

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official 2nd Building Official 2nd

AP# 1909-24 Date Received 9/9/19 By MT Permit # 38661

Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category Ag

Comments floor one foot above the road, dedicating 20 acres for each home on this 50 acres

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ DH # 19-0685 ☒ Well letter OR

☐ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☐ DOT Approval ☒ Parent Parcel # 09622-009 ☐ STUP-MH _____ ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment owed ☐ Out County ☐ In County ☒ Sub VF Form

Property ID # 08-68-17-09622-002 subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32x66 Year 2018
- Applicant Sonya Crews Phone # 863-517-5701
- Address 3311 SW State Road 247 Lake City, FL 32024
- Name of Property Owner Damon Stone Phone# 352-318-0089
- 911 Address 934 SW marion mann Terr Lake City FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Taylor Stone Phone # 352-672-1871
- Address 15315 NW 141st St Apt 10 Alachua, FL 32615
- Relationship to Property Owner Son
- Current Number of Dwellings on Property 1
- Lot Size 20 ac Dedicated Total Acreage 50 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 NO
- Driving Directions to the Property Head S on I-75 get off at exit 414. Take a (2) (North) on Hwy Road. Follow Road until you reach Marion Mann Road and Follow all the way to the back. The road will bend to the (2) but stay straight
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terr Lake City FL 32024
- License Number IH1025145 Installation Decal # 64515

CH - Sent Sonya an email 9-12-19 & 9-24-19

\$414.48



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, Ronnie Norris, give this authority for the job address show below
Installer License Holder Name

only, SW Marion Mann Terr 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)
Sonya Crews	Sonya Crews	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
Linda Craft	Linda Craft	<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

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.

Ronnie Norris License Holders Signature (Notarized)
I H1251451 License Number
9-5-19 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) 9 on this September, 20 19.

Elizabeth Tope
NOTARY'S SIGNATURE



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Ronnie Norris License # _____

Address of home being installed

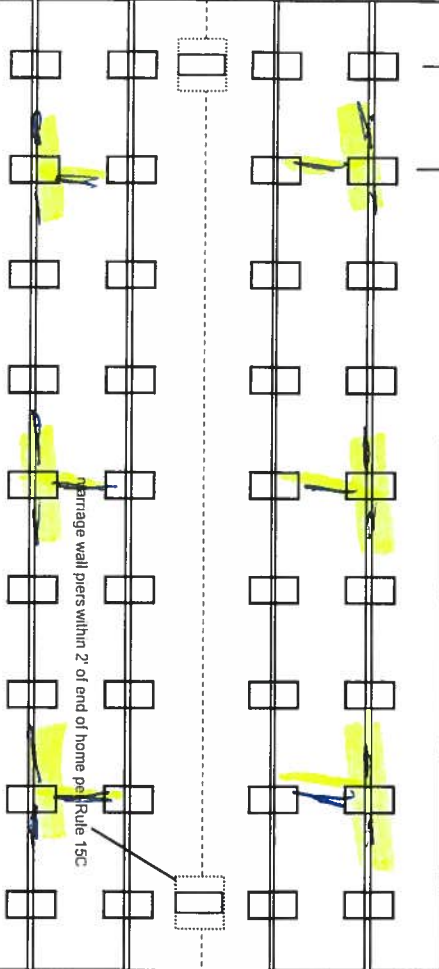
SW Marion Mann
Lake City, FL 32024

Manufacturer Jacobsen Length x width 40' x 32'

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 _____

Typical pier spacing 2'
lateral
longitudinal
Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)



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 # 64515

Triple/Quad ☐ Serial # JAC FL 35051 AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	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)
4000 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

17x25

Other pier pad sizes (required by the mfg.)

17x25

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 Pier pad size 17x25

4 17x25

4 17x25

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer _____

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 SWUS

FRAME TIES

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

OTHER TIES

Sidewall

Longitudinal

Marriage wall Shearwall

Number 22

2

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X 1000 X 1000 X 1000

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 1000 X 1000 X 1000

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5" anchors without testing 1000. 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.

Installer's initials PG

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

PG

Date Tested

9-3-019

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. _____

Plumbing

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

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

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☒

Water drainage: Natural

Fastening multi wide units

Floor: Type Fastener: 4x4 Length: 6 Spacing: 2x1
Walls: Type Fastener: 1x4 Length: 6 Spacing: 2x1
Roof: Type Fastener: 1x4 Length: 6 Spacing: 2x1
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 PG

Type gasket Pg. _____

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 ☒ 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: _____

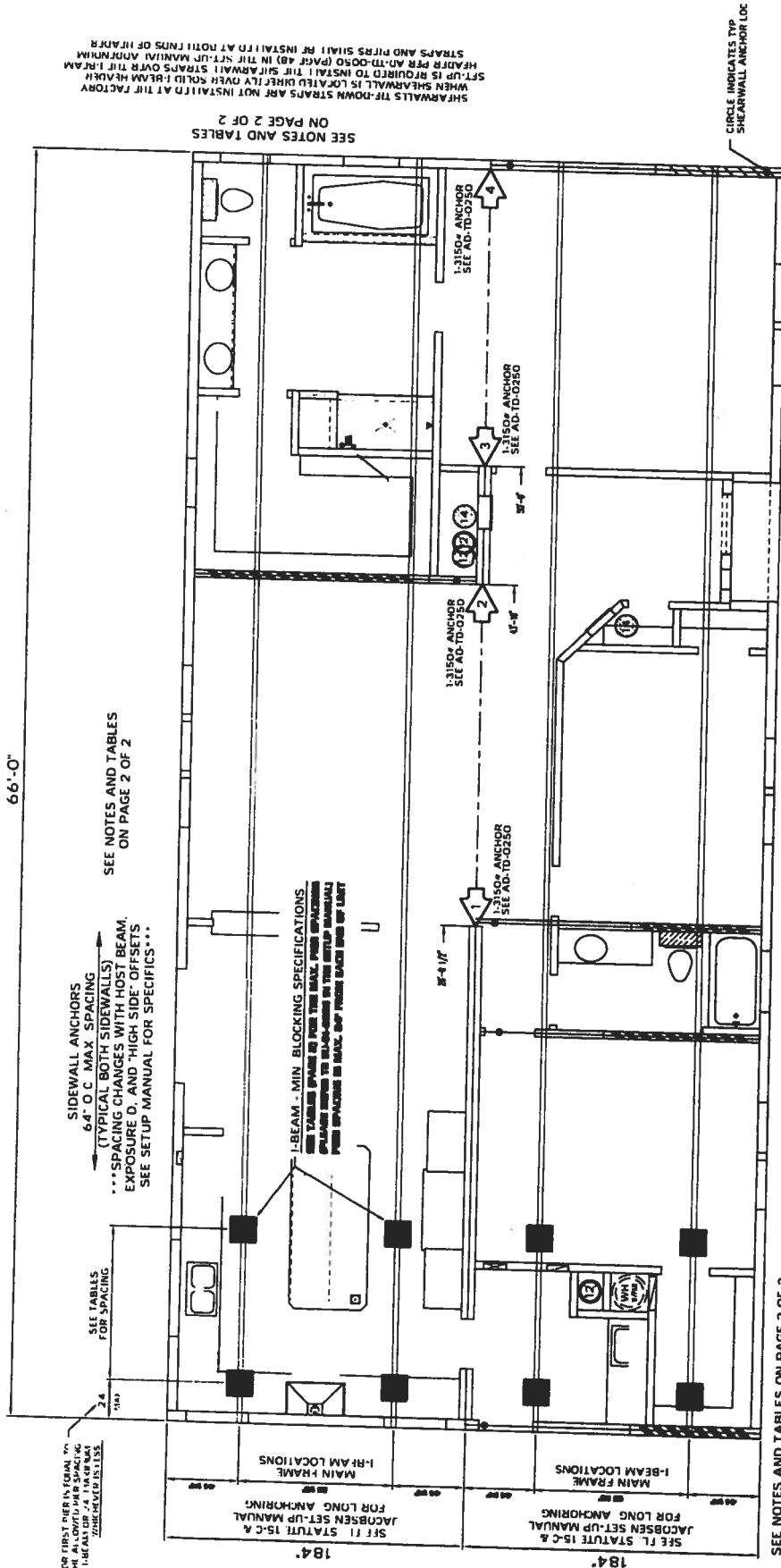
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

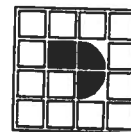
PG

Date

9-3-019



SEE NOTES AND TABLES ON PAGE 2 OF 2
SEE WARNINGS AND CAUTIONS ON PAGE 2



JACOBSEN HOMES
PO BOX 3000, 8000 PALMCREST CT.
SAFETY HARBOR, FLORIDA 34605

(727) 798-1138
www.jacobsonhomes.com

REFER TO THE JACOBSEN HOMES SETUP MANUAL AND
ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS

HUD WIND EXPOSURE CATEGORY - C
34569 - PAGE 1 OF 2

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT
(THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTESY ONLY. THE LICENSED SET-UP
CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED
SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION

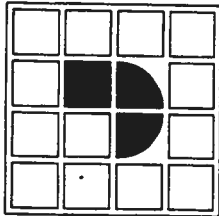
MODEL # CP-2345-569

IMP-34 569
JACOBSEN HOMES
24
24
16

2X8 FLOOR JOIST 16" O.C.

SHEARWALLS TR-DOWN STRAPS ARE NOT INSTALLED AT THE FACTORY
SET-UP IS REQUIRED TO INSTALL THE SHEARWALL STRAPS OVER THE I-BEAM
HEADERS PER AD-TD-0250 (PAGE 4B) IN THE SET-UP MANUAL AND MINIMUM
STRAPS AND PIERES SHALL BE INSTALLED AT BOTH ENDS OF EACH

ON PAGE 2 OF 2
SEE NOTES AND TABLES



JACOBSEN HOMES
PO BOX 368, 600 PACKARD CT.
SAFETY HARBOR, FLORIDA 34695

(727) 726-1138

www.jacobsonhomes.com

COLUMN INFO. TABLE		COLUMN PAD - MIN. SIZES (sq. in.)									
		LOAD (IN POUNDS)	1000 PAT SOL	1500 PAT SOL	2000 PAT SOL	2500 PAT SOL	3000 PAT SOL	3500 PAT SOL	4000 PAT SOL	4500 PAT SOL	5000 PAT SOL
1	19'-6"	5215	751	501	375	300	300	300	300	300	300
2	19'-6"	5215	751	501	375	300	300	300	300	300	300
3	0"	0	0	0	0	0	0	0	0	0	0
4	0"	0	0	0	0	0	0	0	0	0	0
5	0"	0	0	0	0	0	0	0	0	0	0
6	0"	0	0	0	0	0	0	0	0	0	0
7	0"	0	0	0	0	0	0	0	0	0	0
8	0"	0	0	0	0	0	0	0	0	0	0
9	0"	0	0	0	0	0	0	0	0	0	0
10	0"	0	0	0	0	0	0	0	0	0	0

REFER TO AD-10-0000 FOR COLUMN ANCHOR SIZES.

MINIMUM PIER PAD SIZE (sq.in.)	I-BEAM PIER SPACING									
	1000 PAT SOL	1500 PAT SOL	2000 PAT SOL	2500 PAT SOL	3000 PAT SOL	3500 PAT SOL	4000 PAT SOL	4500 PAT SOL	5000 PAT SOL	5500 PAT SOL
A	256 sq. in.	400	400	400	400	400	400	400	400	400
B	342.25 sq. in.	400	400	400	400	400	400	400	400	400
C	396 sq. in.	400	400	400	400	400	400	400	400	400
D	400 sq. in.	400	400	400	400	400	400	400	400	400
E	432.875 sq. in.	400	400	400	400	400	400	400	400	400
F	576 sq. in.	400	400	400	400	400	400	400	400	400
G	676 sq. in.	400	400	400	400	400	400	400	400	400

REFER TO AD-10-0000 FOR
ADDITIONAL PIER REQUIREMENTS.

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WARNING:

INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN SERIOUS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT.

CAUTION:

MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT THAT ALL PERSONNEL, ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADEQUATELY TRAINED. A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED.

NOTES:

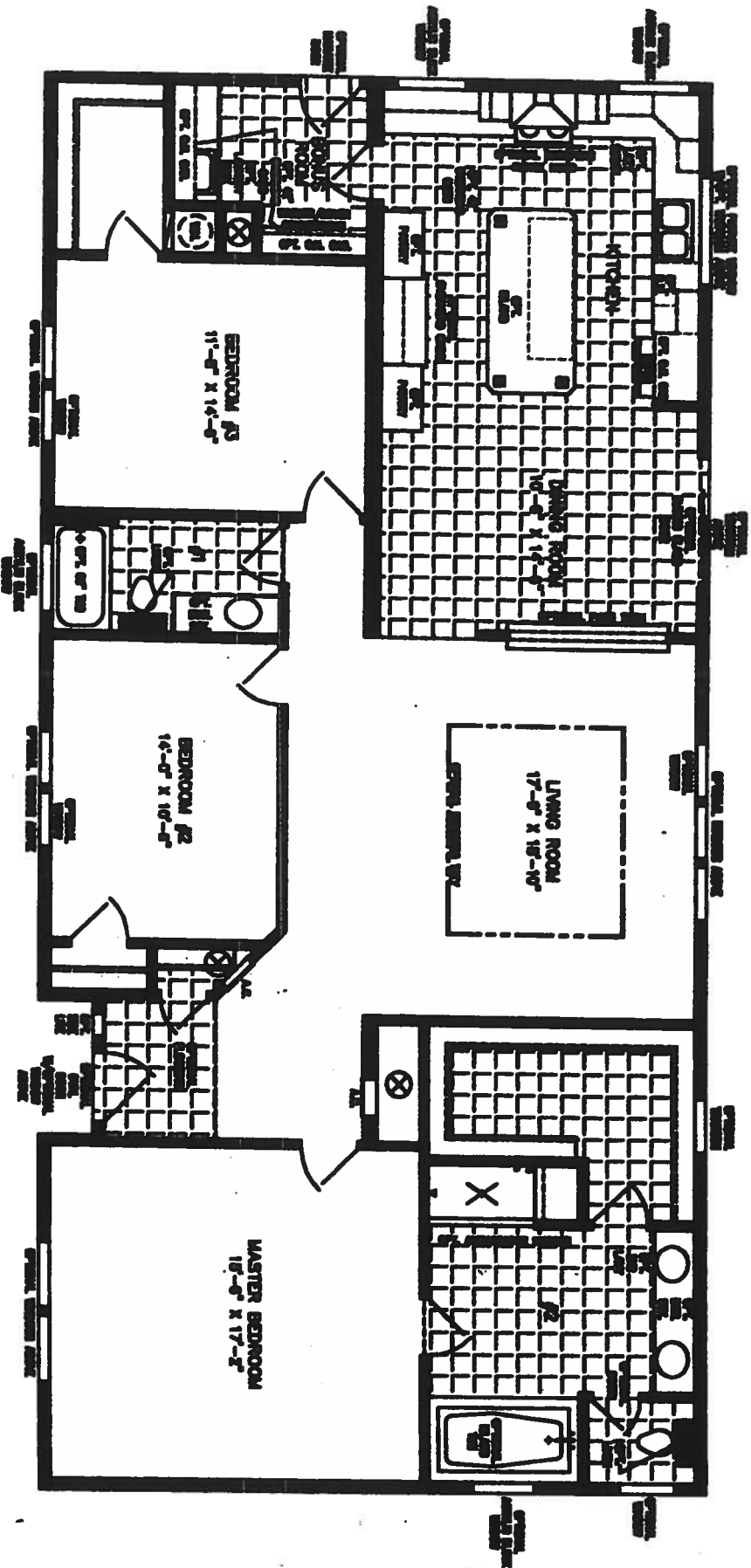
- REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
- REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ANCHORING FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERES CAN BE IMBEDDED ANYWHERE SPACING INCREASES PER THE SETUP MANUAL.
- REFER TO AD-10-0000 FOR ADDITIONAL PIER REQUIREMENTS.
- REFER TO THE APPROVED PIER PLAN FOR BEARING WALL LOCATIONS AND LOADS.
- REFER TO AD-10-0000 FOR BEARING WALL APPLICATIONS AND TIE-BOLTS.
- REFER TO THE APPROVED PIER PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERES SHALL BE LOCATED WITHIN 6" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERES MAY BE REQUIRED ALONG THE MATING LINE, SEE THE SETUP MANUAL FOR SPECIFICS.
- ALL 8"X8" PIER SYSTEMS INCLUDE PERIMETER AND MATING LINE BLOCKING.
- ALL 8"X8" PIER SYSTEMS WITH 16"X16" REQUIRE PERIMETER AND MATING LINE BLOCKING. ANY BEARING AREA WITH A ROOF BEAM OR A STRUCTURAL ATTACHMENT SHALL HAVE PERIMETER AND ANCHORING SPACING NO FURTHER THAN 48" O.C. MAXIMUM. OTHER WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION. REFER TO THE JACOBSEN HOMES SETUP MANUAL FOR SPECIFICS ON 8"X8" AND 16"X16" PIERES. WHEN THE ATTACHED STRUCTURE HAS PERIMETER WALL CONSTRUCTION OR IS DAMAGED AND CONSTRUCTED TO BE SELF-SUPPORTING, THESE ADDITIONAL PIERES AND ANCHORS ARE NOT REQUIRED.
- MAX. PIER SPACING ON 8"X8" IS 16". MAX. PIER SPACING ON 16"X16" IS 16". SEE NOTE 4 ON PIERES BEARING THROUGH BEARING WALLS.

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION).

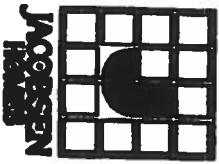
THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTESY ONLY. THE LICENSED CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C

The Imperial



NOTE:
CHECK WITH YOUR SALESPERSON
TO IDENTIFY OPTIONAL ITEMS
THAT ARE ON THIS PLAN.



800 Packard Court • Safety Harbor, Florida 34895 • Telephone (727) 726-1136
www.jachomes.com/Floor-Plans

38' X 66'
2,024 SQUARE FEET

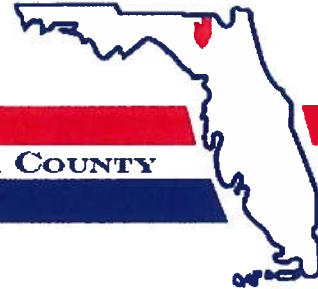
Model IMP-5661W-34568

5017

(ALL SIZES ARE APPROX.)
DESIGNED FOR ZONES II & III

© 01-20-16

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **9/13/2019 3:01:31 PM**
Address: **934 SW MARION MANN Ter**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **09622-004**

REMARKS: Address for proposed structure on parcel.

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

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

**263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com**

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1909-29 CONTRACTOR Ronnie Norris PHONE 623-7716

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 1074 ✓	Print Name <u>Glen Whittington</u> License #: <u>EC13002957</u>	Signature <u>Glen Whittington</u> Phone #: <u>386-972-1700</u> Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____ Qualifier Form Attached <input type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

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.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1909-24 CONTRACTOR Ronnie Norris PHONE 623-7716

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 _____ Signature _____ License #: _____ Phone #: _____ Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C 950	Print Name <u>Michael A. Boland</u> Signature <u>[Signature]</u> License #: <u>CAC1817716</u> Phone #: <u>(352) 274-9326</u> Qualifier Form Attached <input type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

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.

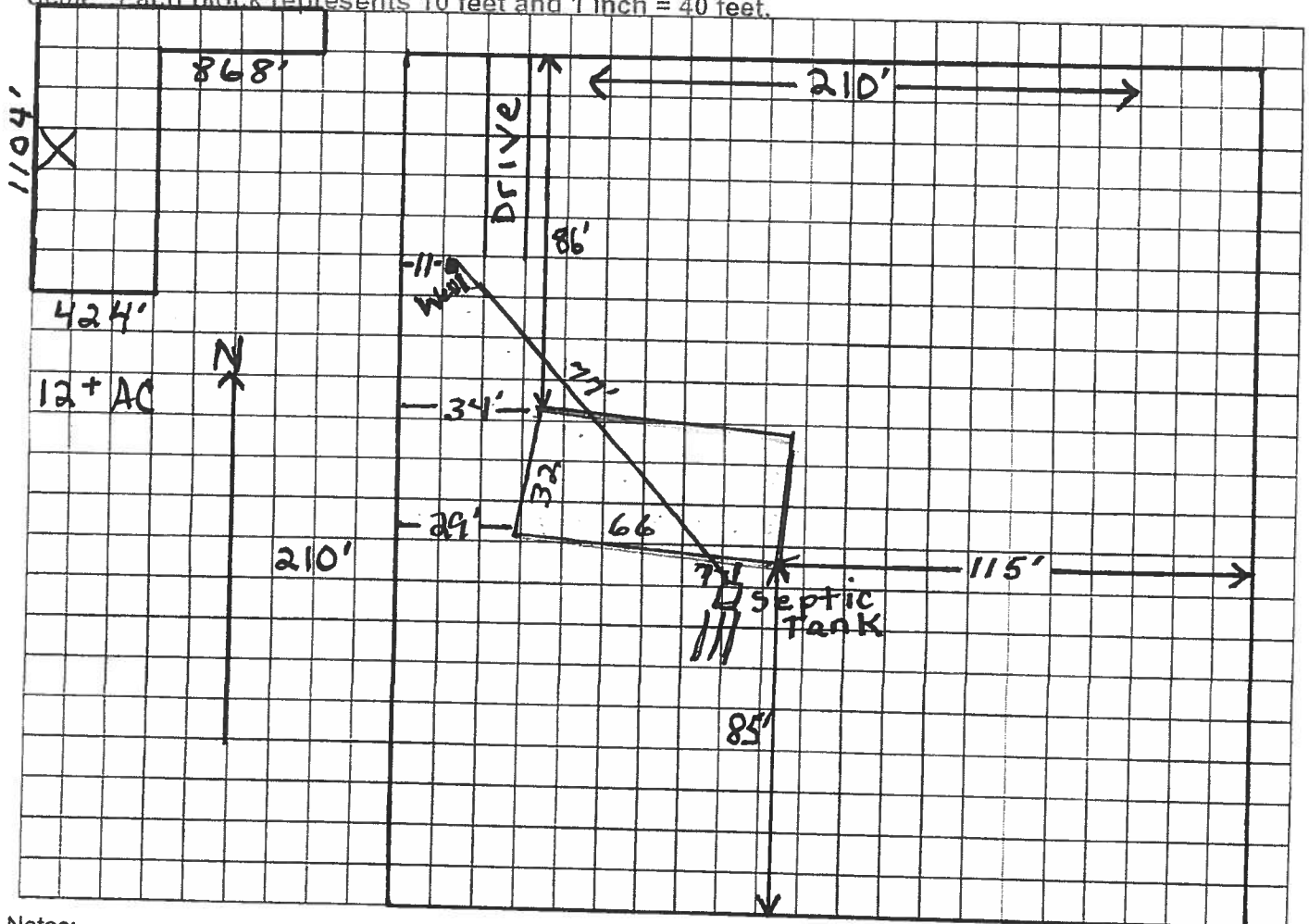
Revised 10/30/2015

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number _____

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: Song Chen

Plan Approved _____ Not Approved _____

By _____ Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Columbia County Property Appraiser

Jeff Hampton

2019 Preliminary Certified Values

updated 8/14/2019

Parcel: << 08-6S-17-09622-002 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 1 of 1

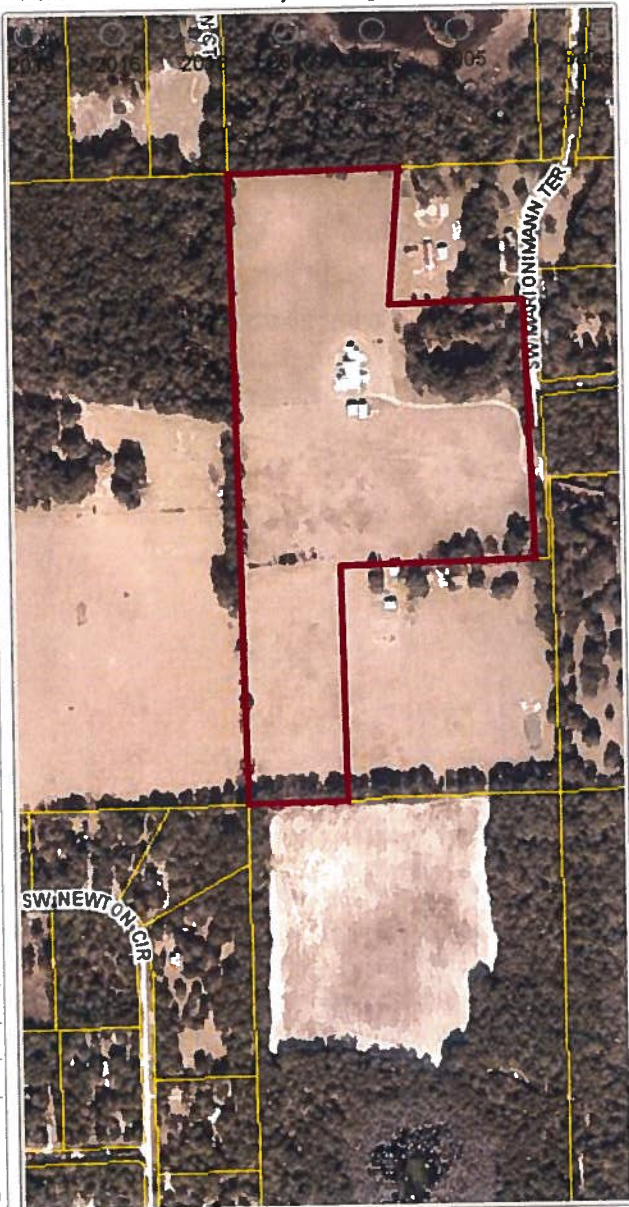
Owner	STONE DAMON K & DANIELLE G STONE CO-TRUSTEES 16566 NW 129TH TER ALACHUA, FL 32615		
Site	766 MARION MANN TER,		
Description*	BEG NW COR OF NE1/4 OF NE1/4 RUN E 723.52 FT, S 582.23 FT, E 623 FT, S 1074.26 FT, WEST 29.68 FT, S 10 FT, W 868.68 FT S 1004.51 FT, W 424.91 FT, N 2674.41 FT TO POB EX PORTION LYING E OF MANN RD. 1046-1092, WD 1117-2467, WD 1176-314, WD 1249-914, WD 1295 ...more>>>		
Area	50 AC	S/T/R	08-6S-17
Use Code**	PASTURELAN (006200)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

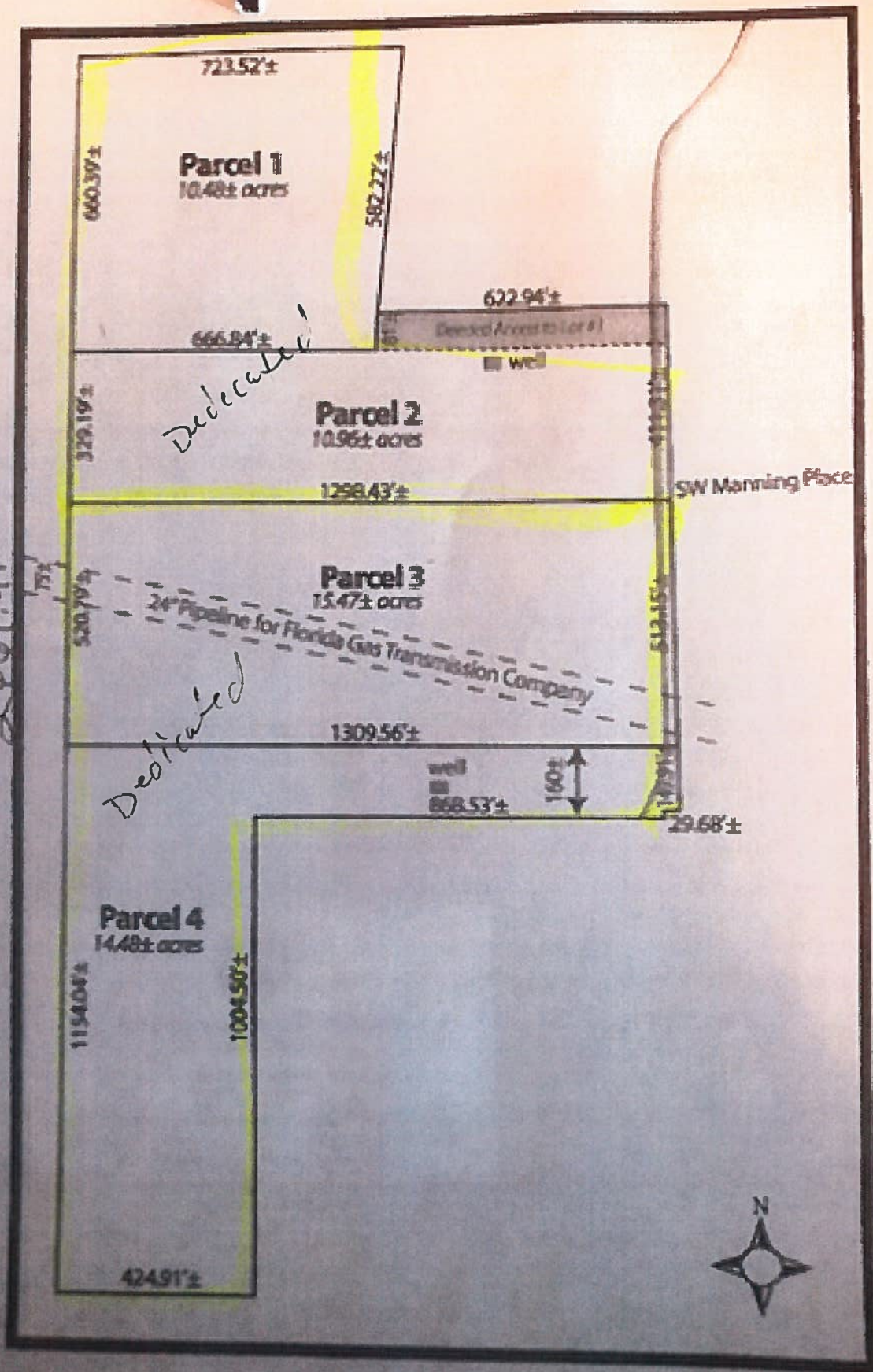
**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2018 Certified Values		2019 Preliminary Certified	
Mkt Land (2)	\$3,250	Mkt Land (2)	\$5,250
Ag Land (1)	\$12,000	Ag Land (1)	\$12,000
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (2)	\$16,920
Just	\$146,798	Just	\$165,718
Class	\$15,250	Class	\$34,170
Appraised	\$15,250	Appraised	\$34,170
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$15,250	Assessed	\$34,170
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$15,250 city:\$15,250 other:\$15,250 school:\$15,250	Total Taxable	county:\$32,495 city:\$32,495 other:\$32,495 school:\$34,170

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
1/17/2019	\$100	1378/1457	WD	V	U	11
5/4/2017	\$200,000	1336/0614	WD	V	Q	01
5/5/2015	\$27,900	1295/0512	WD	I	U	12
2/1/2013	\$240,000	1249/0914	WD	I	Q	01
6/24/2009	\$370,000	1176/0314	WD	I	Q	01
4/26/2007	\$625,000	1117/2467	WD	I	Q	
5/16/2005	\$265,000	1046/1091	WD	I	U	07
4/22/2004	\$32,500	1013/1105	WD	I	Q	
3/11/1996	\$30,000	818/1987	WD	I	U	09
9/1/1986	\$30,000	601/0579	AG	I	U	01



Legend

2018Aerials

Water Lines

Others

CANAL / DITCH

CREEK

STREAM / RIVER

SRWMD Wetlands

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Parcels

Addresses

Roads

Roads

others

Dirt

Interstate

Main

Other

Paved

Private

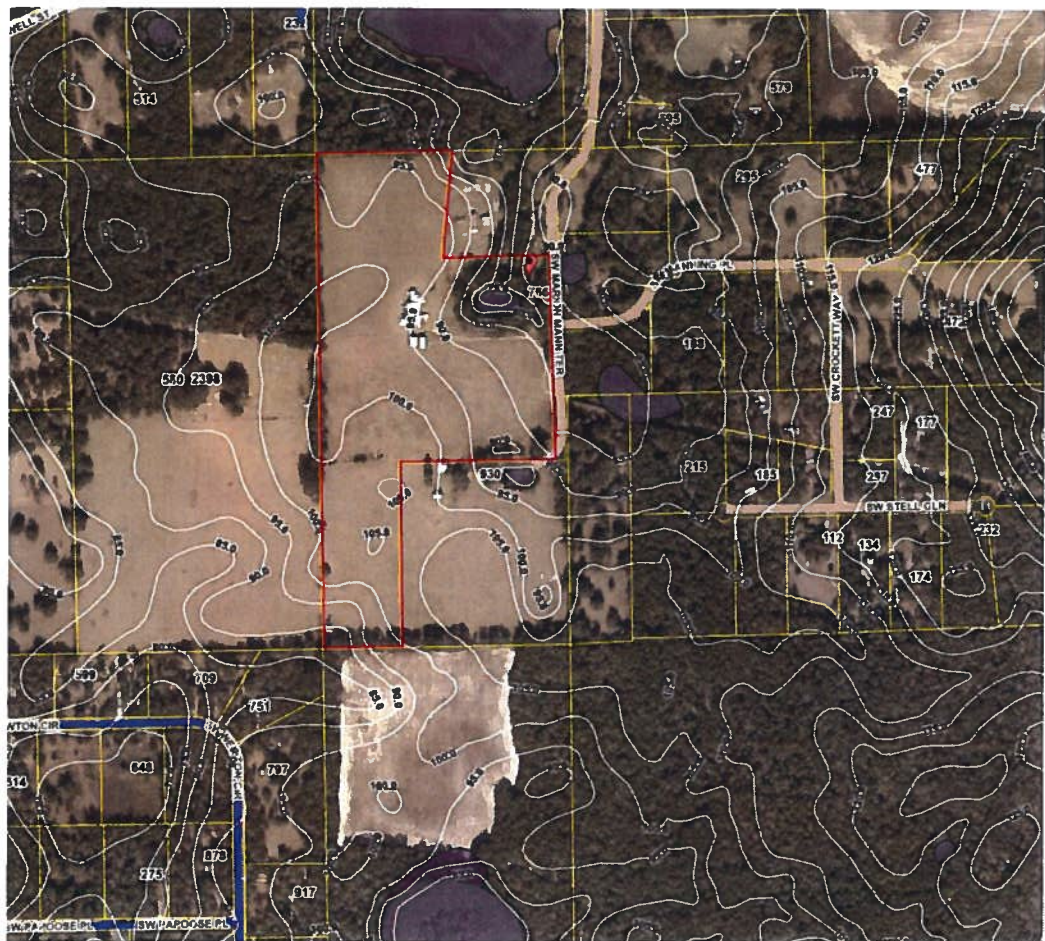
Contours

default{Contours shp}

DEFAULT

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Sep 12 2019 14:04:43 GMT-0400 (Eastern Daylight Time)



Site 103'
Road 93'

Parcel Information

Parcel No: 08-6S-17-09622-002

Owner: STONE DAMON K &

Subdivision:

Lot:

Acres: 50.1737976

Deed Acres: 50 Ac

District: District 4 Toby Witt

Future Land Uses: Agriculture - 3

Flood Zones: A,

Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

Legend

2018Aerials



Water Lines

Others

CANAL / DITCH

CREEK

STREAM / RIVER

SRWMD Wetlands



2018 Flood Zones

0.2 PCT ANNUAL CHANCE



A

AE

AH

Parcels

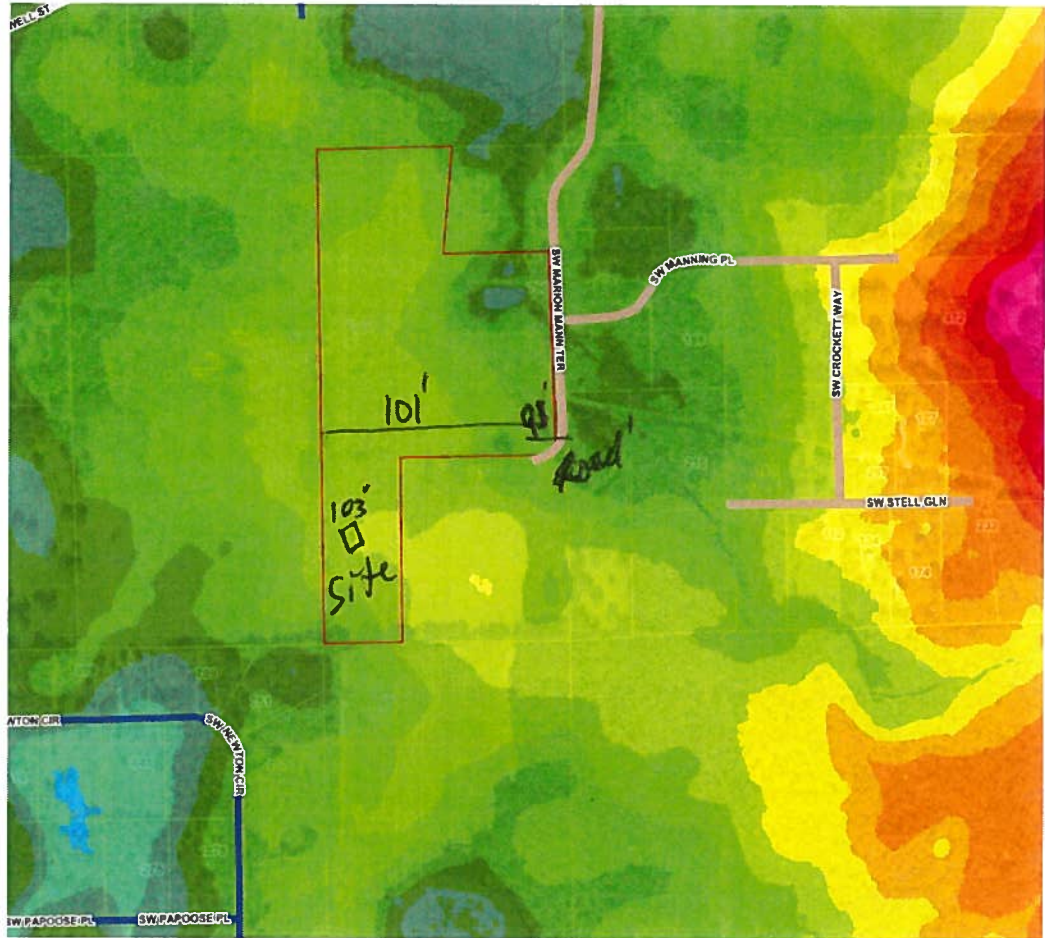
Addresses

LidarElevations



Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Sep 12 2019 14:05:54 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 08-6S-17-09622-002

Owner: STONE DAMON K &

Subdivision:

Lot:

Acres: 50.1737976

Deed Acres: 50 Ac

District: District 4 Toby Witt

Future Land Uses: Agriculture - 3

Flood Zones: A,

Official Zoning Atlas: A-3

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SSD 256406143



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

PERMIT NO. 19-0685
DATE PAID: 7/13/19
FEE PAID: 400.00
RECEIPT #: 6750240

APPLICATION FOR:

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

APPLICANT: Damon Stone / Taylor StoneAGENT: Sonya CrewsTELEPHONE: 352-318-0089MAILING ADDRESS: 1166 SW Marion Mann Terr Lake City, FL 32624

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 08-68-17-09122-004 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☐ NPROPERTY SIZE: 2.674 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y / ☐ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: 934 SW Marion Mann Terr Lake City, FL 32624

DIRECTIONS TO PROPERTY: Head S on I-75 get off at exit 414 Take a (2) (North) on Hwy Rd Follow Road until you reach Marion Mann and follow all the way to the back - The road will bend to the left, but stay straight

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

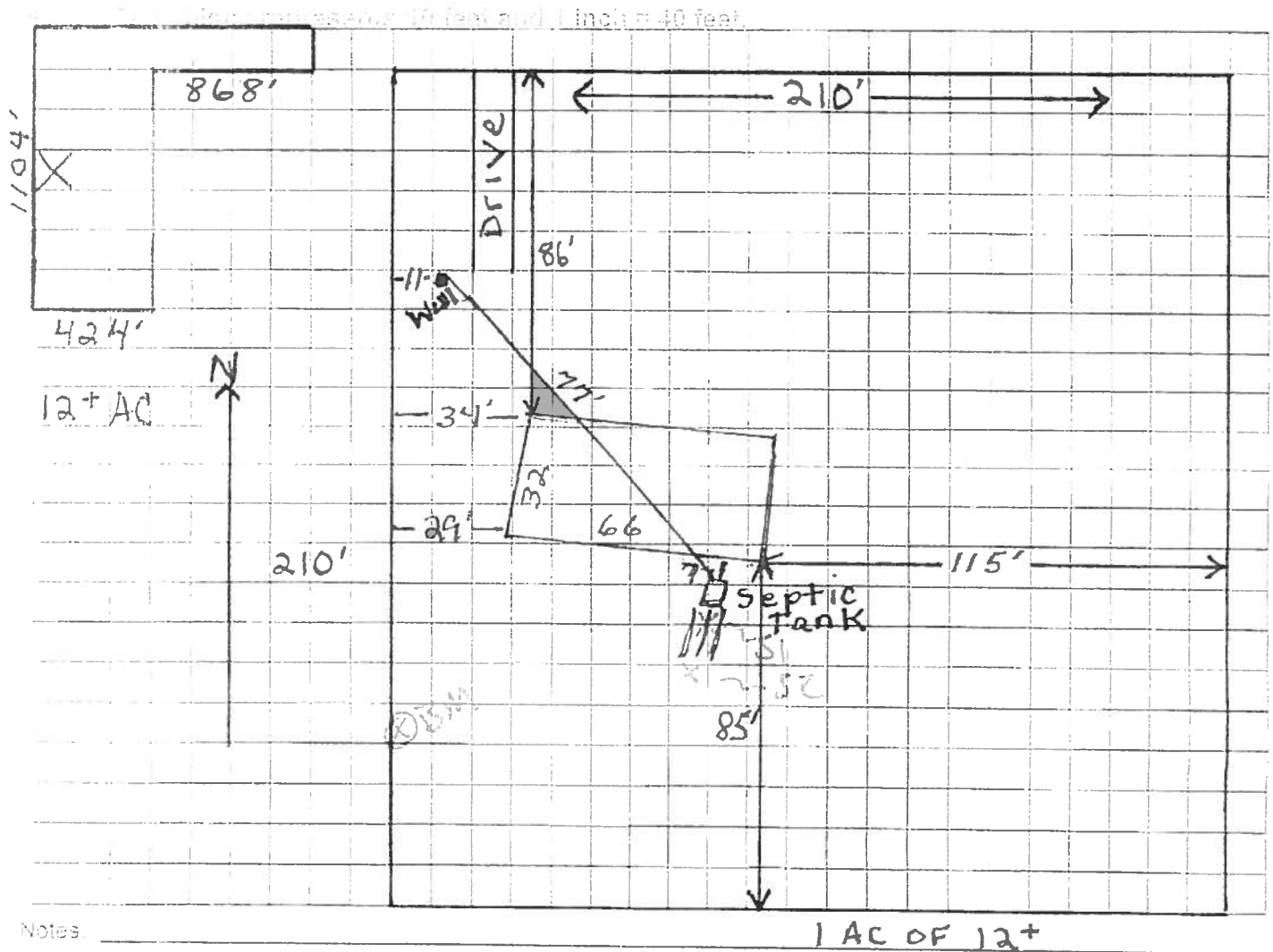
Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>mobile Home</u>	<u>3</u>	<u>2024</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Sonya Crews Linda Crews DATE: 9/5/19

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0685

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



Site Plan submitted by Scarp Creek

Plan Approved X

By _____

Not Approved _____

Columbia CHD

Date 9/19/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

[illegible]

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

September 24, 2019

To: Columbia County Building Department

Description of Well to be installed for Customer ___Damon and Taylor Stone___

Located @ Address: _____Marion Mann Terr_____

1 HP 15 GPM submersible pump, 1" drop pipe, 35 gallon captive tank, and backflow prevention. With SRWMD permit.

___*Bruce Park*_____

Sincerely,
Bruce N. Park
President