

THIS INSTRUMENT PREPARED BY:

MARLIN M. FEAGLE, ESQUIRE
MARLIN M. FEAGLE, P.A.
101 East Madison Street
Post Office Box 1653
Lake City, Florida 32056-1653

Florida Bar No. 0173248

Inst: 2002018199 Date: 09/16/2002 Time: 09:10
Doc Stamp-Deed : 369.60
MCK DC, P. DeWitt Cason, Columbia County B: 962 P: 1254

WARRANTY DEED

THIS INDENTURE, made this 10th day of September, 2002, between **CARL IVEY CARTER**, a married man not residing on the property, party of the first part, Grantor, and **TIMOTHY J. HALL** and his wife, **SHANNON RENE HALL**, whose mailing address is HC01, Box 62G, White Springs, Florida 32096, parties of the second part, Grantee,

W I T N E S S E T H:

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 grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs, successors and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

TOWNSHIP 1 SOUTH - RANGE 17 EAST

Section 8: Part of the W 1/2 of the NW 1/4 of Section 8, Township 1 South, Range 17 East, Columbia County, Florida, being more particularly described as follows: For Point of Reference commence at the Northwest corner of said Section 8, thence run S 00°52'43" E along the West line of said Section 8, a distance of 1714.98 feet to the **POINT OF BEGINNING**;

thence run N 86°03'05" E, a distance of 1120.28 feet to the West right-of-way line of U.S. Highway No. 441; thence run S 17°07'22" E along said West right-of-way line, a distance of 450.00 feet; thence continue along said West right-of-way line, S 17°18'22" E, a distance of 244.22 feet; thence run S 81°12'11" W, a distance of 834.99 feet; thence run S 17°09'54" E, a distance of 220.16 feet; thence run S 76°17'27" W, a distance of 561.90 feet to said West line; thence run N 00°52'43" W along said West line, a distance of 1057.57 feet to the **POINT OF BEGINNING**. Containing 23.50 acres, more or less.

SUBJECT TO a 60.00 foot easement for ingress and egress as described hereon.

LESS AND EXCEPT the following described 60.00 foot easement: Part of the W 1/2 of the NW 1/4 and part of the N 1/2 of the SW 1/4 of Section 8, Township 1 South, Range 17 East, Columbia County, Florida, being more particularly described as follows: For Point of Reference commence at the Northwest corner of said Section 8, thence run N 88°23'19" E along the North line of said Section 8, a distance of 634.19 feet to the West right-of-way line of U.S. Highway No. 441; thence run S 17°07'22" E along said West right-of-way line, a distance of 2182.44 feet; thence continue along said West right-of-way line, S 17°18'22" E, a distance of 183.55 feet to the **POINT OF BEGINNING**; thence continue S 17°18'22" E, a distance of 60.67 feet; thence run S 81°12'11" W, distance of 834.99 feet; thence run S 17°09'54" E, a distance of 220.16 feet; thence run S 76°17'27" W, a distance of 60.11 feet; thence run N 17°09'54" W, a distance of 286.01 feet; thence run N 81°12'11" E, a distance of 895.49 feet to the **POINT OF BEGINNING**. Easement containing 1.53 acres, more or less.

SUBJECT TO reservations, restrictions and easements of record, if any, together with ad valorem taxes and non-ad valorem assessments subsequent to December 31, 2002.

Tax Parcel No.: 08-1S-17-04501-000

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

TO HAVE AND TO HOLD the same in fee simple forever.

AND the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2001.

IN WITNESS WHEREOF, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered
in the presence of:

Marlin Feagle
Witness

MARLIN FEAGLE
Print or type name

Diane S. Edenfield
Witness

DIANE S. EDENFIELD
Print or type name

Carl Ivey Carter (SEAL)
CARL IVEY CARTER
Post Office Box 2085
Lake City, Florida 32056-2085

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

The foregoing instrument was acknowledged before me this 10th day of September, 2002, by **CARL IVEY CARTER** who is personally known to me.



(NOTARIAL
SEAL)

Diane S. Edenfield
MY COMMISSION # DD112002 EXPIRES
May 26, 2006
BONDED THRU TROY FAIR INSURANCE, INC.

Diane S. Edenfield
Notary Public, State of Florida

My Commission Expires:

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), Shannon Hall
owner of the below described property:

Tax Parcel No. 08-15-17-04501-006

Subdivision (name, lot, block, phase) _____

Give my permission to Lauren Hall to place a
mobile home/travel trailer/single family home (circle one) on the above mentioned
property.

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Shannon S. Hall
Owner

Owner

SWORN AND SUBSCRIBED before me this 14 day of July,
20 11. This (these) person(s) are personally known to me or produced
ID FL DL.

L. H.
Notary Signature



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Steppan 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 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>Timmy Hall's</u> License #: <u>Owner</u>	Signature <u>Timmy Hall</u> Phone #: <u>758-5888</u>
MECHANICAL/ A/C	Print Name <u>Timmy Hall's</u> License #: <u>Owner</u>	Signature <u>Timmy Hall</u> Phone #: <u>758-5888</u>
PLUMBING/ GAS	Print Name <u>Robert Steppan</u> License #: _____	Signature <u>Robert Steppan</u> Phone #: _____

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.

Contractor Forms: Subcontractor form: 1/11



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

APPLICATION FOR CONSTRUCTION PERMIT

CR # 10-5244

PERMIT NO. 640328
DATE PAID: 6/29/11
FEE PAID: 630.00
RECEIPT #: 16608654

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: TIMOTHY & SHANNON HALL

AGENT: PAUL LLOYD

TELEPHONE: (386) 752-2403

MAILING ADDRESS: 152 NE ERNEST GLENN HWY 441 NORTH WHITE SPRINGS FL 32096

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____

PROPERTY ID #: 08-1S-17-04501-006 ZONING: AG I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 22.400 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: US 441 NORTH

DIRECTIONS TO PROPERTY: 441 NORTH 3-4 MILES PAST MILTON STORE, 1ST DRIVE ON LEFT AFTER ERNEST GLENN

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>MOBILE HOME</u>	<u>3</u>	<u>1,080</u>	<u>Zone X</u>
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

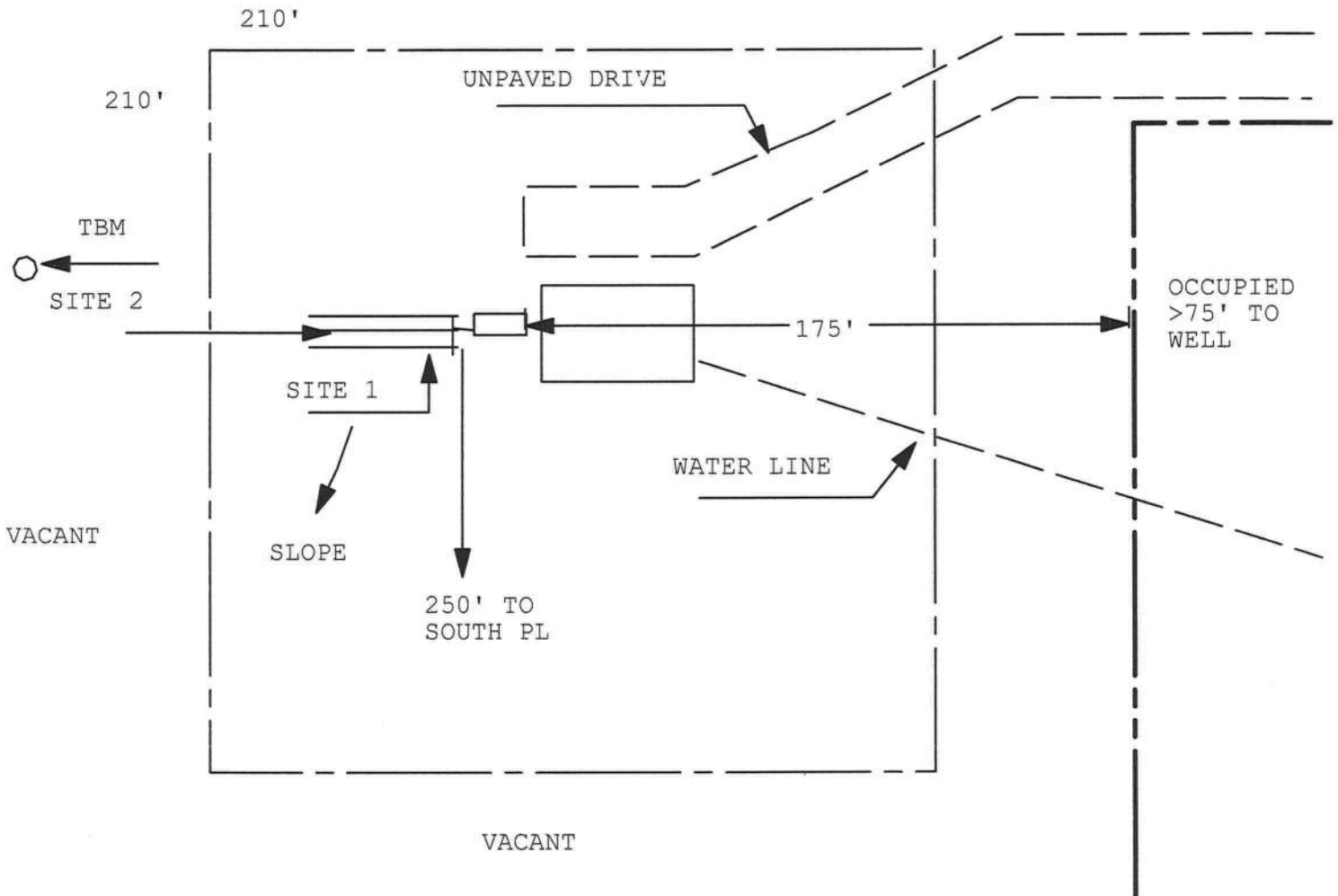
SIGNATURE: Paul Lloyd DATE: 6/29/10

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 11-2323

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

CR# 10-5244

VACANT



1 inch = 50 feet

Site Plan Submitted By Paul Lloyd Date 6/28/11
Plan Approved ☒ Not Approved ☐ Date 7-5-11

By Salli Ford - Env Health Director **Columbia CHD** CHU

Notes: See attached for full dimensions

1A of 22.4 shown



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, Robert D. Sheppard, 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
Shannon Hall	Shannon Hall	Owner
Lauren Hall		mtt 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.

Robert Sheppard
License Holders Signature (Notarized) TH0125386 License Number 7-14-11 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 14 day of July, 2011.

Lisa Huchingson
NOTARY'S SIGNATURE

(Seal/Stamp)



**FAX
MEMORANDUM****MEMORANDUM****FLORIDA DEPARTMENT OF TRANSPORTATION**

To: Mr. Randy Jones, Dept. Director
Columbia Co. Building & Zoning Dept.
Fax No: 386-758-2160

From: Dale L. Cray, FDOT Permits Insp.
Date: 7-14-2011 **Fax No.** 386-961-7183
Attention: Ms. Lauria Hudson Col Co.
Building Zoning Dept.

() Sign and return. (XX) For your files. () Please call me. (XX) FYI () For Review

REF: Existing Res. Driveway

PROJECT: Timothy & Shannon Hall (RES-DRIVEWAY)

PARCEL ID No: 08-1s-17-04501-006 **Permit No :** N/A **Sec No :** 29070

MILE POST: N/A

Mr. Jones

Please accept this as our legal notice of passing inspection for an existing residential driveway. Land owner Timothy & Shannon Hall, current address is 152 NW Ernest Lane Wt. Springs, FL 32096.

The existing Residential Access has been inspected and (Approved) and, meets FDOT Standard Requirements.

If further information is required on this project please do not hesitate to contact this office for additional access permitting information details. My office number is 961-7193 or 961-7146.

Sincerely,



Dale L. Cray
Access Permits Inspector



1107-33

COLUMBIA COUNTY 9-1-1 ADDRESSING

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

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 7/14/2011 DATE ISSUED: 7/21/2011

ENHANCED 9-1-1 ADDRESS:

16430 N US HIGHWAY 441

WHITE SPRINGS FL 32096

PROPERTY APPRAISER PARCEL NUMBER:

08-1S-17-04501-006

Remarks:

ADDRESS FOR PROPOSED NEW STRUCTURE ON PARCEL.

Address Issued By: 

Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7-14-11 BY LM ¹¹⁰⁷⁻³³ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO
OWNERS NAME Shannon Hall PHONE 352-752-2203 CELL 905-4536
ADDRESS 152 NW Ernest Glen White Springs FL 32096

MOBILE HOME PARK _____ SUBC VISION _____

DRIVING DIRECTIONS TO MOBILE HOME _____

441 North to Cit Glen (approx. 11 miles past I-10)
White mobile home on right.

MOBILE HOME INSTALLER Robert V. Hall PHONE _____ CELL 623-2203

MOBILE HOME INFORMATION

MAKE Horton YEAR 1997 SIZE 14 x 62 COLOR White

SERIAL No. H134000G

WIND ZONE II Must be wind zone II or higher NC WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

\$50.00

☒ 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

Date of Payment: 7-14-11
Paid By: Shannon Hall
Notes: 1107-33

EXTERIOR:

☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT ☒ NEEDS CLEANING
☒ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING ☒ WEATHERTIGHT
☒ ROOF ☒ APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Att. S. Powell NUMBER 402 DATE 7-15-11

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official _____	Building Official <u>J.C. 7-20-11</u>
AP# <u>1107-33</u>	Date Received <u>7/14/11</u>	By <u>LH</u>	Permit # <u>29577</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-1</u>	Land Use Plan Map Category <u>A-1</u>
Comments _____			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1st floor</u>	River <u>N/A</u> In Floodway <u>N/A</u>
<input checked="" type="checkbox"/> Site Plan with Setbacks Shown	<input checked="" type="checkbox"/> EH # <u>11-0303</u>	<input type="checkbox"/> EH Release	<input checked="" type="checkbox"/> Well letter <input type="checkbox"/> Existing well
<input type="checkbox"/> Recorded Deed or Affidavit from land owner	<input checked="" type="checkbox"/> Installer Authorization	<input checked="" type="checkbox"/> State Road Access	<input type="checkbox"/> 911 Sheet
<input type="checkbox"/> Parent Parcel # _____	<input type="checkbox"/> STUP-MH _____	<input type="checkbox"/> F W Comp. letter	<input checked="" type="checkbox"/> VF Form
IMPACT FEES: EMS _____ Fire _____ Corr _____		<input type="checkbox"/> Out County <input checked="" type="checkbox"/> In County <u>fixed 7-14-11</u>	
Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 _____			

Property ID # 08-15-17-04501-006 (Shannon 623-4058 cell) Subdivision _____

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x62 Year 97
- Applicant Shannon A. Hall (Lauren Hall) Phone # (386) 752-2403
- Address 152 NW Ernest Glen White Springs, FL 32096
- Name of Property Owner Timothy & Shannon Hall Phone# (386) 752-2403
- 911 Address 16430 N US Hwy 441, White Springs, FL 32096
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Timothy & Lauren Hall Phone # (386) 752-2403
 Address 152 NW Ernest Glen White Springs, FL 32096
- Relationship to Property Owner Daughter
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage 23.50
- 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 NO
- Driving Directions to the Property Hwy. 441 North 13 miles past I-10. After passing Ernest Glen, property is located two drives down on same side of road.
- Name of Licensed Dealer/Installer Sheppard's Mobile Home Svc Phone # (386) 623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
 - License Number FH1025386 Installation Decal # 279846

Spoke to Shannon 7-22-11

Columbia County Property Appraiser

DB Last Updated: 6/22/2011

2010 Tax Year

Parcel: 08-1S-17-04501-006

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	HALL TIMOTHY J & SHANNON R		
Mailing Address	152 NW ERNEST LN WHITE SPRINGS, FL 32096		
Site Address	ERNEST LN		
Use Desc. (code)	TIMBERLAND (005500)		
Tax District	3 (County)	Neighborhood	1117
Land Area	22.400 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
COMM NW COR, RUN S 1714.98 FT FOR POB, RUN ELY 1120.28 FT TO W R/W US-441, S 17 DEG E ALONG R/W 694.22 FT, S 81 DEG W 561.90 FT, N 1057.57 FT TO POB. ORB 962-1254.			



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (1)	\$0.00
Ag Land Value	cnt: (0)	\$5,398.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$5,398.00
Just Value		\$68,947.00
Class Value		\$5,398.00
Assessed Value		\$5,398.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$5,398 Other: \$5,398 Schl: \$5,398	

2011 Working Values

NOTE:
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
9/10/2002	962/1254	WD	V	Q		\$52,800.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
			NONE			

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
						NONE

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
005500	TIMBER 2 (AG)	22.4 AC	1.00/1.00/1.00/1.00	\$250.00	\$5,600.00
009910	MKT.VAL.AG (MKT)	22.4 AC	1.00/1.00/1.00/1.00	\$0.00	\$62,052.00

Columbia County Property Appraiser

DB Last Updated: 6/22/2011

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

Installer Robert Shepard License # TH1025386

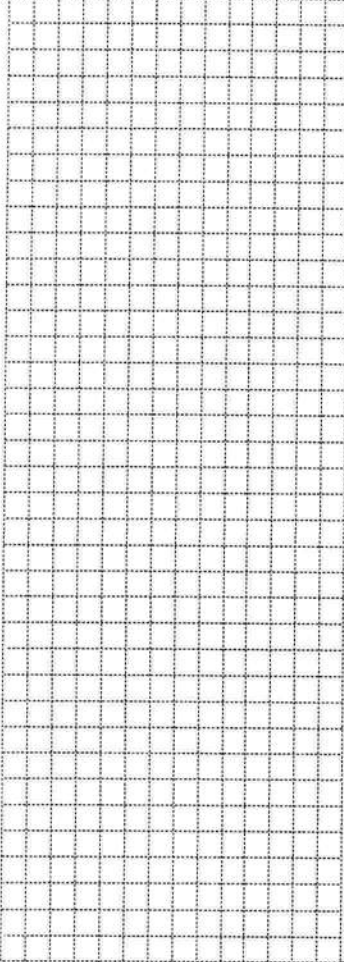
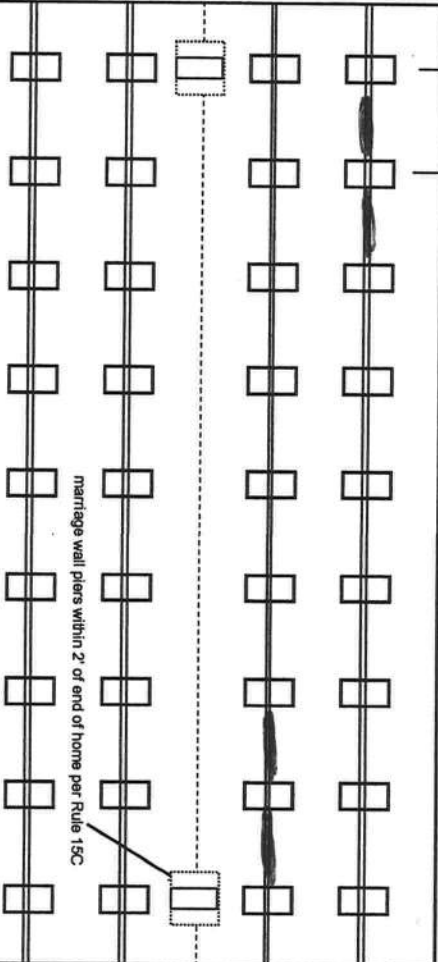
911 Address where home is being installed. _____

Manufacturer Horton Length x width 14x70

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 RS



New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☒

Home is installed in accordance with Rule 15-C ☐

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 278549

Triple/Quad ☐ Serial # H1345009

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer 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'	5'	6'	7'	8'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	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 17x25

Perimeter pier pad size Per Robert

Other pier pad sizes (required by the mfg.) Phone 7-19-11

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

ANCHORS 4 ft ☒ 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer

Sidewall

Longitudinal

Longitudinal Stabilizing Device w/ Lateral Arms

Marriage wall

Manufacturer

Shearwall

Number

22

2

4

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1800 X 1900

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 1700 X 1800 X 1900

TORQUE PROBE TEST

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.

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.

KS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Shepard

Date Tested 7-13-11

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. 28

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

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 Installed:
Pg. 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 ✓

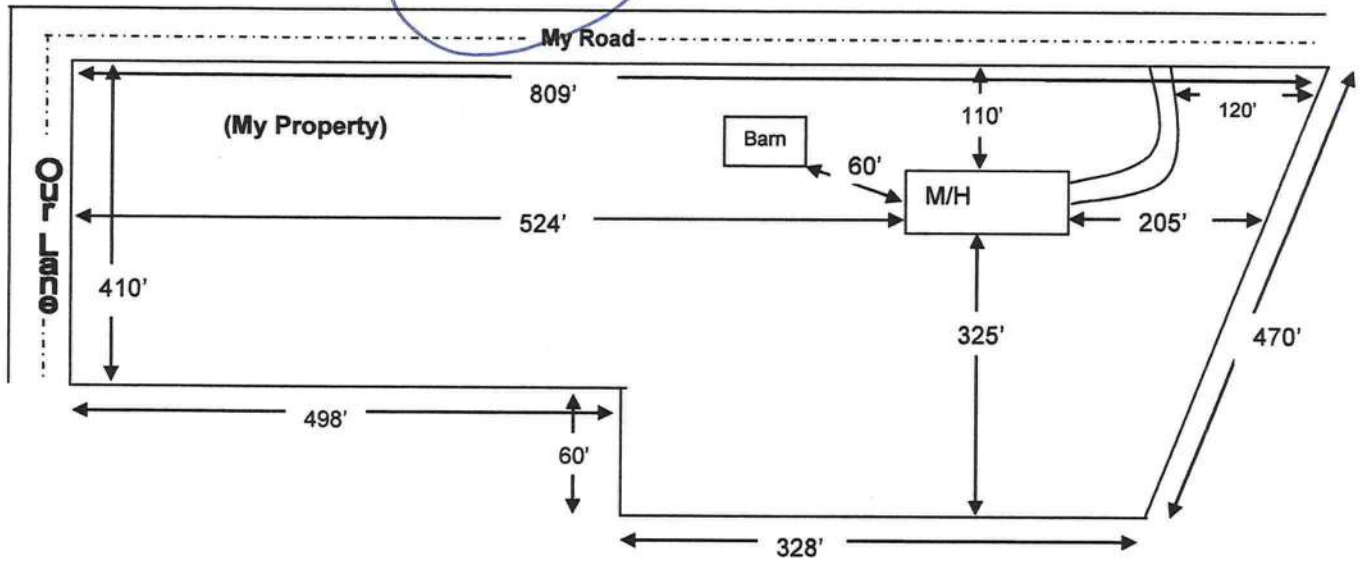
Miscellaneous

Skirting to be installed. Yes ✓ No
Dryer vent installed outside of skirting. Yes N/A ✓
Range downflow vent installed outside of skirting. Yes N/A ✓
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes ✓
Other:

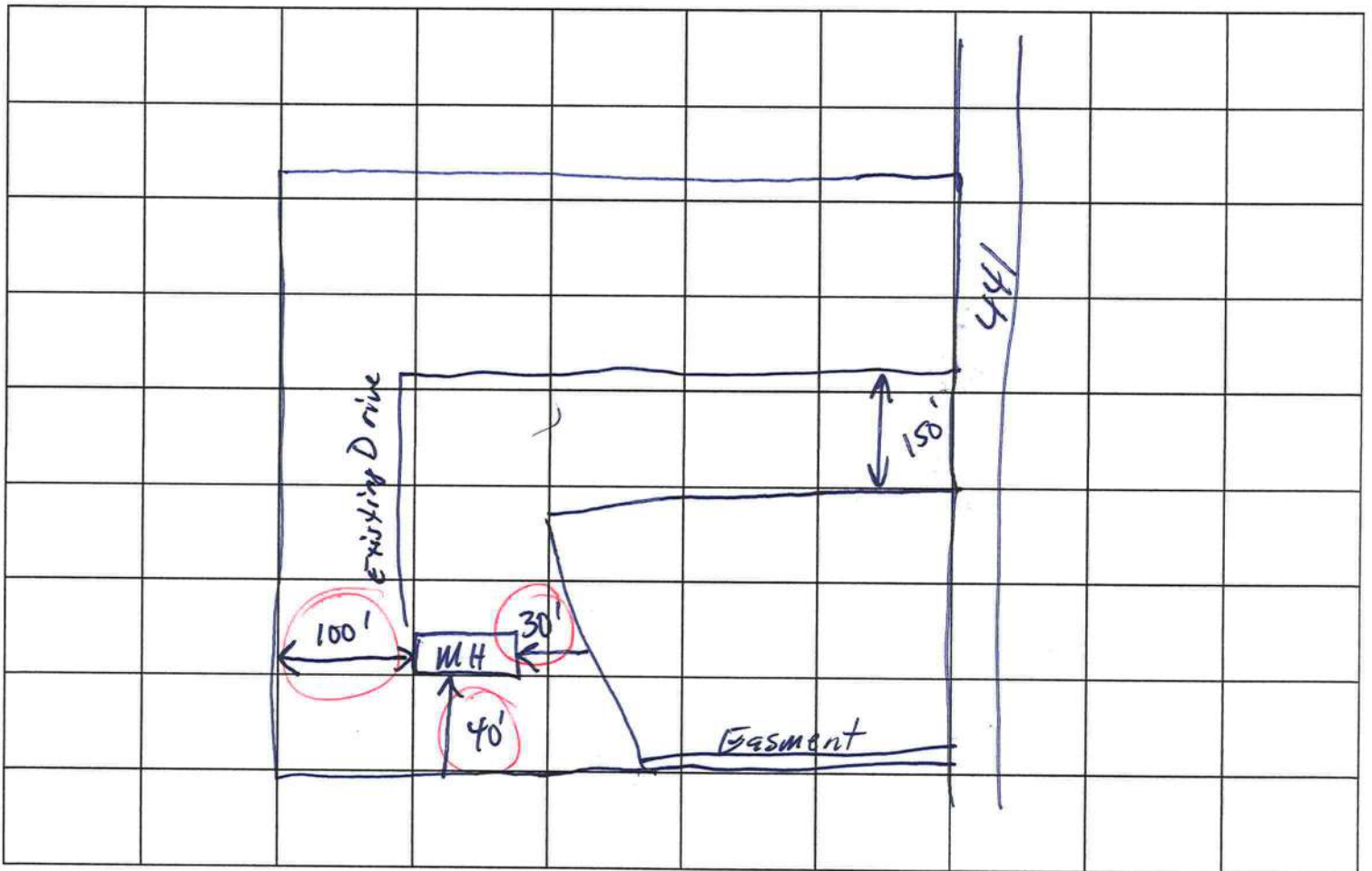
Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Robert Shepard Date 7-13-11

SITE PLAN EXAMPLE / WORKSHEET



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.



DATE 07/25/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029577

APPLICANT SHANNON HALL PHONE 752-2403
ADDRESS 152 NW ERNEST GLEN WHITE SPRINGS FL 32096
OWNER TIMOTHY & SHANNON HALL/LAUREN HALL PHONE 752-2403
ADDRESS 16430 N US HWY 441 WHITE SPRINGS FL 32096
CONTRACTOR ROBERT SHEPPARD PHONE 623-2203

LOCATION OF PROPERTY 441 NORTH, 13 MILES PAST I-10 AND PAST ERNEST GLEN GO TO
THE 2ND DRIVE ON LEFT

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING AG-1 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 08-1S-17-04501-006 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 23.50

IH1025386 x Shannon R. Hall
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

EXISTING DOT 11-0303 BK TC N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

AFFIDAVIT ON FILE

Check # or Cash 4403

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by

Framing Insulation
date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by

Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 19.26 WASTE FEE \$ 50.25

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ **TOTAL FEE** 394.51

INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.