PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official Building Official
AP# 44062 Date Received 11 20/19 By m6 Permit # 39/42
Flood Zone Development Permit Zoning Land Use Plan Map Category
CommentsSee Compate Notes
FEMA Map# Elevation Finished Floor River In Floodway Recorded Deed or Property Appraiser PQ Site Plan (DEH,#, 19-0857 Well-letter OR
Recorded Deed or Property Appraiser PO Site Plan 19-0857 Well-letter OR Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
DOT Approval Parent Parcel # 00 385 - 104 STUP-MH 911 App see Stut
□ DOT Approval Parent Parcel # 00 385 - /04 □ STUP-MH □ 911 App ste start □ Ellisville Water Sys Assessment Out County Sub VF Form
24-45-15-
Property ID# 00385-105 Subdivision Wimosa acres Lot# 5
New Mobile Home Used Mobile Home MH Size 3 &R YearY
- Applicant Charles Wilkhim Phone # 386-466-2470
· Address 1.767 SW Cypress Lake RD Lake City, FL 32024
Name of Property Owner Charles Wilkins Phone# 386-466-2470
= 911 Address 1767 SW Cypress Lake Rd Lake City FL 30024
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
Name of Owner of Mobile Home Charles Wilkinson Phone # 5 A A Address SAA
Address SAA
Address
Address
Address
Address
Relationship to Property Owner
Address
Relationship to Property Owner

Mobile Home Permit Worksheet

	Application Number:	Date
Address of home	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	llation Manual
being installed	Wind Zone II	Wind Zone III
urei	Triple/Quad Serial #	GAFLRO
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)	PIER SP	OR USED HOMES
where the sidewall ties exceed 5 ft 4 in Installer's initials	5" 18 1/2" x 18)" 22" x 22" 2
lypical pier spacing S	(sq in) (256) 1/2" (342)	(2) (2)
Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	2000 psf 6' 8'	@ 7.0 @ @ 0
— inijinualia	2500 psf 7' 6" 8' 3000 psf 8' 8'	
	* interpolated from Rule 15C-1 pier spacing table	8.
	PIER PAD SIZES	POPULAR PAI
	I-beam pier pad size	Pad Size
	Perimeter pier pad size	18 5 × 18 5
	Other pier pad sizes (required by the mfq.)	
marriage wall piers within 2 of end of home per Rule 15C	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.	26 ×
	Opening Pier pad size	4 ft 5 ft
	7 10 16	within 2' of end o' spaced at 5' 4" oo
	TIEDOWN COMPONENTS	OTHER TIE
		Sidewall Longitudinal
	Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer	

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26" x 26" (676)

POPULAR PAD SIZES

Sq In

5 ft

ANCHORS

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

FRAME TIES

OTHER TIES

Number

Mobile Home Permit Worksheet

or check here to declare 1000 lb. soil The pocket penetrometer tests are rounded down to POCKET PENETROMETER TEST without testing ps

POCKET PENETROMETER TESTING METHOD

- Test the perimeter of the home at 6 locations
- 2 Take the reading at the depth of the footer
- Using 500 lb increments, take the lowest reading and round down to that increment

ယ



× 150

× N

ORQUE PROBE TEST

The results of the torque probe test is 285 here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot and fors 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

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

1

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source This includes the bonding wire between mult-wide units Pq

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.

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Site Preparation

Date:

Debris and organic material removed Swale

Water drainage Natural

Pad Other

Fastening multi wide units

Floor Roof Walls Type Fastener Ly Type Fastener L9

Length 6 Length6 Length 6

Spacing 22/ Spacing 22/ Spacing 22/

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 For used homes amin 30 gauge, 8" wide, galvanized metal strip

Gasket (weatherproofing requirement)

of tape will not serve as a gasket a result of a poorly installed or no gasket being installed homes and that condensation, mold, meldew and buckled marriage walls are l understand a properly installed gasket is a requirement of all new and used understand a strip

Installer's initials

Type gasket L-Pg.

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes Installed

Weatherproofing

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

Miscellaneous

Other Electrical crossovers protected Range downflow vent installed outside of skirting Dryer vent installed outside of skirting. Yes Skirting to be installed. Yes Drain lines supported at 4 foot intervals

Z A

Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

Installer Signatur

Date // 2020/9

Legend

2009 Flood Zones

- 0.2 PCT ANNUAL CHANCE
- AE
- AH

2018 Flood Zones

- 0.2 PCT ANNUAL CHANCE
- A
- AE
- AH

2018Aerials

DevZones1

- others
- A-1
- □ A-2
- □ A-3
- O CG
- CHI
- □ CI
- CN CSV
- D ESA-2

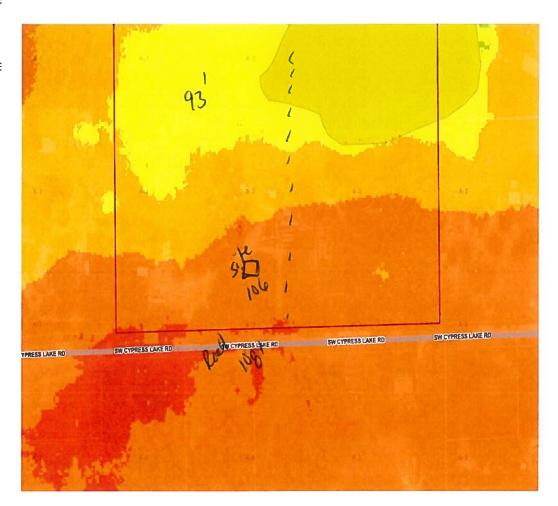
- ILW
- MUD-I PRD
- PRRD
- RMF-1
- RMF-2
- R0
- RR
- RSF-1
- RSF-2
- RSF-3
- RSF/MH-1
- RSF/MH-2
- RSF/MH-3 **DEFAULT**

Parcels

LidarElevations



Printed: Mon Nov 25 2019 09:44:22 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 25-4S-15-00385-104 Owner: WILKINSON CHARLES ERVIN Subdivision: MIMOSA ACRES UNR

Lot:

Deed Acres: 20.02 Ac District: District 2 Rocky Ford Future Land Uses: Agriculture - 3

Flood Zones: A,

Acres: 19.4562187

Official Zoning Atlas: A-3

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.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 4406 Z	CONTRACTOR	2. Jorris	PHONE 386 (23.77)
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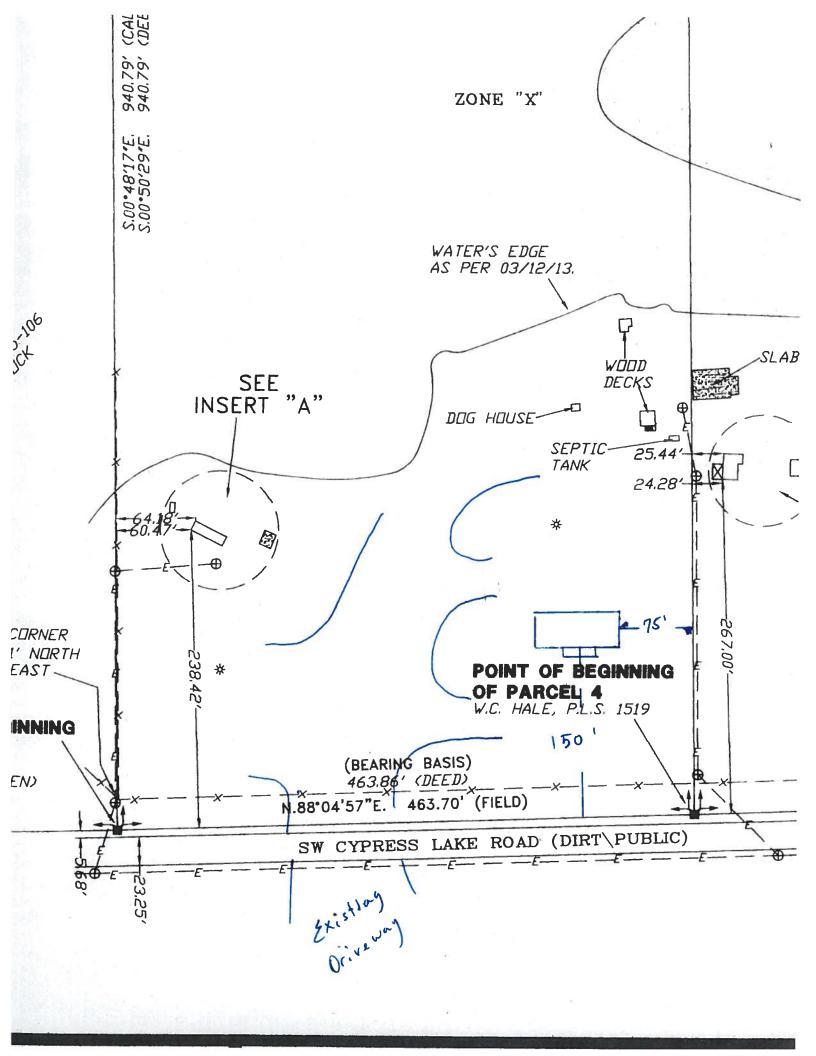
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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 Charles Wilkinson	Signatur Para
		License #:	Phone #:
/		Qualifier Form Attached	
	/		
	MECHANICAL/		Signature Signature
	A/C	License #:	Phone #:
/		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 Property AppraiserJeff Hampton

Parcel: << 25-4S-15-00385-104

1		٦
- (>>	1)

Owner & Pi	roperty Info	Resul	t: 4 of 14	
Owner	WILKINSON CHARLES ERVIN 1767 SW CYPRESS LAKE RD LAKE CITY, FL 32024			
Site	1767 CYPRESS LAKE RD, LAKE CITY			
Description*	AKA LOT 4 MIM SW COR OF SE TO N R/W CYPI R/W 927.58 FT R/W 464.47 FT, 939.56 FT TO P ACRES UNRE) more>>>	E1/4 OF SW1/4 RESS LAKE RI FOR POB, COI N 938.32 FT, V OB &(AKA LOT	, RUN N 12 FT D, E ALONG NT E ALONG V 464.45 FT, S 5 MIMOSA	
Area	20.02 AC	S/T/R	25-4S-15E	
Use Code**	SINGLE FAM (000100)	Tax District	3	

^{*}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	Values

2019 Cert	ified Values	2020 Working Values		
Mkt Land (4)	\$78,684	Mkt Land (4)	\$78,684	
Ag Land (0)	\$0	Ag Land (0)	\$0	
Building (1)	\$5,323	Building (1)	\$5,413	
XFOB (6)	\$8,120	XFOB (6)	\$8,120	
Just	\$92,127	Just	\$92,217	
Class	\$0	Class	\$0	
Appraised	\$92,127	Appraised	\$92,217	
SOH Cap [?]	\$45	SOH Cap [?]	\$0	
Assessed	\$92,082	Assessed	\$92,217	
Exempt	нх нз \$50,000	Exempt	нх нз \$50,000	
Total Taxable	county:\$41,032 city:\$41,032 other:\$41,032 school:\$67,082		county:\$41,387 city:\$41,387 other:\$41,387 school:\$67,217	



Aerial	Viewer	Pictometery	Google Ma	os	
20	901¢L	2010 - 2010	O CONT	3004 P	Males.
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	To be an a	SWIGUARD 0			
					11 011771
	V. 1) <u>.</u>	
		* 19. * 		I WS	
		1 2	 	SO	Table of the state

▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
5/5/2017	\$80,900	1337/0495	CD	V	U	21
6/8/2012	\$22,200	1237/2067	QC	V	U	12
6/8/2012	\$22,600	1237/2065	QC	V	U	12
8/4/1998	\$26,100	870/2280	CD	V	Q	
12/29/1997	\$25,629	850/2170	CD	V	Q	

Building Characte	ristics
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Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	2	SINGLE FAM (000100)	2003	272	368	\$5,413

Legend

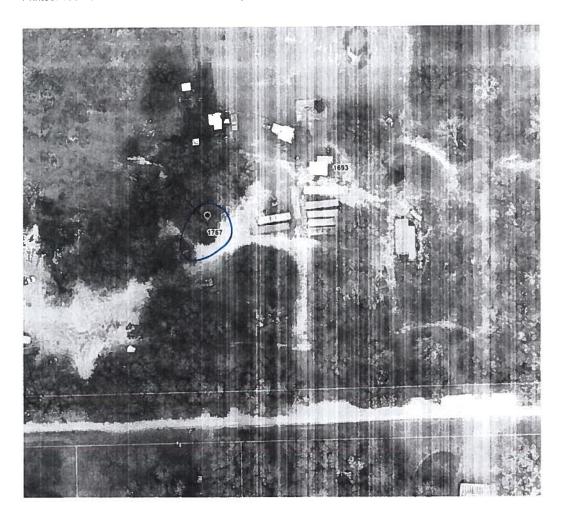
2018Aerials

Parcels

Addresses

Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Nov 19 2019 15:03:04 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 25-4S-15-00385-104 Owner: WILKINSON CHARLES ERVIN Subdivision: MIMOSA ACRES UNR

Lot:

Acres: 19.4562187

Deed Acres: 20.02 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones: A,

Official Zoning Atlas: A-3

OK to use for 911 Address

Manufacturer Address Fleetwood Homes of Georgia, Inc Northside Industrial Park P.O. Box 272 Douglas, GA 31533 912/3841147 Plant Number 05 Date of Manufacture HUD No. Ges 807307-600-807308 Manufacturer's Serial Number and Model Unit Designation GAFLRO5A22567CW/GAFLRO5B22567CW Design Approval by (D.A.P.I.A.) 3603B Radco This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture. (For additional information, consult owner's manual.) The factory installed equipment includes: Equipment Manufacturer Model Designation DEATO PORCE For heating For air cooling For cooking Refrigerator Water Heater Washer Clothes Dryer XX Dishwasher Garbage Disposal Fireplace VRNOTICS 12 Smoke Detector HOME CONSTRUCTED FOR Zone I XXXX Zone II This home has not been designed for the higher wind pressure and anchoring provisions required for ocean/coastal areas and should not be located within 1500' of the coastline in Wind Zones II and III, unless the home and its anchoring and foundation system have been designed for the increased requirements specified for Exposure D in ANSI/ASCE 7-88. This home has ___has not__ been equipped with storm shutters or other protective coverings for windows and exterior door openings. For homes designed to be located in Wind Zones II and III, which have not been provided with shutters or equivalent covering devices, it is strongly recommended that the home be made ready to be equipped with these devices in accordance with the method recommended in manufacturers printed instructions. **BASIC WIND ZONE MAP** ZONE I ZONE II ZONE'I SONE III ZONE III ZONE III ZONE II **DESIGN ROOF LOAD ZONE MAP** North 40 PSF XXXX South 20 PSF Middle 30 PSF Other NORTH MIDDLE MIDDLE SOUTH NORTH

		1	60		
This i	COMFORT HI manufactured home has been thermally in: e federal manufactured home construction	ATING sulated to cons on and safety	form with the	require or all loca	ments ations
Heati	n climatic zone	list at left). o maintain an a	verage 70 F	temperal	in
this he To ma home	ome at outdoor temperatures of	F. onserve energy, n temperature	it is recomn (97 1/2%) is	nended the	a than
+ The a	20 degrees Fahrenheit. bove information has been calculated assum ard atmospheric pressure.				
	COMFORT CO	OLING			
	Air conditioner provided at factory (Alternat	e I)			
,	Air conditioner manufacturer and model (see	list at left).	1000	*	
8	Certified capacityB.T.U. air conditioning and refrigeration institute sta The central air conditioning system provide	/hour in accord ndards. In this home	- 200	1000	•
S	orientation of the front (hitch end) of the hon system is designed to maintain an indo	ne facing of or temperatur	e of 75° E	n this bas when ou	is the tdoor
t	emperatures areF dry bulb and		F wet bulb.		F .
a h s le	The temperature to which this home can be amount of exposure of the windows of this ho nome's heat gains will vary dependent upon it shading provided. Information concerning it ocations, window exposures and shadings are of the ASHRAE Handbook of Fundamentals.	e cooled will come to the sun's is orientation to the calculation a provided in Cl	hange doput radical heat the sun and of cooling to hapter 22 of t	Therefore any permosada at vithe 1981 e	on the s, the ament arious diston
li F	nformation necessary to calculate cooling lo provided in the special confort cooling information	ads at various i	ocations and with this ho	Porientatione.	ons is
Т	Air conditioner not provided at factory (Alter the air distribution system of this bome is conditioning.	mate (I) suitable for th	e installation	of cent	ni air
Т	he supply air distribution system installed in t				
s c s	entral air conditioning system of up to 50, certified in accordance with the appropriate tandards, when the air circulators of such a column static pressure or greater for the cool upply air duct system. Information necessary to calculate cooling lo- provided in the special comfort cooling information.	ing air delivered	g and refrige are rated at to the man	eration ins 0.3 inch factured	water home
Т	tir conditioning not recommended (Alternal he air distribution system of this home has r vith a central air conditioning system.	e III) not been design	ed in anticlp	ation of it	s use
	INFORMATION PROVIDED BY NECESSARY TO CALCULATE	THE MANUFAC			
Walls ((without windows and doors)		"U"—	.12	2.1
Ceiling	s and roofs of light color)		······························	.08	-
Ceiling	s and roofs of dark color			.08	710
Floors			-u-	.11	
Air duc	ets in floor	Ammy	"U"~	.13	
Air duc	ts in ceiling	4	"U"-	n/a	-
Air duc	cts installed outside the home		"U"-	.25	PATE IN
The fol	llowing are the duct areas in this home:			STATE	
1	Air ducts in floor		81	7 10 10 10	sq. ft.
	Air ducts in ceiling		n/	8	sq ft.

To determine the required capacity of equipment to cool a home efficiently and economically, a cooling load (heat gain) calculation is required. The cooling load is dependent on the orientation, location and the structure of the home. Central air conditioners operate most efficiently and provide the greatest comfort when their capacity closely approximates the calculated cooling load. Each home's air conditioner should be sized in accordance with Chapter 22 of the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) Handbook of Fundamentals, once the location and orientation are known.

Air ducts outside the home

47 16 sq.ft.





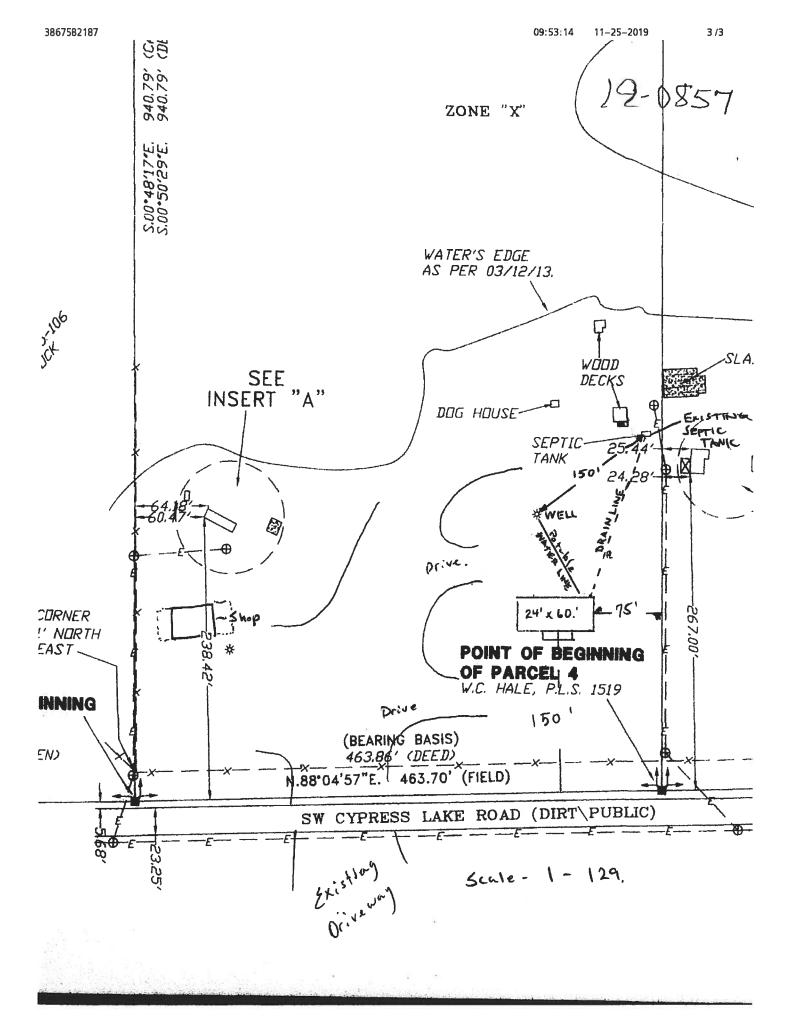
STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO .	19-	08	51
DATE PAID:		20	13
FEE PAID:		20	00
RECEIPT #:	145	To	14
		युष्ट	4

APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Charles Wilkinson
AGENT:TELEPHONE: \$26-466-3470
MAILING ADDRESS: 1767 SW Cypiess Lake Rd Lake (ity FL 32024
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: SUBDIVISION: Mimosa acres UNIC PLATTED:
PROPERTY ID #: 25-38-15-00385-105 ZONING: I/M OR EQUIVALENT: [Y /N
PROPERTY SIZE: 10 ACRES WATER SUPPLY: [V] PRIVATE PUBLIC []<=2000GPD []>2000GPD
is sewer available as per 381.0065, fs? [🕉 / n] Distance to sewer: 166 ft
PROPERTY ADDRESS: 1767 SW Cypress Lake Rd Lake City FL 32024
DIRECTIONS TO PROPERTY: 5 247 - mile passed 242 - Cypress Late
Rd on Rd. Two R. I. 6 mile on R is the property.
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 Mabile House. 3 1400. ORIGINAL ATTACHED
Mobile House. 3 1400. ORIGINAL ATTACHED
Oviginal Opponial for 3 BR.
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: DATE: ///9/19

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19- 0857 ------PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet. Attached Notes: Site Plan submitted by: Owner TITLE Plan Approved Not Approved____ Date MUSICA County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



CODE ENFORCEMENT DEPARTMENT

COLUMBIA COUNTY, FLORIDA

OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM SUWANNE
OWNERS NAME CHARLES KINOS PHONE CELL
OWNERS NAME CHARLES KINDS PHONE CELL INSTALLER KONNIE NOKKIS PHONE 386 62371/GELL
INSTALLERS ADDRESS 1004 SW Chal TX.
MOBILE HOME INFORMATION
MAKE Frest word YEAR 94 SIZE 24 x 60
COLOR SERIAL No
WIND ZONE SMOKE DETECTOR
INTERIOR: FLOORS OV
DOORS OK
WALLS OK
CABINETS OF
ELECTRICAL (FIXTURES/OUTLETS)
EXTERIOR: WALLS / SIDDING
windows O. J.
DOORS OK
INSTALLER: APPROVEDNOT APPROVED INSTALLER OR INSPECTORS PRINTED NAME KONNIY NOKKO
INSTALLER OR INSPECTORS PRINTED NAME KONNIT NOKKA
Installer/Inspector Signature June License No. <u>I/4/025/45/</u> Date <u>//-180</u> C
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



COLUMBIA COUNTY BUILDING DEPARTMENT

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

WAY TO DU		
MOBILE HOME	EINSTALLERS LETTER OF AU	THORIZATION
Koaner Noky Installer License Holder Na		for the job address show below
only, 1768 SW Cypress	Lake Rd Lake Coly Fe Job Address	3८०८५. and I do certify that
the below referenced person(s)	listed on this form is/are under m	y direct supervision and control
and is/are authorized to purcha	se permits, call for inspections an	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Charles Wilkinson	Our	AgentOfficer Property Owner
		Agent Officer Property Owner
		Agent Officer Property Owner
I. the license holder, realize tha	t I am responsible for all permits p	ourchased, and all work done
-	responsible for compliance with a	
Local Ordinances		
Lunderstand that the State Lice	ensing Board has the power and a	uthority to discipline a license
	by him/her or by his/her authorize	
	esponsibility for compliance grante	
Haml Name		1025/45/ 11-20-120
License Holders Signature (Not	tarized) License N	umber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: Colum	bia
The above license holder, whose personally appeared before me (type of I.D.)	se name is Ronnic A and is known by me or has produ on this Zo day	uced identification

NOTARY'S SIGNATURE

MY COMMISSION # FF 978102
EXPIRES: July 14, 2020
Bonded Thru Notary Public Underwriters