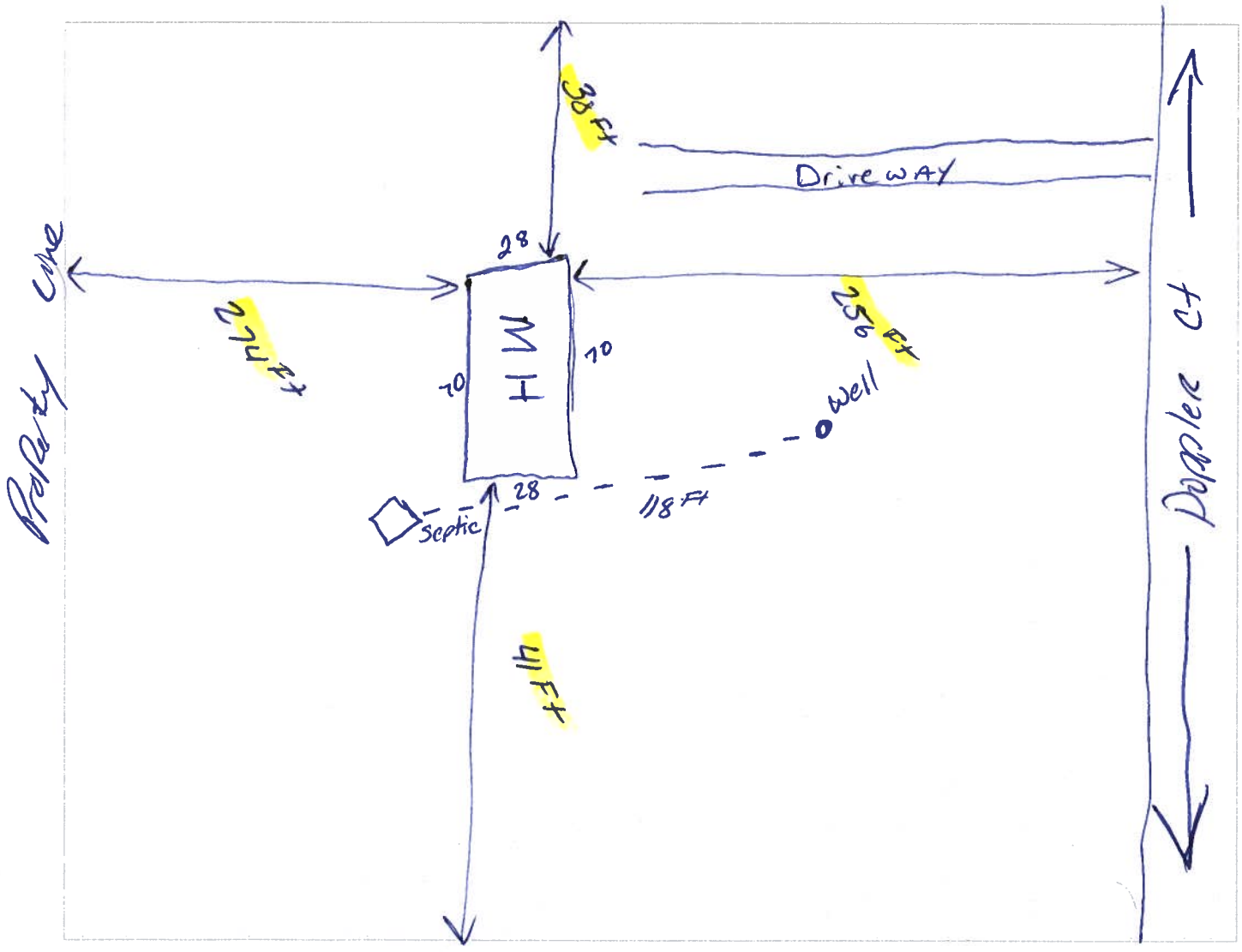
___1) Property Dimensions
___2) Footprint of proposed and existing structures (including decks), label these with existing addresses
___3) Distance from structures to all property lines
___4) Location and size of easements
___5) Driveway path and distance at the entrance to the nearest property line
___6) Location and distance from any waters; sink holes; wetlands; and etc.
___7) Show slopes and or drainage paths
___8) Arrow showing North direction

SITE PLAN EXAMPLE

Revised 7/1/15

NOTE:
This site plan can be copied and used with the 911 Addressing Dept. application forms.





