

DATE 08/27/2007

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000026172

APPLICANT CRAIG HOWLAND PHONE 386.867.0444

ADDRESS 4190 154TH TERRACE WELLBORN FL 32094

OWNER JAMES BOONE PHONE 386.961.2735

ADDRESS 898 SW SPARROW TERRACE LAKE CITY FL 32025

CONTRACTOR RONNIE NORRIS PHONE 386.752.3871

LOCATION OF PROPERTY 90- TO C-341, TL TO STEEDLEY, TR TO SPARROW, TR AND IT'S
2/10 OF A MILE ON L @ SPLIT DRIVEWAY, TAKE A LEFT.

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING RR MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 16-4S-16-0306-000 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 20.25

IH0000049

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

EXISTING 07-0660 CFS JTH N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

Check # or Cash 2048

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 \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 44.66 WASTE FEE \$ 10.42

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 330.08

INSPECTORS OFFICE CLERKS OFFICE

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.

8.22.07 AS PER CRAIG: BRIAN K. IS OWNER & THIS APPLICANT

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06)

Zoning Official afg 8/23/07

Building Official OKTH 9-22-07

AP# 070851

Date Received 8/22

By JW

Permit # 26172

Flood Zone X Development Permit N/A Zoning RR Land Use Plan Map Category RVL D

Comments _____

FEMA Map# _____ Elevation 6 Finished Floor _____ River _____ In Floodway _____

☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ EH Release ☒ Well letter ☒ Existing well

☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from installer

☒ State Road Access ☐ Parent Parcel # _____ ☐ STUP-MH _____

2048

Property ID # 22-45-16-03-086-000 Subdivision _____

New Mobile Home _____ Used Mobile Home Amer Year 1991

Applicant Craig Howland Phone # 386-867-0444

Address 4120 154th Terr, Wellborn, FL 32094

Name of Property Owner James Boone Phone # 386-961-2735

911 Address 898 Sparrow Terr, Lake City, FL 32055

Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

Name of Owner of Mobile Home James Boone or Sherry Font Phone # 386-961-2735

Address 182 SW Grouse Pl, Lake City, FL 32025

Relationship to Property Owner Same

Current Number of Dwellings on Property ONE

Lot Size 665' x 1326' Total Acreage 20.25

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 90W) To Sisters Wellcome. Turn (L)
Sisters Wellcome to SW Steedley Dr. Turn (R)
Steedley Dr to Sparrow Terr. Turn (R)
Split driveway. Take (L) side

Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-752-3871

Installers Address 1004 SW Charles Terr, Lake City, FL

License Number TH0000049 Installation Decal # 289954

JW LEFT MESSAGE 8.23.07 for CRAIG to call.

AFFIDAVIT

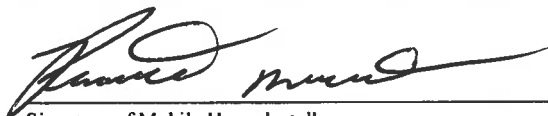
I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer Name: James Boone

Property ID: Sec: 22 Twp: 4S Rge: 16 Tax Parcel No: 03086-000

Lot: _____ Block: _____ Subdivision: _____

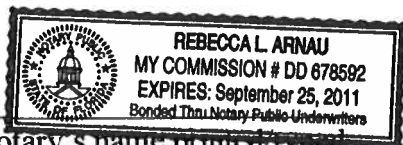
Moible Home Year/Make: 1991 American Size: 60' x 24'



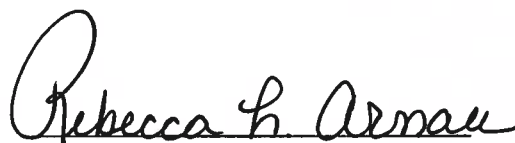
Signature of Mobile Home Installer

Sworn to and subscribed before me this 22 day of August, 20 07

By Ronnie Norris



Notary's name printed/typed



Notary Public, State of Florida

Commission No. DD 678592

Personally Known: ✓

Id Produced (type) _____

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home Installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.00.

