

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Mobile home

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP#

53719

Date Received

2/28

By

MCJEW

Permit #

Flood Zone

Development Permit

Zoning

Land Use Plan Map Category

Comments

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # _____ ☐ Well-letter OR

☐ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☒ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH 2202-04 ☒ 911 App

☒ Ellisville Water Sys ☒ Assessment owed ☒ Out County ☐ In County ☒ Sub VF Form

already in county

Property ID #

07.5s.16.03487.105

Subdivision

Lot#

▪ New Mobile Home _____ Used Mobile Home ☒ MH Size _____ Year 1981

▪ Applicant Rhonda C. Feezell Phone # (386) 365-3471

▪ Address 519 SW Grassland Way Lake City, FL 32024

▪ Name of Property Owner Rhonda Feezell Phone# 386-365-3471

▪ 911 Address 519 SW Grassland Way Lake City, FL 32024

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Kayla and Steven Pender Phone # 386-288-9169

▪ Address 521 SW Grassland Way Lake City, FL 32024

▪ Relationship to Property Owner daughter

▪ Current Number of Dwellings on Property _____

▪ Lot Size _____ Total Acreage 5 acres

▪ 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 _____

▪ Name of Licensed Dealer/Installer Fernon Jones Phone # 352-318-4711

▪ Installers Address 6795 S.W. 7th Ave Lake Butler, FL 32054

▪ License Number TH1025418 Installation Decal # 84803

Scott Krueger PA
352.376.3090 tigerwolf6@yahoo.com

SITE PLAN CHECKLIST

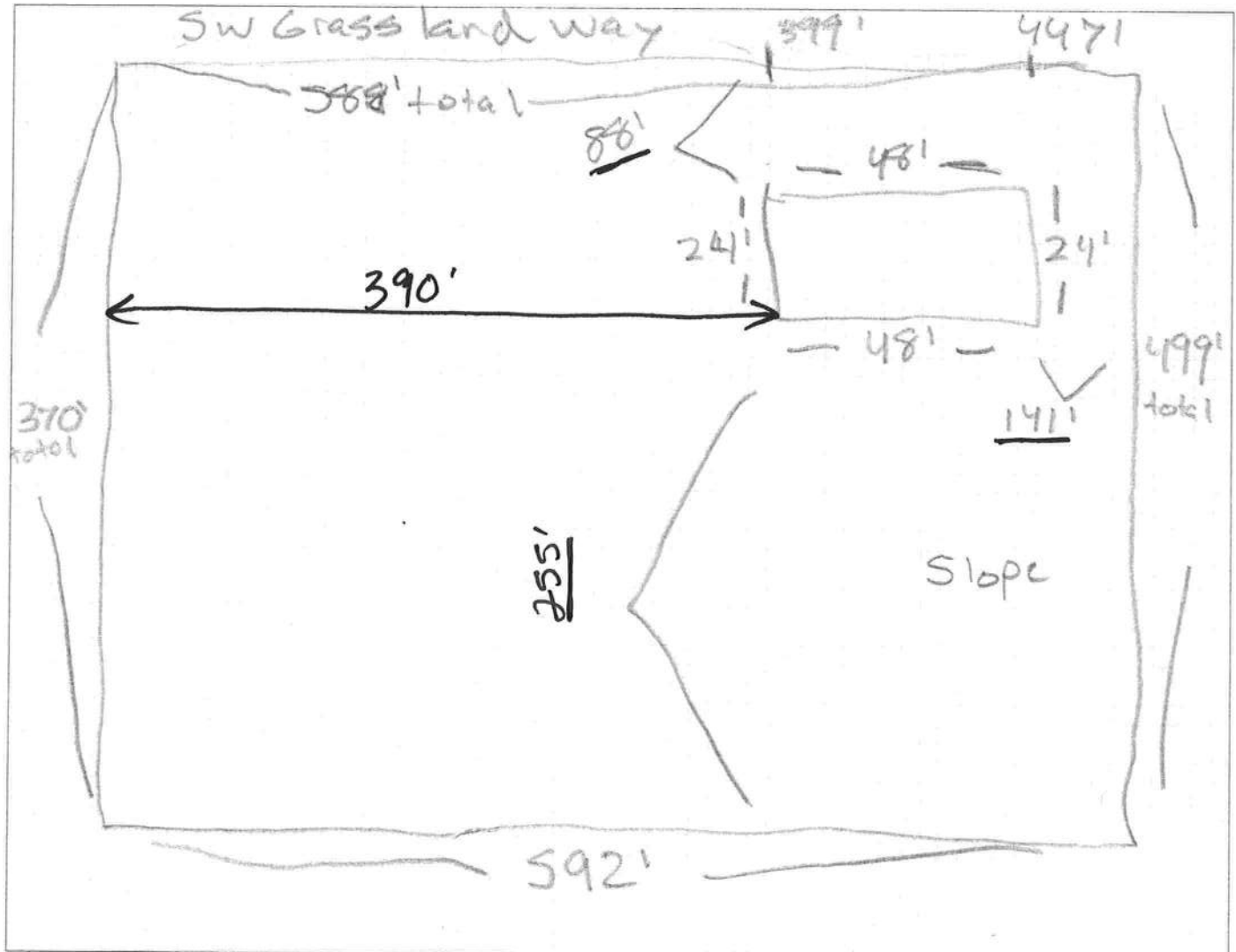
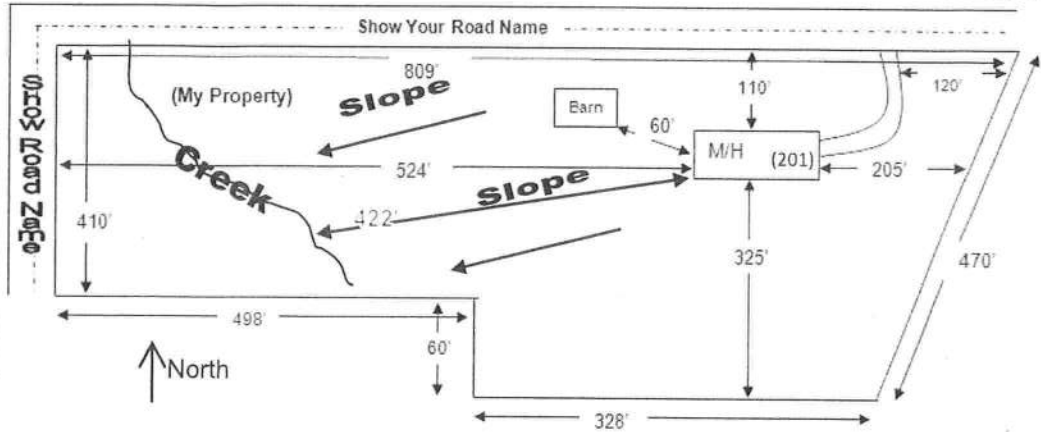
- ___ 1) Property Dimensions
- ___ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ___ 3) Distance from structures to all property lines
- ___ 4) Location and size of easements
- ___ 5) Driveway path and distance at the entrance to the nearest 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

NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Fernon Jones

License # FL10257118

Address of home being installed

521 S.W. Grassland Way
Lake City FL 32024

Manufacturer

Length x width

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.

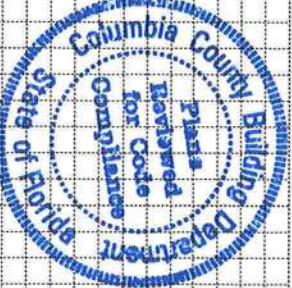
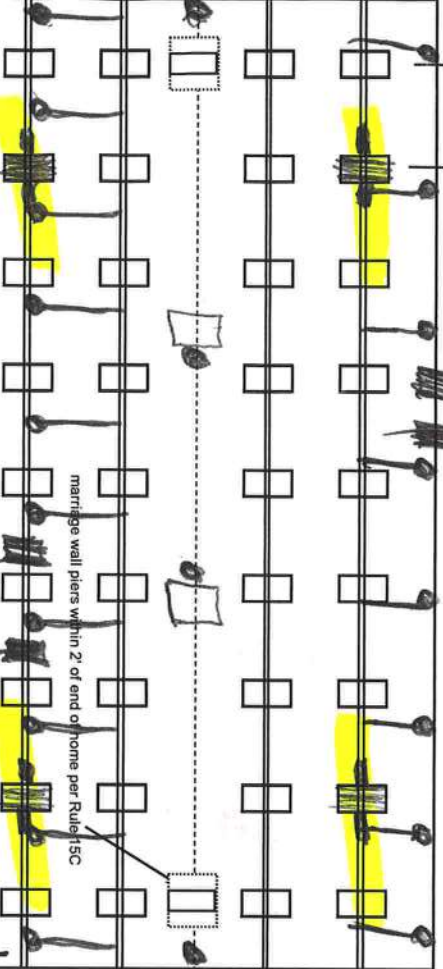
Installer's initials F.J.

Typical pier spacing

2'

lateral

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



Anthony
12' x 23'

02-28-2022

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 # 84803

Triple/Quad ☐

Serial # GDLCE105803939A

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (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

17X25

Perimeter pier pad size

16X6

Other pier pad sizes (required by the mfg.)

23X31 opening

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

12' x 23'

23X31

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer DLIVE TECH
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

Sidewall
Longitudinal Marriage wall
Shearwall
Number 4

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X 1500 X 1500 X 1500

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 1500 X 1500



TORQUE PROBE TEST

The results of the torque probe test is 276 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

F.V.I. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Fernon Jones

Date Tested

1-4-22

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. 17

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15

Site Preparation

Debris and organic material removed _____
Water drainage: Natural Swale Pad ☒ Other _____

Fastening multi wide units

Floor: Type Fastener: 6/16x5 Length: 6" Spacing: 24"
Walls: Type Fastener: 6/16x5 Length: 6" Spacing: 24"
Roof: Type Fastener: 1/2x5 Length: 6" Spacing: 24"
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 rolled foam

Pg. _____

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes boxed Pg. 17
Siding on units is installed to manufacturer's specifications. Yes right
Fireplace chimney installed so as not to allow intrusion of rain water. Yes right

Miscellaneous

Skirting to be installed. Yes boxed No _____
Dryer vent installed outside of skirting. Yes boxed N/A _____
Range downflow vent installed outside of skirting. Yes boxed N/A _____
Drain lines supported at 4 foot intervals. Yes boxed _____
Electrical crossovers protected. Yes boxed _____
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

Fernon Jones

Date

1-4-22

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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 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>Rhonda Feezell</u> Signature <u>Rhonda Feezell</u> License #: <u>owner</u> Phone #: <u>386-365-3471</u> Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C _____ 	Print Name <u>Rhonda Feezell</u> Signature <u>Rhonda Feezell</u> License #: <u>owner</u> Phone #: <u>386-365-3471</u> Qualifier Form Attached <input type="checkbox"/>

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.



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

PERMIT NO. 22-0033
DATE PAID: 1/13/22
FEE PAID: 310.00
RECEIPT #: 1785973

APPLICATION FOR:

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

APPLICANT: Danny and Dottie Chaffins

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING 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: 5 BLOCK: NA SUB: Grassland Acres PLATTED: _____

PROPERTY ID #: 07-5S-16-03487-105 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☒ N

PROPERTY SIZE: 5.07 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y / ☒ N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 457 SW Grasslands Way, Lake City, FL

DIRECTIONS TO PROPERTY: TR onto FL-47S, TR onto Co. Rd. 240,
TR onto SW Grassland Way, prop. on left.

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
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1

SF Residential

3

1848

2

3

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: William D. Bishop II

DATE: 1/7/2022

Permit Application Number 22-0033

PART IV - SITEPLAN

↑N



PART IV SITEPLAN

210'

210'

75'

28'

10'

302
1848 SF

100'

well

92'

DRIVE

SW Grassland Way

Site Plan submitted by: William A. Bishop II MASTER CONTRACTOR
Plan Approved ☒ Not Approved ☐ Date 1-7-22
By [Signature] County Health Department

Page 2 of 4



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

I, Fernon Jones, give this authority for the job address show below
Installer License Holder Name

only, 521 S.W. Grossland Way Lake City, FL 32024, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Rhonda Feezell	Rhonda Feezell	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

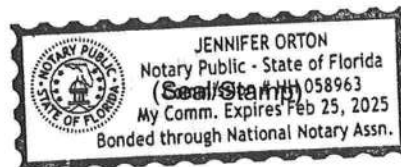
Fernon Jones License Holders Signature (Notarized) 1H1025418 License Number 1-4-22 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Union

The above license holder, whose name is Fernon Jones, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 4 day of Jan, 2022.

Jennifer Orton
NOTARY'S SIGNATURE



IN THE CIRCUIT COURT OF THE THIRD JUDICIAL CIRCUIT,
IN AND FOR COLUMBIA COUNTY, FLORIDA

In Re: Estate of

FILE NUMBER: 2021 CP 000401

Probate Division

DOTTIE D. CHAFFINS,

Deceased.

ORDER OF SUMMARY ADMINISTRATION

On the petition of Rhonda Chaffins Feezell for summary administration of the estate of Dottie D. Chaffins, deceased, and the court finding that the decedent died on August 29, 2021, as a domicile of Columbia County, Florida; that all interested persons have been served proper notice of the petition and hearing or have waived notice thereof; that the material allegations of the petition are true; that the decedent's estate qualifies for summary administration; and that an Order of Summary Administration should be entered, it is

ADJUDGED that:

- 1) The decedent's heir, her relationship to the decedent, and the assets to which she is entitled are as follows:

Name & Address	Relationship	Asset(s), share(s), or amount(s) to be distributed
Rhonda Chaffins Feezell 457 Southwest Grassland Way Lake City, Florida 32024	Daughter	Decedent's Protected Homestead, as more particularly described in the Order Determining Homestead Status of Real Property

- 2) The assets of the decedent shall immediately be distributed to the heir and beneficiary as described above.
- 3) Those to whom specified parts of the decedent's estate are distributed by this order shall be entitled to receive and collect the same, and to maintain actions to enforce the right.
- 4) Debtors of the decedent, those holding property of the decedent, and those with

whom securities or other property of the decedent are registered, are authorized and directed to comply with this order by paying, delivering, or transferring to the beneficiaries specified above the parts of the decedent's estate distributed to them by this order, and the persons so paying, delivering, or transferring shall not be accountable to anyone else for the property.

5) Property of the decedent that is not exempt from claims of creditors and that remains in the hands of those to whom it may be assigned by the order shall continue to be liable for claims against the decedent until barred as provided by law. Any known or reasonably ascertainable creditor who did not receive timely notice of the petition and for whom provision for payment was not made may enforce a claim and, if the creditor prevails, shall be awarded reasonable attorneys' fees as an element of costs against those who joined in the petition.

6) The recipients of the decedent's property under the order of summary administration shall be personally liable for a pro rata share of all lawful claims against the estate of the decedent, but only to the extent of the value of the estate of the decedent actually received by each recipient, exclusive of the property exempt from claims of creditors under the constitution and statutes of Florida.

7) After two years from the death of the decedent, neither the decedent's estate nor those to whom it may be assigned shall be liable for any claim against the decedent, unless proceedings have been taken for the enforcement of the claim.

8) Any heir or devisee of the decedent who was lawfully entitled to share in the estate but who was not included in the order of summary administration and distribution may enforce all rights in appropriate proceedings against those who procured the order and, if successful, shall be awarded reasonable attorneys' fees as an element of costs.

ORDERED on this 17th day of February, 2022.



Digitally signed by
Judge Melissa
Gates Olin
Date: 2022.02.17
10:35:35 -05'00'

Circuit Judge

Estate of Dottie D. Chaffins
File Number: 2021 CP 000401
Order Of Summary Administration

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that copy of the foregoing has been furnished this 17th
day of February, 2022, to:

Person

Scott David Krueger, Esquire

Attorney for Petitioner


Address

Email:

FloridaCourtService@SDKrueger.com

Secondary:

CourtDocumentsBackup@gmail.com


Judicial Assistant

Filing # 144116986 E-Filed 02/17/2022 12:27:47 PM

IN THE CIRCUIT COURT OF THE THIRD JUDICIAL CIRCUIT,
IN AND FOR COLUMBIA COUNTY, FLORIDA

In Re: Estate of

FILE NUMBER: 2021 CP 000401
Probate Division

DOTTIE D. CHAFFINS,
Deceased.

ORDER DETERMINING
HOMESTEAD STATUS OF REAL PROPERTY

On the petition of the petitioner of this estate for an order determining the status of the decedent's homestead, the court makes the following:

FINDINGS OF FACT:

- 1) All interested persons have been served proper notice of this proceeding, or have waived notice thereof, or have consented in advance to the court's determination.
- 2) Decedent, **Dottie D. Chaffins**, died testate on August 29, 2021.
- 3) At the time of death, decedent was a resident of Florida and owned and resided on property located in Columbia County, Florida that meets the size and contiguity requirements of homestead real property as stated in Article X, Section 4, of the Florida Constitution. That property is legally described as:

- see attached Exhibit "A"

and is located at 521 Southwest Grassland Way, Lake City, Florida 32024 (referred to subsequently in this order as "the Property"). The county tax ID number of the Property is 03487-105.

- 4) Decedent's interest in the Property was full fee simple ownership.

Estate of Dottie D. Chaffins
File Number: 2021 CP 000401
Order Determining Homestead Status of Real Property

- 5) Decedent was not survived by a minor child or minor children.
- 6) Decedent was not survived by a spouse.
- 7) Decedent was survived by the following heirs identified in Florida Statutes § 732.103:

Name & Address	Relationship to decedent	Birth year if minor
Rhonda Chaffins Feezell 457 Southwest Grassland Way Lake City, Florida 32024	Daughter	Not applicable
Gary Chaffins 5953 Southwest County Road 791 Lake Butler, Florida 32055	Son	Not applicable

- 8) Decedent's son, **Gary Chaffins**, validly disclaimed his interest in the property as provided under Florida Statutes Section 739.201.

CONCLUSIONS OF LAW:

Based upon the foregoing, in applying the law to the facts, the court concludes that:

- A) The Property constituted the homestead of decedent within the meaning of Article X, Section 4, of the Florida Constitution.
- B) Decedent died intestate and the Property passed pursuant to **Rhonda Chaffins Feezell** as provided by Section 732.401 of the Florida Probate Code.

Estate of Dottie D. Chaffins
File Number: 2021 CP 000401
Order Determining Homestead Status of Real Property

- C) Title to the Property has passed to **Rhonda Chaffins Feezell**, a person to whom the decedent's exemption from claims of creditors has inured under Article X, Section 4(b) of the Florida Constitution, and the Property is thereby protected homestead as defined by Florida Statutes §731.201(33) and not subject to probate or to the claims of decedent's creditors.

It is THEREUPON ORDERED that the Property constituted the exempt homestead of decedent, title to which on decedent's date of death passed, and the constitutional exemption from claims of decedent's creditors inured to those persons identified in paragraph B of CONCLUSIONS OF LAW.

FURTHER ORDERED that all persons are directed to surrender to **Rhonda Chaffins Feezell** all of the Property that may be in the possession or control of any other person, and no persons other than those persons identified in paragraph B of CONCLUSIONS OF LAW shall have further responsibility with respect to the Property.

ORDERED on this 17th day of February, 2022.



Digitally signed by
Judge Melissa
Gates Olin
Date: 2022.02.17
10:35:05 -05'00'

Circuit Judge

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that copy of the foregoing has been furnished this 17th day of February, 2022, to:

Person
Scott David Krueger, Esquire
Attorney for Petitioner

Address
Email: FloridaCourtService@SDKrueger.com
Secondary: CourtDocumentsBackup@gmail.com



2022.02.17
11:30:16 -05'00'

Judicial Assistant

doc as 001 Filed 2/20/2022, 1:10 PM - Order Determining Homestead Status ord.mpd

Estate of Dottie D. Chaffins
File Number: 2021 CP 000401
Order Determining Homestead Status of Real Property

EXHIBIT A

Lot 5, GRASSLAND ACRES, A SUBDIVISION ACCORDING TO PLAT
THEREOF RECORDED IN PLAT BOOK 5, PAGE 71/71A. PUBLIC RECORDS
OF COLUMBIA COUNTY, FLORIDA.

Subject to restrictions as recorded in Official Records Book 587, Page 814.



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 2:43:33 PM**
Address: **521 SW GRASSLAND WAY**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **07-5S-16-03487-105**

REMARKS: This address is a verified address in the county's addressing system.
Verification ID: 3d9b32cc-f779-41a8-8631-cce2f4274415

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

Columbia County
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Union County
OWNERS NAME _____ PHONE _____ CELL _____
INSTALLER Fermon Jones PHONE 352-318-4711 CELL _____
INSTALLERS ADDRESS 6795 S.W. 71st Ave Lake Butler FL 32054

MOBILE HOME INFORMATION

MAKE _____ YEAR _____ SIZE _____ X _____
COLOR Black & White SERIAL No. _____
WIND ZONE II SMOKE DETECTOR _____

INTERIOR:
FLOORS Plywood yes, good
DOORS good
WALLS good
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:
WALLS / SIDING good
WINDOWS good
DOORS good

INSTALLER: APPROVED yes NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Fermon Jones

Installer/Inspector Signature [Signature] License No. 111025418 Date 1/4/22

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.

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 THIS IS DONE.

Code Enforcement Approval Signature Nathaniel Volmer Date 02-28-2022