Legend

2018Aerials

SRWMD Wetlands

LidarElevations

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

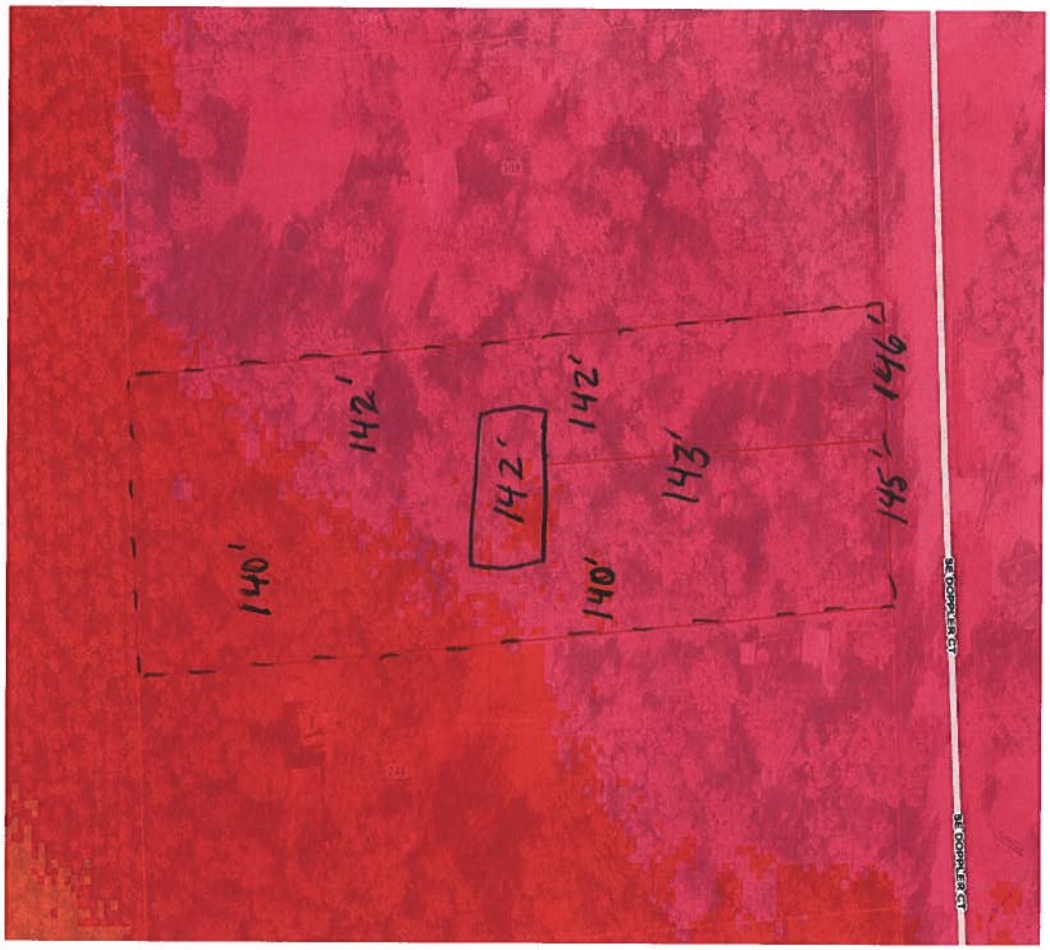
Private

Parcels

Addresses

Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Dec 18 2019 14:10:19 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 25-4S-17-08739-017

Owner: SHARPE CHRISTOPHER D

Subdivision: HUCKLEBERRY HILL

Lot: 17

Acres: 2.3471868

Deed Acres: 2.35 Ac

District: District 4 Toby Witt

Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

FILE NO. 76-2443
Part 4 27
'76 APR -5 PM 1:32
W. E. Crews
CLERK CIRCUIT COURT
COLUMBIA COUNTY, FLORIDA

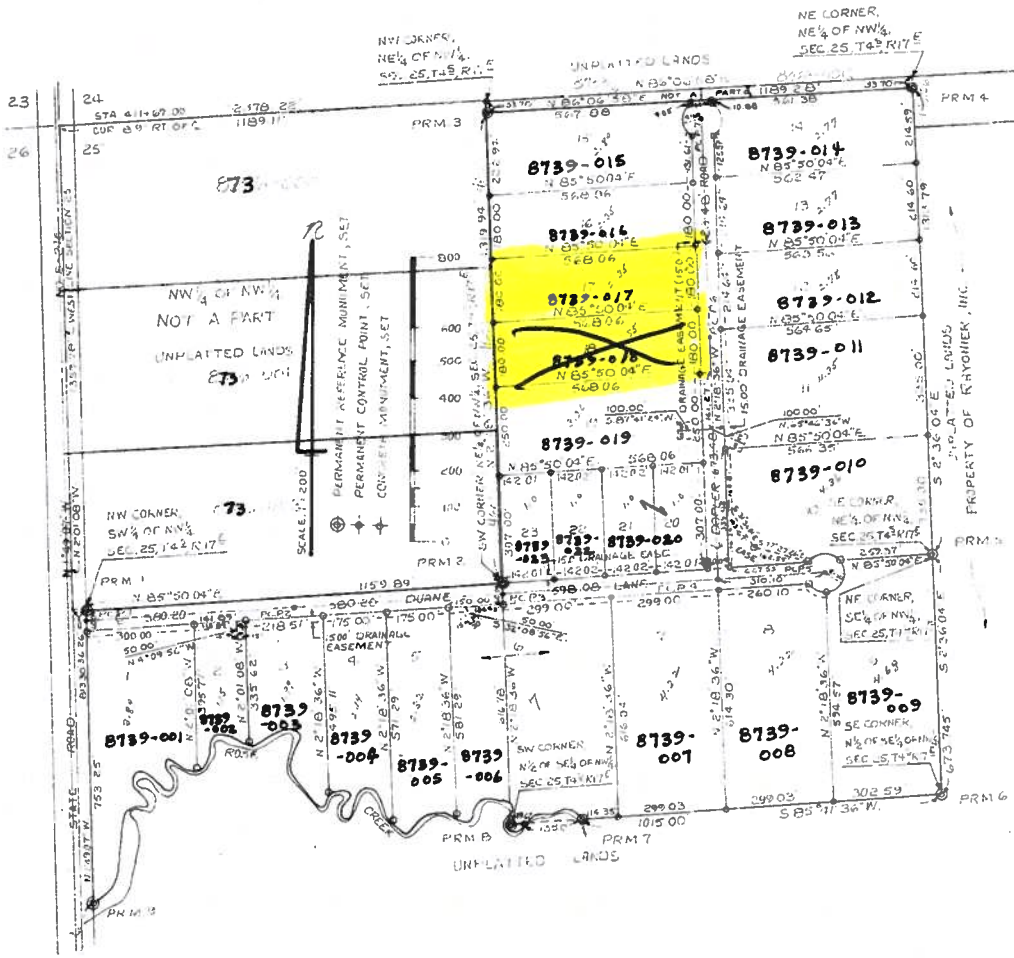
79

HUCKLEBERRY HILL

A Subdivision of a Part of the NW¼, Section 25, Township 4-South, Range 17-East
Columbia County, Florida

Description

SECTION 25, TOWNSHIP 4-SOUTH, RANGE 17 E
THE NE¼ OF NW¼, LESS AND EXCEPT THE NORTH 330 FEET THEREOF.
ALSO THE SW¼ OF NW¼ AS LIES NORTH OF ROSE CREEK, LESS AND EXCEPT RIGHT-OF-WAY OFF THE WEST SIDE THEREOF FOR STATE ROAD NO. 5-345.
ALSO, THE N½ OF SE¼ OF NW¼ AS LIES NORTH OF ROSE CREEK.



Dedication

KNOW ALL MEN BY THESE PRESENT THAT LENVIL H DICKS AND HIS WIFE, JULIE R DICKS, OWNERS, AND LILLIE AGNES MARKHAM, LELAND N DOUBERLEY AND ROBBIE MARKHAM DOUBERLEY, MORTGAGEES HAVE CAUSED THE LANDS HEREON DESCRIBED TO BE SURVEYED, LAID OUT, SUBDIVIDED AND PLATTED TO BE KNOWN AS "HUCKLEBERRY HILL", AND THAT THE ROADS AND EASEMENTS AS SHOWN ARE HEREBY DEDICATED TO THE PUBLIC.

SIGNED Lenvil H. Dicks, OWNER
SIGNED Julie R Dicks, OWNER
WITNESS Helen A. Waters
WITNESS Roberta Fox Wilson

SIGNED Lillie Agnes Markham, MORTGAGEE
SIGNED Leland N Douberley, MORTGAGEE
SIGNED Robbie Markham Douberley, MORTGAGEE
WITNESS Roberta Fox Wilson
WITNESS Helen A. Waters

Acknowledgement

STATE OF FLORIDA
COUNTY OF COLUMBIA

ON THIS 2 DAY OF April, 1976, A.D., THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME BY LENVIL H. DICKS AND HIS WIFE, JULIE R DICKS.
I FURTHER CERTIFY THAT THE SAID JULIE R DICKS, WIFE OF THE SAID LENVIL H DICKS, DID ON SEPARATE AND PRIVATE EXAMINATION, TAKEN AND MADE BY AND BEFORE ME, THEN AND THERE ACKNOWLEDGE THAT SHE EXECUTED THE FOREGOING INSTRUMENT FREELY AND VOLUNTARILY AND WITHOUT ANY CONSTRAINT, APPREHENSION, FEAR OR COMPULSION OF OR FROM HER SAID HUSBAND.

SIGNED Roberta Fox Wilson
NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES November 5th, 1979

Acknowledgement

STATE OF FLORIDA
COUNTY OF COLUMBIA

ON THIS 2 DAY OF April, 1976, A.D., THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME BY LILLIE AGNES MARKHAM, LELAND N DOUBERLEY AND ROBBIE MARKHAM DOUBERLEY.

SIGNED Roberta Fox Wilson
NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES November 5th, 1979

Surveyor's Certificate

I HEREBY CERTIFY THAT ON THIS 20th DAY OF February, 1976, A.D., THE LANDS HEREON DESCRIBED WERE SURVEYED UNDER MY DIRECTION AND THAT PERMANENT REFERENCE MONUMENTS AND PERMANENT CONTROL POINTS WERE PLACED AS SHOWN HEREON IN ACCORDANCE WITH THE STATUTES OF THE STATE OF FLORIDA PERTAINING TO MAPS AND PLATS AND THAT THIS PLAT IS A TRUE AND CORRECT PLAT OF THE LAND SO SHOWN.

SIGNED W. C. Hale
W. C. HALE, LAND SURVEYOR, FLORIDA CERTIFICATE NO. 1549

Approved By Board of County Commissioners

COLUMBIA COUNTY, FLORIDA

SIGNED Rodney S. Dicks, CHAIRMAN DATE April 6, 1976
ATTEST W. E. Crews, CLERK

Certificate of Clerk

FILE NO. ____

I HEREBY CERTIFY THAT I HAVE EXAMINED THE FOREGOING PLAT AND FIND THAT IT COMPLIES IN FORM WITH CHAPTER 177 FLORIDA STATUTES AND WAS FILED FOR RECORD ON Apr. 6, 1976, A.D., IN PLAT BOOK 4, PAGE 27 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

SIGNED W. E. Crews
CLERK OF CIRCUIT COURT, COLUMBIA COUNTY, FLORIDA

550 2049099267

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

PERMIT NO. 19-0556
DATE PAID: 7/23/19
FEE PAID: 425.00
RECEIPT #: 425099

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: Christopher D Sharpe

AGENT: _____ TELEPHONE: 386 867-3227

MAILING ADDRESS: 366 SW Thistledown Gln. LKCY, Fl 32024

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: 17 BLOCK: ____ SUBDIVISION: Huckleberry Hill PLATTED: 1976

PROPERTY ID #: 25-4S-17-08139-017 ZONING: _____ I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 2.35 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 274 SE Doppler Ct LKCY, Fl.

DIRECTIONS TO PROPERTY: 90E (R) SR 100 (R) C-245 (L) Duane (L) Doppler 3 or 4 lot on (L)

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	28x70 D/W	3	1960	
2				
3				
4				

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

SIGNATURE: Chris Sharpe DATE: 7-22-19

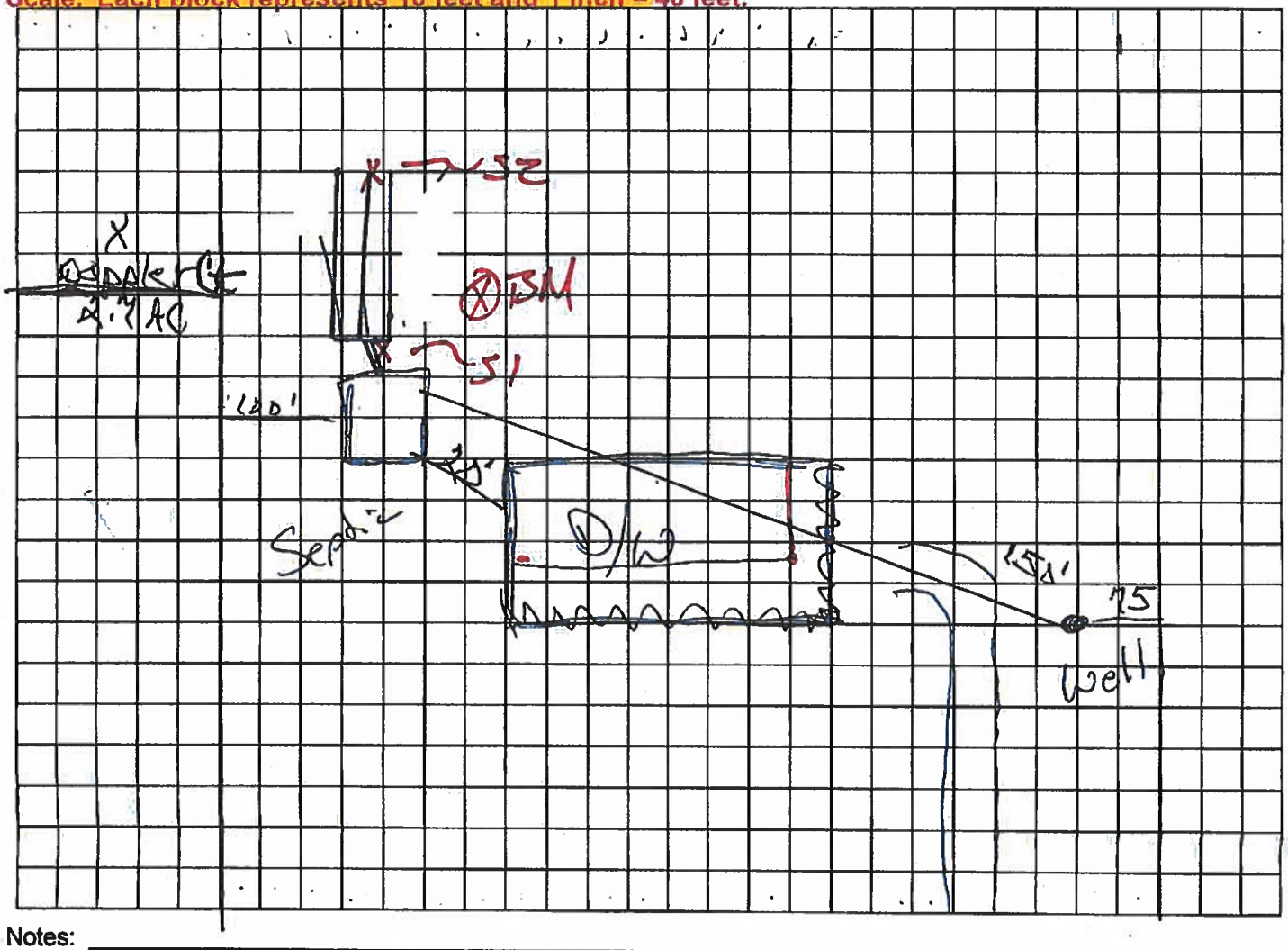
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0556

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

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



Notes: Everything is marked
Living Area is cleared
Flags for Septic

Site Plan submitted by: Chris Sharpe Agent: Owner: Date: 2-23-19

Plan Approved X Not Approved Date

By ESL COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Union County

OWNERS NAME Hollie Greene PHONE _____ CELL 386-984-7031

INSTALLER Glenn Williams PHONE _____ CELL 386-344-3669

INSTALLERS ADDRESS 660 SE Putnam St Lake City Fl

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 87 SIZE 28 X 70

COLOR Brown SERIAL No. _____

WIND ZONE 2 SMOKE DETECTOR _____

INTERIOR:
FLOORS Fair

DOORS Fair

WALLS Fair

CABINETS Fair

ELECTRICAL (FIXTURES/OUTLETS) _____

EXTERIOR:
WALLS / SIDDING BACK needs word

WINDOWS Fair

DOORS Fair

INSTALLER: APPROVED ✓ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Glenn Williams

Installer/Inspector Signature Glenn Williams License No. IH1054808 Date 12-17-19

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature _____ Date 12-18-19

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, Glenn Williams ,give this authority for the job address show below
Installer License Holder Name

only, 274 Doppler Ct Lake City FL , 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)
Hollie Greene	Hollie Greene	___ Agent ___ Officer ✓ Property Owner
Eva Greene	Eva Greene	___ Agent ___ Officer ✓ Property Owner
		___ Agent ___ Officer ___ 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.

Glenn Williams — CCC1054858 — 12- -19
License Holders Signature (Notarized) | License Number | Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Glenn Williams,
personally appeared before me and is known by me or has produced identification
(type of I.D.)_____ on this 18 day of Dec., 20 19.

NOTARY'S SIGNATURE

(Seal/Stamp)
LAURIE HODSON
MY COMMISSION # FF 976102
EXPIRES: July 14, 2020
Bonded Thru Notary Public Underwriters


AS EVIDENCED BY THIS LABEL NO. FLA.306974
THE MANUFACTURER CERTIFIES TO THE BEST OF THE MANUFACTURER'S KNOWLEDGE AND BELIEF THAT THIS MANUFACTURED HOME HAS BEEN INSPECTED IN ACCORD-ANCE WITH THE REQUIREMENTS OF THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AND IS CONSTRUCTED IN CONFORMANCE WITH THE FEDERAL MANUFACTURED HOME CONSTRUCTION AND SAFETY STANDARDS IN EFFECT ON THE DATE OF MANUFACTURE. SEE DATA PLATE.


AS EVIDENCED BY THIS LABEL NO.
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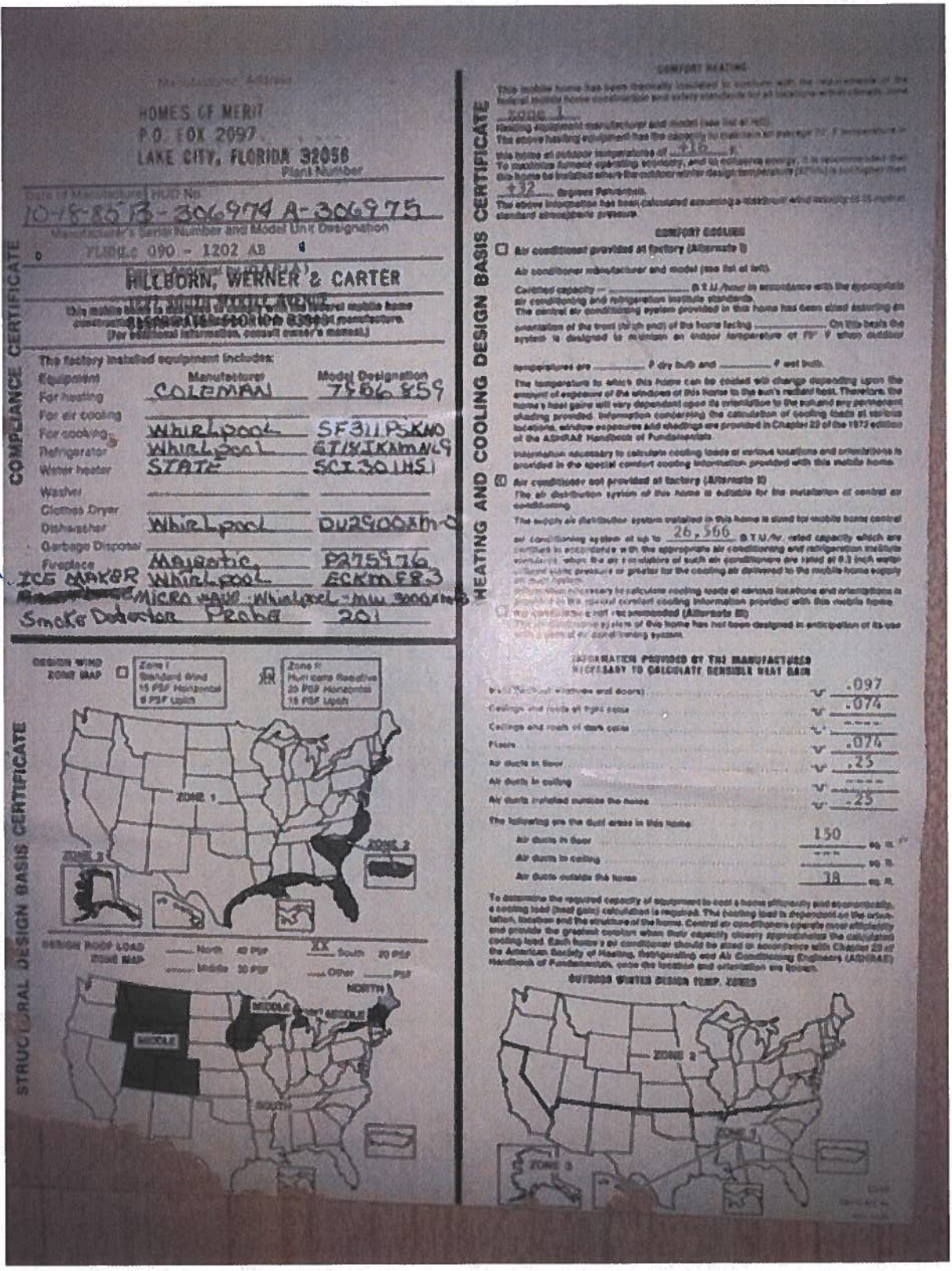
IN CONFORMANCE WITH THE FEDERAL MANUFACTURED
HOME CONSTRUCTION AND SAFETY STANDARDS
ON THE DATE OF MANUFACTURE SEE DATA PLATE.

44214



COMPLIANCE CERTIFICATE

HOMES OF MERIT
P.O. BOX 2097
LAKE CITY, FLORIDA 32056
Plant Number

Date of Manufacture: 10-15-85 HUD No. FLB-306974 A-306975
Manufacturer's Serial Number and Model Unit Designation

FLB#c 090 - 1202 AB

HILBORN, WERNER & CARTER

This mobile home is manufactured to comply with the Federal mobile home construction and safety standards in effect on the date of manufacture. (For additional information, consult owner's manual.)

The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	COLEMAN	7566 859
For air cooling		
For cooking	Whirlpool	SF311PSKW0
Refrigerator	Whirlpool	ET14JKAMWC9
Water heater	STATE	SCI30 1HS1
Washer		
Clothes Dryer		
Dishwasher	Whirlpool	DU2900XTW0
Garbage Disposer		
Fireplace	Majestic	P275376
ICE MAKER	Whirlpool	ECKM683
MICRO WAVE	Whirlpool	MW 3000 A W0
Smoke Detector	Pyrha	201

STRUCTURAL DESIGN BASIS CERTIFICATE

DESIGN WIND ZONE MAP

☐ Zone I Standard Wind 15 PSF Horizontal 9 PSF Uplift

☒ Zone II Hurricane Resistive 25 PSF Horizontal 15 PSF Uplift

DESIGN ROOF LOAD ZONE MAP

North 40 PSF
Middle 30 PSF
XX South 20 PSF
Other ____ PSF

HEATING AND COOLING DESIGN BASIS CERTIFICATE

COMFORT HEATING

This mobile home has been thermally insulated to conform with the requirements of the federal mobile home construction and safety standards for all locations within climatic zone ZONE 1.

Heating equipment manufacturer and model (see list at left).

The above heating equipment has the capacity to maintain an average 70° F temperature in this home at outdoor temperatures of +16 °F.

To maximize furnace operating economy, and to conserve energy, it is recommended that this home be installed where the outdoor winter design temperature (97½%) is higher than +32 degrees Fahrenheit.

The above information has been calculated assuming a maximum wind velocity of 15 miles per hour at standard atmospheric pressure.

COMFORT COOLING

☐ Air conditioner provided at factory (Alternate I)

Air conditioner manufacturer and model (see list at left).

Certified capacity — ____ B.T.U./hour in accordance with the appropriate air conditioning and refrigeration institute standards.

The central air conditioning system provided in this home has been sized assuming an orientation of the front (or left end) of the home facing ____. On this basis the system is designed to maintain an indoor temperature of 75° F when outdoor temperatures are ____° dry bulb and ____° wet bulb.

The temperature to which this home can be cooled will change depending upon the amount of exposure of the windows of this home to the sun's radiant heat. Therefore, the home's heat gains will vary dependent upon its orientation to the sun and any permanent shading provided. Information concerning the calculation of cooling loads at various locations, window exposures and shadings are provided in Chapter 23 of the 1972 edition of the ASHRAE Handbook of Fundamentals.

Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this mobile home.

☒ Air conditioner not provided at factory (Alternate II)

The air distribution system of this home is suitable for the installation of central air conditioning.

The supply air distribution system installed in this home is sized for mobile home central air conditioning system of up to 26,566 B.T.U./hr. rated capacity which are certified in accordance with the appropriate air conditioning and refrigeration institute standards when the air temperature of such air conditioners are rated at 0.3 inch water column static pressure or greater for the cooling air delivered to the mobile home supply air duct system.

Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this mobile home.

☐ Air conditioner not recommended (Alternate III)

The heating system of this home has not been designed in anticipation of its use with a central cooling system.

INFORMATION PROVIDED BY THE MANUFACTURER NECESSARY TO CALCULATE SENSIBLE HEAT GAIN

Walls (without windows and doors)	.097
Ceilings and roofs of light color	.074
Ceilings and roofs of dark color	
Floors	.074
Air ducts in floor	.25
Air ducts in ceiling	
Air ducts installed outside the home	.25

The following are the duct areas in this home

Air ducts in floor	150 sq. ft.
Air ducts in ceiling	sq. ft.
Air ducts outside the home	18 sq. ft.

To determine the required capacity of equipment to cool a home efficiently and economically, a cooling load (heat gain) calculation is required. The cooling load is dependent on the orientation, location and the structure of the home. Central air conditioners operate most efficiently and provide the greatest comfort when their capacity closely approximates the calculated cooling load. Each home's air conditioner should be sized in accordance with Chapter 23 of the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) Handbook of Fundamentals, once the location and orientation are known.

OUTDOOR WINTER DESIGN TEMP. ZONES

HOLLY GREEN

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 44214 CONTRACTOR Glenn Williams PHONE 386-344-366

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	Print Name Hollie Greene 1.29.20	Signature Hollie Greene
	License #:	Phone #: 386-984-7031
	Qualifier Form Attached ☐	
MECHANICAL/ A/C	Print Name	Signature Hollie Greene
	License #:	Phone #: 386-984-7031
	Qualifier Form Attached ☐	

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 4/27/2017