

Revision

54

cat# 43273

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official JWA Building Official JWA
AP# 1908-03 Date Received 8/1/19 By MB Permit # 38483
Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category A8
Comments Floor one foot above the road
Special Temp use permit for Son
FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0586 ☒ Well letter OR
☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid
☐ DOT Approval ☐ Parent Parcel # _____ Writing on app - fee not paid
☐ Ellisville Water Sys ☒ Assessment STUP-MH 1908-46 ☒ 911 App
☐ Out County ☐ In County ☒ Sub VF Form 30 front
paid for 1 home 25 side rear

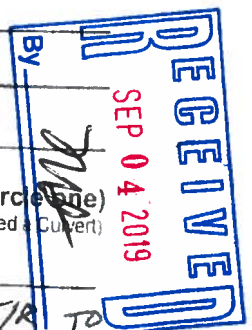
Property ID # 36-65-16-04076-138 Subdivision Parkway Woods S/D Lot# 38

- New Mobile Home ☒ Used Mobile Home _____ MH Size 16x76 Year 2020
- Applicant PAUL BARNEY Phone # 386-209-0906
- Address 466 S.W. DEP. J. DAVIS LN, LAKE CITY, FL 32024
- Name of Property Owner MASON, EARL & NANCY Phone# 772-267-6393
- 911 Address 188 S.W. OLD NIBLACK AVE, FT. WHITE, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home EARL & KENDRA MASON Phone # 772-267-6393
Address 190 S.W. OLD NIBLACK AVE, FT. WHITE, FL 32038
- Relationship to Property Owner SON & DAUGHTER-IN-LAW
- Current Number of Dwellings on Property 1
- Lot Size 5 Total Acreage 5.53
- 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 NO
- Driving Directions to the Property I-75 SOUTH TO 441 TR 60 TO CR-18 TR TO
S.W. OLD NIBLACK, T/L TO SITE ON RIGHT @ 190 SW OLD NIBLACK
AVE.
- Name of Licensed Dealer/Installer William R Price Phone: 386-963-4295
- Installers Address 3340 150th Place Lake City, FL 32024
- License Number 1H-1041936 Installation Decal # 63762

Reviewed New
Blocking Diagram
9/4/19 JWA

LT- Emailed Paul 8-7-19

843.83 total including
STUP



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

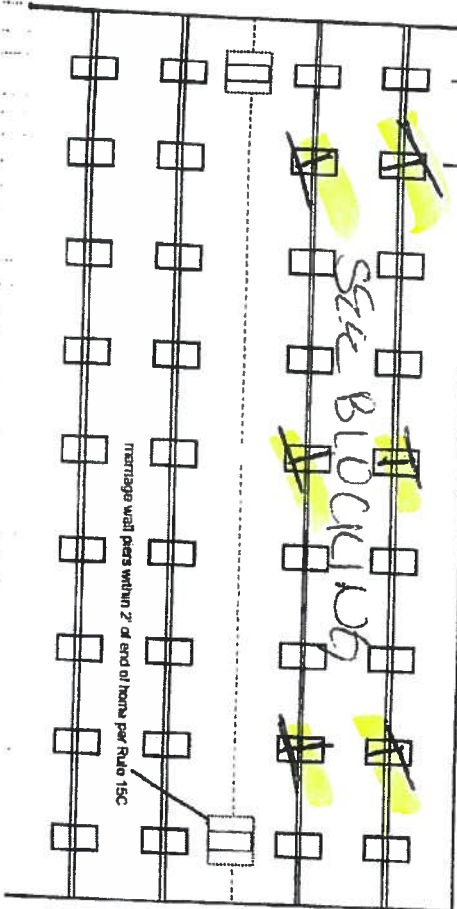
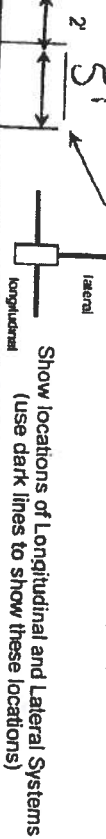
Installer: William Paul License # 14-104931
Address of home being installed: 188 SW Old Apple Ave

Manufacturer: LCM Length x width: 16x76

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. Understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Typical pier spacing

Installer's Initials: WPA



67110LV
Oliver System

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 # 63762

Triple/Quad ☐ Serial # LDH6421934731

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	18' 1/2" x 18' 1/2" (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 17x25
Perimeter pier pad size 16x16
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.

