

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Serial # 1907-59

For Office Use Only (Revised 7-1-15) Zoning Official JWA Building Official JWA
 AP# 1907-59 Date Received 7/16 By JW Permit # 38417
 Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category Ag
 Comments Replacing existing mobile home, floor one foot above the road

FEMA Map# _____ Elevation _____ Finished Floor 6 inches River _____ In Floodway _____
 Recorded Deed or Property Appraiser PO Site Plan EH # 19-0540 Well letter OR
 Existing well Land Owner Affidavit Shella Hargis Installer Authorization FW Comp. letter App Fee Paid
 DOT Approval Parent Parcel # SAs Agreement 2 of the owners names shown STUP-MH 911 Address 911 DECAL # _____
 Ellisville Water Sys Assessment Paid on Property Out County In County Sub VF Form

Property ID # 12-45-15-00347-006 Subdivision _____ Lot# _____

- New Mobile Home Used Mobile Home _____ MH Size 76x32 Year 2019
- Applicant Jeff Hardee hone # 352-949-0592
- Address 6450 NW 72nd Lane - Chiefland, FL 32626
- Name of Property Owner William Ingram, Traci Hargis, Shella Hargis Phone# 660 651 8277
- 911 Address 3389 Kregel Way, LAKE CITY, FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Traci Hargis William Ingram Phone # 660 651 8277
- Address 2210 CF 2550 Moberly Mo 65270
- Relationship to Property Owner daughter & son in law
- Current Number of Dwellings on Property ONE
- Lot Size 629 x 320 Total Acreage 5.02
- 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 Pinpoint west to 7/2 Verde Rd
 T/R from 7/2 on Kregel way (no sign) ~ 800' to RW
- Name of Licensed Dealer/Installer Stephen E Ucker Phone # 904 219 9801
- Installers Address Po Box 274 Green Cove Springs FL 32043
- License Number JH 1025306 Installation Decal # 59901



JEFF IS AWARE OF WHAT'S NEEDED 7.18.19 MB spoke w/ Jeff, reiterated what's needed decal#, serial #, & 911
 LH-Spoke to Installer 7-19-19 JW sent email 7-29-19

Hargis F.A. Gram

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer. Submit the originals with the packet.

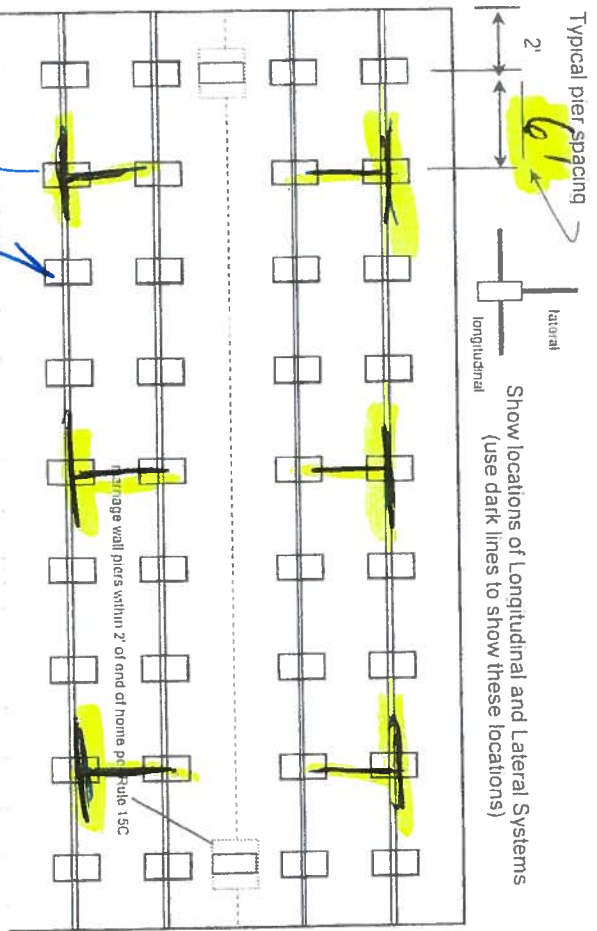
Installer STEPHEN LARKS License # EH11025306

911 Address where home is being installed 338 Keegal Way

Manufacturer Defway Length x width 76 x 32

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 SEW



LH-Spoke to the installer 7-19-19

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

Double wide Installation Decal # 59901

Triple/Quad Serial # PT09676 Ags

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (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'

PIER 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
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

FRAME TIES

OTHER TIES

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 All Pier pad size 24x24

TIEDOWN COMPONENTS

Longitudinal Stabilizing Dyke (LSD)

Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Howe pride

Sidewall

Longitudinal Marriage wall

Manufacturer

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

Number 1

POCKET PENETROMETER TEST

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

X 215 X 225 X 310

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 300 X 300 X 215

TORQUE PROBE TEST

The results of the torque probe test is _____ 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000lb holding capacity.

SEU Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Stephen E Varko

Date Tested

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. _____

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. _____
 Connect all potable water supply piping to an existing water meter, water tap or other independent water supply system. Pg. _____

Site Preparation

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

Fastening multi wide units

Floor/Walls/Roof	Type Fastener	Length	Spacing
	5" steel	5"	8" o/c
	3/8" x 3"	3"	8" c/c
	1/2" x 4"	4"	2' o/c

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 SEU

Type gasket Fastern
 Pg. _____

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes No Pg. _____
 Siding on units is installed to manufacturer's specifications. Yes No
 Fireplace chimney installed so as not to allow intrusion of rain water. Yes No

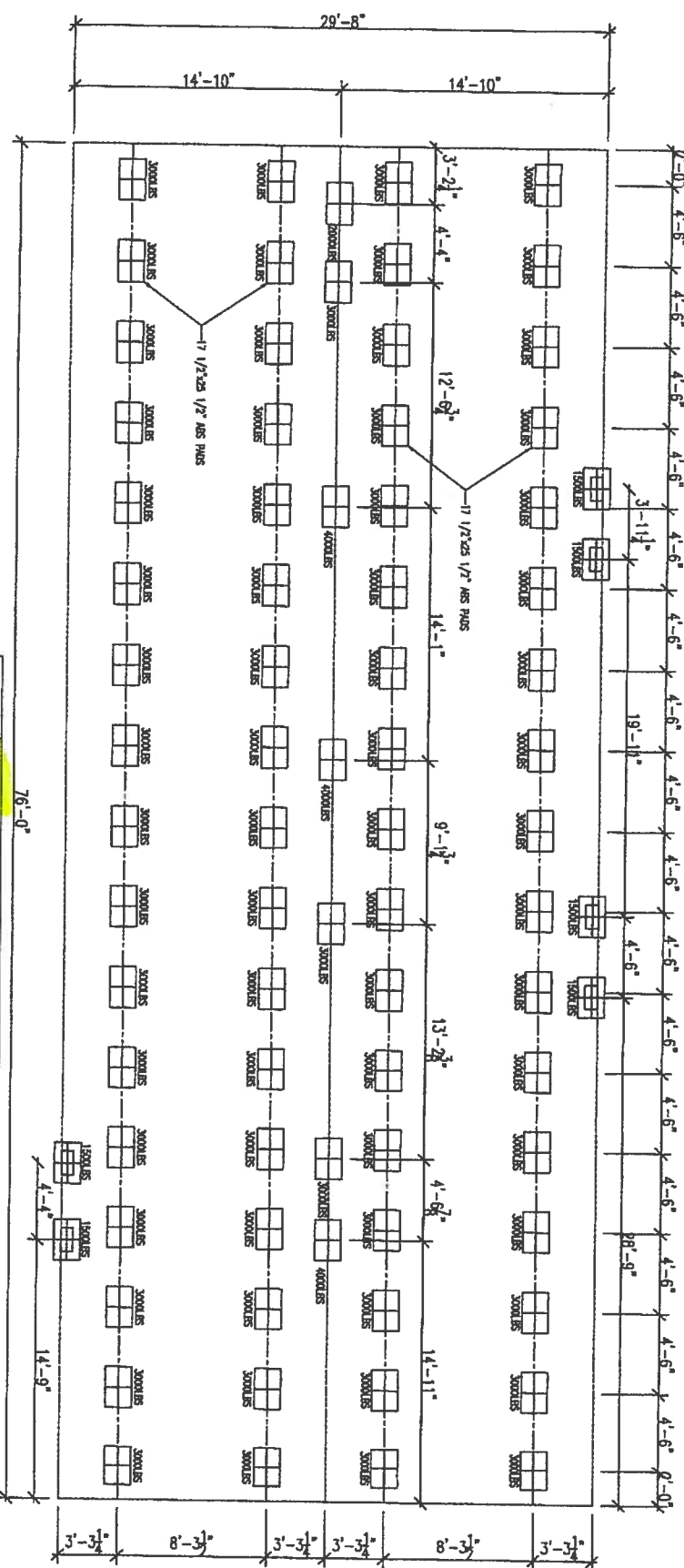
Miscellaneous

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

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

Installer Signature

Stephen E Varko Date 7-15-19



SOIL: 1000# PSF
 1500LBS=16"x18.5" ABS FOOTER
 2000LBS=16"x18.5" ABS FOOTER
 3000LBS=17.5"x25.5" ABS FOOTER
 4000LBS=21"x29" ABS FOOTER

MAXIMUM CLEAR SPAN FOR WAINING LINE SUPPORTS (FEET)	MAXIMUM SPAN BETWEEN PIERS UNDER I-BEAMS (FEET)
PAO SIZE (SQ. FT.)	PAO AREA (SQ. FT.)
BOX WIDTH (IN.)	SINGLE WIDE
DOUBLE WIDE	
16"x18.5"	3.30
17.5"x25.5"	4.95
21"x29"	6.61
23.25"x31.25"	7.97
16"x18.5"	2.00
17.5"x25.5"	3.00
21"x29"	4.50
23.25"x31.25"	6.75
16"x18.5"	1.78
17.5"x25.5"	2.38
21"x29"	3.57
23.25"x31.25"	5.35
16"x18.5"	4.00
17.5"x25.5"	6.00
21"x29"	9.00
23.25"x31.25"	13.50

MAX. LOAD FOR MAX. LOAD FOR MAX. LOAD FOR	OWN PAO SIZES
1000 PSF	16"x18.5"
1500 PSF	17.5"x25.5"
2000 PSF	21"x29"
2500 PSF	23.25"x31.25"
3000 PSF	16"x18.5"
3500 PSF	17.5"x25.5"
4000 PSF	21"x29"
4500 PSF	23.25"x31.25"
5000 PSF	16"x18.5"
5500 PSF	17.5"x25.5"
6000 PSF	21"x29"
6500 PSF	23.25"x31.25"

THIS LETTER SHALL CERTIFY THAT ABS FOUNDATION PADS MANUFACTURED BY DESTINY INDUSTRIES, INC. ARE BEING USED IN THE FIELD OF FOUNDATION CONCRETE FOOTINGS AS A SUPPORT FOR SINGLE & DOUBLE STACKED FOUNDATION PERS. THE FOLLOWING CRITERIA ARE MET:

1. THE ABS PADS MUST BE INSTALLED PER QUINCY TECHNOLOGIES INSTALLATION INSTRUCTIONS.
2. THE PIER LOADS APPLIED TO THE ABS PADS MAY NOT EXCEED THE VALUES NOTED IN THE CHART BELOW.
3. THE ABS PADS MAY BE USED TO SUPPORT A CONCRETE FOUNDATION WALL. THE PADS MAY ONLY BE USED FOR INDIVIDUAL FOUNDATION PERS.
4. ABS PADS MAY BE COMBINED TO COVER A LARGER AREA IN THIS CASE THE MAX. ALLOWABLE LOADS SHOWN SHOULD BE USED.
5. IF THE REQUIREMENTS OF DESTINY IND. INSTALLATION MANUAL CONFLICT WITH THE REQUIREMENTS OF THE OTHER TECHNOLOGIES INSTALLATIONS THE MORE STRINGENT REG. SHALL BE USED.

Destiny Industries, Inc.
 PHONE: 888-782-8800 FAX: 229-873-8820
 WWW.DESTINYHOMEBUILDERS.COM

ABS FOUNDATION PLAN

DESIGNED BY: **JERRY BENION**

DATE: 12/19/2007

PROJECT: **TIMBERLINE**

MODEL NO: **DISH07890**

SO. FT.: **2254**

REVISIONS:

