

CX# 3076

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official 11/14/07 Building Official 11-14-07
 AP# 0711-29 Date Received 11-13-07 By LS Permit # 26439
 Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments Existing MH to be removed.
 FEMA Map# _____ Elevation ✓ Finished Floor _____ River _____ In Floodway _____
☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ EH Release ☐ Well letter ☐ Existing well
☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from installer
☐ State Road Access ☐ Parent Parcel # _____ ☐ STUP-MH _____

Property ID # 26-48-15-00401-126 Subdivision Lot 6 BUC B LANGSTON S.D

- New Mobile Home _____ Used Mobile Home Destroyed Year 1990
- Applicant Eric Bryant Phone # 755-3725 867-2630
- Address 3624 SW Cypress LK RD, Lake City, FL, 32024
- Name of Property Owner Eric Bryant Phone# 755-3725
- 911 Address 3624 SW Cypress LK RD, Lake City, FL, 32024
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Eric Bryant Phone # 755-3725
 Address 3624 SW Cypress LK. RD, Lake City, FL, 32024
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 1
- Lot Size 5.10 Acres Total Acreage 5.10
- 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 Yes Unit change
- Driving Directions to the Property From Hwy 90 take Hwy 247 to CR 242
Turn Right go 3.5 miles to Cypress LK RD. Turn left
Second Drive on Right

Name of Licensed Dealer/Installer Paul C. Bryant Phone # 386 755 5399
 Installers Address 199 SW Thomas TER Lake City FL 32021
 License Number ZH0000333 Installation Decal # 292-130

- JW call'd 11/14/07 - NO ANSWER + NO RECORDING

PERMIT WORKSHEET

PERMIT NUMBER

Installer Todd C. Wright License # IH0000 333

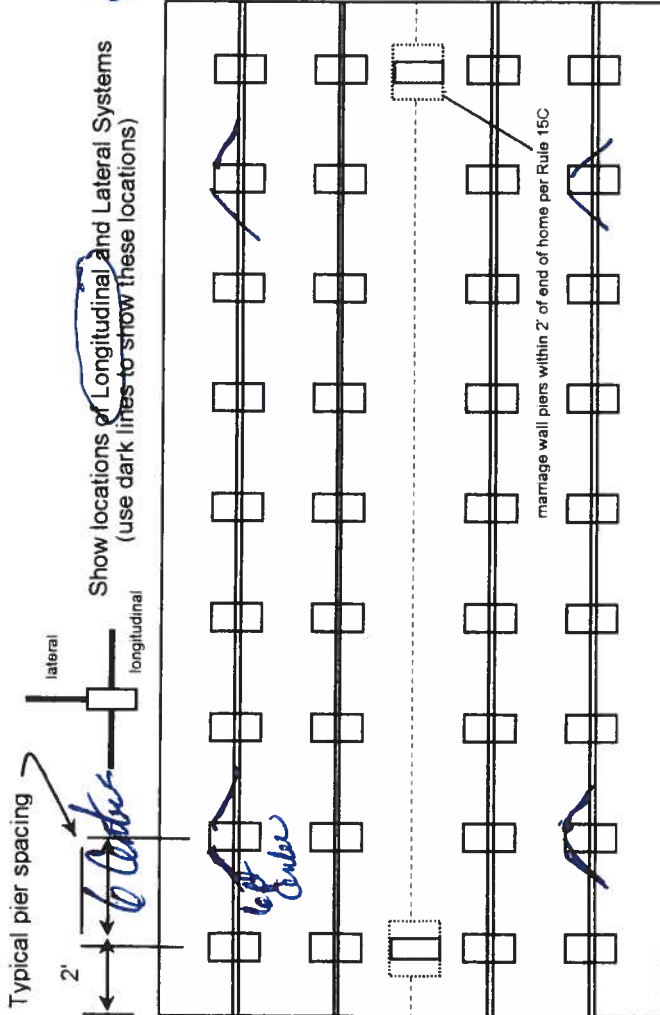
Address of home being installed 30224 SW Cypress Lake Rd. Lake City, Mo 63203

Manufacturer Destiny Length x width 24X56

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 TWR



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 # 292-130

Triple/Quad ☐ Serial # 21597 A4B

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 17X22

Perimeter pier pad size 17X22

Other pier pad sizes (required by the mfg.) 16X16

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 10 ft Pier pad size 20 X 20

Opening NA Pier pad size NA

Opening NA Pier pad size NA

ANCHORS 5 ft Center

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) ☒

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTHER TIES

Sidewall 12

Longitudinal 4

Marriage wall 5

Shearwall NA

Number

PERMIT NUMBER

POCKET PENETROMETER TEST

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

X 185 X 185 X 185

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 185 X 185 X 185

TORQUE PROBE TEST

The results of the torque probe test is 185 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

Date Tested

Electrical

Plumbing

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

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: 8" Spacing: 2 ft
Walls: Type Fastener: 4 ft 5" Spacing: Center
Roof: Type Fastener: 8" Spacing: 2 ft
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

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

Installer's initials

Type gasket

Pg. 700m Seal

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
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
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other:

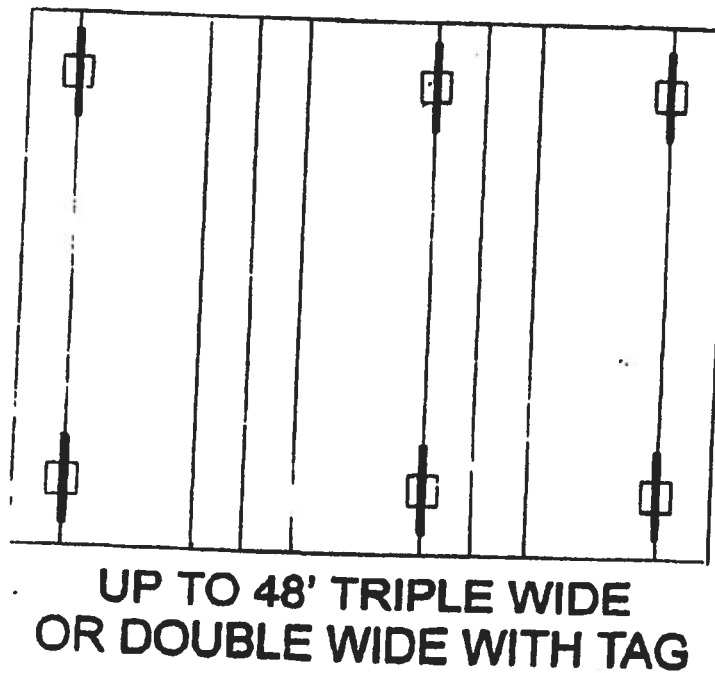
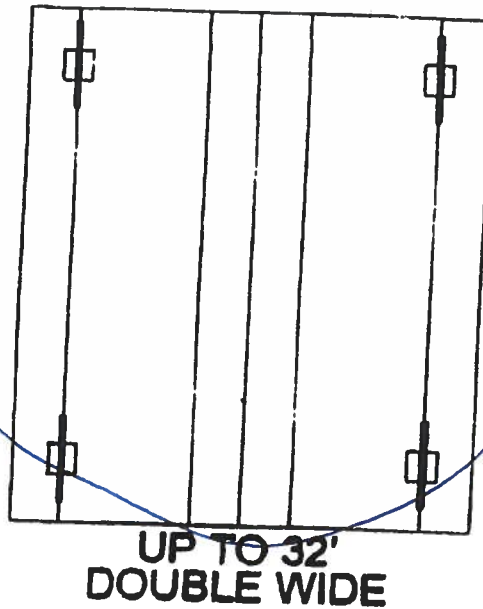
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Date

LONGITUDINAL BRACING SYSTEMS PLACEMENT FOR FLORIDA

Use 650 anchors and 180 square inch stabilizers with frame ties and vertical ties at maximum 5' -4" centers. Vertical ties must be used at all connection points furnished by the home manufacturer. Marriage wall anchors must be used in accordance with the home manufacturers instructions.

For Roof slopes up to 5/12 pitch
Systems must be placed no more than 16' from end of home



See Longitudinal and Lateral Bracing System detail assembly drawing.

A hand-drawn diagram on a grid background, showing a rectangular area divided into several sections. The dimensions and angles are labeled as follows:

- The top horizontal boundary is labeled $194'$.
- The left vertical boundary is labeled $145'$.
- The right vertical boundary is labeled $219'$.
- The bottom horizontal boundary is labeled $362'$.
- A small square is marked with a right angle symbol and labeled $99'$.
- A larger square is marked with a right angle symbol and labeled $90'$.



LIMITED POWER OF ATTORNEY

I, *Paul C. Wright* DO HEREBY AUTHORIZE *Eric Bryant*
TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF APPLYING
FOR A MOBILE HOME PERMIT.

Paul C. Wright
SIGNATURE

10-25-07
DATE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 25 DAY OF October 2007.

Louise D. Murphy
NOTARY PUBLIC



MY COMMISSION EXPIRES: _____
COMMISSION NO. _____
PERSONALLY KNOWN: _____
PRODUCED ID (TYPE): _____

@ CAM112M01 S CamaUSA Appraisal System
 10/25/2007 13:07 Legal Description Maintenance
 Year T Property Sel
 2008 R 26-4S-15-00401-126
 3624 CYPRESS LAKE RD SW LAKE CITY
 HX BRYANT ERIC W

Columbia County	
45000	Land 002 *
	AG 000
19754	Bldg 001 *
800	Xfea 001 *
65554	TOTAL B*

1	LOT 6 BLOCK B LANGTREE S/D.	ORB 785-1841, 832-2194,	2
3	841-1025, 882-1524, 1525,	893-1671, QCD 996-2274,	4
5	QCD 1007-2552, AG 1007-2553,		6
7			8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

Mnt 2/27/2004 KYLIE
 F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

Columbia County Property Appraiser

DB Last Updated: 10/5/2007

2007 Proposed Values

Tax Record

Property Card

Interactive GIS Map

New Super Homestead Taxable Value Calculator

Print

Parcel: 26-4S-15-00401-126 HX

Search Result: 1 of 1

Owner & Property Info

Owner's Name	BRYANT ERIC W		
Site Address	CYPRESS LAKE		
Mailing Address	3624 SW CYPRESS LAKE RD LAKE CITY, FL 32024		
Use Desc. (code)	MOBILE HOM (000200)		
Neighborhood	26415.01	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	0.000 ACRES		
Description	LOT 6 BLOCK B LANGTREE S/D. ORB 785-1841, 832-2194, 841-1025, 882-1524, 1525, 893-1671, QCD 996-2274, QCD 1007-2552, AG 1007-2553,		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (2)	\$45,000.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$20,589.00
XFOB Value	cnt: (1)	\$800.00
Total Appraised Value		\$66,389.00

Just Value	\$66,389.00
Class Value	\$0.00
Assessed Value	\$41,921.00
Exempt Value	(code: HX) \$25,000.00
Total Taxable Value	\$16,921.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
10/11/2003	1007/2553	AG	I	Q		\$40,600.00
10/11/2003	1007/2552	QC	I	U	01	\$34,800.00
4/24/2002	996/2274	QC	I	U	06	\$100.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1994	Alum Siding (26)	896	896	\$20,589.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2005	\$800.00	1.000	0 x 0 x 0	(.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	1.000 LT - (.000AC)	1.00/1.00/1.00/1.00	\$43,000.00	\$43,000.00

PRELIMINARY MOBILE HOME INSPECTION REPORT

RECEIVED 9-14-07 BY LS IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NoFHS NAME ERIC BRANT PHONE _____ADDRESS 3624 SW Cypress Lake Rd, L.C. CELL 867-2630

MOBILE HOME PARK _____ SUBDIVISION _____

DIRECTION TO MOBILE HOME 90W, TR Turner, TR on Terri,
to the end, TR Pinellas, 1st drive on leftMOBILE HOME INSTALLER Bernie Thrift PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Pesting YEAR 1990 SIZE 28 x 60 COLOR GreyMODEL NO. ?WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

STATION

INSPECTION STANDARDS

PASS ☒ FAILED ☐SMOKE DETECTOR ☒ OPERATIONAL ☐ MISSINGFLOORS ☒ SOLID ☐ WEAK ☐ HOLDS DAMAGED LOCATION _____DOORS ☒ OPERABLE ☐ DAMAGEDWALLS ☒ SOLID ☐ STRUCTURALLY UNSOUNDWINDOWS ☒ OPERABLE ☐ INOPERABLEPLUMBING FIXTURES ☒ OPERABLE ☐ INOPERABLE ☐ MISSINGCEILING ☒ SOLID ☐ HOLDS ☐ LEAKS APPARENTELECTRICAL (FIXTURES/OUTLETS) ☒ OPERABLE ☐ EXPOSED WIRING ☐ OUTLET COVERS MISSING ☐ LIGHT FIXTURES MISSING

EXTERIOR

WALLS / SIDING ☒ LOOSE SIDING ☐ STRUCTURALLY UNSOUND ☐ NOT WEATHERTIGHT ☐ NEEDS CLEANINGWINDOWS ☒ CRACKED / BROKEN GLASS ☐ SCREENS MISSING ☐ WEATHERTIGHTROOF ☒ APPEARS SOLID ☐ DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS _____NOT APPROVED ☐ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____SIGNATURE [Signature] ID NUMBER 4016 DATE 9-18-07



