Parcel:

31-4S-18-10519-209 (38635)

Owner & Property Info

Result: 5 of 5

CAMERON SCOTT J

Owner

P O BOX 3455

LAKE CITY, FL 32056-3455

Site

121 SMART CT, LAKE CITY

Description* LOT 9 PARKWOOD ADDITION S/D. 799-549, 946-1693, QC 1002-2722,

Area

5.01 AC

S/T/R

31-4S-18

Use Code** MOBILE HOME (0200)

Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER CONTRAC	TOR Brent Strickla	and PHONE 386-365-7043	
	THIS FORM MUST BE SUBMITTED	PRIOR TO THE ISSUANCE	OF A PERMIT	
	Jessica Whitcomb			
records of the Ordinance 89- exemption, ge Any changes,	subcontractors who actually did the trades of subcontractors who actually did the trade subcontractor shall require all subcontractor neral liability insurance and a valid Certification the permitted contractor is responsible for the permitte	pecific work under the ors to provide evidence te of Competency lice the corrected form be	e permit. Per Florida Statute 440 and e of workers' compensation or nse in Columbia County. Fing submitted to this office prior to the	
ELECTRICAL	Print Name_James Dale Williams	Signature		
	License #: EC 13007092	Phone #:	386-362-2035	
	Qualifier Form A	Attached X		
MECHANICAL/	Print Name Michael Boland	Signature	A STATE OF THE STA	
110		81	352 274 0326	

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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.

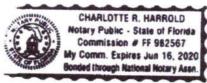
Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS 135 NE Hernando Ave, Suite B-21. Lake City, FL 32055

Phone 386-758-1008 Fax. 386-758-2160

Dale Williams	(license holder name), licensed qualifier
for Affordable Electric	(company name), do certify that
the below referenced person(s) listed on this for employee leasing arrangement; or, is an officer Florida Statutes Chapter 468, and the said person control and is/are authorized to purchase permit	rm is/are employed by me directly or through an of the corporation; or, partner as defined in son(s) is/are under my direct supervision and
Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burd	1. La
2.	2.
3.	3.
4.	4.
5.	5.
officers, or employees and that I have full respondent and ordinances inherent in the privilege granted of the third in the privilege granted of the third in the privilege granted of the third in the privilege granted of	is/are no longer employee(s), or officer(s), you not said submit a new letter of authorization
The above license holder, whose name is personally appeared before me and is known by	me or has produced identification his The day of January 20 19
CHARLOTTE R HARE	ROLD T





COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

C No.	
LICENSED QUALIFI	ER AUTHORIZATION
1. MichARIA DOLAND	(license holder name), licensed qualifier
for ACIE-A/LOCOCA/A	LLC (company name), do certify that
the below referenced person(s) listed on this for	rm is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DAIR EAS	1.48
2. Kally Distop	2. Kelly Bishop
3. Locky Ford	3. Vach, 1) 2 of
4.	4.
5.	5.
authority to discipline a license holder for violatic officers, or employees and that I have full responsed ordinances inherent in the privilege granted	nsibility for compliance with all statutes, codes
If at any time the person(s) you have authorized officer(s), you must notify this department in writ	is/are no longer agents, employee(s), or
authorization form, which will supersede all prev unauthorized persons to use your name and/or l	lous lists. Fallure to do so may allow license number to obtain permits.
Licensed Qualifiers Signature (Notarized)	CALBITTIO ESDOQUE License Number Date 1 (1971)
NOTARY INFORMATION STATE OF COUNTY OF	1111/16
The above license holder, whose name is \(\sum_{\text{id}} \) personally appeared before me and is known by (type of I.D.) on	me or has produced identification this day of November 20 15
NOTARYS SIGNATURE	(Seal/Stamp)
	AMANDA FLOOD MY COMMISSION # FF 106012 EXPIRES: April 5, 2018 Bonded Thru Notary Public Underwriters

		marriage wall piers within 2" of end of home per Rule 15C			Typical pier spacing 2' 5/ Show locations of Longitudinal and Lateral Systems lorgitudinal (use dark lines to show these locations)	sta	Installer Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043 Address of home being installed LAKE CT FL Manufacturer LIVE OUL Length x width 52 x 28
within 2' of end of home spaced at 5' 4" oc D Longitudinal Stabilizing Device (LSD) Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Mimber Sidewall Longitudinal Stabilizing Device w/ Lateral Arms Marriage wall Sheanwall	Opening Pier pad size 4 ft 5 ft FRAME TIES	the approximate locations of marriage 20 x 20 to 20 x 20 to show the piers. Use this 17 3/16 x 25 3/16 to show the piers. 17 1/2 x 25 1/2 to show the piers. 17 1/2 x 24 x 24 to show the piers. 17 1/2 x 25 1/2 to show the piers	I-beam pier pad size $1 \times 2 \times $	acing table.	y (sq in) 16 x 16 18 1/2" x 18 20" x 20" 22" x 22" 24" x 24" 26" y (sq in) (256) 1/2" (342) (400) (484)* (576)* (6	m:Hinged PIER SPACING TABLE FOR USED HOMES	New Home Used Home

Floor. Walls:

Type Fastener 5000 Type Fastener 5000

Water drainage: Natural Swale

Site Preparation

astening multi wide units

Pad

Other

Length

Spacing: Spacing: Spacing

1611 0

Roof

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.

Length

Length

Gasket (weatherproofing requirement)

PERMIT NUMBER

Date Tested Installer Name or check here to declare 1000 lb. soil withou showing 275 inch pounds or less will require 5 foot anchors Note: here if you are declaring 5' anchors without testing The results of the torque probe test is ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER A state approved lateral arm system is being used and 4 ft. requires anchors with 4000 lb, holding capacity 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 005× 2. Take the reading at the depth of the footer Using 500 lb. increments, take the lowest Test the perimeter of the home at 6 locations POCKET PENETROMETER TESTING METHOD reading and round down to that increment POCKET PENETROMETER TEST TORQUE PROBE TEST X500 without testing Installer's initials inch pounds or check 1500 A test psi

Type gasket Foam

nstalled

Between Walls Yes Between Floors Yes

Bottom of ridgebeam Yes

of tape will not serve as a gasket

a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are I understand a properly installed gasket is a requirement of all new and used

installer's initials

Installer Signature Date 4-1	manufacturer's installation instructions and or Rule 15C-1 & 2	Installer verifies all information given with this permit worksheet	

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

Plumbing

Pg

source. Connect

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

electrical conductors between multi-wide units, but not to the main gower

Electrical

Range downflow vent installed outside of skirting. Dryer vent installed outside of skirting. Yes

Yes Z

Z

Drain lines supported at 4 foot intervals. Yes

Other:

Electrical crossovers protected

Yes

Skirting to be installed. Yes

Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

8

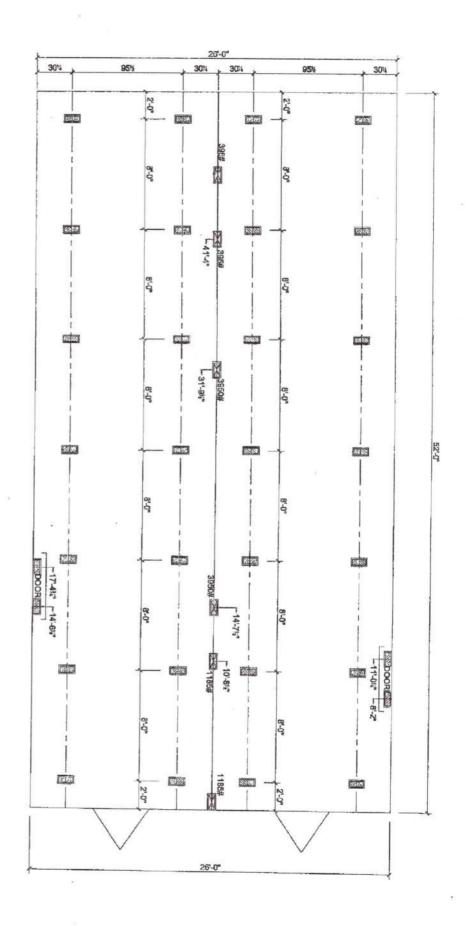
Siding on units is installed to manufacturer's specifications. Yes

The bottomboard will be repaired and/or taped. Yes

Weatherproofing

independent water supply systems. Pg.

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



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 IT'S 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.

3-BEDROOM / 2-BATH MODEL: S-2523G - 28 X 52 Live Oak Homes

- MAIN ELECTRICAL
- 99999

WATER INLET

- ELECTRICAL CROSSOVER
- WATER CROSSOVER (IF ANY)
- (a) DUCT CROSSOVER
 (i) SEWER DROPS
 (j) RETURN AIR (W/OPT, HEAT PUMP OH DUCT)
 (j) SUPPLY AIR (W/OPT, HEAT PUMP OH DUCT)
- GAS CROSSOVER (IF ANY) GAS INLET (IF ANY)

DORMER SHOWN IS AN OPTION #2 BATH 5'-5" KITCHEN 12-9

H. BATH

5'-6"

MAYBERRY

S-2523G-OAK 10'-8"

10:-5"

3050E

30536

#2 DEDROOM

LIVING ROOM EMIRE

MASTER BEDROOM 13'-5" X 12'-8"

13-110

2-BEDROOM / 2-BATH

28 X 56 - Approx. 1352 Sq. Ft.

All count dimensions include classits and square knotage figures are approximate Transom whethers are aveilable on optional \$1-2" sidewall housins only. Live Gak Homes reserves the right to modify product oftening at any lines.

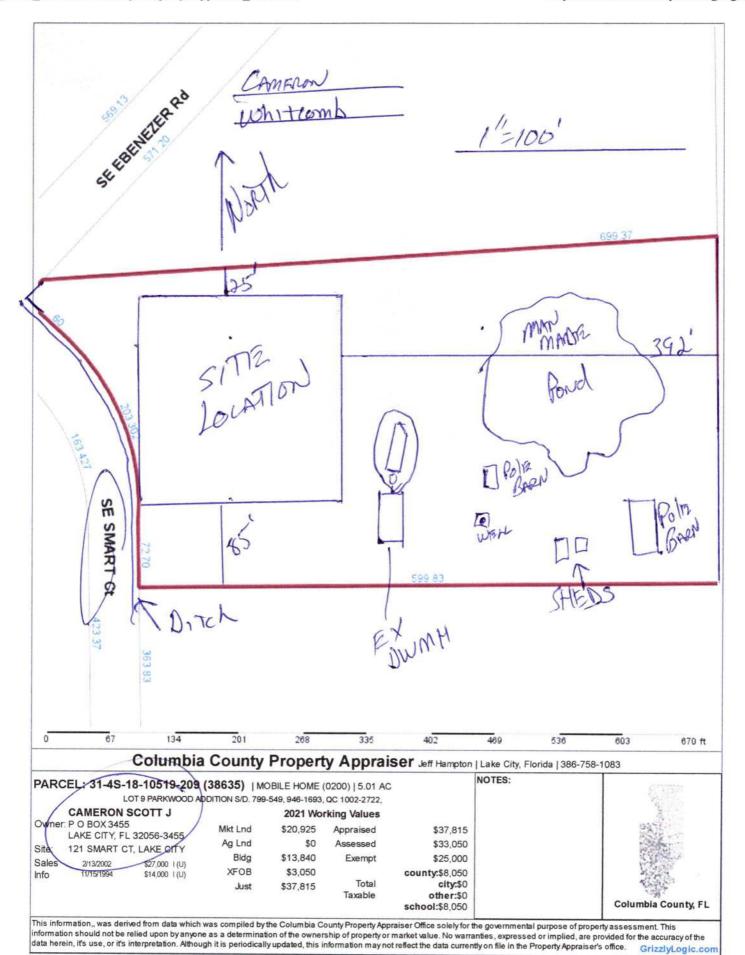
STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number_____

-CAMPRON WE THOM	L PART II - SITEPLAN	210
Scale: 1 inch = 40 feet.	100 28R - 121 - 1352 - 121 - 126 - 100 - 1	SLORE > NORTH
Site Plan submitted by:	4/11/21	CONTRACTOR
Plan Approved By	Not Approved	Date County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



District No. 1 - Ronald Williams District No. 2 - Rocky Ford

District No. 3 - Robby Hollingsworth

District No. 4 - Toby Witt District No. 5 - Tim Murphy



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: 4/12/2021 10:29:51 PM

Address: 121 SE SMART Ct

City: LAKE CITY

State: FL

Zip Code **32025**

Parcel ID 10519-209

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