PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	For Office Use Only (Revised 7-1-15) Zoning Official Building Official	_
	<u>AP#</u> Date ReceivedBy Permit #	_
	Flood Zone Development Permit Zoning Land Use Plan Map Category	_
	Comments	-
1	FEMA Map# Elevation Finished Floor River In Floodway	_
1	□ Recorded Deed or ∵ Property Appraiser PO ∵ Site Plan □ EH# □ Well letter OR	
1	☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid	
1	□ DOT Approval □ Parent Parcel # □ STUP-MH □ 911 App	
[□ Ellisville Water Sys □ Assessment Paid on Property □ Out County □ In County □ Sub VF Form	
Pr	roperty ID #33-3S-16-02440-000 SubdivisionNA Lot#_	NA
•	New Mobile Home Used Mobile Home X MH Size 28 x 40 Year 1988	_
•	Applicant Dale Burd Phone # 386-365-7674	_
	Address 20619 CR 137, Lake City, FL, 32024	-
	Name of Property Owner Twin Springs MH Park, LLC Phone# 386-965-7068	
	911 Address 317 NW Park Drive, Lake City, FL, 32055	_
•	Circle the correct power company - (FL Power & Light) - Clay Electric	
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>	
	Name of Owner of Mobile HomeTwin Springs MH Park, LLC _ Phone #386-965-7068	
	Address POBox 3338, Lake City, FL, 32055	_
	Relationship to Property Owner Same	
	Current Number of Dwellings on Property 11	
	Lot Size Irregular Total Acreage 26	
•	Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle of (Not existing but do not need a Culvert)	ne) /ert)
â	Is this Mobile Home Replacing an Existing Mobile Home Yes	_
•	Driving Directions to the Property_US 90 West, TR Turner Road, TL NW Park Dr, to NE	
	Corner lot	
		_
	Name of Licensed Dealer/Installer Brent Strickland Phone # 386-365-7043	
	Installers Address 1294 Hamp Farmer Road, LC, FL, 32055	-
٠	License Number IH-1104218 Installation Decal # 65712	-

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER CONTRACTO	DR Brent Strickland PHONE 386-365-7043
	THIS FORM MUST BE SUBMITTED I	PRIOR TO THE ISSUANCE OF A PERMIT Twin Springs MH Park, LLC
records of the Ordinance 89-	subcontractors who actually did the trade sp 6, a contractor shall require all subcontractor	work at the permitted site. It is <u>KEQUIKED</u> that we have secific work under the permit. Per Florida Statute 440 and its to provide evidence of workers' compensation or e of Competency license in Columbia County.
		the corrected form being submitted to this office prior to the swill result in stop work orders and/or fines.
ELECTRICAL	Print Name_ Twin Springs MH Park, LLC	Raymond Kneppar Signature
	License #: Owner Qualifier Form A	Phone #:386-965-7068 ttached
MECHANICAL/	Print NameTwin Springs MH Park, LI	Raymond Kneppar C Signature
A/C	License #: Owner	Phone #: 386-965-7068
	Qualifier Form A	ttached
Qualifier Form	ns cannot be submitted for any Specialty	License.
Specialty L	icense License Number Sub-Contr	actors Printed Name Sub-Contractors Signature
MASON		
CONCRETE FIN	IISHER	

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

Parcel:	33-3S-16-02440-000
---------	--------------------

Owner & Pr	operty Info	Res	98 (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020) (1.2020)			
Owner	TWIN SPRING P O BOX 3338 LAKE CITY, FI					
Site	373 PARK RD	, LAKE CITY				
Description*	COMM NE COR OF SEC, W 520.35 FT FOR POB, SW 483.39 FT, SE 201.14 FT, SW 104.69 FT, SE 284.61 FT TO W MAINT R/W OF NE TURNER AVE, SW ALONG R/W 60 FT FT, NW 287.02 FT, SW 493.89 FT, SW 11.92 FT, S TO S LINE OF NE1/4 OF NE1/4, W 655.08 FT, NE 78.73 FT. NW 345more>>>					
Area	26 AC	S/T/R	33-3S-16			
Use Code**	MH PARK (002802)	Tax District	2			

^{*}The <u>Description</u> above is not to be used as the Legal Description for this

Property & Assessment Values

2019 Cer	tified Values	2020 Working Values			
Mkt Land (2) \$67,420		Mkt Land (2)	\$67,420		
Ag Land (0)	\$0	Ag Land (0)	\$0		
Building (7)	\$62,061	Building (7)	\$62,917		
XFOB (5)	\$44,764	XFOB (5)	\$44,764		
Just	\$174,245	Just	\$175,101		
Class	\$0	Class	\$0		
Appraised	\$174,245	Appraised	\$175,101		
SOH Cap [?]	\$0	SOH Cap [?]	\$0		
Assessed	\$174,245	Assessed	\$175,101		
Exempt	\$0	Exempt	\$0		
Total Taxable	county:\$174,245 city:\$174,245 other:\$174,245 school:\$174,245		county:\$175,101 city:\$175,101 other:\$175,101 school:\$175,101		

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.

Florida Limited Liability Company

TWIN SPRINGS MH PARK, LLC



Filing Information

Document NumberL19000223532 FEI/EIN NumberN/A Date Filed09/03/2019 Effective Date09/18/2019 StateFL StatusACTIVE

Principal Address

417 SW LOCKHEED LANE

LAKE CITY, FL 32025 UN

Mailing Address

PO BOX 3338

LAKE CITY, FL 32056 UN

Registered Agent Name & Address KNEPPAR, RAYMOND J

417 SW LOCKHEED LANE

LAKE CITY, FL 32025

386-965-7068

	7 Bun blocked 5/6.C 17425 ABS Rut 1000 # 51.	Model 100 LV HII Steel of was system		marriage wall piers within 2' of end of home per Rule 15C				Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Typical pier spacing	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 half of the blocking plan if home is a triple or quad wide sketch in remainder of home	Manufacturer PAN CO Length x width 40 x 2 8	Address of home 317 Min Park Divisions being installed	Installer Brent Strickland License # IH 1104218
Manufacturer Longitudinal Stabilizing Device (LSD) Sidewall Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device (LSD) Marriage wall Shearwall	within 2' of end of home spaced at 5' 4" oc OTHER TIES		IORS	Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. 17 3/16 x 25 3/16 441 446 446 446 446 446 446 446 446 4	8.5 x 18.5 16 x 22.5 17 x 22	1-beam pier pad size	from Rule	වි ගේ ශ් ශ් ශ් වි ශ් ශ් ශ් ශ් ශ් වි ශ් ශ් ශ් ශ් ශ්	oter 16" x 16" 18 1/2" x 18 20" x 20" 22" ze (256) 1/2" (342) (400) (4		Serial #	Single wide Wind Zone II Wind Zone III Double wide II Installation Decal # 657/2	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	New Home Used Home

Walls Floor Roof

Type Fastener: 1495

Length:

Spacing: Spacing:

Fastening multi wide units

Pad

Other

Type Fastener: Strikes Length: 4 Spacing: 1011 of the Fastener: 12.45 Length: 5 Spacing: 1011 of the For used homes a film. 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)

Debris and organic material removed
Water drainage: Natural Swale

Site Preparation

Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Po	Connect all sewer drains
electrical conductors between multi-wide units, but not to the main power This includes the bonding wire between multi-wide units. Pg	source. This includes the
Electrical	
4-17-2020	Date Tested
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	ALL TESTS MI
requires anchors with 4000 b holding capacity. Installer's initials	requires and
anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may	anchors are reading is 27
A state approved lateral arm system is being used and 4 ft.	Note: A state appra
The results of the torque probe test is 272 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.	The results of the to here if you are decla showing 275 inch po
TORQUE PROBE TEST	П
×	 *
 Using 500 lb. increments, take the lowest reading and round down to that increment. 	_
2. Take the reading at the depth of the footer.	
 Test the perimeter of the home at 6 locations. 	
POCKET PENETROMETER TESTING METHOD	PC
×] ×
The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing.	The pocket penetro or check here to de
POCKET PENETROMETER TEST	П

Type gasket Woll Foam

a result of a poorly installed or no gasket being installed. I understand a strip

Installer's initials

installed:

Between Floors Yes

homes and that condensation, mold, meldew and buckled marriage walls are I understand a properly installed gasket is a requirement of all new and used

of tape will not serve as a gasket.

Electrical crossovers protected. Yes

Other:

Drain lines supported at 4 foot intervals. Yes_ Range downflow vent installed outside of skirting. Dryer vent installed outside of skirting. Yes Skirting to be installed. Yes

Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

8

Yes NA

N A

Siding on units is installed to manufacturer's specifications. Yes

The bottomboard will be repaired and/or taped. Yes

Weatherproofing

Bottom of ridgebeam Yes Between Walls Yes

independent water supply systems. Pg.

Connect all potable water supply piping to an existing water meter, water tap, or other

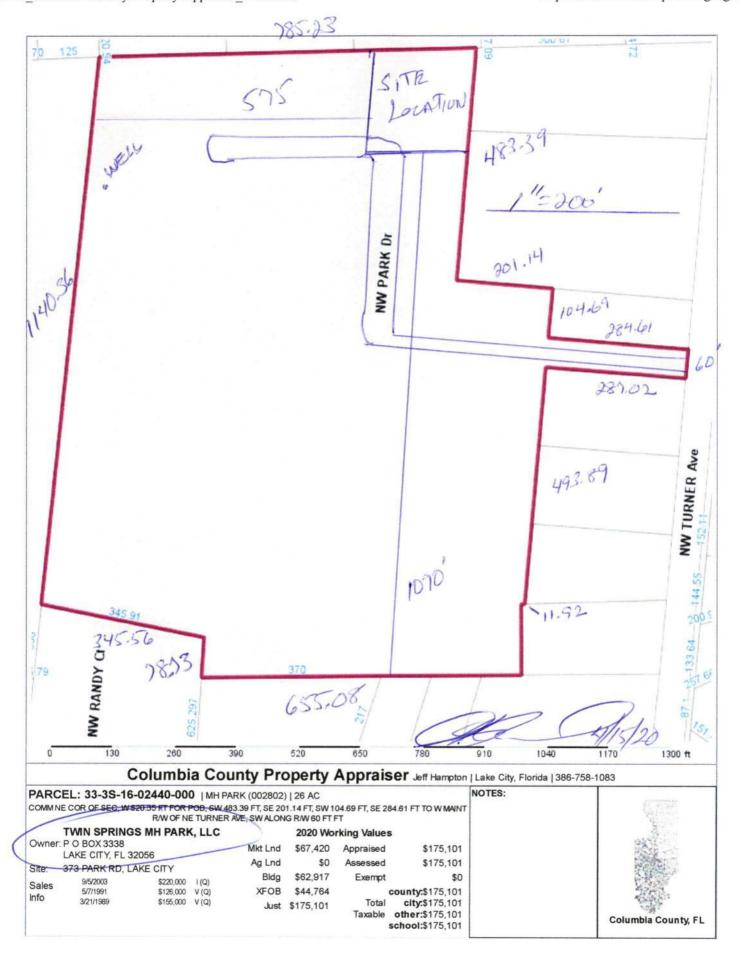
STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number_____

Twin Span	AMPRIL PART II - SITEPLAN	
Scale: 1 inch = 40 feet.	-1 ,	+
210 - WL	Police 648 1 Pro 12 Pro	310/P2 67
Notes:	of 26 Aerrs	
	SER Attached	
Site Plan submitted by:	M. C	CONTRACTOR
Plan Approved	Not Approved	Date
Ву		County Health Department

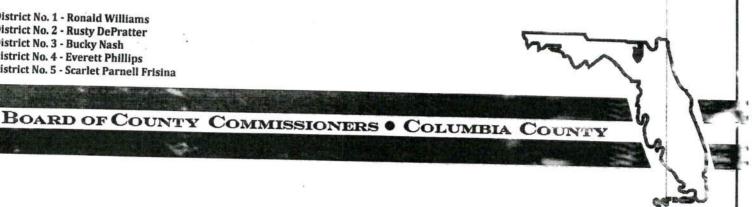
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



A Line sens	FLA. 384918, 3 Ifacturer e Serial Number and Model I 338166C7135 A Design Approval by (D.A.P. I. BADEO Instantand home is designed to comply with the resemeting and safety standards in force at it (for additional information, consult seems	ant Number 33 84919 July Designation B 166 A.)	Heating equipment manufactures and model (see list at left). The above heating equipment has the depactly to restnate an average 70° P temperature in fits home at outdoor temperatures of
Equipe For he For he For to Reling Water Washe Cluttle Dishler	aring INTERTHERM Expoing Oking WHIRLPOOL Prater STATE S Cryer OR Disposel	Model Designation MGH0 65 ABWL05 SF3004 SRN0 ET14JKXSN02 SC1301HS2E0 MD7TL51115	lempore unes use —————————————————————————————————
Design glasts centmoonts	15 PSF Honsontal 25	POP Upin ZONE 2 ZONE 2 NORTH 1	Arr Constitution and recommended (Atternate III) The init distribution system of frait home has not bear doligned in anticipation of its use with a certain air conditioning system. INFORMATION PROPRED BY THE MARKIFACTUREN NELESCRAFT TO CALCULARY SERSIBLE HEAT SAIN Walls (milhou cludows and fisces) Ceilings and roots of legal color Fiscers. Critique and roots of legal color Fiscers. Critique and roots of legal color Fiscers. Arr ducts in hear Arr ducts in councy Arr ducts in councy Arr ducts in councy Arr ducts in councy Arr ducts in foor Arr d
			基

Set ! シャマか 40. MAS

separting sept



July 26, 2016

VIA ELECTRONIC MAIL

David Mrvica 17051 27th Place Lake City, Fl 32024

Re: Statement of Land Use and Zoning Tax Parcel 02440-000

Dear Mr. Mrvica,

In response to your request for a statement of land use and zoning for Tax Parcel 02440-000, the subject property has a Future Land Use Map Designation of Residential, Low Density and a Zoning Designation of Residential, Single Family-2 ("RSF-2"). The existing use as a Mobile Home Park is a legal nonconforming use. In accordance with Section 2.3.8 of the Land Development Regulations ("LDRs"), the use as a Mobile Home Park is approved for up to fourteen (14) mobile home dwelling units.

If you have any additional questions, please do not hesitate to contact me via email or phone at bstubbs@columbiacountyfla.com or (386) 754-7119.

Sincerely,

Brandon M. Stubbs

County Planner/LDR Admin.

Building & Zoning

BOARD MEETS THE FIRST THURSDAY AT 5:30 P.M. AND THIRD THURSDAY AT 5:30 P.M.

P.O. BOX 1529 LAKE CITY FLORIDA 32056 1520 To DUONE COOK MER



BUILDING DEPARTMENT COLUMBIA COUNTY, FLORIDA

Application #____

OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROMBaker County, Sanderson, FL
OWNERS NAME Twin Springs MH Park, LLC Raymond Kneppar PHONE CELL_386-965-7068
NSTALLER Brent Strickland PHONE CELL 386-365-7043
NSTALLERS ADDRESS1294 Hamp Farmer Road, Lake City, FL, 32055
MODIL E LIGHT INTO THE PARTY.
MOBILE HOME INFORMATION
MAKE
COLOR SERIAL No 338166C7135 AB
VIND ZONE SMOKE DETECTOR
NTERIOR: FLOORS
DOORS
VALLS V
CABINETS
LECTRICAL (FIXTURES/OUTLETS)
XXTERIOR: VALLS / SIDDING
VINDOWS
OORS
NSTALLER: APPROVEDNOT APPROVED
NSTALLER OR INSPECTORS PRINTED NAME Brent Strickland
obile Home Installer Signature Drewt Stuhlaus License No. IH 1104218 Date 4-17-202
OTES:
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.
O WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND HE WIND ZONE MUST BE PROVEN TO BE PERMITTED.
EFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED ND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.
NCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON HE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE HIS IS DONE.
OR DEFICE USE

Building Inspectors Signature _____