

DATE 08/31/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022269

APPLICANT JAY DAVIS PHONE 754.2739
ADDRESS 234 SW SWEETGUM GLEN LAKE CITY FL 32024
OWNER JAY DAVIS PHONE 752.5174
ADDRESS 234 SW SWEETGUM GLEN LAKE CITY FL 32024
CONTRACTOR STACY BECKHAM PHONE 352.745.2739

LOCATION OF PROPERTY 90-W TO C-252, TURN L, GO TO WOODGATE VILLAGE, TURN L, GO TO SWEETGUM,L, GO TO END, RIGHT SIDE OF CUL-DE-SAC.

TYPE DEVELOPMENT M/H & UTILITY ESTIMATED COST OF CONSTRUCTION .00

HEATED FLOOR AREA TOTAL AREA HEIGHT .00 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. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 05-4S-16-02777-110 SUBDIVISION WOODGATE VILLAGE

LOT 10 BLOCK PHASE UNIT 2 TOTAL ACRES .25

IH0000512
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 04-0859-E BLK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD.

REPLACEMENT ONLY. ASSESSMENTS BILLED FOR 1 UNIT.

Check # or Cash 5619

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by

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

M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by

Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by

M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00

MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$

FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 250.00

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

Zoning Official BLK 24.08.06

Building Official ND 8-25-04

AP# 0408-48

Date Received 8-16-04

By GT

Permit # 2269

Flood Zone X

Development Permit N/A

Zoning A-3

Land Use Plan Map Category A-3

Comments Legal Lot of Record

- ☒ Site Plan with Setbacks shown ☒ Environmental Health Signed Site Plan ☒ Env. Health Release
☐ Need a Culvert Permit ☐ Need a Waiver Permit ☐ Well letter provided ☐ Existing Well

- Property ID 05-45-16-02777-110 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home ☒ Year 96
- Subdivision Information Wood Gate Village, Unit 2, Lot 10
- Applicant Stacy Beckham Phone # 352-745-2739
- Address PO Box 2442 Lake City, FL 32506
- Name of Property Owner Jay Davis Phone# (961-1482011) 752-5724
- 911 Address 234 SW Sweet Gum Glen 32024
- Name of Owner of Mobile Home Same Phone # _____
- Address _____
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 2
- Lot Size .26 Total Acreage 1/4
- Explain the current driveway Existing
- Driving Directions Hwy 90 West to CR 52 (TW) to Wood Gate Village (TW) 3rd road Sweet Gum on left to end RH side of culverac.
- Is this Mobile Home Replacing an Existing Mobile Home Yes (Assessments pd)
- Name of Licensed Dealer/Installer Stacy Beckham Phone # 352-745-2739
- Installers Address PO Box 2442 Lake City, FL 32506
- License Number 1H0000572 Installation Decal # 220008

5619

PERMIT NUMBER

PERMIT WORKSHEET

Installer Sean Bethan License # TH0000572

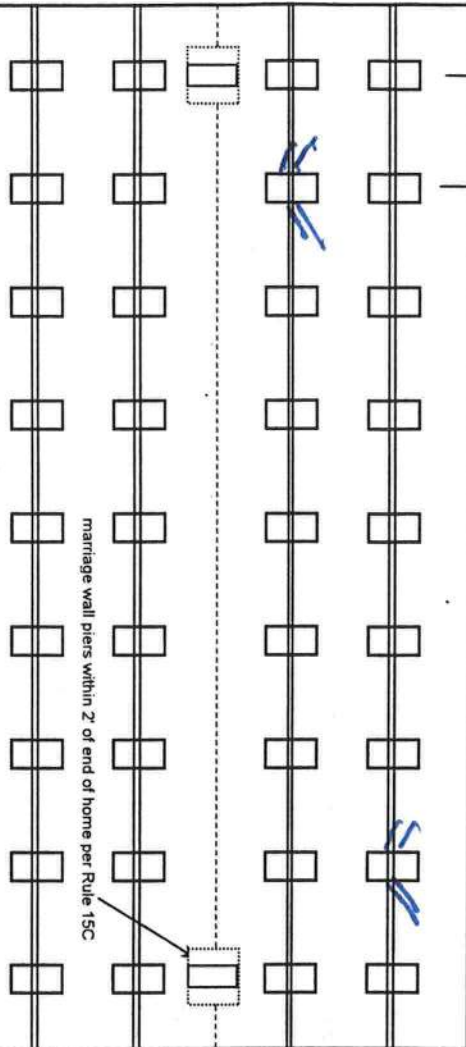
Address of home _____
being installed _____

Manufacturer Elewood Length x width 148 60

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 SB



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 # 288008

Triple/Quad ☐ Serial # 4919

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'	9'	10'	10'
2000 psf	6'	8'	9'	10'	11'	12'	12'
2500 psf	7' 6"	8'	9'	10'	11'	12'	12'
3000 psf	8'	8'	9'	10'	11'	12'	12'
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 17x22

Perimeter pier pad size 14x16

Other pier pad sizes (required by the mfg.) _____

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 _____

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 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
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 _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer Opseco Pad

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer _____

OTHER TIES

Sidewall _____ Number _____

Longitudinal _____

Marriage wall _____

Shearwall _____

$$\begin{array}{r} \times 1500 \\ \hline \end{array}$$
$$\begin{array}{r} 150 \\ \times 2 \\ \hline \end{array}$$

Installer's initials

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 162

Date _____



DEPARTMENT OF HEALTH

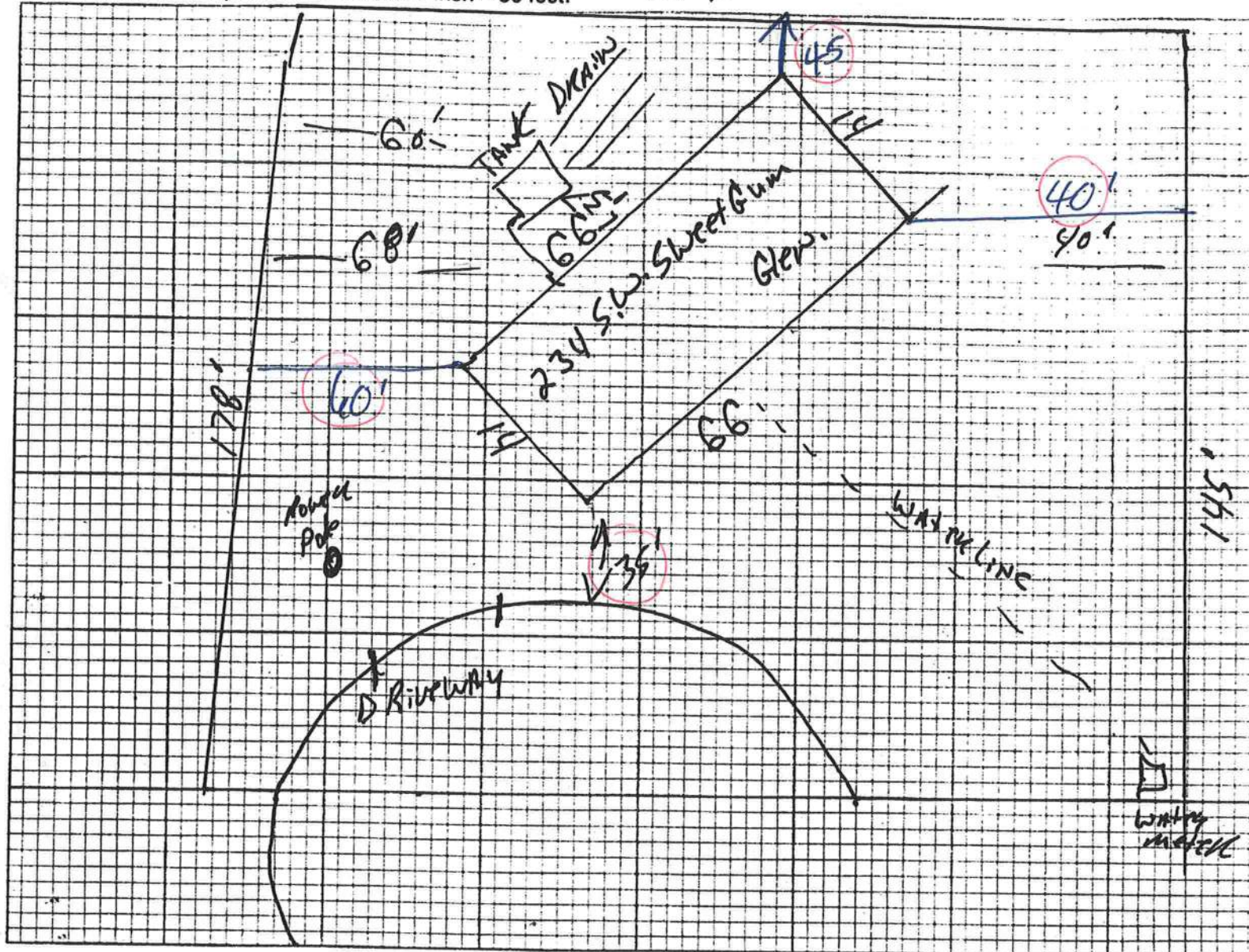
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-08591

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.

39.41



Notes: _____

Site Plan submitted by: [Signature] _____

Signature

Title

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEPARTMENT OF
CODE ENFORCEMENT
COLUMBIA COUNTY, FLORIDA

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 8/16/04 BY GT

IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____

OWNERS NAME Jay Davis PHONE 752-5174 CELL 961-1482

911 ADDRESS 234 SW Sweet Gum Glen 32024

MOBILE HOME PARK Woodgate Village SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 90W, TL 252, TL into

Woodgate Village, TL on Sweet Gum, to
the end on right of cul-de-sac

CONTRACTOR Stacy Bechham ³⁵²PHONE 745-2739 CELL _____

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1996 SIZE 14 X 66

COLOR White / Blue SERIAL No. 4919

WIND ZONE II SMOKE DETECTOR Yes

INTERIOR:
FLOORS /

DOORS /

WALLS /

CABINETS /

ELECTRICAL (FIXTURES/OUTLETS) /

EXTERIOR:
WALLS / SIDING /

WINDOWS /

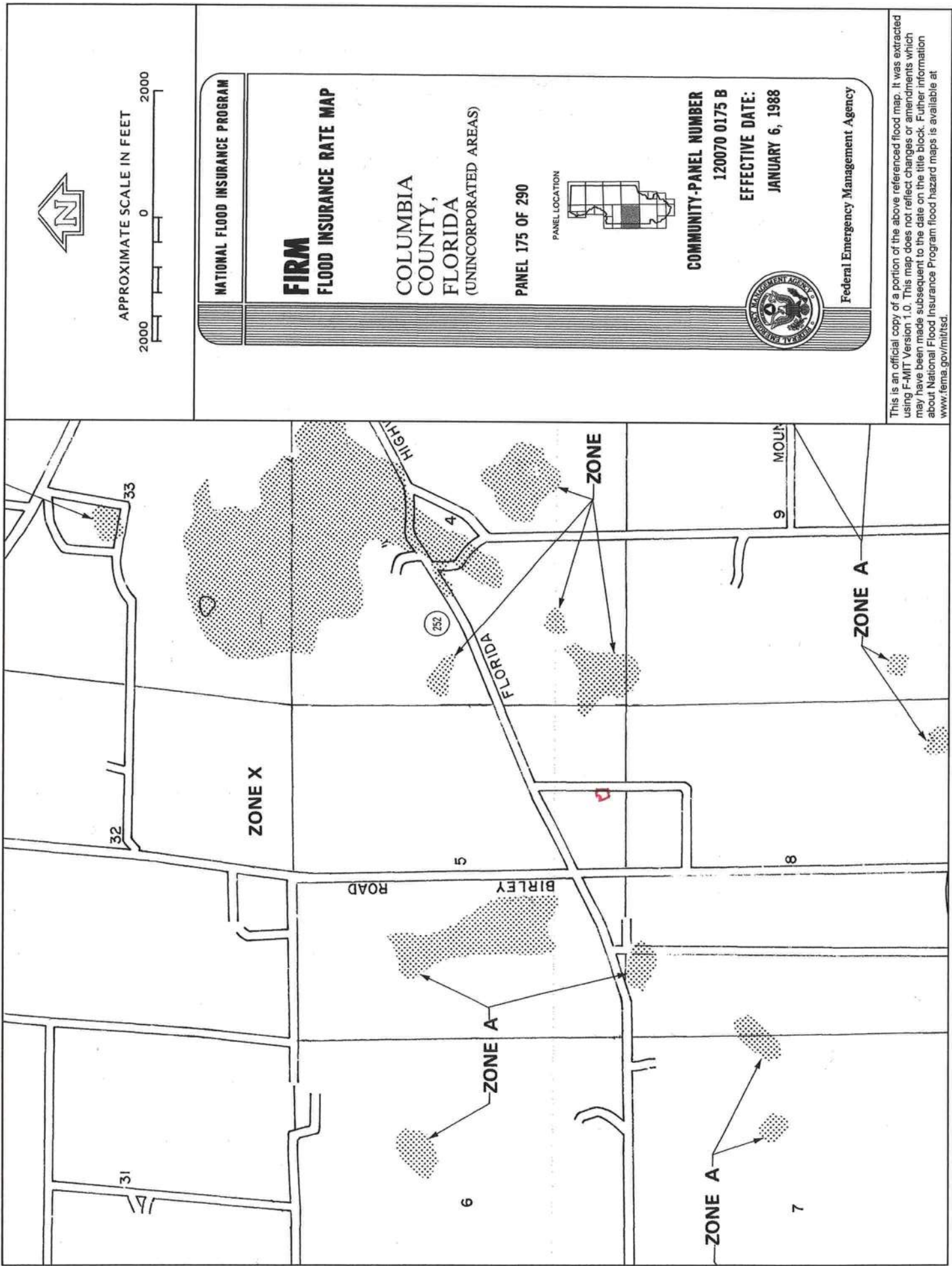
DOORS /

STATUS:
APPROVED / WITH CONDITIONS: _____

NOT APPROVED _____ NEED REINSPECTION _____

INSPECTOR SIGNATURE Darryl [Signature] NUMBER 306

0408-48





DEPARTMENT OF HEALTH

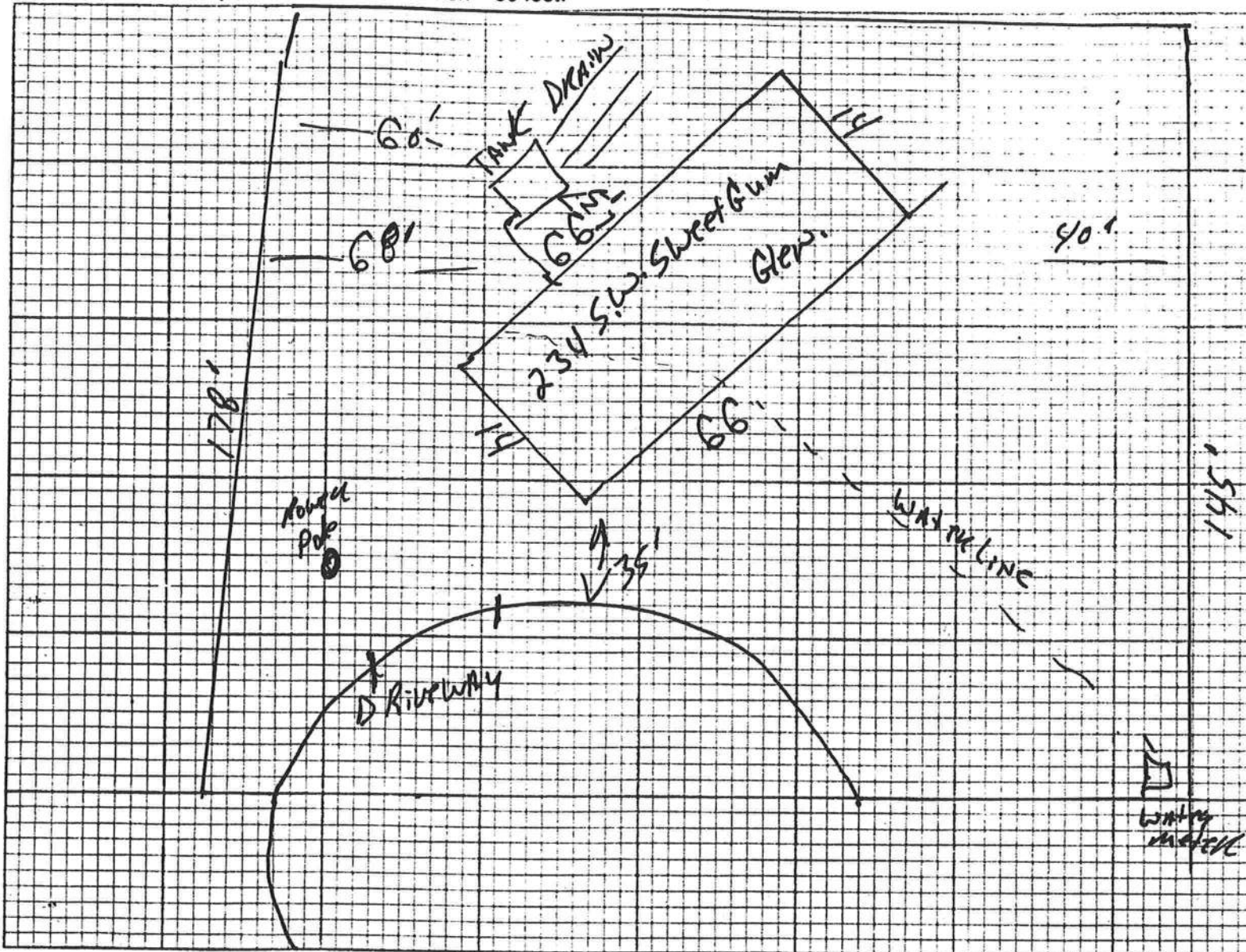
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-0859

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.

39.41



Notes:

Site Plan submitted by: [Signature]

Signature

Title

Plan Approved _____

Not Approved _____

Date 8-16-04

By

Mark S. Lander

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT