

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

**For Office Use Only** (Revised 7-1-15) Zoning Official MA Building Official MA  
 AP# 1907-39 Date Received 7-10-19 By MG Permit # 38381  
 Flood Zone X Development Permit \_\_\_\_\_ Zoning RM-2 Land Use Plan Map Category RD  
 Comments Replacing existing mobile home - grandfathered in  
floor one foot above the road  
 FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_  
☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0512 ☐ Well letter OR  
☒ Existing well ☐ Land Owner Affidavit ☒ Replace existing ☐ FW Comp. letter ☒ App Fee Paid  
☐ DOT Approval ☐ Parent Parcel # \_\_\_\_\_ ☐ STUP-MH \_\_\_\_\_ ☒ 911 App  
☐ Ellisville Water Sys ☒ Assessment Paid ☐ Out County ☒ In County ☒ Sub VF Form  
7-17-19 OWNER

Property ID # 17-35-17-04996-000 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

- New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 24x40 Year 1999
- Applicant JAY DAVIS Phone # 386 961-1482
- Address PO Box 1508 Lake City, FL 32056
- Name of Property Owner JAY DAVIS Phone # 386 961-1482
- 911 Address 277 NW Clayton Way Lake City, FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home JAY DAVIS Phone # 386-961-1482  
 Address 217 NW Clayton Way Lake City, FL 32055
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 1
- Lot Size \_\_\_\_\_ Total Acreage .60
- 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 yes
- Driving Directions to the Property 441 N (L) FANIER (R) CLAYTON  
2nd on (R)
- Name of Licensed Dealer/Installer Robert Sheppard ☒ MG Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
- License Number IH1025386 Installation Decal # 47986

LA-Spoke to Jay 7-16-19

\$375.00

32913(2015) Replacement permit  
for other m/h on property

# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

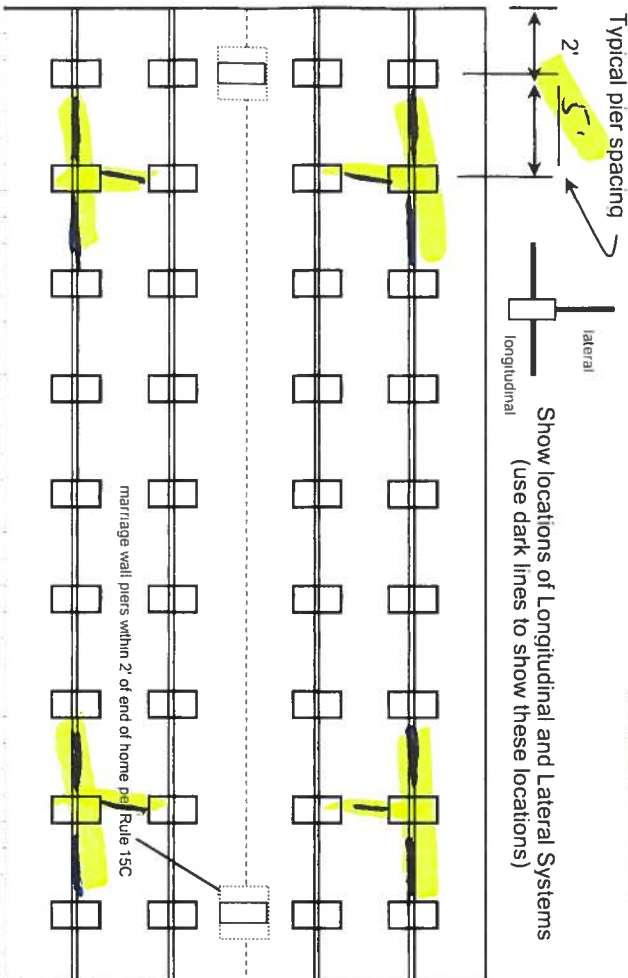
Installer: Robert Shupard License # EH025386

Address of home being installed: 217 ALA Caydon WAY

Manufacturer: KING Length x width: 24x40

**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: RS



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 # 47986

Triple/Quad ☐ Serial # NB9344 A9R

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (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: 17x25  
Perimeter pier pad size: 16x16  
Other pier pad sizes (required by the mfg.): 17x25

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: \_\_\_\_\_

ANCHORS  
4 ft ☒ 5 ft ☐

FRAME TIES

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

OTHER TIES

Longitudinal Stabilizing Device (LSD)  
Manufacturer: \_\_\_\_\_  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer: Livingston

Sidewall 26 Number  
Longitudinal 4  
Marriage wall 4  
Shearwall 2

# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil \_\_\_\_\_ without testing.

X 1500 X 1600 X 1600

### 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 1600

## TORQUE PROBE TEST

The results of the torque probe test is 295 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 requires anchors with 4000 lb holding capacity.

RS Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

7-9-19

## 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. 29

## 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 ☒ Swale ☐ Pad ☒ Other ☐

### Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16  
Walls: Type Fastener: screws Length: 4 Spacing: 16  
Roof: Type Fastener: lags Length: 6 Spacing: 16

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 RS

Type gasket foam Installed: Between Floors Yes ☒  
Pg. 22 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

Robert Shepard

Date 7-9-19



# Columbia County, FLA - Building & Zoning Property Map

## Parcels

2018Aerials

## 2018 Flood Zones

■ 0.2 PCT ANNUAL CHANCE

**A**

**AE**

 AH

LidarElevations



Parcel No: 17-3S-17-04996-000

Owner: DAVIS JAY S

Subdivision:

Lot:

Acres: 0.6014748

Deed Acres:

**District:** District 1 Ronald Williams

**Future Land Uses: Residential - Low**

**Flood Zones:**

Official Zoning Atlas: RSF/MH-2

## Roads

## Roads

others

 Dirt

 Interstate

 **Main**

Other

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

**Columbia County Property Appraiser**

Jeff Hampton

**2018 Tax Roll Year**

updated: 6/25/2019

Parcel: &lt;&lt; 17-3S-17-04996-000 &gt;&gt;

Aerial Viewer Pictometry Google Maps

**Owner & Property Info**

Result: 1 of 1

Owner	DAVIS JAY S P O BOX 1508 LAKE CITY, FL 32056		
Site	191 FARLEY PL, LAKE CITY		
Description*	COMM SE COR OF SW1/4 OF NW1/4, RUN N ALONG W R/W OF US-441 A DIST OF 370 FT, RUN W ALONG N R/W OF GRADED RD 406 FT FOR POB, RUN N 200 FT, W 56 FT, N 50 FT, W 100 FT, S 150 FT, E 100 FT, S 100 FT, E 56 FT TO POB. ORB 464-490, 779-043, 786-525 THRU 527,		
Area	0.6 AC	S/T/R	17-3S-17
Use Code**	MOBILE HOM (000202)	Tax District	2

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

**Property & Assessment Values**

2018 Certified Values		2019 Working Values	
Mkt Land (2)	\$8,523	Mkt Land (2)	\$9,023
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (2)	\$10,092	Building (2)	\$11,194
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$18,615	Just	\$20,217
Class	\$0	Class	\$0
Appraised	\$18,615	Appraised	\$20,217
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$18,615	Assessed	\$20,217
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$15,931 city:\$15,931 other:\$15,931 school:\$18,615	Total Taxable	county:\$17,524 city:\$17,524 other:\$17,524 school:\$20,217

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
6/28/1994	\$1,200	792/1142	WD	V	U	34
2/10/1994	\$3,000	786/0526	WD	V	U	12
2/10/1994	\$3,000	786/0527	WD	V	U	12
8/8/1993	\$1,000	786/0525	WD	V	U	12

**▼ Building Characteristics**

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1982	858	954	\$5,800
Sketch	3	MOBILE HME (000800)	1990	858	922	\$5,394

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.



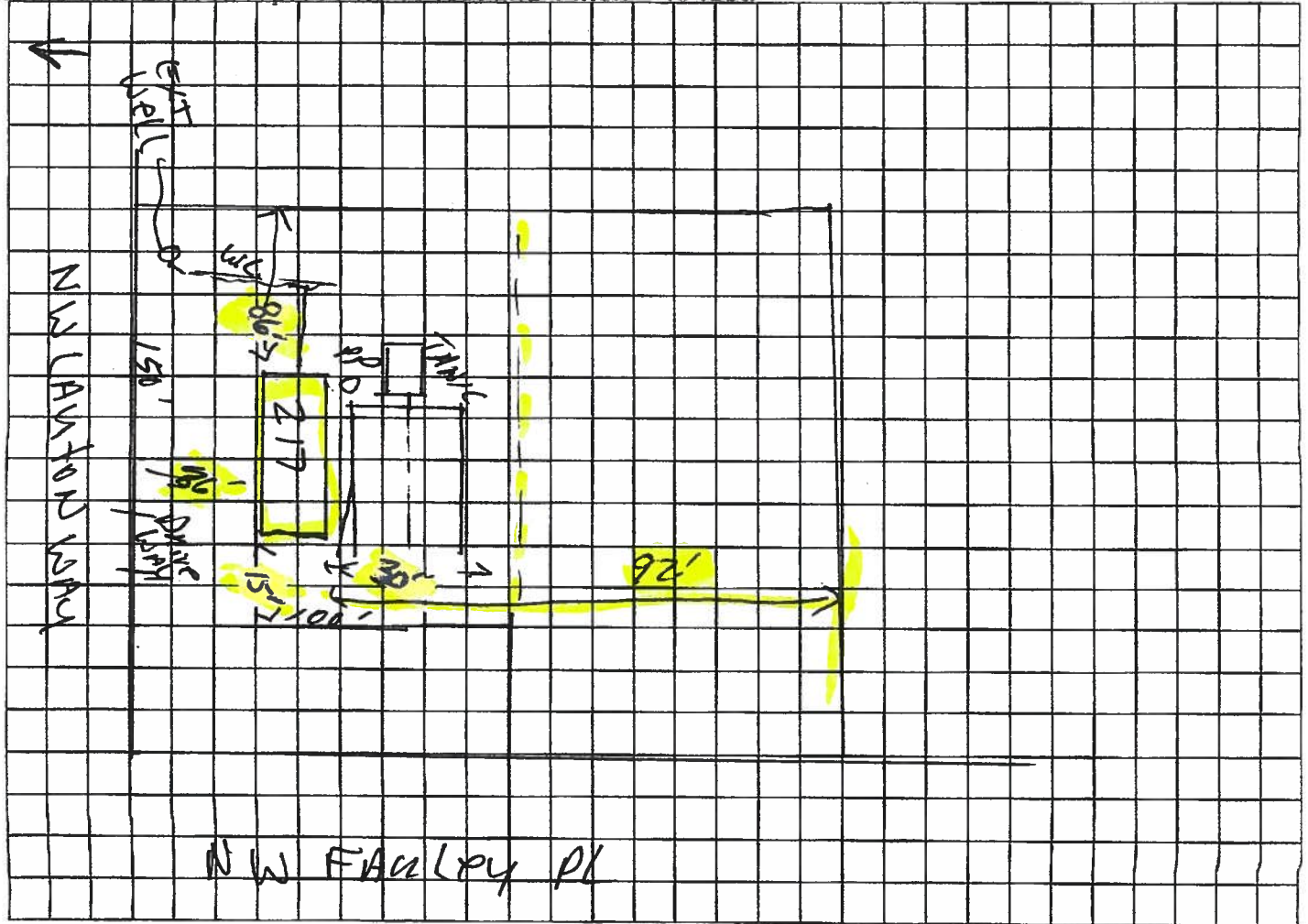
# Site Plan

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19 0512

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: REPLACING M.H.

Site Plan submitted by: \_\_\_\_\_

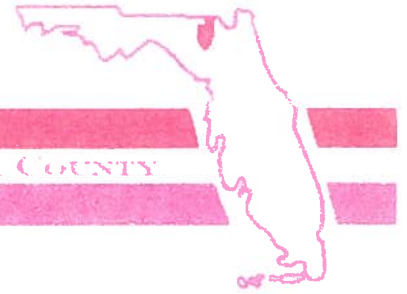
Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By \_\_\_\_\_ County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

District No. 1 - Ronald W. Wozniak  
District No. 2 - Ronalee Ford  
District No. 3 - Buckle Nash  
District No. 4 - Toby Witt  
District No. 5 - Tim Murphy

**BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY**



**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:	<b>6/19/2019 3:01:05 PM</b>
Address:	<b>217 NW LAYTON Way</b>
City:	<b>LAKE CITY</b>
State:	<b>FL</b>
Zip Code	<b>32055</b>
Parcel ID	<b>04996-000</b>

REMARKS: Address Verification.

**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: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY  
911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 759-1125  
Email: [gis@columbiacountyfla.com](mailto:gis@columbiacountyfla.com)

OLD permit # 18-0180



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 17-0512  
DATE PAID: 1/5/19  
FEE PAID: 200.00  
RECEIPT #: 1702363

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative  
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: JAY DAVIS

AGENT: \_\_\_\_\_ TELEPHONE: 386961-1482

MAILING ADDRESS: PO Box 1508 LCFI 32056

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 17-35-17-04996-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 0.600 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☒ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y / ☐ N DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: \_\_\_\_\_

DIRECTIONS TO PROPERTY: YVIN @ FAIRLEY @ Cayton zed on @

(217 NW Cayton way)

BUILDING INFORMATION ☐ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>SF</u>	<u>3</u>	<u>900</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: [Signature] DATE: 2-1-19



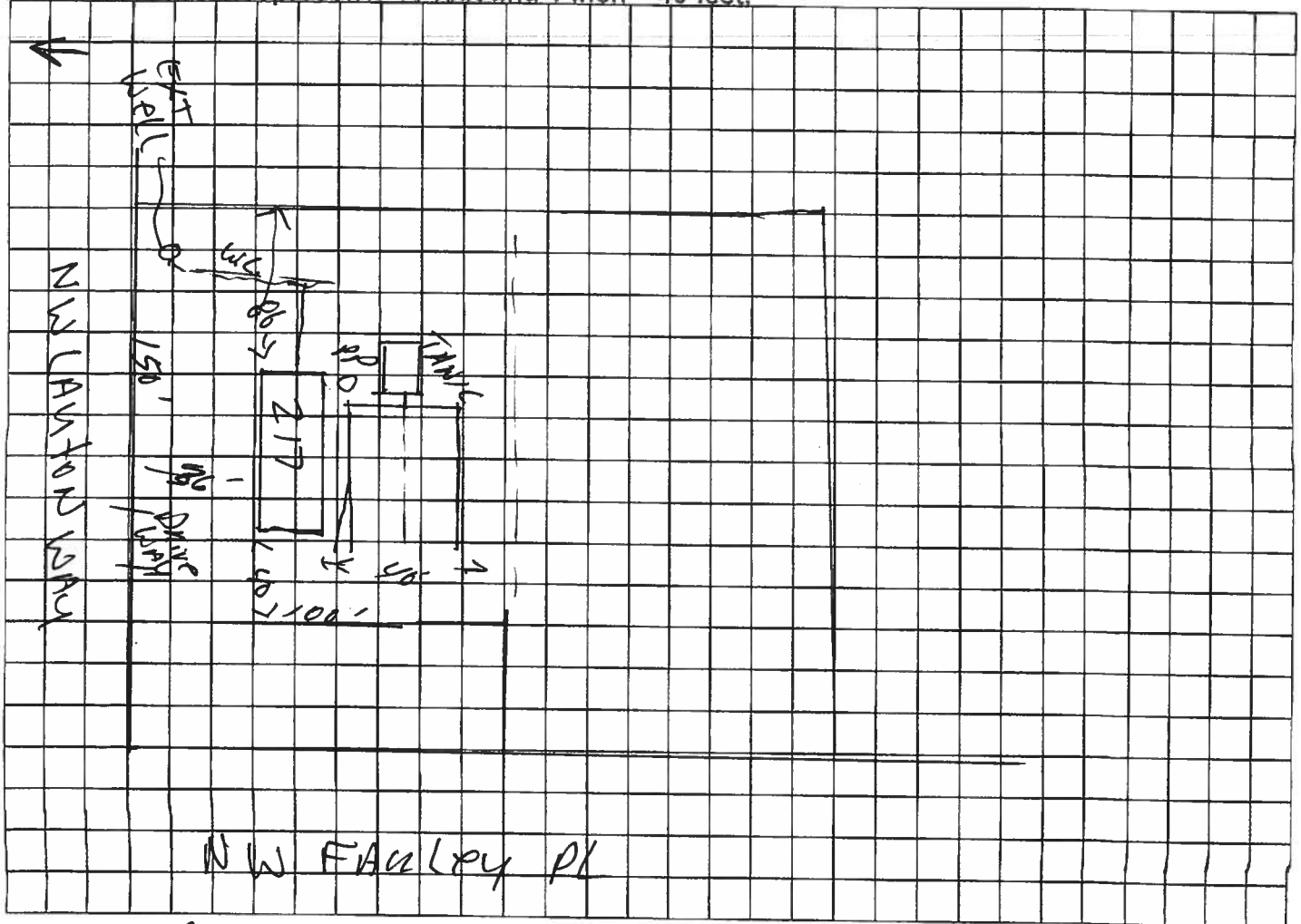
STATE OF FLORIDA  
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19-0512

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: REPLACING M.H.

Site Plan submitted by:

Plan Approved ☒

By

Not Approved ☐

EST

Columbia

Owner 7/5/19

Date 7/10/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1907-39 CONTRACTOR Robert Sheppard PHONE 386-623-2203

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.*

<b>ELECTRICAL</b>	<div>Print Name <u>JAY DAVIS</u> Signature <u>Jay Davis</u></div> <div>License #: <u>owner</u> Phone #: _____</div> <div>Qualifier Form Attached <input type="checkbox"/></div>
<b>MECHANICAL/ A/C</b>	<div>Print Name <u>JAY DAVIS</u> Signature <u>Jay Davis</u></div> <div>License #: <u>owner</u> Phone #: _____</div> <div>Qualifier Form Attached <input type="checkbox"/></div>

**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.



COLUMBIA COUNTY BUILDING DEPARTMENT  
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055  
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Sheppard, give this authority for the job address show below  
Installer License Holder Name

only, 217 NW Layton Way, and I do certify that  
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
JAY DAVIS		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Robert Sheppard License Holders Signature (Notarized) TH1025386 License Number 7-10-19 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 10 day of July, 2019.

[Signature]  
NOTARY'S SIGNATURE

