PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only (Revised 7-1-15) Zoning Official Building Official
Poto Pocoived By 41 1) Permit#
Flood Zone X Development Permit Zoning 4-3 Land Use Plan Map Category 49
comments Legal lot of record, replacing existing home
Ci Soladia Marcel
Flavation Finished Floor River In Floodway
Recorded Deed or Property Appraiser PO M Site Plan (VEH # 19-0116 Well letter OR
Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
STUD MH
□ DOT Approval □ Parent Parcel # □ STOF-INT □ S
Property ID # 11-35-15.00154-000 Subdivision N/A Lot#
Property ID # 11-35-15.00154-000 Subdivision 32/5//02
New Mobile Home Used Mobile Home MH Size 32/54/58 Year 2018
- Applicant Pam BARNEY Phone # 386 - 209- 0906
Address 466 SW DEP. J. DAVIS LN. , LAKE City, FL
Address
Name of Property Owner ROBNET & ANNE DAWSON Phone# 386 - 867-1761
911 Address 356 N.W. UNION PARK RD WELLBORN FL 32094
Circle the correct power company - FL Power & Light - Clay Electric Duke Energy
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home Robser & ANNE DAWSON Phone # 386-867-1761
Address 356 N.W. UNION PARK RD. WELLBORN, FL 32094
Relationship to Property Owner
Current Number of Dwellings on Property
Lot Size 210' x 210' Total Acreage 1
Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one) (Putting in a Culvert) (Not existing but do not need a Culvert)
(Currently using) (Blue Road Sign)
Is this Mobile Home Replacing an Existing Mobile Home
THEN. 79 MILES TO 356 N.W. UNION PARK, RD on light
Name of Licensed Dealer/Installer Paul E. ALGRIGHT Phone # 386-365-5314
Installers Address 199 S.W. THOMAS TERR, LAKE CITY, TI 36829
Installation Decal # 410 03
License Number
8 22-spoke w/ Paul. Need Est & Sendt. Mg
Name of Licensed Dealer/Installer PAUL E. ALBRIGHT Phone # 386-365-5314 Installers Address 199 5.W. THOMAS TERR. LAKE CITY, F2 32024 License Number 1H-1025239 Installation Decal # 61023 22-904 W Paul. Need GA Senath. Mg 375:00

A&B

PERMIT NUMBER Note: The proposition of the property of the sidewall ties exceed 5 ft 4 in. Installer Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) PERMIT WORKSHEET Normalizer Permit Workship Plan It home is a single wide fill out one half of the blocking plan It home is a single wide fill out one half of the blocking plan 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 Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Topologist Show locations of Longitudinal and Lateral Systems 1000 0sf 8 1000 0sf 9 10	Used Home	page 1 of 2 Zone III A A 11 9 20 5 A A 17 9 20 5 MES MES DAMES DAMES Pad Size 16 16 x 18
Triple/Q s is a single wide fill out one half of the blocking plan Is a triple or quad wide sketch in remainder of home Roof Systems cannot be used on any home (new or used) Installer's initials Load bearing capacity Show locations of Longitudinal and Lateral Systems 2000 to 3000	Typical Hinged PIER SPACING TABLE FOR USED H 16" x 16"	11920562 A 24" × 24" 26" × 26" (576)* (676) 8
* interpolated from R	Rule 15C-1 pier spacing table. PIER PAD SIZES Size Ad Foot or greater. Use this oshow the piers. Wall openings greater than 4 foot disizes below. Pier pad size Ad Sizes below. Pier pad size Ad Sizes below. Down Components Down Components	POPULAR PAD SIZES Pad Size Sq In 16 x 16 256 16 x 18 288 18.5 x 18.5 342 16 x 22.5 360 17 x 22 374 400 17 3/16 x 25 3/16 441 348 20 x 20 400 17 3/16 x 25 1/2 446 24 x 24 17 1/2 x 25 1/2 446 26 x 26 676 676 676 676 676 676 676 676 676