I, Ronnie Norris, license number IH 0000049
Please Print

Do hereby state that the installation of the manufactured home for:

James Boone at 898 Sparrow Terr, Lake City FL
Applicant 911 Address

will be done under my supervision.

[Signature]
Signature

Sworn to and subscribed before me this 22 day of August,
2007.

Notary Public Rebecca L. Arnaud
Signature

My Commission Expires:



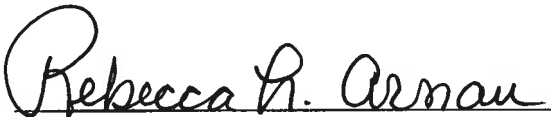
LETTER OF AUTHORIZATION TO PULL PERMITS

I, RONNIE NORRIS, DO HEREBY GRANT
CRAIG HOWLAND, AUTHORIZATION TO PULL THE NECESSARY
PERMITS REQUIRED FOR THE DELIVERY AND SET OF A MANUFACTURED
HOME IN COLUMBIA COUNTY, FLORIDA.


Signature

THIS FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS
22 DAY OF August, 2007, BY _____
Ronnie Norris, WHO IS PERSONALLY KNOWN TO ME.

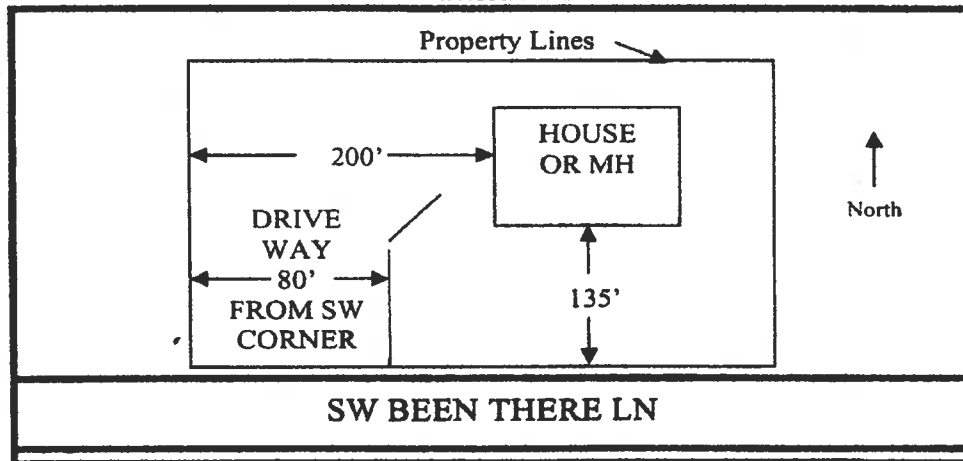
STATE OF FLORIDA
COUNTY OF Columbia


NOTARY PUBLIC

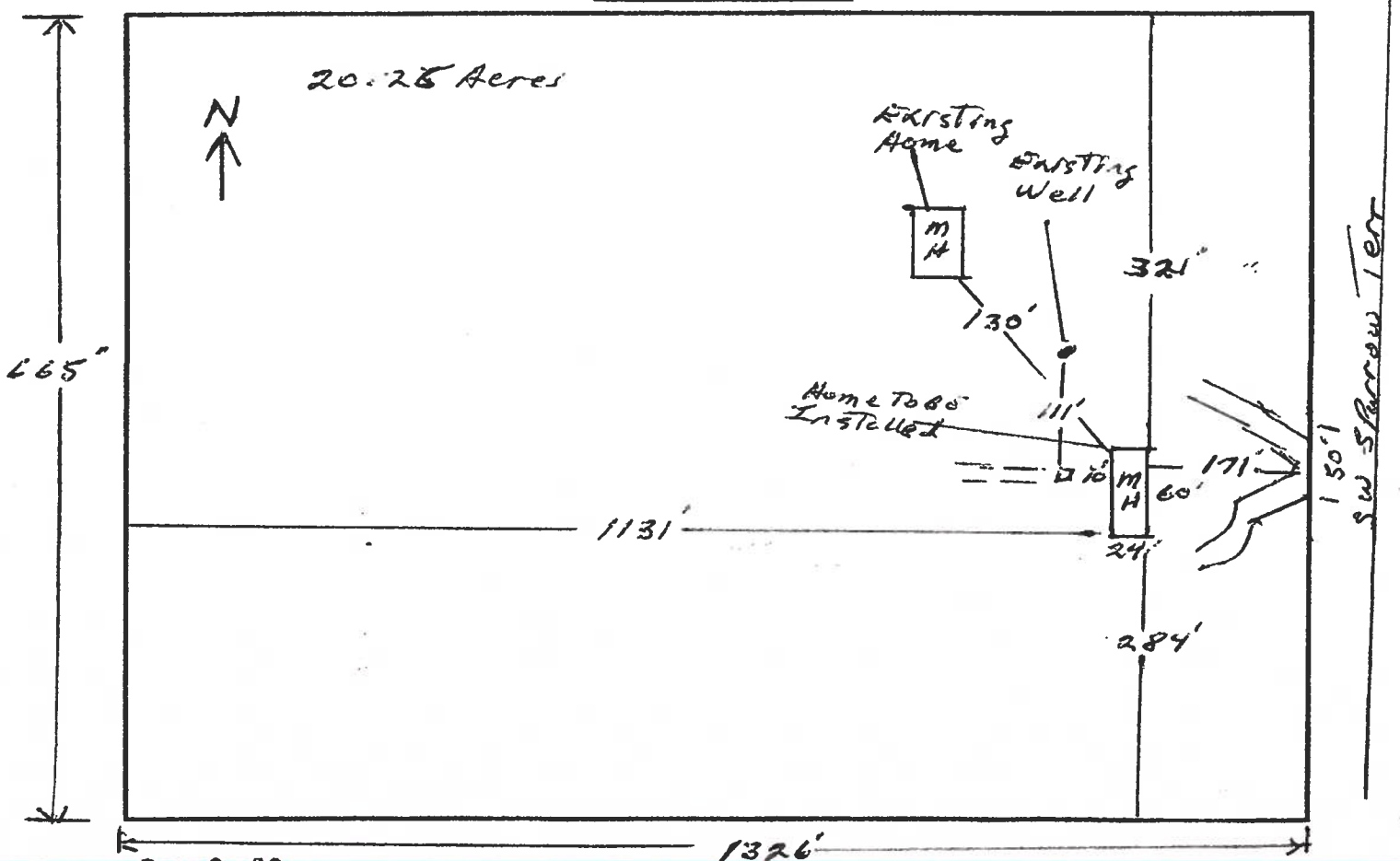


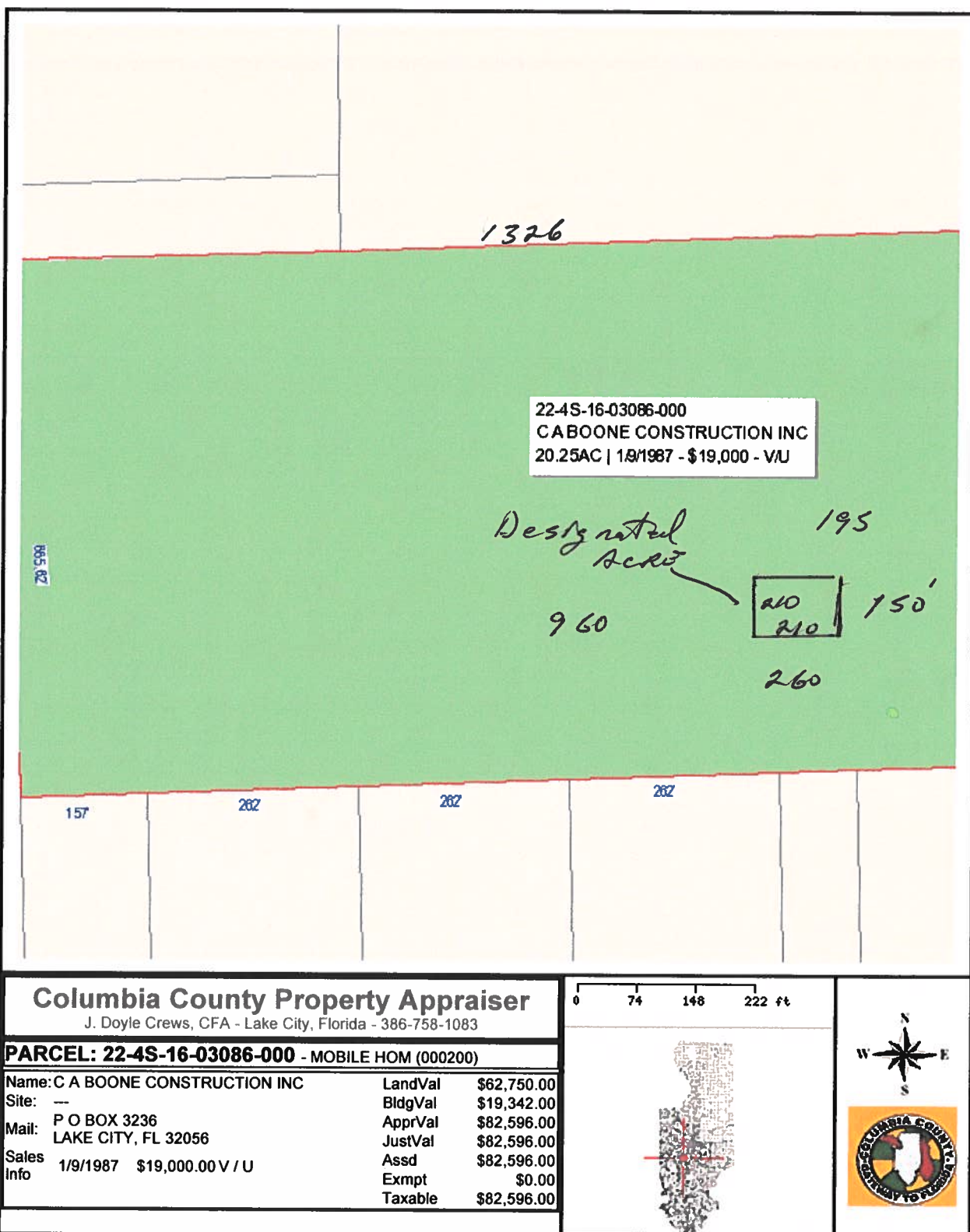
1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:





This information, GIS Map Updated: 8/2/2007, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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 1500 x 1500

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 285 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. 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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

Plumbing

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

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: Length: 6" Spacing: 24"
Walls: Type Fastener: Metal Length: 16" Spacing: 16"
Roof: Type Fastener: Metal Length: 10" Spacing: 24"
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

Type gasket Foam

Installed:
Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
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

PERMIT NUMBER

PERMIT WORKSHEET

page 1 of 2

Installer

Rennie Morris

License #

240000049

Address of home being installed

898 Sparrow Ter
Lake City, TN

Manufacturer

American

Length x width

60' x 24'

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

AM

Typical pier spacing

2'

lateral

longitudinal

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

Marriage wall piers within 2' of end of home per Rule 15C

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 #

289954

Triple/Quad

☐

Serial #

GMHGA102914532AR

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (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

17x28

Perimeter pier pad size

16x16

Other pier pad sizes (required by the mfg.)

16x16

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

8'05" more

Pier pad size

17x28

4

16x16

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTI

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
21 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

22

4

4

4

WARRANTY DEED
INDIVID. TO INDIVID.

This Warranty Deed Made the 9th day of January A. D. 19 87 by
DENVER DICKS and LAVERNE J. DICKS, his wife
hereinafter called the grantor, to

BK 0614 PG 0296
OFFICIAL RECORDS

✓ C. A. BOONE CONSTRUCTION INC.
whose postoffice address is Route 9, Box 1280, Lake City, Florida 32055
hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

TOWNSHIP 4 SOUTH, RANGE 16 EAST

Section 22: The North 665.62 feet of the South 1497.69 feet of the E $\frac{1}{2}$ of NE $\frac{1}{4}$ of Section 22, Township 4 South, Range 16 East, Columbia County, Florida, containing 20.25 acres, more or less.

DOCUMENTARY STAMP 95.00
INTANGIBLE TAX 0.
MARY B. CHILDS, CLERK OF
COURTS, COLUMBIA COUNTY

BY [Signature] D. &

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 85

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

[Signature] Witness
[Signature] Witness

[Signature] DENVER DICKS L.S.
[Signature] LAVERNE J. DICKS L.S.

STATE OF FLORIDA
COUNTY OF COLUMBIA }

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared

DENVER DICKS and LAVERNE J. DICKS, his wife

to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they

SPACE BELOW FOR RECORDERS USE

FILED
1987 FEB 11 AM
COLUMBIA

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 • FAX: (386) 758-1365 • Email: run_craft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 8/20/2007 DATE ISSUED: 8/21/2007

ENHANCED 9-1-1 ADDRESS:

898 SW SPARROW TER

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

22-4S-16-03086-000

Remarks:

2ND LOCATION

Address Issued By: 
Columbia County 9-1-1 Addressing / GIS Department

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

Approved Address

AUG 21 2007

911Addressing/GIS Dept

[illegible]

PRELIMINARY MOBILE HOME INSPECTION REPORT

RECEIVED _____ BY _____ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
OWNER NAME James Boone & Sherry Fant PHONE 752-0270 CELL 386-981-2735
ADDRESS 911 Sparrow Tern Lake City 32055
MOBILE HOME PARK _____ SUBDIVISION _____
TRAVELING DIRECTIONS TO MOBILE HOME Go W to Sisters Welcome Turn (L) taking Sisters Welcome
to Steelkey Dr Turn (R) Go to Sparrow Terr. Turn (R) House 3/10 mile
on (L). Split Driveway. Take (L) side
MOBILE HOME INSTALLER Ronnie Norris PHONE 386-752-3871 CELL 386-623-7716

MOBILE HOME INFORMATION

MAKE American YEAR 1991 SIZE 60' X 24' COLOR White
FEDERAL ID No. BM HQA 102914352

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

TERIOR: INSPECTION STANDARDS


or F) - P= PASS F= FAILED

_____ SMOKE DETECTOR () OPERATIONAL () MISSING
_____ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
_____ DOORS () OPERABLE () DAMAGED
_____ WALLS () SOLID () STRUCTURALLY UNSOUND
_____ WINDOWS () OPERABLE () INOPERABLE
_____ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
_____ CEILING () SOLID () HOLES () LEAKS APPARENT
_____ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
_____ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
_____ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
_____ ROOF () APPEARS SOLID () DAMAGED

STATUS:
APPROVED _____ WITH CONDITIONS: _____

NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER _____ DATE _____

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Previous on List	Next on List	Return To List	<input type="text"/>		
Events	No Name History	<input type="button" value="Entity Name Search"/>			
Detail by Entity Name					
Florida Profit Corporation					
C.A. BOONE CONSTRUCTION, INC.					
Filing Information					
Document Number	J32288				
FEI Number	592719736				
Date Filed	09/05/1986				
State	FL				
Status	ACTIVE				
Last Event	REINSTATEMENT				
Event Date Filed	04/18/1994				
Event Effective Date	NONE				
Principal Address					
400 SW SISTER WELCOME RD. LAKE CITY FL 32025					
Changed 03/02/2004					
Mailing Address					
P.O. BOX 3236 LAKE CITY FL 32056-3236					
Changed 01/13/1999					
Registered Agent Name & Address					
BOONE, JAMES F 182 SW GROUSE PLACE LAKE CITY FL 32025 US					
Name Changed: 04/18/1994					
Address Changed: 07/05/2005					
Officer/Director Detail					
Name & Address					
Title PD					
BOONE, JAMES F 182 SW GROUSE PLACE LAKE CITY FL 32025					
Title S					
FONT, SHERRY 182 SW GROUSE PLACE LAKE CITY FL 32025					
Title AS					
WRIGHT, RACHEL E P.O. BOX 3236 LAKE CITY FL 32056					
Annual Reports					
Report Year Filed Date					
2005	07/05/2005				
2006	01/25/2006				
2007	03/06/2007				
Document Images					
03/06/2007 - ANNUAL REPORT					
01/25/2006 - ANNUAL REPORT					

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STATE OF FLORIDA
DEPARTMENT OF HEALTH

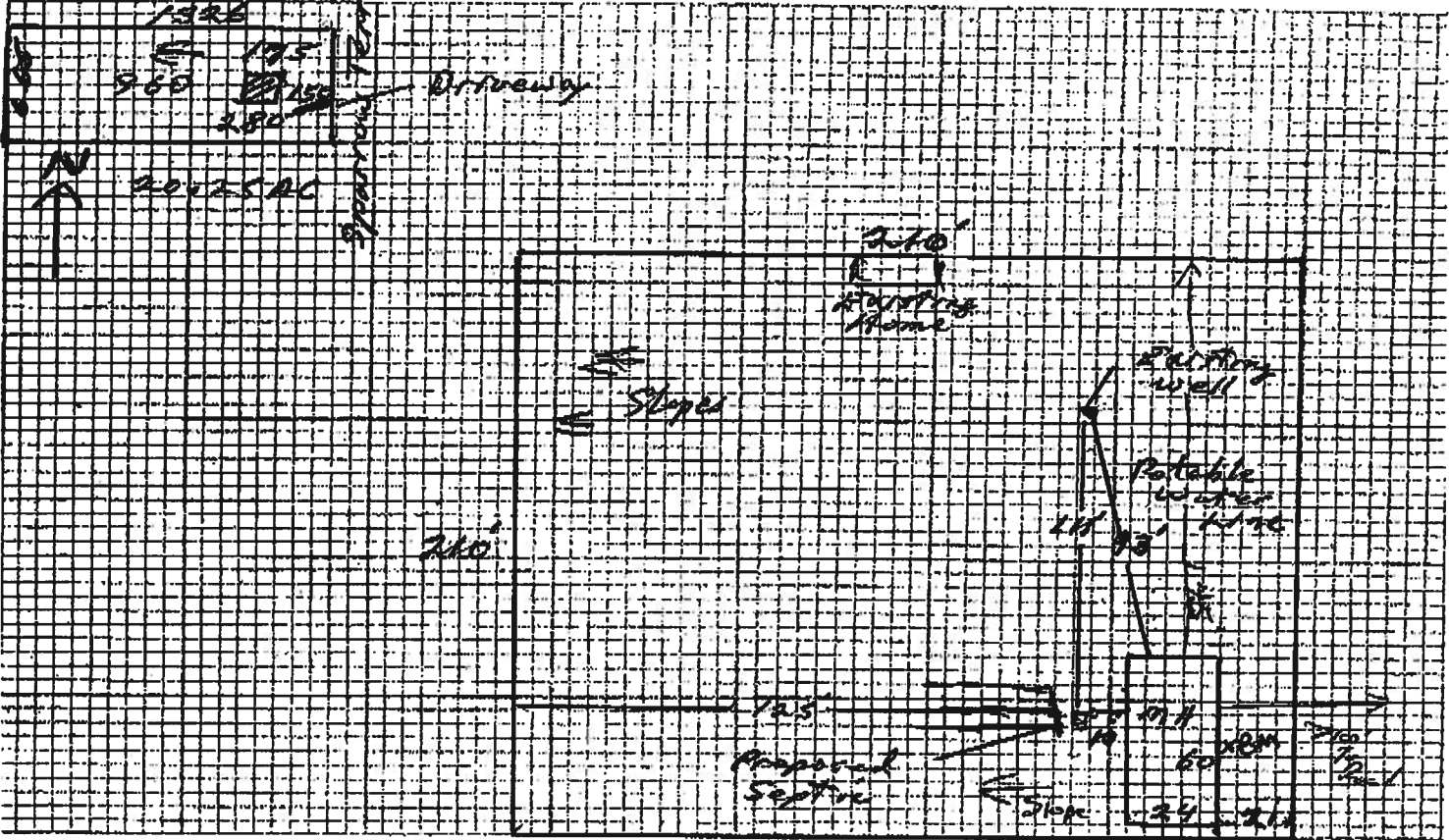
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

07-0000

PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

[Signature]
Signature

Plan Approved ☒

Not Approved ☐

[Signature]
Title

Date 8/22/07

By *[Signature]*

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT