PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official Building Official
AP# 1903-29 Date Received 3-11-19 By Ut Permit # 37865
Flood Zone Development Permit Zoning A-Z Land Use Plan Map Category As
Comments SFLP 1908 Approved 3/7/19 for 1 Ac (04700-006) for Duighte
This pennit is for 3,98 Ac for owner to replace existing 11/4
FEMA Map# Elevation Finished Floor River In Floodway
□ Recorded Deed or Property Appraiser PO Site Plan □ EH # 19-0/98 □ Well letter OR
Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
□ DOT Approval □ Parent Parcel # □ STUP-MH 911 App
□ Ellisville Water Sys Assessment Paid on Property □ O ut Cou nty □ I n Coun ty □ Sub VF Form
Property ID #10-2S-17-04700-005 Subdivision NA Lot#
New Mobile Home
 ApplicantDale Burd Phone #386-365-7674
Address 20619 County Road 137, Lake City, FL, 32024
Name of Property Owner Randall Harrison Phone# 386-292-4636
911 Address 216 NE Pikes Way, Lake City, FL, 32055
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - (Suwannee Valley Electric) - Duke Energy
N
Name of Owner of Mobile Home Same Phone # Same
Address Same
Relationship to Property OwnerSame
Current Number of Dwellings on Property 1
Lot Size 428 x 398 Irreg Total Acreage 3.98
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 US 441 North, TR Thomas Camo Road, Tl NE Pikes Way
550' to driveway access on left
Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
Installers Address 6355 SE CR 245, Lake City, FL, 32025
■ License Number IH-1025386 Installation Decal # 50776
LH-Sps le to Mr. Herrison 3-13-19

Parcel: 10-2S-17-04700-005

Owner & Pr	operty Info	Result: 29 of 34				
Owner	HARRISON RANI 216 NE PIKES WA LAKE CITY, FL 32	AY				
Site	216 PIKES WAY, LAKE CITY					
Description*	COMM NW COR OF NE1/4 OF NW1/4, RUN E 663.42 FT, S 539.67 FT, W 202.85 FOR POB, CONT W 503.95 FT, NW 399.88 FT, E 641.94 S 378.74 FT TO POB. ORB 289-122, 316-656, 735-595, DC 1106-2729(RALPH HARRISON) WD 1143-1440.					
Area	4.98 AC	S/T/R	10-25-17			
Use Code**	MOBILE HOM (000202)	Tax District	3			

^{*}The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.
**The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not

^{**}The <u>Use Code</u> 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.

2018 Cert	ified Values	2019 Working Values				
Mkt Land (2)	\$22,567	Mkt Land (2)	\$23,567			
Ag Land (0)	\$0	Ag Land (0)	\$0			
Building (2)	\$39,785	Building (2)	\$38,344			
XFOB (9)	\$7,040	XFOB (9)	\$7,040			
Just	\$69,392	Just	\$68,951			
Class	\$0	Class	\$0			
Appraised	\$69,392	Appraised	\$68,951			
SOH Cap [?]	\$770	SOH Cap [?]	\$228			
Assessed	\$68,622	Assessed	\$68,723			
Exempt	нх нз \$26,648	Exempt	нх нз \$27,629			
Total Taxable	county:\$41,974 city:\$41,974 other:\$41,974 school:\$43,622		county:\$41,094 city:\$41,094 other:\$41,094 school:\$43,723			

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

PHONE 386-623-2203

1903-29 CONTRACTOR Robert Sheppard

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 start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines. ELECTRICAL Print Name Glenn Whittington Signature COLUMBIA COUNTY OF THE NAME Signature Print Name Ronald Bonds Sr. Signature MECHANICAL/ Print Name Ronald Bonds Sr. Signature	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 Glenn Whittington Signature Phone #: 386-792-1700 Qualifier Form Attached			THIS FORM MUST BE SUBMITTED I	PRIOR TO THE ISSUANCE OF A PERMIT Harrison
Start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines. ELECTRICAL	Start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines. ELECTRICAL	records of the Ordinance 89-6 exemption, ge	subcontractors 5, a contractor neral liability in	who actually did the trade sp shall require all subcontractor surance and a valid Certificate	recific work under the permit. Per Florida Statute 440 and res to provide evidence of workers' compensation or e of Competency license in Columbia County.
License #: EC13002957 Phone #: 386-792-1700 Qualifier Form Attached MECHANICAL/ Print Name Ronald Bonds Sr. Signature	License #:		•	•	• • • • • • • • • • • • • • • • • • • •
Qualifier Form Attached MECHANICAL/ Print Name Ronald Bonds Sr. Signature	Qualifier Form Attached MECHANICAL/ Print Name Ronald Bonds Sr. Signature A/C 400 License #: CAC1817658 Phone #: 800-259-3470	ELECTRICAL	Print Name	Glenn Whittington	Signature
MECHANICAL/ Print Name Ronald Bonds Sr. Signature	MECHANICAL/ Print Name Ronald Bonds Sr. Signature A/c (1) License #: CAC1817658 Phone #: 800-259-3470	24	License #:	EC13002957	Phone #: 386-792-1700
Jight Walle	A/c 90 License #: CAC1817658 Phone #: 800-259-3470	101,		Qualifier Form A	ttached
		MECHANICAL/	Print Name	Ronald Bonds Sr.	Signature
A/C 40 License #: CAC1817658 Phone #: 800-259-3470	Qualifier Form Attached 🔀	A/C 950	License #:	CAC1817658	Phone #: 800-259-3470
Qualifier Form Attached 🔀					
		Qualifier Forn	ns cannot be s	submitted for any Specialty	License.
Qualifier Forms cannot be submitted for any Specialty License.	Qualifier Forms cannot be submitted for any Specialty License.	Specialty Li			actors Printed Name Sub-Contractors Signature

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

CONCRETE FINISHER

MASON

APPLICATION NUMBER



COLUMBIA COUNTY BUILDING DEPARTMENT

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

LICENSED QUALIFIER AUTHORIZATION

1. Lonald k wond SE	(license holder name), licensed qualifier
FOR STIPE CARST ENTERDENES	True (company name), do certify that
the below referenced person(s) listed on this for	m is/are contracted/hired by me, the license ough an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DALE BURD	1.
2. Rock, Ford	2. (bc/3) 7-1
3. Kally Bishop	3. Kelly Brishop
4.	4.
5.	5.
under my license and fully responsible for complication of the state and authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted officer(s), you must notify this department in writing authorized persons to use your name and/or licensed Qualifiers Signature (Notarized)	nd County Licensing Boards have the power and one committed by him/her, his/her agents, his/billity for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or no of the changes and submit a new letter of ous lists. Failure to do so may allow
NOTARY INFORMATION: STATE OF:COUNTY OF:	19ld Edward Bonds SR
Stewy Gra ldopkins NOTARY'S SIGNATURE	(Seal/Stamp)



COLUMBIA COUNTY BUILDING DEPARTMENT

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

LICENSED QUALIFIER AUTHORIZATION

Charles Stand	Nicona haldanama) liannad gualifias
1. GRAN WITTINGTON ELECTIC S	(license nolder name), licensed qualifier
LJ .	•
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ugh an employee leasing arrangement, or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DARSUR	1
2. Recky Fond	2. Jones))
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complex Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or leading to the control of the contro	ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notafized)	EC 1300 295 3/7/16 License Number Date
	Colmbia
The above license holder, whose name is	me or has produced identification this day of, 20, 20, 20

COLUMBIA COUNTY PERMIT WORKSHEET

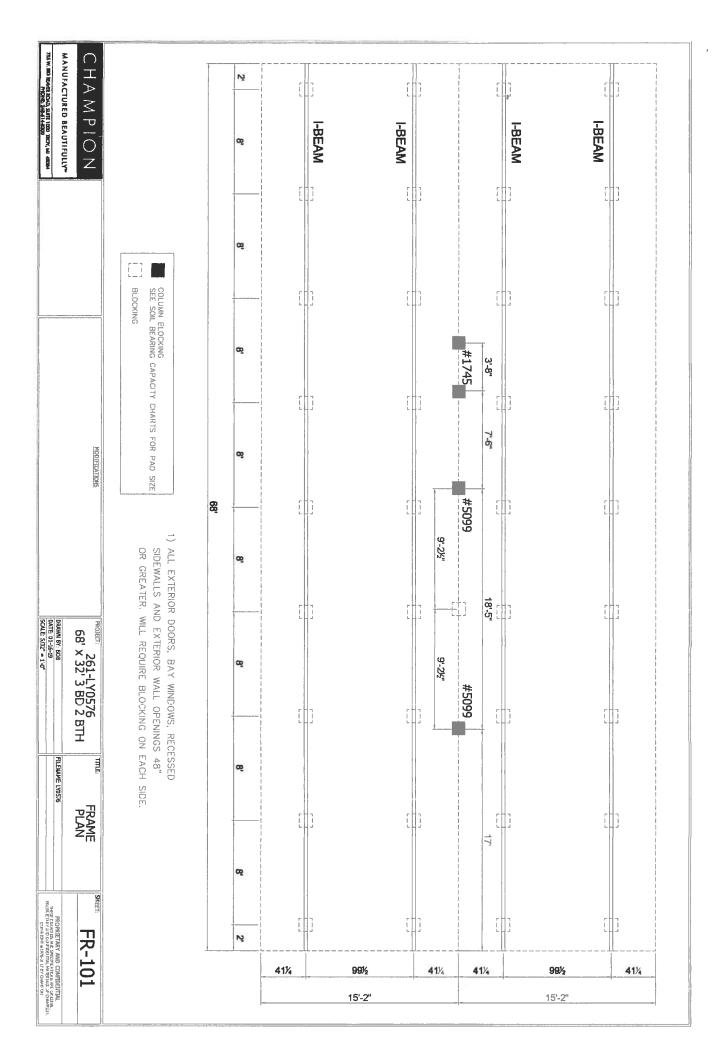
page 1 of 2

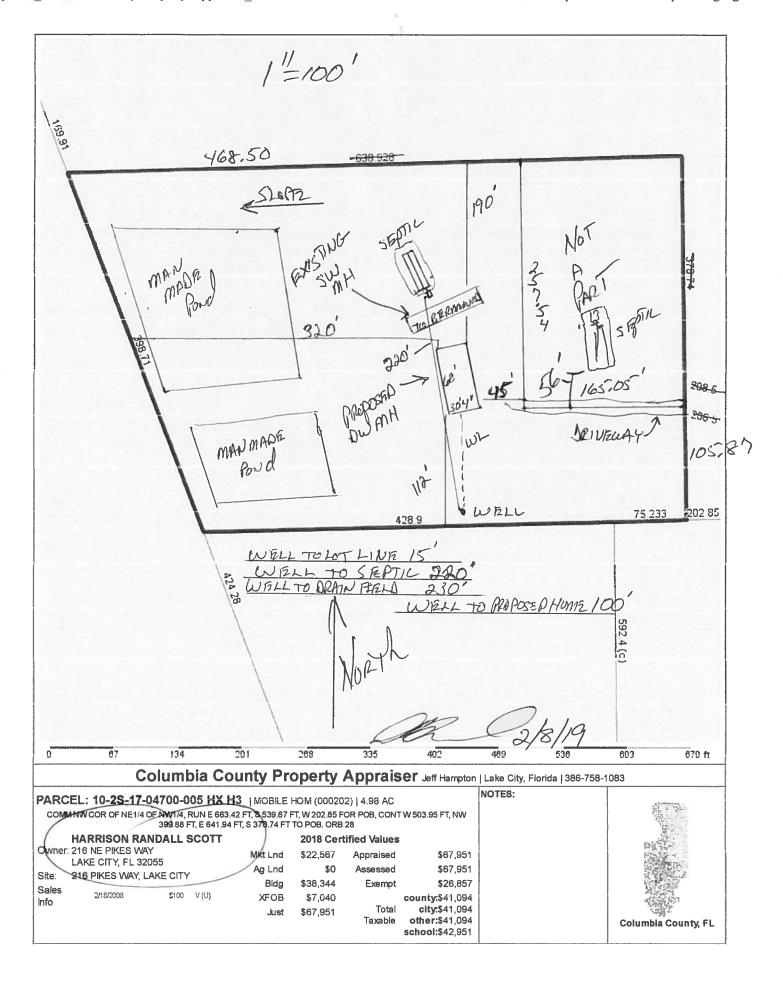
These worksheets must be completed and signed by the installer. Submit the originals with the packet. 911 Address where home is being installed Manufacturer Typical pier spacing ŀΰ I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in NOTE: 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 Kobert Sheprand Ð (NAMOI DO longitudinal 0 Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Length x width Installer's initials **B** LICENSE # + H 1025 386 电 68 × 21 capacity bearing Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer
O () ver | 101 V Load Home is installed in accordance with Rule 15-C List all marriage wall openings greater than 4 foot and their pier pad sizes below Perimeter pier pad size Home installed to the Manufacturer's Installation Manual (required by the mfg.) Other pier pad sizes l-beam pier pad size interpolated from Rule 151-1 pier spacing rable Triple/Quad Double wide Single wide New Home 1000 ps 1500 ps 2000 ps 2500 ps Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers Opening Footer (sq iri) size TIEDOWN COMPONENTS 16" x 16" Z PIER PAD SIZES PIER SPACING TABLE FOR USED HOMES Q (256)Wind Zone II Used Home Installation Decal # 18 1/2" x 18 1/2" (342) Pier pad size 17×25 16×16 20" × 20" Q (4CC) 22" x 22" Wind Zone III (484) Sidewall Londitional Marriage was Shearwal 4 within 2' of end of home spaced at 5' 4" Co POPULAR PAD SIZES 13 1/4 x 26 1/4 20 x 20 200 18.5 x 18 Pad Size 16 x 22 5 17 x 22 16 x 16 16 x 18 OTHER TIES 24" X 24" FRAME TIES ANCHORS (576) ວາ 26" × 26" (576)

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28	Connect all sewer drains to an existing sewer tap or septic tank. Pg. 26	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg29	Electrica)	Date leated 11 11 11 11	Instaler Name Kobert Shapard	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. Lenderstand 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. Installers initials	The results of the torque probe test is 285 inch bounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5 fool anchors.	TORQUE PROBE TEST	× 1500 × 1700 × 1600	 Using 500 lb increments, take the lowest reading and round down to that increment. 	Take the reading at the depth of the footer.	 Test the perimeter of the home at 6 locations. 	POCKET PENETROMETER TESTING METHOD	× 1500 × 1600 × 1600	The pocket penetrometer tests are rounded down to 1500 psf or check here to deplace 1000 b, soilwithout testing.	POCKET PENETROMETER TEST
Installer Signature Hohal Mygraf Date 11-	is accurate and true based on the	histaller verifies all information given with this permit workshee		Drain lines supported at 4 foot intervals. Yes N/A Electrical crossovers protected. Yes	No No Yes	Miscellaneous	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	Pg. 22 Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Installer's initials RS		I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are		roll ased Hollies a hill, so galue, a wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv.	Type Fastener Scr	Floor: Type Fastener 1995 Length 5" Spacing 16"	Water drainage: Natural Swale Pad Other	Sile Preparation

lustaller verifies all information given with this permit worksheet		Drain lines supported at 4 foot intervals. Yes 1/2 Electrical prossovers protected. Yes 1/2 Other:	Price vent installed outside of skirting. Yes N/A N/A Range downflow vent installed outside of skirting. Yes N/A	Skirting to be installed. Yes No	Miscellaneous
---	--	--	--	----------------------------------	---------------

Date //-/7-/7





2/8/2019, 11:11 AM

District No. 1 - Ronald Williams District No. 2 - Rocky Ford District No. 3 - Bucky Nash District No. 4 - Tohy 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: 1/24/2019 2:08:28 PM

Address: 216 NE PIKES Way

City: LAKE CITY

State: FL

Zip Code 32055

Parcel ID **04700-005**

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

Not for this permit - Included to Show
LAC Catout is legal. Now Parant Pine.

FAMILY RELATIONSHIP AFFIDAVIT

Inst: 2019120055800 Days 02/11/2017

STATE OF FLORIDA COUNTY OF COLUMBIA

Inst: 201912005809 Date: 03/11/2019 Time: 2:30PM Page I of 2 B: 1379 P: 2764, P.DeWitt Cason, Clerk of Court Columbia, County, By: BD Deputy Clerk

	BEFORE ME the undersigned Notary Public personally appeared, RANDALL HARRISON
	the Owner of the parent parcel which has been subdivided for and
/ARRIS	SA HARRISON , the Immediate Family Member of the Owner, which is
	ded for the Immediate Family Members primary residence use. The Immediate Family
lemi	per is related to the Owner as
ret d	uly sworn according to law, depose and say:
ıstu	ary sworn according to law, depose and say.
1.	Affiant acknowledges Immediate Family Member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2.	Both the Owner and the Immediate Family Member have personal knowledge of all matters set forth in this Affidavit.
3.	The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Parent Tract Tax Parcel No. 10-28-17-04700-005
4.	The Immediate Family Member holds fee simple title to certain real property divided from the Owners' parent parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No
5.	No person or entity other than the Owner and Immediate Family Member to whom permit is being issued, including persons residing with the family member claims or

- 5. No person or entity other than the Owner and Immediate Family Member to whom permit is being issued, including persons residing with the family member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the property.
- 6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for an Immediate Family Member being in compliance with the density requirements of the Columbia County's Comprehensive Plan and Land Development Regulations (LDR's).
- 7. This Affidavit and Agreement is made and given by Affiants 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.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it. Owner Immediate Family Member RANDALL HARRISON MARRISA HARRISON Typed or Printed Name Typed or Printed Name as identification. Dale R. Burd NOTARY PUBLIC Notary Public Expires 7/16/2022 Subscribed and sworn to, (or affirmed) before me this 6 day of MANN, 2019. __(Family Member) who is personally known to me or has as identification. Dale R. Burd NOTARY PUBLIC STATE OF FLORIDA Comm# GG231750 Notary Public Expires 7/16/2022 APPROVED:

COLUMBIA COUNTY, FLORIDAEPA

Name: LAURIE HODSON

Title: OFFICE MANAGER

850072914069



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM ADDITION FOR CONSTRUCTION REPMIT

	10 NIGO
PERMIT NO.	[1-DI]
DATE PAID:	3/13/9
FEE PAID:	U. DIDO 368.00
RECEIPT #:)	4-32 (115)
There's - 9	1 C . WOLTER

APPLICATION	FOR CONSTI	RUCTION PE	RMIT	Trem- 31	Le mortan
APPLICATION FOR: [] New System [] [] Repair []	Existing Sys Abandonment	tem [Holding Tank Temporary		novative
APPLICANT: Randall Harrison					
AGENT: Dale Burd / Dale Burd LLC			TE	ELEPHONE: 386	-365-7674
MAILING ADDRESS: 20619 County	y Road 137, Lake C	City, FL, 32024		Particle and resources and the second	
TO BE COMPLETED BY APPLICAN BY A PERSON LICENSED PURSUA APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUE	NT OR APPLICATION TO 489.10. TO PROVIDE DOSTING CONSIDER	NT'S AUTHOR 5(3)(m) OR OCUMENTATION ERATION OF	IZED AGENT. SYS 489.552, FLORIDA N OF THE DATE TH STATUTORY GRANDF	STEMS MUST BI A STATUTES. HE LOT WAS CH FATHER PROVIS	E CONSTRUCTED IT IS THE REATED OR SIONS.
PROPERTY INFORMATION		<u> </u>	سميت في معاهم معاهم		
LOT: na BLOCK: na	SUBDIVISION	: na		PLAT	TED: na
PROPERTY ID #: 10-2S-17-04700	-005	ZONING	G: I/M	OR EQUIVALEN	IT: [No]
PROPERTY SIZE: 3.98 ACRES	S WATER SUPP	LY: [✓] PR	IVATE PUBLIC []<=2000GPD	[]>2000GPD
IS SEWER AVAILABLE AS PER 3	381.0065, FS?	[No]	DIST	ANCE TO SEWE	R: na FT
PROPERTY ADDRESS: 216 NE Pike	es Way, Lake City,	FL, 32055			
DIRECTIONS TO PROPERTY: US	441 North, TR Th	omas Camp Roa	d, TL Pikes Way, 550' t	to driveway on lef	ìt
				буул тууу тигирүү түр тетерин түр туу туу туу туу туу туу туу туу туу ту	Prince 1 to 1 t
BUILDING INFORMATION	[/] RESI	DENTIAL	[] COMMERC	CIAL	
Unit Type of No Establishment	No. of Bedrooms		Commercial/Inst		
1 SF Residential	3	2063	3 BR for 3 BR Like for	or Like	
2	_				
3					
4	_				
[] Floor/Equipment Drain	ns [] Otl	her (Specif	()		
SIGNATURE:		<i>"</i>		DATE: 3/11/2	2019

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

PE PE	ermit Application Number
HARIUM PART II - SITEPLA	N
Scale: 1 inch = 40 feet.	•
ARREA SPARAGE	
Notes:	
Site Dien auhmitted by	
Site Plan submitted by 2/h/19 Plan Approved Not Approved Not Approved	CONTRACTOR
Plan Approved Not Approved By All A Least For Health Oire	efor County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

