

PERMIT WORKSHEET

PERMIT NUMBER

Installer Rusty Knowles License # IH 1038219

Installer Mobile Phone # 386-397-0886

Address of home being installed

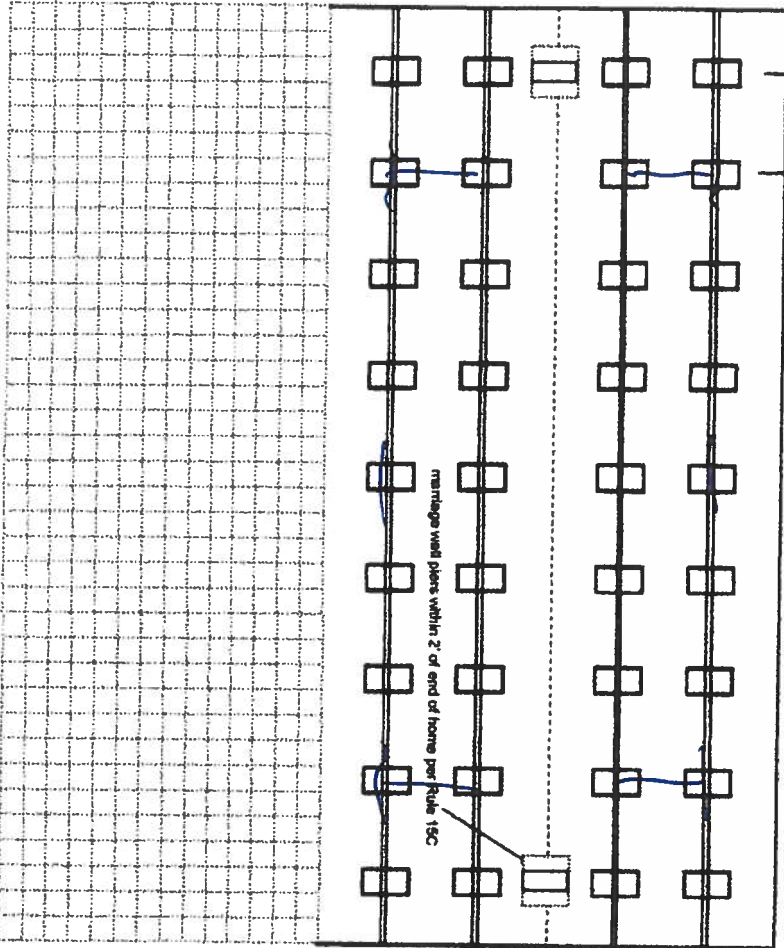
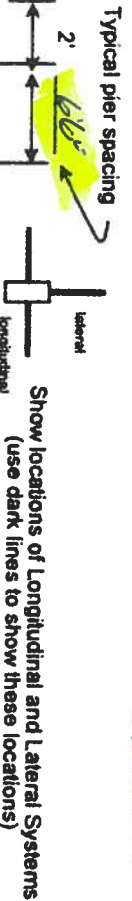
1413 NE Greenbush Road
Kale City, FL 32055

Manufacturer Line OAL Length x width 32x80

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)
where the sidewall ties exceed 5 ft 4 in.

Installer's initials RK



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 # 61139

Triple/Quad ☐ Serial # ADHGA3191220AR

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Foeder size (sq in)	16' x 16' (256)	18 1/2' x 18 (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'	9'
1500 psf	4' 6"	6'	7'	8'	9'	10'	11'
2000 psf	6'	8'	9'	10'	11'	12'	13'
2500 psf	7' 6"	9'	10'	11'	12'	13'	14'
3000 psf	8'	10'	11'	12'	13'	14'	15'
3500 psf	8'	10'	11'	12'	13'	14'	15'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 23 1/4 x 3 1/4

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) 16x14

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.

Opening 11' Pier pad size fixed

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Direct Tie-down Inc. - G

OTHER TIES

Side wall

Longitudinal Marriage wall

Shearwall

Number of ties

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

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page 2 of 2

POCKET PENETROMETER TEST

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

X 12 X 5 X 5

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 12 X 5 X 5

TORQUE PROBE TEST

The results of the torque probe test is 114 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 the sidewall locations. 1 understand 5 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 require anchors with 4000 lb holding capacity.

ALL Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Bucky L. Burkholder

Date Tested 8.21.19

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. 15C-1

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C-1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C-1

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☐

Fastening multi wide units

Floor: Type Fastener: LAGS Length: 6" Spacing: 20"
Walls: Type Fastener: 5/8" Length: 4" Spacing: 24"
Roof: Type Fastener: 5/8" Length: 1 1/4" Spacing: 18"
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.

Gasket (weatherstripping, sealant, etc.)

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 ALL

Type gasket 15C-1

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 15C-1
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

Miscellaneous

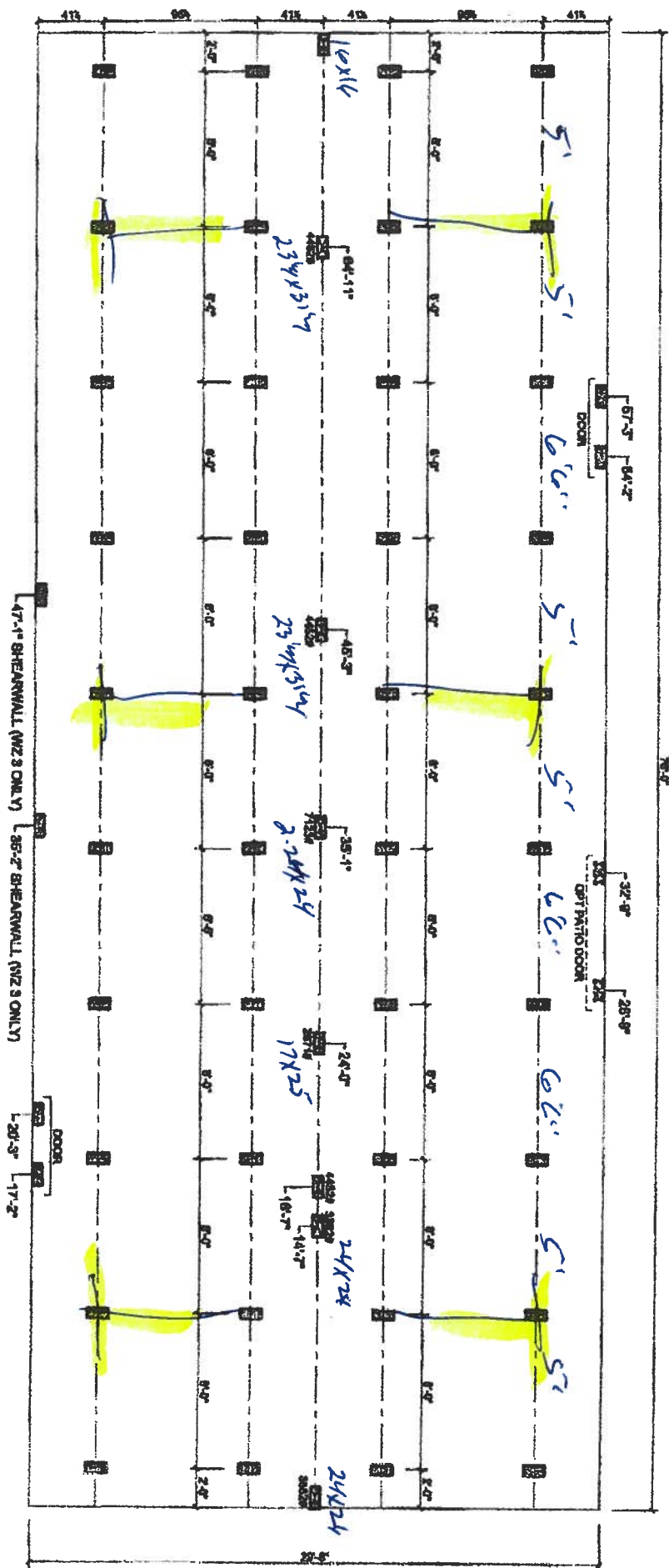
Skirting to be installed. Yes ☒ No ☐
Dryer vent installed outside of skirting. Yes ☐ N/A ☒
Range downflow vent installed outside of skirting. Yes ☐ N/A ☒
Drain lines supported at 4 foot intervals. Yes ☒
Electrical crossovers protected. Yes ☒
Other: ☐

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 [Signature]

Date 8.21.19

52



MAFBRAGE LINE OPENING SUPPORT PIER/TYP.
SUPPORT PIER/TYP

FOUNDATIONAL NOTES:

* THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE, AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL, AND ITS SUPPLEMENTS.
* FLOORING AND CEILING ARE SHOWN FOR EXAMPLE, BUT ARE NOT NECESSARY. ANY FLOORING OR CEILING MUST BE USED BASED ON PAID TYPE, SOIL CONDITION, ETC.
* FOOTINGS ARE REQUIRED AT SUPPORT POINTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

01402478

Live Oak Homes
MODEL: D-3764W - 32 X 76
4-BEDROOM / 2-BATH

06/2010 4:24:20 PM

D-3764W

Parcel: **28-3S-17-05628-000****Owner & Property Info**

Result: 1 of 1

Owner	MORRISSETTE DENISE 136 NE DERBY TER LAKE CITY, FL 32055 .		
Site	,		
Description*	COMM SE COR OF NE1/4 OF SW1/4, RUN N 29.8 FT TO N R/W OF CR-252A, RUN W ALONG R/W 470 FT FOR POB, CONT W 105 FT, N 275 FT, W 36.8 FT TO GRADED RD, NE ALONG RD 142.5 FT, E 93 FT, S 407.72 FT TO POB. (TRACT 5 IN NE1/4 OF SW1/4) ORB 539-381, 921-218, TD 1054- ...more>>>		
Area	1 AC	S/T/R	28-3S-17
Use Code**	VACANT (000000)	Tax District	2

*The [Description](#) above is not to be used as the Legal Description for this parcel in any legal transaction.

**The [Use Code](#) 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

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$9,253	Mkt Land (1)	\$9,253
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$9,253	Just	\$9,253
Class	\$0	Class	\$0
Appraised	\$9,253	Appraised	\$9,253
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$9,253	Assessed	\$9,253
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$9,253 city:\$9,253 other:\$9,253 school:\$9,253	Total Taxable	county:\$9,253 city:\$9,253 other:\$9,253 school:\$9,253

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM



APPLICATION NUMBER MOB-85 CONTRACTOR Rusty Knowles PHONE 386-397-0886

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

Denise Morrisette

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 1503	Print Name <u>Leo Jackson</u>	Signature 
	License #: <u>ES 12001176</u>	Phone #: <u>386-294-2993</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
✓ MECHANICAL/ A/C 950	Print Name <u>Michael Boland</u>	Signature 
	License #: <u>CAC 1817716</u>	Phone #: <u>352-274-9326</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

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

LICENSED QUALIFIER AUTHORIZATION

I, Leo G Jackson (license holder name), licensed qualifier for Country Electric LLC (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. <u>Davis Burd</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3. <u>Leo Jackson Jr.</u>	3. <u>[Signature]</u>
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, employees(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.

[Signature]
 Licensed Qualifiers Signature (Notarized)

ES12001176
 License Number

4/26/16
 Date

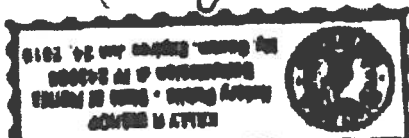
NOTARY INFORMATION:

STATE OF: FLORIDA COUNTY OF: Columbia

The above license holder, whose name is Leo G Jackson personally appeared before me and is known by me or has produced identification (type of I.D.) FL ID on this 26 day of April, 2016.

[Signature]
 NOTARY'S SIGNATURE

(Seal/Stamp)





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, Michael A Boland (license holder name), licensed qualifier
for ACE A/C of Ocala, LLC (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. <u>DAVE EARD</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Rocky Ford</u>	3. <u>[Signature]</u>
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.

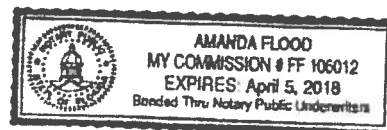
[Signature] License Number CAC1817716 Date 11/17/15
Licensed Qualifiers Signature (Notarized)

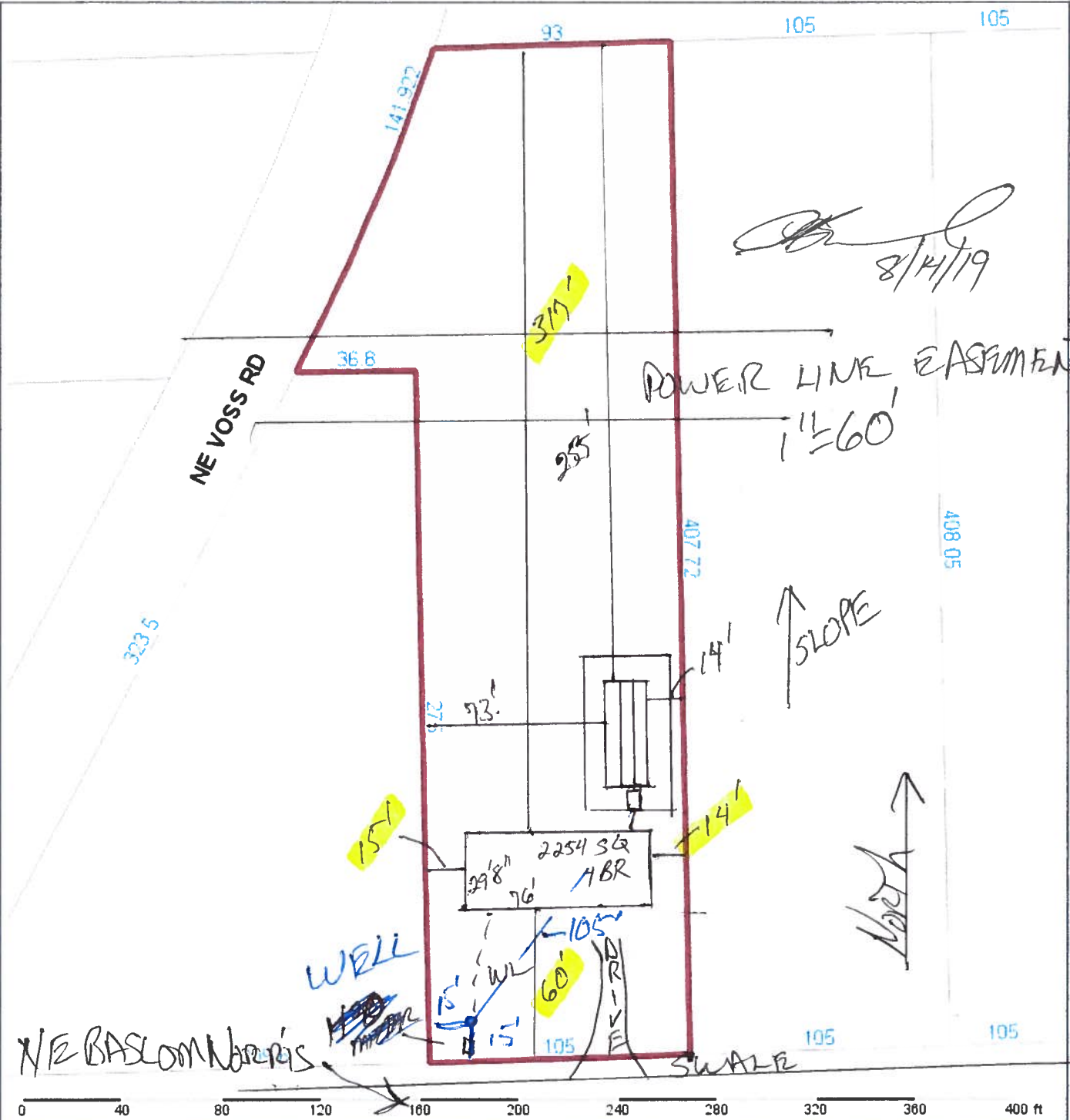
NOTARY INFORMATION:
STATE OF Florida COUNTY OF Marion


The above license holder, whose name is Michael A. Boland
personally appeared before me and is known by me or has produced identification
(type of I.D.) TM on this 17th day of November, 20 15

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





Columbia County Property Appraiser Jeff Hampton Lake City, Florida 386-758-1083									
PARCEL: 28-3S-17-05628-000 VACANT (000000) 1 AC						NOTES:		 Columbia County, FL	
COMM SE COR OF NE 1/4 OF SW 1/4, RUN N 29.8 FT TO N R/W OF CR-252A, RUN W ALONG R/W 470 FT FOR POB, CONT W 105 FT, N 275 FT, W 36.8 FT TO GRADED RD, NE									
MORRISSETTE DENISE						2018 Certified Values			
Owner: 136 NE DERBY TER LAKE CITY, FL 32055		Mkt Lnd		\$9,253	Appraised	\$9,253			
Site:		Ag Lnd		\$0	Assessed	\$9,253			
Sales		Bldg		\$0	Exempt	\$0			
Info		XFOB		\$0	Total Taxable	county:		\$9,253	
4/3/2019 \$7,000 V (Q)		Just		\$9,253		city:		\$9,253	
8/8/2006 \$3,000 V (U)						other:		\$9,253	
9/26/2000 \$100 V (U)						school:		\$9,253	

Legend

Parcels

2018Aerials

Addresses

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

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LidarElevations

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Roads

Roads

others

Dirt

Interstate

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Aug 29 2019 13:14:20 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 28-3S-17-05628-000

Owner: COOK DON SR & BETTY

Subdivision:

Lot:

Acres: 1.04086542

Deed Acres: 1.04 Ac

District: District 4 Toby Witt

Future Land Uses: Residential - Low

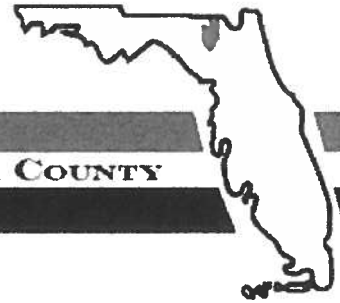
Flood Zones: A

Official Zoning Atlas: RSF/MH-2

Possible wetland area
as shown on areal map
on Property Map
explorer.

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.

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: **8/19/2019 6:06:10 PM**
Address: **1413 NE BASCOM NORRIS Dr**
City: **LAKE CITY**
State: **FL**
Zip Code **32055**

Parcel ID **05628-000**

REMARKS: Address for proposed structure on 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

A & B Well Drilling, Inc.
5673 NW Lake Jeffery Road
Lake City, FL, 32055
(O) 386-758-3409
(F) 386-758-3410
(C) 386-623-3151

8/22/2019

To: Columbia County Building Department

Description of well to be installed for Customer: Marietta
Located at Address: 1413 NIE Biscayne Ave. LC, FL

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park
Sincerely
Bruce Park
President



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

PERMIT NO.
DATE PAID:
FEE PAID:
RECEIPT #:

19-0646
8/20/19
318.88
143024

APPLICATION FOR:

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

APPLICANT: Denise Morrisette

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: NA BLOCK: NA SUB: NA PLATTED: _____

PROPERTY ID #: 28-3S-17-05628-000 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y / ☒ N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: NE Bascom Norris Dr Lake City FL

DIRECTIONS TO PROPERTY: 41 North Right on Bascom Norris 2nd lot on Left past Voss Rd

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	SF Residential	4	2254	
---	----------------	---	------	--

2				
---	--	--	--	--

3				
---	--	--	--	--

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Rocky Ford DATE: 8/20/2019

STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

19-0246

Morrisette

PART II - SITEPLAN

Scale: 1 inch = 40 feet.

Notes:

Site Plan submitted by:

Plan Approved

By

Not Approved

MASTER CONTRACTOR

Date 8/30/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015-06/09 (Obsoletes previous editions which may not be used)
(Stock Number: 5744-002-4015-6)

64E-6.001, FAE

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