

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

*Birsa*

**For Office Use Only**

(Revised 7-1-15)

Zoning Official \_\_\_\_\_

Building Official \_\_\_\_\_

AP# 58887

Date Received \_\_\_\_\_

By \_\_\_\_\_

Permit # 47309

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 \_\_\_\_\_ ☐ 911 App

☐ Ellisville Water Sys ☐ Assessment \_\_\_\_\_ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 34-45-16-03274-000 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

▪ New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 16x76 Year 2022

▪ Applicant Perry Pollard Phone # 920-495-7534

▪ Address 595<sup>SW</sup> Mauldin AVE Lake City FL 32024

▪ Name of Property Owner Perry Pollard / Elisabetha Birsa Phone# \_\_\_\_\_

▪ 911 Address 595<sup>SW</sup> Mauldin AVE Lake City FL

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

▪ Name of Owner of Mobile Home Elisabetha Birsa Phone # \_\_\_\_\_

▪ Address 7200 SW 8th Ave Apt 137 Gainesville FL 32607

▪ Relationship to Property Owner Fiance / Joint owner

▪ Current Number of Dwellings on Property 0

▪ Lot Size 2 acres Total Acreage \_\_\_\_\_

▪ 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 there was one at one time

▪ Driving Directions to the Property \_\_\_\_\_

Email Address for Applicant: PollardPerry432@gmail.com

▪ Name of Licensed Dealer/Installer Dale Houston Phone # 386-623-6522

▪ Installers Address 136 SW Barris Gln. Lake City, FL 32024

▪ License Number 1H1133271 Installation Decal # 90848


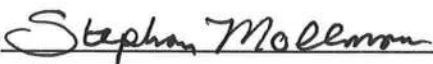
**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

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.***

<b>ELECTRICAL</b>	Print Name <u>Marcus Matthews</u> License #: <u>EC13005459</u>  Qualifier Form Attached <input type="checkbox"/>	Signature <u></u> Phone #: <u>386-344-2029</u>
<b>MECHANICAL/ A/C _____</b>	Print Name <u>Stephan Mollman</u> License #: <u>CAC1819696</u>  Qualifier Form Attached <input type="checkbox"/>	Signature <u></u> Phone #: <u>352-339-6640</u>

**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  
COUNTY OF COLUMBIA

SPECIAL TEMPORARY USE  
LAND OWNER AFFIDAVIT

This is to certify that I, (We), Perry Pollard,  
(State Name as it appears on the Property Appraisers Office website)  
as the owner of the below described property:

Property tax Parcel ID number 34-45-16-03274-000 (16185)

Subdivision (Name, lot, Block, Phase) OAK Forest Lot # 1

Perry Pollard Give my permission for  
Elisabetta Birsa to place a Mobile Home on this land.

☐ This is to allow a 2<sup>nd</sup> Mobile Home on the above listed property for a family member  
through Columbia County's Special Temporary Use provision.

Family Members Name \_\_\_\_\_

Relationship to Lessee \_\_\_\_\_

I (We) understand that the named person(s) above will be allowed to receive a building  
permit on the property number I (we) have listed above and this could result in an  
assessment for solid waste and fire protection services levied on this property.

Perry Pollard  
Owner Signature

12-31-22  
Date

Elisabetta Birsa  
Owner Signature

12/31/22  
Date

Sworn to and subscribed before me this 31<sup>st</sup> day of December, 2022, by

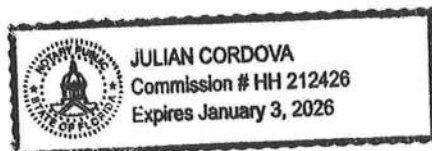
☒ physical presence or \_\_\_\_\_ online notarization and this (these) person(s) are

personally known to me \_\_\_\_\_ or produced ID X FL DL P463664711690  
FL DL B620200685120

Julian Cordova  
Notary Public Signature

Julian Cordova  
Notary Printed Name

Notary Stamp/



Revised 5/21/2021



STATE OF FLORIDA  
COUNTY OF COLUMBIA

SPECIAL TEMPORARY USE  
LAND OWNER AFFIDAVIT

This is to certify that I, (We), ELISABETTA BIRSA,  
(State Name as it appears on the Property Appraisers Office website)  
as the owner of the below described property:

Property tax Parcel ID number 34-45-16-03274-000 (16185)

Subdivision (Name, lot, Block, Phase) OAK Forest Lot #1

ELISABETTA BIRSA Give my permission for  
PERRY POLLARI to place a Mobile Home on this land.

☐ This is to allow a 2<sup>nd</sup> Mobile Home on the above listed property for a family member  
through Columbia County's Special Temporary Use provision.

Family Members Name \_\_\_\_\_

Relationship to Lessee \_\_\_\_\_

I (We) understand that the named person(s) above will be allowed to receive a building  
permit on the property number I (we) have listed above and this could result in an  
assessment for solid waste and fire protection services levied on this property.

[Signature]  
Owner Signature

12/31/22  
Date

[Signature]  
Owner Signature

12-31-22  
Date

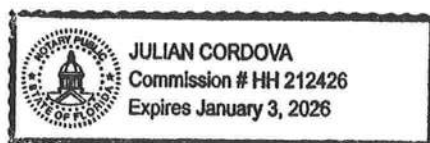
Sworn to and subscribed before me this 31<sup>st</sup> day of December, 2022, by

X physical presence or \_\_\_\_\_ online notarization and this (these) person(s) are  
personally known to me \_\_\_\_\_ or produced ID X FL DL B463664 711690  
FL DL B62020068 5120

[Signature]  
Notary Public Signature

Julian Cordova  
Notary Printed Name

Notary Stamp/



Revised 5/21/2021



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, Dale Houston, give this authority for the job address show below  
Installer License Holder Name

only, Maudlin Rd., 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)
<u>Perry Pollard</u>	<u>Perry Pollard</u>	<input checked="" 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.

Dale Houston 111133271 12/19/22  
License Holders Signature (Notarized) License Number Date

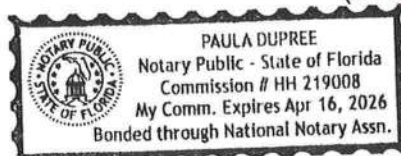
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

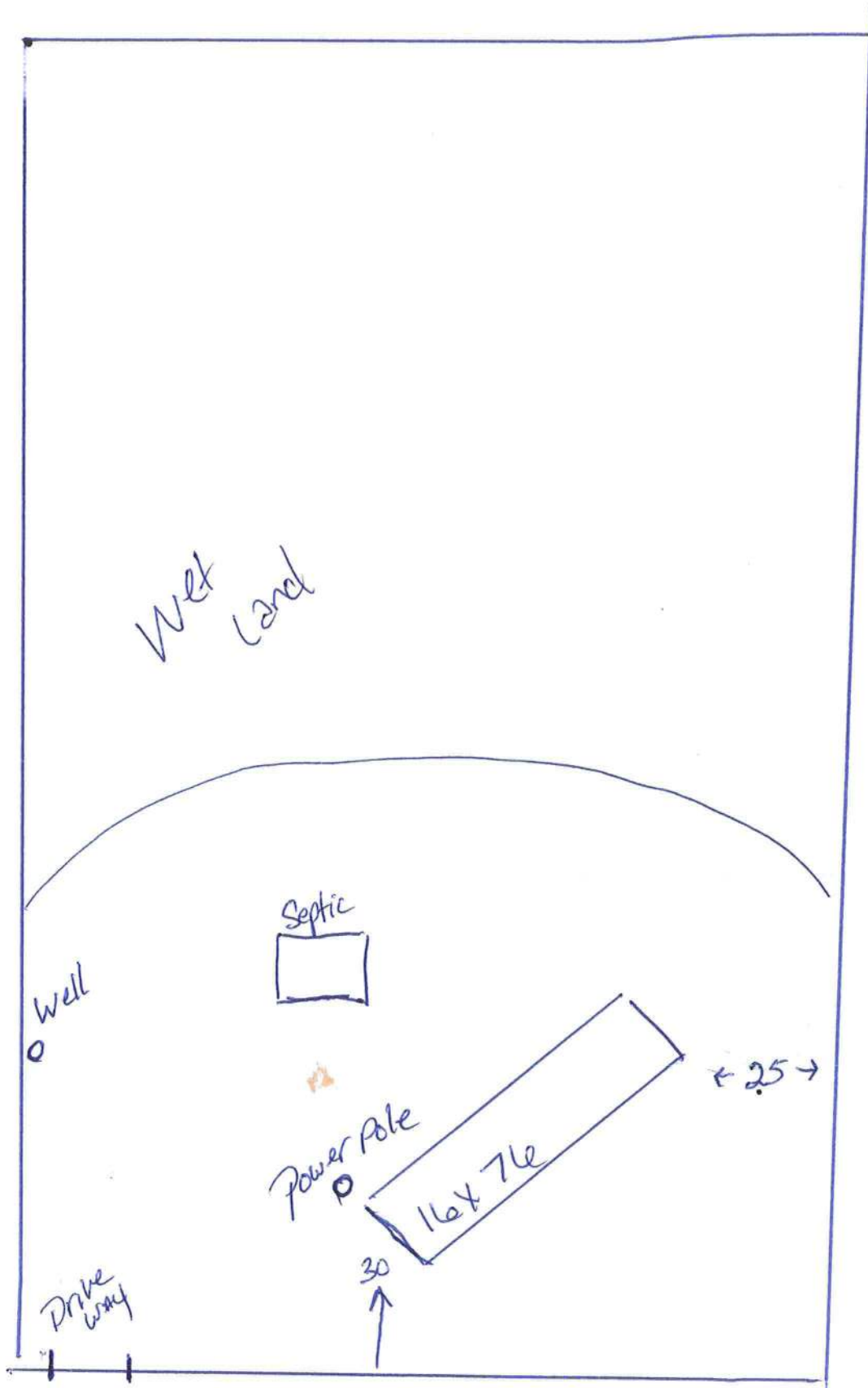
The above license holder, whose name is Dale Houston,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) Personally Known on this 19<sup>th</sup> day of December, 2022.

Paula Dupree  
NOTARY'S SIGNATURE

(Seal/Stamp)



#58837





# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

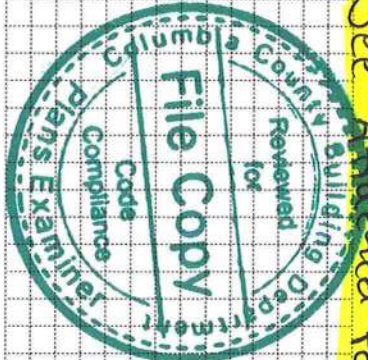
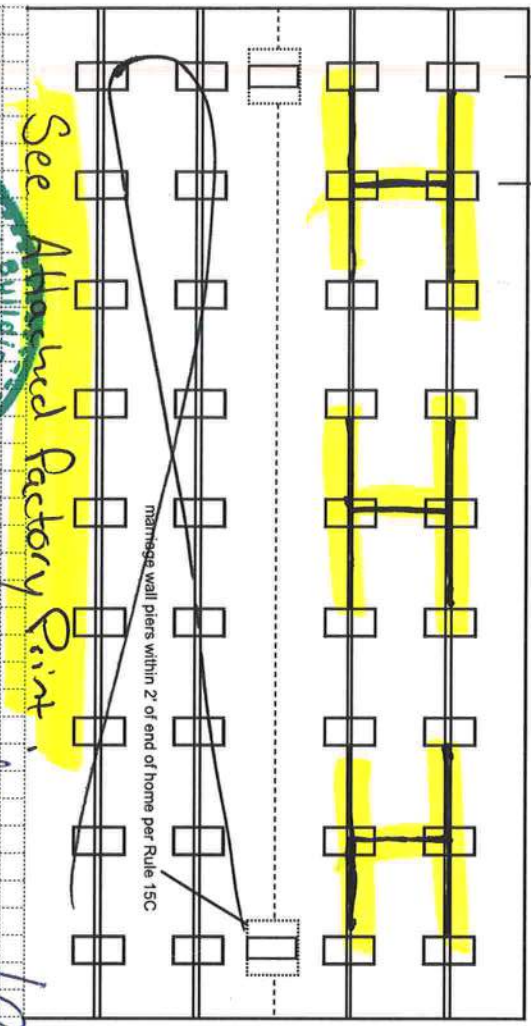
Installer: Dale Houston License # 1H1133271

Address of home being installed \_\_\_\_\_

Manufacturer Clifton Rexwell Length x width 16 x 76

**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 DH



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 # 90868

Triple/Quad ☐ Serial # R0C743436 NC

## 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 23 x 31

Perimeter pier pad size 16 x 16

Other pier pad sizes (required by the mfg.) \_\_\_\_\_

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 \_\_\_\_\_

NA

## ANCHORS

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
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

## FRAME TIES

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

## OTHER TIES

Longitudinal Stabilizing Device (LSD) \_\_\_\_\_

Manufacturer \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms \_\_\_\_\_

Manufacturer \_\_\_\_\_

Sidewall \_\_\_\_\_

Longitudinal Marriage wall \_\_\_\_\_

Shearwall \_\_\_\_\_

Number \_\_\_\_\_

5' 4" \_\_\_\_\_

2' 4" \_\_\_\_\_

2' 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 X without testing.

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

### 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 \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

### TORQUE PROBE TEST

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

DA Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Dale Houston

Date Tested

N/A

### 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. \_\_\_\_\_

### Plumbing

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

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

### Site Preparation

Debris and organic material removed \_\_\_\_\_  
Water drainage: Natural \_\_\_\_\_ Swale \_\_\_\_\_ Pad X Other \_\_\_\_\_

### Fastening multi wide units

Floor: \_\_\_\_\_ Type Fastener: N/A Length: N/A Spacing: N/A  
Walls: \_\_\_\_\_ Type Fastener: N/A Length: N/A Spacing: N/A  
Roof: \_\_\_\_\_ Type Fastener: N/A Length: N/A Spacing: N/A  
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)

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 DA

Type gasket N/A

Installed:  
Between Floors Yes \_\_\_\_\_  
Between Walls Yes \_\_\_\_\_  
Bottom of ridgebeam Yes N/A

### Weatherproofing

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 N/A

### Miscellaneous

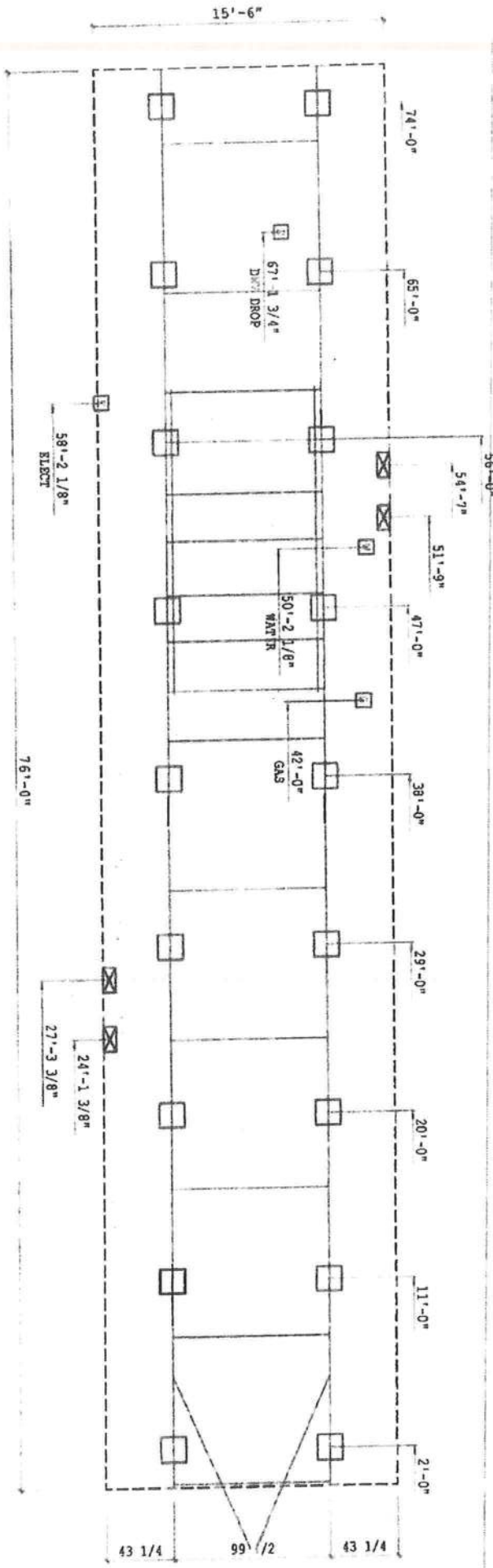
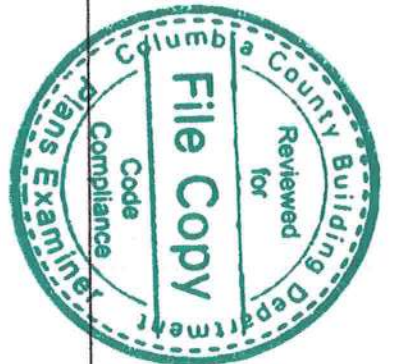
Skirting to be installed Yes No  
Dryer vent installed outside of skirting Yes No N/A  
Range downflow vent installed outside of skirting. Yes \_\_\_\_\_  
Drain lines supported at 4 foot intervals Yes No N/A  
Electrical crossovers protected. Yes N/A  
Other: \_\_\_\_\_

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 Dale Houston

Date 11/9/22





<b>SERVICE SYMBOLS LEGEND</b> 1 - ELECTRICAL, DUCT 2 - WATER, TUB 3 - GAS, EXHAUSTING DUCT 4 - GAS, TUB		<b>NOTES:</b> ALL LOCATIONS ARE APPROXIMATE CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE CITY OF CLAYTON BUILDING CODE, 2015 EDITION, AND THE CITY OF CLAYTON BUILDING CODE, 2015 EDITION, AND THE CITY OF CLAYTON BUILDING CODE, 2015 EDITION.	
<b>CLAYTON</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601		<b>PERMITTING AGENCY</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601	
<b>CLAYTON HOME BUILDING GROUP</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601		<b>PERMITTING AGENCY</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601	
<b>CLAYTON HOME BUILDING GROUP</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601		<b>PERMITTING AGENCY</b> 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601 1170 S. 17th ST. CLAYTON, MO. 64601	

<b>PIER SET</b> 99 1/2 BEAM SPACING		<b>777 CARBARIER</b> 16X76 388-2BA 777 CARBARIER	
<b>99 1/2 BEAM SPACING</b> 16X76 388-2BA 777 CARBARIER		<b>777 CARBARIER</b> 16X76 388-2BA 777 CARBARIER	
<b>99 1/2 BEAM SPACING</b> 16X76 388-2BA 777 CARBARIER		<b>777 CARBARIER</b> 16X76 388-2BA 777 CARBARIER	