PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION **Building Official** For Office Use Only (Revised 7-1-15) Zoning Official **Date Received** Byしん / は Permit # AP# Development Permit\_N/A Zoning RA Flood Zone Land Use Plan Map Category LVLD Comments FEMA Map# Elevation Finished Floor River In Floodway Recorded Deed or Property Appraiser PO Site Plan EH# 21-1029 □ Well-letter OR ☑ Existing well □ Land Owner Affidavit 🕡 Installer Authorization ☐ FW Comp. letter ( App Fee Paid □ DOT Approval □ Parent Parcel # @911 App □ STUP-MH □ Out-County Din County Sub VF Form ☐ Ellisville Water Sys ☐ Assessment Property ID# 18-35-17-05061-013 Subdivision Lonest Acres ( New Mobile Home\_\_\_\_\_ Used Mobile Home\_\_\_\_ MH Size\_14X66\_ Year\_ 1993 234-1020 Sheppard Applicant blena Phone # 1415+ White Blud Springs Address Sheppino Stucey sheppard Name of Property Owner Phone# NW Jamie 1erk 911 Address Circle the correct power company -FL Power & Light Clav Electric Suwannee Valley Electric (Circle One) -**Duke Energy** Phone # 386-234-1020 Name of Owner of Mobile Home Sheppard Address Relationship to Property Owner Current Number of Dwellings on Property Lot Size Total Acreage Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) Currently using) (Blue Road Sign) (Putting in a Culvert) Is this Mobile Home Replacing an Existing Mobile Home Driving Directions to the Property Take Come down side Driveway 386-344-3669 Name of Licensed Dealer/Installer alenn Phone # Installers Address 660 Se lutnam St 141054858 Installation Decal # License Number

644.77

				marritige walk piers within 2' of end of home per Rule 15C						Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Typical pier spacing Installer's initials (5)	sta	Manufacturer W2010 Length x width 19 100	Take C.L. FI	ne 469 NW James Blu	Installar: Class   Self-and   Ideas   Ideas	Mobile Home Permit Worksheet
100	Longitudinal Stabilizing Device (LSD)  Manufacturer  Manufacturer  Manufacturer  Manufacturer  Manufacturer  Manufacturer  Manufacturer  Manufacturer  OTHER TIES  Number  Longitudinal  Longitudinal  Marriage wall  Shearwall	within 2' of end of home spaced at 5' 4" oc	Opening Pier pad size 4 ft 5 ft	List all marriage wall openings greater than 4 foot 26 x 26 676 and their pier pad sizes below.	13 1/4 × 26 1/4 ations of marriage 20 × 20 ater. Use this 17 3/16 × 25 3/16	18.5 x 18.5 16 x 22.5 17 x 22	Pad Size Sq In  Perimeter pier pad size  Pad Size Sq In  16 x 16 256  16 x 18 288	PIER PAD SIZES  POPULAR PAD SIZES  POPULAR PAD SIZES	© © © © © © © © © © © © © © © © © © ©	1500 psf 4'6" 6' 7' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'	Footer 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" X 24" 26" (sq in) (256) 1/2" (342) (400) (484)* (576)* (484)*	_	Triple/Quad Serial # P14071121493	Double wide Installation Decal # 81771	stalled in accordance with Rule 15-C	New Home Used Home N	mber:

# Mobile Home Permit Worksheet

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_Date:
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Electrical	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Staller Name Clenn Williams  ate Tested 12-20-21	Torque probe test is 200 inch pounds or check here if you are declaring 5' anchors without testing anchors.  Note: A state approved lateral arm system is being used and 4 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 requires anchors with 4000 lb holding capacity.  Installer's initials	The pocket penetrometer tests are rounded down to 1000 psf or check here to declare 1000 lb. soil without testing.  **X 1500
	Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes N/A Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:	Type gasket  Pg. Between Floors Yes Between Walls Yes Between Walls Yes Bottom of ridgebeam Yes  Weatherproofing  The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes  Miscellaneous	Debris and organic material removed  Water drainage: Natural Swale Pad Other  Floor: Type Fastener: Length: Spacing: Compilied of Compilied of Pad Other Code of Floor are sult of a poorly installed gasket is a requirement of all new and used of tape will not serve as a gasket.  Site Preparation  Water drainage: Natural Swale Pad Other  Fastening multi wide units  Floor: Type Fastener: Length: Spacing: Length: Length: Spacing: Length: L

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

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 source. This includes the bonding wire between multi-wide units. Pg.

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

Date 12-21-21

Date Tested Installer Name

Note:

Page 2 of 2

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER 52995 CONTRACTOR GLEAN WILLIAMS PHONE 386-3443
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
records of the Ordinance 89-	ounty one permit will cover all trades doing work at the permitted site. It is <a href="REQUIRED">REQUIRED</a> that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 6, a contractor shall require all subcontractors to provide evidence of workers' compensation or neral liability insurance and a valid Certificate of Competency license in Columbia County.
	the permitted contractor is responsible for the corrected form being submitted to this office prior to the ubcontractor beginning any work. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name Blenn Chapterd Signature Signature Phone #: 386 - 234-1020
(81	Qualifier Form Attached
MECHANICAL/	Print Name Nenn shypere Signature Oul
A/C	I license # () V/ALL Phone # 3/0 - 63 7 / 660

**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.

Qualifier Form Attached



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

FEE PAID:

APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 21.1024
DATE PAID: 12.15.21 RECEIPT #:

APPLIC	CATTON FOR:	FOR CONSTRU		130455 3. <u>-</u>		NP 1770589
	New System [X] Repair []			Holding Tank Temporary	[ ]	Innovative
APPLIC	CANT: GLENN	L. SHEA	PARD	- A	2	
AGENT:				TEI	EPHONE:	
MAILIN	ig address: 9364	5/E 141 <sup>ST</sup>	BLVD W	HITE SPRIM	145, FL	32096
APPLIC	COMPLETED BY APPLICAN PERSON LICENSED PURSUA CANT'S RESPONSIBILITY ED (MM/DD/YY) IF REQUE	TO PROVIDE DOC	3) (m) OR 489 UMENTATION O	.552, FLORIDA F THE DATE THE	STATUTES LOT WAS	. IT IS THE
PROPER	RTY INFORMATION					
LOT: _	BLOCK:	SUBDIVISION:			PL	ATTED:
PROPER	ETY ID #: 18.35.17	-05061-013	ZONING:	I/M OI	R EQUIVAL	ENT: [Y/N]
PROPER	ACRES	WATER SUPPLY	: [ PRIVA	FE PUBLIC [	]<=2000G	PD [ ]>2000GPD
IS SEW	ER AVAILABLE AS PER 3	81.0065, FS? [	Y / N ]	DISTAL	NCE TO SE	WER:FT
PROPER	TY ADDRESS: 469	N/W JA	MIE GL	EU LAKE	CITY	FL 32096
	ions to property: 📈					
	ALL GO TO					
				/		
BUILDI	ING INFORMATION	[ RESIDEN	NTIAL	[ ] COMMERCI	AL	7 7
	Type of Establishment		uilding Con rea Sqft Tai	mmercial/Insti ole 1, Chapter	tutional 64E-6,	System Design FAC
	MOBILE HOME	3/	1100 59			
2	1 X					
3						
4						_
t 1	Floor/Equipment Drain		(Specify)			
SIGNAT	TORE: Olling Z	Shippan	- £		DATE: /	2-11-21
DE 401	5 09/09 (Observation of			18 12 5800		

# STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-1024

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

# Columbia County Property Appraiser

Jeff Hampton

Mkt Land

Ag Land

Building

**XFOB** 

Just

Class

Appraised

Assessed

Exempt

Taxable

Total

SOH Cap [?]

Parcel: << 18-3S-17-05061-013 (25006) >>>

2022 Working Va

Aerial Viewer Pictometery Google Maps

2022 Working Values updated: 12/30/2021

Owner & Pi	roperty Info	Res	ult: 1 of 1				
Owner	SHEPPARD GLEN SHEPPARD STAC 9364 SE 141ST BL WHITE SPRINGS,	<b>EY</b> .VD					
Site	469 NW JAMIE GIn, LAKE CITY						
Description*	COMM 355 FT W OF RUN S 623.86 FT, W 150.59 FT TO POB. 532, WD 1399-2050,	/ 182.10 FT, N 52 BEING IN NE1/4	5.95 FT. E				
Area	2 AC	S/T/R	18-3S-17				
Use Code**	VACANT (0000)	Tax District	2				

\$14,200 Mkt Land

\$0 Ag Land

\$0 Building

\$0 XFOB

\$0 Class

\$14,200 Appraised

\$14,200 Assessed

city:\$0 Total

other:\$0 Taxable

county:\$14,200

school:\$14,200

\$0 Exempt

\$0 SOH Cap [?]

\$14,200 Just

**Property & Assessment Values** 2021 Certified Values

40 00 47
18-3S-17
2
n for this parcel
ot maintained by ty Planning &
ng Values
\$14,200
\$0
\$0
\$0
\$14,200
\$0
\$14,200
\$0
\$14,200
\$0
county:\$14,200
city:\$0
other:\$0 school:\$14,200
school:\$14,200



Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
11/25/2019	\$6,500	1399/2050	WD	V	Q	01

Building Characte					
Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value

Code Desc Year Blt Value Units	Dims

▼ Lai	nd Breakdown				
Code	Desc	Units	Adjustments	Eff Rate	Land Value
0000	VAC RES (MKT)	2.000 AC	1.0000/1.0000 1.0000/.7500000 /	\$5,475 /AC	\$10,950
9945	WELL/SEPT (MKT)	1.000 UT (0.000 AC)	1.0000/1.0000 1.0000//	\$3,250 /UT	\$3,250

<sup>\*</sup>The <u>Description</u> above is not to be used as the Legal Description for the in any legal transaction.

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



### 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:

1/21/2021 4:09:42 PM

Address:

**469 NW JAMIE GLN** 

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

18-3S-17-05061-013

REMARKS:

This address is a verified address in the county's addressing system.

Verification ID: fc1bacad-6344-4010-9821-7e2eb4d77db4

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

### 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 Show Your Road Name 809 OFOS KOWD ZOEO 110 (My Property) Barn M/H NOTE: (201)205 524 This site plan can be copied and used with 410 the 911 Addressing 325 470 Dept. application forms. 498 60' North 328' 46 84 30 7× 14 Jamie

Inst. Number: 201912027541 Book: 1399 Page: 2050 Page 1 of 1 Date: 11/25/2019 Time: 2:05 PM P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 45.50

This Instrument Prepared by & return to:

Address:

RENEE BROWN **4091 CAMPUS LANE** 

ORMOND BEACH, FL. 32174

Inst: 201912027541 Date: 11/25/2019 Time: 2:05PM Page 1 of 1 B: 1399 P: 2050, P.DeWitt Cason, Clerk of Co nbia, County, By: PT rty ClerkDoc Stamp-De

Parcel I.D. #: 05061-013

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

### THIS WARRANTY DEED Made the 25th day of November, A.D. 2019, by DAVID A. BROWN and RENEE BROWN,

CONVEYING NON-HOMESTEAD PROPERTY, hereinafter called the grantors, to GLENN LOWRELL SHEPPARD and STACEY SHEPPARD, HUSBAND AND WIFE, whose post office address is 9364 SE 141ST BLVD, WHITE SPRINGS, FL 32096, hereinafter called the grantees:

(Wherever used herein the terms "grantors" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in Columbia County, State of Florida, viz:

COMMENCE AT THE NORTHEAST CORNER OF THE SE 4, SECTION 18, TOWNSHIP 3 SOUTH, RANGE 17 EAST, AND RUN S 88°54'40"W, ALONG THE NORTH LINE OF SAID SE 4, 355.00 FEET, TO THE POINT OF BEGINNING, AND RUN THENCE S 1°38'E, 623.86 FEET, TO THE NORTH RIGHT-OF-WAY LINE OF JAMMIE ROAD, THENCE N 55°43'W, ALONG SAID ROAD 182.10 FEET, THENCE N 1°38'W, 525.95 FEET, TO THE NORTH LINE OF SAID SE 1/4, THENCE N 88°54'40"E, 150.59 FEET, TO THE POINT OF BEGINNING, CONTAINING 2 ACRES, MORE OR LESS.

LEGAL PROVIDED BY GRANTOR.
THIS DEED WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH OR SURVEY AND MAKES NO WARRANTIES AGAINST SAME.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantors hereby covenant with said grantees that they are lawfully seized of said land in fee simple; that they have good right and lawful authority to sell and convey said land, and hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2019.

In Witness Whereof, the said grantors have signed and sealed these presents, the day and year first above written.

Signature

BRANDI BROWN Printed Nan

Witness Signature

PATRICIA LANG

Printed Name

DAVID A. BROWN

4091 CAMPUS LANE

ORMOND BEACH, FL 32174

RENEE BROWN 4091 CAMPUS LANE

ORMOND BEACH, FL 32174

STATE OF FLORIDA COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 25th day of November, 2019, by DAVID A.

Driver's License as BROWN and RENEE BROWN, who are known to me or who have produced

identification.

Notary Public

My commission expires

PATRICIAH. LANG Commission # GG 293297 Expires February 5, 2023 Bonded Thru Troy Fain Insurance 800-385-701



# 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, Glenn Williams ,give this authority for the job address show below		
only, 469 NW	John Address Calle Col	, and I do certify that
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)
Glenn sheppard	Alem Shyma	Agent Officer Property Owner
		Agent Officer Property Owner
		Agent Officer 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.		
Hen belli 14 105488 12-21-21		
License Holders Signature (Notarized) License Number Date		
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: COUNTY OF:		
The above license holder, whose name is		
personally appeared before me and is known by me or has produced identification (type of I.D.) on this day of		
(type of I.D.) on this 3 day of JANUATU to 2022.		
LAURIE HODSON LAURIE HODSON MY SOM # GG 970026 MY SOM # GG 970026		
MYSOMMSSION # 4, 2024 EXPIRES AND 14, 2024 Bonded Thru Notary Public Underwriters		