NO. DATE DESCRIPTION

1-12/19/2007

1-1/27/2009 DRT

Legend

2018Aerials



Parcels

Addresses

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

SRWMD Wetlands

Lidar Elevations

X



Roads

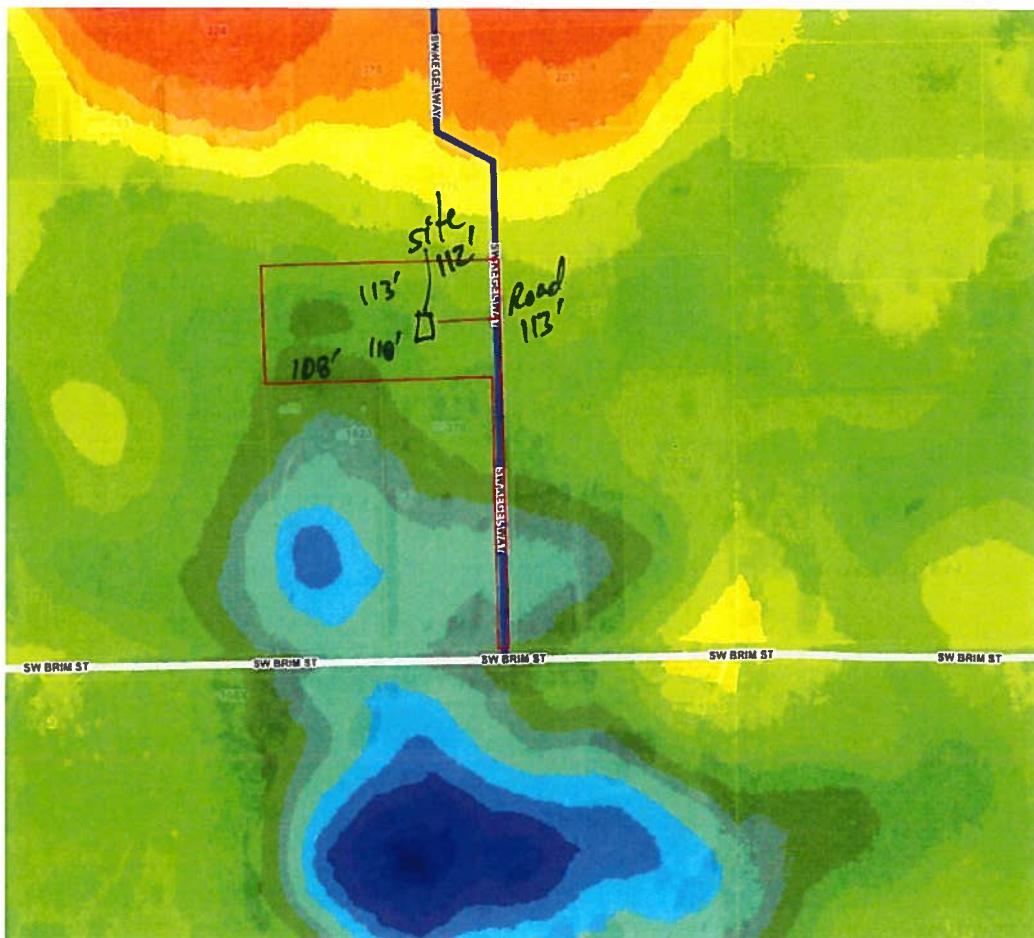
Roads

others

Dist

Columbia County, FLA - Building & Zoning Property Map

Printed: Fri Jul 19 2019 13:19:06 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 12-4S-15-00347-006

Owner: HARRISON REGINALD &

Subdivision:

Lot:

Acres: 5.11152649

Deed Acres: 5.02 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

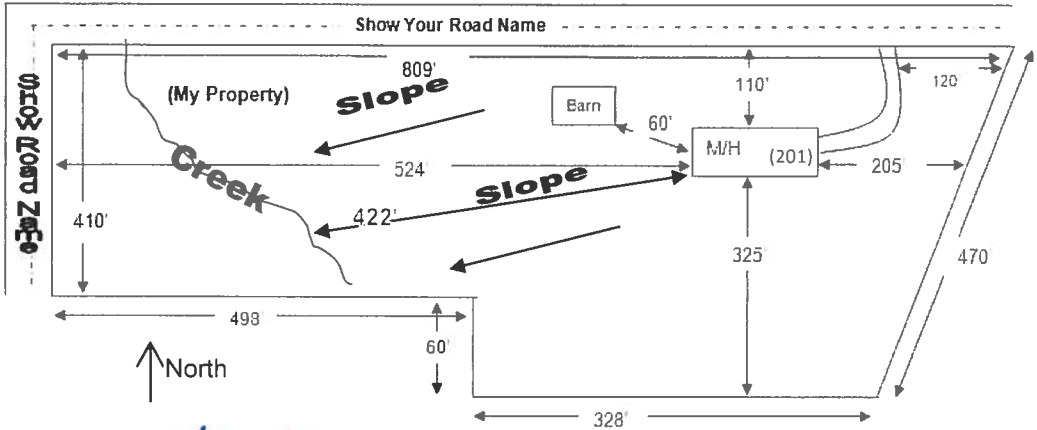
All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness 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.

SITE PLAN CHECKLIST

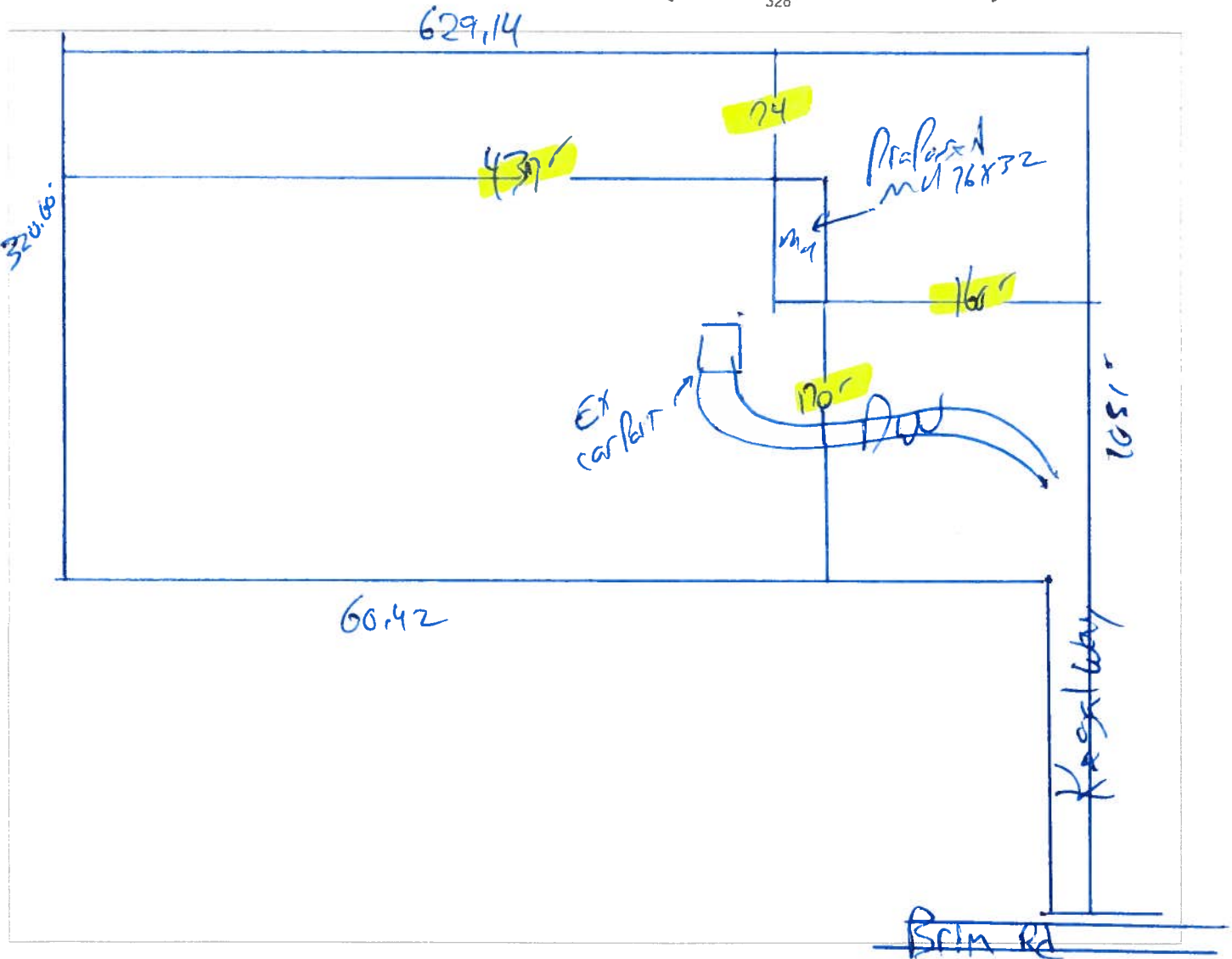
- ___ 1) Property Dimensions
- ___ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ___ 3) Distance from structures to all property lines
- ___ 4) Location and size of easements
- ___ 5) Driveway path and distance at the entrance to the nearest property line
- ___ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ___ 7) Show slopes and or drainage paths
- ___ 8) Arrow showing North direction

SITE PLAN EXAMPLE

Revised 7/1/15



NOTE:
This site plan can be copied and used with the 911 Addressing Dept. application forms.



Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 6/25/2019

- Retrieve Tax Record 2018 TRIM (pdf) Property Card Parcel List Generator Show on GIS Map Print

Parcel: << 12-4S-15-00347-006 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info Result: 1 of 1

Owner: **INGRAM WILLIAM & TRACI HARGIS & SHEILA HARGIS (JTWRs)**
2210 CR 2550
MOBERLY, MO 65270

Site: 338 KEGEL WAY,

Description*: COMM SE COR, RUN N 39 FT, W ALONG N R/W TOMPKINS RD 616.90 FT FOR POB, RUN N 1051.01 FT, W 629.14 FT, S 320.60 FT, E 600.42 FT, S 731.49 FT, E 25 FT TO POB. 815-1833, 880-585, 887-325, 887-1551, 908-2042, QC 972-1836, AG 982-843, WD 1051-529, 531, WD 1242-231 ...more>>>

Area	5.02 AC	S/T/R	12-4S-15
Use Code**	MOBILE HOM (000200)	Tax District	3

*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)	\$35,058	Mkt Land (2)	\$34,308
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$8,759	Building (1)	\$7,771
XFOB (1)	\$378	XFOB (1)	\$378
Just	\$44,195	Just	\$42,457
Class	\$0	Class	\$0
Appraised	\$44,195	Appraised	\$42,457
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$44,195	Assessed	\$42,457
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$44,195 city:\$44,195 other:\$44,195 school:\$44,195	Total Taxable	county:\$42,457 city:\$42,457 other:\$42,457 school:\$42,457

▼ Sales History Show Similar Sales within 1/2 mile Fill out Sales Questionnaire

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
2/12/2019	\$38,000	1378/1041	WD	I	Q	01
9/13/2016	\$20,000	1324/0798	WD	I	U	30
10/5/2012	\$47,000	1242/2318	WD	I	U	40
7/1/2005	\$69,000	1051/0531	WD	I	Q	
7/1/2005	\$100	1051/0529	WD	I	U	01
5/1/2003	\$25,000	982/0843	AG	V	U	03
1/22/2003	\$21,000	972/1836	QC	V	U	03
7/14/1999	\$23,600	908/2042	AG	V	U	03
7/1/1999	\$33,000	887/0325	WD	V	U	03
1/2/1996	\$68,000	815/1840	WD	V	Q	

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
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Yulee Custom Homes Phone: 904-225-8001
 850712 HWY 17 South Fax: 904-225-8007
 Yulee, FL 32097



1907-59

660-728-2791

BUYER(S) William R Ingram and/or Trace R Hargis HOME PHONE _____ CELL PHONE _____ DATE 6/14/19

ADDRESS 338 SW Kesel Way CITY Lake City STATE FL ZIP 32924 EMAIL Trace.R.Hargis@aol.com

DELIVERY ADDRESS _____ SALES PERSON _____

THIS UNIT IS MAKE Destiny MODEL _____ STOCK NUMBER _____ SERIAL NUMBER _____

YEAR	BEDROOMS	BATHS	FLOOR SIZE	HITCH SIZE	COLOR	KEY NUMBERS	PROPOSED DELIVERY DATE
<u>20</u>	<u>4</u>	<u>2</u>	<u>1,761</u>	<u>132</u>	<u>80</u>	<u>132</u>	

DATE OF BIRTH _____ DRIVER'S LICENSE _____ BASE PRICE OF UNIT \$ 144,491

BUYER _____ CO-BUYER _____ BUYER _____ CO-BUYER _____ OPTIONAL EQUIPMENT _____

LOCATION _____ R-VALUE _____ THICKNESS _____ TYPE OF INSULATION _____ SUB-TOTAL \$ _____

CEILING _____ EXTERIOR _____ SALES TAX & SURTAX (if Applicable) _____

FLOORS _____ PROCESSING FEES _____

THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CFR SECTION 460.16. NON-TAXABLE ITEMS 5300

VARIOUS FEES AND INSURANCE _____

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES _____ CASH PURCHASE PRICE \$ 141,291

Delivered	\$ _____	TRADE-IN ALLOWANCE	_____
Tied Down	_____	LESS BALANCE DUE on above	_____
Furnished	_____	NET ALLOWANCE	_____
Unfurnished	_____	CASH DOWN PAYMENT	<u>Non Refundable</u>
Wheels & axles deleted from sale price of home. Will lend for a local move.	_____	CASH AS AGREED	_____
_____	_____	LESS TOTAL CREDITS	\$ _____
Buyer is responsible for releveling of home after initial setup.	_____	SUB-TOTAL	\$ _____
We can not be responsible for setting of land.	_____	SALES TAX (if Not Included Above)	_____
Options include extra: (List)	_____	Unpaid Balance of Cash Sale Price	<u>147,291</u>

REMARKS:
 • Guaranteed funds required for final payment which is due on issuance of Certificate of Occupancy.
 • This Agreement includes the attached addendum.

SEE CUSTOM - FHA WORKSHEET

BALANCE CARRIED TO OPTIONAL EQUIPMENT \$ _____

NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.

DESCRIPTION OF TRADE-IN _____ YEAR _____ SIZE _____ MAKE _____ MODEL _____ BEDROOMS _____

TITLE NO. _____ SERIAL NO. _____ COLOR _____

AMOUNT OWING \$ _____ TO WHOM _____

ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY DEALER BUYER _____ REFER TO PARAGRAPH #6 ON THE REVERSE SIDE OF THIS AGREEMENT.

Dealer and Buyer certify that the additional terms and conditions printed on the other side of this Agreement are agreed to as a part of this Agreement, the same as if printed above the signature. Buyer is purchasing the above described manufactured home, the optional equipment and accessories, the insurance as described has been voluntary, that Buyer's trade-in is free from all claims whatsoever, except as noted.

THIS AGREEMENT CONTAINS THE OPENING AND CLOSING COSTS, FEES AND CHARGES, THE INSURANCE TO BE PROVIDED BY BUYER, THE LOCATION OF THE HOME, THE TRAILER HOOKUP AND THE BUYER'S RESPONSIBILITIES.

BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAS/HAVE READ AND UNDERSTANDS THE BASIS OF THIS AGREEMENT.

THIS AGREEMENT CONTAINS A BINDING ARBITRATION PROVISION WHICH MAY BE ENFORCED BY THE PARTIES.

THE UNDERSIGNED AGREE THAT ANY CONTROVERSY OR CLAIM BETWEEN DEALER AND BUYER ARISING OUT OF OR RELATING TO THIS AGREEMENT, OR BREACH THEREOF, SHALL BE SETTLED EXCLUSIVELY BY ARBITRATION IN ACCORDANCE WITH THE COMMERCIAL ARBITRATION RULES THEN IN FORCE OF THE AMERICAN ARBITRATION ASSOCIATION. THE DECISION RENDERED BY THE ARBITRATOR(S) SHALL BE A FINAL AND BINDING RESOLUTION OF THE CONTROVERSY OR CLAIM, WHICH MAY BE ENTERED AS A JUDGEMENT IN ANY COURT HAVING JURISDICTION THEREOF. NEITHER PARTY SHALL SUE THE OTHER WHERE THE BASIS OF THE SUIT IS THIS AGREEMENT, OR BREACH THEREOF, UNLESS THE SUIT CONCERNS THE ENFORCEMENT OF THE DECISION RENDERED BY THE ARBITRATOR(S).

ACKNOWLEDGMENT OF ARBITRATION:

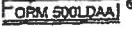
BUYER(S) UNDERSTANDS THAT THIS AGREEMENT CONTAINS AN AGREEMENT TO ARBITRATE, AFTER SIGNING THIS DOCUMENT. BUYER(S) UNDERSTANDS THAT BUYER WILL NOT BE ABLE TO BRING A LAWSUIT CONCERNING ANY DISPUTE THAT MAY ARISE WHICH IS COVERED BY THE ARBITRATION AGREEMENT, UNLESS IT INVOLVES A QUESTION OF CONSTITUTIONAL OR CIVIL RIGHTS. INSTEAD BUYER AGREES TO SUBMIT ANY SUCH DISPUTE TO AN IMPARTIAL ARBITRATOR.

Yulee Custom Homes DEALER SIGNED X _____ BUYER SOCIAL SECURITY NO. _____
 SIGNED X _____ BUYER SOCIAL SECURITY NO. _____

Keep for owners signatures
 ↓

> 2 of the 3 (JTWRS)

Need Sheila Hargis on L.O.A.



Hargis/Fragan

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1907-59 CONTRACTOR Steve Weeks PHONE 904.219.9801

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 1074	Print Name <u>Blenn Whittington</u>	Signature <u>Blenn Whittington</u>
	License #: <u>EC 13602957</u>	Phone #: <u>386 972 1700</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name _____	Signature _____
	License #: _____	Phone #: _____
	Qualifier Form Attached <input type="checkbox"/>	

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.

Hargis / Ingram

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1907-59 CONTRACTOR Steve Wicks PHONE 904.219.9801

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 _____ License # _____	Signature _____ Phone # _____ Qualifier Form Attached <input type="checkbox"/>
✓ MECHANICAL/ A/C <u>1766</u>	Print Name <u>Dwane Ewert</u> License # <u>CAC1818176</u>	Signature <u>[Signature]</u> Phone # <u>(352) 317-0176</u> Qualifier Form Attached <input type="checkbox"/>

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.



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

PERMIT NO. 19-0540
DATE PAID: 7/17/19
FEE PAID: 800.00
RECEIPT #: 1424049

APPLICATION FOR:

- New System
- Existing System
- Holding Tank
- Innovative
- Repair
- Abandonment
- Temporary

APPLICANT: Shelia Hargis, Traci Hargis William Ingram

AGENT: Jeff Hardee (Hardee Environmental and Permitting)

TELEPHONE: 352-949-0592

MAILING ADDRESS: 6450 NW 72 Lane, Chiefland, FL 32626 EMAIL: JeffHardeeHEP@aol.com

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: MA BLOCK: MA SUBDIVISION: MA PLATTED: _____

PROPERTY ID #: 12-45-15-00347-001 ZONING: _____ I/M OR EQUIVALENT: [Y/N]

PROPERTY SIZE: 5.02 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] DISTANCE TO SEWER: MA FT

PROPERTY ADDRESS: 338 Kregel Way Lake City

DIRECTIONS TO PROPERTY: Pharmant to T/L Drive Rd T/R
Brim T/R Kregel Way ~ 700 to MH on left

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	MH	3	228	3 Baffle
2	Replanning MH	3	789	
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: [Signature]

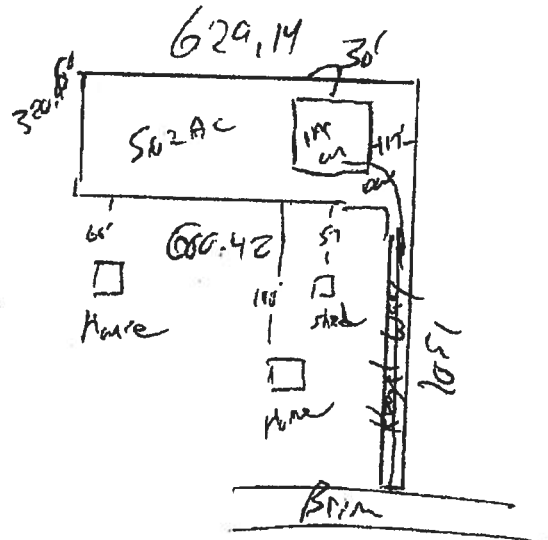
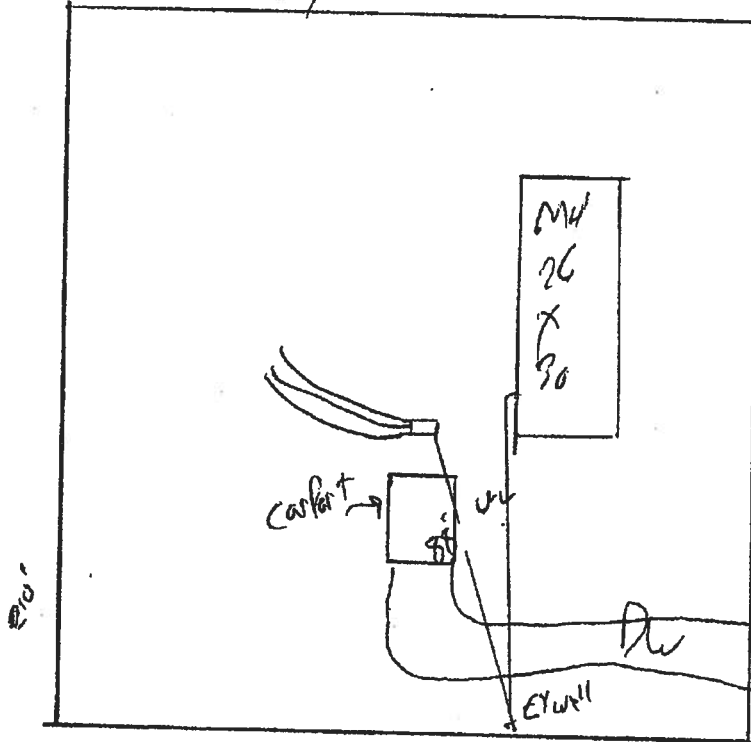
DATE: 7-16-19

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0540

Hargis / Angan

PART II - SITEPLAN



Notes:

Site Plan submitted by: *[Signature]*

Plan Approved: *[Signature]*

By: *[Signature]*

Not Approved _____

Date 7/18/19

EST

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave. Suite B-21, Lake City, FL 32955
 Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Stephen E Weeks, give this authority and I do certify that the 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	Agents Company Name
Jeffrey Hardee	<i>JH Hardee</i>	HEP

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

Stephen E Weeks License Holders Signature (Notarized) 7H1025306 License Number 7-17-19 Date

NOTARY INFORMATION:

STATE OF Florida COUNTY OF: Levy

The above license holder, whose name is Stephen E Weeks personally appeared before me and is known by me or has produced identification (type of I.D.) FLID on this 17 day of July 2019

Holly Bryant
 NOTARY'S SIGNATURE

(Seal/Stamp)



District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky 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: **7/23/2019 2:46:37 PM**
Address: **338 SW KEGEL Way**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **00347-006**

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) 758-1125
Email: gis@columbiacountyfla.com

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Sheila Jane Hargis,
as the owner of the below described property:

Property tax Parcel ID number 12-45-15-00347-006

Subdivision (Name, lot, Block, Phase) _____

Give my permission for Traci Hargis + William Ingram to place a

Circle one - Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home /
Barn - Shed - Garage / Culvert / Other _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Sheila Jane Hargis 7-30-19
Owner Signature Date

Owner Signature Date

Owner Signature Date

Sworn to and subscribed before me this 30 day of July, 20 19. This

(These) person(s) are personally known to me or produced ID DL.
(Type)

Jeffrey Wayne Hardee
Notary Public Signature

Notary Stamp/

