

Parcel:
23-4S-17-08714-000 (32267)

Owner & Property Info

Owner	RED DIAMOND RANCH, LLC 505 SW AVIATION DR LAKE CITY, FL 32025		
Site	3635 SE COUNTY ROAD 252, LAKE CITY 3611 SE COUNTY ROAD 252		
Description*	S1/2 OF S1/2 OF NW1/4 OF NE1/4 & SW1/4 OF NE1/4 & NW1/4 OF SE1/4 AS LIES N OF CR 252 & LYING W OF BRANCH EX APPRX 20 AC AS DESC IN ORB 1156-2067. PB 989-2777 THRU 2793, DC 989-2782, PR 1008-2489 DC 1160-1995, PB 1174-1270, PR 1213-1779, QC 1266-1073, QC 1266- 1076, DC 1412-2258, PB 1420-859, QC 1459-2401, DC 1463-1, WD 1471-2106, WD 1471-2106 <<<less		
Area	34 AC	S/T/R	23-4S-17
Use Code**	IMPROVED AG (5000)	Tax District	3

Detail by Entity Name

Florida Limited Liability Company

RED DIAMOND RANCH, LLC

Filing Information

Document Number L22000137501 FEI/EIN Number NONE Date Filed 03/21/2022 Effective Date 04/01/2022 State FL

Status ACTIVE

Principal Address

3635 CR 252

LAKE CITY, FL 32025

Mailing Address

505 SW AVIATION DRIVE

LAKE CITY, FL 32025

Registered Agent Name & Address OASYS CORPORATION

505 SW AVIATION DRIVE

LAKE CITY, FL 32025

Authorized Person(s) Detail Name & Address

Title AR

OASYS CORPORATION

505 SW AVIATION DRIVE

LAKE CITY, FL 32025

Title MGR

SOMMER, STEPHEN A

505 SW AVIATION DRIVE

LAKE CITY, FL 32025

Title MGR

SOMMER, SUSAN J

505 SW AVIATION DRIVE

LAKE CITY, FL 32025

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Ernest Scott Johnson PHONE 352-494-8099

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

Red Diamond Ranch / Stephen Sommer

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 <u>Glenn Whittington</u>	Signature 
	License #: <u>EC 13002957</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C	Print Name <u>Timothy Shatto</u>	Signature 
	License #: <u>CAC 057875</u>	Phone #: <u>386-496-8224</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

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

I, Glen Whittington (license holder name), licensed qualifier
for Whittington Electric Inc (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. <u>Mark Burd</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	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.

Glen Whittington License Number EL13002957 Date 3/7/16
Licensed Qualifiers Signature (Notarized)

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL DL on this 7 day of MARCH, 20 16.

[Signature]
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

LICENSED QUALIFIER AUTHORIZATION

I, Timothy Shatto (license holder name), licensed qualifier
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.
2. Dale Burd	2.
3.	3.
4.	4.
5.	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.

Timothy D. Shatto CAC 057875 2/22/18
Licensed Qualifiers Signature (Notarized) License Number Date

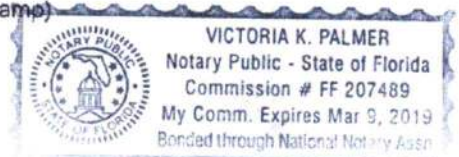
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Union

The above license holder, whose name is Timothy D. Shatto
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 22 day of February, 20 18.

Victoria K. Palmer
NOTARY'S SIGNATURE

(Seal/Stamp)



PERMIT WORKSHEET

page 1 of 2

PERMIT NUMBER

Installer Ernest Scott Johnson License # IH-1025249

Installer Mobile Phone # 352-494-8099

Address of home being installed 3611 SE Lowndes Road 952 Lake City FL 32005

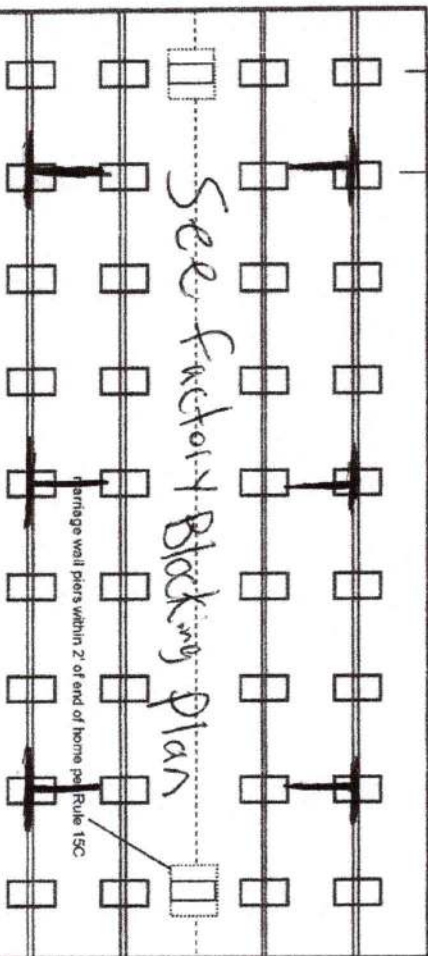
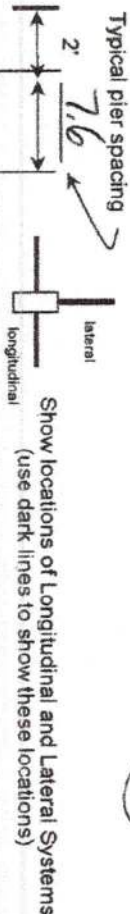
Manufacturer Live Oak Length x width 68x78

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

[Signature]



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 # 9A575

Triple/Quad ☐ Serial # LOHGA2003796AB

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (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 23x31 7.6

Perimeter pier pad size 11x15 17.5x25.5

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

Factory blocking plan

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer Anchor 1101 V

Longitudinal Stabilizing Device w/ Lateral Arms

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

OTHER TIES

Number

28

10

2

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 1000 X _____ X _____

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 _____ X _____ X 1000

TORQUE PROBE TEST

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.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Ernest S Johnson

Date Tested 8-2-22

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-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: 1/4" Length: 7" Spacing: 20"
Walls: Type Fastener: 1/4" Length: 7" Spacing: 20"
Roof: Type Fastener: 1/4" Length: 7" Spacing: 20"
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 ES

Installed:

Type gasket Pg. fact 11
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 Ernest S Johnson

Date 8/2/22

0-99



FOUNDATION NOTES:

FOUNDATION NOTES:
- 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.

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

L-2684B

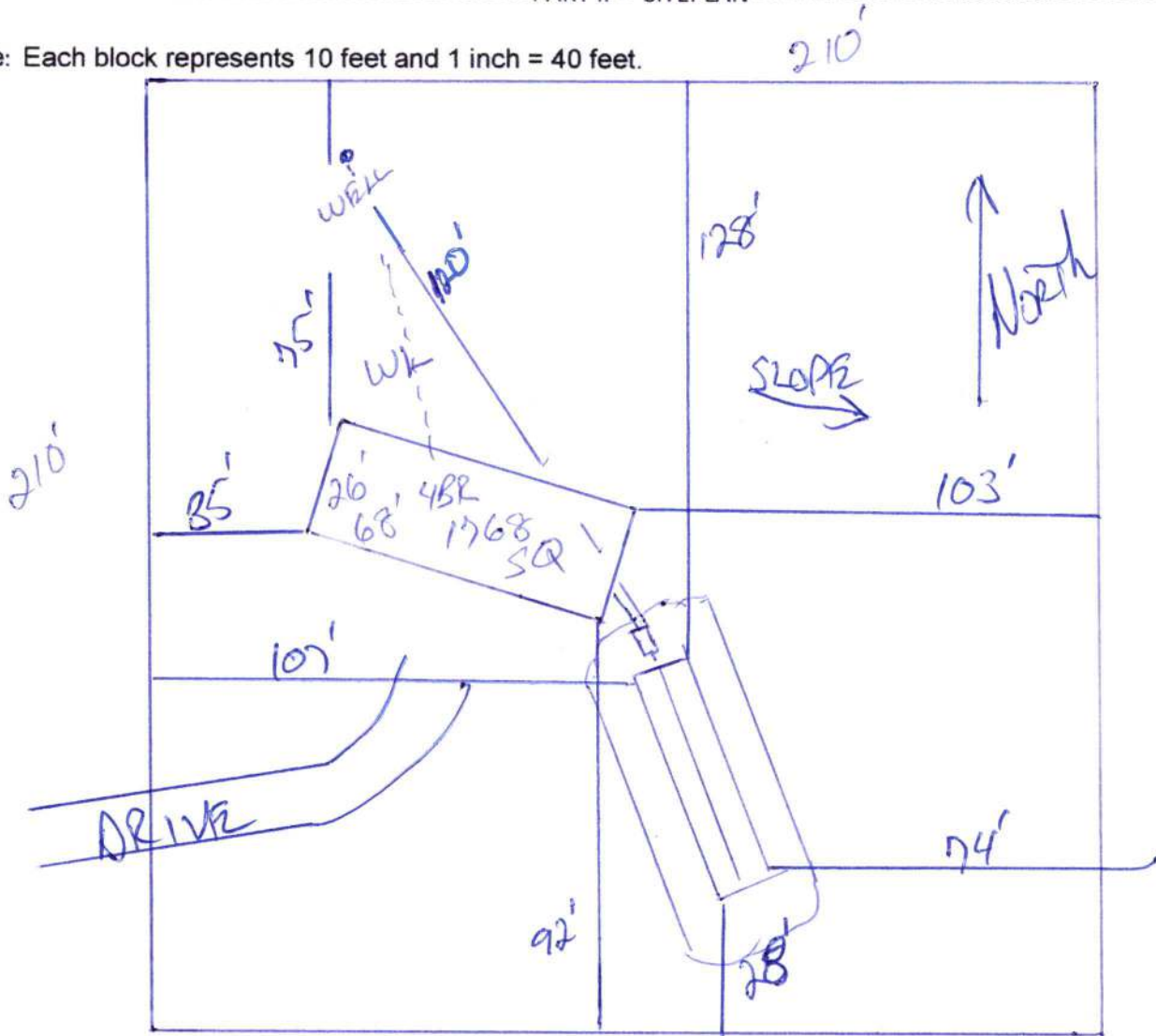
STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number _____

Red Diamond Ranch / Stephen Sommer

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

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



Notes: _____

1 of 34 Acres

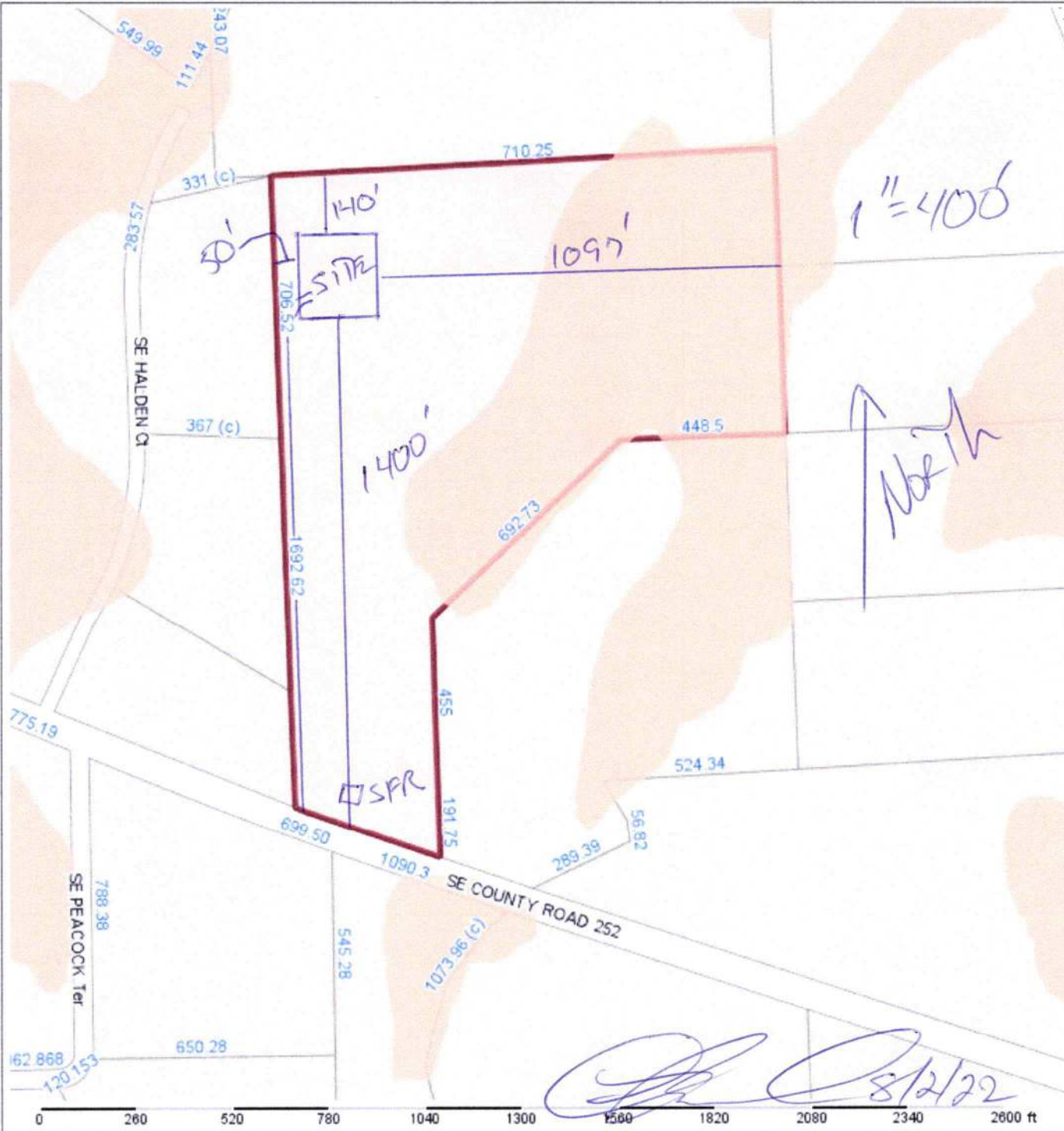
SEE ATTACHED

Site Plan submitted by: _____ Contractor _____

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 23-4S-17-08714-000 (32267) IMPROVED AG (5000) 34 AC			
S1/2 OF S1/2 OF NW1/4 OF NE1/4 & SW1/4 OF NE1/4 & NW1/4 OF SE1/4 AS LIES N OF CR 252 & LYING W OF BRANCH EX APPRX 20 AC AS DESC IN ORB 1156-2067. PB			
RED DIAMOND RANCH, LLC		2022 Working Values	
Owner: 505 SW AVIATION DR		Mkt Lnd	\$3,500
LAKE CITY, FL 32025		Ag Lnd	\$21,648
Site: 3635 SE COUNTY ROAD 252, LAKE CITY		Bldg	\$170,920
Sales		XFOB	\$1,650
Info		Just	\$291,570
6/16/2022	\$250,000	I (Q)	
2/18/2022	\$100	I (U)	
9/24/2013	\$100	I (U)	
		county:	\$183,448
		city:	\$0
		other:	\$0
		school:	\$197,718

NOTES:



Columbia County, FL

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com

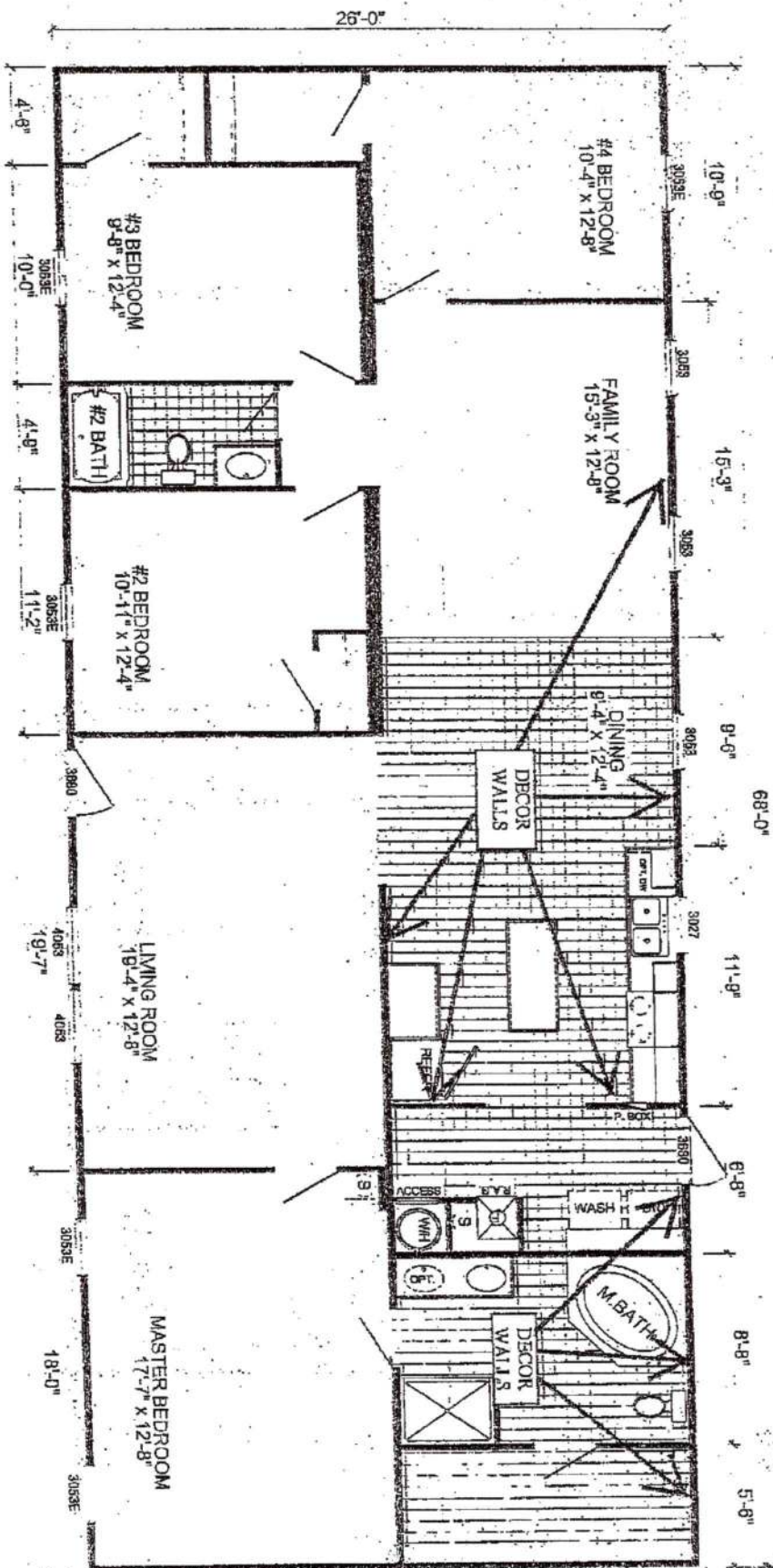
Architectural drawing of the exterior facade of a building, showing a vertical section. The facade is characterized by a dense, textured pattern, possibly representing brickwork or a specific masonry finish. Several windows are visible, including a large multi-paned window in the center and smaller windows above and below it. The drawing is oriented vertically, with the top of the building at the top of the page.

4-BEDROOM / 2-BATH

33 x 72 - Approx. 1768 Sq. Ft.

02/08/19

frontal plane angles and sagittal plane angles for approximate





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: **6/22/2020 2:47:41 PM**

Address: **3611 SE COUNTY ROAD 252**

City: **LAKE CITY**

State: **FL**

Zip Code **32025**

Parcel ID **23-4S-17-08714-000**

REMARKS: **This address is a verified address in the county's addressing system.**

Verification ID: cad0e8d9-726e-4725-80d7-6b516cc75d8b

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: **GIS Specialist**

Columbia County GIS/911 Addressing Coordinator