

Parcel:
28-3S-16-02366-014 (8889)

Owner & Property Info

Result: 1 of 1

Owner	SMITH DONNA L 192 NW CAROL PL LAKE CITY, FL 32055		
Site	192 NW CAROL PI, LAKE CITY		
Description*	COMM SW COR OF NE1/4 OF SE1/4, E 396.18 FT TO E R/W MADELIENE ST, N 635 FT, E 344.50 FT FOR POB, CONT E 151.99 FT, S 476.59 FT, W 121.26 FT, N 476.25 FT TO POB. 492-397, 925-200, WD 1100-2473, WD 1220-2242, WD 1267-413, QC 1387-2234		
Area	1.55 AC	S/T/R	28-3S-16
Use Code**	MOBILE HOME (0200)	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

Donna Smith

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>James Dale Williams</u>	Signature 
	License #: <u>EC 13002957</u>	Phone #: <u>386-362-2035</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Michael Boland</u>	Signature 
	License #: <u>CAC 1817716</u>	Phone #: <u>352-351-3926</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

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



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
 135 NE Hemando Ave, Suite B-21, Lake City, FL 32055
 Phone 386-758-1008 Fax 386-758-2160

I, Dale Williams (license holder name), licensed qualifier
 for Affordable Electric (company name), do certify that
 the below referenced person(s) listed on this form is/are employed by me directly or through an
 employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
 Florida Statutes Chapter 468, and the said person(s) 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 Person Authorized	Signature of Authorized Person
1. Dale Burd	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
 under my license and fully responsible for compliance with all Florida Statutes, Codes, and
 Local Ordinances. I understand that the State and County Licensing Boards have the power and
 authority to discipline a license holder for violations committed by him/her, his/her agents,
 officers, or employees and that I have full responsibility for compliance with all statutes, codes
 and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must notify this department in writing of the changes and submit a new letter of authorization
form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
use your name and/or license number to obtain permits.

License Holders Signature (Notarized)

EC13007092 1-07-19
 License Number Date

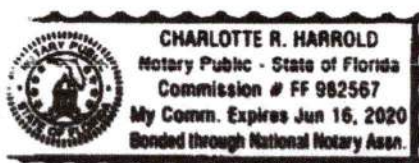
NOTARY INFORMATION:

STATE OF Florida COUNTY OF Columbia

The above license holder, whose name is James D. Williams
 personally appeared before me and is known by me or has produced identification
 (type of I.D.) _____ on this 7th day of January, 2019

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

I, Michael A Boland (license holder name), licensed qualifier
for ACE A/C & Ocala, LLC (company name), do certify that
the below referenced person(s) listed on this form is/are contracted/hired by me, the license
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said
person(s) is/are under my direct supervision and control and is/are authorized to purchase and
sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dale Eard</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Rocky Ford</u>	3. <u>[Signature]</u>
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or
officer(s), you must notify this department in writing of the changes and submit a new letter of
authorization form, which will supersede all previous lists. Failure to do so may allow
unauthorized persons to use your name and/or license number to obtain permits.

[Signature]
Licensed Qualifiers Signature (Notarized)

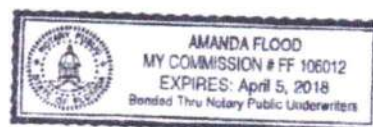
CAC1817716 License Number
ES120926 Date
11/17/15

NOTARY INFORMATION:
STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 17th day of November, 20 15

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



PERMIT WORKSHEET

page 1 of 2

PERMIT NUMBER

Installer Brent Strickland License # IH 1104218

Installer Mobile Phone # 386-365-7043

Address of home being installed

192 NW Carol Place
LAKELAND, FL 32005

Manufacturer

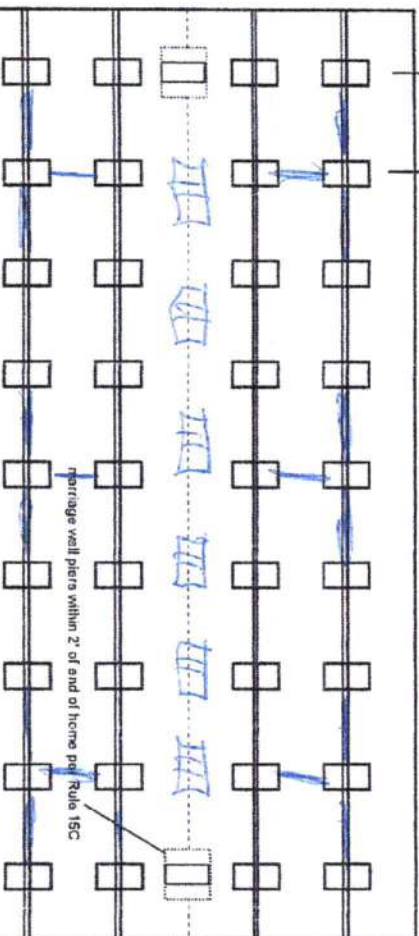
LIVE OAK Length x width 76x28

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

BS



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 # 88702

Triple/Quad ☐ Serial # LOHKA 10022155 ARS

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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'	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

4 ft ☒ 5 ft ☐

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer EVER-HOLD

Longitudinal Stabilizing Device w/ Lateral Arms

Sidewall Longitudinal Marriage wall Shearwall

Number 4

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

BOB STICKLER

Date Tested

6-4-2022

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. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 4x4 Length: 5' Spacing: 16"
Walls: Type Fastener: 4x4 Length: 4' Spacing: 16"
Roof: Type Fastener: 4x4 Length: 4' 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 B.S.

Type gasket FOAM
Pg. 28

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 ☒

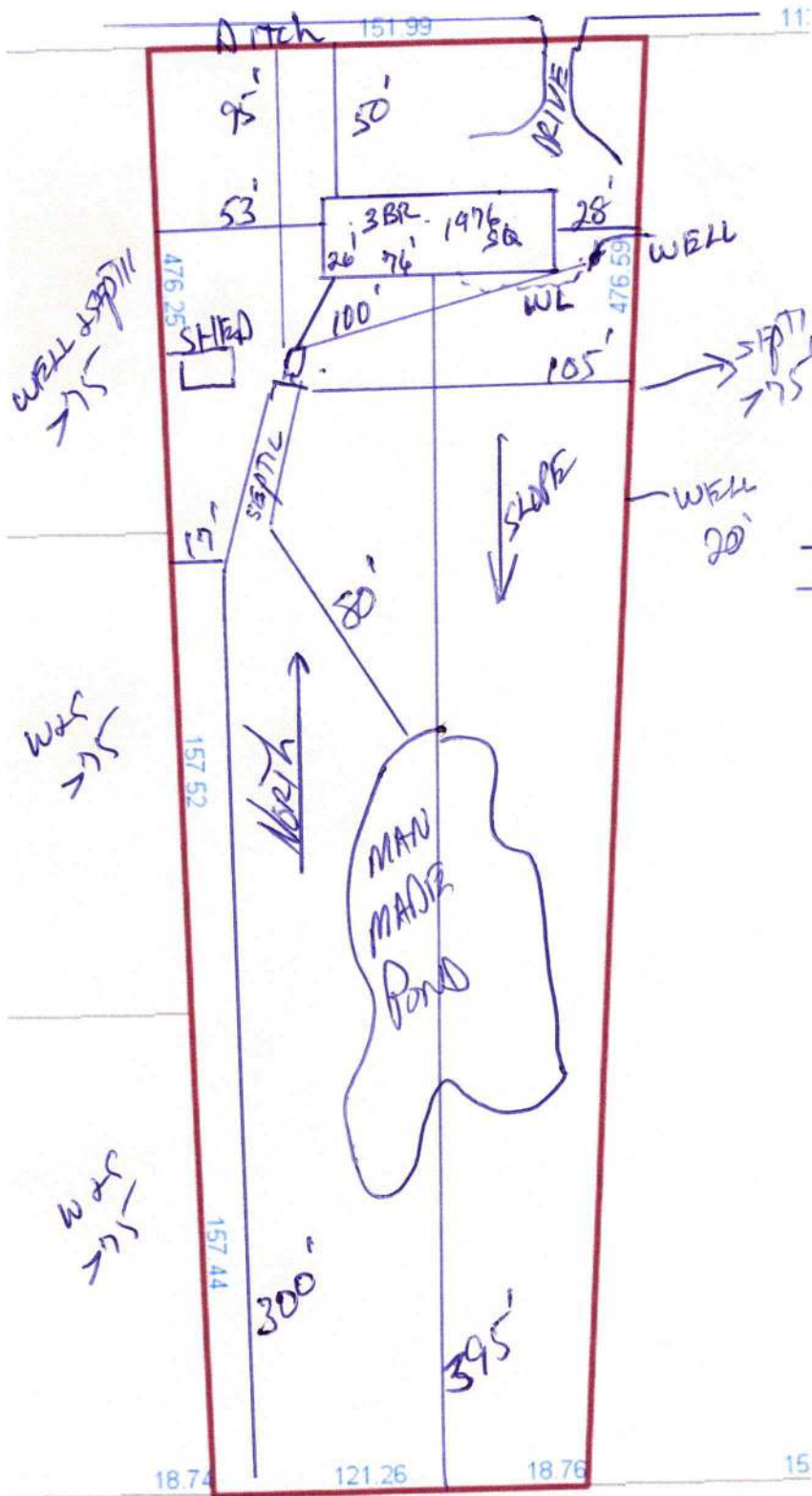
Miscellaneous

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

Bob Stickler Date 6-4-2022



1" = 40'

Smith, Donna

PROPOSED GOING IN SAME FOOTPRINT AS EXISTING

[Signature] 6/2/22

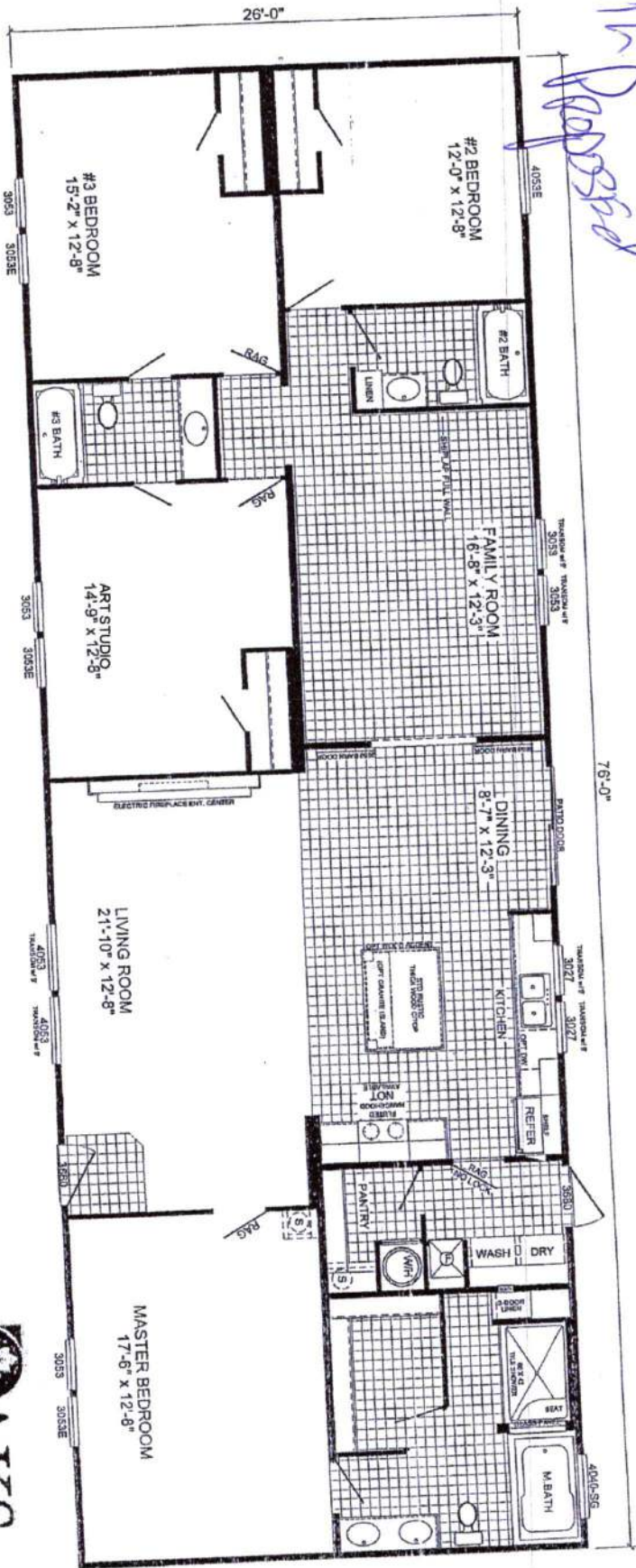
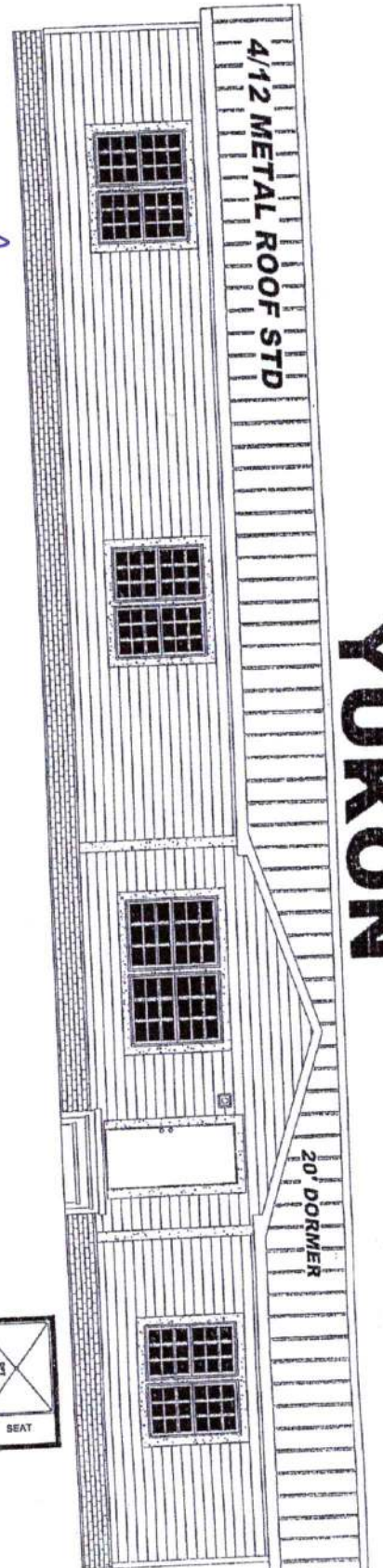
#18

Smith Repressed

YUKON

4/12 METAL ROOF STD

20' DORMER



L-27641 - SIG - OAK
3-BEDROOM / 3-BATH
28 x 80 - Approx. 1976 Sq. Ft.

Date: 05/27/20
 * All room dimensions include closets and square footage figures are approximate.
 * Transom windows are available on optional 9'-0" sidewall houses only.
 * Underpinning shown is optional.

6/2/12

OAKS
Signature
 30



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: **6/22/2020 2:42:09 PM**

Address: **192 NW CAROL PL**

City: **LAKE CITY**

State: **FL**

Zip Code **32055**

Parcel ID **28-3S-16-02366-014**

REMARKS: **This address is a verified address in the county's addressing system.**

Verification ID: 7e79a3ff-5076-4e22-800a-96c774ef25ac

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