

C# 2442

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 10-22-07)

Zoning Official

Building Official

AP#

Date Received

By

Permit #

Flood Zone

Development Permit

Zoning

Land Use Plan Map Category

Comments

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☒ Site Plan with Setbacks Shown☒ ESH Signed Site Plan☒ ESH Release☒ Well letter☐ Existing well☒ Copy of Recorded Deed or Affidavit from land owner☐ Letter of Authorization from Installer☒ State Road Access☐ Parent Parcel #☐ STUP-MH☒ Unincorporated area☐ Incorporated area☐ Town of Fort White☐ Town of Fort White Compliance letter

Property ID # 10-75-17-09977-105

Subdivision

5 1/2 of Lot 5
Adams Road S/PNew Mobile Home _____ Used Mobile Home ☒ Year 1998

Applicant Cindy Blanton Phone # 352-538-3089

Address 219 SE Adams Street High Springs, FL 32643

Name of Property Owner Gary and Cindy Blanton Phone # 352-538-3089

911 Address 219 SE ADAMS STREET High Springs FL 32643

Circle the correct power company -

FL Power & Light

☒ Clay Electric

(Circle One) -

Suwannee Valley Electric

Progress Energy

Name of Owner of Mobile Home Gary and Cindy Blanton Phone # 352-538-3089

Address 24024 NW 196 Terr. High Springs, FL 32643

Relationship to Property Owner Same

Current Number of Dwellings on Property 0

Lot Size 1/2 acre 140X157.48 Total Acreage 1/2 acre

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 ☒ YesDriving Directions to the Property South on 444 to Left on Adams St.
3rd parcel on left.

Name of Licensed Dealer/Installer Vic Etheridge Phone # 386 462 7554

Installers Address PO Box 3266 High Springs, FL 32655

License Number E110000 144 Installation Decal # 290307

PERMIT WORKSHEET

PERMIT NUMBER

Installer

Vic Edneridge License # 14 0000144

Address of home being installed

219 SE Adams St.

Manufacturer

High Springs FC 32643
CLAYTON

Length x width

14 x 56

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.

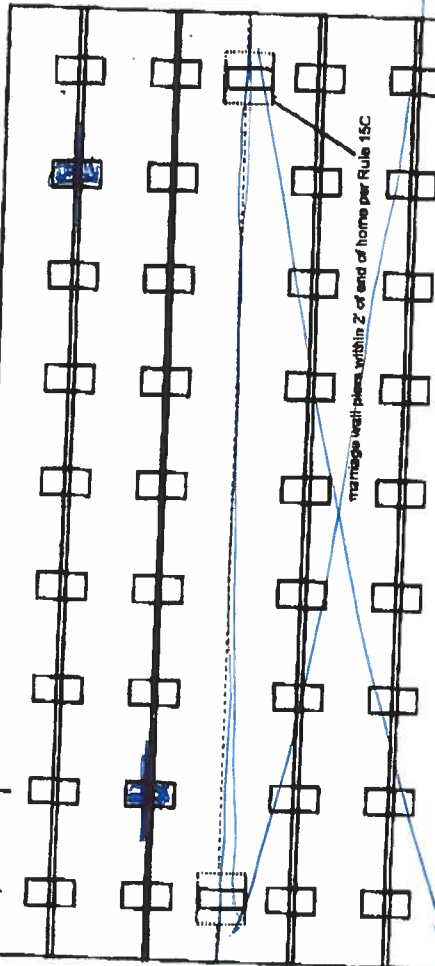
Installer's initials

QEC

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	Footing 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'	4'	5'	6'	7'	8'
1500 psf	4'	5'	5'	6'	7'	8'	8'
2000 psf	5'	6'	6'	7'	8'	8'	8'
2500 psf	6'	7'	7'	8'	8'	8'	8'
3000 psf	7'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 24x24

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) 16x16

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

4' x 4'

4 ft

5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer OLIVER TECHNOLOGY

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTHER TIES

Number

14

Sidewall

Longitudinal

Marriage wall

Shearwall

PERMIT WORKSHEET

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 1000 lb X 180 in 1000 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 _____ 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. I 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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Vic Edwards

Date Tested 11-7-07

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 _____
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi-wide units

Floor: _____ Type Fastener: _____ Length: _____ Spacing: _____
Walls: _____ Type Fastener: _____ Length: _____ Spacing: _____
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

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 _____
Drain lines supported at 4 foot intervals. Yes _____
Electrical crossovers protected. Yes _____
Other: _____

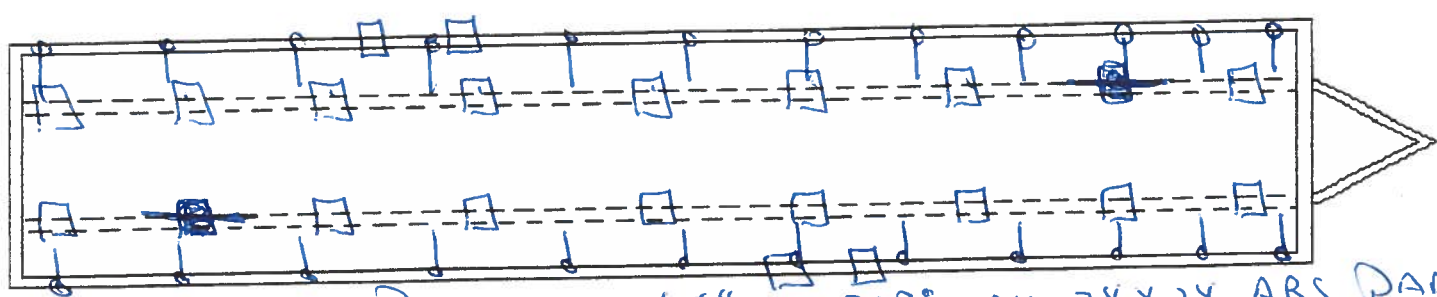
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Vic Edwards

Date 11-7-07

Applicant shall provide layout from manufacturer specific to the model installed. This form may be used if the layout from the manufacturer is not available.

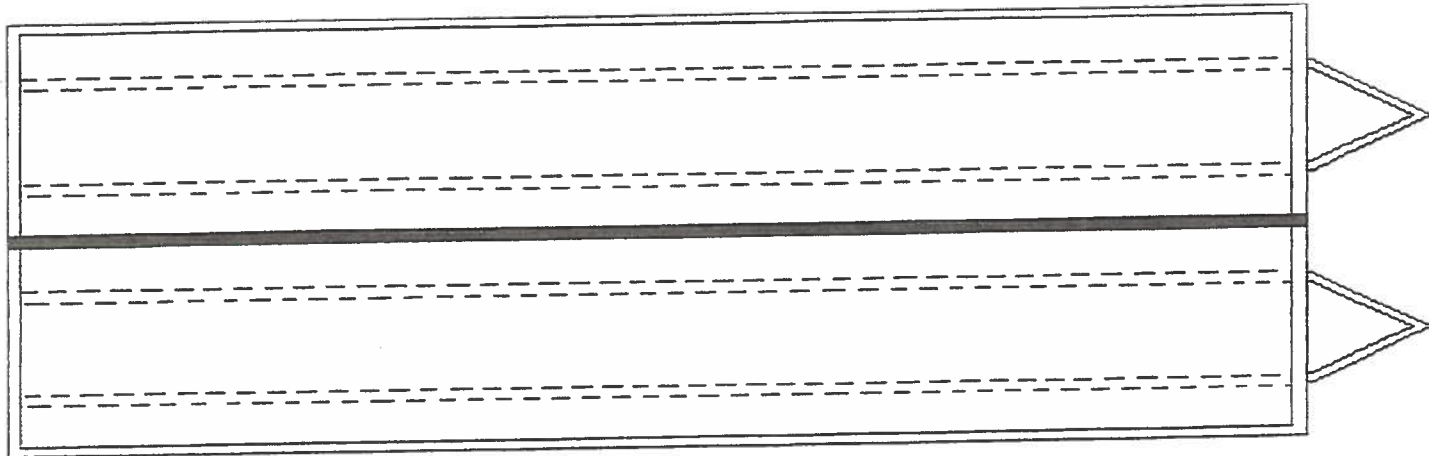
SINGLE WIDE MOBILE HOME



1000 LB SOIL PIERS ON 6' 5" CENTERS ON 24x24 ABS PADS
5' ANCHORS ON 5' 4" CENTERS OR LESS

DOUBLE WIDE MOBILE HOME

Longitudinal Stabilizer Devices By OLIVER Technology



ANCHOR



PIER

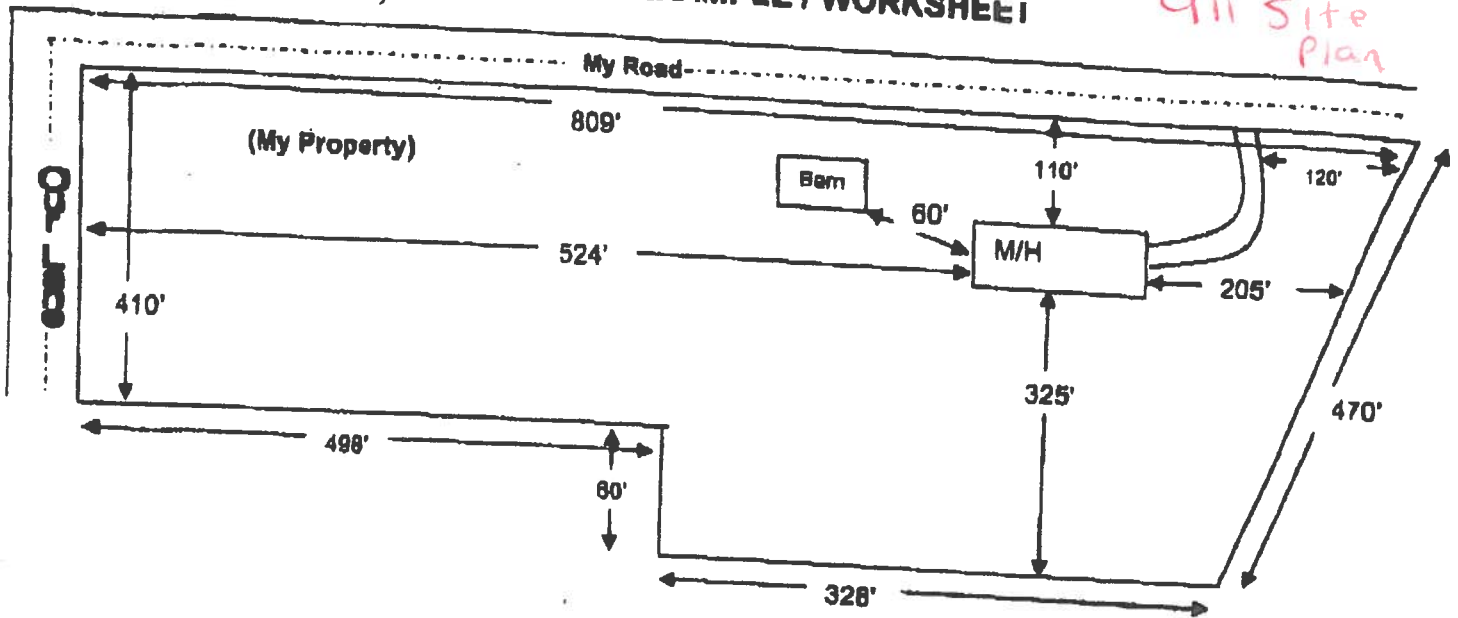


PIER FOOTING

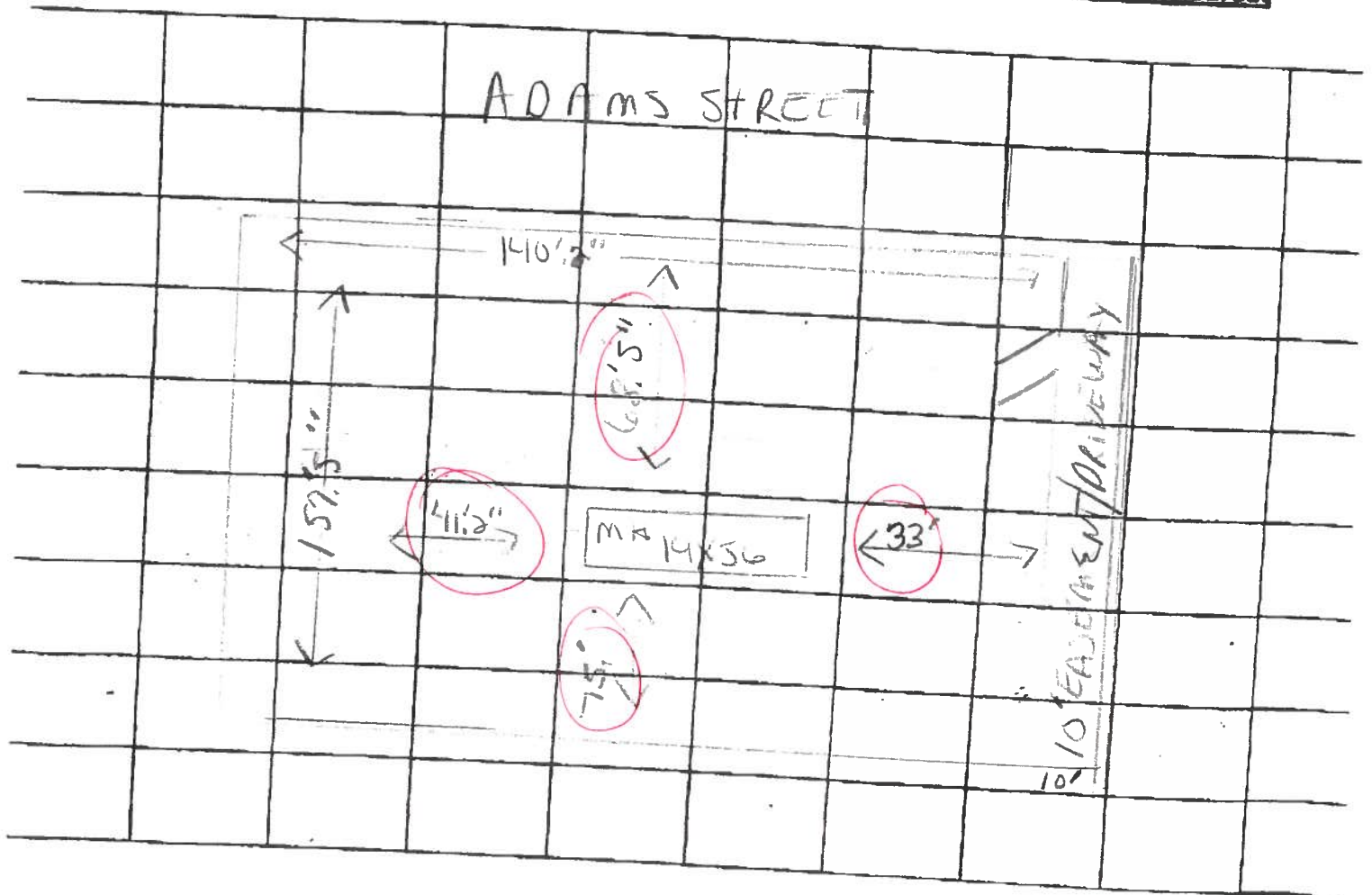
Show all pier (with size of piers & pads) and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.

SITE PLAN EXAMPLE / WORKSHEET

911 Site Plan



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



AAA
MOBILE HOME TRANSPORT

Phone (352) 372-1366
Home (352) 462-7554
Mobile (352) 316-0953
State Lic # DH0000144

Vic Etheridge Owner/Operator

DATE 11-7-07

NAME OF LICENSE HOLDER

Vic Etheridge

LICENSE CERTIFICATE # DH0000144

THE FOLLOWING PERSON(S) ARE AUTHORIZED TO SIGN FOR PERMITS FOR THE ABOVE REFERENCED LICENSE HOLDER

NAMES - PLEASE PRINT

RELATIONSHIP

RELATIONSHIP

<u>Cindy BLANTON</u>	<u>CUSTOMER</u>
<u>'1' one Permit only</u>	

Endorsement forms are good 12 months of issue from (unless otherwise specified) less than 12 months

The foregoing instrument was acknowledged before me on this 7th day of Nov 2007

by _____ who is personally known to me or has produced

Identification Type of Identification

Known

Signature of License Holder

Signature of Notary

Commission # & Exp/Date

ANGELA ARTHUR KIGHT
Notary Public, State of Florida
My comm. exp. Mar. 1, 2008
Comm. No. DD 277521

5.00' 21.20" N 139.99' (PLAT)
139.99' (CALC)
5.00' 21.20" N



DESCRIPTIVE
THE SOUTH 1/2 OF LOT 5 OF "ADAMS ROAD SUBDIVISION" AS PER PLAT THEREOF
RECORDED IN PLAT BOOK 5, PAGE 141 OF THE PUBLIC RECORDS OF COLUMBIA
COUNTY, FLORIDA
SUBJECT TO AN EASEMENT FOR INGRESS & EGRESS OVER AND ACROSS THE WEST
1000 FEET THEREOF.

1. SURVEYS NOTED
2. RELEVANCY BASED ON INFORMATION FOUND IN ACCORDANCE WITH THE RETRACTION OF THE ORIGINAL SURVEY FOR SAID PLAT OF RECORD.
3. REWORKS ARE BASED ON SOLD PLAT OF RECORD.
4. THIS PLAT IS IN ZONE 2 AND IS SUBJECT TO BE OUTSIDE THE 500' NEAR FLOODED PLAT AS PER FLOODED PLAT AND FLOOD INSURANCE RATE WAS SUBJECT TO CHANGE.
5. REWORKS ARE BASED ON THE FLOODED INSURANCE RATE WAS SUBJECT TO CHANGE.
6. REWORKS ARE BASED ON THE FLOODED INSURANCE RATE WAS SUBJECT TO CHANGE.
7. DATE OF FIELD SURVEY AS SHOWN HEREIN.
8. IF THEY EXIST, THE UNDERGROUND UTILITIES AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREIN.
9. THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE COMMITMENT OR A TITLE POLICY.

FIELD BOOK 311 PAGE(S) 07

[illegible]

**BRITT SURVEYING
& ASSOCIATES, INC.**
LAND SURVEYORS AND MAPPEERS
605 WEST WALTON STREET, SUITE 100, FLORISSA, OKLAHOMA 73158
(405) 752-7163 FAX (405) 752-5072
VISA ORDER # L-18561

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORTDATE RECEIVED 11/2/07 BY GA IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NOOWNER NAME William Collier PHONE 454 8978 CELL _____ADDRESS 139 SAs Trudy Way, Ft. White

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 475, TL on 27, TL Colgate, look in the road, straight to single wideMOBILE HOME INSTALLER Theresa PNH PHONE (386) 442-7554 CELL _____

MOBILE HOME INFORMATION

MAKE Clayton YEAR 1998 SIZE 14 x 56 COLOR Tan/GreenSERIAL NO. WCH008994GAWIND ZONE I to II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR
P.O. # 1 1 PASS 1 FAILEDCall Cindy Blanton - (352) 538-3089
Call first -

SMOKE DETECTOR () OPERATIONAL () MISSING

FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____

DOORS () OPERABLE () DAMAGED

WALLS () SOLID () STRUCTURALLY UNSOUND

WINDOWS () OPERABLE () INOPERABLE

PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

CEILING () SOLID () HOLES () LEAKS APPARENT

ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR

WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

WINDOWS () CRACKED/BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED 1 WITH CONDITIONS _____NOT APPROVED 1 NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____SIGNATURE [Signature] ID NUMBER 402 DATE 11-6-07

CLYATT WELL DRILLING, INC.*(Established in 1971)**Post Office Box 180**Worthington Springs, FL 32697**Phone (386)496-2488 *** FAX (386)496-4640***WELL DESCRIPTION**

DESCRIPTION DATE

11/15/2007

CUSTOMER NAME AND ADDRESS

Gary & Cindy Blanton
24024 Northwest 196th Terrace
High Springs, Florida 32643

DESCRIPTION OF WORK

4" Well and Pump

Pay To: Columbia County
Building + Zoning
(386) 758-2160

DESCRIPTION

Re: Application # 0711-34

4" Well

1 HP Submersible Pump

1-1/4" Galvanized Drop Pipe

14/3 Submersible Pump Wire

81 Gallon Captive Air Tank

4 X 1-1/4 Well Seal

Pressure Relief Valve

Controls and Fittings

Sales Tax @ 7%

THANK YOU FOR YOUR BUSINESS! This document is provided to give a description of the well to be constructed on your behalf. All materials remain the property of Clyatt Well Drilling, Inc., until paid for in full. Clyatt Well Drilling, Inc., does not agree to find or develop water, nor does it represent, warrant or guarantee the quality or kind of water which may be encountered. If it is necessary to install water filters, the owner agrees it is his/her responsibility to pay the cost. Right to repossess is granted if payment for well is not made.

COLUMBIA COUNTY 9-1-1 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787

Telephone: (386) 758-1125 * Fax: (386) 758-1365 * E-mail: ron_croft@columbiacountyfla.com

ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

Residential or Other Structure on Parcel Number:
10-7S-17-09977-105

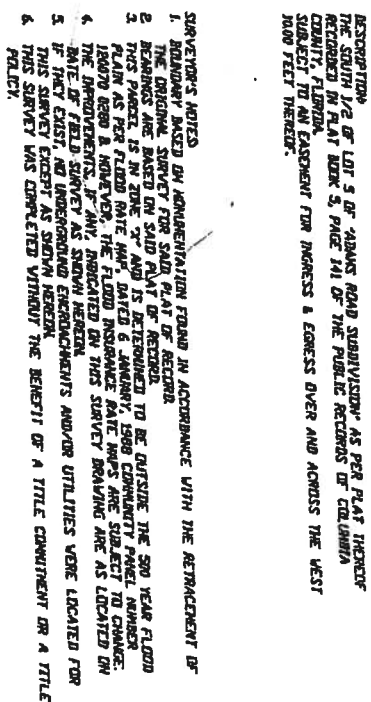
Address Assignment:
219 SE ADAMS ST, HIGH SPRINGS, FL, 32643

Any questions concerning this information should be referred to the Columbia County 9-1-1 Addressing / GIS Department at the address or telephonic number above.

TION 10, TOWNSHIP 7 SOUTH,
COLUMBIA COUNTY, FLORIDA.

70 = 100

- ### SYMBOL LEGEND
- | | |
|---|-------------------------------|
| ■ | 4"x4" CONCRETE MONUMENT FLOOR |
| □ | 4"x4" CONCRETE MONUMENT SET |
| ▣ | IRON PIPE FLOOR |
| ○ | IRON PIPE CAP SET |
| ● | POSSIBLE |
| ▲ | WATER METER |
| △ | CENTRALINE |
| ◆ | WELL |
| ● | TELEPHONE BOX |
| ● | ELECTRIC RACKS |
| ● | WATER TANK |
| ● | CHAIN LINK FENCE |
| ● | WOODEN FENCE |



CINDY & GARY BLANTON
FILE OFFICES, LLC
TIGER TITLE INSURANCE COMPANY

FIELD BOOK 301 PAGE(S) 07

STANDARD'S CONTINUATION

[illegible]

06/24/07
06/28/07

U. S. DEPT. OF JUSTICE
COMMUNICATIONS SECTION



**BRITT SURVEYING
& ASSOCIATES, INC.**

WORK ORDER # L-18561
EEO WEST DUVAL STREET LAKE CITY, FLORIDA 32805
(386)752-7763 FAX (386)752-8573

WORK ORDER # 4-18561

04-0883