Parcel:

14-6S-16-03818-183 (19801)

**Owner & Property Info** 

O milei et l'	operty mit		Result: 1 of 1
Owner	<b>DOZIER DAVID &amp; JACQUELINE</b> <b>DOZIER JACQUELINE</b> 298 SW PIONEER WAY FT WHITE, FL 32038		
Site	298 SW PIONEER WAY, FORT WHITE		
Description*	LOT 3 BLK D OLD WIRE FARMS. ORB 804- 2812, WD 1176-2387	1435 & ORB 1000-1138 QCD 10	003-2295, WD 1012-
Area	4.01 AC	S/T/R	14-6S-16

1

Use Code\*\* MOBILE HOME (0200)

S/T/R 14-6S-16 Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM								
APPLICATION NUMBER	CONTRACTOR	Brent Strickland	PHONE 386-365-7043					

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

David Dozier

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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_Glenn Whittington       Signature         License #:       EC 13002957       Phone #:       386-97	2-1700
	Qualifier Form Attached	
MECHANICAL/	Print Name Michael Boland Signature	$\langle \rangle$
A/C	License #: CAC 1817716 Phone #: 352-274	1-9326
	Qualifier Form Attached	

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



11

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

1. CHENNULLITIN	pton	(license	(license holder name), licensed qualifier				
for WhitThe ten	ELRENK	The	(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. DALEBRE	1
2. Pocky Ford	2. Jorts Da
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 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.

Licensed Qualifiers Signature (Notarized) License Number NOTARY INFORMATION: COUNTY OF: Compin STATE OF: BAS The above license holder, whose name is personally appeared before me and is known by me or has produced identification (type of I.D.) on this ) day of MARCH ,20/6 NOTARY'S SIGNATURE al/Stancely R BISHOP Notary Public - State of Florida Commission # FF 243986 y Comm. Expires Jun 24, 2019

COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160 LICENSED OUALIFIER AUTHORIZATION 1 hAAl (license holder name), licensed qualifier for (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 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 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.

COUNTY OF:

Licensed Qualifiers Signature (Notarized)

NOTARY INFORMATION: STATE OF TOTO

icense Number Date

The above license holder, whose name is 11 10000 personally appeared before me and is known by me on produced identification (type of I.D.) on this day of T 20

(Seal/Stamp)

AMANDA FLOOD MY COMMISSION # FF 106012 EXPIRES: April 5, 2018 ded Thru Notary Public Underen

σ
m
70
$\leq$
-
-
2
0
R
X
S
Ξ
m
m
-

		marnage well piers within 2' of end of home per Rule 15C			Typical pier spacing Interal Interal Show locations of Longitudinal and Lateral Systems Interal Interaction Interactio Interaction Int	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	NOTE: if home is a single wide fill out one haif of the blocking plan	Fart Whonk 1	PERMIT NUMBER Installer Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043
FRAME TIES         within 2' of end of home spaced at 5' 4" oc         TIEDOWN COMPONENTS         Longitudinal Stabilizing Device (LSD)         Manufacturer         Longitudinal Stabilizing Device (LSD)         Manufacturer         Manufacturer         Manufacturer         Manufacturer         Manufacturer         Manufacturer         Manufacturer         Manufacturer	List all marriage wall openings greater than 4 foot 26 x 26 676 and their pier pad sizes below. ANCHORS Opening Pier pad size 4 ft 5 ft	13         1/4         x 26         1/4           oximate locations of marriage         20 x 20         20 x 20           4 foot or greater. Use this         17         3/16 x 25         3/16           w the piers.         17         1/2 x 25         1/2           24 x 24         24 x 24         24 x 24         24 x 24	$\frac{16 \times 16}{16 \times 18}$	8'         8'<	izze         (256)         1/2" (342)         (400)         (484)*         (576)*           q in)         3'         4'         5'         6'         7'           4'.6"         6'         8'         8'         8'         8'           5''         6'         7'         8'         8'         8'         8'           7'' 5''         8'         8'         8'         8'         8'         8'         8'	Roof System:     Typical     Hinged       PIER SPACING TABLE FOR USED HOMES       Load     Footer     16" x 16"       16" x 16"     18 1/2" x 18     20" x 20"       20" x 20"     24" x 24"     26" x 26"	Triple/Quad Serial # KOH6A 10036746		New Home We Used Home

page 1 of 2

Connect all potable water supply piping to an existing water meter, water tap, or other	Plumbing t all sewer drains to an existing sewer tap or septic tank.	Electrical Connect electrical conductors between multi-wide units, but not to the main-power source. This includes the bonding wire between mult-wide units. Pg. 2.4	Date Tested 8-27-2021	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	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 requires anchors with 4000 lb holding capacity. Installer's initials	TORQUE PROBE TEST         The results of the torque probe test is 240 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.	2001× 2001× 0001×		POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations. 2. Take the reading at the depth of the footer.	ut testing.	The pocket penetrometer tests are munded drive to post	PERMIT NUMBER
Installer Signature BAJAC Date 8.27-202	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		Drain lines supported at 4 foot intervals. Yes N/A Electrical crossovers protected. Yes	Vo	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	Type gasket Pg Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	homes and that condensation, mold, meldew 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	Gasket (weatherproofing requirement) I understand a properly installed gasket is a requirement of all new and used	Type Fastener: Type Fastener: For used homes a min-30 gauge, 8" wide, ga will be centered over the beak of the roof and roofing nails at 2" on center on both sides of th	Fastening multi wide units	Debris and organic material removed Water drainance: Natural Svale Bod Othor	



V-5562K





## 2-BEDROOM / 2-BATH Date: 05/21/20 16 X 60 - Approx. 830 Sq. Ft. V-5562K

3053

3053

\* All room dimensions include closets and square footage figures are approximate. \* Live Oak Homes reserves the right to change product offering at any time.

١.

14'-10"

3053E

DECOR WALLS IN ALL LIVING

0

WASH H

DRY

начан

M. BEDROOM 10'-10" X 14'-2"

4053E

REAS

GG#