STATE OF FLORIDA
DEPARTMENT OF HEALTH

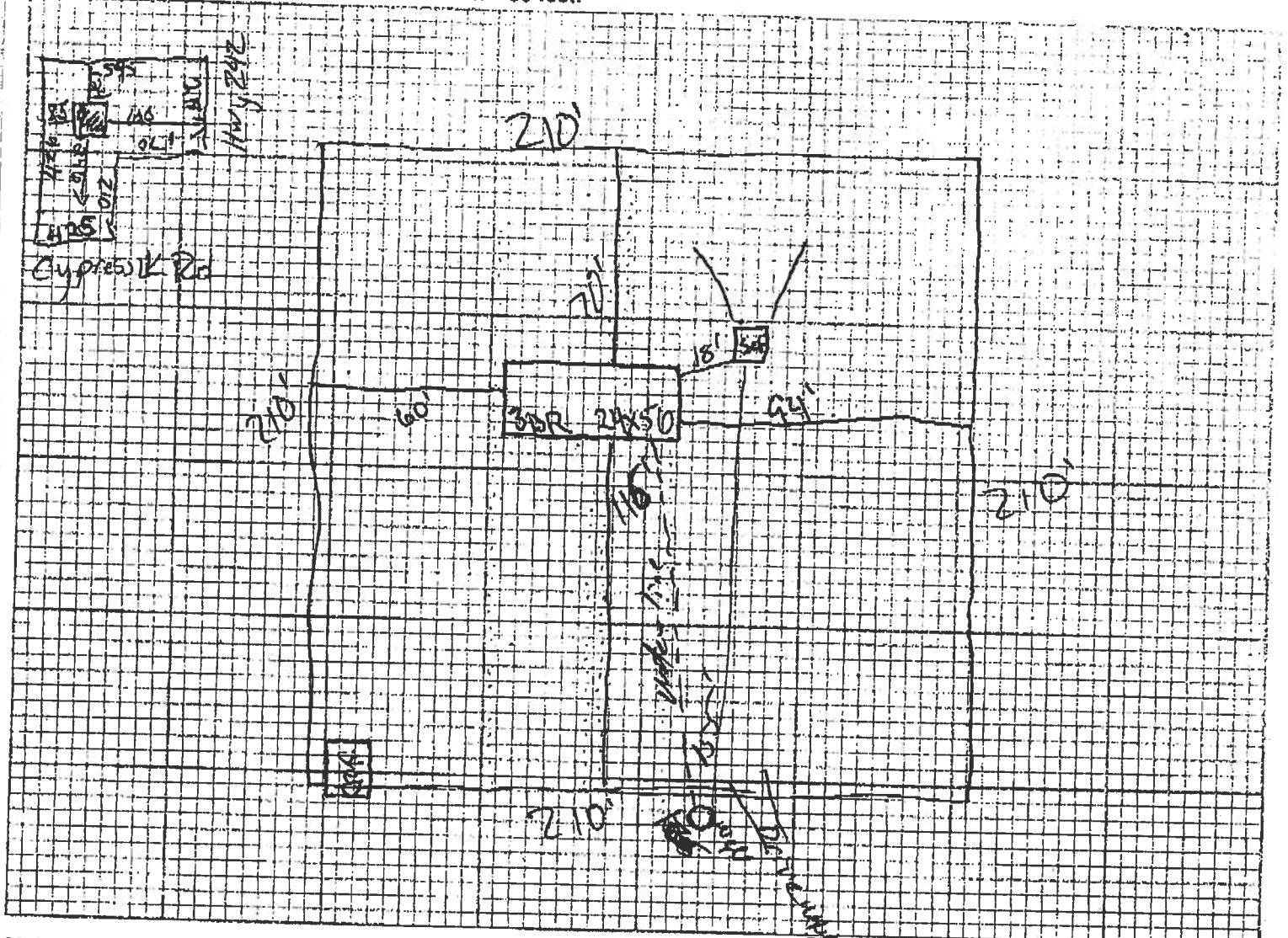
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 07-0834E

867-2630 ERIC

PART II - SITE PLAN

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



Notes:

AND 11/11/07 (REVISED LOCATION) 10/07

Revised: 11/2/07
Sig. [Signature]

Site Plan submitted by: [Signature]

Plan Approved [Signature]

By [Signature]

APPROVED

Signature

Not Approved

[Signature]

Title

Date 11/8/07

Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT