

DA 07/2009

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000027557

APPLICANT JAY DAVIS PHONE 961-1482
ADDRESS 1925 NW LAKE JEFFERY RD LAKE CITY FL 32055
OWNER JAY DAVIS PHONE 961-1482
ADDRESS 160 NW JOHNSON ST LAKE CITY FL 32055
CONTRACTOR ROBERT SHEPPARD PHONE 623-2203
LOCATION OF PROPERTY 441N, TL JOHNSON ST, 1ST MH ON RIGHT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING RSFMH/2 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 20-3S-17-05226-001 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 0.05

IH0000833
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 08-674 CS HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, EXISTING MH TO BE REMOVED

Check # or Cash 2699

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 \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 325.00
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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED TO BE IN ACTIVE PROGRESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

CK# 2699

For Office Use Only (Revised 1-10-08) Zoning Official dfs 7/6/09 Building Official ND 1-6-09
 AP# 0901-02 Date Received 1-5-09 By LH Permit # 27557
 Flood Zone X Development Permit — Zoning RSF MH 20 Land Use Plan Map Category RLD
 Comments Existing MH to be removed

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____
☒ Site Plan with Setbacks Shown ☒ EH # _____ ☐ EH Release ☐ Well letter ☒ Existing well
☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access
☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter _____
 IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
 School _____ = TOTAL _____ Pre Insp ☒

Property ID # 20-38-17 0 5226-001 Subdivision _____

- New Mobile Home _____ Used Mobile Home ☒ MH Size 14x60 Year 99
- Applicant Jay S. Davis Phone # 386 961-1482
- Address 1925 NW Lake Jeffery RD Lake City FL 32055
- Name of Property Owner Jay Davis Phone# _____
- 911 Address 169 N.W. JOHNSON ST. 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 Jay Davis Phone # 961-1482
 Address _____
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 1 Change Out
- Lot Size 10 459 AC Total Acreage _____
- 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 (pd)
- Driving Directions to the Property 441 N L Johnson St.
1st M.H. on (R)
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City FL 32025
- License Number TH0000833 Installation Decal # 297665

left message 1/1/09

PERMIT WORKSHEET

page 1 of 2

PERMIT NUMBER

Installer Robert Sheppard License # 1H0600833

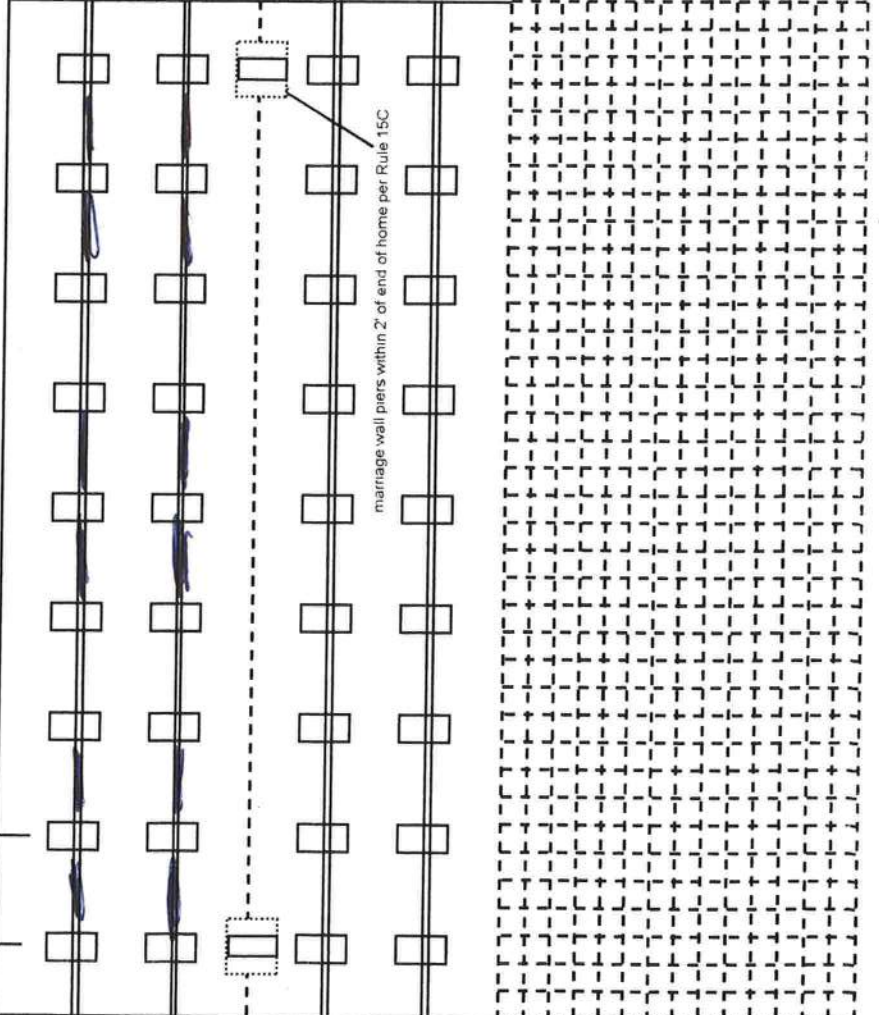
Address of home being installed _____

Manufacturer Freeboard Length x width 14x60

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 # 297665
Triple/Quad ☐ Serial # _____

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'	4'	5'	6'	7'	8'
1500 psf	4' 6"	6'	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	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 17x22
Other pier pad sizes (required by the mfg.) 17x22

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 ☒

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Freeboard
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

PERMIT WORKSHEET

PERMIT NUMBER

POCKET PENETROMETER TEST

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

X 1800 X 1800

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 1800 X 1800

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 4 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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

12-24-08

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. 29

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☐ Other ☐

Fastening multi wide units

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

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 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 ☒
Drain lines supported at 4 foot intervals. Yes ☒
Electrical crossovers protected. Yes ☒
Other: ☐ N/A ☒

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Robert Sheppard

Date

12-23-08



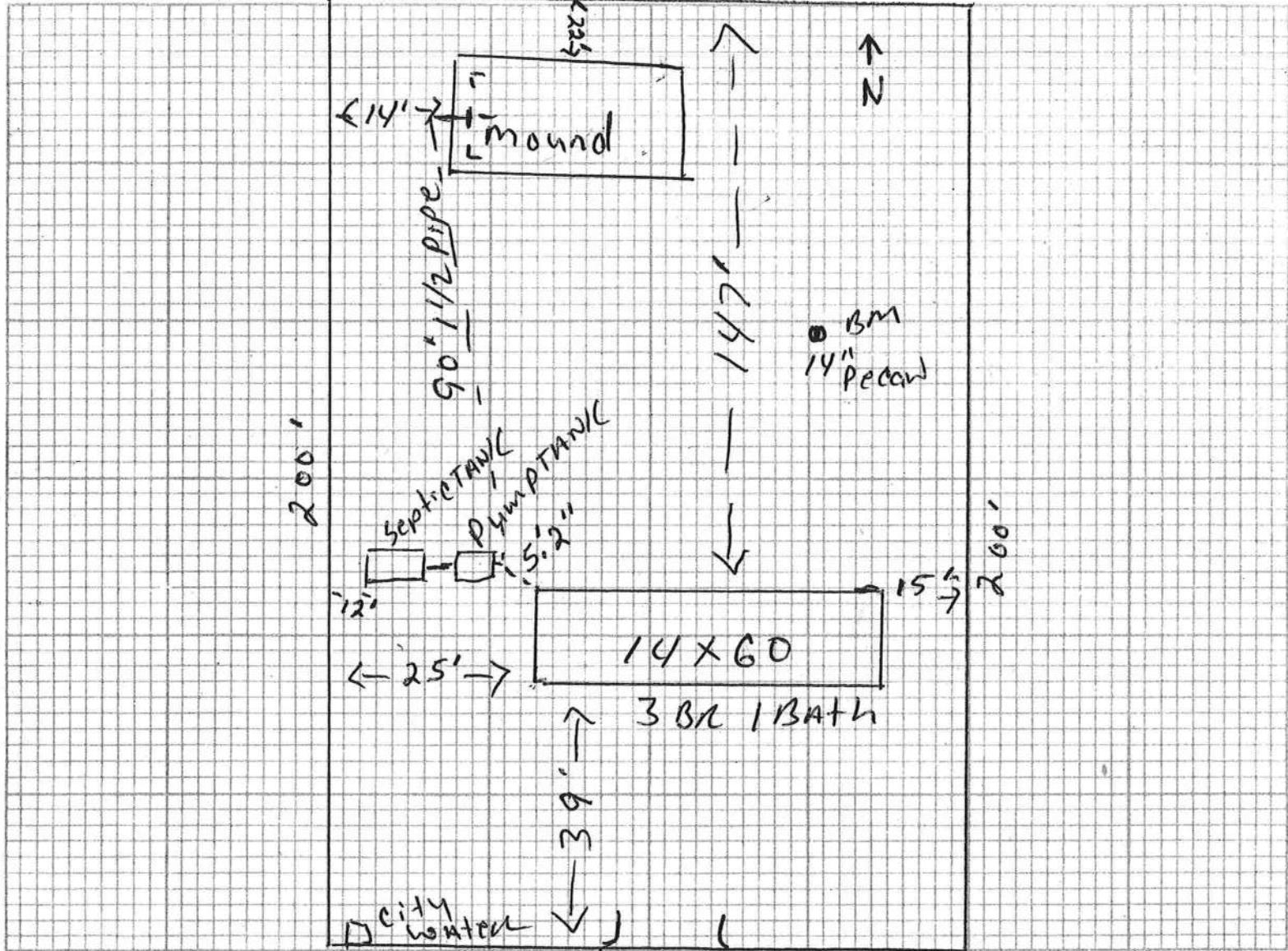
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 08-674-m

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet. 100'



Notes: 100' 169 N.W. Johnson St.

20-35-17-05226-001 (0.459 Acres)

Site Plan submitted by: [Signature] Signature Owner Title

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

Services of Lake City, Inc.
in Boulevard, Suite 105
City, Florida 32025

File Number: 08-134

Inst:200812007408 Date:4/16/2008 Time:10:25 AM
Doc Stamp-Deed:105.00
DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1148 P:432

Warranty Deed

Made this April 10, 2008 A.D.

By **Oscar N. Adams, A** Married Man 169 NW Johnson Street, Lake City, Florida 32055, hereinafter called the grantor, to
Jay Davis, whose post office address is: 1925 NW Lake Jeffrey Road, Lake City, Florida 32055, hereinafter called the grantee:

(Whenever used herein the term "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 Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

A portion of Section 20, Township 3 South, Range 17 East, Columbia County, Florida, being more particularly described as follows: Commence at the intersection of the North line of the Southwest 1/4 of the Northwest 1/4 of said Section 20, with the West right of way line of State Road No, 47 (formerly State Road No, 82), known as Cone highway; and run thence South along said highway, 495 feet; thence West 300 feet to the Point of Beginning; thence run North 200 feet; thence run West 100 feet; thence run South 200 feet; thence run East 100 feet to the Point of Beginning, Less and except that part deeded to the State of Florida for road right of way in Official Records book 25, Page 432 of the public records of Columbia County, Florida.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: **05226-001**

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, 2007.

Services of Lake City, Inc.
Main Boulevard, Suite 105
Lake City, Florida 32025

File Number: 08-134

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:

Jami Wasylchuk
Witness Printed Name Jami Wasylchuk

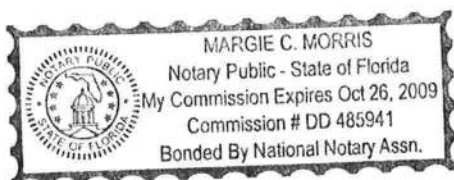
Regina C. Margreli
Witness Printed Name Regina C. Margreli

State of Florida
County of BREVARD

Oscar N. Adams by Norman Paul Adams RA (Seal)
Oscar N. Adams, by his attorney in fact Norman Paul Adams
Address: 169 NW Johnson Street, Lake City, Florida 32055

_____(Seal)
Address:

The foregoing instrument was acknowledged before me this 10th day of April, 2008, by Oscar N. Adams, by his attorney in fact Norman P. Adams who is/are personally known to me or who has produced FL DL 4-9-08 as identification.



Margie C. Morris
Notary Public
Print Name: MARGIE C. MORRIS
My Commission Expires: _____

LETTER OF AUTHORIZATION

Date: 1-5-09

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

I Robert Sheppard, License No. TH0000833 do hereby

Authorize Jay Davis to pull and sign permits on my
behalf.

Sincerely,

Robert Sheppard

Sworn to and subscribed before me this 5 day of Jan, 2008~~9~~.

Notary Public: Laurie Hodson

My commission expires: _____

Personally Known ✓



Produced Valid Identification: _____

IMPACT FEE OCCUPANCY AFFIDAVIT

This affidavit is given for the purpose of obtaining an exemption pursuant to Article VIII, Section 8.01, Columbia County Comprehensive Impact Fee Ordinance No. 2007-40, adopted October 18, 2007, as may be amended.

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

BEFORE ME, the undersigned authority, personally appeared Jay Davis
who, after being duly sworn, deposes and says:

1. Except as otherwise stated herein, Affiant has personal knowledge of the facts and matters set forth in this affidavit regarding property identified below as:

- (a) Parcel No.: 20-35-17 05226-001
(b) Legal description (may be attached): _____

2. Based upon Affiant's personal knowledge, a non-residential building or a residential dwelling has existed on the above referenced property. Said building or dwelling unit was last occupied on 7-8-08 (date.)

3. This Affidavit is made and given by Affiant with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

Further Affiant sayeth naught.

Jay Davis
Print: Jay Davis

Address: 1925 NW LAKE JOSEPH RD
LAKE CITY FL 32055

SWORN TO AND SUBSCRIBED before me this 5 day of Jan, 2009 by
Jay Davis who is personally known to me or who has produced
_____ as identification.

(NOTARY SEAL)

Laurie Hodson
Notary Public, State of Florida

My Commission Expires:



CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12-29-08 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Jay Davis PHONE _____ CELL 961-1482

ADDRESS 169 NW Johnson Street Lake City, A

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 W, @ Johnson, 1st WH
on (R)

MOBILE HOME INSTALLER Sheppard PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Destiny YEAR 99 SIZE 14 x 60 COLOR White

SERIAL No. 00572

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 _____

SIGNATURE Dany [Signature]

ID NUMBER 401

DATE 12-30-08



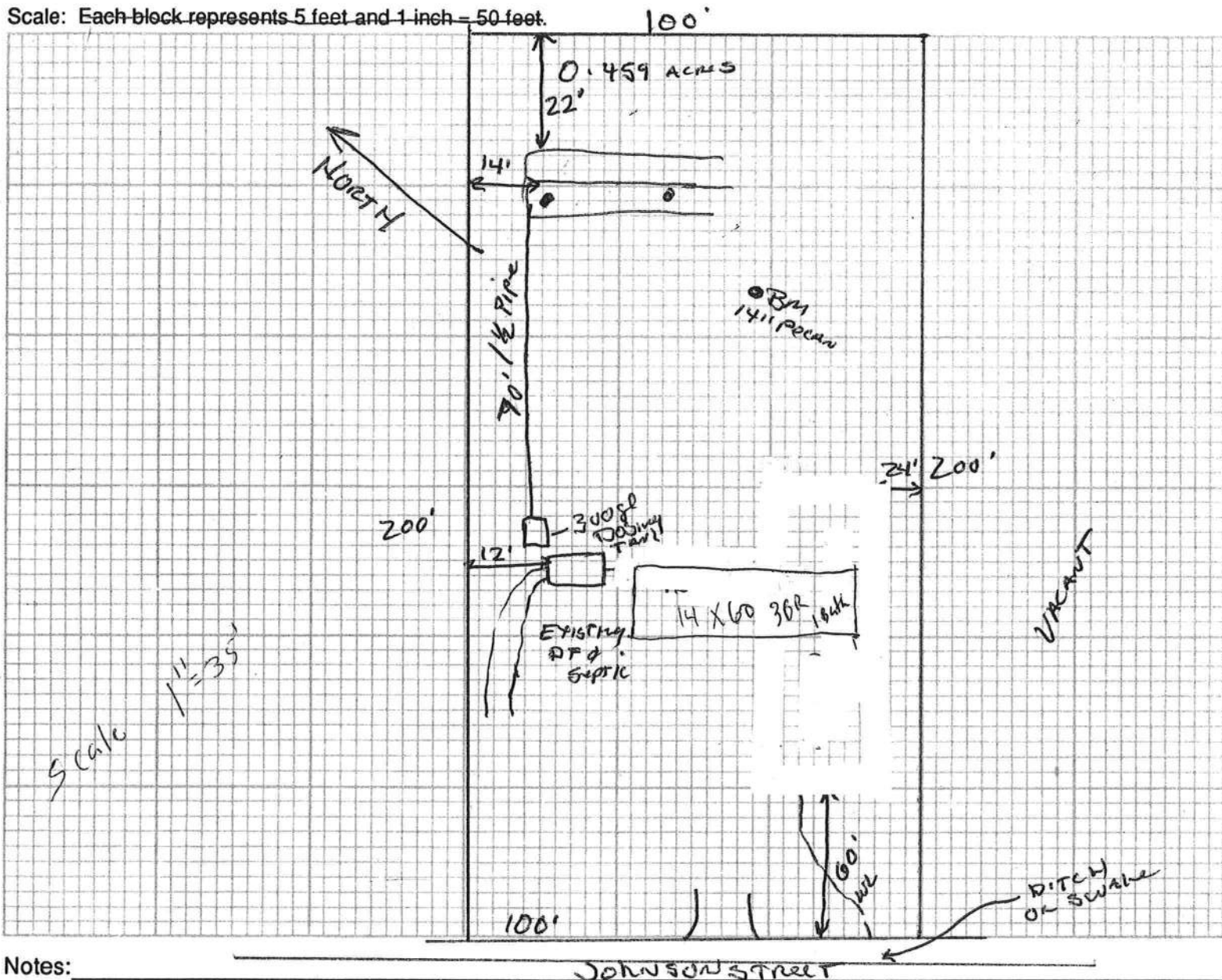
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 08-674-M

PART II - SITE PLAN

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



Notes:

Jay Davis munts & Bonds

20-35-17-05226-001 (0.459 Acres)

Site Plan submitted by:

Robert W. Johnson
Signature

Plan Approved

Not Approved

By *Mr. D. Smith*

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT