Parcel:

10-7S-17-09971-007

### Owner & Property Info

Result: 3 of 9

DAVIES KENNETH SR & NANCY

1040 SE ADAMS ST Owner

HIGH SPRINGS, FL 32643

1040 ADAMS ST, HIGH SPRINGS Site

Description\* LOT 12 BICENTENNIAL ACRES UT 1 EX 1.03 AC DESC IN ORB 1300- 1615. ORB 624-124, DC

1114- 1313, WD 1136-2354, CT 1194- 1906, WD 1200-2004, WD 1209- 2663, WD 1300-1617,

S/T/R 10-7S-17 3.97 AC Area

Tax District 3 Use Code\*\* SINGLE FAM (000100)

#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	Ernest Scott Johnson	PHONE 352-494-8099
	- 17 Table		

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

### Shaun & Katherine Ayers

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> 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 Glenn Whittington	Signature							
	License #:EC 13002957	Phone #: 386-972-1700							
	Qualifier Form Attached X								
MECHANICAL/	Print Name Timothy Shatto	Signature							
A/C	License #: CAC 057875	Phone #: 386-496-8224							
	Qualifier Form Attached X								

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

**F. S. 440.103 Building permits; identification of minimum premium policy.**—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



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

# LICENSED QUALIFIER AUTHORIZATION

1. ( April 1 Chillington	(license holder name), licensed qualifier
for Whittington Effectil S	(company name), do certify that
the below referenced person(s) listed on this form	m is/are contracted/hired by me, the license
holder, or is/are employed by me directly or thro	
officer of the corporation; or, partner as defined	
person(s) is/are under my direct supervision and	
sign permits; call for inspections and sign subco	
	<u>.</u>
Printed Name of Person Authorized	Signature of Authorized Person
1. 68 8 508	1
2. Recky Fond	2. Jords )
3.	3.
4.	4.
5.	5.
under my license and fully responsible for compl Local Ordinances. I understand that the State ar authority to discipline a license holder for violatic officers, or employees and that I have full respor and ordinances inherent in the privilege granted  If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prev unauthorized persons to use your name and/or li	and County Licensing Boards have the power and cons committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits.  Is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow icense number to obtain permits.
Licensed Qualifiers Signature (Notarized)	License Number Date
NOTARY INFORMATION:	
	Colimbia
000HT 01.	1
The above license holder, whose name is	ENN Whittington
personally appeared before me and is known by (type of I.D.)	
(type of 1.D.) on	this day of
Keen P Briston	<del>}</del>
NOTARY'S SIGNATURE	Seal/Stantelly R BISHOP
V	Notary Public - State of Florida
3.5	Commission # FF 243986 My Comm. Expires Jun 24, 2019



### COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

### LICENSED QUALIFIER AUTHORIZATION

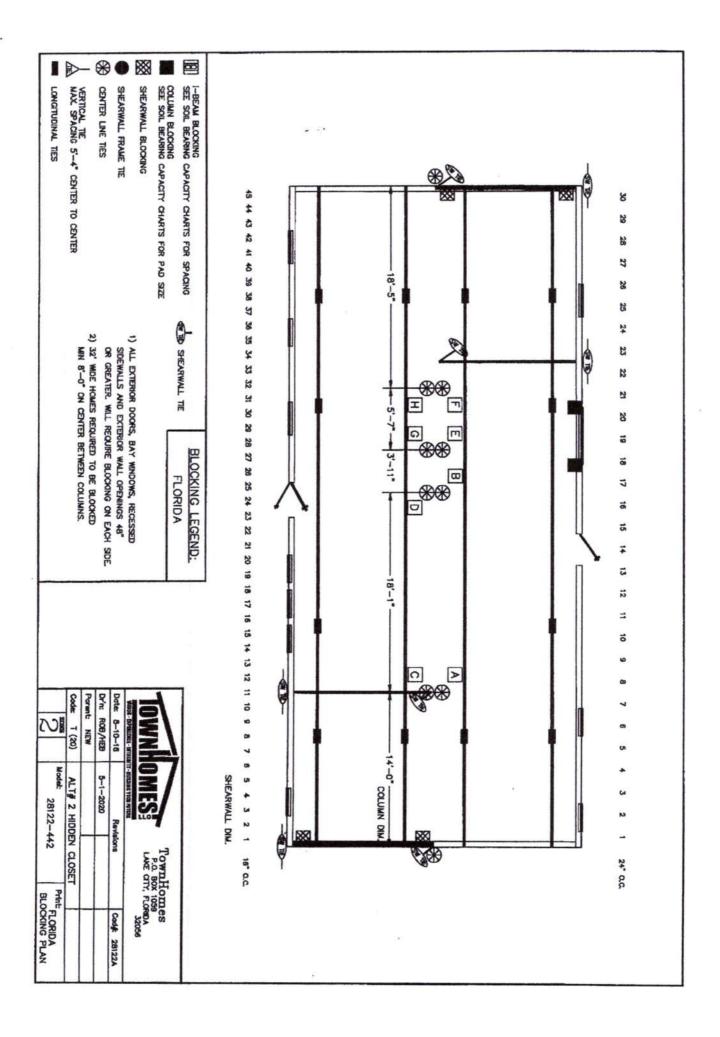
for Shatto Heat & Air (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.  Printed Name of Person Authorized Signature of Authorized Person  1. Bo Royals  1. Bo Royals  2. Dale Burd  3.							
the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.  Printed Name of Person Authorized Signature of Authorized Person  1. Bo Royals  2. Dale Burd  2. Dale Burd  2. Dale Burd							
1. Bo Royals  1. Bo Royals  2. Dale Burd  2. Control of the soft o							
2. Dale Burd 2.							
3.							
4.							
5.							
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.  If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.  CAC 057875  License Number  Date							
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Union							
The above license holder, whose name is							
(Seal/Stamp)  VICTORIA K. PALMER  Notary Public - State of Florida							

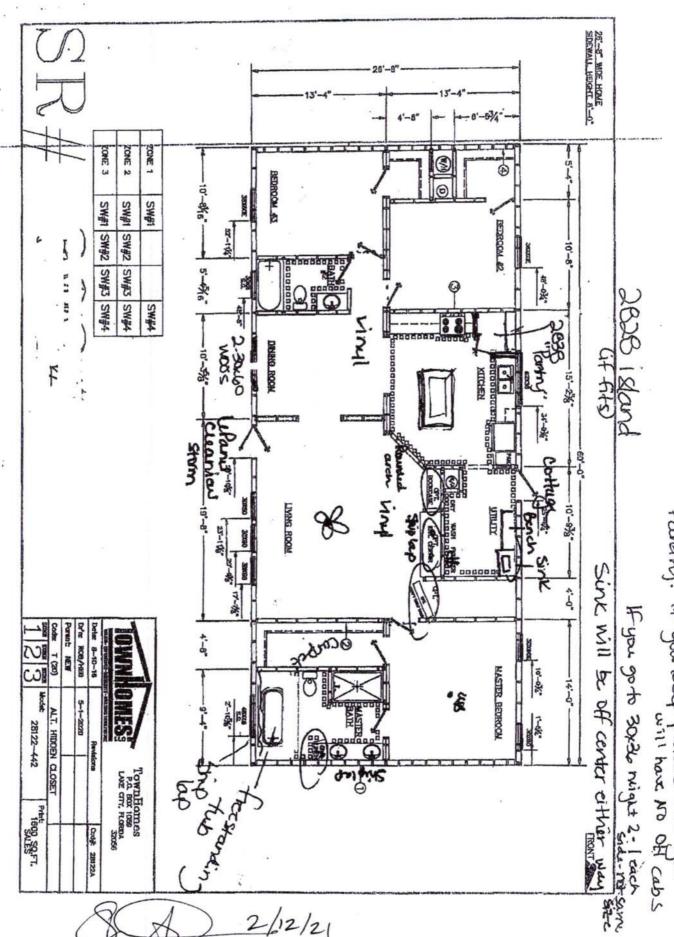
Commission # FF 207489 My Comm. Expires Mar 9, 2019 Bonded through National National Assa

	marriage wall piers within 2' of end of home people 15C		Typical pier spacing  lateral  Show locations of Longitudinal and Lateral Systems  (use dark lines to show these locations)	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	alk alk	PERMIT NUMBER
Opening Pier pad size  17.5 x 25.5  17.5 x 25.5  17.5 x 25.5  17.5 x 25.5  Within 2' of spaced at the spaced at th	roximate locations of marriage 4 foot or greater. Use this which piers.  17 openings greater than 4 foot es below.	8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8	Load   Footer   16" x 16"   18 1/2" x 18   20" x 20"   22" x 22"	e/G	New Home    Used Home	None:
4 ft 5 ft FRAME TIES within 2' of end of home spaced at 5' 4" oc Number Sidewall Shearwall Shearwall Shearwall Shearwall	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	24	MES	anual Wind Zone III	page 1 of 2

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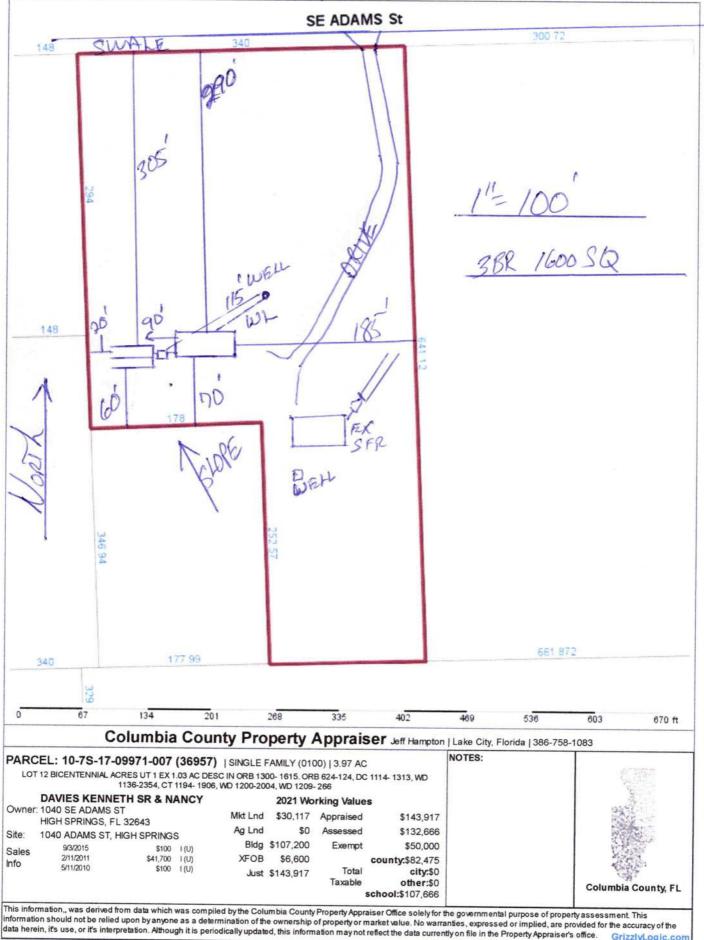
Connect all sewer drains to an existing sewer tap or septic tank. Pg.  Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.	ASSUMED 4	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	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft	The results of the torque probe test is 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.	TORQUE PROBE TEST	× 1000 × 1000 × 1000	Using 500 lb. increments, take the lowest reading and round down to that increment.	POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the home at 6 locations.  2. Take the reading at the depth of the footer.	x too x too x too	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST
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		Other:	The bottomboard will be repaired and/or taped. Yes	Bottom of ridget-eam Yes	Type gasket Pg. Between Floors Yes Between Walls Yes	installer's initials	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.	Gasket (weatherproofing requirement)	Type Fastener: 1495  Walls: Type Fastener: 1495  Roof: Type Fastener: 1495  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.		Debris and organic material removed Water drainage: Natural Swale (Pag) Other	Sile Preparation





Panetry: If you keep prieture who off cabs





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