PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use O	Date Received 3/24/20 By UJ Permit # 39526
Flood Zone	Development Permit Zoning Land Use Plan Map Category
□ Recorded Deed □ Existing well X □ DOT Approval	Elevation Finished Floor River In Floodway or Property Appraiser PO Site Plan EH# 25-0197 Well letter OR Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid Parent Parcel # 911 App Sys Assessment Paid on Property Out County In County Sub VF Form
	03-1N-16-01494-000 Subdivision NA Lot# N/
 New Mobile H 	omeXUsed Mobile HomeMH Size 14 x 56 Year 2020
Applicant	Dale Burd Phone # 386-365-7674
	0619 County Road 137, Lake City, FL, 32024
Name of Prop	erty Owner Marcia Umstead Phone# 386-965-2715
	III NE Emory Carter Glen White Springs fr 32096
	rect power company - <u>FL Power & Light</u> - <u>Clay Electric</u>
	(Circle One) - (Suwannee Valley Electric) - Duke Energy
Name of Owne	er of Mobile Home Same Phone # Same
	3739 US Hwy 441, Lake City, FL, 32025
 Relationship t 	o Property Owner Same
• Current Numb	per of Dwellings on Property 0
Lot Size 1	904 x 3800 Total Acreage 166.77
Do you : Have	Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Rot existing but do not need a Culvert)
Is this Mobile	Home Replacing an Existing Mobile Home Yes
Driving Directi	ions to the Property_441 North, NW Bay Creek St (TL CR 6), TR NW Hopewell
Church Te	rr, TL Emory Carter Glen, Drive on right
	sed Dealer/Installer Robert Sheppard Phone # 386-623-2203
	ress 6355 SE CR 245, Lake City, FL, 32025
License Numb	er <u>IH-1025386</u> Installation Decal # <u>65483</u>

home is being installed These worksheets must be completed and signed by the installer. Submit the originals with the packet. Manufacturer Typical pier spacing I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 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 160000 longitudinar Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) marriage wall press within 2" of end of horse Length x width installer's initials License # **COLUMBIA COUNTY PERMIT WORKSHEET** 50 per Rula 15C capacity bearing Load Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer 226/666 41011 Longitudinal Stabilizing Device (LSD) List all marriage wall openings greater than 4 foot and their pier pad sizes below Other pier pad sizes (required by the mfg.) Perimeter pier pad size interpolated from Rule 15C 1 pier spacing lable Double wide Single wide Home is installed in accordance with Rule 15-C Home installed to the Manufacturer's Installation Manual New Home Manufacturer Triple/Quad I beam pier pad size 1500 ost 1500 ost 2000 ost 2500 ost 3000 ost Opening wall openings 4 foot or greater symbol to show the piers. Draw the approximate locations of marnage wall openings 4 foot or greater. Use this Footer (sq in) size TREDOWN COMPONENTS 16" x 16" PIER PAD SIZES PIER SPACING TABLE FOR USED HOMES P (256) Used Home Serial # Installation Decal # Wind Zone II 18 1/2" x 18 1/2" (342) Pier pad size 16×16 DXX 7×25 LOHSAJIG 34893 20" × 20 (400) Wind Zone III 22" x 22" Marriage wall
Shearwall (484) within 2' of end of home spaced at 5' 4" oc 4 # Sidewall POPULAR PAD SIZES 13 1/4 x 26 1/4 20 x 20 7 3/16 x 25 3/16 17 1/2 x 25 1/2 24 x 24 16 x 18 18 5 x 18 : 16 x 22 5 Pad Size OTHER TIES 26 x 26 7 511 FRAME TIES 24" X 24" ANCHORS (576)* page 1 of 2 26" x 25 (676)676 400 띪 288

Site Preparation

POCKET PENETROMETER TEST	Site Preparation
The packet penetrometer tests are rounded death to or check here to declare 1000 lb. soil without testing.	Debris and organic material removed Water drainage. Natural Swale Pad Other
XX	Fastening multi wide units
POCKET PENETROMETER TESTING METHOD	Walls Type Fastener Length Spacing Walls Type Fastener Length Spacing Roof Type Fastener Length Spacing
 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. 	will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerine.
 Using 500 lb, increments, take the lowest reading and round down to that increment. 	Gas ket (westherproofing requirement) I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriane walls are
x x	a result of a poorty installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.
TORQUE PROBE TEST	Installer's initials
The results of the torque probe test is 290 inch pounds or check here if you are declaring 5 anchors without testing. A test	Pg. Between Floors Yes Between Walls Yes
Note: A state approved lateral arm system is being used and 4 ft.	Bottom of ridgebeam. Yes
anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test	Weatherproofing
reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity. [L3] Installer's initials	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
ALL TESTS MUST BE RERFORMED BY A LICENSED INSTALLER	Miscellaneous Skirling to be installed. Yes: / No.
	tside of skirting nstalled outside at 4 foot interval rotected. Yes
	Other
Electrical Connect electrical conductors between multi-wide units, but not to the main power	
Connect electrical conductors between multi-wide units, but not to the main power	

NOT R

Installer Signature	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	Cities	Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes
	vith this permit worksheet sed on the s and or Rule 15C-1 & 2		NA WA

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

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

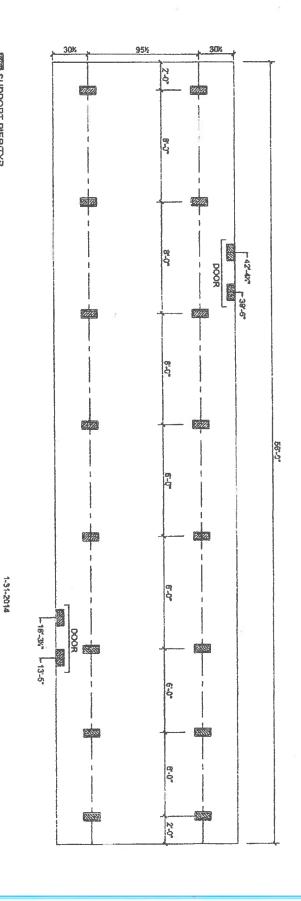
Plumbing

Pg.

300

source. This includes the bonding wire between mult-wide units.

Pg 22



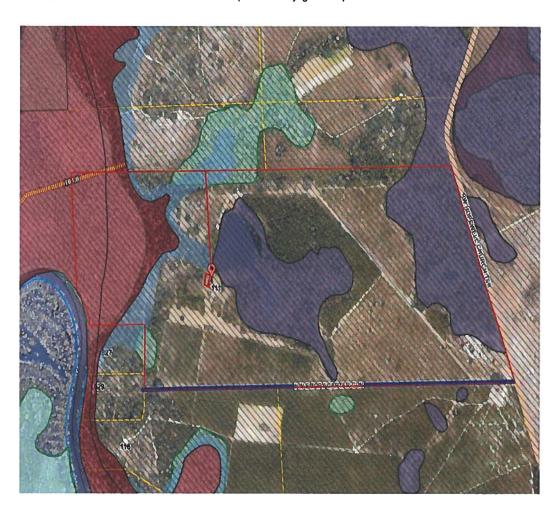
SUPPORT PIER/TYP

<u>FOUNDATION NOTES:</u>
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- POOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.

MODEL: L-4562A - 14 X 60 2-BEDROOM / 2-BATH Live Oak Homes

Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Mar 24 2020 17:59:46 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 03-1N-16-01494-000 Owner: UMSTEAD MARCIA

Subdivision:

Lot:

Acres: 165.474976 Deed Acres: 166.77 Ac

District: District 1 Ronald Williams

Future Land Uses: Agriculture - 1, Environmentally Sensitive Areas -1 Flood Zones: A, AE, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD,

Official Zoning Atlas: A-1, ESA-2

Legend

Parcels

Water Lines

- ✓ Others
- ✓ CANAL / DITCH
- / CREEK
- ✓ STREAM / RIVER

Addresses

2018Aerials

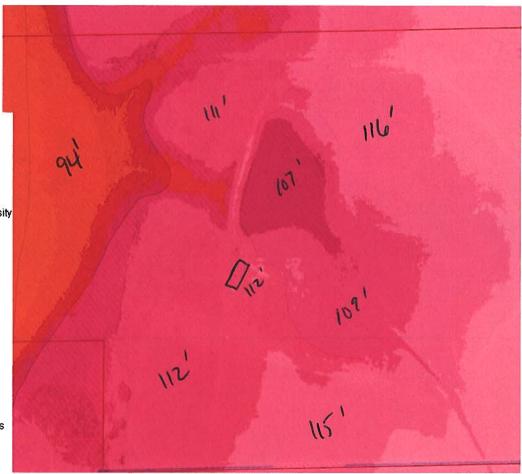
FutureLandUseMap

- ☐ Mixed Use Development
- Light Industrial
- Industrial
- Highway Interchange
- Commercial
- Residential High Density (< 20 d.u. per acre)
- Residential Medium/High Density (< 14 d.u. per acre)
- Residential Medium Density (< 8 d.u. per acre)
- Residential Moderate Density (< 4 d.u. per acre)
- Residential Low Density (< 2 d.u. per acre)
- Residential Very Low Density (<1 d.u. per acre)
- Agriculture 3
- (< 1 d.u. per 5 acres)
- Agriculture 2
- (< 1 d.u. per 10 acres)
- Agriculture 1
- " (< 1 d.u. per 20 acres)
- Environmentally Sensitive Areas (< 1 d.u. per 10 acres)
- D Public
- Recreation
- Conservation

LidarElevations

Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Mar 25 2020 12:45:42 GMT-0400 (Eastern Daylight Time)



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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:

3/12/2020 7:28:37 PM

Address:

111 NW EMORY CARTER Gln

City:

WHITE SPRINGS

State:

FL

Zip Code

32096

Parcel ID

01494-000

REMARKS: Address for proposed structure on 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

Parcel:	03-1N-16-01494-000			
Owner & Pi	roperty Info	Result	4 of 7	
Owner	UMSTEAD MARCIA P O BOX 2405 LAKE CITY, FL 32056			
Site				
Description*	COMM AT SW CO SEC LINE 2220.98 FT INTO SEC 04-1 581.31 FT TO THE ALONG SAID RIVE THEN RUN NORT SEC LINE, CONT	FT TO POB, RU N-16, N 548.59 F RIVERS EDGE, ERS EDGE APPF H 959.89 FT, E 2	N W 1375.76 T, WEST NWERLY XX 365 FT, D15.38 FT TO	
Area	166.77 AC	S/T/R	03-1N-16	
Use Code**	TIMBERLAND (005500)	Tax District	3	

[&]quot;The <u>Description</u> above is not to be used as the Legal Description for this

parcel in any legal transaction.

"The <u>Use Code</u> is a FL Dept of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property &	Assessment \	alues	
2019 Cert	ified Values	2020 Wor	king Values
Mkt Land (0)	\$0	Mkt Land (0)	\$0
Ag Land (3)	\$50,368	Ag Land (3)	\$50,368
Building (0)	\$0	Building (0)	\$0
XFOB (1)	\$2,000	XFOB (1)	\$2,000
Just	\$182,111	Just	\$182,111
Class	\$52,368	Class	\$52,368
Appraised	\$52,368	Appraised	\$52,368
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$52,368	Assessed	\$52,368
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$52,368 city:\$52,368 other:\$52,368 school:\$52,368		county:\$52,368 city:\$52,368 other:\$52,368 school:\$52,368

STATE OF FLORIDA DEPARTMENT OF HEALTH

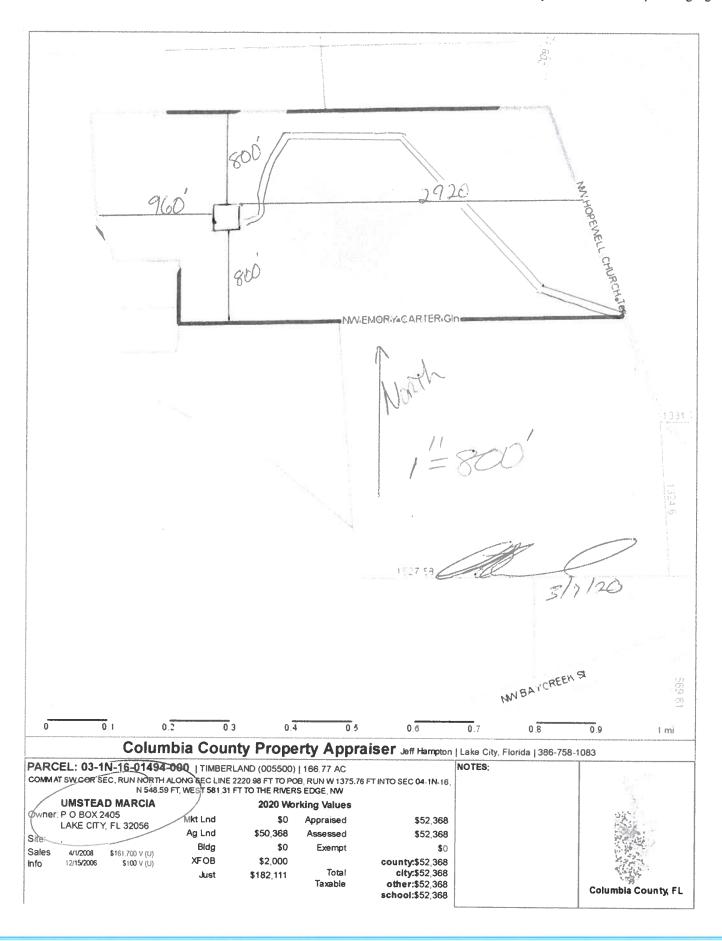
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number_____

UYNST	MADPART II - SITEPLAN) / (-)
Scale: 1 inch = 40 feet.	33' WELL'SO 72'SO	
Notes:	UE OF 166.7 ACMES SEE ATT	

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)



Suwannee River Water Management District Effective Flood Information Report



encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (http://www.msc.fema.gov) for information on available products associated with this FIRM panel online (http://www.srvmdfloodreport.com). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available Available products from the Map Service Center may include previously issued Letters of Map Change. The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The

Letter of Map Change process for effective maps. Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the

Columbia Flood Hazard Areas Status

Flood Zone(s): AE FW, X-SHADED

Note: Elevations are based on NAVD88



SIGNATURE:

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

PERMIT NO.	20-0197
DATE PAID:	3/10/20
FEE PAID:	313 55
RECEIPT #:\	472 Ve17

APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: [/] New System [] Existing System [] Holding Tank [] Innovative Repair Abandonment [] Temporary MAILING ADDRESS: 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: BLOCK: SUBDIVISION: PLATTED: . PROPERTY ID #: 03-10-16-01494-000zoning: 5/F I/M or equivalent: [Y /N] PROPERTY SIZE: \\do. \ACRES WATER SUPPLY: [\sqrt{]} PRIVATE PUBLIC []<=2000GPD []>2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N) DISTANCE TO SEWER: () FT PROPERTY ADDRESS: 22.7 mi. TL on to NW Bay Creekst DIRECTIONS TO PROPERTY: 441 W on to Hopewell Church Terrace to Site on L BUILDING INFORMATION [| RESIDENTIAL [] COMMERCIAL Unit Type of Building Commercial/Institutional System Design No. of Establishment No Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC 1 2 3 ۵] Floor/Equipment Drains) Other (Specify)

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

Page 1 of 4

____ DATE: (3)

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

			Permit Application	n Number	20 -0197
	AY	PART II - SITEF	PLAN		• • • • •
Scale: 1 inch = 40 feet.		5-1		Re L	
	Elev. 110.4			·	
2009-2020					
	at e		ye ^t		
Notes	· 11. 1		Labe		8 4
Bottom of D Elev. 107.9					
Site Plan submitted by:	- Committee - Comm		8.2%		CONTRACTOR
Plan Approved X		Not Approved_	7 1 1	Da	ite 3/23/20
By Della	<		(a lumbe	1	ty Health Department
ALL CHANGES DH 4015, 03/09 (Obsoletes previous edition (Stock Number: 5744-002-4015-6)	MUST BE APP	ROVED BY TH	E COUNTY HEAL	TH DEPART	MENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER	CONTRACTOR	Robert Sheppard	PH()NL 386-623-2203
		THIS FORM MUST BE SUBMITTED PRI	OR TO THE ISSUANCE OF A PERN	NIT
			Marci	a Umstead
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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	Glenn Whittington	Signature	

Qualifier Form Attached

Qualifier Form Attached

Phone #

Signature

Phone #: __

800-259-3470

Qualifier Forms cannot be submitted for any Specialty License.

EC 13002957

CAC1817658

Ronald Bonds Sr.

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

MECHANICAL/

Print Name

License #



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

1. CARNULUTITINGTON	(license holder name), licensed qualifier
for CUNITINGTON ELECTICS	(incense noider name), licensed qualifier (company name), do certify that
the below referenced person(s) listed on this formholder, or is/are employed by me directly or through officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcontact.	ugh an employee leasing arrangement; or, is an n Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DA & SUR	1
2. Lexchy tonal	2. (200 65 1)
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complete Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous unauthorized persons to use your name and/or licensed Qualifiers Signature (Notafized)	iance with all Florida Statutes, Codes, and ad County Licensing Boards have the power and ins committed by him/her, his/her agents, isibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ng of the changes and submit a new letter of ous lists. Failure to do so may allow
NOTARY INFORMATION: STATE OF:COUNTY OF:	Calvulin
The above license holder, whose name is	me or has produced identification this day of day of 20 202020 Seal/Starkely R BISHOP Notary Public - State of Florida Commission & ES 242000



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

111001				
1 Konsled E Bond SE	(license holder name), licensed qualifier			
for STIPE CREST ENTERPRISES	The (company name), do certify that			
the below referenced person(s) listed on this for	m is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and			
Printed Name of Person Authorized	Signature of Authorized Person			
1. DALE BURD	1.6			
2 Rock, Ford	2 (be/3) 7			
3. Kally Bishop	3 Kelly Bishop			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible under my license and fully responsible for compl. Local Ordinances. I understand that the State an authority to discipline a license holder for violatio officers, or employees and that I have full responsand ordinances inherent in the privilege granted in the privilege.	iance with all Florida Statutes, Codes, and d County Licensing Boards have the power and ns committed by him/her, his/her agents, sibility for compliance with all statutes, codes by issuance of such permits.			
If at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous authorized persons to use your name and/or live.	ng of the changes and submit a new letter of ous lists. Failure to do so may allow			
Licensed Qualifiers Signature (Notarized) License Number License Number License Number Date				
NOTARY INFORMATION COUNTY OF COUNTY OF	Bay			
The above license holder, whose name is Rompersonally appeared before me and is known by (type of I.D.) on the	me or has produced identification his 16th day of FEB 20 16			
Stauv an lappe'ns	(Seal/Stamp)			

Notery Public State of Florida Stacey Ann Hopluns
My Commission FF 188807
Expires 11/08/2018