

DATE 02/13/2004

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000021516

APPLICANT MELVA NORRIS PHONE 961-6419
 ADDRESS RT 22 BOX 507 LAKE CITY FL 32024
 OWNER CARL KING PHONE 497-4951
 ADDRESS 14338 SW TUSTENUGGEE AVE LAKE CITY FL 32055
 CONTRACTOR RONNIE NORRIS PHONE _____
 LOCATION OF PROPERTY TUSTENUGEE ROAD, TO END, DRIVE ON RIGHT, AFTER RED BRICK HOUSE ON RIGHT

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 Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
 NO. EX D.U. _____ FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 30-6S-17-09814-025 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 22.00

_____ IH0000049 _____
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 03-1133E BK RK
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: 1 FT ABOVE THE RDCheck # or Cash 3024**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Framing _____ Rough-in plumbing above slab and below wood floor _____
 date/app. by _____ date/app. by _____
 Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Permanent power _____ C O. Final _____ Culvert _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ Pool _____
 date/app. by _____ date/app. by _____
 Reconnection _____ Pump pole _____ Utility Pole _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H Pole _____ Travel Trailer _____ Re-roof _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 45.36 WASTE FEE \$ 98.00
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 393.36

INSPECTOR'S OFFICE *[Signature]* CLERK'S OFFICE *CN*

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.

Existing Well & Drive

*** The well affidavit, from the well driller, is required before the permit can be issued.***

This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted.

For Office Use Only

Zoning Official BLK Building Official PK 1-7-04

AP# 0401-05 Date Received 1-5-04 By LH Permit # 21516

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

Comments _____

Property ID # 30-65-17-09814-025 *(Must have a copy of the property deed

(911) 14338 SW Tuskenoggee Ave.

New Mobile Home _____ Used Mobile Home ✓ Year 83

Applicant Rennie Davis Phone # 961-6419

Address Gr. 11 Box 507 P.C. Fla. 32024

Name of Property Owner Carl King (Dad) Phone# 497-4951

Address 128 SW Beaver St.

Name of Owner of Mobile Home Travis King (son) Phone # 497-4951

Address SW Beaver St.

Relationship to Property Owner son

Current Number of Dwellings on Property - 0 -

Lot Size 7 ACRES (LOT #22) Total Acreage 22

Current Driveway connection is Existing

Is this Mobile Home Replacing an Existing Mobile Home NO

Name of Licensed Dealer/Installer Rennie Davis Phone # 961-6419

Installers Address Gr. 11 Box 507

License Number IH-0000049 Installation Decal # 216353

The Permit Worksheet (2 pages) must be submitted with this application.

Installers Affidavit and Letter of Authorization must be notarized when submitted.

PERMIT NUMBER

Installer

License #

14-0000049

Address of home being installed

LOT # 33 Twotonage Acres
128 SW Beaverfoot St.

Manufacturer

Beaville (direct)

Length x width

14 x 56

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

[Signature]

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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

17x22

Perimeter pier pad size

16x16

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

sw

sw

sw

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

FRAME TIES

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

OTHER TIES

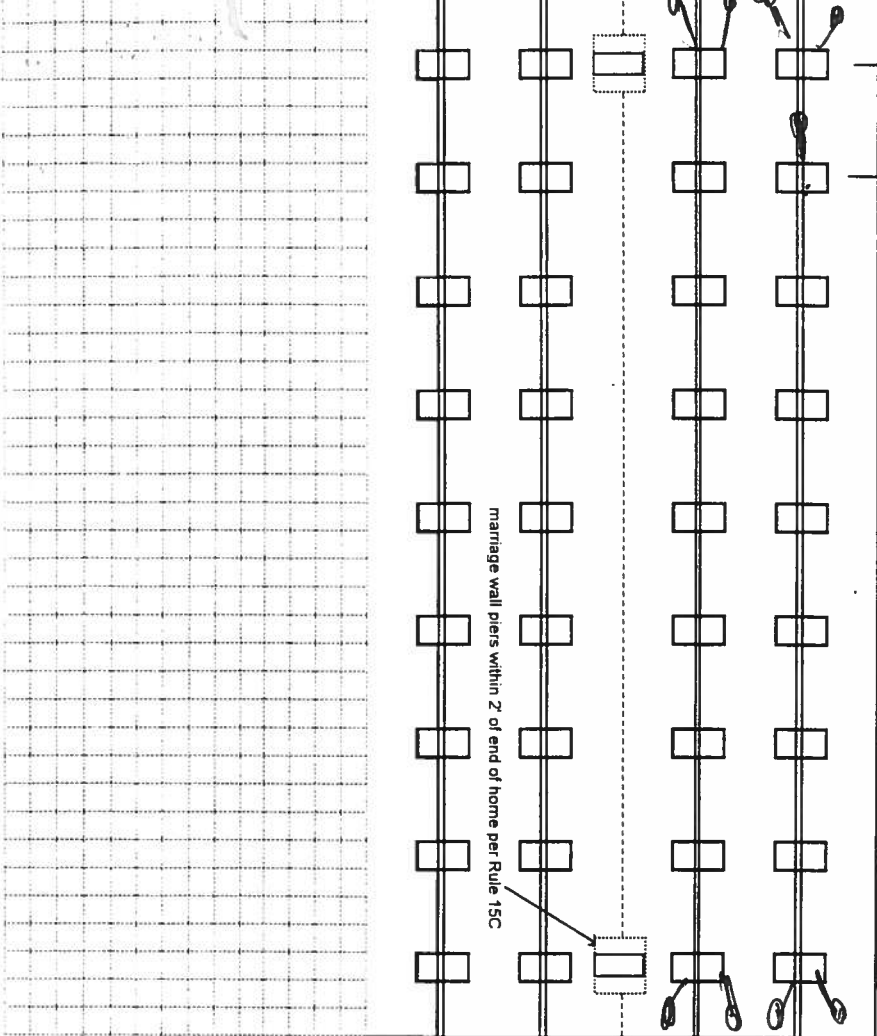
Number

Sidewall

Longitudinal

Marriage wall

Shearwall



POCKET PENETROMETER TEST

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

X 1500 X 1800 X 1900

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 1500 X 1500 X 1500

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: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 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. folding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

James A. [Signature]

Date Tested

Dec. 28-04

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. X

Plumbing

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

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

Site Preparation

Debris and organic material removed _____
Water drainage: Natural _____ Swale X Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: SW Length: _____ Spacing: _____
Walls: Type Fastener: SW Length: _____ Spacing: _____
Roof: Type Fastener: SW Length: _____ Spacing: _____
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.

Gas Ket (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

[Signature]

Installed:

Type gasket SW

Between Floors Yes _____
Between Walls Yes X
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X 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 X 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

James A. [Signature] Date 1/5/04

CAM112M01 S CamaUSA Appraisal System Columbia County
 12/22/2003 15:55 Legal Description Maintenance 8000 Land 001 *
 Year T Property Sel 2998 AG 002
 2004, R, 30-6S-17-09814-025, 77024 Bldg 001
 128 SW BEAVER ST FW 1600 Xfea 003
 HX KING CARL D & DEBBIE 89622 TOTAL B

1	LOTS, 22, & 23, TUSTENUGGEE ACRES, UNIT 1.	2
3		4
5		6
7		8
9		10
11		12
13		14
15		16
17		18
19		20
21		22
23		24
25		26
27		28

Mnt 5/30/1989 KARE

F1=Task F3=Exit F4=Prompt F10=GoTo PGUP/PGDN F24=MoreKeys

12/22/03

Travis King has permission
 to put a mobile home on
 my property.

Debra L. King

12/22/03

[Handwritten signature]





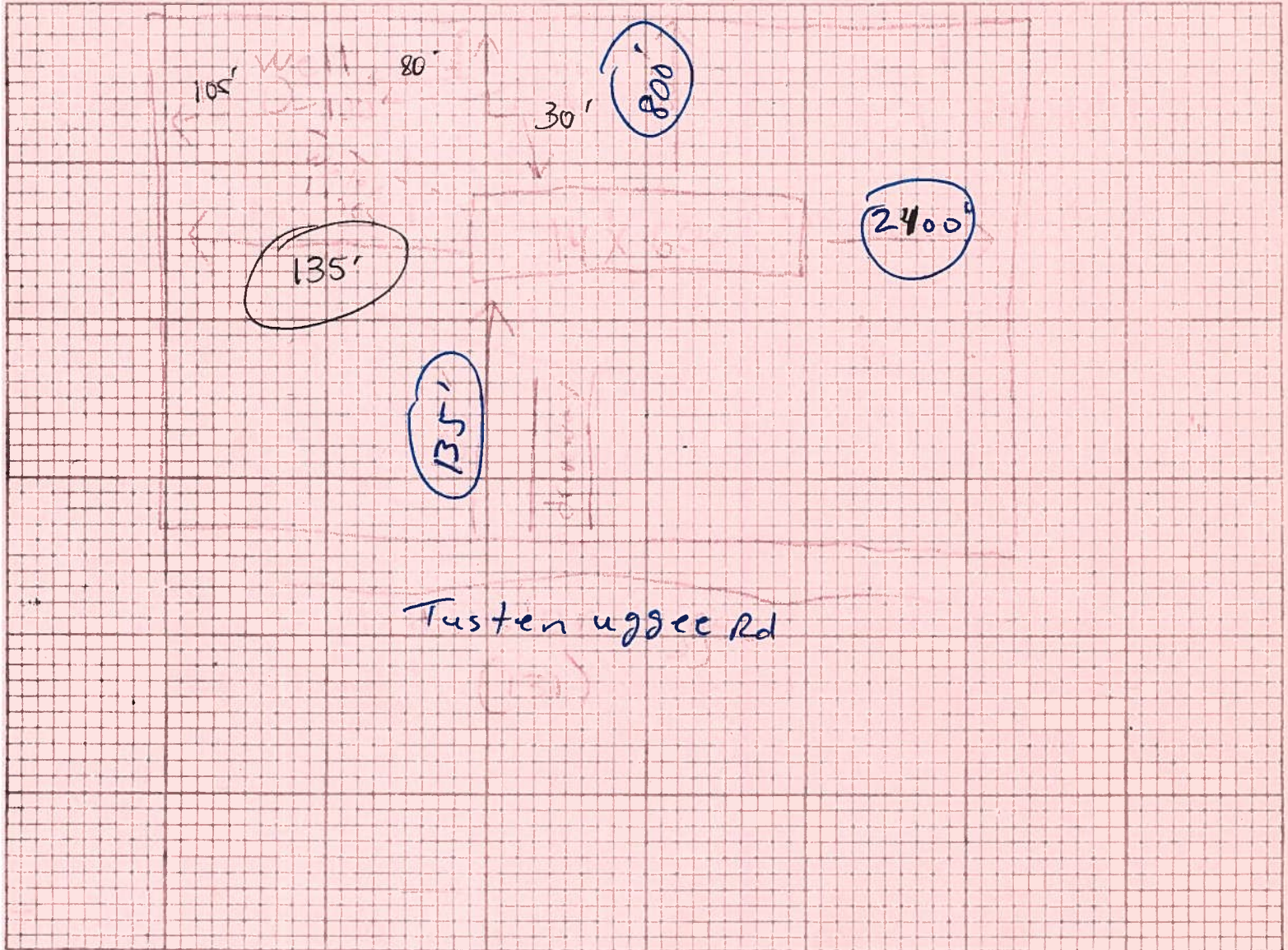
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 03-1133E

PART II - SITE PLAN

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



Notes:

Site Plan submitted by: Carl D. H. S. Signature
Plan Approved ☒ Not Approved ☐
By SALLIEA. GRADY-ESI-COLUMBIA Title OWNER
Date 12-22-03 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

0401-05

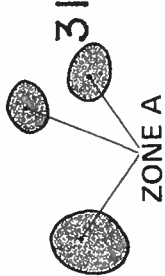
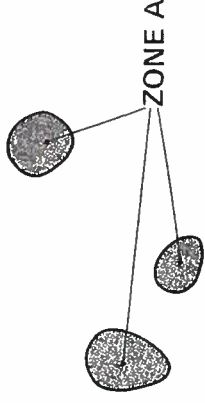
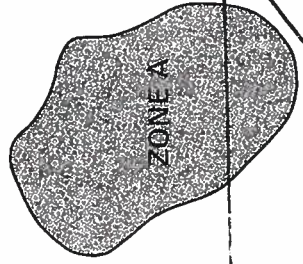


APPROXIMATE SCALE IN FEET



R 16 E
R 17 E

ROAD 30



ZONE A
ZONE A
ZONE A

BEI

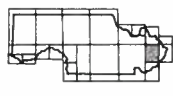
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 260 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0260 B
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nflis.

COLUMBIA COUNTY INSPECTION SHEET

DATE _____ INSPECTION TAKEN BY _____

BUILDING PERMIT # _____ CULVERT / WAIVER PERMIT # _____

WAIVER APPROVED _____ WAIVER NOT APPROVED _____

PARCEL ID # _____ ZONING _____

SETBACKS: FRONT _____ REAR _____ SIDE _____ HEIGHT _____

FLOOD ZONE _____ SEPTIC _____ NO. EXISTING D.U. _____

TYPE OF DEVELOPMENT PRE MH

SUBDIVISION (Lot/Block/Unit/Phase) _____

OWNER Carl King PHONE 492-6419

ADDRESS 128 SW Beaver St

CONTRACTOR Ronald Norris PHONE _____

LOCATION Lot 22 Tustenugget Acres

COMMENTS: _____

INSPECTION(S) REQUESTED: _____ INSPECTION DATE: _____

_____ Temp Power _____ Foundation _____ Set backs _____ Monolithic Slab
_____ Under slab rough-in plumbing _____ Slab _____ Framing
_____ Rough-in plumbing above slab and below wood floor _____ Other _____
_____ Electrical Rough-in _____ Heat and Air duct _____ Perimeter Beam (Lintel)
_____ Permanent Power _____ CO Final _____ Culvert _____ Pool _____ Reconnection
_____ M/H tie downs, blocking, electricity and plumbing _____ Utility pole
_____ Travel Trailer _____ Re-roof _____ Service Change _____ Spot check/Re-check

INSPECTORS:
APPROVED ✓ NOT APPROVED _____ BY FOP POWER CO. _____

INSPECTORS COMMENTS: _____

LETTER OF AUTHORIZATION

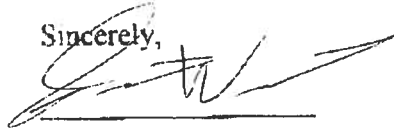
Date: 2/11/04

Columbia County Building Department
P.O. Box 1529
Lake City, FL 32056

I Rennie Jernia, License No. IH-0000049 do hereby

Authorize Debra King to pull and sign permits on my
behalf. FOR: CARL ; DEBRA KING

Sincerely,



Sworn to and subscribed before me this 11th day of FEB, 2004.

Notary Public: Gale Tedder

My commission expires: ✓

Personally Known ✓

Produced Valid Identification:

