### Cp # 2056 PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

T.

		DIV 1	7 -0 712
	ly (Revised 1-11)	Zoning Official	Building Official 7.C. 2-26-/
			Ct Permit # 29961
0 1 1		1 / 1	Land Use Plan Map Category
Comments Peple	ery previous mit	which has not	- been removed from proper
Cor more the		2/1 4	, , , , , , , , , , , , , , , , , , ,
/			River N Floodway N A
Site Plan with Se	tbacks Shown ★EH # <u></u>	2-0079M #EH	l Release 掩 Well letter 🛛 🛱 xisting well
□ Recorded Deed	or Affidavit from land owner	er hstaller Authoriza	ation State Road Access 1911 Sheet
□ Parent Parcel #_		D STUP-MH	□ F W Comp. letter 🗖 VF Form
IMPACT FEES: EMS	Fire	Corr	M Out County In County d
Road/Code	School	= TOTAL _ Impa	ct Fees Suspended March 2009_
Property ID#	33-35-17-0670	3 - OO C Subdivision	MELROSE FRAMS LOTY,
New Mobile H	omeUsed	Mobile Home	MH Size J4X 51 Year 198
Applicant	~ JONG W 6	)'NG/	ne# (386: 752: 7578
Address	1000 Bex 31	66, 60,	-1 32051
	erty Owner John		Phone# 752-7578 C, AL 32015
911 Address_	0.0	ivelle Pt. C.	
Circle the corr	ect power company -	FL Power & Lig	
	(Circle One) -	Suwannee Valley Ele	ctric - Progress Energy
<ul> <li>Name of Owner</li> </ul>	er of Mobile Home	show have the	)'NG Phone # 752 - 7578
	POB 2166,	1 C, 51	32056
	A STATE OF THE STA	1	
<ul> <li>Relationship to</li> </ul>	o Property Owner	17/0WN-	
<ul> <li>Current Numb</li> </ul>	er of Dwellings on Prope	erty	
Lot Size //0	'X110'	Total Acreage	. 25
Do you : Have	Existing Drive or Private	e Drive or need Culve	t Permit or Culvert Waiver (Circle on
	(Currently using) (Blue Ro	ad Sign) (Putting i	n a Culvert) (Not existing but do not need a Culve
Is this Mobile	Home Replacing an Exis	ting Mobile Home	183 (pd-)
<ul> <li>Driving Directi</li> </ul>	ons to the Property M	arion Sti Sou	th to Baya, Tom Let
GO to EC	oise Ave, Tum		
Right, S	site is out	of sty o	A Road.
	sed Dealer/Installer	BEAT MEXX	Phone # (073. 1103
	ress 6355 VE T	1 245, 6.0,	£1 32025
<ul><li>License</li></ul>	Number <u>I4 102 5</u>	386	Installation Decal # <u>29843</u>
			\$ 375,00
	(000-10)	1,61,00	\$ 375.00 ~ Space Chum 2.24
, ] (	N SPORE W DEM	y case: 1	a spoken chum 2.24

	n airinge wall plers within 2' of end of home per fluie 16C		Typical pier spacing   lateral     lateral	Manufacturer HONES of MEGI Length x width 28756  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 sicewall ties exceed 5 ft 4 in.	Supp- License # # #10 (6) NE Danielle PL	PERMIT WORKSHEET
within 2' of end of home spaced at 5' 4" oc  Longitudinal Stabilizing Device (LSD)  Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer  (10)  FRAME TIES  within 2' of end of home spaced at 5' 4" oc  OTHER TIES  Longitudinal Longitudinal Longitudinal Stabilizing Device w/ Lateral Arms  Shearwall  Shearwall		PIER PAD SIZES   POPULAR PAD SIZES		installation Decal  Serial # 3//  m:TypicalHir	Installed to the Manufacturer's Installation Manual sinstalled in accordance with Rule 15-C	RKSHEET page 1 of 2

XITOO

· FINNEL WOUNDINGE

page 2 of 2

Debris and organic material removed Water drainage: Natural Swale	
ed Other	Site Preparation

x 1700	t penetrometer ere to declare 1	-0
x ) 700	The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.	OCKET PENETROMETER TES
x/800	esting. psf	EST

# POCKET PENETROMETER TESTING METHOD

Floor:

Type Fastener:

10.55

Fastening multi wide units

Walls

Type Fastener: 5495

For used homes a min. 30 gauge, 8" wide, galvanized metal strip

Length: Length: Length:

Spacing: Spacing: Spacing:

roofing nails at 2" on center on both sides of the centerline will be centered over the peak of the roof and fastened with galv.

- Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer
- Using 500 lb. increments, take the lowest reading and round down to that increment
- x 1700

## TORQUE PROBETES

1800

of tape will not serve as a gasket

a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are

installer's initials

Between Walls Yes Between Floors

Yes

Bottom of ridgebeam Yes

understand a properly installed gasket is a requirement of all new and used

Gasket (weatherproofing requirement

showing 275 inch pounds or less will require 5 foot anchors. here if you are declaring 5' anchors without testing The results of the torque probe test is 285 inch pounds or check

Type gasket Pg. 22

room

Note: A state approved lateral arm system is being used and 4 ft. requires anchors with 4000 lb holding capacity reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft

installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

1-12 100

**Date Tested** Installer Name

Electrical

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

Plumbing

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

independent water supply systems. Pg. Connect all potable water supply piping to an existing water meter, water tap, or other

Weatherproofing

Fireplace chimney installed so as not to allow intrusion of rain water. Miscellaneous Yes Yes

	Skirting to be installed. Yes N. Dryer vent installed outside of skirting. Range downflow vent installed outside of Drain lines supported at 4 foot intervals. Electrical crossovers protected. Yes Other:
	ting to be installed. YesNo er vent installed outside of skirting. Yege downflow vent installed outside or in lines supported at 4 foot intervals. trical crossovers protected. Yes
	alled. Y d outsic ent inst ted at 4 ers prote
	be installed. Yes No installed outside of skirting. Yen installed outside of skirting. Yen installed outside of supported at 4 foot intervals.
	N O N
	Yes of skirting Yes
	\$ <b>% %</b>
	7.
1	

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature manufacturer's installation instructions and or Rule 15C-1 & 2

Date 1-12

ATOME HOME INSTALLATIO	N CHECONTRACTOR	VERIFICATION FORM
A COMP STORAGE INCYALLATIN	MAINSLUMINGUION	A Platt 160 41 1 m.

APPLICATION NUMBER 1202-3

CONTRACTOR

Robert Shepen PHONE 623-2203

#### 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 <u>REQUIRED</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 John W. O'Neal	Signature
	Print Name Tohn Wi O'Neal License #: 8 was	Signature Show We Shift Phone #: 356-752-7578
PLUMBING/ GAS	Print Name Robert Steppa - License #: JH 1025386	Signature

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.

Contractor Forms: Subcontractor form: 1/11

#### Columbia County Property Appraiser

DB Last Updated: 1/17/2012

Parcel: 33-3S-17-06703-000

<< Next Lower Parcel Next Higher Parcel >>

#### **Owner & Property Info**

Owner's Name	O'NEAL JOHN W	O'NEAL JOHN W & DANETTE				
Mailing Address	PO BOX 2166 LAKE CITY, FL 32056					
Site Address	161 SE DANIELLE PL					
Use Desc. (code)	MOBILE HOM (0	MOBILE HOM (000200)				
Tax District	2 (County)	Neighborhood	33317			
Land Area	0.253 ACRES	0.253 ACRES Market Area 06				
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.					
\$1/2 OF W/1/2 OF LOT 4	BLOCK 2 MELROSE	FARMS S/D. ORB 303-06, 700-6	320			

#### 2011 Tax Year

Tax Estimator Property Card

Tax Collector

Parcel List Generator

Interactive GIS Map Print

Search Result: 1 of 1



#### **Property & Assessment Values**

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$5,784.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$2,868.00
XFOB Value	cnt: (1)	\$300.00
Total Appraised Value		\$8,952.00
Just Value		\$8,952.00
Class Value		\$0.00
Assessed Value		\$8,952.00
Exempt Value		\$0.00
Total Taxable Value	Other: \$8	Cnty: \$8,952 3,952   Schl: \$8,952

#### 2012 Working Values

#### NOTE:

2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

**Show Working Values** 

#### Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
11/1/1989	700/820	WD	I	Q		\$10,000.00

#### **Building Characteristics**

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1968	BELOW AVG. (03)	684	884	\$2,868.00
Note: All S.F. calculations are based on exterior building dimensions.						

#### **Extra Features & Out Buildings**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	1993	\$300.00	0000001.000	0 x 0 x 0	(000.00)

#### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000102	SFR/MH (MKT)	0.253 AC	1.00/1.00/1.00/1.00	\$13,463.17	\$3,406.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 1/17/2012

0.9.11

386-497-4866

p.2

;386 /58-2187

#### A&B

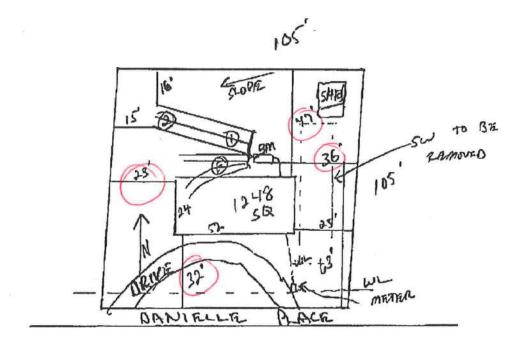
STATE OF FLORIDA

DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 12-0070M

O'NEAL—PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:	
Site Plan submitted by: Rocky	MASTER CONTRACTOR
Plan-Approved Not Approved Collusion	Date 3 9-12 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/04 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-092-4015-6)



Page 2 of 4



■15 12 04:06p

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

PERMIT #: 12-SC-1392070 APPLICATION #: AP1061211 DATE PAID: 2/81/2\_ FEE PAID: ZOT UD RECEIPT #1812845 DOCUMENT #: PR866387

CONSTRUCTION PERMIT FOR: OSTOS Existing Modification	
APPLICANT: JOHN 12-0070 O'NEAL	
PROPERTY ADDRESS: 161 SE DANIELLE PI Lake City, FL 32025	
IOT: 4 BLOCK: 2 SUBDIVISION: MELROSE FARMS	
PROPERTY ID #: 06703-000 (SECTION, TOWNSRIP, RANGE, PARCI	EL NUMBER]
SISTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARD 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	
SYSTEM DESIGN AND SPECIFICATIONS	
Existing Septic Tank CAPACITY  A [	#Primps [ ]
R	
SPECIFICATIONS BY: Rocky D Ford TITLE: MUSIN CONTYACTION	
APPROVED BY: Person & Gifford TITLE: Environmental Specialist I	Columbia CHD
DATE ISSUED: 02/09/2012 EXPIRATION DATE:	08/09/2013
DH 4016, 08/09 (Obsolutes all) previous editions which may not be used) Incorporated: 6376.003, FAC	Page 1 of 3



Oct 30 11 03:21p

#### MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statues Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

1. Robert Steppen, license number IH 1025386
state that the installation of the manufactured home for owner
John & Danette O'Neal at
911 Address: 161 SE Danielle Place City Lake City
will be done under my supervision.
Signed: Robile Home Installer
Sworn to and described before me this 15th day of February 200/12
Chidy Edge
Notary public CINDY EDGE Commission DD 779357  Expires July 20, 2012  Personally known
Notary Name Bonded Thru Troy Feln Insurence 800-395-7019 B

#### CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

1202-32 DATE RECEIVED Z-16-12 BY LH IS THE MIH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? John D'Neal PHONE 752-7578 CELL ADDRESS MOBILE HOME PARK SUBDIVISION DRIVING DIRECTIONS TO MOBILE HOME 97 79 N US 44/ & Just South of this Address. MOBILE HOME INSTALLER Robert Shepparl PHONE MOBILE HOME INFORMATION Homes of Merit YEAR 86 SIZE 28 x 56 COLOR SERIAL No. 3/9328 \$ 3/9329 Th Must be wind zone II or higher NO WIND ZONE I ALLOWED WIND ZONE INSPECTION STANDARDS INTERIOR: (P or F) - P= PASS F= FAILED \$50.00 SMOKE DETECTOR () OPERATIONAL () MISSING Date of Payment: FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION John O'Neal DOORS () OPERABLE () DAMAGED 1451 Rec7 WALLS () SOLID () STRUCTURALLY UNSOUND WINDOWS () OPERABLE () INOPERABLE PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING CEILING () SOLID () HOLES () LEAKS APPARENT ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT **FIXTURES MISSING EXTERIOR:** WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT ROOF () APPEARS SOLID () DAMAGED **STATUS** APPROVED WITH CONDITIONS: NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS ID NUMBER 304



#### COLUMBIA COUNTY BUILDING DEPARTMENT

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

		1202-32		
MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION				
1, Robert Who Nove give this gutherity for the				
Installer License Holder No				
only, 161 SE JAN	Job Address	and I do certify that		
the below referenced person(s	) listed on this form is/are under m	y direct supervision and control		
and is/are authorized to purcha	se permits, call for inspections an	d sign on my behalf.		
Printed Name of Authorized	Signature of Authorized			
Person	Person	Authorized Person is (Check one)		
JOHN W. O'NEAL	alenh-All	Agent Officer Property Owner		
		Agent Officer		
		Property Owner		
		Agent Officer Property Owner		
I, the license holder, realize that	I am responsible for all permits pu	Irchased and all work done		
under my license and I am fully	responsible for compliance with al	L Florido Ct. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
Local Ordinances.	especialistic for compliance with all	Florida Statutes, Codes, and		
I understand that the State Licer	ising Board has the power and au	thority to discipline a license		
riolder for violations committed b	y him/her or by his/her authorized	person(s) through this		
document and that I have full res	ponsibility for compliance granted	by incurred of and		
	, and the compliance granted	by issuance of such permits.		
1, 1				
License Holders Signature (Note in 1) IH/1025386 2.23.12				
License Holders Signature (Notarized)  License Number  Date				
NOTARY INFORMATION:				
STATE OF: Florida COUNTY OF: COLUMBIA				
The above license holder, whose name is Robert Vhorence				
personally appeared before me and is known by me or has produced identification (type of I.D.) on this				
of this day of, 20/2.				
Lail dan		LAURIE HODSON		

EXPIRES: July 14, 2012
Seal/Stamp) Public Underwriters

NOTARY'S SIGNATURE