PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION McCallongh. **Zoning Official** For Office Use Only **Building Official** (Revised 7-1-15) 37895 1903-29 Date Received 3-11-19 Permit # Zoning A-3 Land Use Plan Map Category_ **Development Permit** piece for alexal together as one Elevation Finished Floor FEMA Map# □ Recorded Deed or ☑ Property Appraiser PO ☑ Site Plan ☑EH #__ □ Well letter OR ☐ Land Owner Affidavit Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid Existing well □ DOT Approval Parcel # 03869-104 □ STUP-MH □ Ellisville Water Sys Assessment Padd on Property □ Out County □ In County Sub VF Form (oved) t Workes t w Shath Property ID # 19-65-16-03869-104 Subdivision ICHETUCKNEE **Used Mobile Home** MH Size 32x60 Year New Mobile Home Kogals Applicant William Phone # Phone# 386) Name of Property Owner Dwaynce Mc Cullouch 1911 Address 352 Sw Lenox Glen fortwhite 32029 Circle the correct power company -Clay Electric FL Power & Light Suwannee Valley Electric -(Circle One) -Duke Energy Phone # (384) 466. 8574 Name of Owner of Mobile Home Address 162 SW Thene Relationship to Property Owner ___ 5Wn 4 Current Number of Dwellings on Property 10.01 Total Acreage Lot Size Do you: Have Existing Drive of Private Drive)or need Culvert Permit or Culvert Waiver (Circle one) (Blue Road Sign) (Not existing but do not need a Culvert) (Putting in a Culvert) Is this Mobile Home Replacing an Existing Mobile Home **Driving Directions to the Property** Robert Phone # 386-623-2203 Name of Licensed Dealer/Installer Shellerd SE CR 245 lake City F1 32025 **Installers Address** License Number 7 H 1025386 Installation Decal # 48979

COLUMBIA COUNTY PERMIT WORKSHEET

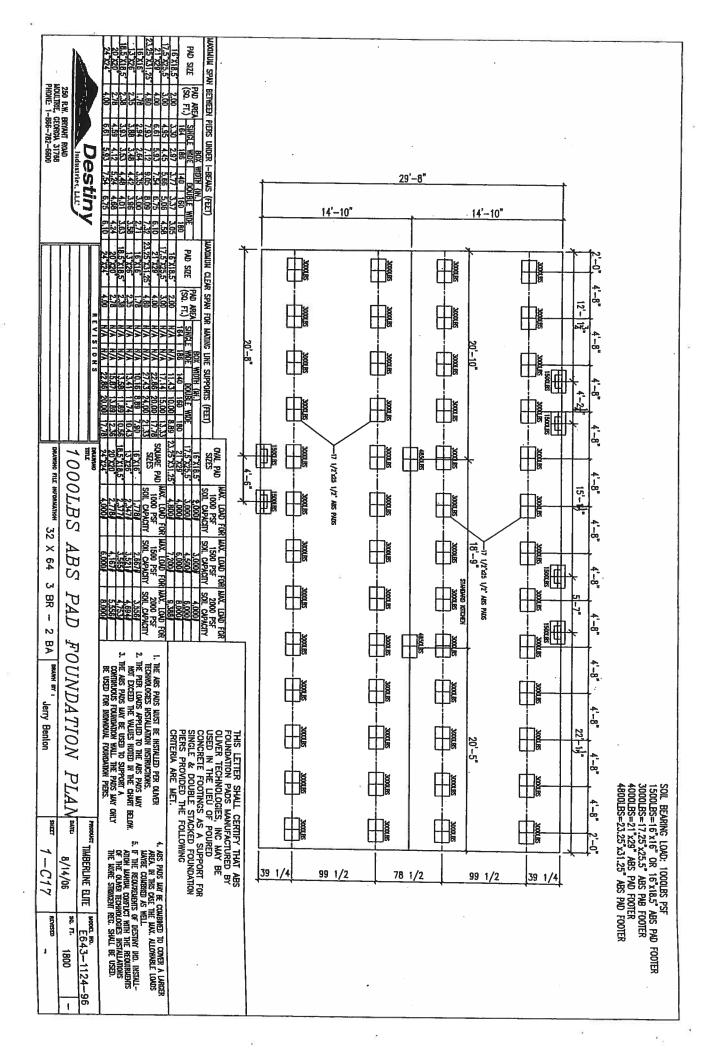
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COLUMBIA COUNTY PERMIT WORKSHEET

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Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Po	Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28	Plumbing	Connect_electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg	Electrical		Date Tested 11- 19-18	Installer Name Robert Sheppera	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	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 holding capacity. Installer's initials	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft	The results of the torque probe test is 295 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.	TORQUE PROBE TEST	x 1600 x 1600 x 1500	3. Using 500 lb. increments, take the lowest reading and round down to that increment.			POCKET PENETROMETER TESTING METHOD	× 1760 × 1700 × 1860	- 1760	The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST	
Installer Signature Thousand Styff Date 11:		Installer verifies all information given with this permit workshe		Other	Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes	Dryer vent installed outside of skirting. Yes N/A N/A Range downflow vent installed outside of skirting. Yes N/A		Miscellaneous	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	Weatherproofing	Type gasket / 0 4 M Installed Between Floors Yes Pg. 22 Between Walls Yes Bottom of ridgebeam Yes	77	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket. //	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are	Gasket (weatherproofing requirement)	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.	Type Fastener: 5c/7/5 Length: 4 Type Fastener: 1a 4 5 Length: 6 For used homes a min. 30 gauge. 8" wide ga	Floor: Type Fastener: 10 35 Length: 5 Spacing: 16	Fastening multi wide units	Debris and organic material removed Water drainage: Natural Swale Pad Other	Site Preparation	City Description

Date 11-19-18



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:

3/19/2019 3:45:14 PM

Address:

352 SW LENOX Gln

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

03869-104

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.

Dwayne McCullough Nitagar

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





Property Appraiser Printont 3-11-19 As one 10.01 Ac Parcel

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1903-28

CONTRACTOR ____

bert Shappard

PHONE 386-623-2203

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 <u>REQUIRED</u> 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.

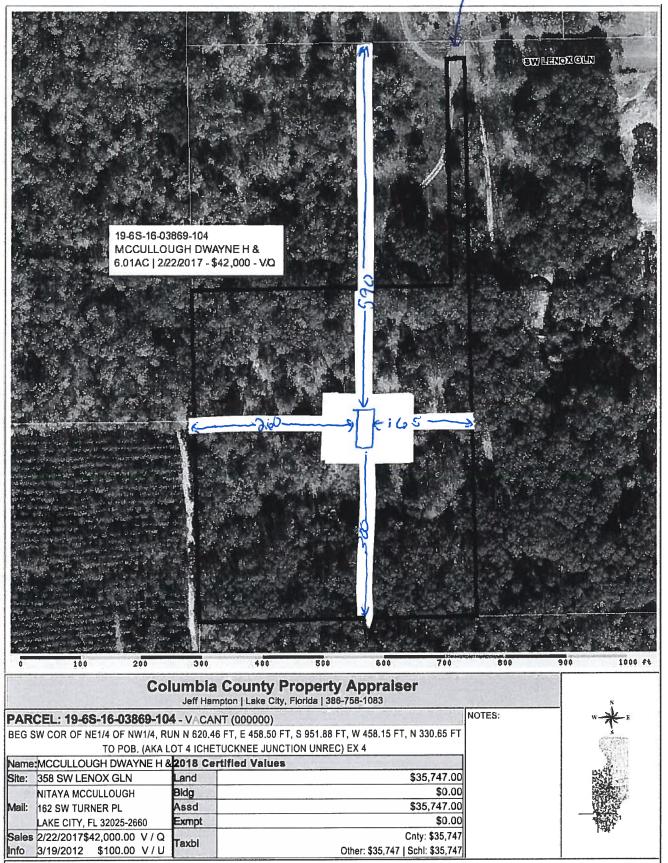
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name Whittington Electric	Signature Hlen Whottopon
1074	License #: 13602957	Phone #: (386)- 684-6401
MECHANICAL/	Print Name Shath Heating Air License #: CACO57875	Signature hatter Phone #: 494 · 822 Y
PLUMBING/ GAS	Print Name Robert Shaperd License #: # H1025-386	Signature

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.

Davenay



This information,, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

powered by: GrizzlyLogic.com To: Columbia County Building Department

A&B Well Drilling, Inc.

	5673 NW Lake Jeffery Road Lake City, FL 32055 Telephone: (386) 758-3409 Cell: (386) 623-3151 Fax: (386) 758-3410
Description of Well to be installed for Customer	Owner: Bruce Park.
Located @ Address: Lenax Gin	
1 HP 15 GPM submersible pump, 1" drop pipe, 3 SRWMD permit.	5 gallon captive tank, and backflow prevention. With
Bruce Park	
Sincerely, Bruce N. Park	
President	



Incorporated 64E-6.001, FAC

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

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

Page 1 of 4

APPLICATION FOR: New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Dwayne and Nitaya McCullough
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 #: 19-6S-16-03869-104 ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 6.01 ACRES WATER SUPPLY: [\(\frac{1}{2}\)] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] PROPERTY ADDRESS: 358 Lenox Glen, Ft. White, F1
DIRECTIONS TO PROPERTY: Take NE Franklin St, TL onto US-441, TR onto
US-90 TI MAD US-111 BOOK Sight Tolo CO 47 OF TR DATO
US-90, TL onto US-41, Bear right onto SR-475, TR onto SW Herlong St., TL onto SW Junction Rd, TR onto SW Len ox Glen.
BUILDING INFORMATION (V) RESIDENTIAL
Unit Time of
No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
SF Residential $3 - 1920$
3
[] Floor/Equipment Drains [] Other (Specify)
DATE: 3/6/2019
Incorporated 64F-6 001 FRG

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number McCullough -- PART II - SITEPLAN ------Scale: 1 inch = 40 feet. 210 No wells WHILL 75' of prop. line 3BR MA 90 32×60 (2) (1) 1 acre of 6.01 JY) Notes: en ox GIN acre of 6.01 Site Plan submitted by: MASTER CONTRACTOR Plan Approved V Date 3/12/19 Not Approved Cdustra County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT