DATE 03/02/2005

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT
000022864

APPLICANT ROBERT MINNELLA PHONE 352 232-7228

ADDRESS 11451 NE 83RD TERR BRONSON FL

OWNER BILLY GREEN PHONE 954 232-7228

ADDRESS 709 SW CAIN GLEN FT. WHITE FL 32038

CONTRACTOR AL PINSON PHONE 352 258-5888

LOCATION OF PROPERTY 47S, TR ON JUNCTION, TR ON CAIN GLEN, NEXT TO LAST LOT
BEFORE CURVE ON LEFT

TYPE DEVELOPMENT MH,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. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 20-6S-16-03894-001 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 9.63

		IH0000019	Robert Minnella
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor

EXISTNG	05-0122-N	BK	RK	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 2751

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 $ 34.02 WASTE FEE $ 73.50

FLOOD ZONE DEVELOPMENT FEE $ CULVERT FEE $ **TOTAL FEE** 357.52

INSPECTORS OFFICE 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."

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.

05-0122-N CK 2751/Eff Mess.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only Zoning Official 15.02.05 BLK Building Official RK 2-16-05

AP# 0502-10 Date Received 2/3/05 By JW Permit # 22864

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

Comments

FEMA Map # Elevation Finished Floor River In Floodway

☑ Site Plan with Setbacks shown (need) ☐ Environmental Health Signed Site Plan ☐ Env. Health Release

☐ Well letter provided N/A Existing Well

Revised 9-23-04

- Property ID 20-6S-16-R03894-001 Must have a copy of the property deed
- New Mobile Home ✓ Used Mobile Home Year 2005
- Subdivision Information —
- Applicant Robert Minnella Phone # (352) 486-0016
- Address 11451 NE 83 Terr, Bronson
- Name of Property Owner Billy R Green Phone# (954) 232-7228
- 911 Address 709 SW Cain Glen, Ft White
- Circle the correct power company – FL Power & Light – Clay Electric
  (Circle One) – Suwannee Valley Electric – Progressive Energy
- Name of Owner of Mobile Home Billy R Green Phone # (954) 232-7228
- Address 6512 SW 7 Pl, Ft Lauderdale, FL
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1
- Lot Size 325 X 1341 X 322 X 978 Total Acreage 9.63
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
- Driving Directions 475 to 27 in Ft White (TR) Go approx 3 miles to SW Junction Rd (TR) to Cain Glen (TR) Follow to near end last driveway before address 741 on left thru gate, Site back to left app. 300'.
- Is this Mobile Home Replacing an Existing Mobile Home yes
  – ~~ASSESSMENTS NEED TO BE CHANGED~~ –
- Name of Licensed Dealer/Installer Al Pinson Phone # (352) 258-5888
- Installers Address 3131 NE 183 Pl, Gainesville, FL 32609
- License Number IH0000019 Installation Decal # 217941

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer Al Pinson License # IH0000019

Address of home being installed 709 SW Cain Gln
Ft. White, Fl.

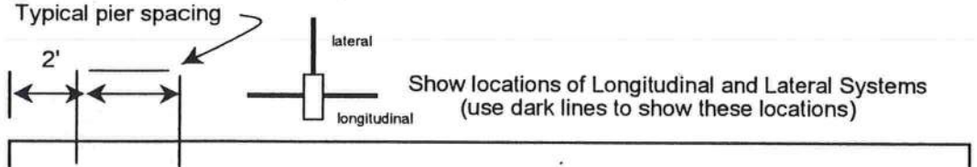
Manufacturer Fleetwood Length x width 28'x60'

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

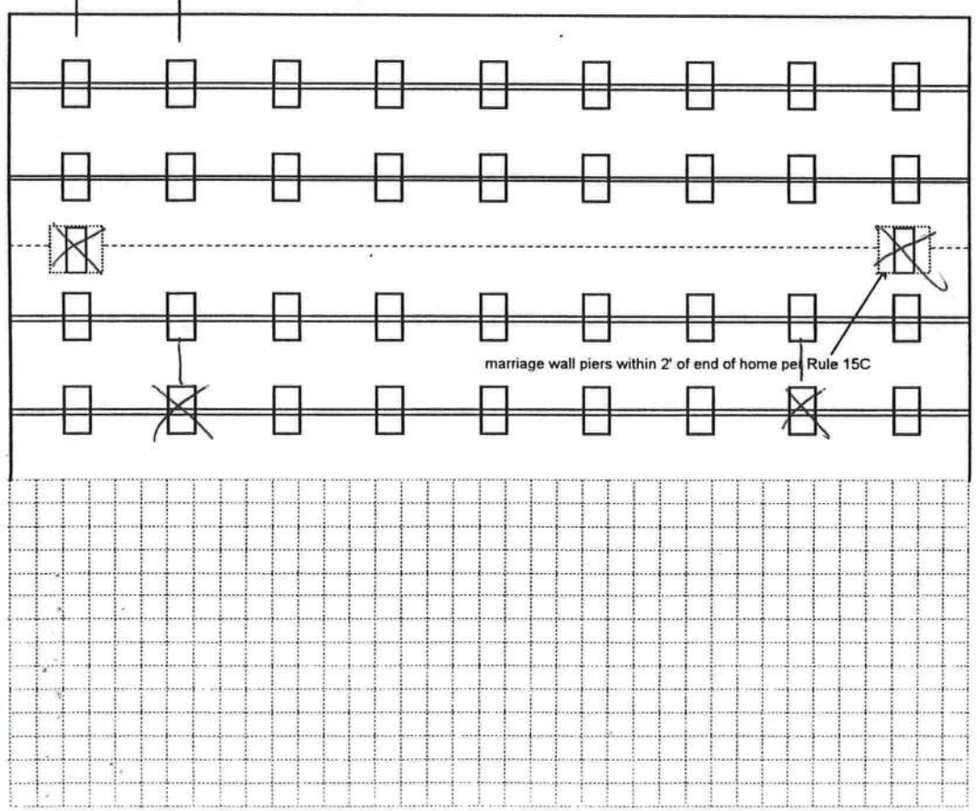
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials AP

Typical pier spacing



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 # 217941

Triple/Quad ☐ Serial # TBD

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'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17 X 22

Perimeter pier pad size 16 X 18

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 AP

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Tie Down Eng.

OTHER TIES

	Number
Sidewall	
Longitudinal	
Marriage wall	
Shearwall	

PERMIT WORKSHEET

PERMIT NUMBER _____

p.5

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___

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 4 foot anchors

Note: X6 System By Tie Down Eng
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.

AP Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Al Pinson

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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 ✓
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor:	Type Fastener: Nails	Length: 5"	Spacing: 20"
Walls:	Type Fastener: #4 SDS	Length: 5"	Spacing: 20"
Roof:	Type Fastener: #4 SDS	Length: 3"	Spacing: 30"

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 AP

Type gasket Foam Tape
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 _____ Date 2-2-5

Jun 10 04 11:39p

ACTION

Pump Repair & Well Drilling

Mary Bilbrey, State License # 2773
Jamie Storey, State License # 2664

Office (352) 542-7877
Fax (352) 542-7533

RESIDENTIAL WATER WELL BUILDING PERMIT INFORMATION

Building Permit # _____ *Owners Name:* William Green

Well Depth _____ *ft. Casing Depth* _____ *ft* *Water Level* _____ *ft.*

PUMP INSTALLATION: Submersible XX *Deep Well Jet* ___ *Shallow Well Jet* ___

Pump Make Goulds *Pump Model #* 18LS *Pump H.P.* 1

System Pressure (PSI) 40 *On* 60 *Off Average Pressure* 50

Pumping System GPM at average pressure and pumping level 18 *(GPM).*

TANK INSTALLATION: Precharged (Bladder) XX *Atmospheric (Galvanized)* ___

Make Well Flo *Model* 100WF *Size* 81 *Gallons.*

Tank Draw-down per cycle at system pressure 21 *Gallons.*

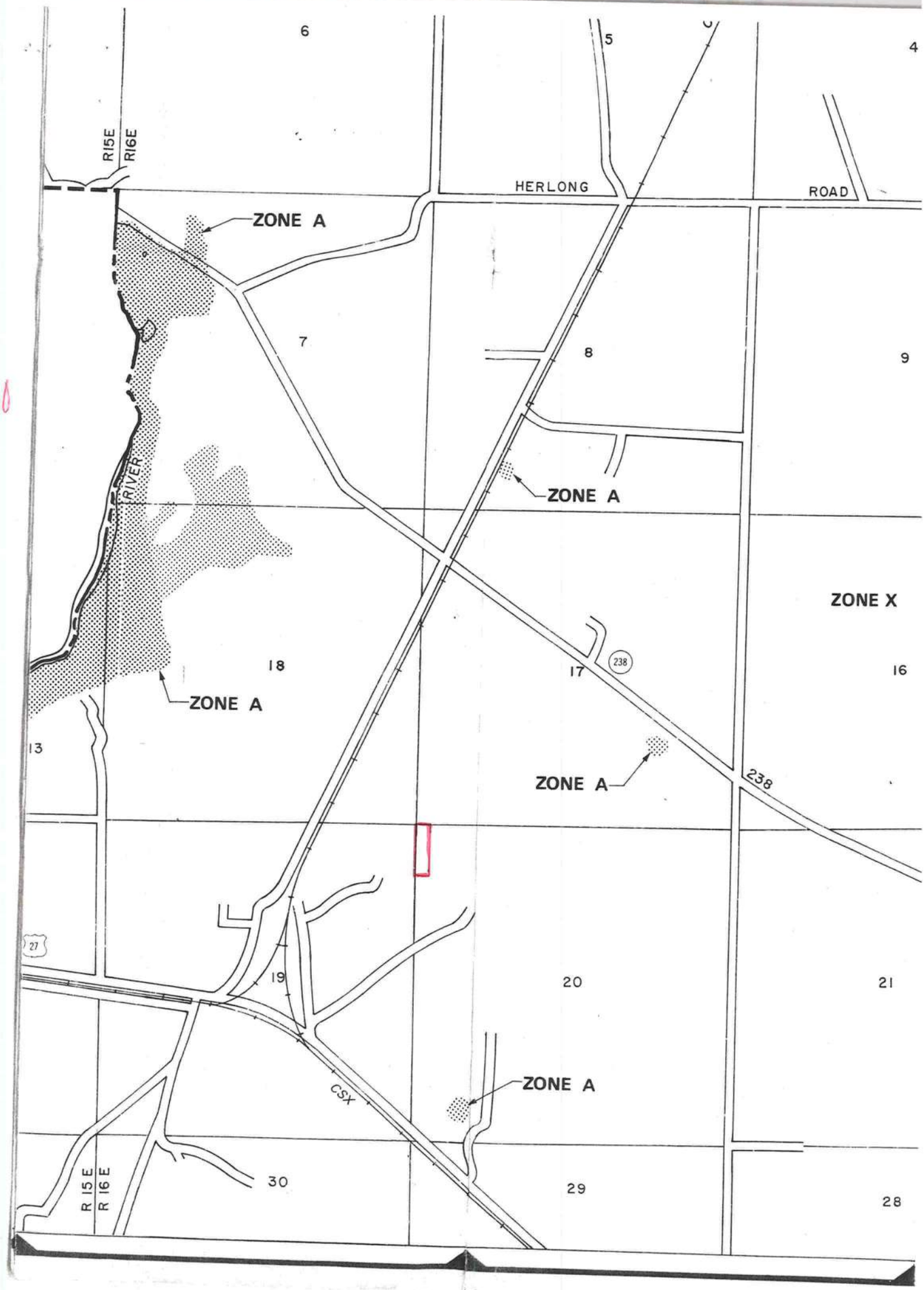
I hereby certify that this water well system has been installed as per above information.

State contractor signature

Mary Bilbrey
print name

2773
State license number

Date


6
5
4
R15E
R16E
HERLONG
ROAD
ZONE A
7
8
9
RIVER
ZONE A
ZONE X
18
17
238
16
ZONE A
13
ZONE A
238
27
19
20
21
CSX
ZONE A
R15E
R16E
30
29
28

0205-10

011441

FLORIDA DEPT. OF REVENUE JUL 30 '76 P.B. 11110 DOCUMENTARY SUR TAX 08.25

3-00.00

This instrument was prepared by:

WILLIAM J. HALEY
of the Law Offices of
BRANNON, BROWN, NORRIS, VOCELLE & HALEY
Post Office Box 1029
LAKE CITY, FLORIDA 32055

Warranty Deed

(STATUTORY FORM—SECTION 689.02 F.S.)

This Indenture, Made this 30th day of JULY 1976, Between

DARYL OLSON and his wife, LINDA OLSON,

of the County of Broward, State of Florida, grantor*, and

BILLY RAY GREEN and his wife, INGRID M. GREEN,

whose post office address is 18001 Northwest Sixth Court, Miami,

of the County of Dade, State of Florida, grantee*,

BOOK 365 PAGE 698 OFFICIAL RECORDS

Witnesseth, That said grantor, for and in consideration of the sum of ----------

------TEN AND 00/100 ($10.00)----------

Dollars, and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

TOWNSHIP 6 SOUTH, RANGE 16 EAST

Section 20: W½ of NW¼ of NW¼ less and except the West 327.5 feet.

SUBJECT TO taxes for 1976 and subsequent years.

W. E. Crews
CLERK OF CIRCUIT COURT
COLUMBIA COUNTY, FLORIDA

1976 JUL 30 PM 3:10

FILE NO. 76-526P
RECORDED
BOOK 365 PAGE 698

INSTALLER AUTHORIZATION

DATE: 2-2-05

TO: Columbia Co

LICENSE NO: IH0000019

I Al Pinson give full consent to Robert Minnella

to pull any and all necessary permits on my behalf for mobile home set ups in

Columbia County.

Signed: [signature]

Sworn to me this day 2 of Feb, 2005

Notary Signature [signature]

NANCY S. PHELPS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD193088
EXPIRES 05/10/2007
BONDED THRU 1-888-NOTARY1

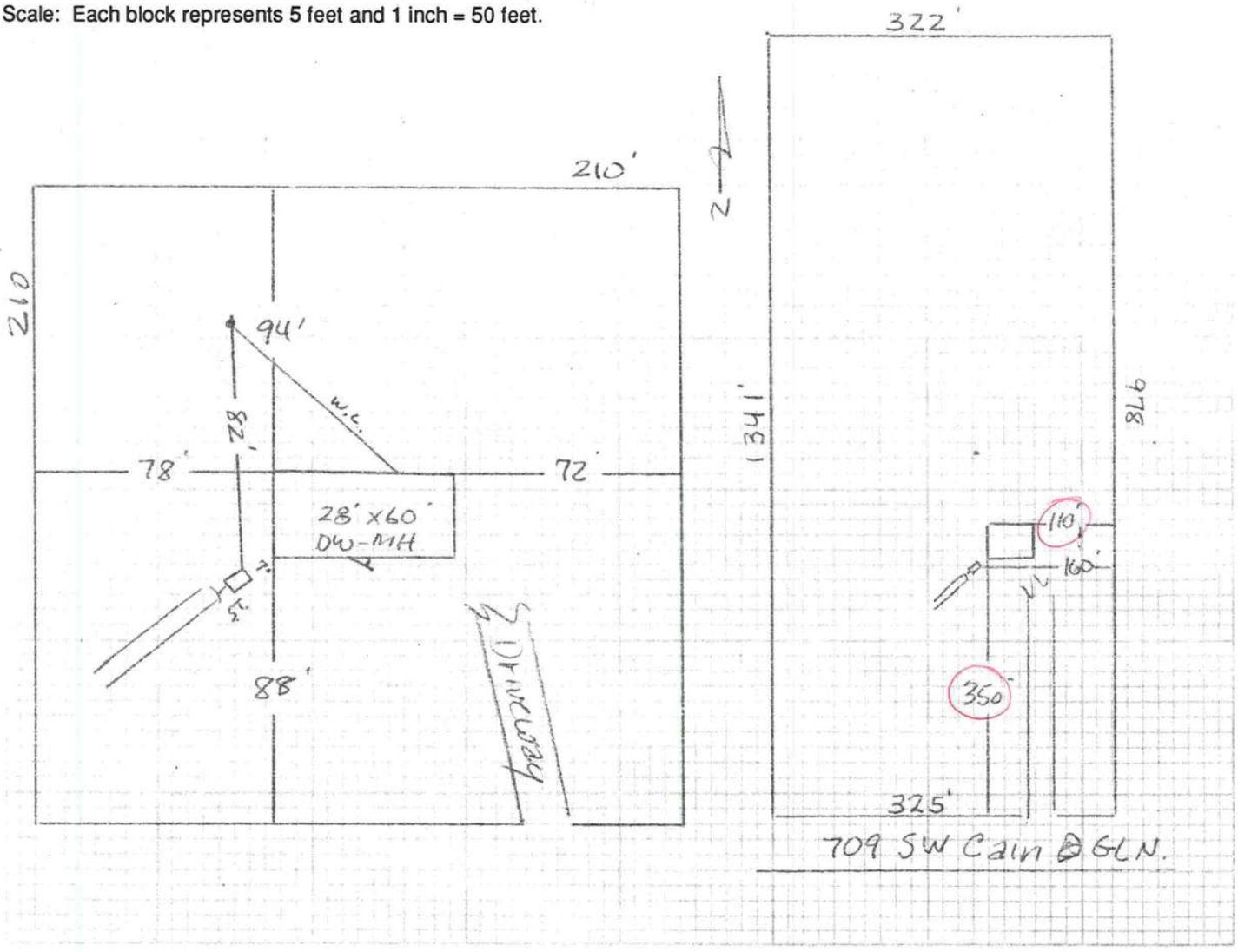
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Green, Billy ---------- PART II - SITE PLAN ----------

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



Notes: _____

Site Plan submitted by: _____ (Signature) _____ (Title)

Plan Approved _____ Not Approved _____ Date 2-3-05

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

TALLAHASSEE, FLORIDA 32399-0500

FRED O. DICKINSON, III
Executive Director

May 1, 2001

Ms. Boone Smith
Director of Manufactured Housing Division
Tie Down Engineering, Inc.
5901 Whelchel Drive
Atlanta, Georgia 30336

Dear Ms. Smith:

We wish to acknowledge receipt of your specifications and test results certifying that your Vector Xi System listed below complies with the specifications and regulations set by the Department of Highway Safety and Motor Vehicles, Rules 15C-1.0105, 15C-1.0107 and 15C-1.0108, Florida Administrative Code.

Based on the information submitted to this bureau, the following product is listed for sale and use in Florida when the installation instructions showing the way the system was tested, are provided, at installation sites.

MODEL #	IDENTIFICATION	DESCRIPTION
59315 / 59314	Vector Xi System	Lateral/Longitudinal Stabilizing System

If you have any questions, please advise at (407) 623-1340.

Sincerely,

Phil Bergelt

Phil Bergelt, Program Manager
Bureau of Motor Home and
Recreational Vehicle Construction
Division of Motor Vehicles

PRB:srb

Tie Down Engineering, Inc.

5901 Wheaton Drive • Atlanta, Georgia 30336 • (404) 344-0000 • FAX (404) 349-0401

June 17, 2002

To: Florida Distributors
From: Merrill Sutton
Re: New Installation Instructions

Enclosed are Xi installation instructions for the state of Florida. These are effective immediately. Our understanding is that the change was made for several reasons, including input from county and state inspectors. The changes make all lateral arm alternative foundation systems approved in the state, follow the same instructions as to number of systems per home. Another important change is that all lateral arm alternative foundation systems must include a stabilizer plate and frame tie, one per each lateral arm stabilizing location.

Please post these instructions in your showroom. We will ship multiple copies later this week. We will also mail each registered installer a copy of the instructions and a copy of the state letter. Should you have any further questions please contact Boone (Smith) Morris at ext 335.

State of Florida

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

TALLAHASSEE, FLORIDA 32399-0500

FRED O. DICKINSON, III
Executive Director

MEMORANDUM

June 14, 2002

TO: All Anchor and Component Manufacturers

FROM: Philip R. Bergelt, Program Manager
Bureau of Mobile Home and Recreational Vehicle Construction

SUBJECT: Lateral Arm Stabilizer Systems

To ensure consumer protection and to ensure that minimum standards are met in the installation of Lateral Arm Stabilizing Systems, it is necessary for us to create uniform installation standards for these systems. A secondary benefit of uniform standards will be the clarification of installation procedures for installers and for county and city inspectors performing field oversight.

Effective immediately all Florida lateral arm stabilizing instructions will include the following prescriptive number of systems:

Four (4) systems up to 52 feet
Six (6) systems from 52 to 80 feet

Five (5) 12 pitch roofs will require a minimum of the following number of lateral arm stabilizing systems, unless a greater number is specified by your engineering:

Six (6) systems up to 52 feet
Eight (8) systems from 52 to 80 feet

Your instructions should contain the following three (3) notes:

Note: 1) The use of this system requires sidewall vertical ties at no greater than 5'4" on center and allows for the use of 4' anchors.

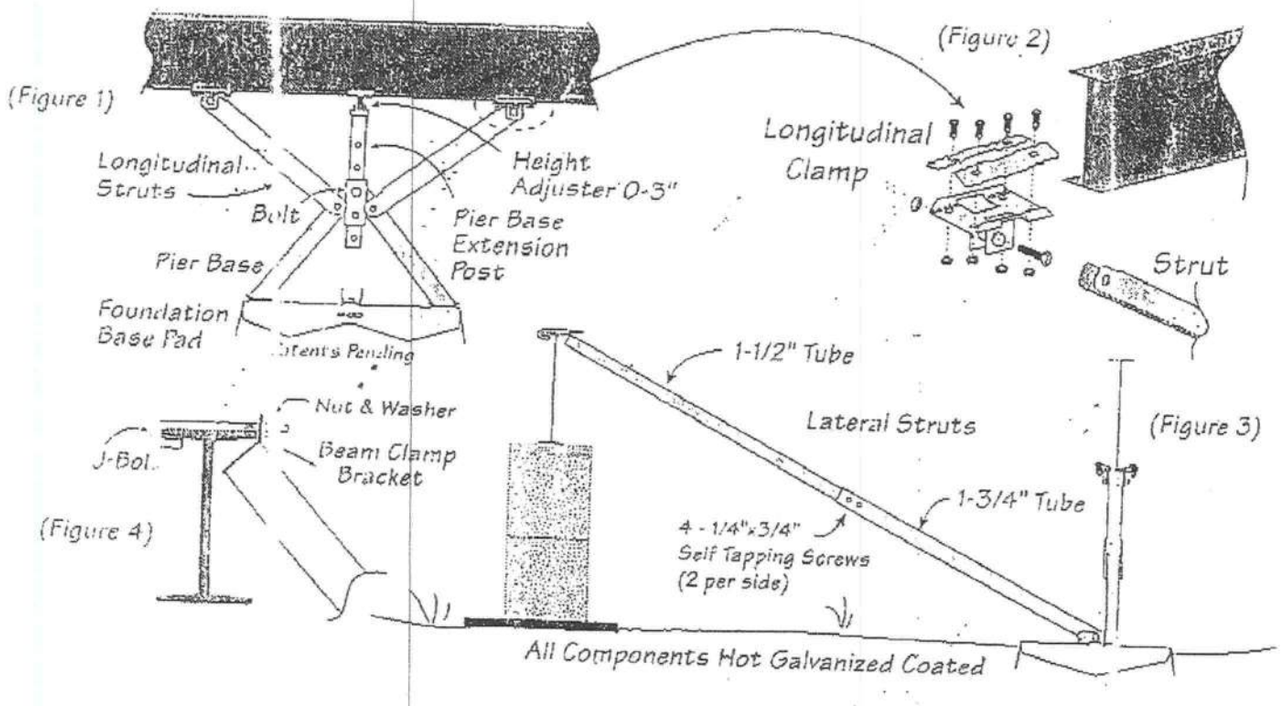
Note: 2) Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor.

Note: 3) Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.

2. Identify on the location where the longitudinal systems will be installed.
3. Clear all organic matter and debris from the pad site.
4. Place pad centered under beam using the centering mark imprinted on the pad.
5. Press or drive pan into ground until level and flush with prepared surface.
6. Slide Xi-System pier feet into slots in pad so that the Xi-system pier is centered under the I-beam.
7. Raise telescoping extension post to contact the bottom of I-beam, secure with bolt provided, tighten bolt nut. *(Figure 1)*
8. Turn hex nut on pier height adjuster until Xi-System pier is rigid between pad and I-beam.
9. Install Gator Beam clamps to I-beam on each side of the Xi-System pier. Do not tighten nuts at this time. *(Figure 2)*
10. Connect struts (open side down) to each side of the Xi-System pier using the U- bolt provided. Struts are attached to the upper hole in each pier leg and to the flanges on the beam clamps. *(Figure 1)*
11. Tighten all nuts and bolts on the struts and beam clamps.

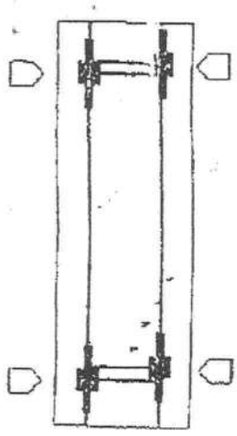
Installation of Lateral System *(Figure 3)*

1. Assemble lateral strut by sliding smaller (1-1/2") tube into the larger (1-3/4") tube. Holes should be on the sides of the larger tube and the "flag" up on the smaller tube.
2. Attach the end of the larger tube to the bracket mounted in the center of the pad, using the grade 5, 1/2" x 2-1/2" bolt/nut provided.
3. Attach the flag end of the smaller tube to the opposite I-beam using the "J" bolt over the top of the I-beam with the nut & washer provided. *(Figure 4)*
4. Install a minimum of four(1/4"x3/4") self-tapping screws into the holes provided in the lateral strut so that the two tubes are connected together. *(Figure 1)*

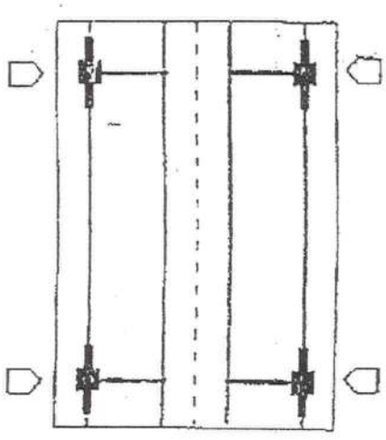


Xi Longitudinal System — Xi Lateral Strut — Stabilizer Plate & Diagonal Frame Tie

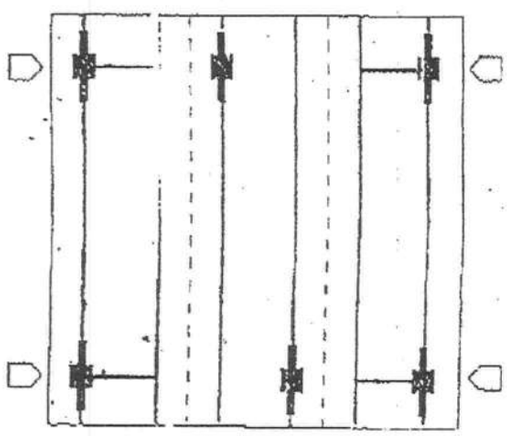
Homes Up To 52'



Single
Up to 16' Width
4 Combo Systems

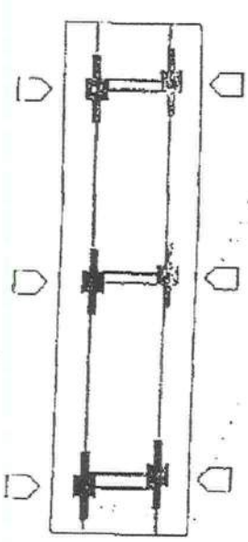


Double Section
Up to 32' Width
4 Combo Systems

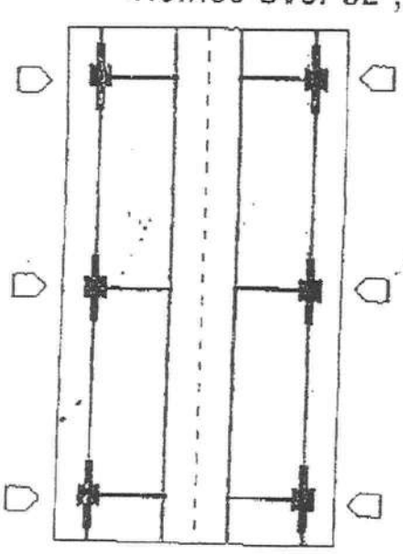


Triple Section or "Tag"
Up to 48' Width
4 Combo Systems
2 Additional Longitudinal Xi Tiers

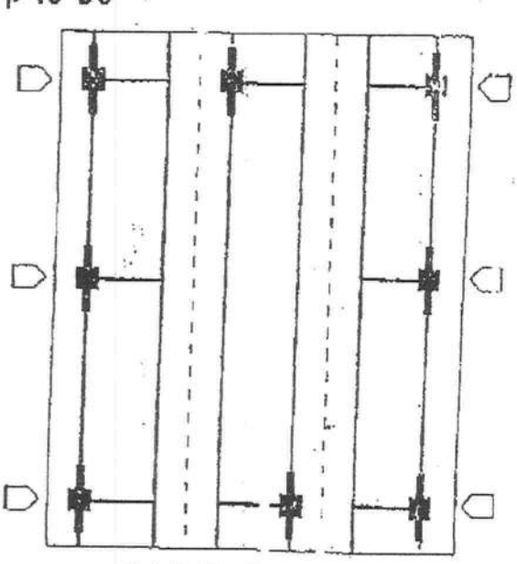
Homes Over 52', up to 80'



Single
Up to 16' Width
6 Combo Systems



Double Section
Up to 32' Width
6 Combo Systems



Triple Section or "Tag"
Up to 48' Width
8 Combo Systems

Note: 5/12 roof pitch home requires 2 additional systems.
6 lateral systems up to 52', 8 lateral systems up to 80'

TIE DOWN ENGINEERING • 5901 Wheaton Drive • Atlanta GA, 30336
www.tiedown.com • (404) 344-0000 • FAX (404) 349-0401

STATE OF FLORIDA
DEPARTMENT OF HEALTH

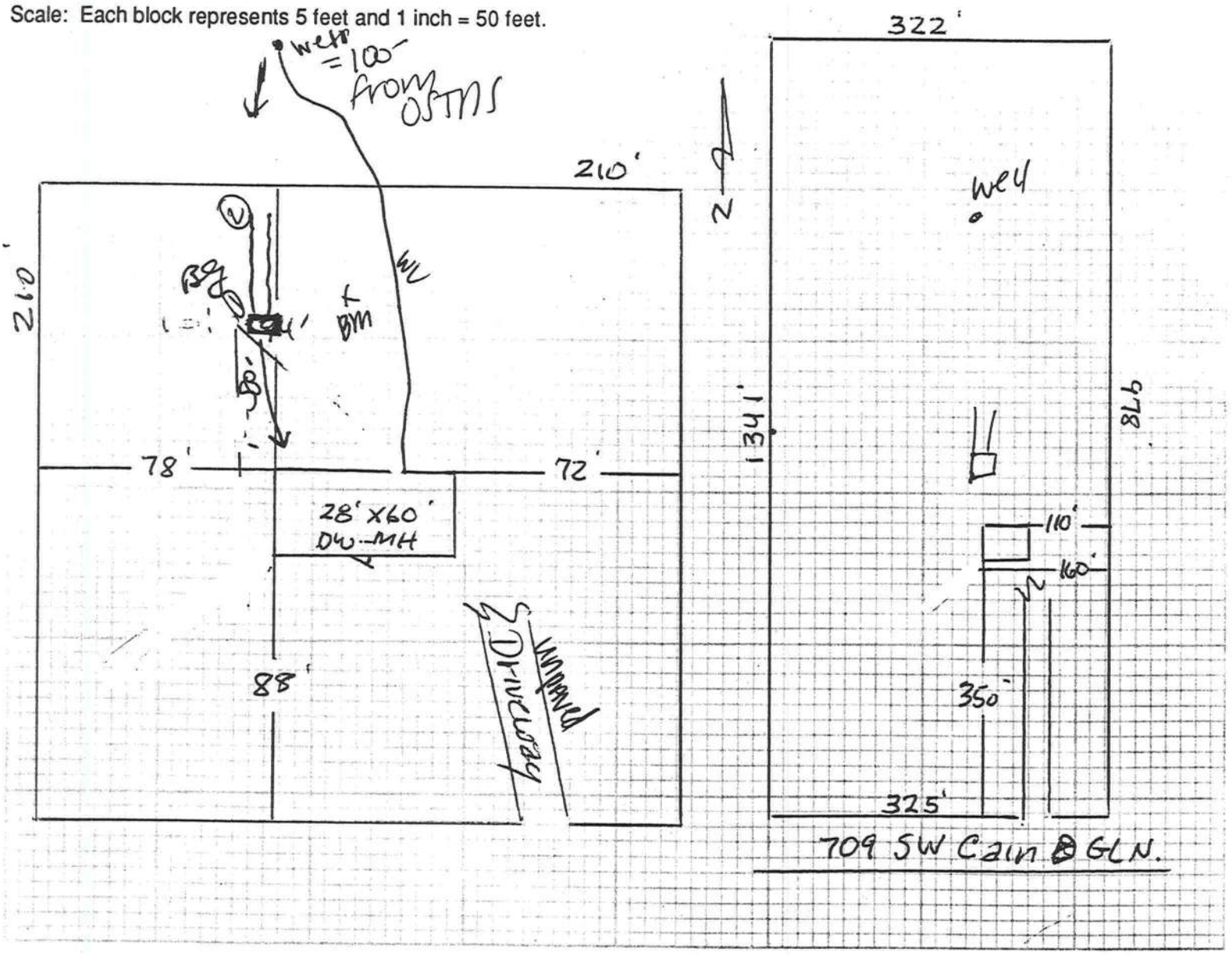
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0122-N

Green, Billy

PART II - SITE PLAN

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



Notes: MH TO SEPTIC = 60 FEET

Site Plan submitted by: Robert K. Mansell (Signature) Agent (Title)

Plan Approved X Not Approved ____ Date 2-3-05

By Sallie Mabry - ESI - COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used)
(Stock Number: 5744-002-4015-6)

FAXED 3-28-05 GH

CERTIFICATE OF

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 20-6S-16-03894-001 **Building permit No.** 000022864

Permit Holder AL PINSON

Owner of Building BILLY GREEN

Location: 709 SW CAIN GLEN, FT WHITE, FL 32038

Date: 03/29/2005

Harry Dicks

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)