PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official Building Official AP# 444 D Date Received 130 20 By MG Permit #	
FEMA Map# Finished Floor River In Floodway Recorded Deed or Property Appraiser PO Site Plan Site Plan Well-letter OR Well-letter OR Property Appraiser PO Site Plan Study Comp. letter App Fee Paid DOT Approval Parent Parcel # STUP-MH STUP-MH Study VF Form Out County Study VF Form Study VF Form Out County Study VF Form Study VF Form Out County Study VF Form	
Property ID # <u>28-15-17-04592-000</u> SubdivisionLot#_	
New Mobile Home Used Mobile Home X MH Size 28 × 52 Year 199	<u>5</u>
• Applicant Stephanie Thomas Phone # 386697 1912	
· Address 1/90 NE Double Run Rd Lake City F1 32055	
Name of Property Owner Ralph Henry Sovabley Phone# 288-5061	
· 911 Address 12757 US Hywy 441 Lake City F1 32055	
Circle the correct power company - FL Power & Light - Clay Electric	
(Circle One) - Suwannee Valley Electric - Duke Energy	
Name of Owner of Mobile Home Stephanie Thomas Phone # 386 697 1912 Address 1190 NG Double Run Rd Lake City Fl 37055	_
Relationship to Property Owner <u>Daughter</u>	
Current Number of Dwellings on Property	
■ Lot Size 20 Aerzs Total Acreage 20	
 Lot Size 20 Aerzs Total Acreage 20 Do you: Have Existing Drive or Private Drive (Blue Road Sign) Total Acreage 20 (Currently using) Total Acreage 20 (Currently using) Total Acreage 20 (Currently using) Or Culvert Waiver (Circle or (Not existing but do not need a Culvert) 	1e) 'ert)
■ Is this Mobile Home Replacing an Existing Mobile Home	_
Driving Directions to the Property 441 North & miles Past T- Property on Right	<u> </u>
Name of Licensed Dealer/Installer Robert Shepped Phone # 386-623-22	03
Installers Address 6355 SE CR 245 14 Rr City F/	
License Number <u>TH 1025-386</u> Installation Decal # 65346	

swaiting on home to be in-county.

Typical pier spacing Address of home being installed Installer Manufacturer where the sidewall ties exceed 5 ft 4 in 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) NOTE: if home is a single wide fill out one half of the blocking plan hopert Shepper House of Marst Mobile Home Permit Worksheet B ateral longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) B marriage wall piers within 2' of end of home per Length x width Installer's initials License #_ J#1025386 28 X52 Rule 15C **Application Number:** capacity bearing List all marriage wall openings greater than 4 foot and their pier pad sizes below. Other pier pad sizes (required by the mfg.) interpolated from Rule 15C-1 pier spacing table Load Manufacturer D li Jer 1101 v Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Longitudinal Stabilizing Device (LSD) Perimeter pier pad size Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C l-beam pier pad size Triple/Quad Double wide New Home 000 psf 000 psf Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers (sq in) Footer size TIEDOWN COMPONENTS PIER PAD SIZES 16" x 16" PIER SPACING TABLE FOR USED HOMES (256)Q Serial # Used Home Installation Decal # Wind Zone II 18 1/2" x 18 Pier pad size 1/2" (342) 11225 16×16 JUM 5170913 504 Abs 20" x 20" Q (400) Wind Zone III 65346 22" x 22" (484)* 4 ft Marriage wal Shearwall within 2' of end of home spaced at 5' 4" oc Sidewall ongitudinal POPULAR PAD SIZES Date $31/4 \times 26$ Pad Size OTHER TIES 26 x 26 16 × 18 16 × 16 FRAME TIES 24" X 24" **ANCHORS** $(576)^*$ 5 († 26" x 26"

(676)

ထ္

288

Mobile

Home Permit Worksheet	Application Number:Date:
	Site Preparation
POCKET PENETROMETER TEST	
r tests are rounded down to /500 psf	Water drainage: Natural Swale Pad Other
	Fastening multi wide units
× 1500 × 1600	Floor: Type Fastener: 1495 Length: 5 Spacing: 16
T PENETROMETER TESTING METHOD	
ne perimeter of the home at 6 locations.	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.

or check here to declare The pocket penetromete

x 1500

POCKE

3. Using 500 lb. increments, take the lowest Take the reading at the depth of the footer. reading and round down to that increment

1. Test the perimeter of the home at 6 locations

Ŋ

1600

× 1600

1600

of tape will not serve as a gasket.

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

Installer's initials

57

Between Floors Yes Between Walls Yes

Yes

Bottom of ridgebeam Yes

Installed

Gasket (weatherproofing requirement)

ORQUE PROBE TES

Type gasket Pg

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

Note: A state approved lateral arm system is being used and 4 ft. 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 requires anchors with 4000 lb holding capacity Installer's initials

The bottomboard will

Weatherproofing

Pg

Yes

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

-

Electrical crossovers protected

Yes

NA C

Drain lines supported Range downflow vent Dryer vent installed or Skirting to be installed

Other

3-20 opert S

Electrical

source. 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

23

independent water supply systems. Pg. Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. _____2s____

	1	Drain lines supported at 4 foot intervals. Yes 4
N/A	Yes	Range downflow vent installed outside of skirting. Yes
7	N/A	Dryer vent installed outside of skirting. Yes
	Audito du	Skirting to be installed. Yes No
		Miscellaneous
ain water	trusion of r	Fireplace chimney installed so as not to allow intrusion of rain water.
Yes	ecifications.	Siding on units is installed to manufacturer's specifications. Yes
79	Yes V	rife bottomboard will be repaired and/or taped. Yes

Installer Signature Date 1-3-20

SITE PLAN CHECKLIST 1) Property Dimensions 2) Footprint of proposed and existing structures (including decks), label these with existing addresses 3) Distance from structures to all property lines 4) Location and size of easements 5) Driveway path and distance at the entrance to the nearest property line 6) Location and distance from any waters; sink holes; wetlands; and etc. 7) Show slopes and or drainage paths 8) Arrow showing North direction SITE PLAN EXAMPLE Revised 7/1/15 Show Your Road Name OFOS KORD ZEEO (My Property) Barn M/H NOTE: This site plan can be copied and used with 410' the 911 Addressing 325 470 Dept. application forms. 498 60' North SOK AFOX 301 OFF FORTH 750 385' 3851 Slope 530 DRIVEWAY

SRWMD Wetlands

DEFAULT

2018 Flood Zones

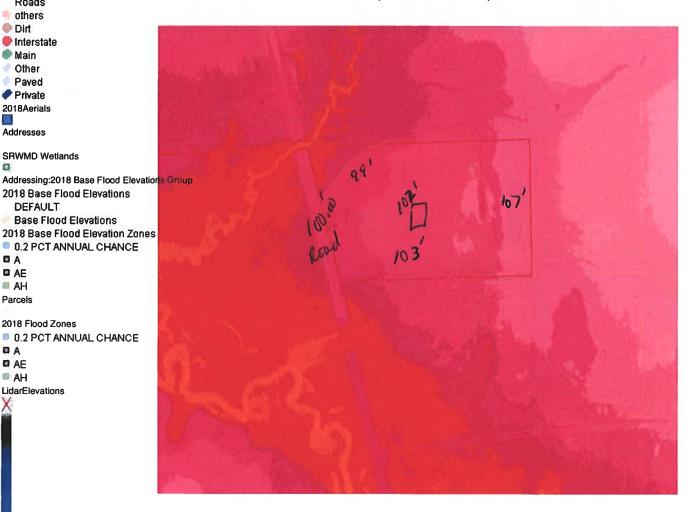
O A O AE AH **Parcels**

DA O AE AH LidarElevations

Base Flood Elevations

Columbia County, FLA - Building & Zoning Property Map

Printed: Mon Feb 03 2020 16:43:55 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 28-1S-17-04592-000 Owner: SPRADLEY RALPH HENRY

Subdivision:

Lot:

Acres: 19.1965389 Deed Acres: 20 Ac

District: District 1 Ronald Williams Future Land Uses: Agriculture - 1

Flood Zones: A,

Official Zoning Atlas: A-1

All data, information, and maps are provided as is without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implies warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

District No. 1 · Ronald Williams District No. 2 · Rocky Ford District No. 3 · Bucky Nash District No. 4 · Toby Witt 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:

2/6/2020 7:09:20 PM

Address:

12725 N US HIGHWAY 441

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

04592-000

REMARKS: Address for proposed structure on parcel. 2nd address for this parcel.

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

STATE OF FLORIDA COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

- R	1 00 11
This is to certify that I, (We),Rape	n Spractier.
as the owner of the below described proper	The state of the s
Property tax Parcel ID number	15-17-04592-000
Subdivision (Name, lot, Block, Phase)	
Give my permission for Stephanic	Thomas to place a
	Utility Pole Only / Single Family Home / t / Other any other Permits
I (We) understand that the named person(s) permit on the property number I (we) have assessment for solid waste and fire protection	
Raph Suracley Owner Signature	12-20-19 Date
40	
Owner Signature	Date
Owner Signature	Date
Sworn to and subscribed before me this	day of December, 2020. This
(These) person(s) are personally known to	
Sharon Ruslace	Shannon R Hall
Notary Public Signature N	Notary Printed Name
Notary Stamp/	





BUILDING DEPARTMENT COLUMBIA COUNTY, FLORIDA

Application #_

OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM
OWNERS NAME Stephan S. Thomas PHONE 386 6971912 CELL 3866 971912
INSTALLER Robert Shapper & PHONE 3866737203 CELL 382 6257203
INSTALLERS ADDRESS 6355 SE CV 245 (qke City F1 32025
MOBILE HOME INFORMATION
MAKE HOWYS of Merit YEAR 1995 SIZE 28 x 52
color In SERIAL No. FLAMC 2F 709 13604A/B
WIND ZONE SMOKE DETECTOR yes
INTERIOR: FLOORS
DOORS
WALLS
CABINETS CABINETS
ELECTRICAL (FIXTURES/OUTLETS)
EXTERIOR: WALLS / SIDDING
windows
DOORS
INSTALLER: APPROVED NOT APPROVED
INSTALLER OR INSPECTORS PRINTED NAME Robert Shepphyd
Mobile Home Installer Signature 18 License No. IH/025386 Date 1-26-20
NOTES:
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.
NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.
BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

FOR OFFICE USE

Building Inspectors Signature

THIS IS DONE.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE

Date

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR _	Robert	Shepport	PHONE 386-613-2203

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 Se Sou Signature Signature Phone #:
	Qualifier Form Attached
MECHANICAL/	Print Name a Son (Nomes Signature
A/C	License #: Phone #:
a)	Qualifier Form Attached

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.



COLUMBIA COUNTY BUILDING DEPARTMENT

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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

Installer License Holler Name	only for the job address show below
only, 12757 US Havy 441 Lake like ob Address	4H 32v55 , and I do certify that
the below referenced person(s) listed on this form is/are und	der my direct supervision and control
and is/are authorized to purchase permits, call for inspection	ns and sign on my behalf.
Printed Name of Authorized Signature of Authorized Person	Authorized Person is (Check one)
Da San Dramas	Agent Officer Property Owner
Stephanie Thomas S. MOMa	Agent Officer Property Owner
	Agent Officer Property Owner
I, the license holder, realize that I am responsible for all persunder my license and I am fully responsible for compliance Local Ordinances. I understand that the State Licensing Board has the power and the state Licensing Board has the state Licensing	with all Florida Statutes, Codes, and
holder for violations committed by him/her or by his/her authouse document and that I have full responsibility for compliance of	
License Holders Signatur (Notarized) License Holders Signatur (Notarized)	4/02 3 386
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: COUNTY OF:	whia
The above license holder, whose name is personally appeared before me and is known by me or has (type of I.D.) on this	produced identification day of Amulun, 20 20.
Shammy Slace	<i>U</i> 0
NOTARY'S SIGNATURE	(Sea/Stame) Notary Public State of Florida Shannon R Hall My Commission GG 349666



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

SPOSAL PERMIT NO.

DATE PAID:
FEE PAID:
RECEIPT #: 146916

AFF	TICATION. I	OR CONSI	PRUCTION P	2RMIT		2010
APPLICATION FOR: New System Repair APPLICANT: AGENT: MAILING ADDRESS:	ranie Tl	roma	s Ralph:	pradte)	Call Yint	38694990
TO BE COMPLETED BY BY A PERSON LICENS APPLICANT'S RESPON PLATTED (MM/DD/YY)	ISIBILITY TO	PROVIDE I	OCUMENTATION	189.552, FLOR	RIDA STATUTE:	S. IT IS THE
PROPERTY INFORMATI		UBDIVISION	v:		p	Latted:
PROPERTY ID #: 28 PROPERTY SIZE: 12 IS SEWER AVAILABLE PROPERTY ADDRESS: DIRECTIONS TO PROP	ACRES AS PER 381 12757 PERTY: LL	WATER SUPE .0065, FS? US Hywy Nort	PLY: [X PR: [Y/N] -441 Lake	City F1 32	: []<=20000 ISTANCE TO S	GPD []>2000GPD EWER:FT
BUILDING INFORMATI	ON	[X] RESI	DENTIAL	[] COMM	ERCIAL	0
Unit Type of No <u>Establishmen</u>	t	No. of Bedrooms	Building Area Sqft	Commercial/I Table 1, Cha	nstitutional pter 64E-6,	. System Design FAC
1 Mobile Hou	ne	3	1456			
4						
[] Floor/Equipmo	ent Drains	[] Oth	ner (Specify		DATE:	1-8-20

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 20 -0 - PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet Notes: Site Plan submitted by: DATE: Plan Approved Not Approved County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Last Update: 2/3/2020 4:16:46 PM EST

Register for eBill

Ad Valorem Taxes and Non-Ad Valorem Assessments

The information contained herein does not constitute a title search and should not be relied on as such

Account Number	Тах Туре		Tax Year
R04592-000	REAL ESTATE		2019
Mailing Address	Property Add	ress	
SPRADLEY RALPH HENRY	12757 US HIGH		N LAKE CITY
110 SW ROSEBUD GLN			
LAKE CITY FL 32024	GEO Number		
	281S17-04592-	-000	
Exempt Amount	Taxable Value		
See Below	See Below		
Exemption Detail	Millage Code	Esci	row Code
NO EXEMPTIONS	003		
HO DADMI I TOHO			
	for full description)		
Legal Description (click	for full description) Acres N1/2 OF SE1/4 OF SV	W1/4. OR	B 377-165 LIF

Ad Valorem Taxes								
Taxing Authority	Rate	Assessed Value	Exemption Amount	Taxable Value	Taxes Levied			
BOARD OF COUNTY COMMISSIONERS	8.0150	10,348	0	\$10,348	\$82.94			
COLUMBIA COUNTY SCHOOL BOARD								
DISCRETIONARY	0.7480	10,784	0	\$10,784	\$8.06			
LOCAL	3.9880	10,784	0	\$10,784	\$43.01			
CAPITAL OUTLAY	1.5000	10,784	0	\$10,784	\$16.18			
SUWANNEE RIVER WATER MGT DIST	0.3840	10,348	0	\$10,348	\$3.97			
LAKE SHORE HOSPITAL AUTHORITY	0.9620	10,348	0	\$10,348	\$9.95			

Total Millage	15.5970	Total Taxes	\$164.11
No	n-Ad Valorem	Assessments	

Levying Authority	Amount			
FIRE ASSESSMENTS	\$219.98			
SOLID WASTE - ANNUAL	\$189.66			
	FIRE ASSESSMENTS			

[Total	Assessments	\$409.64
	Taxes &	Assessments	\$573.75

If Paid By	Amount Due
11/30/2019	\$550.80
12/31/2019	\$556.54
1/31/2020	\$562.27
2/29/2020	\$568.01
3/31/2020	\$573.75

Prior Years Payment History

	Prior Year Taxes Due
NO DELINQUENT TAXES	

Click Here To Pay Now