Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Change of General Contractor Request

Property Owners Name: John Kent & Ashley Kent
Job Site Address: 2658 SW Ichetucknee Ave, LC, Fl, 32024

FOR OFFICE USE
DATE RECEIVED: _____
( ) APPROVED ( ) DENIED
COMPLETED CHANGE: ( ) YES
DATE PROCESSED: _____
PROCESSED BY: _____
NOTES: _____

Permit Information

- Permit #: 000054041
- Original General Contractor Name: John Nettles
- License #: IH/1143556
- New General Contractor Name: Robert Sheppard
- License #: IH/1025386

***Note:** If the property owner will now be acting as Owner-Builder, please check below and attach an Owner Disclosure Statement.

( ) The Owner will now be acting as Owner-Builder.

Reason for Change:

Important Information & Requirements

- This form must be fully completed and notarized by all parties as indicated below.
- A new building permit application must be submitted with the new contractor's notarized signature.
- Updated plans may be required depending on the scope of work and current permit status.
- Licensing and insurance documentation for the new contractor is required.
- If the original contractor's signature cannot be obtained, the property owner must submit a notarized letter affirming that the contractor has been terminated.
- Depending on the circumstances, a new permit may be required.

Hold Harmless Acknowledgement

The undersigned agree to indemnify and hold harmless the Columbia County Building Department, its officers, agents, and employees from any claim, action, or liability arising out of or related to this Change of Contractor.

Signatures *(All must be notarized)*

- **Property Owner**

Printed Name: John Kent Date: 10/30/2025
Signature: JKent
State: Florida County: Columbia
The foregoing instrument was acknowledged before me, by means of ( )physical presence or ( )online notarization, this 30th day of October, 2025, by John Kent, who is ( )personally known to me or (X) has provided the following identification: Florida Driver's License
Notary Printed Name: Valena Reed Driggers Notary Seal:
Notary Signature: Valena Reed Driggers

Notary Public State of Florida
Valena Reed Driggers
My Commission HH 698735
Expires 7/15/2029

- **Original Contractor**

Printed Name: John Nettles Date: 10/30/25
Signature: John Nettles
State: FL County: Columbia
The foregoing instrument was acknowledged before me, by means of (X)physical presence or ( )online notarization, this 30th day of October, 2025, by John Nettles, who is (X)personally known to me or ( )has provided the following identification: _____
Notary Printed Name: Rebekah Nettles Notary Seal:
Notary Signature: Rebekah Nettles

Rebekah Nettles
Comm.: HH 471198
Expires: Feb. 27, 2028
Notary Public - State of Florida

- **New Contractor**

Printed Name: Robert Sheppard Date: 10/30/25
Signature: Robert Sheppard
State: FL County: Columbia
The foregoing instrument was acknowledged before me, by means of ✓ physical presence or ( ) online notarization, this 30th day of October, 2025, by Robert Sheppard, who is ✓ personally known to me or ( ) has provided the following identification: _____
Notary Printed Name: Michael Morrison Notary Seal:
Notary Signature: _____

MICHAEL MORRISON
Notary Public-State of Florida
Commission # HH 611751
My Commission Expires
November 12, 2028

Published 10/2025

Mobile Home Permit Worksheet

Permit Number: _____ Date: _____

Installer : Robert Sheppard License # IH/1025386

Address of home being installed 2658 SW Icheticknee Ave Lake City, Fl, 32024

Manufacturer Town Homes Length x width 60x15

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 # 107791

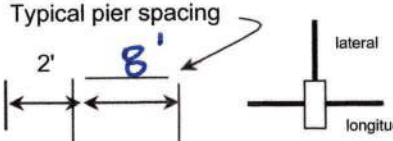
Triple/Quad ☐ Serial # FLTHLCTI6266

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

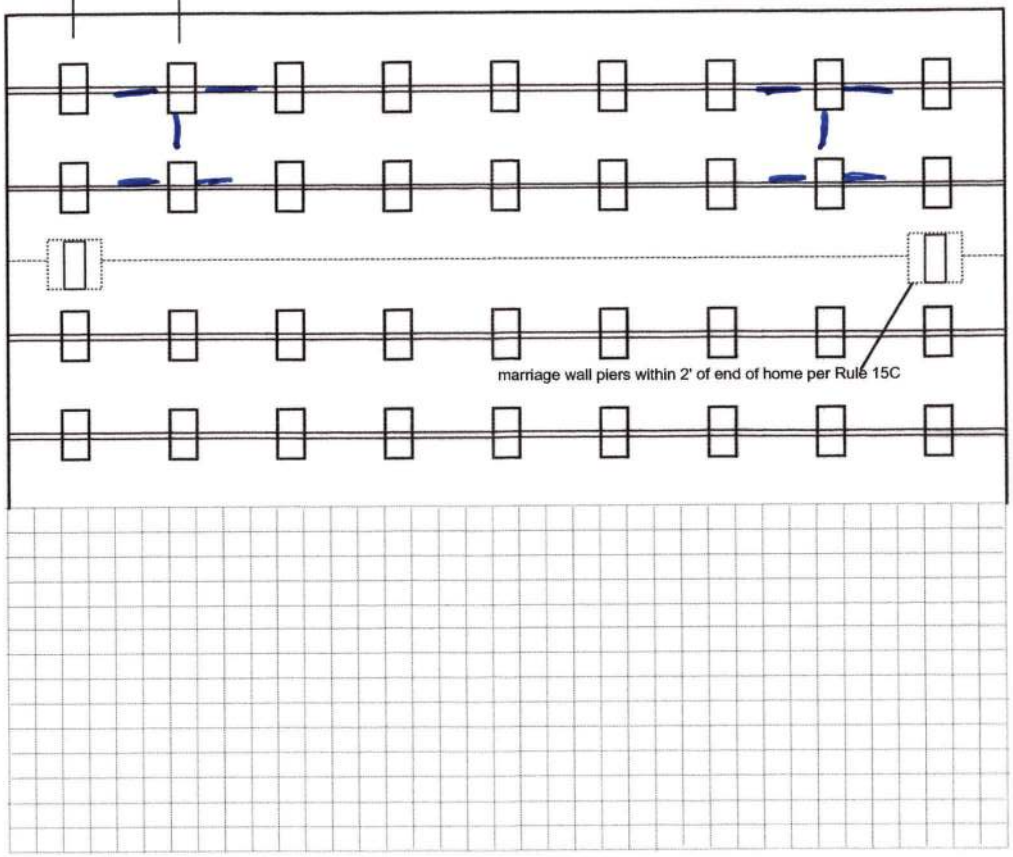
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials RS

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	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 24 x 31

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.

Opening	Pier pad size

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 ¼ x 26 ¼	348
20 x 20	400
17 3/16 x 25 3/16	441
17 ½ x 25 ½	446
24 x 24	576
26 x 26	676

4 ft ✓ 5 ft _____

ANCHORS

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

	Number
Sidewall	
Longitudinal	
Marriage Wall	N/A
Shear Wall	

Published 10/2025

Mobile Home Permit Worksheet

Permit Number: _____ **Date:** _____

POCKET PENETROMETER TEST

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

X ____ X ____ X ____

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 ____ X ____ X ____

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' anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5' 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.

Installer's initials RS

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Shepard

Date Tested _____

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. 29

PLUMBING

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

Debris and organic material removed ✓.

Water drainage: Natural ____ Swale ____ Pad ✓ Other ____

Fastening multi wide units

Floor- Type Fastener: N/A Length: N/A Spacing: N/A

Walls- Type Fasterner: N/A Length: N/A Spacing: N/A

Roof- Type Fastener: ____ Length: ____ Spacing: ____

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 (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 RS

Type gasket Factory

Pg. 22

Installed:

Between Floors ✓ Yes N/A

Between Walls ____ Yes

Bottom of ridge beam ✓ Yes

Weatherproofing

The bottom board 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 N/A

Miscellaneous

Skirting to be installed.	✓ Yes	No	✓ N/A
Dryer vent installed outside of skirting.	Yes	No	✓ N/A
Range downflow vent installed outside of skirting.	Yes	No	✓ N/A
Drain lines supported at 4' intervals.	✓ Yes	No	N/A
Electrical crossovers protected.	Yes	No	✓ N/A

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's Signature Robert Shepard Date 10/20/25

Published 10/2025

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

107791

LABEL #

DATE OF INSTALLATION

ROBERT D. SHEPPARD

NAME

IH / 1025386 / 1

6119

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.

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 INSTALLER AGENT AUTHORIZATION

(BLANKET)

Use if authorized to pull all permits on your behalf

I, Robert Sheppard (Installer License Holder's Name), give this authority, 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 Person Authorized	Signature of Person Authorized
1. Heide Morrison	1. H Morrison.
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. I understand that 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.

Robert Sheppard
License Holders Signature (Notarized)

IH/1025386
License Number

10/20/25
Date

NOTARY INFORMATION:

STATE OF: FL **COUNTY OF:** Columbia

The above license holder, whose name is Robert Sheppard personally appeared before me and is (✓) known by me or ( ) has produced identification (type of I.D.) _____ on this 20th day of October, 2025.

(Seal/Stamp)

Notary's Signature

Michael Morrison
Notary's Printed Name

MICHAEL A. MORRISON
Notary Public-State of Florida
Commission # HH 611751
My Commission Expires
November 12, 2028

Published 10/2025