

Parcel:
21-3S-16-02242-000 (7658)

Owner & Property Info

Result: 37 of 889

Owner	M & J SAMPSON, LLC 830 W DUVAL ST LAKE CITY, FL 32055		
Site	1668 NW TURNER Ave, LAKE CITY		
Description*	S 350 FT OF E1/2 OF E1/2 OF SE1/4 OF SE1/4 AS LIES N OF RAILROAD, (AKA PART OF LOT 1 BLOCK A RANCHETTES S/D UNREC). 305-605, 375-93, FJ 1242-1595, QC 1244-808, QC 1244-810, QC 1245-2102,2104, PB 1277-884, FJ 1284-2357, WD 1286-1910, DC 1399-1474, DC 1411-1640, WD 1455-1257 <<<less		
Area	2.48 AC	S/T/R	21-3S-16
Use Code**	SFRES/MOBILE HOME (0102)	Tax District	2

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Brent Strickland PHONE 386-365-7043

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 <u>Christopher "Todd" Sampson</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u></u> Phone #: <u>386-365-8575</u>
MECHANICAL/ A/C _____	Print Name <u>Christopher "Todd" Sampson</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u></u> Phone #: <u>386-365-8575</u>

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

PERMIT NUMBER

PERMIT WORKSHEET

page 1 of 2

Installer Brent Strickland

License # IH 1104218

Installer Mobile Phone # 386-365-7043

Address of home being installed

Manufacturer

134 NW FLORENCE AVE
Altamonte Springs, FL 32055
Fleetwood Length x width 40x24

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

B.S.

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 # 65826

Triple/Quad ☐ Serial # GHF35401038 ET

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	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 dsf	3'	4'	4'	5'	6'	7'	8'
1500 dsf	4'6"	6'	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'	8'
2500 dsf	7'6"	8'	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size

Perimeter pier pad size

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

4 ft ☒ 5 ft ☐

ANCHORS

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTHER TIES

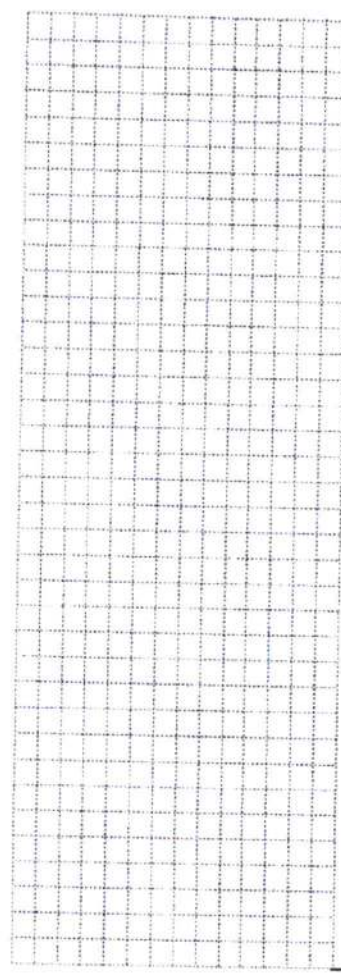
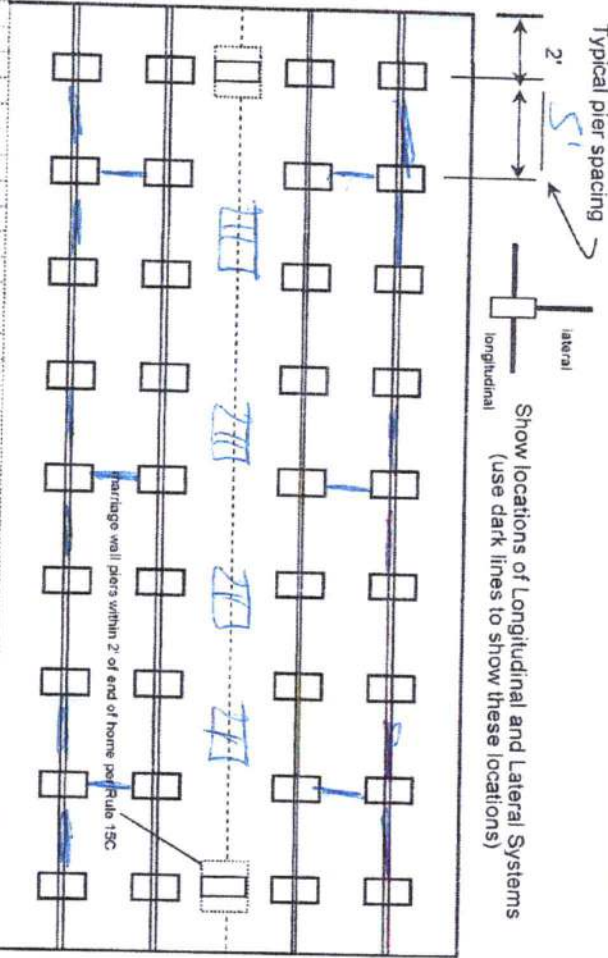
Number

Sidewall

Longitudinal

Marriage wall

Shearwall



PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ 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 290 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. 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 require anchors with 4000 lb holding capacity.

B.S. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Brent Storchland
2-23-22

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. 24

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 24

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 24

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: LAGS Length: 5'1" Spacing: 16'1"
Walls: Type Fastener: LAGS Length: 4'1" Spacing: 16'1"
Roof: Type Fastener: LAGS Length: 6'1" Spacing: 16'1"
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 B.S.

Type gasket Pg. 22

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

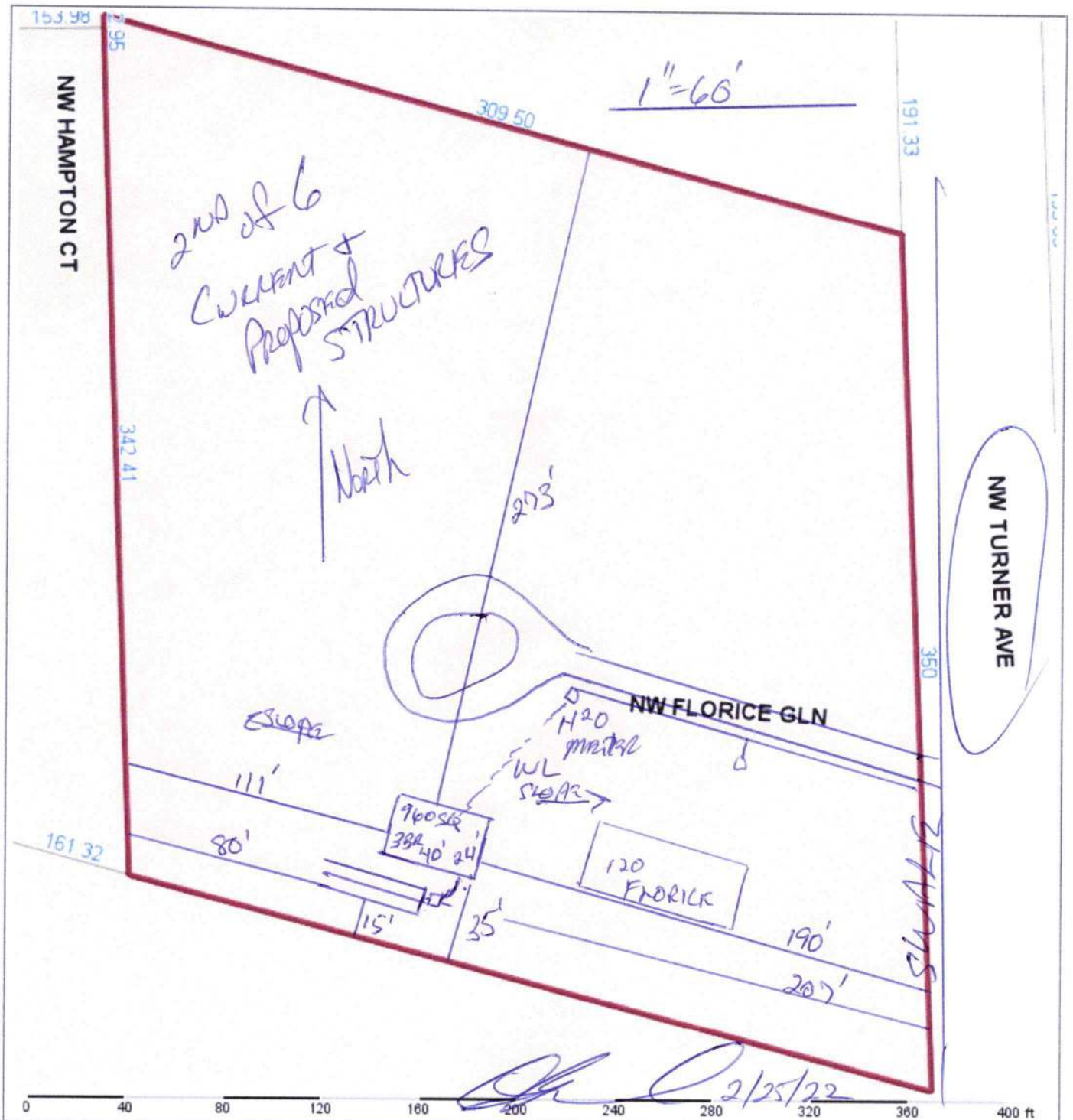
Skirting to be installed. Yes ☒ No ☐
Dryer vent installed outside of skirting. Yes ☒ N/A ☒
Range downflow vent installed outside of skirting. Yes ☒ N/A ☒
Drain lines supported at 4 foot intervals. Yes ☒
Electrical crossovers protected. Yes ☒
Other: ☐

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

Brent Storchland
2-23-22



Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 21-3S-16-02242-000 (7658) | SFRES/MOBILE HOME (0102) | 2.48 AC
S 350 FT OF E 1/2 OF E 1/2 OF SE 1/4 OF SE 1/4 AS LIES N OF RAILROAD, (AKA PART OF LOT 1 BLOCK A RANCHETTES S/D UNREC). 305-605, 375-93, FJ 1242-1595, QC

M & J SAMPSON, LLC
Owner: 830 W DUVAL ST
LAKE CITY, FL 32055
Site: 1668 NW TURNER Ave, LAKE CITY

Sales 12/3/2021 \$82,100 I (Q)
Info 3/20/2020 \$100 I (U)
12/15/2014 \$43,000 I (U)

2022 Working Values			
Mkt Lnd	\$19,840	Appraised	\$102,184
Ag Lnd	\$0	Assessed	\$102,184
Bldg	\$66,644	Exempt	\$0
XFOB	\$15,700	county:	\$102,184
Just	\$102,184	city:	\$0
		other:	\$0
		school:	\$102,184
		Taxable	

NOTES:

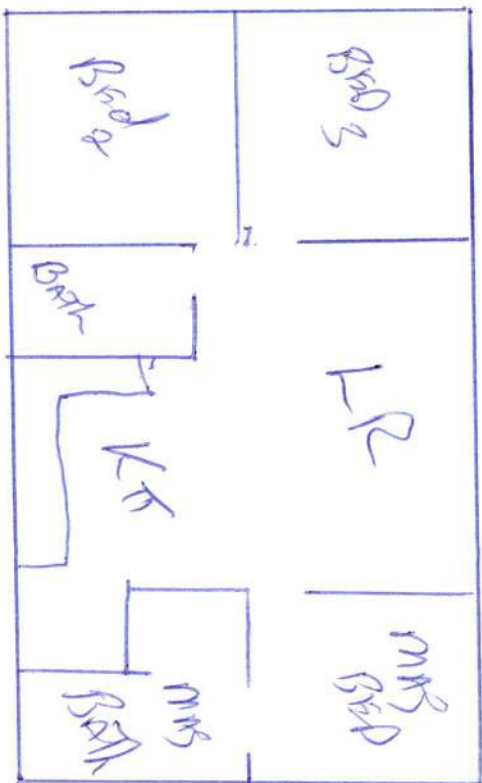


Columbia County, FL

This information 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, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com

Met Sampson
in Police
Q100 SA

40



24


2/23/22



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: **2/16/2022 1:05:05 PM**

Address: **134 NW FLORICE GLN**

City: **LAKE CITY**

State: **FL**

Zip Code **32055**

Parcel ID **21-3S-16-02242-000**

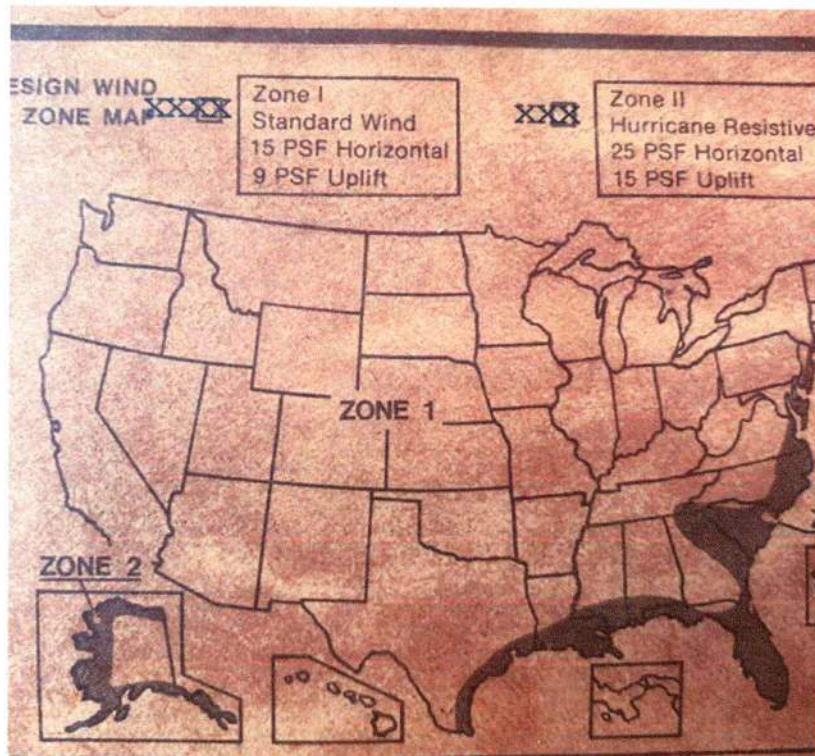
REMARKS: **This address is a verified address in the county's addressing system.**
Verification ID: faceaef5-7bcd-4043-9395-fd01b8d13435

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: **GIS Specialist**

Columbia County GIS/911 Addressing Coordinator

Columbia County
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456



Manufacturer Address
Fleetwood Homes of Georgia, Inc.
Ambrose Hwy.
P. O. Box 550
Broxton, Georgia 31519
(912) 359-2392

Beant Specialty + Design
#35
Plant Number

Date of Manufacture *8-5-88* HUD No. *GEO 538848 & GEO 538847*

Manufacturer's Serial Number and Model Unit Designation
GAFLJ35A01038ET/GAFLJ35B01038ET 3403B

Design Approval by (D.A.P.I.A.)
Radco

This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture.
(For additional information, consult owner's manual.)

The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	<i>Coleman</i>	<i>79570-856</i>

VE CERTIFICATE

Fleetwood Homes of Georgia, Inc.

Ambrose Hwy.
P. O. Box 550

Broxton, Georgia 31519
(912) 359-2392

Manufacturer Address

Planet Special + Dream
#35

Plant Number

Date of Manufacture

8-5-88

HUD No.

GEO 538848 & GEO 538847

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The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	Coleman	7956-856
For air cooling	Magic Chef	U 31FA-7
For cooking	Magic Chef	RB17FA2AE
Refrigerator	Mor-Flo	2HEPR 32 STK
Water heater		
Washer		
Clothes Dryer		
Dishwasher		
Garbage Disposal		
Fireplace	Coleman	36ECM 942/669

COMPLIANCE CERTIFICATE

STRUCTURAL DESIGN BASIS CERTIFICATE



HEATING AND COOLING DESIGN BASIS CERTIFICATE

COMFORT HEATING

This manufactured home has been thermally insulated to conform with the requirements of the federal manufactured home construction and safety standards for all seasons within climate zone I.
Heating equipment manufacturer and model (see list at left).
The above heating equipment has the capacity to maintain an average 70° F temperature in this home at outdoor temperatures of -28° F.
To maximize furnace operating economy, and to conserve energy, it is recommended that this home be installed where the outdoor winter design temperature (7° F) is not higher than 1° F below the design temperature.
The above information has been calculated assuming a maximum wind velocity of 15 mph at standard atmospheric pressure.

COMFORT COOLING

☐ Air conditioner provided at factory (Alternate I)
Air conditioner manufacturer and model (see list at left).
Certified capacity — B.T.U./hour in accordance with the appropriate air conditioning and refrigeration institute standards.
The central air conditioning system provided in this home has been sized assuming an orientation of the front (blow end) of the home facing — On this basis the system is designed to maintain an indoor temperature of 75° F when outdoor temperatures are — F dry bulb and — F wet bulb.
The temperature to which this home can be cooled will change depending upon the amount of exposure of the windows of this home to the sun's radiant heat. Therefore, the home's heat gains will vary dependent upon its orientation to the sun and any permanent shading provided. Information concerning the calculation of cooling loads at various locations, window exposures and shadings are provided in Chapter 22 of the 1985 edition of the ASHRAE Handbook of Fundamentals.
Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this home.
☐ Air conditioner not provided at factory (Alternate II)
The air distribution system of this home is suitable for the installation of central air conditioning.
The supply air distribution system installed in this home is sized for a manufactured home central air conditioning system of 44,700 B.T.U./hour (as rated capacity which are certified to accordance with the appropriate air conditioning and refrigeration institute standards, when the air conditioners of such air conditioners are rated at 0.5 inch water column static pressure or greater for the cooling air delivered to the manufactured home supply air duct system).
Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this manufactured home.
☐ Air conditioning not recommended (Alternate III)
The air distribution system of this home has not been designed in anticipation of its use with a central air conditioning system.

INFORMATION PROVIDED BY THE MANUFACTURER NECESSARY TO CALCULATE SENSIBLE HEAT GAIN

Walls (without windows and doors)	12
Ceilings and roofs of light color	10
Ceilings and roofs of dark color	10
Floors	06
Air ducts in floor	07
Air ducts in ceiling	N/A
Air ducts installed outside the home	N/A
The following are the duct areas in this home:	61.0
Air ducts in floor	
Air ducts in ceiling	38.0
Air ducts outside the home	

To determine the required capacity of equipment in books have already been used to determine a cooling load (heat gain) calculation is required. The cooling load is dependent on the location, location and the structure of the home. Centre air conditioning equipment must be selected and provide the greatest comfort when their capacity closely approximates the calculated cooling load. Each home's air conditioner should be sized in accordance with Chapter 22 of the American Society of Heating, Refrigerating and Air Conditioning Engineers' ASHRAE Handbook of Fundamentals, under the location and conditions are given.

OUTDOOR WINTER DESIGN TEMP. ZONE



REV 3/8

CNTY# AGY# SUB# RPT#

29 1 CNC 5847

AUDIT # 154985943



STATE OF FLORIDA
APPLICATION FOR VEHICLE/VESSEL
CERTIFICATE OF TITLE

L# 2347300
T# 1609021577
B# 1420592
S# 89947477

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR. MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR	WT/LENGTH	GVW/LOC
46486740	GAFLJ35A01038ET	1989	EAGL	HS	UNK	40'	

DATE OF ISSUE MO DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	FUEL	VESSEL TYPE	WATER	FL NUMBER	AUTH DESTRUCTION
02 25 22	TRT	PRIVATE							

Applicant/Owner's Name & Address
M&J SAMPSON LLC
830 W DUVAL ST
LAKE CITY, FL 32055-3808

BIRTHDATE
SEX MO DAY YEAR Y N ALIEN CNTY RES #
X 29

1st OWNER FL/DL# OR F.E.I.D.# 2nd OWNER FL/DL# OR UNIT #

853802997-01

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
8.25	77.50	70.00	155.75

Action Requested: TRANSFER TITLE

Brands:

PREV STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER
FL	02/23/2022		XX	

ODOMETER
DECLARATION
CERTIFICATION
☐

LIEN INFORMATION

DATE OF LIEN	RECEIVED DATE	FEID # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #

NAME OF FIRST LIENHOLDER

ADDRESS

SALVAGE TYPE

SELLER INFORMATION

NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER

ADDRESS

DEALER LICENSE NO.

CONSUMER OR SALES TAX EXEMPTION #

SALES TAX AND USE REPORT

TRANSFER OF TITLE ☐ PURCHASER HOLDS VALID
IS EXEMPT FROM EXEMPTION CERTIFICATE
FLORIDA SALES OR ☐ VEHICLE / VESSEL WILL BE
USE TAX FOR THE USED EXCLUSIVELY FOR RENTAL
REASON(S) CHECKED ☐ OTHER

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY
UNPAID BALANCE DUE SELLER, BANK OR OTHERS \$ 1,000.00

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES \$ 70.00

☐ SELLING PRICE VERIFIED

APPLICANT CERTIFICATION

I/WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.

I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.

I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.

I/WE HEREBY CERTIFY THAT I/WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I/WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of Applicant/Owner

Signature of Applicant/Co-Owner

HSMV 82041 REVISED 02/06

SCAN CODE

MVT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES
THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.



COLUMBIA COUNTY BUILDING DEPARTMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

Application # _____

\$50.00 Fee Paid _____

DATE RECEIVED _____ BY _____ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME M & J Sampson LLC PHONE _____ CELL 386-365-8575

ADDRESS 134 NW Florice Glen, Lake City, FL, 32055

MOBILE HOME PARK Yes SUBDIVISION Ranchettes, Lo1, Blk A

DRIVING DIRECTIONS TO MOBILE HOME From Fort White, 1 mile east on CR 18 to access on right, across from private airstrip

MOBILE HOME INSTALLER Brent Strickland PHONE _____ CELL 386-365-7043

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1988 SIZE 24 x 40 COLOR _____

SERIAL No. GAFLJ35A01038ET GAFLJ35B01038ET

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

INSPECTION STANDARDS

INTERIOR:

(P 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

EXTERIOR:

_____ 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 RE-INSPECTION FOR FOLLOWING CONDITIONS _____

BUILDING INSPECTOR'S SIGNATURE _____ ID NUMBER _____ DATE _____

SW 1/4 CT

SW COUNTY ROAD 18

SW 1/4 CT

[Parcel Details](#) (click for more...)

34-6S-16-04063-010

LISAS LAND LLC

6064 SW COUNTY ROAD 18

34/6S/16 (IMPROVED AG) 148.52AC

Txbl: \$73,943.00 Sale: 10/18/2017 - \$65,000 - V/Q