x 150%

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Connect all potable water supply piping to an existing water meter, water tap, or other Connect all sewer drains to an existing sewer tap or septic tank. Pg. Connect_electrical conductors between multi-wide units, but not to the main power showing 275 inch pounds or less will require 5 foot anchors The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil withou here if you are declaring 5' anchors without testing The results of the torque probe test is This includes the bonding wire between mult-wide units. ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER 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 being capacity Test the perimeter of the home at 6 locations. **POCKET PENETROMETER TESTING METHOD** Using 500 lb. increments, take the lowest Take the reading at the depth of the footer. reading and round down to that increment POCKET PENETROMETER TEST TORQUE PROBE TEST Electrical × 1500 ×1500 without testing Installer's initials inch pounds or check Pg. A test × 1500 Sd a result of a poorly installed or no gasket being installed. I understand a strip Electrical crossovers protected. Yes Range downflow vent installed outside of skirting. Skirting to be installed. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Siding on units is installed to manufacturer's specifications. Yes of tape will not serve as a gasket homes and that condensation, mold, meldew and buckled marriage walls are Walls: Roof: Floor Debris and organic material removed Water drainage: Natural Swale Dryer vent installed outside of skirting. Yes The bottomboard will be repaired and/or taped. Yes I understand a properly installed gasket is a requirement of all new and used Other Drain lines supported at 4 foot intervals. Type gasket Installer verifies all information given with this permit worksheet Installer Signature manufacturer's installation instructions and of Rule 15C-1 & 2 Type Fastener: (522) Length: (2) Spacing: (2) CT Type Fastener: (2) Length: (3) Spacing: (2) CT Type Fastener: (2) Length: (3) Spacing: (2) CT Spacing: (2) CT Spacing: (3) CT Spacing: (3) CT Spacing: (4) CT Type Fastener: Lass Type Fastener: 522 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. is accurate and true based on the um baidness Gasket (weatherproofing requirement) Fastening multi wide units Weatherproofing Site Preparation Miscellaneous Installer's initials Installed: 8 Bottom of ridgebeam Yes Between Walls Yes Between Floors Yes Length: 6 Pag Yes NA Spacing: Spacing: Spacing: Other Pg. Z よびよ Date 264

Yes NA

source.

Date Tested

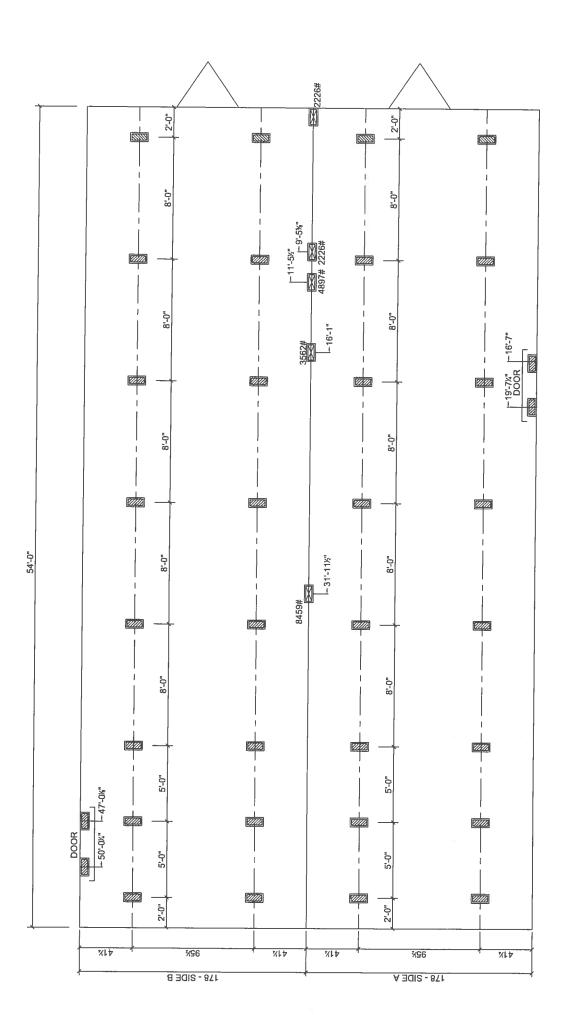
Installer Name

Note:

00 El X

independent water supply systems.

. Pg.



9-13-2016

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.

MODEL: M-3543A - 32 X 4-BEDROOM / 2-BATH Live Oak Homes

B DUCT CROSSOVER
 SEWER DROPS
 C RETURN AIR (W/OPT. HEAT PUMP OH DUCT)
 SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)

M-3543A

(A) MAIN ELECTRICAL
(B) ELECTRICAL CROSSOVER
(C) WATER INLET
(D) WATER CROSSOVER (IF ANY)
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ANY)

GAS CROSSOVER (IF ANY)

Legend

LidarElevations

Columbia County, FLA - Building & Zoning Property Map

Printed: Mon Aug 12 2019 09:57:15 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 11-3S-15-00154-000

Owner: DAWSON ROBERT W JR & ANNE M

Subdivision:

Lot:

Acres: 1.01247811 Deed Acres: 1.01 Ac

District: District 3 Bucky Nash Future Land Uses: Agriculture - 3

Flood Zones:

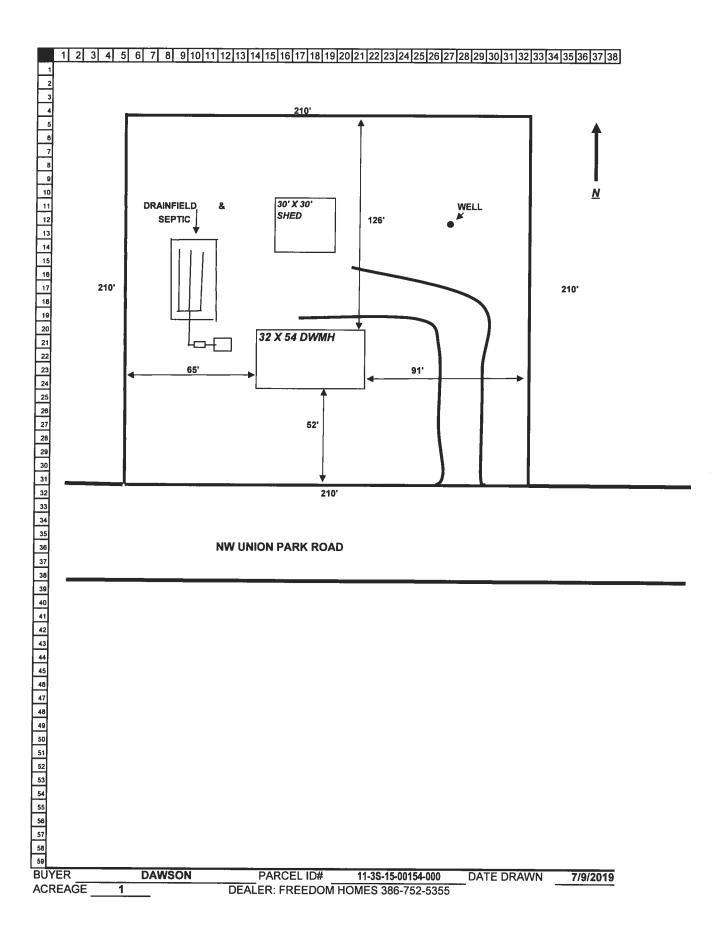
Official Zoning Atlas: A-3

Roads
Roads
others
Dirt
Interstate
Main
Other
Paved
Private
Parcels

2018Aerials

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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:

7/12/2019 3:29:56 PM

Address:

356 NW UNION PARK Rd

City:

WELLBORN

State:

FL

Zip Code

32094

Parcel ID

00154-000

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 Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 11-3S-15-00154-000 HX H3 | MOBILE HOM (000200) | 1 AC

\$10,000

1 (U)

BEG SW COR OF SW1/4 OF NW1/4, RUN N 210 FT, E 210 FT, S 210 FT, W 210 FT TO POB. ORB 442-354, 801-1916, 813-910 836-836, 888-930, QC 1293-1426

İ		DAWSON ROB	ERT W JR &	ANNE M	
ı	Ow ner:	356 NW UNION I	PARK RD		
ı		WELLBORN, FL.	32094		
-	Site:	356 UNION PAR	K RD, WELLBO	RN	
I	Sales	4/28/2015	\$100	I (U)	
	Info	9/13/1999	\$24,500	I (Q)	
ı	HHO				

3/17/1997

S	titied Value	018 Cerl	2
\$26,325	Appraised	\$14,691	Mkt Lnd
\$23,877	Assessed	\$0	Ag Lnd
\$23,877	Exempt	\$10,044	Bldg
county:\$0		\$1,590	XFOB
city:\$0	Total	\$26,325	Just
other:\$0	Taxable		
school:\$0			



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



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, PAUL E ALBRIGHT	give this authority	for the job address show below
only, TBD WHITNE	Y GLENN LAKE CITY, FZ Job Address	32055, and I do certify that
the below referenced person(s)	listed on this form is/are under n	ny direct supervision and control
and is/are authorized to purcha	se permits, call for inspections a	nd sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
PAUL A. BARNEY	Thur Emily	Agent Officer Property Owner
PAUL A. BARNEY	Vanda Lawey	Agent Officer Property Owner
		Agent Officer Property Owner
	I am responsible for all permits responsible for compliance with	
	nsing Board has the power and a by him/her or by his/her authorize	
document and that I have full re-		
License Holders Signature (Note	14102	15239 2-25-2019
NOTARY INFORMATION:	,	= 3.1.3
STATE OF: Florida	COUNTY OF: SUWANNEE	
The above license holder, whose personally appeared before me (type of I.D.)	ename is Paul E. A	LBRIGHT uced identification
Vand a Danney NOTARY'S SIGNATURE	A STEOFE OF THE	PAUL A BARNEY MY COMMISSION # GG 040180 EXPIRES: October 19, 2020 EXPIRES: Notary Services

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

*1.	000		1)	ILTERNATION -	
APPLICATION NUMBER	1908-34	CONTRACTOR _	Tayı	Albeight	PHONE 386. 265. 531C

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 1074	Print Name WAFTING TON ELECTRIC Signature Wolm Whittington License #: £C 1300 2 957 Phone #: 386 972 1700/ Qualifier Form Attached
MECHANICAL/ A/C LOS9	Print Name STYLE CREST Signature Road F. Brush S. K. License #: CAC 1817 658 Phone #: 850 - 769 - 1453 Qualifier Form Attached

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			0
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

When recorded, mail to:	
Name: Robert Dawson	
Address: 356 NW Union Park RJ	
City/State/Zip Code: Wellborn, F2. 32094	nst:201512007474 Date:4/28/2015 Time:9:56 AM Doc Stamp-Deed:0.70DC,P.DeWitt Cason,Columbia County Page 1 of 2 8:1293 P:1426
	SPACE ABOVE THIS LINE FOR RECORDER'S USE
QUITCL	AIM DEED
	0
KNOW ALL MEN BY THESE PRESENTS:	
That I(we), KOBERT W DAWSEN	SK
all rights, title and interest in that certain real property of Flocish, and legally described.	situated in the County of <u>lowers</u> , St
, and legally descr	ibed as follows:
, and legany descr	ibed as follows:
	the SW 1/4 of NW 1/4 of Section Cast, run North 210 feet; East 210 feet to a point of beginning, 4 of NW 1/4 of Section 11,
Begin at the Southwest corner of 11, Township 3 South, Range 15 E 210 feet; South 210 feet; West 2 all lying and being in the SW 1/	the SW 1/4 of NW 1/4 of Section Cast, run North 210 feet; East 210 feet to a point of beginning, 24 of NW 1/4 of Section 11, Columbia County, Florida.
Begin at the Southwest corner of 11, Township 3 South, Range 15 E 210 feet; South 210 feet; West 2 all lying and being in the SW 1/Township 3 South, Range 15 East, TOGETHER WITH: A 1972 COVE Mobil	the SW 1/4 of NW 1/4 of Section Cast, run North 210 feet; East 210 feet to a point of beginning, 24 of NW 1/4 of Section 11, Columbia County, Florida.
Begin at the Southwest corner of 11, Township 3 South, Range 15 E 210 feet; South 210 feet; West 2 all lying and being in the SW 1/Township 3 South, Range 15 East, TOGETHER WITH: A 1972 COVE Mobil and ID#: 2460CE3LDF3311B, locate	the SW 1/4 of NW 1/4 of Section Cast, run North 210 feet; East 210 feet to a point of beginning, 24 of NW 1/4 of Section 11, Columbia County, Florida.

		1	
Printed Name of Releasor	<u>s</u> k	Signature of Releasor	S
Printed Name of Ce-Releasor		Signature of Co-Release	or
Signature of Witness No. 1		Signature of Witness No	. 2
Printed Name of Witness No. 1	ENCY !	Printed Name of Witness	No. 2
2185W HOUNG Place Address		1468 SW Man	Blud Stelos
Lake . fr F	132025	Lake City FL 300, City/State/Zip Code	9 \$
	Acknowledgr	nent	
State of Florida County of Columbia) ss.		
The foregoing instrument was acknowledge of, 20_1 5, 20_1 5	ged before me, the un	Dawson Sr	
vidual(s) who executed the foreoing instrumen	t and acknowledged to	he same to be his her)(their) free act a	
My Commission Expires: ①なー20/7		Ongela Coy Notary Public Angel	
If acknowledged in the State of Florida, complete below: (check one) [] Personally Known. M Produced Type of Identification produced: FL Driver License		ANGELA COX MY COMMISSION & FF 033049 EXPIRES: August 3, 2017 Bonded Thru Notary Public Underwriters	
		2 V	

Inst. Number: 201512007474 Book: 1293 Page: 1427 Date: 4/28/2015 Time: 9:56:22 AM Page 2 of 2 Doc Deed: 0.70 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

Order #: 3849	Label #: 61023	Manufacturer: Live OAL	(Check Size of Home)
lomeowner: Dr	2W50V	Year Model: 2018	Single
Address:	56 NW UR	The special region of the state of the special region regio	Double
lity/State/Zip: ω	lellborn 7	Type Longitudinal System:	HUD Label #:
hone#:		Type Lateral Arm System:	Soil Bearing / PSF:
ate Installed:	- Value of the second s	New Home: Used Home:	Torque Probe / in-lbs: 18
stalled Wind Zone:		Data Plate Wind Zone:	
ote:	Marketon and the second of the		Permit #:

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL 61023

LABEL#

DATE OF INSTALLATION

PAULE. ALBRIGHT

NAME

IH/1025239/1

3849

LICENSE # ORDER # CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-37/6 ----- PART II - SITEPLAN -Scale: Each block represents 10 feet and 1 inch = 40 feet. Bed Too Schind 356 NEW UNION PACK Rd Notes: Site Plan submitted by: Robert w Jand Plan Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

__ County Health Department



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

	10 N-711
PERMIT NO.	1154118
DATE PAID:	112414
FEE PAID:	D35.36'
RECEIPT #:	- La garage of C

APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] Applicant: RODER DOWSON TELEPHONE: 386 155 MAILING ADDRESS: MAI
MATERING ADDRESS: 171 OF VICIN NOTE IN THE STATE OF THE S
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTE 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: — NA PLATTED: 17
PROPERTY ID #: $1-3S-15-0054-000$ ZONING: MH I/M OR EQUIVALENT: [Y (N)]
PROPERTY SIZE: 1 ACRES WATER SUPPLY: [V] PRIVATE PUBLIC []<=2000GPD []>2000GP
PROPERTY ADDRESS: 350 NW WION PARK RD, WEILOVO
Follow to HW UNION PACK RD TL FOLLOW UNION PACK
to site on left
BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 M Home 3 1602
3
4
[] Floor/Equipment Drains [] Other (Specify) SIGNATURE:
DATE. OIDIT

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