POPULAR PAD SIZES

Pad Size	Sq ft
16 x 16	256
16 x 18	288
18.5 x 18.5	342
18 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

ANCHORS

Opening Large Pier pad size 23x31

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver

OTHER TIES

Sidewall _____ Number 14
Longitudinal Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 385 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 all sidewall locations. I understand 5 ft. anchors are required at all centerline locations where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

William R. Prie

Date Tested

9/14/19

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 90570 lbs
Water drainage: Natural Swale Pad X Other

Fastening multi wide units

Floor/Walls/Roof	Type Fastener	Length	Spacing
	Type Fastener	Length	Spacing
	Type Fastener	Length	Spacing

For used Debris a min. 3/8 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)

I 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

Type gasket Pg. ✓

Installed:
Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

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 ✓

Miscellaneous

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: ✓

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

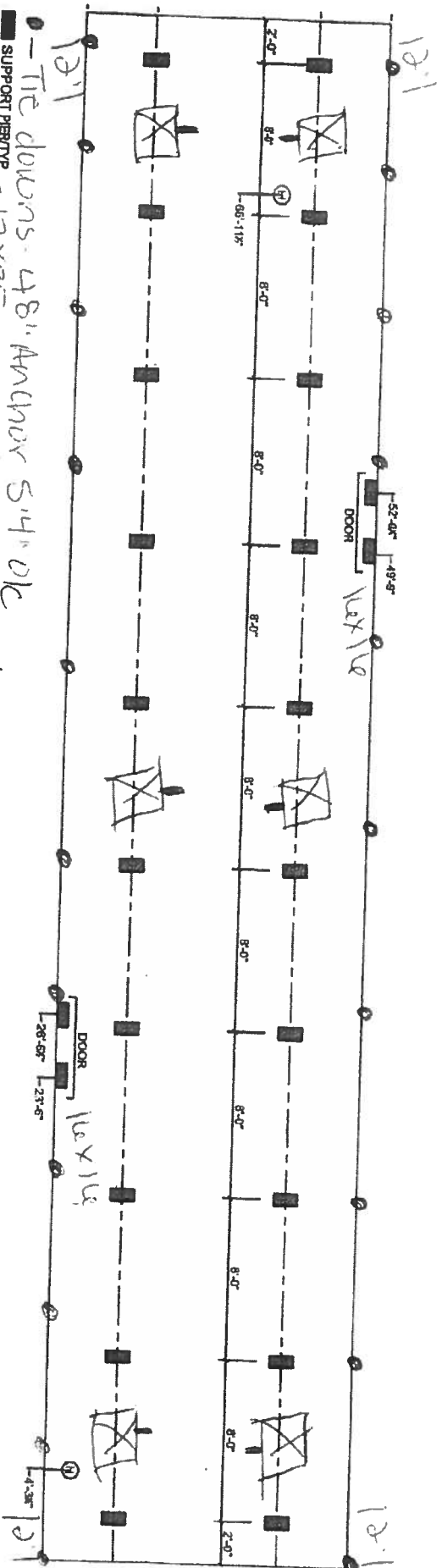
Installer Signature

William R. Prie

Date

9/14/19

BOLT



0 - Tie downs 48" Anchor 5'4" O.C.
 SUPPORT PIER/TYP - 17x25 ABS w/ 6x8x16 S.O.C.

11-25-2013

FOUNDATION NOTE:
 - THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS 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.

Live Oak Homes
 MODEL: L-57631 - 16 X 80
 3-BEDROOM / 2-BATH

All perimeter 1 floors
 16x16 ABS w/ 6x8x16

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (MOPT. HEAT PUMP OR DUCT)
- (J) SUPPLY AIR (MOPT. HEAT PUMP OR DUCT)

L-57631

Janice Williams

From: Paul Barney <paul@freedomhomesinc.com>
Sent: Wednesday, September 04, 2019 11:32 AM
To: Janice Williams
Cc: Steve Smith
Subject: RE: Mason job

We changed set up contractors to accommodate our customers. Between the weather issues and off line production date at our manufacturing plants, we find that our set-up crew can't keep up with the demand and expectations of our customers. So at times we find it necessary to make adjustments to keep on track.

Paul Barney

Freedom Homes

O: 386-752-5355
C: 386-209-0906
F: 386-752-4757
E: paul@freedomhomesinc.com

From: Janice Williams <janice_williams@columbiacountyfla.com>
Sent: Wednesday, September 4, 2019 10:03 AM
To: Paul Barney <paul@freedomhomesinc.com>
Subject: Mason job
Importance: High

Good morning Paul,

Please email me a brief statement as to why the change of installer for the Mason's mobile home set up.....

Thanks!

CONFIDENTIALITY NOTICE: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential, proprietary, and/or privileged information protected by law. If you are not the intended recipient, you may not use, copy, or distribute this e-mail message or its attachments. If you believe you have received this e-mail message in error, please contact the sender by reply e-mail and telephone immediately and destroy all copies of the original message.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

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 Comments Floor one foot above the road
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 FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0586 ☒ Well letter OR
☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid
☐ DOT Approval ☐ Parent Parcel # _____ waiting on APP-fee not paid
☐ Ellisville Water Sys ☒ Assessment paid for 1 home ☐ STUP-MH 1908-46 ☒ 911 App
☐ Out County ☐ In County ☒ Sub VF Form 30 front 25 sides rear

Property ID # 36-65-16-04076-138 Subdivision PARKER Woods S/D Lot# 38

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 (Circle One) - Suwannee Valley Electric - Duke Energy
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 (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 NO
- Driving Directions to the Property I-75 SOUTH TO 441 T/R GO TO CR-18 T/R TO S.W. OLD NIBLACK, T/L TO SITE ON RIGHT @ 190 SW OLD NIBLACK AVE.
- Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-344-3645
- Installers Address 353 SW MAULDIN AVE, LAKE CITY, FL 32024
- License Number 1H-1129420 Installation Decal # 63995

LH- Emailed Paul 8-7-19

843.83 total Including STUP

AFFIDAVIT AND AGREEMENT OF SPECIAL
TEMPORARY USE FOR IMMEDIATE
FAMILY MEMBERS FOR
PRIMARY RESIDENCE

STATE OF FLORIDA
COUNTY OF COLUMBIA

Inst: 201912018998 Date: 08/16/2019 Time: 12:02PM
Page 1 of 2 B: 1391 P: 1198, P. DeWitt Cason, Clerk of Court
Columbia, County, By: LK
Deputy Clerk



BEFORE ME the undersigned Notary Public personally appeared.

EARL MASON, the Owner of the parcel which is being used to place an additional dwelling (mobile home) as a primary residence for a family member of the Owner, and EARL L. MASON, the Family Member of the Owner, who intends to place a mobile home as the family member's primary residence as a temporarily use. The Family Member is related to the Owner as SON, and both individuals being first duly sworn according to law, depose and say:

1. Family member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit and Agreement.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 36-65-16-04076-138.
4. No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for 5 year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.
6. This Special Temporary Use Permit on Parcel No. 36-65-16-04076-138 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.
7. The site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.

8. The parent parcel owner shall be responsible for non ad-valorem assessments.
9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.
10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).
13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

Earl Mason
Owner

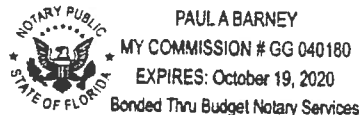
Earl L. Mason
Family Member

EARL MASON
Typed or Printed Name

EARL L. MASON
Typed or Printed Name

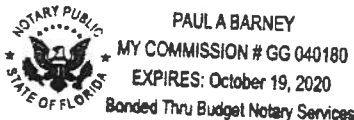
Subscribed and sworn to (or affirmed) before me this 16 day of AUGUST, 2019, by EARL MASON (Owner) who is personally known to me or has produced FL DR. LIC. as identification.

Paul A. Barney
Notary Public



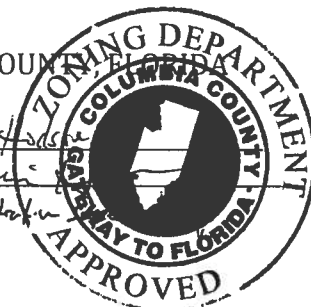
Subscribed and sworn to (or affirmed) before me this 16 day of AUGUST, 2019, by EARL L. MASON (Family Member) who is personally known to me or has produced FL DR. LIC. as identification.

Paul A. Barney
Notary Public



COLUMBIA COUNTY, FLORIDA

By: *Laurie Foster*
Name: *Laurie Foster*
Title: *Administrator*



0070	CARPORT UF	2010	\$600.00	1.000	0 x 0 x 0	(000.00)
0080	DECKING	2010	\$400.00	1.000	0 x 0 x 0	(000.00)
0020	BARN,FR	2010	\$1,800.00	1.000	0 x 0 x 0	(000.00)

▼ **Land Breakdown**

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000200	MBL HM (MKT)	5.530 AC	1.00/1.00 1.00/1.00	\$4,407	\$24,368
009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$3,250	\$3,250

Search Result: 1 of 1

© Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com

Legend

Parcels

2018Aerials

Addresses

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

LidarElevations

X



Roads

Roads

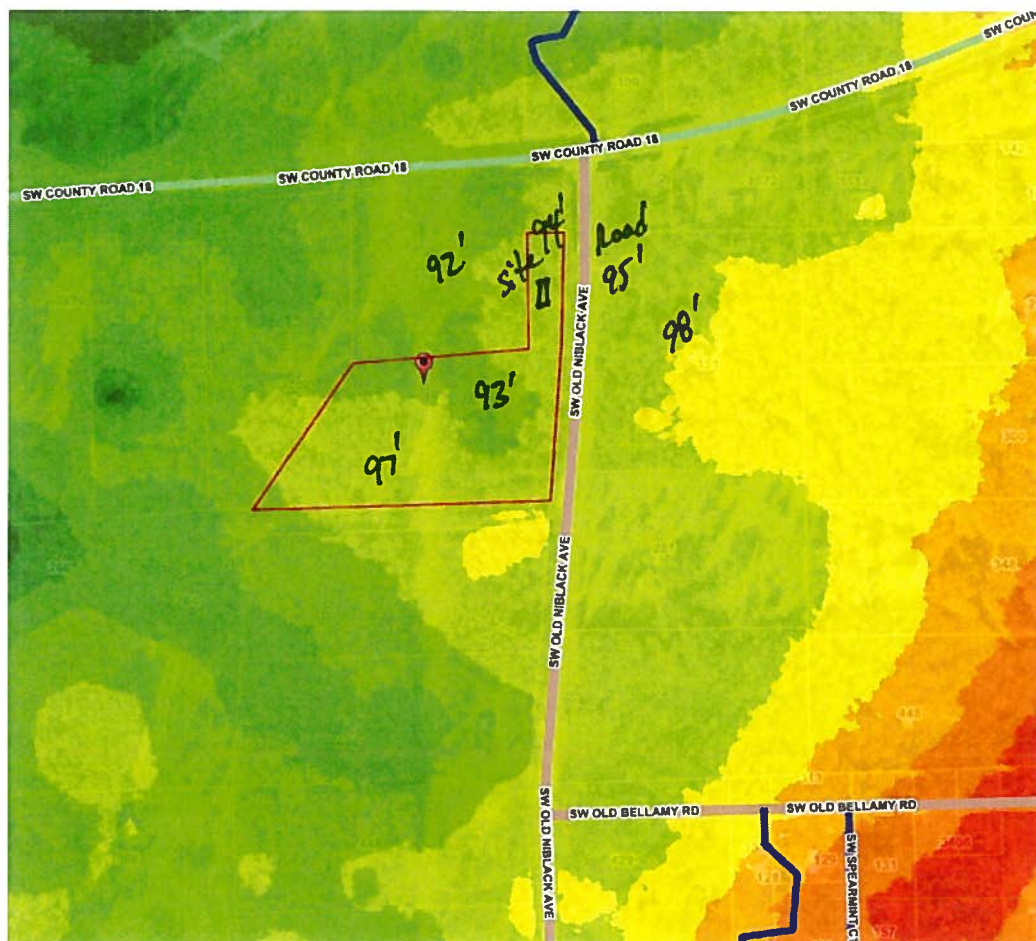
others

Dirt

Interstate

Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Aug 07 2019 12:23:59 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 36-6S-16-04076-138

Owner: MASON EARL & NANCY

Subdivision: PARKER WOODS

Lot:

Acres: 5.529158

Deed Acres: 5.53 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones:

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 implied 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.

Legend

Parcels

2018Aerials

Addresses

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

Private

SRWMD Wetlands

Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Aug 07 2019 12:29:23 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 36-6S-16-04076-138

Owner: MASON EARL & NANCY

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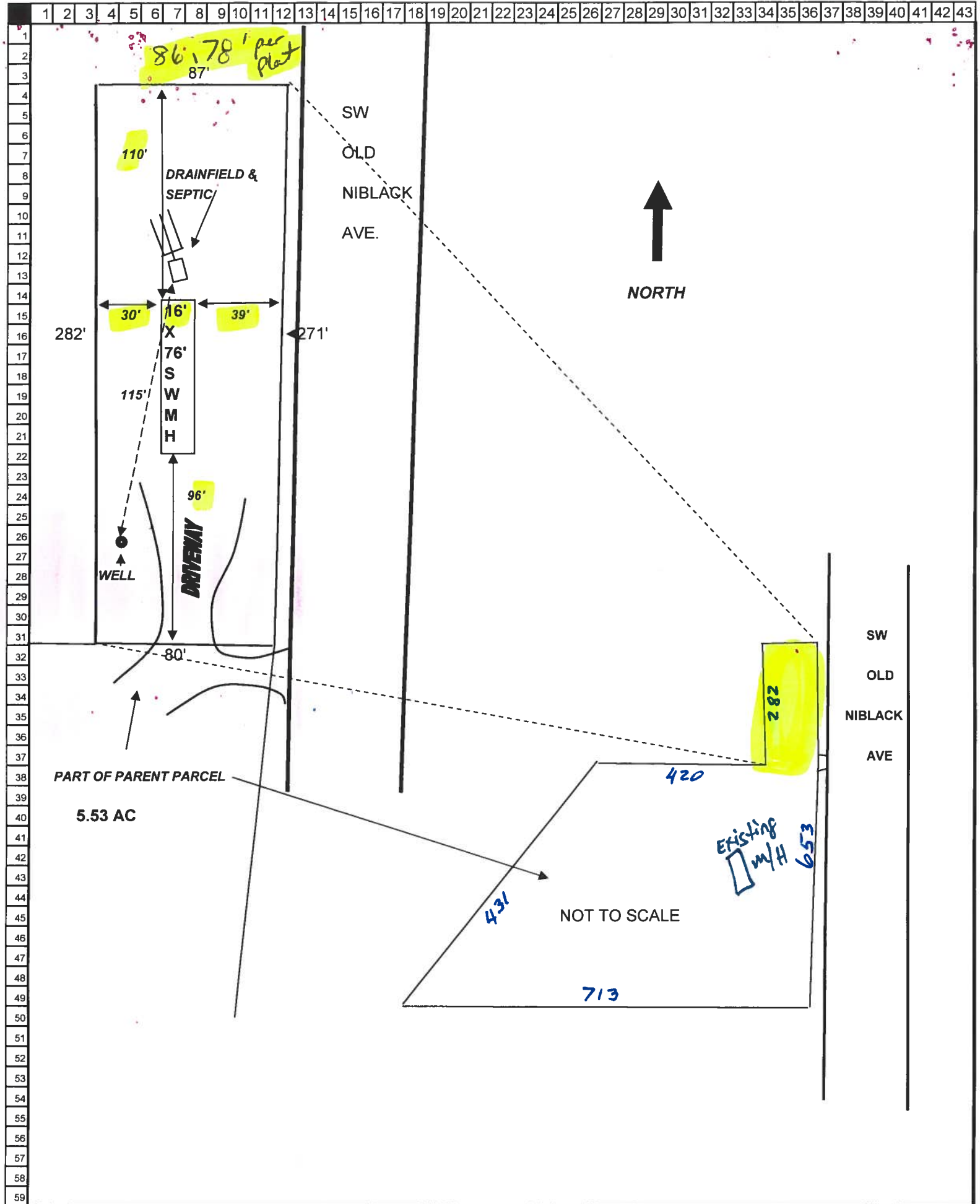
Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

Existing mobile home
on property.
(Need STUP or
STLP.)

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PLAT BOOK 6
PAGE 80-8

PARKER WOODS

A SUBDIVISION IN
SECTIONS 35 AND 36, T6-S, R16-E
COLUMBIA COUNTY, FLORIDA

SHEET 3 OF 3



License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 4017	Label #: 63995	Manufacturer: <u>Live Oak</u>	(Check Size of Home)
Homeowner: <u>MASON</u>		Year Model:	Single <input checked="" type="checkbox"/>
Address: <u>TBD - Old N. Black Ave</u>		Length & Width: <u>76x16</u>	Double <input type="checkbox"/>
City/State/Zip: <u>Ft White FL 32036</u>		Type Longitudinal System: <u>OTI</u>	Triple <input type="checkbox"/>
Phone #: <u>772-267-6393</u>		Type Lateral Arm System: <u>OTI</u>	HUD Label #:
Date Installed: <u>7-26-19</u>		New Home: <input type="checkbox"/> Used Home: <input type="checkbox"/>	Soil Bearing / PSF:
Installed Wind Zone: <u>II</u>		Data Plate Wind Zone: <u>II</u>	Torque Probe / in-lbs:
			Permit #:

Note:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

63995

LABEL #	DATE OF INSTALLATION
DAVID E ALBRIGHT	
NAME	
IH / 1129420 / 1	4017

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1908-03 CONTRACTOR David Albright 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.

ELECTRICAL ✓ 1074	Print Name <u>WHITTINGTON ELECTRIC</u> License #: <u>EC13002957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386 972 1700</u>
MECHANICAL/ A/C <u>1669</u>	Print Name <u>STYLECREST</u> License #: <u>CAC1817658</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>850-769-1453</u>

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
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, DAVID ALBRIGHT, give this authority for the job address show below
Installer License Holder Name

only, _____, 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)
PAUL A. BARNEY	<i>Paul A. Barney</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
STEVE SMITH	<i>Steve Smith</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Property Owner
LINDA PENHALIGON	<i>Linda Penhaligon</i>	<input checked="" 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.

David Albright 1H1129420 7-31-2019
License Holders Signature (Notarized) License Number Date

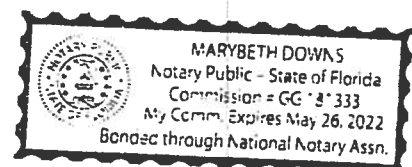
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

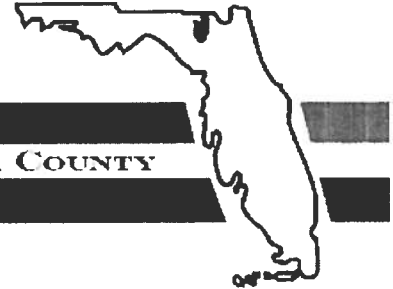
The above license holder, whose name is David Albright, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 31 day of July, 2019.

Marybeth Downs
NOTARY'S SIGNATURE

(Seal/Stamp)



District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

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: **8/8/2019 7:54:52 PM**
Address: **188 SW OLD NIBLACK Ave**
City: **FORT WHITE**
State: **FL**
Zip Code **32038**

Parcel ID **04076-138**

REMARKS: Address for proposed structure on parcel. 2nd address for this parcel.

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

PAT LYNCH
LYNCH DRILLING CORP
P O Box 934
Branford, FL 32008
(386)935-1076

DATE 8-8-19

CUSTOMER Earl Mason
Old Niblack Ave
Ft. White, FL 32088

LOCATION 36-65-16-041076-138

WE WILL CONSTRUCT A 4" WATER WELL COMPLETE WITH 4" WATER WELL STEEL CASING, 1HP SUBMERSIBLE PUMP WITH 1 1/4" DROP PIPE, AND AN 85 GALLON CAPTIVE AIR TANK (21.9 GALLON DRAWDOWN).

WELL WILL BE COMPLETE AT THE WELL SITE, WE DO NOT INCLUDE ELECTRICAL NOR PLUMBING CONNECTIONS FROM THE WELL TO THE HOME AND/OR POWER POLE.

ANY VARIATIONS OF THE ABOVE ARE SUBJECT TO APPROVAL FROM THE CUSTOMER AND/OR CONTRACTOR PRIOR TO COMMENSMENT OF THE INDIVIDUAL JOB.

THANK YOU

NOT RESPONSIBLE FOR THE QUALITY OF WATER

New Columbia



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

PERMIT NO. 19-0586
DATE PAID: 8/11/19
FEE PAID: 310.00
RECEIPT #: 1420256

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Earl Mason

(Freedom)

AGENT: Robert W Ford Jr NFST INC.386
TELEPHONE: 755-6372MAILING ADDRESS: 741 SE STATE RD 100 LC FIA 32025

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105 (3) (a) 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: 38 BLOCK: - SUBDIVISION: Parker PLATTED: 2009PROPERTY ID #: 310-65-10-040710-138 ZONING: MH I/M OR EQUIVALENT: ☐ Y / ☐ NPROPERTY SIZE: 5.53 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPDIS SEWER AVAILABLE AS PER 381.0063, FS? ☒ Y / ☐ N DISTANCE TO SEWER: FTPROPERTY ADDRESS: 190 SW Old Niblack Ave, FT WhiteDIRECTIONS TO PROPERTY: Hwy 47 S to Hwy 27 TL Follow to CR 18 TL Follow to SW Old Niblack + R Follow to site on Right (1st on Right)

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>M Home</u>	<u>3</u>	<u>1130</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)SIGNATURE: Robert W Ford JrDATE: 7/26/19

DE 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT**

Permit Application Number

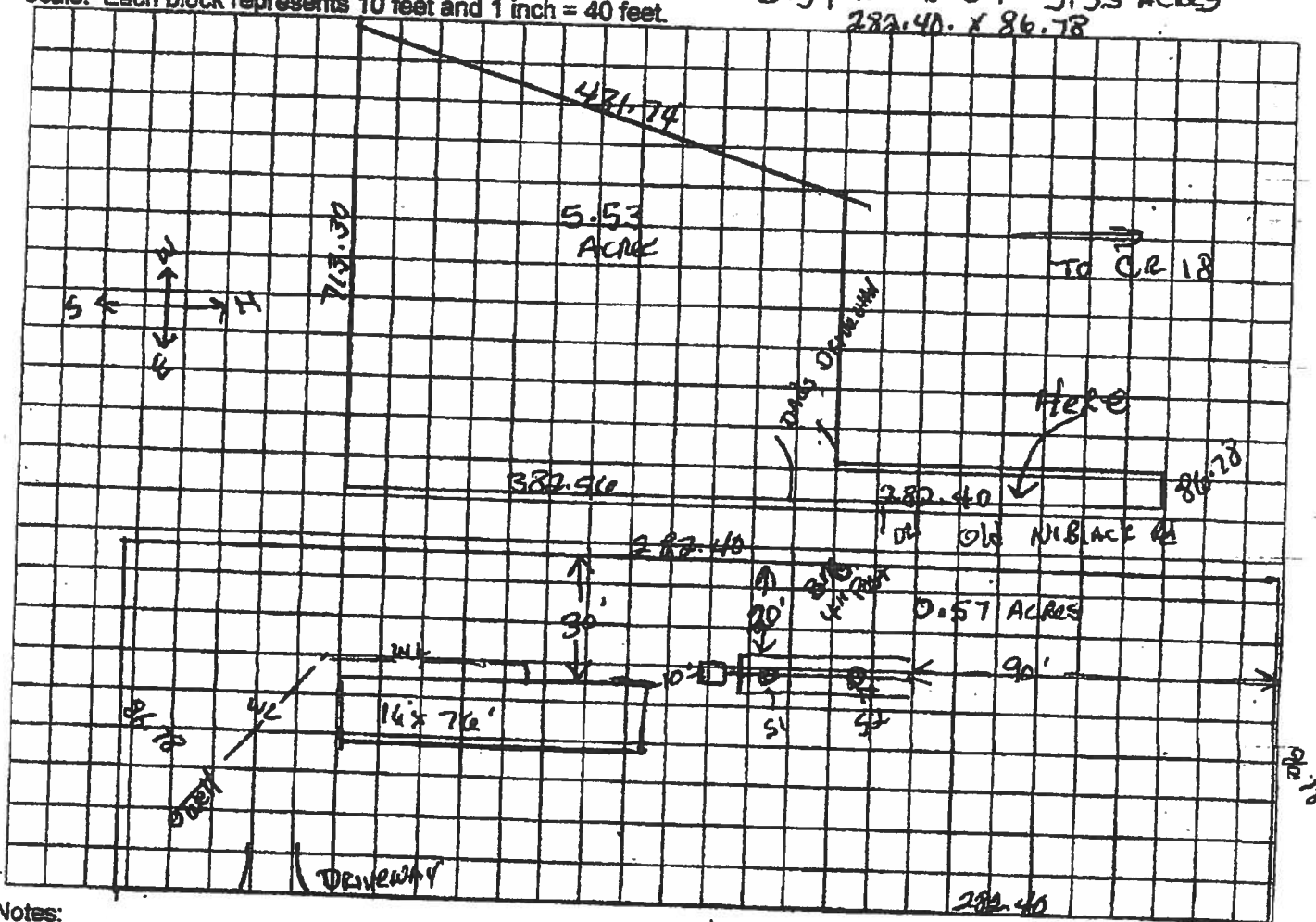
MASON

19-0586

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.

0.57 ACRES of 5.53 ACRES
282.40' x 86.78'



Notes:

SW Old Hi Black Rd

Site Plan submitted by: Rahim W. Fard, Jr. - DATE 7/26/19
Plan Approved: ✓

Plan Approved

Not Approved

Date 8/6/19

By

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT