

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

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 _____

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ Well letter OR

☒ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ 911 App

☐ Ellisville Water Sys ☐ Assessment _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 27-35-16-02031-002 Subdivision N/A Lot# -

▪ New Mobile Home ☒ Used Mobile Home _____ MH Size 32'x16' Year 2021

▪ Applicant PAUL BARNEY Phone # 386-209-0906

▪ Address 466 SW DEP J DAVIS LN LAKE CITY, FL 32024

▪ Name of Property Owner BRYAN LENNIE O. Phone# 386 752-6773

▪ 911 Address 105 NW MACKMARY PL LAKE CITY, FL 32055

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home WILSON, MELINDA Phone # 386-397-3245

Address 105 NW MACKMARY PL LAKE CITY, FL 32055

▪ Relationship to Property Owner DAUGHTER

▪ Current Number of Dwellings on Property 2

▪ Lot Size 546'x1344' (210 x 210) Total Acreage 1/6

▪ 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 YES

▪ Driving Directions to the Property US 90 WEST TO CR 135 T/R TO BROWN RD T/R TO NASH RD T/L CROSS R/R TO WOODLAND TERR. T/L, GO TO END AT CUL-DE-SAC. ~~NW~~ ~~MACKMARY~~ NW MACKMARY IS DRIVE WAY ON RIGHT IN CUL-DE-SAC, TO SIDE AT END OF NW MACKMARY PL.

▪ Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-344-3645

▪ Installers Address 353 SW MAULDIN AVE, LAKE CITY, FL 32024

▪ License Number 14 1129420 Installation Decal # 74941

License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 4626	Label #: 74941	Manufacturer: LIVE OAK	(Check Size of Home)
Homeowner: MELINDA WILSON	Year Model: 2021	Single _____	
Address: 103 MACKBERRY PL	Length & Width: 76/80 x 32	Double <input checked="" type="checkbox"/> _____	
City/State/Zip: LAKE CITY	Type Longitudinal System: 6 OTI	Triple _____	
Phone #:	Type Lateral Arm System: 6 OTI	HUD Label #:	
Date Installed:	New Home: <input checked="" type="checkbox"/> Used Home: _____	Soil Bearing / PSF:	
Installed Wind Zone: II	Data Plate Wind Zone: A	Torque Probe / in-lbs:	
Note:		Permit #:	

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

74941

LABEL #

DATE OF INSTALLATION

DAVID E ALBRIGHT

NAME

IH / 1129420 / 1

4626

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.

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

MELINDA
WILLSON

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer **DAVID ALBRIGHT**

License # **IH/1129420**

911 Address where home is being installed **103 MARYKING RD.**

LAKE CITY, FL 32055

Manufacturer **LIVE OAK HOMES**

Length x width **32 x 76/80**

NOTES:

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

Installer's initials **DA**

OLYMPIA L-3764P

New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual
Home is installed in accordance with Rule 15-C

Single wide ☐

Double wide ☒

Triple/Quad ☐

Wind-Zone II ☒

Wind Zone III ☐

Installation Detail # **74941**

Serial #

L0H6A36394 7/13

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footer 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'	9'	10'
2000 psf	6'	8'	9'	10'	11'	12'
2500 psf	7' 6"	9'	10'	11'	12'	13'
3000 psf	9'	10'	11'	12'	13'	14'
3500 psf	10'	11'	12'	13'	14'	15'

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

17 x 25

Perimeter pier pad size

16 x 16

Other pier pad sizes (required by the mfg.)

23 x 32

FOOTER PAD SIZES

Pad Size	Sq ft
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 28 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	445
24 x 24	576
26 x 26	676



Draw the approximate locations of marriage well openings 4 foot or greater. Use this symbol to show the piers.

List all marriage well openings greater than 4 foot and their pier pad sizes below.

Opening

18

Pier pad size

23 x 32

4

17 x 25

4

17 x 25

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer **OTI**

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer **OTI**

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

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

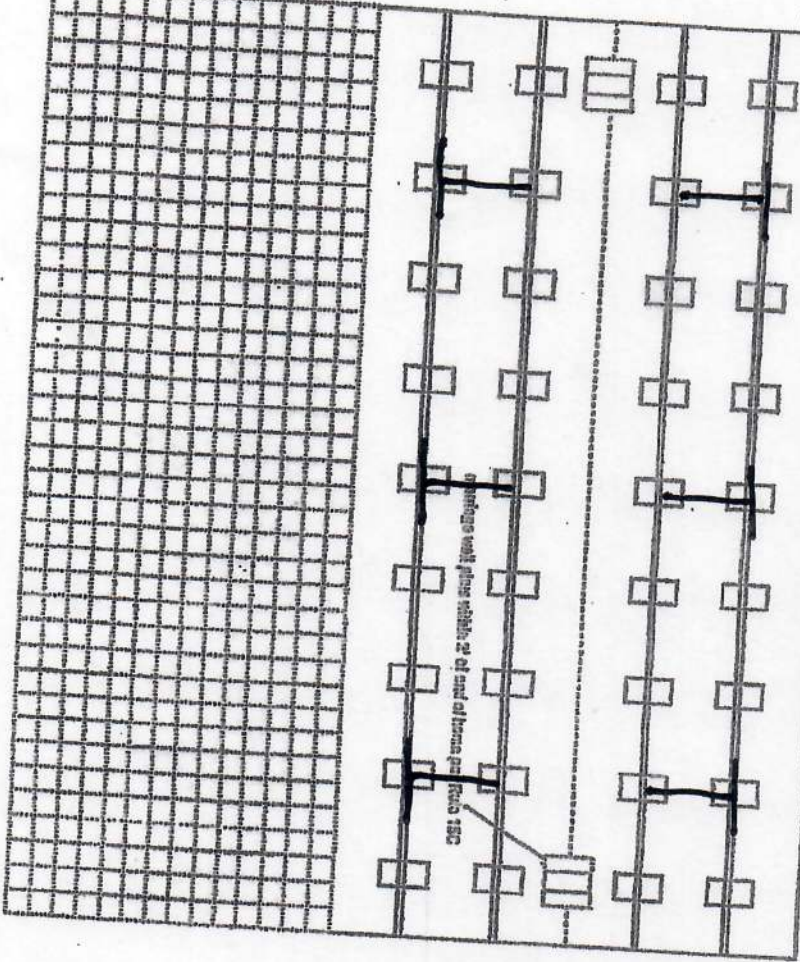
OTHER TIES

Number

Stewart Longitudinal Marriage wall Shearwall

Number **18**

5



Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1050 psf or check here to declare 1000 lb. soil without testing.

X 1050 X 1500 X 1050

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 1050 X 1500 X 1050

TORQUE PROBE TEST

The results of the torque probe test is 285 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. welding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name DAVID ALBRIGHT MOBILE HOME SVC

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. 73-77

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 79-80

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 78-110

Application Number: _____

Date: _____

Site Preparation

Debris and organic material removed X
Water drainage: Natural Swale Pad X Other

Fastening multi wide units

Floor: Type Fastener: LAGS Length: 6" Spacing: 2'
Walls: Type Fastener: SCREWS Length: 3" Spacing: 18"
Roof: Type Fastener: LAGS Length: 6" Spacing: 2'
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 DAV

Type gasket FACTORY
Pg. 41

Installed:
Between Floors Yes X
Between Walls Yes END WALLS
Bottom of ridgebeam Yes X

Weatherproofing

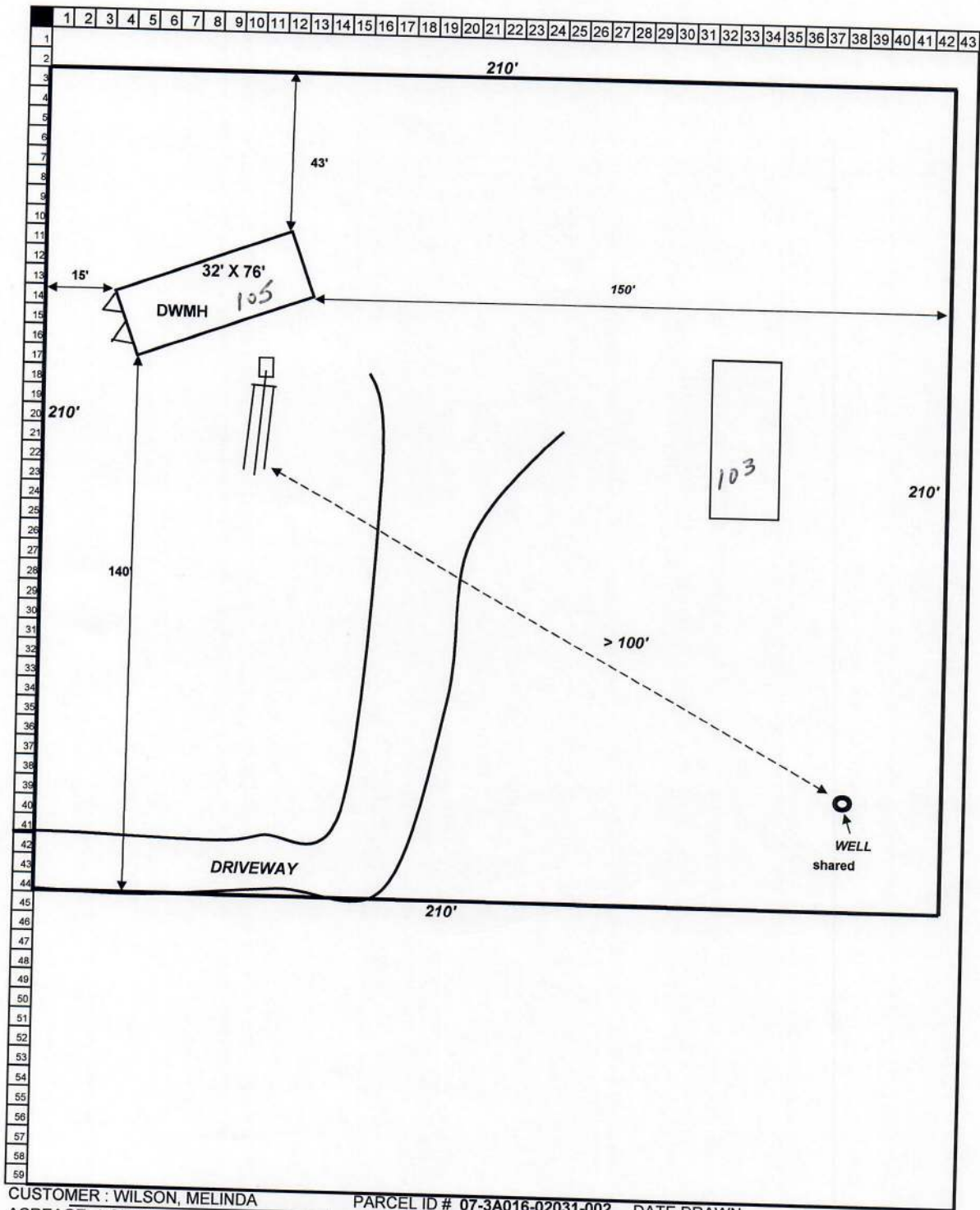
The bottomboard will be repaired and/or taped. Yes X Pg. 124
Siding on units is installed to manufacturer's specifications. Yes X
Fireplace chimney installed so as not to allow intrusion of rain water. Yes X

Miscellaneous

Skirting to be installed. Yes No X
Dryer vent installed outside of skirting. Yes N/A X
Range downflow vent installed outside of skirting. Yes N/A X
Drain lines supported at 4 foot intervals. Yes X
Electrical crossovers protected. Yes X
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 David Albright Date _____



1 BX = 5'

210'

CUSTOMER : WILSON, MELINDA
ACREAGE 1 OF 16

PARCEL ID # 07-3A016-02031-002
DEALER: FREEDOM HOMES 386-752-5355

DATE DRAWN

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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 **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	Print Name <u>WASHINGTON ELECTRIC</u> License #: <u>EG13002957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386 972 1700</u>
MECHANICAL/ A/C	Print Name <u>STYLECREST</u> License #: <u>CAE1817658</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>850-769-1453</u>

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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, DAVID ALBRIGHT, give this authority for the job address show below
Installer License Holder Name
only, 105 N.W. MAUK MARY PL. LAKE CITY, FL 32055, and I do certify that
Job Address

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 Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
PAUL A. BARNEY	<i>Paul A. Barney</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
STEVE SMITH	<i>Steve Smith</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Property Owner
LINDA PENHALIGON	<i>Linda Penhaligon</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and 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.

David Albright License Holders Signature (Notarized)
1H1129420 License Number
7-31-2019 Date

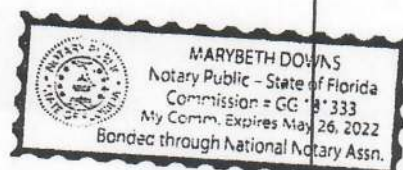
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright, personally appeared before me and is known by me or has produced identification (type of I.D.) Personally known on this 31 day of July, 2019.

Marybeth Downs
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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, DAVID ALBRIGHT, give this authority and I do certify that the below
Installers Name
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 Authorized Person	Signature of Authorized Person	Agents Company Name
PAUL A. BARNEY	<i>Paul A. Barney</i>	FREEDOM HOMES
STEVE SMITH	<i>Steve Smith</i>	FREEDOM HOMES
LINDA PENHALIGON	<i>Linda Penhaligon</i>	FREEDOM HOMES

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and 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.

David Albright
License Holders Signature (Notarized) 1H1129420 7-31-2019
License Number Date

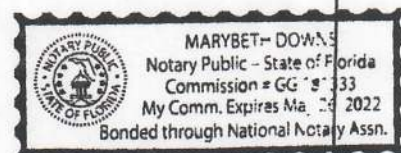
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 31 day of July, 20 19.

Marybeth Downs
NOTARY'S SIGNATURE

(Seal/Stamp)



Prepared by and return to:

John E. Norris, Attorney at law
Norris & Johnson, P.A.
253 NW Main Blvd.
Post Office Drawer 2349
Lake City, Florida 32056-2349

JEN/sc
12/29/04

Inst: 2004028969 Date: 12/29/2004 Time: 15:46
Doc Stamp-Deed : 0.70

From a legal description provided by Doc Stamp-Deed : 0.70
Grantor and without a title search MLH DC, P. Dewitt Cason, Columbia County B: 1034 P: 1075

WARRANTY DEED

THIS INDENTURE, Made this 29th day of December, 2005 between LENNIE OLA BRYAN, the unmarried widow of DOCK BRYAN, deceased, to whom she was married prior to August 16, 1976, and remained continuously married to the said DOCK BRYAN until his death on October 11, 2004, hereinafter called the Grantor, and LINDA BRYAN, MELINDA WILSON and GLENDA BRYAN, as tenants in common, whose address is 903 NW Mackmary Place, Lake City, Florida 32055, hereinafter called the Grantees:

WITNESSETH:

That said Grantor, for and in consideration of the sum of TEN and No/100 (\$10.00) DOLLARS, and other good and valuable considerations to said Grantor in hand paid by said Grantees, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantees, and Grantees' heirs and assigns forever, reserving unto the Grantor for and during the natural life of Grantor a life estate in and to the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Township 3 South, Range 16 East

Section 7: The East 16 acres of the SW $\frac{1}{4}$ of the SE $\frac{1}{4}$.

Parcel No. 07-3S16-02031-002 HX

TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD, the same unto Grantees, subject to the reservation herein reserved by Grantor of a life estate in the above-described lands for and during the natural life of Grantor.

And said Grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor has hereunto set Grantor's hand and seal the day and year first above written.

Signed, sealed and delivered
in the presence of:

Sign Susan F. Britman
Print SUSAN F. BRITMAN

Lennie Ola Bryan (SEAL)
LENNIE OLA BRYAN, the unmarried
widow of DOCK BRYAN

Sign John E. Norris
Print JOHN E. NORRIS

STATE OF FLORIDA
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 27th day of December 2004, by LENNIE OLA BRYAN, the unmarried widow of DOCK BRYAN, who is personally known to me or has produced F.D.L. as identification.

(NOTARIAL SEAL)

Sherry A. Claytor
Notary Public - State of Florida
SHERY A CLAYTOR
Print/type name of notary public



Sherry A. Claytor
MY COMMISSION # 00192538 EXPIRES
May 20, 2006
JULY 1, 2007 TRANSFERS TO

Landlord Private Property Waiver

Customer File #: 2621446

Borrower Name: Melinda Wilson

This form certifies that there will be no lot rent or land payment for the manufactured home located at:

Address: 165 NW Mackmary Pl.

City: Lake City State: FL Zip Code: 32655

Landowner Name (print): Lennie Bryan

Landowner Phone #: 386-752-6773

Relationship to Borrower: Mother

Lennie Bryan
*Landowner Signature

*Copy of Deed or most recent tax records must accompany this form to document ownership of the land by Landowner.

CO-BUYER: 0

Page 1 of 2 pages

Columbia County Property Appraiser

Jeff Hampton

2020 Preliminary Certified

updated: 10/9/2020

Parcel: << 07-3S-16-02031-002 >>

Owner & Property Info

Result: 1 of 1

Owner	BRYAN LENNIE O 103 NW MACKMARY PLACE LAKE CITY, FL 32055		
Site	103 MACKMARY PL,		
Description*	THE E 16 AC OF SW1/4 OF SE1/4. ORB 327-393, 366-440, WD 1034-1075 LIFE EST.		
Area	16 AC	S/T/R	07-3S-16
Use Code**	IMPROVED A (005000)	Tax District	3

*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

2019 Certified Values		2020 Preliminary Certified	
Mkt Land (4)	\$23,060	Mkt Land (4)	\$23,060
Ag Land (1)	\$3,360	Ag Land (1)	\$3,388
Building (2)	\$25,275	Building (2)	\$26,518
XFOB (6)	\$3,276	XFOB (6)	\$3,276
Just	\$109,910	Just	\$111,153
Class	\$54,971	Class	\$56,242
Appraised	\$54,971	Appraised	\$56,242
SOH Cap [?]	\$1,723	SOH Cap [?]	\$1,737
Assessed	\$53,248	Assessed	\$54,505
Exempt	HX H3 \$25,000	Exempt	HX H3 \$25,000
Total Taxable	county:\$28,023 city:\$28,023 other:\$28,023 school:\$28,248	Total Taxable	county:\$29,505 city:\$29,505 other:\$29,505 school:\$29,505

Aerial Viewer Pictometry Google Maps

☒ 2019
 ☐ 2016
 ☐ 2013
 ☐ 2010
 ☐ 2007
 ☐ 2005
 ☐ Sales


Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
NONE						

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1976	1536	1536	\$12,992
Sketch	2	MOBILE HME (000800)	1992	1248	1248	\$13,526

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0261	PRCH, UOP	1993	\$1,176.00	336.000	14 x 24 x 0	(000.00)
0296	SHED METAL	2005	\$700.00	1.000	0 x 0 x 0	(000.00)
0070	CARPORT UF	2005	\$800.00	1.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2014	\$200.00	1.000	0 x 0 x 0	(000.00)
0081	DECKING WI	2014	\$300.00	1.000	0 x 0 x 0	(000.00)

Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000102	SFR/MH (MKT)	1.000 AC	1.00/1.00 1.00/1.00	\$9,280	\$9,280
000102	SFR/MH (MKT)	1.000 AC	1.00/1.00 1.00/1.00	\$9,280	\$9,280
006200	PASTURE 3 (AG)	14.000 AC	1.00/1.00 1.00/1.00	\$242	\$3,388
009910	MKT.VAL.AG (MKT)	14.000 AC	1.00/1.00 1.00/1.00	\$0	\$58,299
009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$3,250	\$3,250
009947	SEPTIC (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$1,250	\$1,250

Search Result: 1 of 1