

**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 \_\_\_\_\_

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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 # 17-35-17-04967-030 Subdivision Five Points Acres Lot# 30

- New Mobile Home  Used Mobile Home \_\_\_\_\_ MH Size 32x60 Year 2021
- Applicant H&L Customer Service, LLC Phone # (386) 288-9673
- Address 301 SW Faul Court Lake City FL 32024
- Name of Property Owner Samantha & Arteela Brasher Phone# 386 466-4490
- 911 Address 302 NE Colvin Ave 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 Samantha & Arteela Brasher Phone # 386 466-4490  
 Address 302 NE Colvin Ave Lake City FL 32055
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 1 (replacing)
- Lot Size 1.03 AC Total Acreage 1.03 AC
- 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 Replacing w/new
- Driving Directions to the Property (A) onto NE Madison St. (B) onto N. Marion Ave  
(B) onto NE Tammy Ln, (C) onto NE Colvin Ave  
~ destination on the right.
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386 623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32021
- License Number 1H/1025386 Installation Decal # 26454



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, Robert Sheppard, give this authority for the job address show below  
Installer License Holder Name

only, 367 NE Colvin Ave Lake City FL 32024, 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)
H&L Customer Service	<i>[Signature]</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input 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.

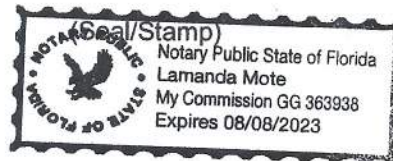
*[Signature]* License Holders Signature (Notarized)      14/1025380 License Number      March 1/21 Date

**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 1st day of March, 2021.

*[Signature]*  
 NOTARY'S SIGNATURE



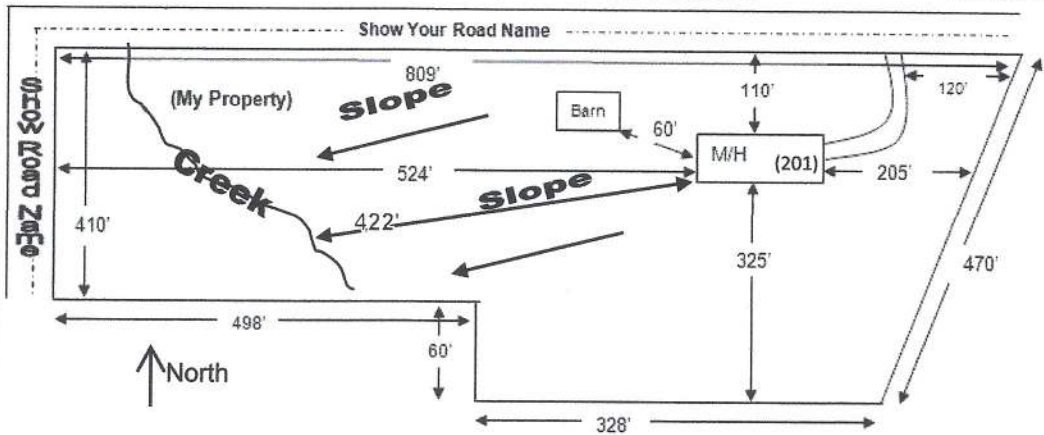


### SITE PLAN CHECKLIST

- \_\_\_ 1) Property Dimensions
- \_\_\_ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- \_\_\_ 3) Distance from structures to all property lines
- \_\_\_ 4) Location and size of easements
- \_\_\_ 5) Driveway path and distance at the entrance to the nearest property line
- \_\_\_ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- \_\_\_ 7) Show slopes and or drainage paths
- \_\_\_ 8) Arrow showing North direction

### SITE PLAN EXAMPLE

Revised 7/1/15



#### NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.

Please see attached  
Siteplan to scale.  
Thanks

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Robert Sheppard PHONE 386 623-2003

**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.***

<p><b>ELECTRICAL</b></p>	<p>Print Name <u>Glenn Whittington</u>                  License #: <u>13002957</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature <u>Glenn Whittington</u>                  Phone #: <u>386 972-1701</u></p>
<p><b>MECHANICAL/ A/C</b></p>	<p>Print Name <u>Ace A/C</u>                  License #: <u>CAC 1817716</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature <u>Mike Boland</u>                  Phone #: <u>352-274-9326</u></p>

**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.

H&L Customer Service, LLC

301 SW Faul Court, Lake City, Florida 32024

LIMITED POWER OF ATTORNEY

I, Robert Sheppard, do hereby authorize H&L Customer Service, LLC and it's members, Heide Morrison and/or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits, and picking up permits as needed for the installation of a new mobile home located at the below address;

302 NE Columbia  
Lake City FL 32055  
In Columbia County, Florida.

Robert Sheppard

Signature

4/3/20

Date

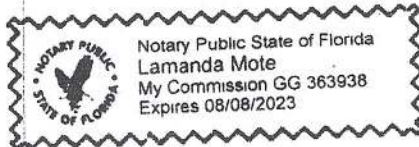
State of Florida

County of Columbia

This Instrument was signed or acknowledged before me on this 3rd day of April 2020 by Robert Sheppard. If ID provided, type of state issued ID provided personally known.

Lamanda Mote  
Notary Public

Seal:



My Commission Expires: 08/08/2023



This letter is to state that I, Glenn Whittington, state certified electrical contractor #EC13002957 authorize Lamanda Mote and Heide Morrison, to act on my behalf in obtaining permits

This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

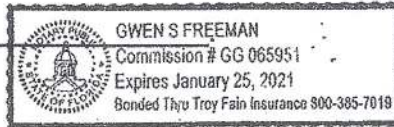
Glenn Whittington

Sworn to and subscribed to before me this 21 day of May 2020 by Glenn Whittington who is personally known to me.

Gwen S Freeman

Notary public

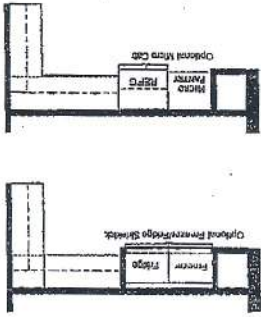
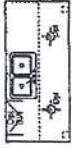
My commission expires \_\_\_\_\_



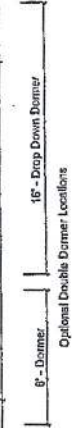
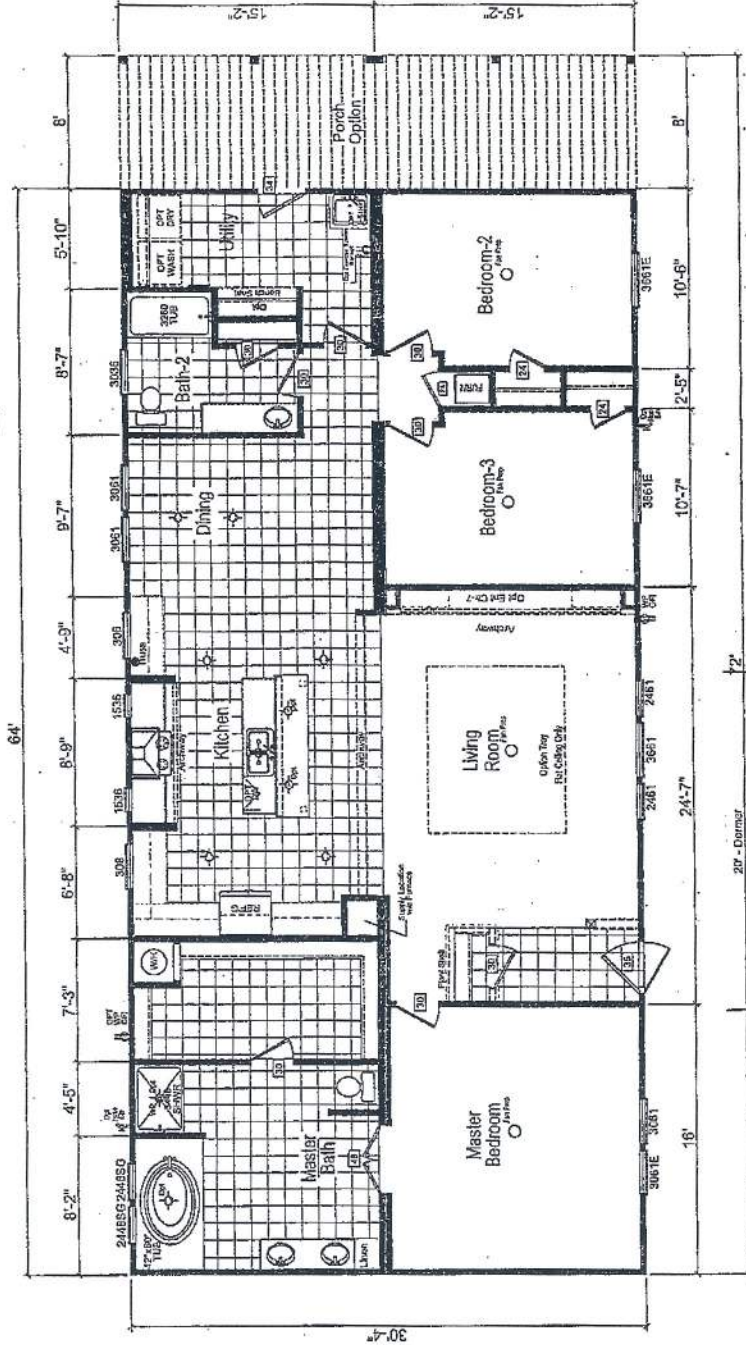
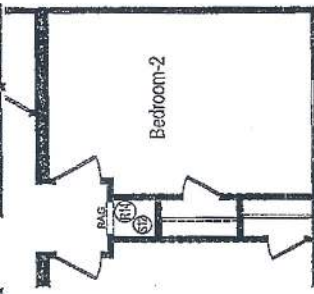
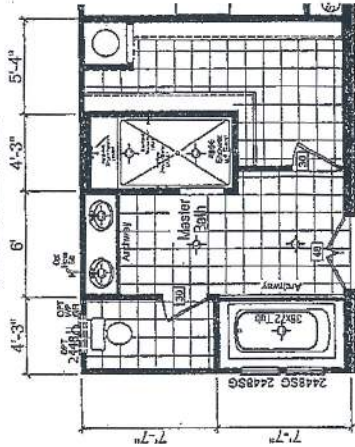
Lamanda.Mote@gmail.com

# 20

**MODEL 261-C0643A**  
 3 BEDROOM, 2 BATH  
 ACTUAL SIZE: 64'-0" x 30'-4"  
 TOTAL AREA: 1,941 SQ. FT.



Optional Amazon Bath



DAPIA SEAL

**MODIFICATIONS**

6 Updated Ent. 7	JLG 02-22-19
7 Updated Windows in Bathrooms	JLG 02-25-19
8 Opt L-Sink Move Utility Door	RAB 05-21-19
9 Changed swing of rear door	JDC 05-24-19

PROPRIETARY AND CONFIDENTIAL  
 THESE DRAWINGS AND SPECIFICATIONS ARE ORIGINAL  
 PROPRIETARY AND CONFIDENTIAL MATERIALS OF CHAMPION.  
 COPYRIGHT © 1976-2007 BY CHAMPION

MODEL: 261-C0643A

SHEET:

L-101

TITLE: Blackline

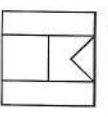
DATE: 08-01-16

REV. E

**CHAMPION**

MANUFACTURED BEAUTIFULLY™

P.O. BOX 2087 HWY 100 EAST LAKE CITY, FL 32055



DAPIA SEAL

MODIFICATIONS

MODEL: 261-C0643A

SHEET:

TITLE: PIER FOUNDATION

DRAWN BY: BOB

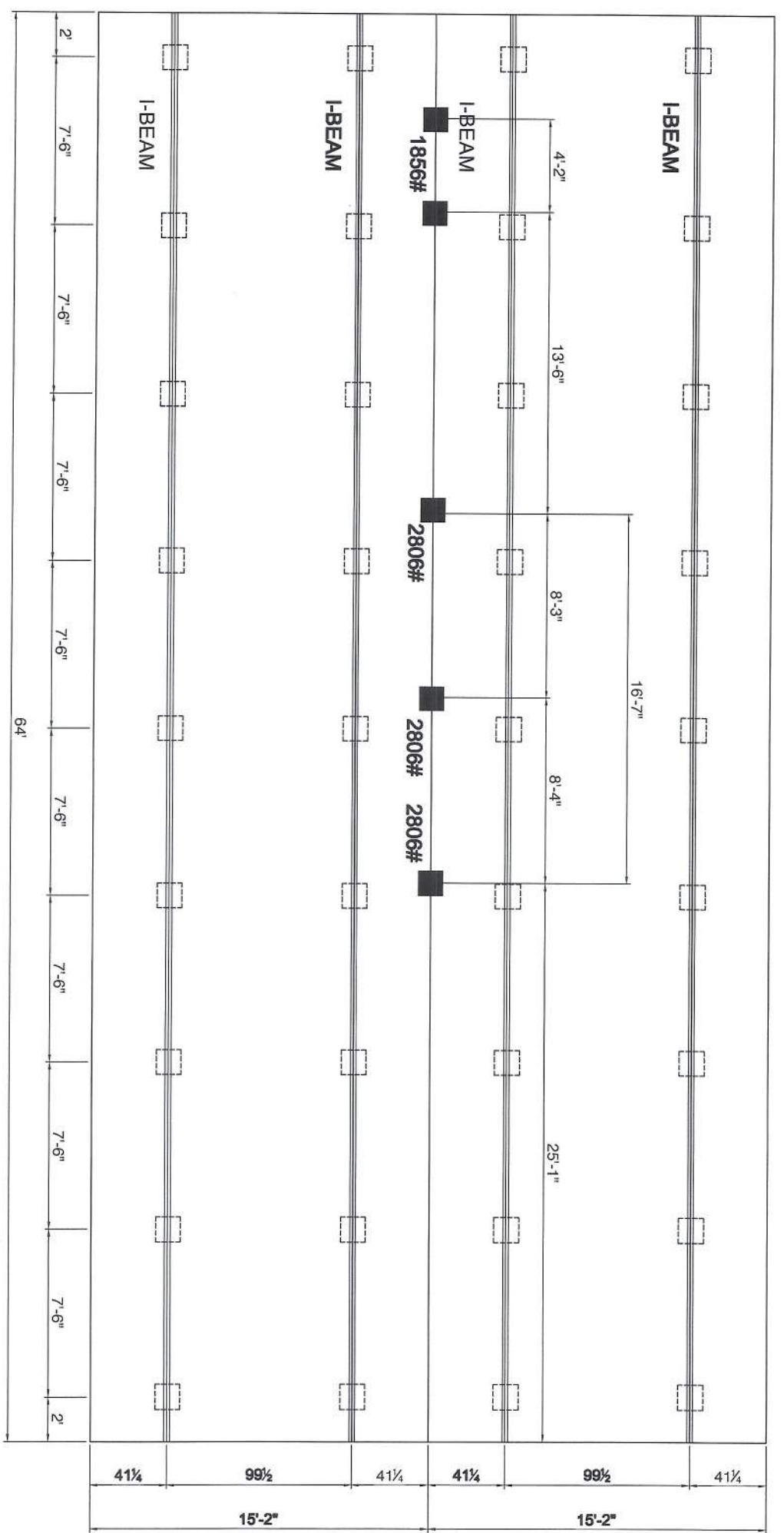
DATE: 09-01-16

S-20

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1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED  
 SIDEWALLS AND EXTERIOR WALL OPENINGS 48"  
 OR GREATER, WILL REQUIRE BLOCKING ON EACH SIDE.





DATE OF BIRTH	
BUYER	10/11/1984
CO-BUYER	11/12/1973

IRONWOOD HOMES OF LAKE CITY LLC

4109 WEST U.S. HIGHWAY 90

Lake City, FL 32055

(386) 754-8844 fax (386) 7540190

BUYER BRASHER SAMANTHA NICOLE
BRASHER ARTEELIA DOUGLAS

PHONE 386-466-4490 386-288-0722	DATE 1/19/2021
------------------------------------	-------------------

ADDRESS 362 NORTHEAST COLVIN AVENUE LAKE CITY FL 32055
DELIVERY ADDRESS 362 NORTHEAST COLVIN AVENUE LAKE CITY FL 32055

SALES PERSON MIKE COX
--------------------------

MAKE & MODEL CHAMPION M0643A	YEAR 2021	BEDROOMS 3X2	FLOOR SIZE 32X60	HITCH SIZE L 32X64
SERIAL NUMBER FL261-00P-H-A-103903AB	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		COLOR	

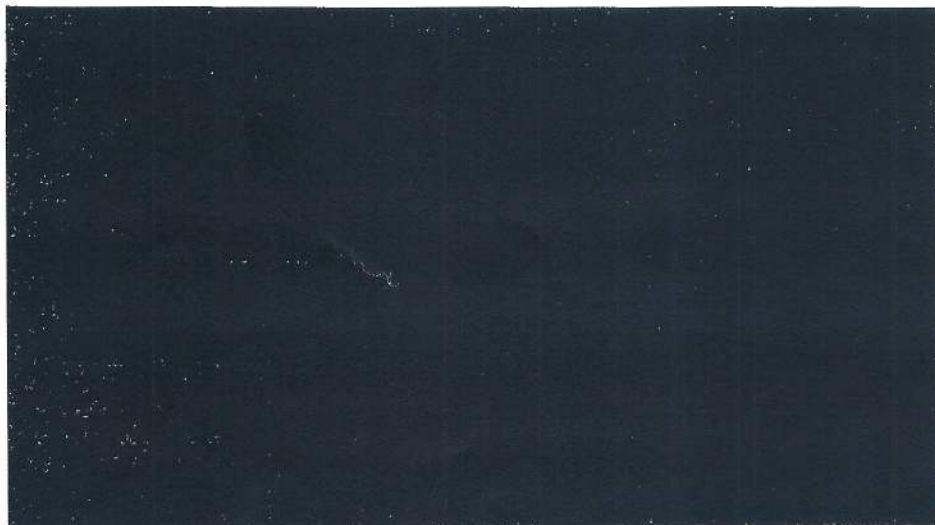
PROPOSED DELIVERY DATE TBD	KEY NUMBERS
-------------------------------	-------------

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
CEILING			
EXTERIOR			
FLOORS			

BASE PRICE OF UNIT	\$135,000.00
OPTIONAL EQUIPMENT (Taxable)	\$0.00
Other (non-taxable)	\$10,495.00
SUB-TOTAL	\$145,495.00

This insulation information was furnished by the manufacturer and is disclosed in compliance with the Federal Trade Commission Rule 16CFR, Sec. 460.16.

SALES TAX 6%	\$8,100.00
If Base Price < 5,000 1%	\$0.00
County Surtax (Sales price over \$5,000)	
Tag & Title Fees	



LAND PURCHASE	
CLOSING COST	\$5,969.33
Points	\$0.00
Security Interest	\$0.00
1. CASH PURCHASE PRICES	\$159,564.33

TRADE IN ALLOWANCE	\$
LESS BAL. DUE ON ABOVE	\$
NET ALLOWANCE	\$
	\$ 0.00
PRE PAIDS	\$ 0.00

2. LESS TOTAL CREDITS	
SUB-TOTAL	
SALES TAX (not included above)	
3. UNPAID BAL OF CASH SALE PRICE	

REMARKS:  
NO VERBAL AGREEMENTS WILL BE HONORED.  
Initial: \_\_\_\_\_  
Connect water & sewer within 20 ft. to existing facilities  
Customer responsible for any gas or electrical hookups  
Wheels & Axles deleted from sale price of home. Will lend for a local move  
Customer responsible for releveling of home after initial setup.  
Cannot be responsible for settling of land.  
PRICE INCLUDES SET-UP A/C STEPS AND STANDARD WHITE SKIRTING

NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.			
DESCRIPTION OF TRADE-IN	YEAR	SIZE	
MAKE	MODEL	BEDROOMS	
TITLE NO.	SERIAL	COLOR	
AMOUNT OWING TO WHOM	NO.		
ANY DEBT BUYER OWES ON THE TRADE-IN IS TO BE PAID BY THE	<input type="checkbox"/> DEALER <input type="checkbox"/> BUYER		

THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures. Buyer is purchasing the above described trailer, manufactured home or vehicle; the optional equipment and accessories, the insurance as described has been voluntary; that Buyer's trade-in is free from all claims whatsoever, except as noted. BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER HAS READ AND UNDERSTANDS THE BACK OF THIS AGREEMENT.

#REF!	DEALER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent	
By _____	APPROVED

BUYER
SOCIAL SECURITY NO. _____
BUYER
SOCIAL SECURITY NO. _____

*Sale price 3,000.00  
doc 21.00*

PREPARED BY & RETURN TO:

Name: ARTEELIA BRASHER  
Address: 362 NE COLVIN AVENUE  
LAKE CITY, FL 32055  
Parcel No.: R04967-030

Inst: 202012020056 Date: 12/01/2020 Time: 10:42AM  
Page 1 of 1 B: 1425 P: 133, James M Swisher Jr, Clerk of Court  
Columbia, County, By: KV  
Deputy Clerk

Inst: 202012020028 Date: 12/01/2020 Time: 9:40AM  
Page 1 of 1 B: 1425 P: 77, James M Swisher Jr, Clerk of Court  
Columbia, County, By: BR  
Deputy Clerk Doc Stamp-Deed: 21.00

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This **WARRANTY DEED**, made the 1st day of December, 2020, by **JOSEPH WOODARD** and **HEATHER HICKSON**, CONVEYING NON HOMESTEAD PROPERTY, hereinafter called the Grantors, to **ARTEELIA BRASHER** and **SAMANTHA BRASHER, HUSBAND AND WIFE**, whose post office address is 362 NE COLVIN AVENUE, LAKE CITY, FL 32055, hereinafter called the Grantees:

WITNESSETH: That the Grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the Grantees all that certain land situate in County of Columbia, State of Florida, viz:

~~TO HAVE~~ the West 1/2 of Lot 30, FIVE POINTS ACRES, a subdivision according to the map or plat thereof as recorded in Plat Book 4, Page 22, Public Records of Columbia County, Florida.

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

SUBJECT TO TAXES FOR THE YEAR 2020 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

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

And the Grantors hereby covenant with the Grantees that the Grantors are lawfully seized of said land in fee simple, that the Grantors have good right and lawful authority to sell and convey said land and that the Grantors hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever. Grantors further warrant that said land-is free-of-all-encumbrances, except as noted herein and except taxes accruing subsequent to December 31, 2020.

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

Signed, sealed and delivered in the presence of:

*Patricia Lang*  
Witness Signature  
Printed Name: PATRICIA LANG

*Joseph Woodard*  
Name: JOSEPH WOODARD  
Address: 351 NE DIANA TERRACE, LAKE CITY, FL 32055 L.S.

*Mary Ann Tomlinson*  
Witness Signature  
Printed Name: MARY ANN TOMLINSON

*Heather Hickson*  
Name: HEATHER HICKSON  
Address: 351 NE DIANA TERRACE, LAKE CITY, FL 32055 L.S.

STATE OF FLORIDA,  
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this 1st day of December, 2020, by JOSEPH WOODARD and HEATHER HICKSON, who are personally known to me or who have produced Driver's License as identification.

*Patricia Lang*  
Signature of Notary  
Printed Name: PATRICIA LANG  
My commission expires: 2-5-23

THIS DEED IS BEING RE-RECORDED TO CORRECT THE LEGAL AND TO ADD SECOND WITNESS



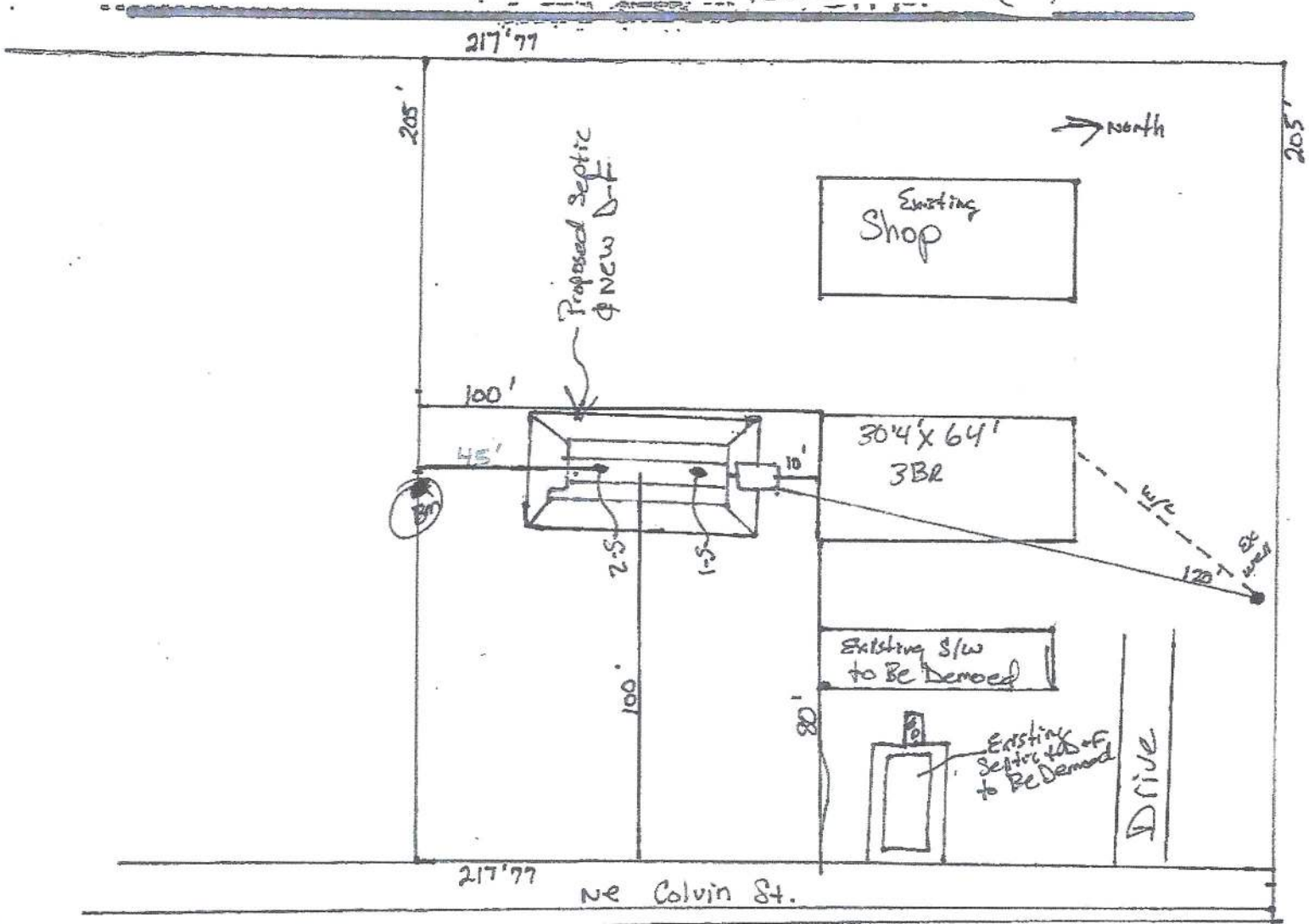


STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

1" = 40'

Permit Application Number \_\_\_\_\_

Brusher



Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Plan submitted by: Robert W. Ford III Date 2-23-2021

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_  
 \_\_\_\_\_ County Health Department

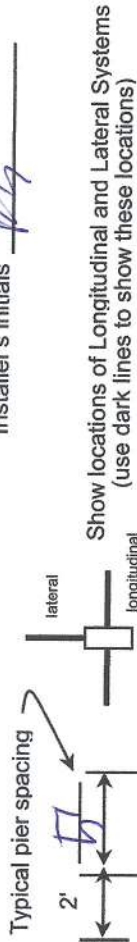
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

# Mobile Home Permit Worksheet

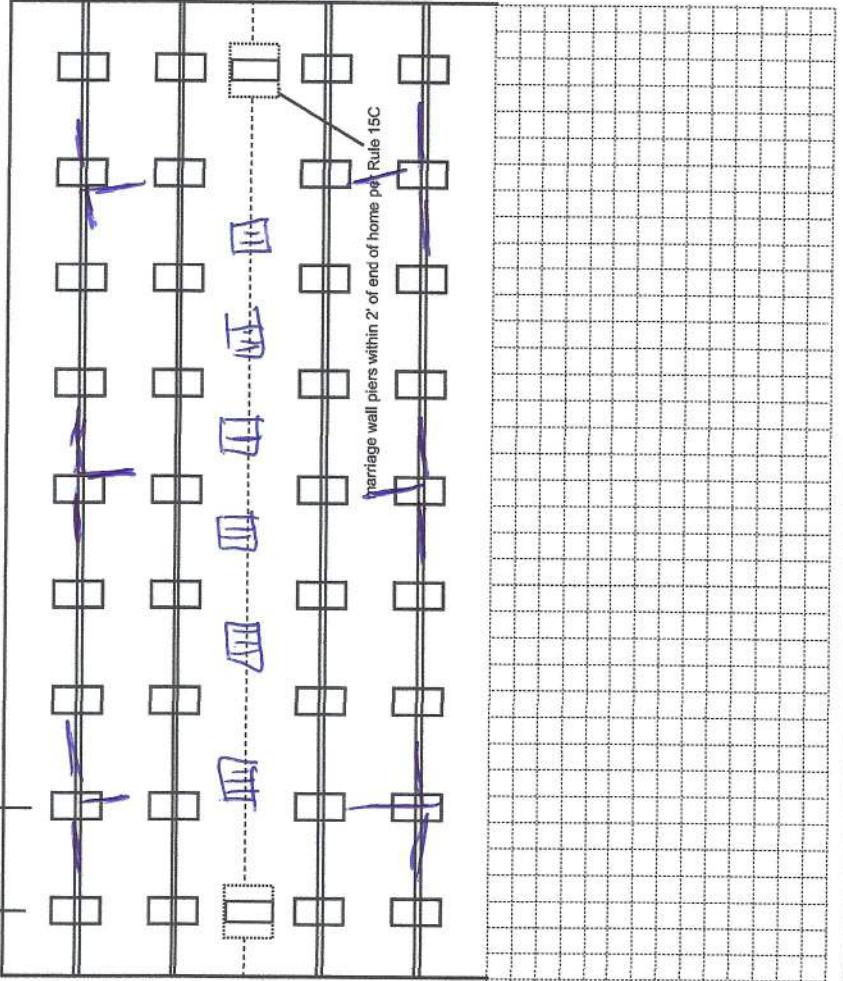
Installer: Robert Sheppard License # 14/1025388  
 Address of home being installed: 3102 NE Colvin Ave Lake City IL 32055  
 Manufacturer Champion Length x width 32x10

**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



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



## Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

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 # 20454  
 Triple/Quad  Serial # P2261-00P-11A-103903AB

### 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 14x14  
 Other pier pad sizes (required by the mfg.) 17x25

### 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

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

Longitudinal Stabilizing Device (LSD) Manufacturer \_\_\_\_\_  
 Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer bliver 1101

### OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall Number 248  
8  
4



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

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

X \_\_\_\_\_ 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 \_\_\_\_\_ X \_\_\_\_\_

## TORQUE PROBE TEST

The results of the torque probe test is 290 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 Robert Sheppard

Date Tested 3/1/21

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. 29

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: lags Length: \_\_\_\_\_ Spacing: 16  
Walls: Type Fastener: screws Length: \_\_\_\_\_ Spacing: 16  
Roof: Type Fastener: lags Length: \_\_\_\_\_ Spacing: 16  
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. RS

Installer's initials

Type gasket foam

Installed: 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  No \_\_\_\_\_  
Range downflow vent installed outside of skirting. Yes  N/A \_\_\_\_\_  
Drain lines supported at 4 foot intervals. Yes  N/A \_\_\_\_\_  
Electrical crossovers protected. Yes  No \_\_\_\_\_  
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 Robert Sheppard Date 3/1/21

H&L Customer Service, LLC  
301 SW Faul Court, Lake City, Florida 32024

LIMITED POWER OF ATTORNEY

Samantha & Arteela Brasher, do hereby authorize H&L Customer Service, LLC and it's members, Heide Morrison and/or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits, and picking up permits as needed for the installation of a new mobile home located at the below address;

302 NE COLVIN AVE  
LAKE CITY FL 32055

In Columbia County, Florida.

[Signature]  
Signature

March 1, 2021  
Date

State of Florida

County of Columbia

This Instrument was signed or acknowledged before me on this 1<sup>st</sup> day of March 2021 by Samantha & Arteela Brasher. If ID provided, type of state issued ID provided personally known.

[Signature]  
Notary Public

Seal:

My Commission Expires: 8/8/2023

