DATE 09/2	6/2006	Columbi	a County	Buildir	ng Pe	ermit		RMIT
	~*		t Expires.One Y	ear From the	e Date o PHONE	of Issue 352 745-273		0025021
APPLICANT		SW PARKER LANE	Willes	LAKE CITY		332 143 213	FL	32024
ADDRESS	<u>269</u>				PHONE	961-8081		
OWNER	RANDY I			— LAKE CITY			FL	32024
ADDRESS	189	NE CRAIG AVE			PHONE	352 745-273		
CONTRACTO		CY BECKHAM	CRAIG AVE, 6TH		110112	302.110	_	
LOCATION C)F PROPER	1Y 90E, 1L ON	CRAIG AVE, 01H	LOT ON LET I				
TYPE DEVEI	OPMENT	MH,UTILITY	E	STIMATED CO	ST OF CO	ONSTRUCTION	1 _0.	00
HEATED FLO	OOR AREA	36	TOTAL AI	REA		HEIGHT		STORIES
FOUNDATIO		WALLS	 8	ROOF PITCH		1	FLOOR _	
LAND USE &	ZONING	CI			MAX	K. HEIGHT		
Minimum Set	Back Requir	rments: STREET-F	RONT 20.0	00	REAR	15.00	SIDE	5.00
NO. EX.D.U.	1	FLOOD ZONE	<u>x</u>	DEVELOPM	ENT PER	MIT NO.		
PARCEL ID	33-3S-17-	06500-000	SUBDIVISI	ION R&JM	HР			
LOT 6	BLOCK	PHASE	UNIT		TOT	AL ACRES _		
	<u>-</u>				//		111	
			IH0000512	_ (r	Pen	-		1in
Culvert Permit	No.	Culvert Waiver Co	ntractor's License N	umber		Applicant/Own	er/Contracto	or
EXISTING	<u> </u>	06-0824-E	ВК		-	JH		<u>Y</u>
Driveway Con	nection	Septic Tank Number	LU & Zoi	ning checked by	Ap	proved for Issua	ince N	ew Resident
COMMENTS:	ONE FOO	OT ABOVE THE ROAD)	<u> </u>		<u>. </u>		
						Check # or	Cash 51	5
		FOR BUI	LDING & ZON	ING DEPAR	TMENT	ONLY		(footer/Slab)
Temporary Po	wer		Foundation			Monolithic		
		date/app. by	_	date/app. by	/	_	da	te/app. by
Under slab rou	ıgh-in pluml	oing	Slab		ß	Sheathir	ng/Nailing	
		date/app		date/app				date/app. by
Framing	date/ar	m hv	Rough-in plumbing	above slab and b	oelow woo	d floor	de	nte/app. by
Electrical rou	-	p. oy	Heat & Air Dust			.		псларр. Оу
		date/app. by	Heat & Air Duct	date/app.	by	Peri. beam (Lin	ntel)	date/app. by
Permanent pov	ver		C.O. Final	чистирр.	. ,	Culvert		
•		ate/app. by		date/app. by	·	-	date	app. by
M/H tie downs	, blocking, e	lectricity and plumbing	1-4-6	b		Pool _		
Reconnection				ipp. by	Utility Po	ale	date/a	pp. by
Reconnection		date/app. by	Pump pole da	ite/app. by	Ounty I v	date/app.	. by	
M/H Pole		Trav	el Trailer		_	Re-roof	date/ap	n hy
a	ate/app. by			date/app. by			date/ap	р. бу
BUILDING PI	ERMIT FEE	\$ 0.00	CERTIFICATION I	FEE \$ 0.00	0	SURCHAR	GE FEE \$	0.00
MISC. FEES	\$ 200.0	0 ZONING	CERT. FEE \$50.0	00 FIRE FE	E\$ <u>0.0</u>	0 WA	STE FEE \$	
FLOOD DEVE	ELOPMENT	FEE \$ FLOO	DD ZONE FFE \$ 2	5.00 CULVE	RT FEE \$	TC	OTAL FE	E 275.00
INSPECTORS	S OFFICE	- Wi	19/1/1	CLERKS	OFFICE	Ci	$\langle\!\langle$	No.

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 INCONVIENCE, 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 (Revised 6-23-05) Building Official OK 77# 1-11-0 0609-20 9-8-06 AP# ____ Date Received By <u>LH</u> Permit # 25021 Flood Zone **Development Permit** Zoning Land Use Plan Map Category Comments_ _____ Finished Floor____ River____ in Floodway_ FEMA Map# _____ Elevation_ Site Plan with Setbacks Shown EH Signed Site Plan EH Release D Weil letter Existing well Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer 15 Cot 6 Bar D MHPark Property ID # 2-73-75-17-106500-000 Must have a copy of the property deed New Mobile Home ____ Used Mobile Home Applicant Grace Address 1299 Name of Property Owner 911 Address Circle the correct power company -Clay Electric (Circle One) -Suwannee Valley Electric -**Progress Energy** Name of Owner of Mobile Home Address Relationship to Property Owner _____ Current Number of Dwellings on Property____ Lot Size 50×10 0 _____ Total Acreage Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one) is this Mobile Home Replacing an Existing Mobile Home Driving Directions to the Property

Phone #

Installation Decal #

Name of Licensed Dealer/Installer

Installers Address 609

License Number_

PERMIT NUMBER

POCKET PENETROMETER TEST

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



POCKET PENETROMETER TESTING METHOD

- Test the perimeter of the home at 6 locations.
- ы Take the reading at the depth of the footer
- 3. Using 500 lb. increments, take the lowest reading and round down to that increment





TORQUE PROBE JEST

showing 275 inch pounds or less will require 5 foot anchors here if you are declaring 5' anchors without testing The results of the torque probe test is inch pounds or check

Note: A state approved lateral arm system is being used and 4 ft requires anchors with 40001b holding capacity reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested



Electrical

source. Connect electrical conductors between multi-wide units, but not to the main power This includes the bonding wire between mult-wide units. Pg.

Plumbing

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

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

> Walls: Floor: Roof: Water drainage: Natural Debris and organic material remeved 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 naile at 2" on center on both sides of the centerline Type Fastener: Type Fastener: Type Fastener Gasket (weatherproofing requirement) Fastening multi wide units Swale Site Preparation Length: Length: Length Pad Spacing Spacing

of tape will not serve as a gasket a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are l understand a properly installed gasket is a requirement of all new and used

Type gasket Pg. nstaller's initials nstalled Bottom of ridgebeam Yes Between Walls Between Floors Yes

Weatherproofing

Fireplace chimney installed so as not to allow intrusion of rain water. Yes Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or taped. Yes Pg.

Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. Skirting to be installed. Other: Electrical crossovers protected. Drain lines supported at 4 foot intervals. Yes . Yes Miscellaneous 8

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

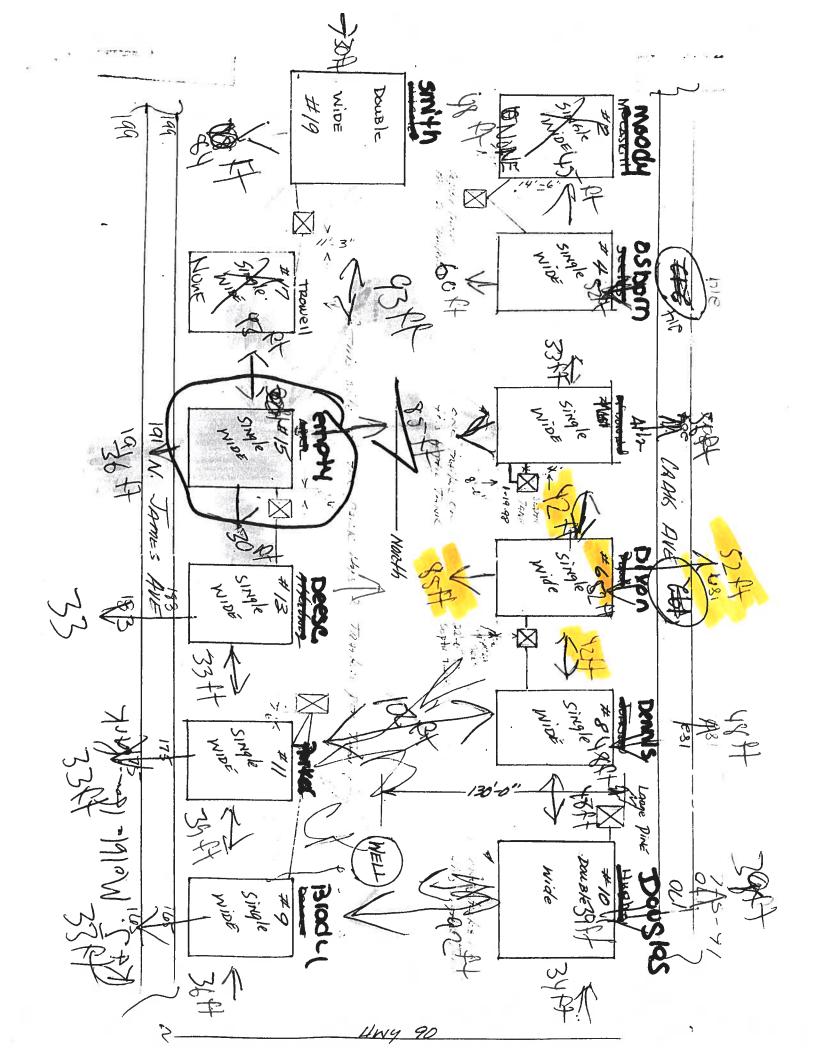
Installer Signature manufacturer's installation instructions a 5/Rule 15C-1 &

Date 2

PRELIMINARY MOBILE HOME INSPECTION REPORT

TE RECEIVED BY IS THE M/H ON THE PR	OPERTY WHERE THE PERMIT I	WILL BE ISSUED?
MERS NAME Kandy Horton PHO	DNE <u>961-808/</u>	CELL 1, 23 3715
DRESS 1721 E Daval st		
DBILE HOME PARK RIJ MMP SUBDIVISION	N	
IVING DIRECTIONS TO MOBILE HOME		<u>.</u> 9 8
		8 (A 9)
Lot	#6	
OBILE HOME INSTALLER Beck ham	PHONE	CELL
IOBILE HOME INFORMATION		. /
AKE BY Mamilton / Rive YEAR SY SIZE	14 x 60 coi	OR Bran Fran
ERIAL No. ROBITTGZAL		1
TIND ZONE Must be wind zone II or	higher NO WIND ZONE	ALLOWED
NTERIOR: Por F) - F= PASS F= FAILED INSPECTION STANDARDS		
SMOKE DETECTOR () OPERATIONAL () MISSING		'
FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION	N	e e
DOORS () OPERABLE () DAMAGED		
WALLS () SOLID () STRUCTURALLY UNSOUND		
WINDOWS () OPERABLE () INOPERABLE		
PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING	6	
CEILING () SOLID () HOLES () LEAKS APPARENT		
ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIR	ING / \ OUTLET COVERC MICE	
WALLS / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND		NEEDS CLEANING
WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT	
ROOF () APPEARS SOLID () DAMAGED		a v
STATUS: APPROVED WITH CONDITIONS:	• •	• •
NOT APPROVEDNEED REINSPECTION FOR FOLLOWING CONDITIONS		
TOTAL	- 24	
2		
SIGNATURE Lang R	_ID NUMBER_306	DATE 7-18-06

Year T Property		hintenance Sel	Columb 151950 Lan AG 137711 Bld 16870 Xfe 306531 TOI	000 lg 013 * ea 007 *
3 BLOCK 2 HIGH 5 JTWRS 921-26 7 THRU 2344, W 9 11 13 15 17 19 21 23 25	#LAND ESTATES S/D. Company of the state of t	ORB 411-212, 631-765,	6,5,0,-,8,3,5,,	2 4 6 8 10 12 14 16 18 20 22 24 26 28



LETTER OF AUTHORIZATION

Date: 9, 27.06
Columbia County Building Department P.O. Drawer 1529 Lake City, FL 32056 I FACY BUNAM, License No. 4000512 do hereby
Authorize GIENN Williams to pull and sign permits on my
behalf. For Roundy Hornes 3 Dennis Sincerely, 2006 Sincerely, 2006 To pull and sign permits on my to pull and sign permits on my September of
A CHAMB
Sworn to and subscribed before me this 27 day of Sept., 2006.
Notary Public: Lai H
My commission expires: June 76, 2006 Expires: June 28, 2008
Personally Known
Produced Valid Identification:
Revised: 3/2006