

CL#19411

Setbacks - 30', 25', 200' per Plat

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

☒ Inc

For Office Use Only

(Revised 7-1-15)

Zoning Official

2nd 6-28-18

Building Official

2nd 6-28-18

AP#

1806-72

Date Received

6/22

By

SW

Permit #

36912

Flood Zone

A

Development Permit

Zoning PRD

Land Use Plan Map Category

AG

Comments

Minimum floor elevation set @ 134.00', need Elevation letter before power
200' Building Setback from the rear of this lot

FEMA Map#

Elevation

Finished Floor

134.00'

River

In Floodway

☐ Recorded Deed or

☒ Property Appraiser PO

☒ Site Plan

☒ EH # 18-0502-N

☐ Well letter OR

☐ Existing well

☐ Land Owner Affidavit

☒ Installer Authorization

☐ FW Comp. letter

☒ App Fee Paid

☐ DOT Approval

☐ Parent Parcel #

☐ STUP-MH

☒ 911 App

☐ Ellisville Water Sys

☒ Assessment owed on Property

☐ Out County

☐ In County

☒ Sub VF Form

Property ID #

30-2S-17-04800-113

Subdivision

Pines of Falling Creek

Lot# 13

New Mobile Home

☒

Used Mobile Home

MH Size 28 x 56

Year 2018

Applicant

Dale Burd or Rocky Ford

Phone #

386-497-2311

Address

546 SW Dortch Street, Fort White, FL, 32038

Mine of Lake City Inc

Name of Property Owner

Guy Williams

Phone#

386-623-0232

911 Address

280 NW Taylor Magee Pl Lake City FL 32055

Circle the correct power company -

FL Power & Light

-

(Clay Electric)

(Circle One) -

Suwannee Valley Electric

-

Duke Energy

Name of Owner of Mobile Home

Guy Williams

Phone #

386-623-0232

Address

397 S Marion Street, Lake City, FL, 32025

Relationship to Property Owner

Same

Current Number of Dwellings on Property

0

Lot Size

110 x 171 Irregular

Total Acreage

1.76

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

No

Driving Directions to the Property

41 North, TR Falling Creek Road, TR Taylor Magee Pl,

to end on right

Name of Licensed Dealer/Installer

Robert Sheppard

Phone #

386-623-2203

Installers Address

6355 SE CR 245, Lake City, FL, 32025

License Number

IH-1025386

Installation Decal #

49979

DATE is aware of what's needed 6.22.18

\$512.68

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer

Robert Sheppard

License # PH 1025386

911 Address where home is being installed

280 Thayer Moore Pl
Lafayette LA 70505

Manufacturer

Linedak

Length x width

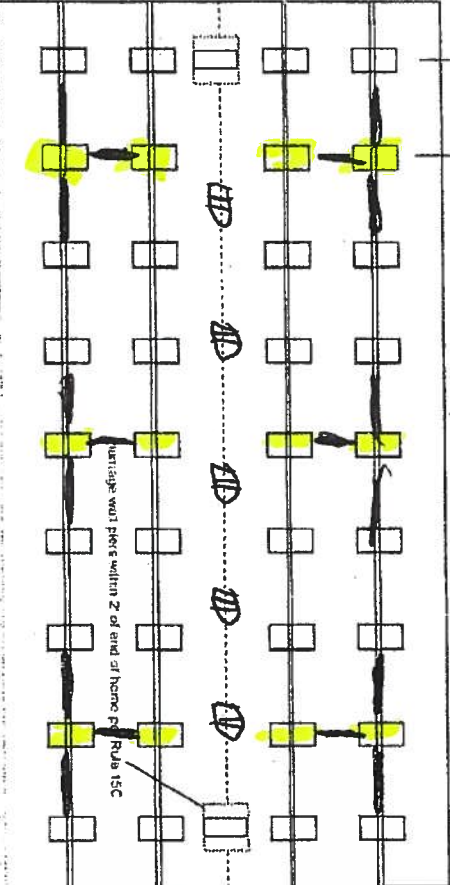
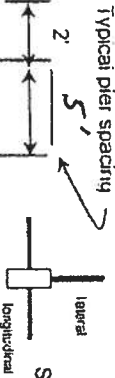
28 x 55

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

RS



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 # 49979

Triple/Quad ☐ Serial # LAH6421633344AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16' x 16' (1256)	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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	9'	10'
2000 dsf	6'	8'	9'	10'	11'	12'
2500 dsf	7' 6"	9'	10'	11'	12'	13'
3000 dsf	8'	10'	11'	12'	13'	14'
3500 dsf	8'	10'	11'	12'	13'	14'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

17x25

Perimeter pier pad size

16x16

Other pier pad sizes (required by the mfg.)

17x25

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

4 ft ☒ 5 ft ☐

FRAME TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer Oliver

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Oliver

Number 2

Other Ties

Number 4

Shearwall

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 1600 X 1600

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 1700 X 1600

TORQUE PROBE TEST

The results of the torque probe test is 295 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 slate 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 points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb locking capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

6/18/18

Electrical

Connect electrical conductions between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 29

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☐

Fastening Multi-Wide Units

Floor: Type Fastener: lags Length: 5' Spacing: 16"
Walls: Type Fastener: 3045 Length: 4" Spacing: 16"
Roof: Type Fastener: lags Length: 6" Spacing: 16"
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galy. roofing nails at 2' on center on both sides of the centerline.

Gasket (weatherstripping requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, moisture 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

RS

Type gasket

F04M

Installed:

Between Floors Yes ☒

Between Walls Yes ☒

Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ No ☐
Siding on units is installed to manufacturer's specifications. Yes ☒ No ☐
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒ No ☐

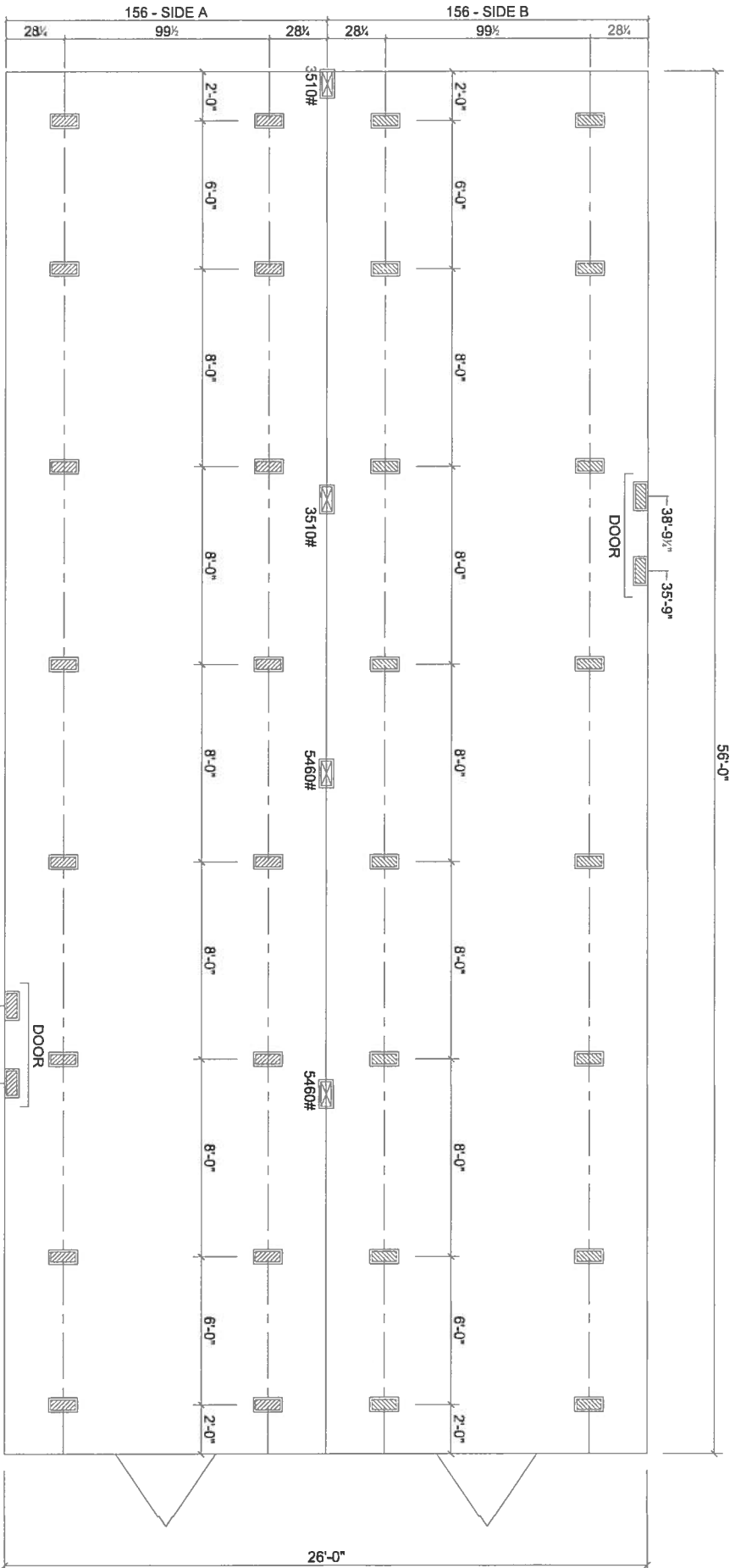
Miscellaneous

Skirting to be installed. Yes ☒ No ☐
Dryer vent installed outside of skirting. Yes ☐ No ☒
Range downflow vent installed outside of skirting. Yes ☒ No ☐
Drain lines supported at 4 foot intervals. Yes ☒ No ☐
Electrical crossovers protected. Yes ☒ No ☐
Other: ☐

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

Installer Signature

Robert Shepard Date 6/18/18



- ☒ MARRIAGE LINE OPENING SUPPORT PIER/TYP.
- ▨ SUPPORT PIER/TYP

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.

1-9-2014

Live Oak Homes
MODEL: L-2563G - 28 X 56
3-BEDROOM / 2-BATH

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

L-2563G

OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM
MODEL 1101"V" (STEPS 1-15)
LONGITUDINAL ONLY: FOLLOW STEPS 1-9
FOR ADDING LATERAL ARM : Follow Steps 10-15
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - **STOP! Contact Oliver Technologies at 1-800-284-7437 :**
a) Pier height exceeds 48" b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96"
e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C) .
3. Place ground pan (C) directly below chassis I-beam . Press or drive pan firmly into soil until flush with or below soil.
SPECIAL NOTE: The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4" . VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.) .

4. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

PIER HEIGHT
(Approx. 45 degrees Max.)

1.25" ADJUSTABLE
Tube Length

1.50" ADJUSTABLE
Tube Length

7 3/4" to 25"	22"	18"
24 3/4" to 32 1/4"	32"	18"
33" to 41"	44"	18"
40" to 48"	54"	18"

5. Install (2) of the 1.50" square tubes (E {18" tube}) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.
8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.

NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. **NOTE:** Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
11. **NOTE:** Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.



OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone 931-796-4555
Fax 931-796-8811
www.olivertechnologies.com

INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.
- The concrete shall be minimum 2500 psi mix
 - A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required.. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer **OR** When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

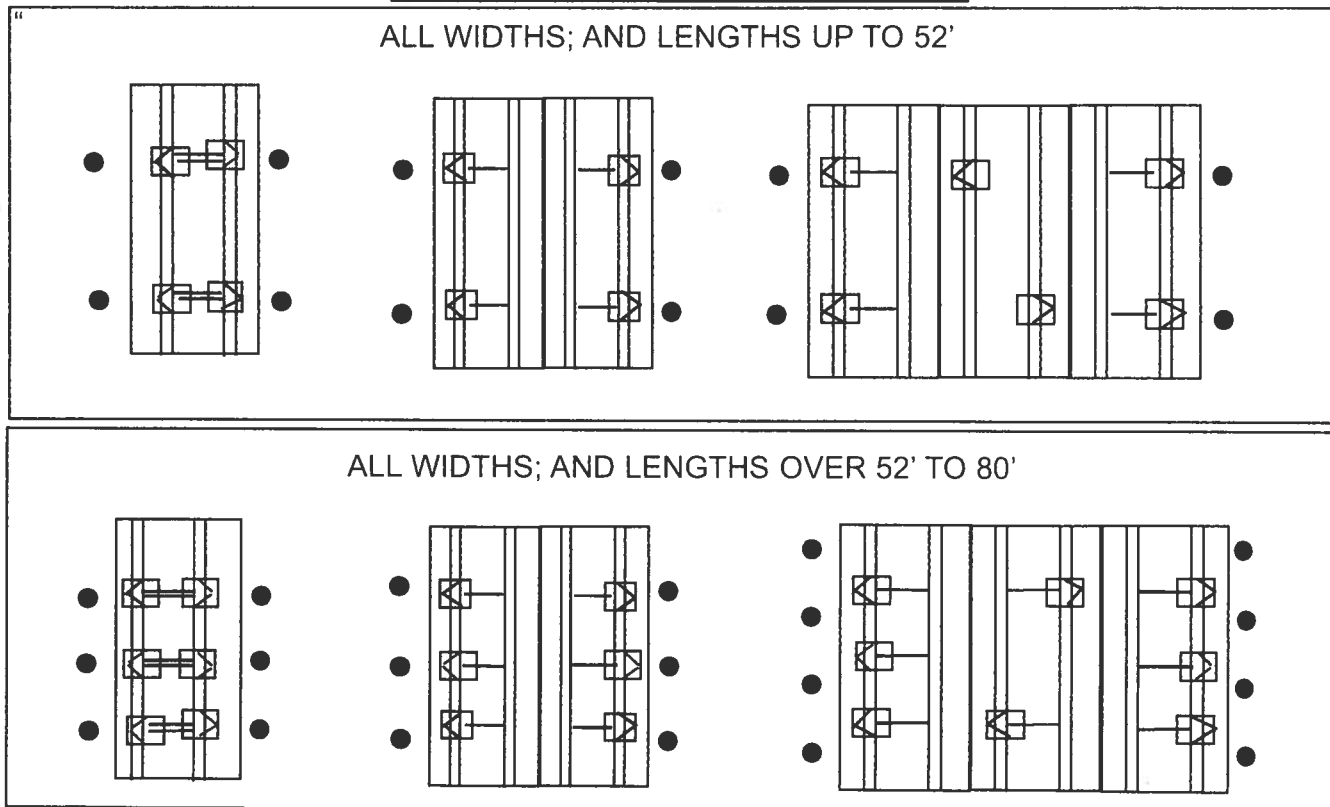
LATERAL: (Model 1101 TC "V")

18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

- LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- ◻ = LOCATION OF LONGITUDINAL BRACING ONLY
- ◻ = TRANSVERSE & LONGITUDINAL LOCATIONS

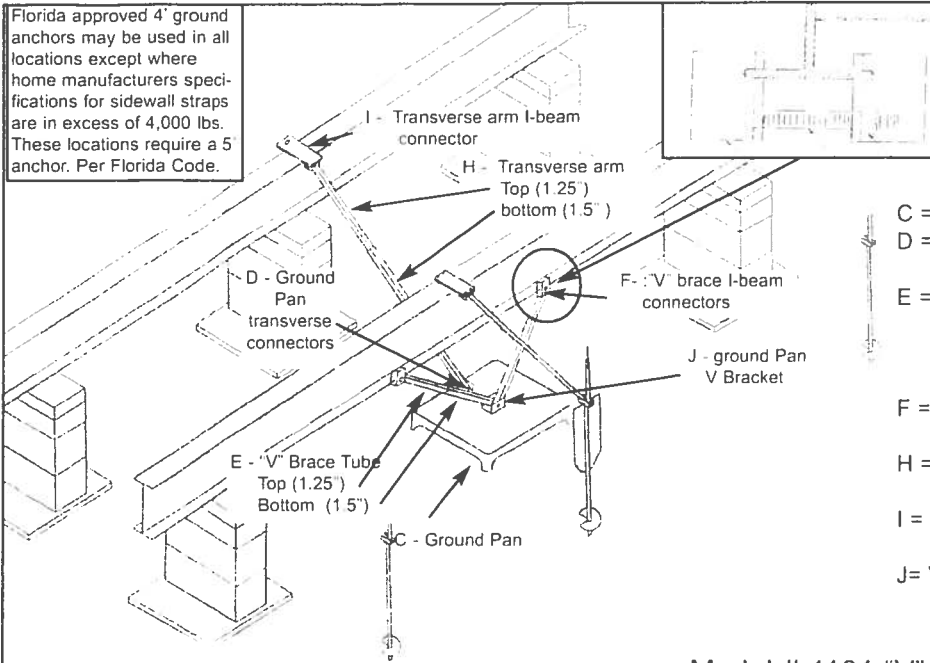
REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS

6 systems for home lengths up to 52' and 8 systems for homes over 52' and up to 80'. One stabilizer plate and frame tie required at each lateral bracing system.

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.

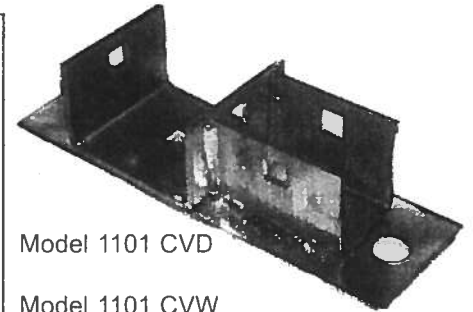
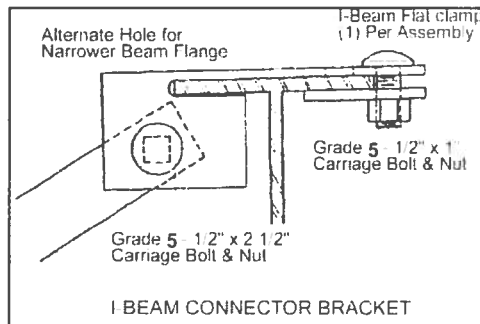
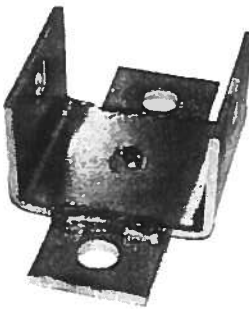


- C = GROUND PAN
- D = GROUND PAN CONNECTOR U BRACKETS TRANSVERSE
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTORS ASSEMBLY
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- J = V PAN BRACKET

Model # 1101 "V"

Longitude dry concrete bracket part # 1101 D-CPCA

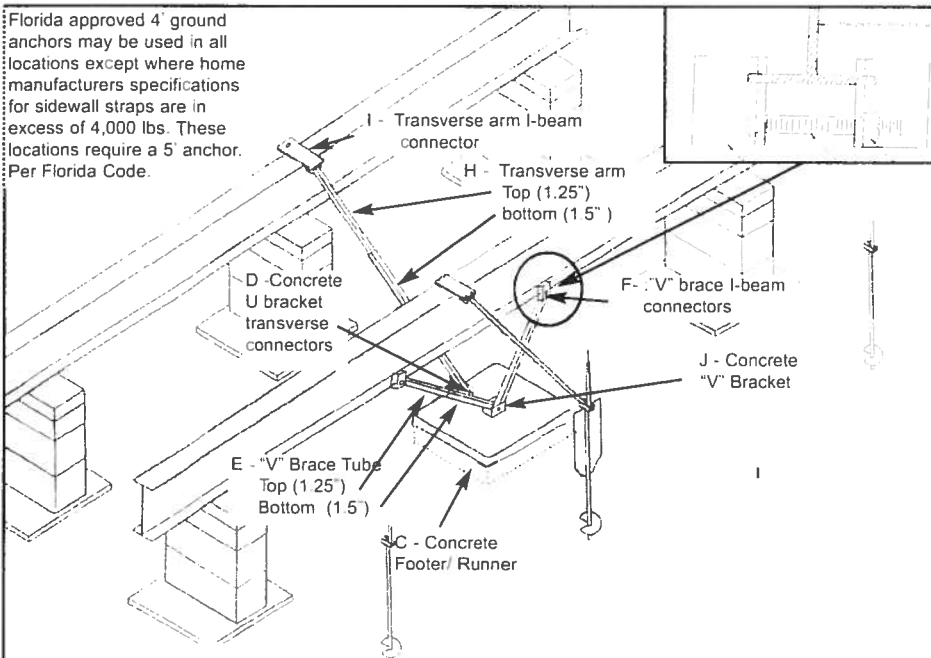
Wet bracket part # 1101 W-CPCA not shown



Model 1101 CVD

Model 1101 CVW not shown

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.



- C = CONCRETE FOOTER/RUNNER
- D = CONCRETE U BRACKET TRANSVERSE CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOTTOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY (connects with grade 5 - 1/2" x 4" carriage bolt & nut)
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 - 1/2" x 2 1/2" carriage bolt & nut)
- J = CONCRETE "V" BRACKET (connects with grade 5 - 1/2" x 4" carriage bolt & nut)

Model # 1101 C "V"

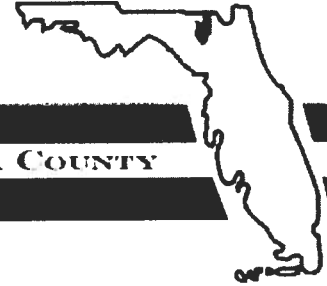


OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone 931-796-4555
Fax 931-796-8811
www.olivertechnologies.com

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
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:	6/26/2018 2:02:40 PM
Address:	280 NW TAYLOR MAGEE PI
City:	LAKE CITY
State:	FL
Zip Code	32055
Parcel ID	04800-113

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

Columbia County Property Appraiser

updated: 6/4/2018

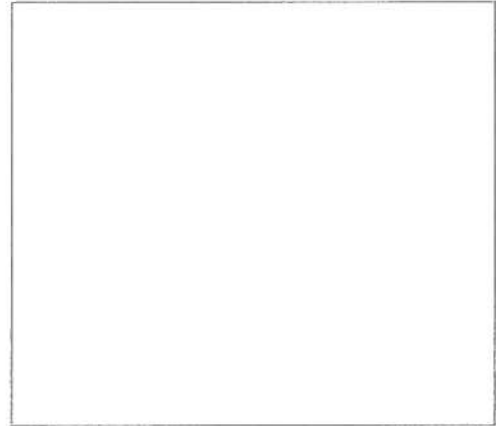
2017 Tax Year

Parcel: 30-2S-17-04800-113

Owner & Property Info

<< Prev Search Result: 12 of 13 Next >>

Owner's Name	MINE OF LAKE CITY INC		
Mailing Address	397 S MARION AVE LAKE CITY, FL 32055		
Site Address			
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	30217
Land Area	1.760 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 13 PINES OF FALLING CREEK. WD 1352-1536, WD 1356-54,			



Property & Assessment Values

2017 Certified Values		
Mkt Land Value	cnt: (0)	\$10,000.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$10,000.00
Just Value		\$10,000.00
Class Value		\$0.00
Assessed Value		\$10,000.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$9,488 Other: \$9,488 Schl: \$10,000	

2018 Working Values (...Hide Values)		
Mkt Land Value	cnt: (0)	\$11,000.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$11,000.00
Just Value		\$11,000.00
Class Value		\$0.00
Assessed Value		\$11,000.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$10,437 Other: \$10,437 Schl: \$11,000	

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

[Florida Department of State](#)[\[HOME\]](#) [\[ABOUT\]](#) [\[CONTACT\]](#)[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation
MINE OF LAKE CITY, INC.

Filing Information

Document Number P02000006478
FEI/EIN Number 94-3414992
Date Filed 01/14/2002
State FL
Status ACTIVE

Principal Address

397 S MARION AVE
LAKE CITY, FL 32025

Changed: 04/04/2008

Mailing Address

397 S MARION AVE
LAKE CITY, FL 32025

Changed: 04/04/2008

Registered Agent Name & Address

WILLIAMS, GUY N
397 S MARION AVE
LAKE CITY, FL 32025

Address Changed: 04/04/2008

Officer/Director Detail

Name & Address

Title D

WILLIAMS, GUY N
397 S MARION AVE
LAKE CITY, FL 32025

Title D

WILLIAMS, DALE M
1121 SW MT CARMEL AVE
LAKE CITY, FL 32024

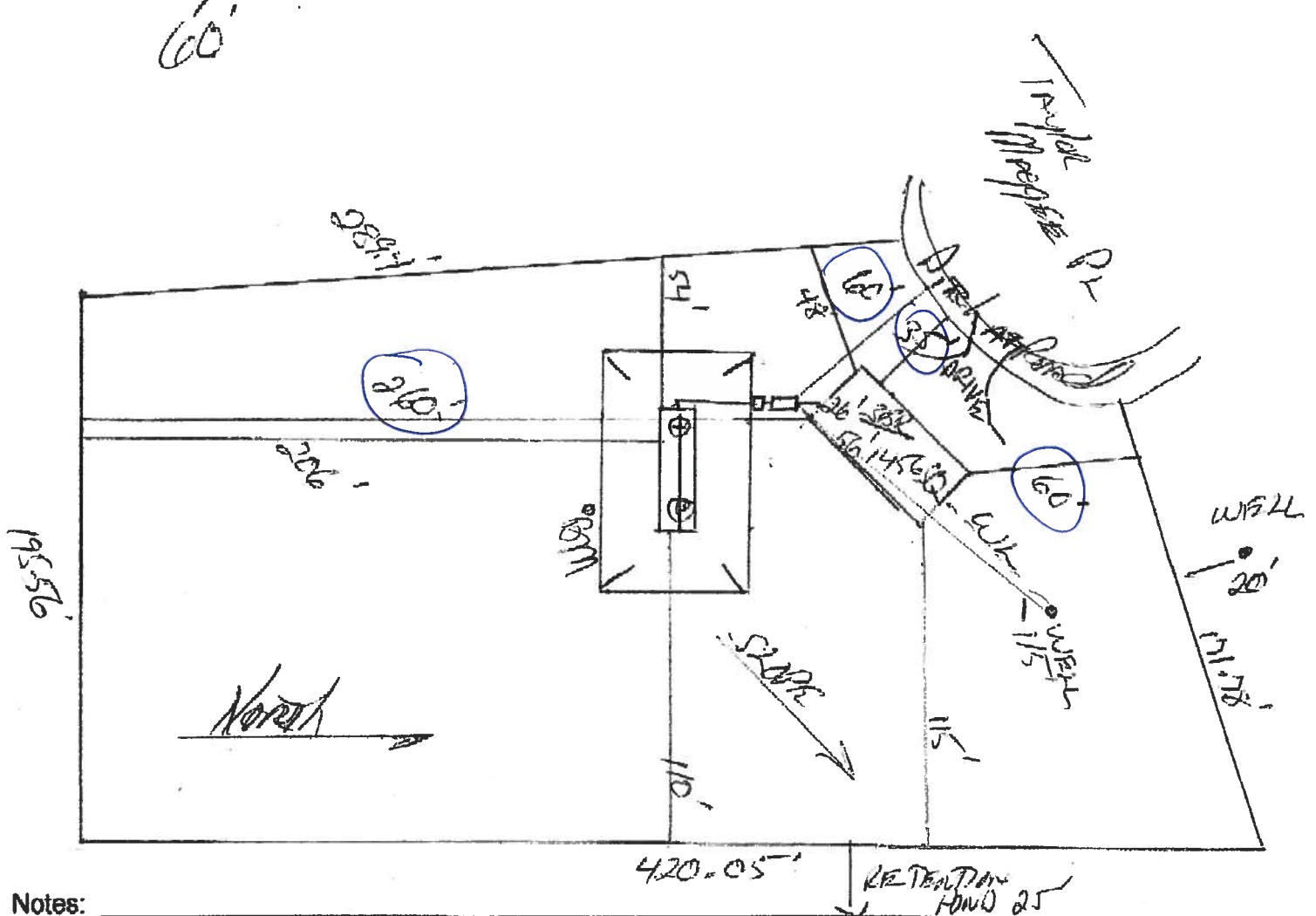
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Muscat Lake City

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: Rocky D F-O

MASTER CONTRACTOR

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

A & B Well Drilling, Inc.
5673 NW Lake Jeffery Road
Lake City, FL, 32055
(O) 386-758-3409
(F) 386-758-3410
(C) 386-623-3151

6/21/2018

To: Columbia County Building Department

Description of well to be installed for Customer: Muni of Lake City
Located at Address: 280 TAYLOR MAGNOLIA PL L.C., FL

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park
Sincerely
Bruce Park
President



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>Dale Burk</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.

[Signature] License Qualifiers Signature (Notarized) EL13002957 License Number 3/7/16 Date

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, Michael A. Boland (license holder name), licensed qualifier
for ACE A/C & COOLING, LLC (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>Dale Reed</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>[Signature]</u>	3. <u>[Signature]</u>
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.

[Signature] Licensed Qualifiers Signature (Notarized) License Number CA1817716 Date 11/17/15

NOTARY INFORMATION

STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 17th day of November 2015

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1806-72 CONTRACTOR Robert Sheppard PHONE 386-623-2203

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

Mine of Lake City

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 1074	Print Name <u>Glenn Whittington</u>	Signature <u>[Signature]</u>
	License #: <u>EC13002957</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
✓ MECHANICAL/ A/C 950	Print Name <u>Michael Boland</u>	Signature <u>[Signature]</u>
	License #: <u>CAC1817716</u>	Phone #: <u>352-274-9326</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



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

PERMIT NO. 28-0502
DATE PAID: 5/19/18
FEE PAID: 318.00
RECEIPT #: 235894

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Mine of Lake City IncAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: 13 BLOCK: na SUB: Pines of Falling Creek PLATTED: _____PROPERTY ID #: 30-29-17-04800-113 ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☒ NPROPERTY SIZE: 1.76 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ $\leq 2000\text{GPD}$ ☐ $> 2000\text{GPD}$ IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: 280 Taylor Magee Place, LCDIRECTIONS TO PROPERTY: US 441 North, TR Falling Creek Road, TR NW Taylor Magee Pl,Last lot on right

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	3	1456	
2				
3				

☒ Floor/Equipment Drains ☒ Other (Specify) _____SIGNATURE: Rocky D FordDATE: 6/18/2018

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 ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

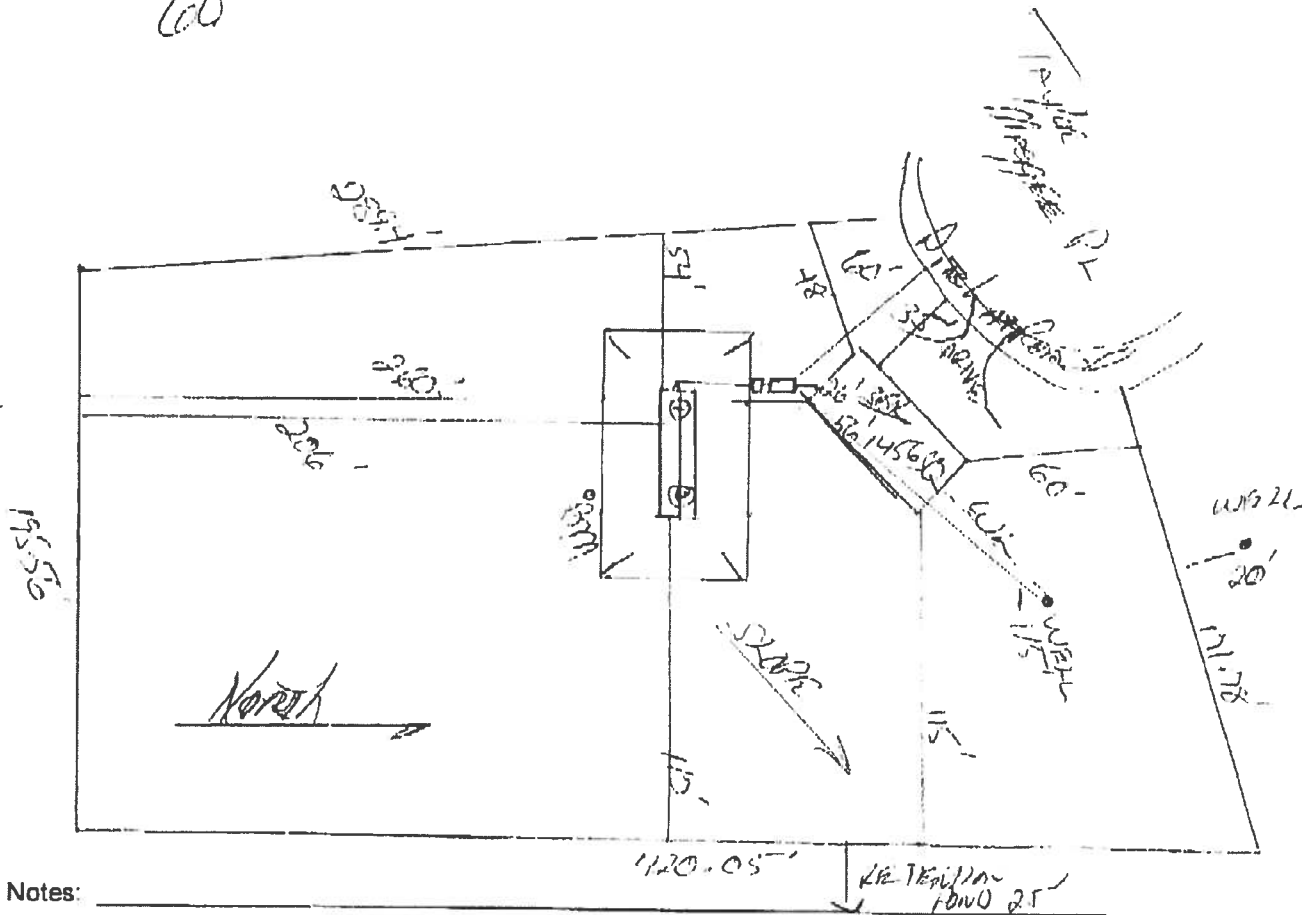
Permit Application Number 18-0502

Munoz Lake Co.

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

Scale. 1 inch = 40 feet.

60'



Notes: _____

Site Plan submitted by: Rocky D 7-0

MASTER CONTRACTOR

Plan Approved _____

Not Approved _____

Date 6/21/18

By Brian [Signature]

ESJ

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT