Parcel:

25-58-16-03710-003 (18321)

Owner & Property Info

Owner	T-PRICE CORPORATION P O BOX 1733 LAKE CITY, FL 32056	HINES ABRENOME	NO DER	e
Site		11	Pr	
Description*	COMM AT IRON ROD (BRITT SW1/4 OF NE1/4, E 668.52 FT) WAY, S ALONG W R/W 616.02 2684,	FOR POB, CONT E 635.47 I	FT TO W M	AINT R/W OF SW SHEPPARD
Area	9 AC		S/T/R	25-58-16
Use Code**	VACANT (0000)		Tax Distric	t 3

LAND OWNER AFFIDAVIT

STATE OF FLORIDA **COUNTY OF COLUMBIA**

This is to certify that I, (We),	. T-	T-Price Corp			
as the owner of the below describ	ed property:				
Property tax Parcel ID number 2	5-5S-16-03710-003				
Subdivision (Name, lot, Block, Phase) <u>NA</u>				
Give my permission for Jar	nes & Cynthia Hines	to place	a		
Circle one Mobile Home Trave Barn – Sned – Garag	el Trailer / Utility Pole O e / Culvert / Other	nly / Single Family Home	/		

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.

Owner Signature Avale <u>328122</u> Date

Owner Signature

Date

Owner Signature

Date

Sworn to and subs	cribed before me this	28 day of	March	_, 20 <mark>2.2</mark> . This
(These) person(s) a	are personally known t	to me or produ	iced ID	,
	Provide and the second se		((Type)
Helloce	Lemoner	Holl	14 CHO	inover
Notary Public Sign	ature	Notary Print		
Notary Stamp/	HOLLY C. HANOVER Commission # GG 17 Expires May 18, 202 Bonded Thru Troy Fain Ins	7 646 6 2		

Detail by Entity Name

Florida Profit Corporation

T-PRICE CORP.

Filing Information Document NumberP03000114143 FEI/EIN Number57-1190597 Date Filed10/09/2003 StateFL StatusACTIVE Principal Address 1910 SW SR 47 Lake City, FL 32025

Changed: 02/04/2021 Mailing Address P.O. BOX 1733 LAKECITY, FL 32056

Changed: 01/25/2022 Registered Agent Name & Address BULLARD, AUDREY S 1910 SW SR 47 Lake City, FL 32025

Name Changed: 02/20/2012

Address Changed: 02/04/2021 Officer/Director Detail Name & Address

Title DP

MC ARDLE, ELIZABETH P.O. BOX 1733 LAKECITY, FL 32056

Title Director

BULLARD, CHRIS A P.O. BOX 1432 LAKE CITY, FL 32056

Title Director, Secretary, Treasurer, VP

BULLARD, AUDREY S P.O. BOX 1733 LAKE CITY, FL 32056

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _

CONTRACTOR Ernest Scott Johnson PHONE 352-494-8099

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

James & Cynthia Hines

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.

ELECTRICAL	Print Name	James Dale Williams	Signature_	
	License #:E	EC 13007092		386-362-2035
		Qualifier Form Attached	A	
MECHANICAL/		Timothy Shatto CAC 057875 Qualifier Form Attached		386-496-8224

Qualifier Forms cannot be submitted for any Specialty License.

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



COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS 135 NE Hemando 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 form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) 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 Person Authorized	Signature of Authorized Person
1. Dale Burd	1. 1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Vicense Holders Signature (Notarized)

300 7092 1-07-19

NOTARY INFORMATION: STATE OF _____Florida COUNTY OF: Columbia The above license holder, whose name is time s personally appeared before me and is known by me or has produced identification 7th day of (type of I.D.) on this 20 19 a RY'S SIGNATURE Seal/Stamp CHARLOTTE R. HARROLD fotary Public - State of Florida Commission # FF 982567

Comm. Expires Jun 16, 2020 wed through National Notary Assn.



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I. Timothy Shatto

for Shatto Heat & Air

_(license holder name), licensed qualifier

_(company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person		
1. Bo Royals	1. toph		
2. Dale Burd	2.000		
3.	3.		
4.	4.		
5	5.		

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized)	CAC 057875 License Number	2/22/18 Date
NOTARY INFORMATION: STATE OF: Florida COUNTY O	F: Union	
The above license holder, whose name is personally appeared before me and is known b (type of I.D.)	mothy D Shatts by me or has produced identification in this 22 day of February	, 20 <u>18</u> .
NOTARY'S SIGNATURE	(Seal/Stame)	VICTORIA K. PALMER
		Notary Public - State of Florida Commission # FF 207489 My Comm. Expires Mar 9, 2019 Bonded through National Notary Asso

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		Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Typical pier spacing lateral l	-	Manufacturer 2011/04/T Length x width 80 × 28 Double wide	Mobile Phone # 352-494-8099 of home SWSHRPARA WAY stalled i NUC HE AND WAY	Installer Ernest Scott Johnson License # IH-1025249 New Home	PERMIT NUMBER
Opening	Libeam pier pad size PehMy for pier pad size Other pier pad sizes (required by the mfg.) Draw the appr wall openings symbol to sho List all marriage wall and their pier pad size) osf) osf) osf) osf) osf	Footer size (sq in)	Triple/Quad Roof System:	e wide	installed is install	forme	-
5.5 1 1 1 1 1 1 1 1 1 1 1 1 1	Libeam pier pad size PehMeter pier pad size or 1 Other pier pad sizes (required by the mfg.) Draw the approximate loc wall openings 4 foot or gn wall openings 4 foot or gn and their pier pad sizes below.	1500 psf 4'.6" 2000 psf 6' 2500 psf 7'.6" 3000 psf 8' 3500 psf 8' 3500 psf 8' 3500 psf 8' 3500 psf 8'	PIER SI 16" x 16" (256)	< 7		to the Ma ed in acco	Q	
PONENTS VICe (LS	PIER PAD SIZES 1-beam pier pad size 23×31 7.6 PehMeter pier pad sizes 17.5 × 15.5 Other pier pad sizes 17.5 × 15.5 (required by the mfq.) 17.5 × 15.5 Image: Symbol to show the piers. 17.5 × 15.5 List all marriage wall openings greater than 4 fool and their pier pad sizes below. 17.5 × 15.5	4 6' 8' 8' 1 pier spacing table	PIER SPACING TABLE FOR USED HOMES 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" (256) 1/2" (342) (400) (484)"	Serial #	Wind Zone II	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	Used Home	
size	IT-5×25.5 IT-5×25.5 locations of marriage r greater. Use this ers.	α ^τ α ^τ α ^τ α ^τ η	20" × 20" (400)	Hinged	al# ⊴	stallation Nulle 15-C		
4 ft FRAME TIES within 2' of end of home spaced at 5' 4" oc Sidewall Longitudinat Marriage wall Shearwall Shearwall 10 10 10 10 10 10 10 10 10 10	Pa Pa 16 18 18 17 17 17 17 17 17 17 20	01 05 05 05 05 05 05 05 05 05 05 05 05 05	24" X 24" 26" (576)* (6	1.000 MHS 20120 AS	Wind Zone II			page 1 of 2
				H	× .			

BRE LOUIS TO PLANDER STATE

Electrical 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 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	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-botting capacity. Installer's initials ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name MASSUM-CA SILVEY (101 V Date Tested	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.	2. Take the reading at the depth of the lowest 3. Using 500 lb. increments, take the lowest reading and round down to that increment.	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil X U Ownthut testing A D Ownthut testi	PERMIT NUMBER
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 Christer and Christer Date 208	The bottomboard will be repaired and/or taped. Yes P9. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes Skirling to be installed. Yes Miscellaneous Dryer vent installed outside of skirling. Yes N/A Range downflow vent installed outside of skirling. Yes N/A Drain lines supported at 4 foot intervals. Yes N/A Electrical crossovers protected. Yes Yes	Type gasker Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes Weatherproofing	Gasket weatherpools requirement of all new and used homes and that condensation, mold, meldew 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	Floor. Type Fastener. Image: Matural Swale Pad Other Water drainage: Natural Fastening multi wide units Fastener. Image: Mage: Spacing: 20 Water Type Fastener. Image: Spacing: 20 Fastener. Image: Spacing: 20 Water Type Fastener. Image: Spacing: 20 Fastener. Image: Spacing: 20 Roof: Type Fastener. Image: Spacing: 20 Spacing: 20 For used homes a win. 30 gauge. 8" wide, galvanized metal strip Spacing: 20 Image: Space 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. Image: Space metal strip	Site Preparation





ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

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