

DATE 05/27/2010

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

PERMIT
000028605

APPLICANT MARVIN BIBBEE PHONE 466-5125
ADDRESS 1729 SW NAUTILUS RD. LAKE CITY FL 32024
OWNER KATHLEEN BIBBEE PHONE _____
ADDRESS 1727 SW NAUTILUS RD. LAKE CITY FL 32024
CONTRACTOR WENDELL CREWS PHONE 352 351-6100
LOCATION OF PROPERTY 441S, TR 47S, TL CR 240, TR OLD WIRE RD., TL NAUTILUS RD.,
AFTER SECOND CURVE, 1ST MAILBOX 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 A-3 MAX. HEIGHT _____
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 24-5S-16-03702-002 SUBDIVISION _____
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 5.00

IH0000629
Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number N Marvin Bibbee Applicant/Owner/Contractor
EXISTING 10-248 BK HD Y
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, MEETS DENSITY REQUIREMENTS,
EAST 5 ACRES

Check # or Cash 508

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 \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 32.10 WASTE FEE \$ 83.75
FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ TOTAL FEE 490.85
INSPECTORS OFFICE Paul Tedder CLERKS OFFICE CH

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-10-08) Zoning Official BLK 26.05.10 Building Official ND 5-26-10

AP# 100.5-39 Date Received 5/19/10 By G Permit # 28605

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Meets Density Requirements, EAST 5 ACRES

FEMA Map# N/A Elevation N/A Finished Floor 1st floor River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-6248 ☐ EH Release ☒ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer for Joyce ☐ State Road Access

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter _____

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL N/A - Suspended

Property ID # 24-55-16-03702-002 Subdivision N/A

- New Mobile Home _____ Used Mobile Home ☒ MH Size 28x56 Year 1989
- Applicant Marvin Bibbee or Joyce Culbreath Phone # 406-5125
- Address 1729 S.W. Nautilus Rd, Lake City, FL 32024
- Name of Property Owner Marvin Bibbee Phone# 406-5125
- 911 Address 1727 SW Nautilus Rd, Lake City, FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Kathleen Bibbee Phone # _____
 Address _____
- Relationship to Property Owner ex-wife
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 10 acres
- 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 (owes) 490.85
- Driving Directions to the Property 4415, TR 475, TL CR 240,
TR Old Wire Rd, TL Nautilus Rd, After second
Culvert, 1st mailbox on left.
- Name of Licensed Dealer/Installer Wendell Crews Phone # 352-351-6100
- Installers Address 4650 N.E 35th St. Ocala, FL 34479
- License Number TH0000629 Installation Decal # 60
left message
5/27/10

MOBILE HOME PERMIT WORK SHEET

page 1 of 2

ERMIT NUMBER

Installer Mendell Crews License # EH0000629

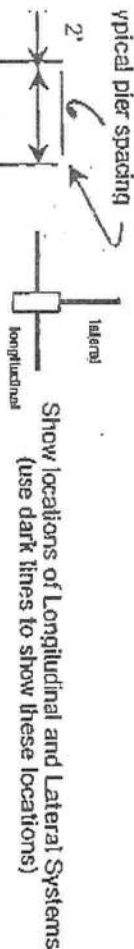
Address of home _____
 being installed _____

Manufacturer Fleetwood Length x width 28' x 56'

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 MLC



marriage wall piers within 2' of end of home per Rule 15C

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 #

Triple/Quad ☐ Serial # 5AFLJ34B109285H

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 1/2"	20" x 20"	22" x 22"	24" x 24"	26" x 26"
1000 psi	3'	4'	5'	6'	7'	8'
1500 psi	4' 6"	6'	7'	8'	9'	10'
2000 psi	6'	8'	9'	10'	11'	12'
2500 psi	7' 6"	9'	10'	11'	12'	13'
3000 psi	8'	10'	11'	12'	13'	14'
3500 psi	8'	10'	11'	12'	13'	14'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 21 x 29

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) 16 x 16

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 8'0" Pier pad size 16 x 16

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer Ober
 Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Ober

POPULAR PAD SIZES

Pad Size	Sq in
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 26 1/4	348
20 x 20	400
17 1/2 x 22 1/2	432
17 3/16 x 25 3/16	441
24 x 24	576
26 x 26	676

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

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

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall
 Number Five
 Size 5'4" oc
 Location @ ends

PERMIT WORKSHEET

page 2 of 2

PERMIT NUMBER

POCKET PENETROMETER TEST

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

X X X

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 X X

TORQUE PROBE TEST

The results of the torque probe test is 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. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Blondee Crews

Date Tested 5-7-10

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. 15-C

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15-C

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15-C

Site Preparation

Debris and organic material removed ☒ Swale Pad ☒ Other

Fastening multi wide units

Floor: Type Fastener: leg Length: 3/8 x 5" Spacing: 16"
Walls: Type Fastener: 3 screws Length: 2 1/8 x 4" Spacing: 16"
Roof: Type Fastener: anchors Length: 5' 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 (waterproofing 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 UC

Type gasket foam Installed:
Pg. 15-C Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 15-C
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

manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Blondee Crews Date 5-7-10

INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.

- a) The concrete shall be minimum 2500 psi mix.
 - b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 6" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - c) Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - d) If a full slab is used, the depth must be a 4" minimum.
- Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.



LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer OR When installing in cured concrete use Part # 1101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

LATERAL: (Model 1101 TC "V")

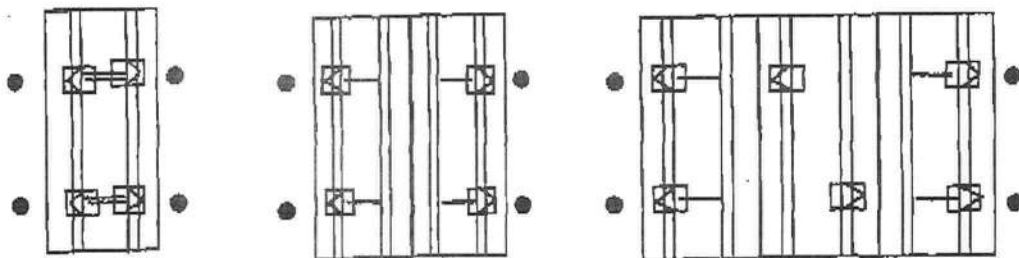
18. For wet set (part # 1101-W-TACA) Installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

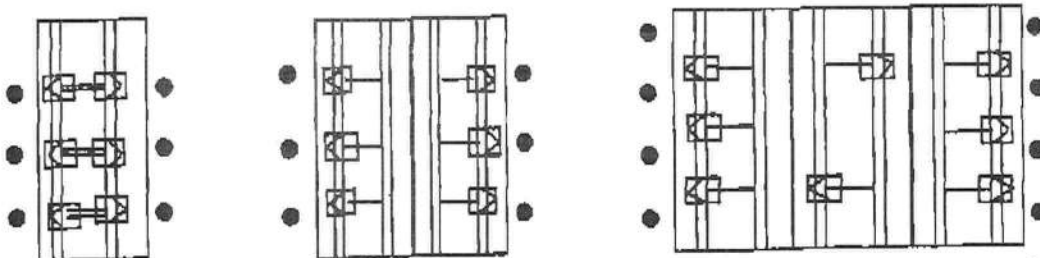
1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
2. • = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
3.  = LOCATION OF LONGITUDINAL BRACING ONLY
4.  = TRANSVERSE & LONGITUDINAL LOCATIONS

REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V"
BRACES FOR UP TO 4/12 ROOF PITCH

ALL WIDTHS; AND LENGTHS UP TO 52'



ALL WIDTHS; AND LENGTHS OVER 52' TO 80'



HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS
 6 systems for home lengths up to 52' and 8 systems for homes over 52' and up to 80'. One stabilizer plate and frame tie required at each lateral bracing system.

3-084

OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM
MODEL 1101 "V" (STEPS 1-15)
LONGITUDINAL ONLY: FOLLOW STEPS 1-9
FOR ADDING LATERAL ARM: Follow Steps 10-15
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - STOP! Contact Oliver Technologies at 1-800-284-7437:
a) Pier height exceeds 48" b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96"
e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C).
3. Place ground pan (C) directly below chassis I-beam. Press or drive pan firmly into soil until flush with or below soil.
SPECIAL NOTE: The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED, IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4". VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.).

4. Select the correct square tube brace (E) length for set-up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

PIER HEIGHT
(Approx. 45 degrees Max.)

1.25" ADJUSTABLE
Tube Length

1.50" ADJUSTABLE
Tube Length

7 3/4" to 25"	22"	18"
24 3/4" to 32 1/4"	32"	18"
33" to 41"	44"	18"
40" to 48"	54"	18"

5. Install (2) of the 1.50" square tubes (E {18" tube}) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.
8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.
NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
11. NOTE: Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.



OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone: 931-796-4555
Fax: 931-796-8811
www.olivertechnologies.com

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SEP-25-2007 09:26A FROM: OLIVER TECH

13527192502 TO: 13527516103
FAX 352-701-0401

P. 1 1



Installation Instructions for ABS Pads

For use on all Mobile and Manufactured Homes, including HUD approved Homes and Modular Housing
patents 5509500 and other patents pending

GENERAL INSTRUCTIONS:

- All pads are to be installed flat side down, ribbed side up.
- The ground under the pads should be leveled as smooth as possible with all vegetation removed. Pads to be placed on fully compacted or undisturbed soil at or below the frost-line, or per local jurisdiction.
- Pier & pad spacing will be determined by the manufactured homes' written set-up instructions or any local or state codes.
- The open cells between the ribbing on the upper side of the pads may be filled with soil or sand after installation to prevent any accumulation of stagnant water in the pads.
- A pocket penetrometer may be used to determine the actual soil bearing value. If soil-testing equipment is not available, use an assumed soil value of 1000 lbs. / square foot.
- All pad sizes shown are nominal dimensions and may vary up to 1/8"
- The maximum deflection in a single pad is 5/8" measured from the highest point to the lowest point of the top face. (NOTE: Actual test results were less than 5/8")
- In frost areas, a 6" deep confined gravel base installed in well drained, non-frost susceptible soil is recommended.
- Pad loads are the same when using single stack or double stack blocks.
- The maximum load at any intermediate soil value may be determined as the average of the next lower and next higher soil value given in the table below.
- Any configuration (see reverse side) may be used to replace a home manufacturer's recommended concrete or wood base pad.
- If the home manufacturer shows soil densities greater than 3000 lb. when using ABS pads, do not exceed 3000 lb. soil pier spacings per set up manual.

Pad Size	ID No.	Pad Area	1000 PSF Soil	2000 PSF Soil	3000 PSF Soil
OVAL 16" x 18.5"	1055-23	288 sq. in.	2000 lbs.	4000 lbs.	6000 lbs.
OVAL 17" x 22"	1055-16	360 sq. in.	2500 lbs.	5000 lbs.	7500 lbs.
OVAL 17.5" x 22.5"	1055-21	384 sq. in.	2667 lbs.	5334 lbs.	8000 lbs. *
OVAL 17.5" x 25.5"	1055-17	432 sq. in.	3000 lbs.	6000 lbs.	9000 lbs. *
OVAL 21" x 29"	1055-22	576 sq. in.	4000 lbs.	8000 lbs. *	12000 lbs. *
OVAL 23.25" x 31.25"	1055-20	675 sq. in.	4694 lbs.	9388 lbs. *	13988 lbs. *
Pad Size	ID No.	Pad Area	1000 PSF Soil	2000 PSF Soil	3000 PSF Soil
16" x 16"	1055-14	256 sq. in.	1780 lbs.	3560 lbs.	5335 lbs.
18.5" x 18.5"	1055-9	342 sq. in.	2375 lbs.	4750 lbs.	7100 lbs. *
20" x 20"	1055-7	400 sq. in.	2750 lbs.	5500 lbs.	8250 lbs. *
24" x 24"	1055-13	576 sq. in.	4000 lbs.	8000 lbs. *	12000 lbs. *

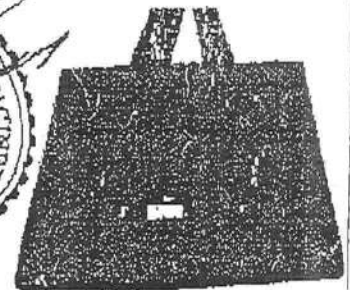
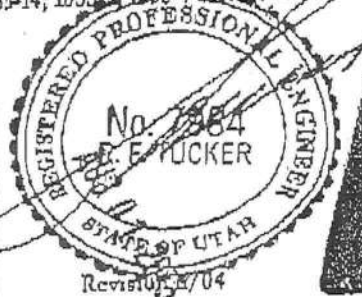
* Concrete blocks are required to be double blocked.

13. ALABAMA ONLY: The 16" x 16" ID# 1055-14, 16" x 18.5" ID# 1055-23, 17" x 22" ID# 1055-16, 17.5" x 22.5" ID# 1055-21, 17.5" x 25.5" ID# 1055-17 are the only pads approved in the state of Alabama, and must not have more than 3/8" deflection. See chart below for details on correct installation in Alabama.

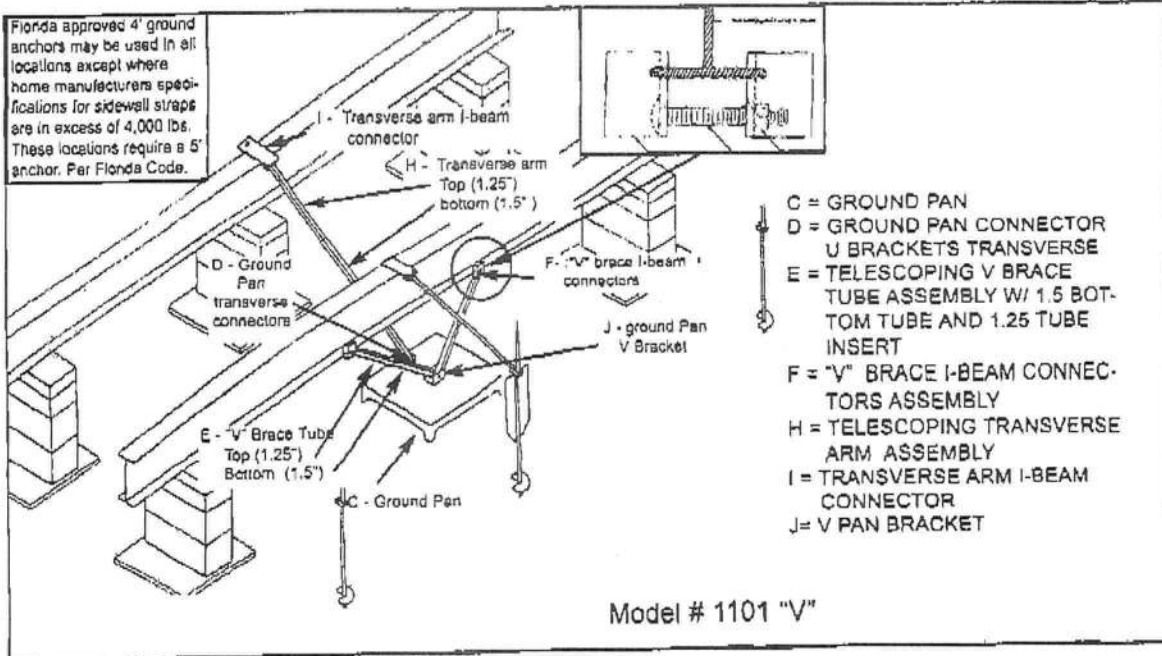
14. TEXAS ONLY: 17.5" x 22.5" ID# 1055-21 and 23.25" x 31.25" ID# 1055-20 may not be installed in the State of Texas.
15. Steel Piers: All pads are tested with steel piers on 1000 PSF soil density unless otherwise noted. (#16)
16. Available pads tested on 2000 PSF soil density are: ID#s 1055-14, 1055-9, 1055-7 and 1055-13.

Example: 16" x 80' section

PAD SIZE	1000 Lb Psf	2000 Lb Psf
16" x 16" Pad	29"	5' 6"
16" x 18.5" Oval Pad	3' 0"	6' 0"
17" x 22" Oval Pad	3' 9"	7' 6"
17.5" x 22.5" Oval Pad	4' 0"	8' 0"
17.5" x 25.5" Oval Pad	4' 5"	8' 0"
21" x 29" Oval Pad	6' 0"	8' 0"



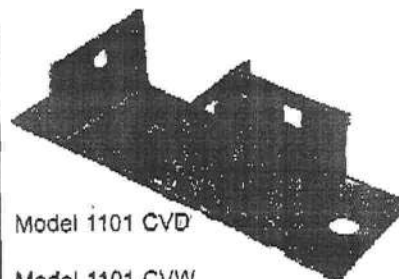
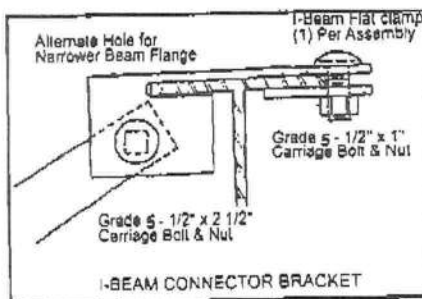
Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.



Model # 1101 "V"

Longitude dry
concrete bracket
part # 1101 D-CPCA

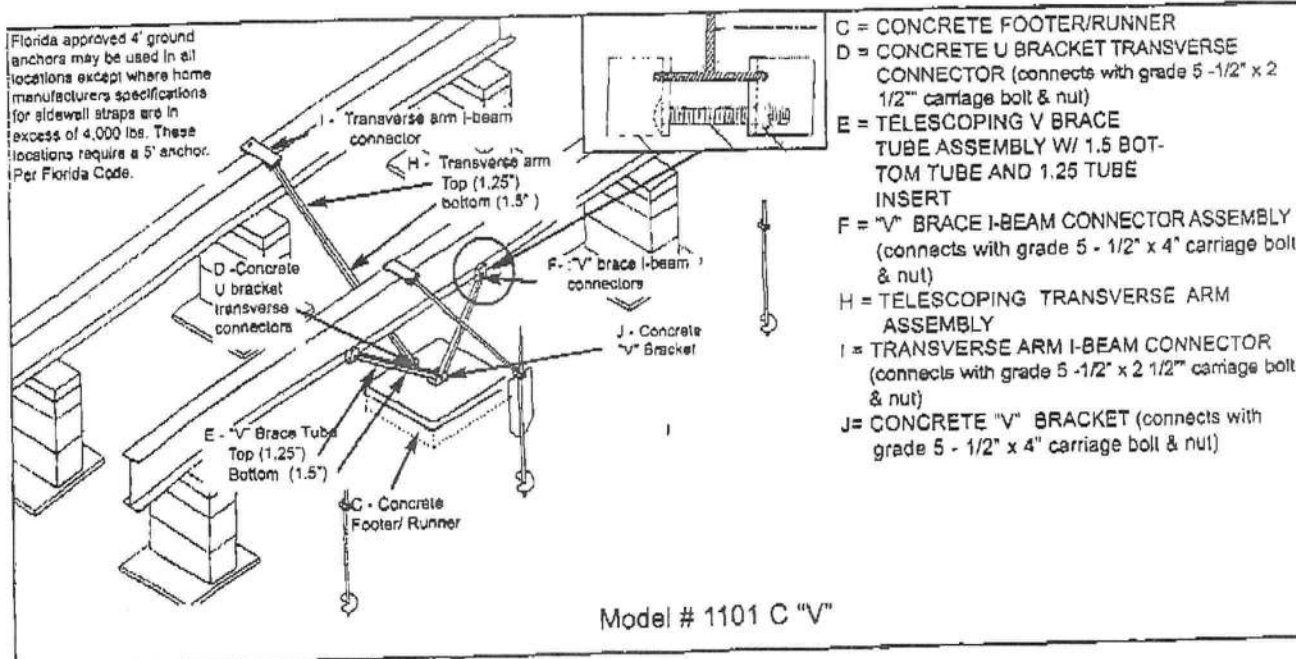
Wet bracket part #
1101 W-CPCA not
shown



Model 1101 CVD

Model 1101 CVW
not shown

Florida approved 4" ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5" anchor. Per Florida Code.



Model # 1101 C "V"

OLIVER TECHNOLOGIES, INC.
1-800-284-7437

Telephone: 931-796-4555
Fax: 931-796-8811
www.olivertechnologies.com

404

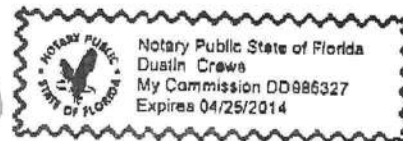
Florida Mobile Masters Inc.
4650 NE 35th Street
Ocala, FL 34479
352-351-6100 (office)
352-351-6103 (fax)

I, Wendell Crews, license # IH0000629, do hereby grant permission for
Randy Bibbee to sign and obtain permits in my behalf for
customer Bibbee located in Columbia County,
for the purpose of setting up a manufactured home.

Wendell Crews
Wendell Crews

Signed this 7 day May 2010
By Wendell Crews who is personally known.

Dustin Crews
Notary Public



R

|||||||

24-5S-16 0200/0200 10.00 Acres
E1/2 OF S1/2 OF NW1/4 OF NE1/4
ORB 652-325, 806-1198

NON-AD VALOREM ASSESSMENTS		
LEVYING AUTHORITY	RATE	AMOUNT
FFIR FIRE ASSESSMENTS		68.00
GGAR SOLID WASTE - ANNUAL		147.00
	<i>Paid</i>	
NON-AD VALOREM ASSESSMENTS		\$215.00

COMBINED TAXES AND ASSESSMENTS		\$267.20		PAY ONLY ONE AMOUNT	See reverse side for important information.
IF PAID BY PLEASE PAY	Nov 30 256.51	Dec 31 259.18	Jan 31 261.86	Feb 28 264.53	Mar 31 267.20

**RETAIN
THIS
PORTION
FOR
YOUR
RECORDS**

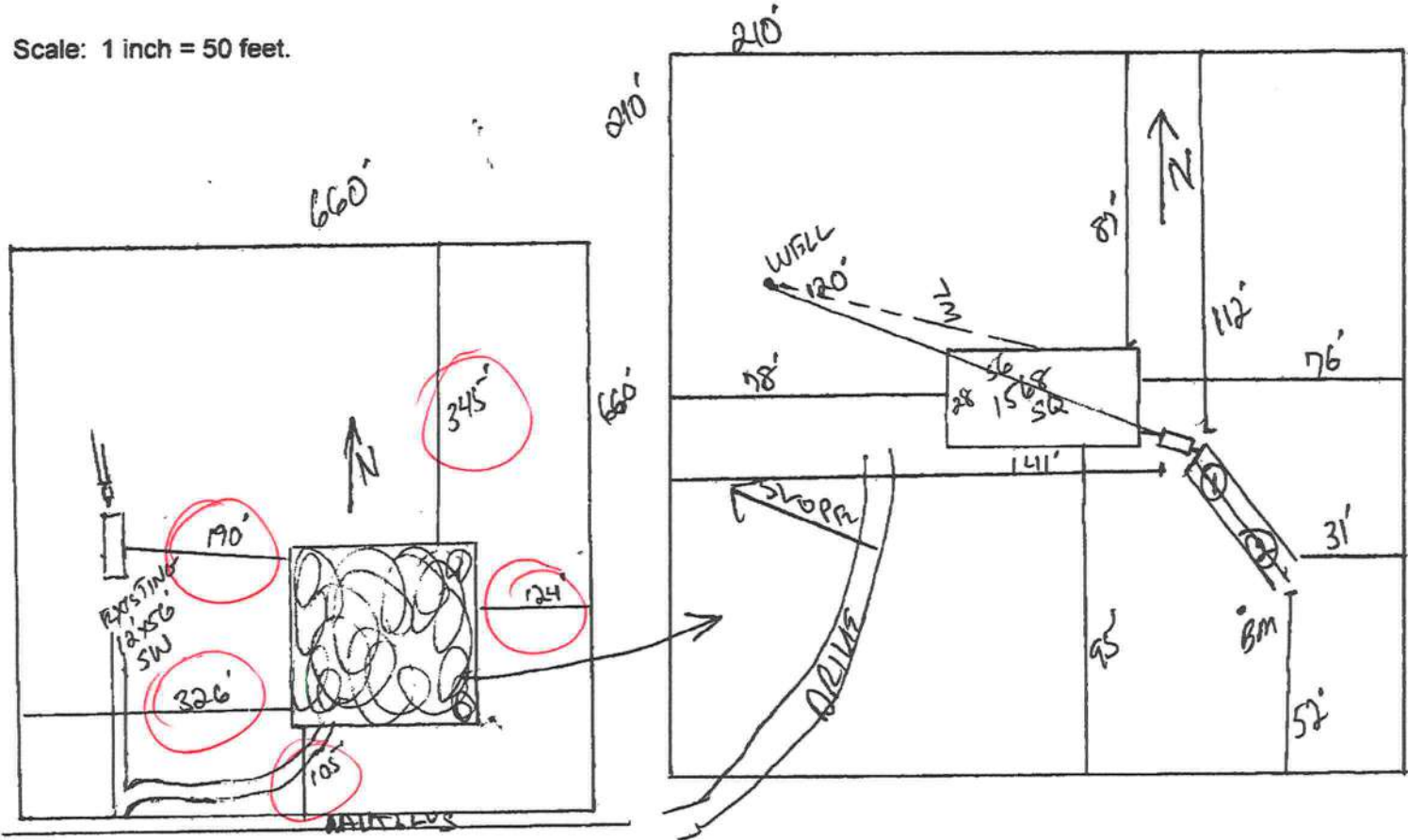
IF PAID
BY

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

Permit Application Number _____

----- Bibber ----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.



Notes: _____ 1 of 10 Acres

Site Plan submitted by: Red D 7-0

Plan Approved _____ Not Approved _____

By _____ Date _____ County Health Department

MASTER CONTRACTOR

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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: 5/13/2010 DATE ISSUED: 5/18/2010

ENHANCED 9-1-1 ADDRESS:

1727 SW NAUTILUS RD

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

24-5S-16-03702-002

Remarks:

2ND LOC

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.

1005-39

A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

(O) 386-758-3409

(F) 386-758-3410

(C) 386-623-3151

5/19/2010

To: Columbin County Building Department

Description of well to be installed for Customer: Bibber

Located at Address: NAUTIVUS ROAD

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park

Sincerely
Bruce Park
President



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

PERMIT NO. 10-0040
DATE PAID: 965434
FEE PAID: 5113110
RECEIPT #: 310.50
1268244

APPLICATION FOR:

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

APPLICANT: Marvin BibbeeAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: P.O. BOX 39 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 #: 24-5S-16-03702-002 ZONING: Ag. I/M OR EQUIVALENT: ☐ Y ☒ NPROPERTY SIZE: 10 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: SW Nautilus Road, LC, FL, 32024DIRECTIONS TO PROPERTY: Tustnuggee South (CR 131), 2 1/4 miles past CR 240,

TR on Nautilus, follow past turn to first access on right past Sheppard
Way

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	SF Residential	2	1560	held for revisions 5/17/10
2				Rec. 5/18/10
3				

☒ Floor/Equipment/Drains ☒ Other (Specify) _____SIGNATURE: Rocky FordDATE: 5/12/2010

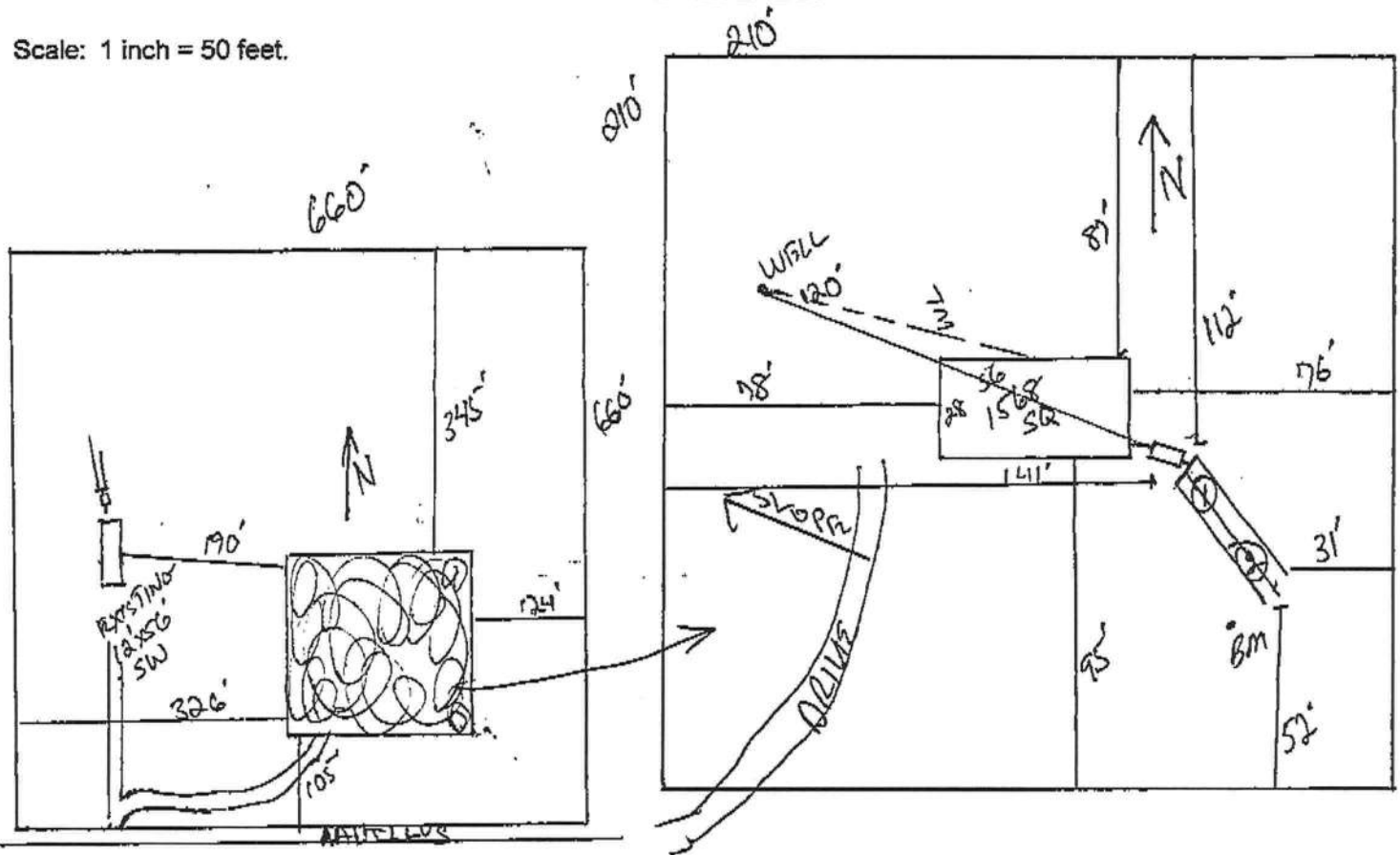
**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT**

Permit Application Number

10-0248BIBER

----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.



Notes:

1 of 10 Acres

Site Plan submitted by:

Rock n 7-0

MASTER CONTRACTOR

Plan Approved X

Not Approved

Columbia CHD

Date

By

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENTSF

28605

Home will be there on Monday 6-14-10.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

28605

DATE RECEIVED 6-11-10 BY LB IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Randy Bibbee (Marvin) PHONE 751-8738 CELL 292-9598

ADDRESS 1727 SW Nautilus Rd, Lake City, FL 32024

MOBILE HOME PARK _____ SUBC VISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 S, (R) 4th, (L) 240, (R) Old Wire, (L) Nautilus, after 2nd curve then 1st mailbox on (L)

MOBILE HOME INSTALLER Wendell Cross PHONE 352-551-6100 CELL _____

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 89 SIZE 28 x 56 COLOR Clay

SERIAL No. BAFLJ34A109285H

WIND ZONE 2 Must be wind zone II or higher N. WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) P= PASS F= FAILED

/ 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

EXTERIOR:

/ WALLS/SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

F WINDOWS X CRACKED/BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

/ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED / WITH CONDITIONS: Replace Broken Windows AT Front Door

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Bob S. Smith ID NUMBER 402 DATE 6-14-10

\$50.00

Date of Payment: 5-19-10

Paid By: Owner

Notes: Paid

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Gilchrist
 OWNERS NAME Randy Bibbee PHONE 752 8738 CELL 292 9598
 INSTALLER Wendell Crews PHONE 352-351-6100 CELL
 INSTALLERS ADDRESS 4650 NE 35th St Ocala, FL 34479

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1989 SIZE 28 x 56
 COLOR Clay SERIAL No. GAFLJ34A109285H
 WIND ZONE 2 SMOKE DETECTOR ☒
 INTERIOR:
 FLOORS ☒ OK
 DOORS ☒ OK
 WALLS ☒ OK
 CABINETS ☒ OK
 ELECTRICAL (FIXTURES/OUTLETS) ☒ OK
 EXTERIOR:
 WALLS / SIDING Vinyl Siding ☒
 WINDOWS ☒ OK
 DOORS Steel ☒
 STATUS:
 APPROVED ☒ NOT APPROVED ☐

NOTES: has metal roof over

INSTALLER OR INSPECTORS PRINTED NAME Wendell Crews
 Installer/Inspector Signature Wendell Crews License No. I110000029 Date 5-19-10

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature _____ Date _____

**CERTIFICATE OF
M/H OCCUPANCY**

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 24-5S-16-03702-002

Building permit No. 000028605

Permit Holder WENDELL CREWS

Owner of Building KATHLEEN BIBBEE

Location: 1727 NAUTILUS ROAD

Date: 10/18/2010

Greg C.

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

