

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

Installer

KOONLEY RAGLE license # SH/10252881

911 Address where home is being installed

Manufacturer

Scotbilt

Length x width

32 x 25.5

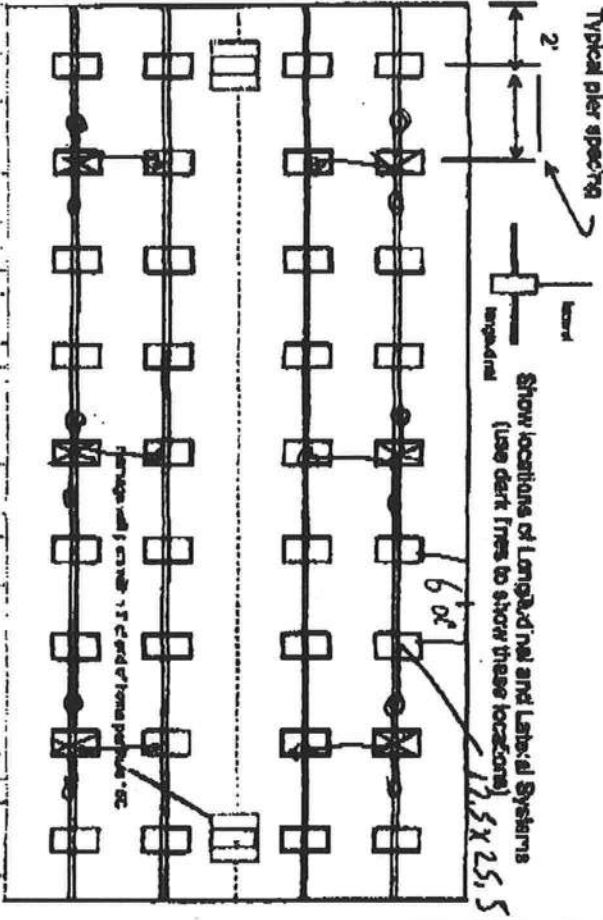
NOTE:

If home is a single wide fit out one half of the blocking plan
If home is a triple or quad wide attach in remainder of home

Underland Lateral Arm Systems cannot be used on any home (new or used)
where the sidewall has exceed 5 ft 4 in.

Installer's initials

LF



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 #



492

Triple/Quad



Serial #



SBHA1130803379AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	18' 1/2" x 18' (324)	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'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

17.5 x 25.5

Perimeter pier pad size

16 x 16

Other pier pad sizes (required by the mfg.)

16 x 16

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 6-8' pier pad sizes below.

Opening

Pier pad size

ANCHORS

Pad Size	Sq ft
16 x 16	256
18 x 18	324
18.5 x 18.5	342
18 x 22.5	405
17 x 22	374
15.5 x 25.5	396
15.5 x 28.5	441
17.5 x 25.5	450
17.5 x 28.5	506
24 x 24	576
28 x 28	784

FRAME TIES

within 2' of end of home spaced at 9' 4" oc

OTHER TIES

Longitudinal Stabilizing Device (LSD)
Manufacturer: OLY
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer: OLY

Side wall
Longitudinal
Marriage wall
Shearwall
Number
30

POCKET PENETROMETER TEST

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

X 1500 X 1500 X 1500

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 1500

TORQUE PROBE TEST

The results of the torque probe test is 285 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 cantilever 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.

RL Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

ROONEY FEAKE

Date Tested

6-15-10

Electrical

Connect electrical conduits between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 2

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 1

Site Preparation

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

Fastening multi-wide units

Floor: Type Fastener: 3/8" Length: 6" Spacing: 18"
Walls: Type Fastener: 2 1/2" Length: 3" Spacing: 24"
Roof: Type Fastener: 3/4" Length: 4 1/2" Spacing: 12"
For used horses, 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 connections required

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

RL

Type gasket: FOAM

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of Hopperbeam Yes ☒

Weatherproofing

The boilerboard will be sealed and/or taped. Yes ☒ Pg. 10
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

Miscellaneous

Siding to be installed. Yes ☒ No ☐
Dryer vent installed outside of siding. Yes ☒ N/A
Range downflow vent installed outside of siding. 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

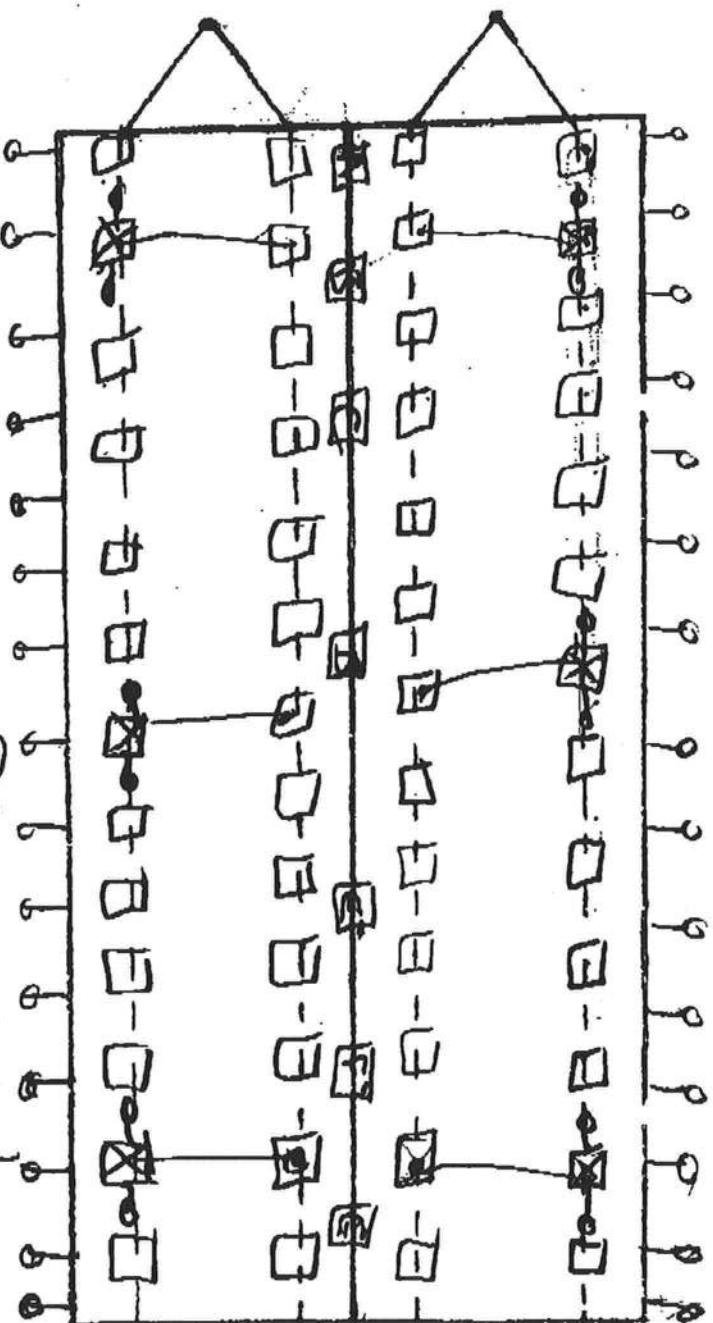
Installer Signature

RL

Date 6-15-10

SCOTT DUE N
32x76 DM
BLOCKING

DIAGRAM



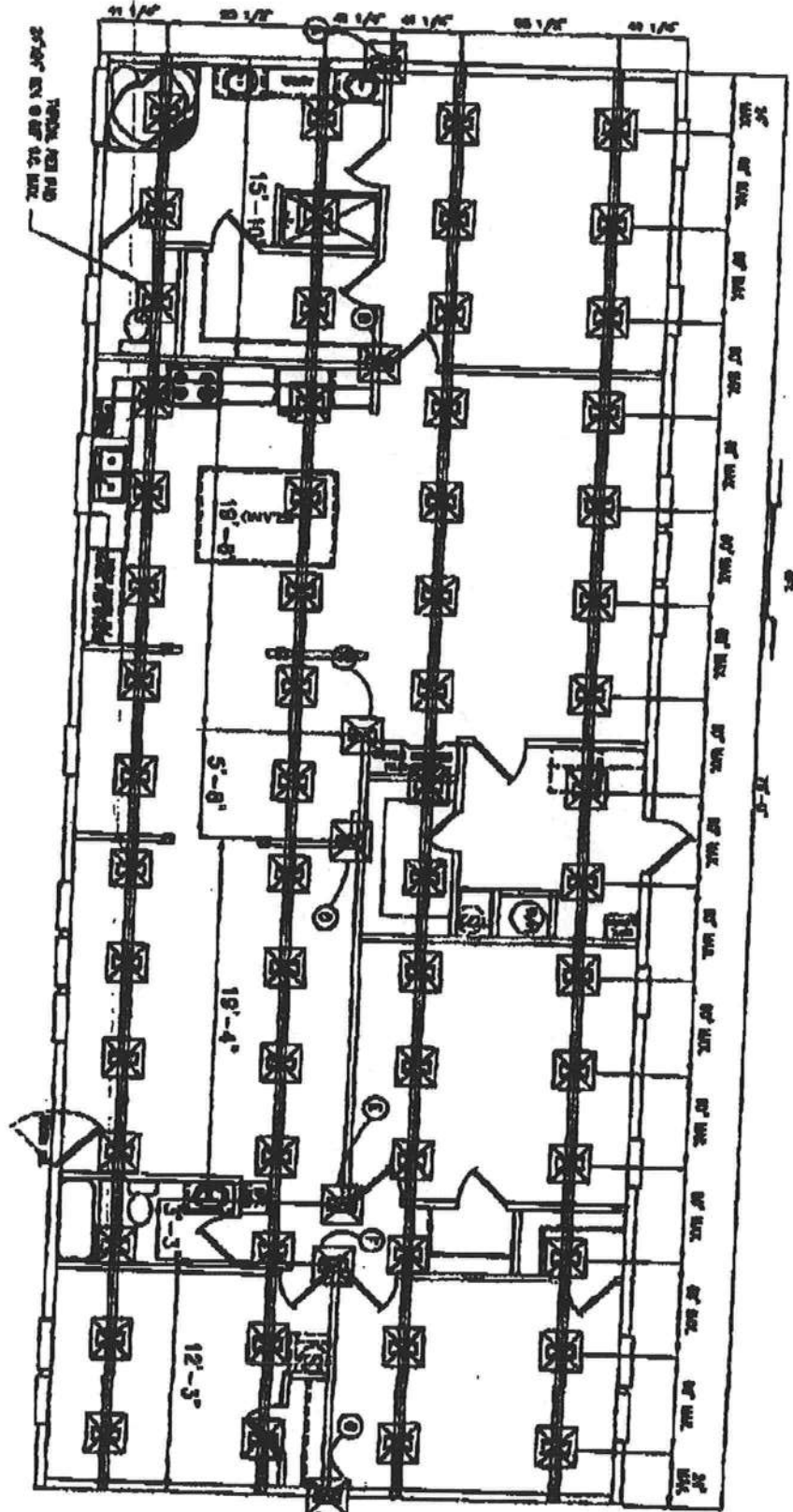
CENTRE
BLOCKING

- A) 23.5 x 31.5
- B) 23.5 x 31.5
- C) 23.5 x 31.5
- D) 23.5 x 31.5
- E) 23.5 x 31.5
- F) 23.5 x 31.5
- G) 23.5 x 31.5

- - PADS 17.5 x 25.5 6'0" c. 13 PER ALL
- ☒ - LSO x 6 SYSTEMS (Olivea Tech)
- - ANCHORS - 4" @ 5'4" o/c. 15 PER SIDE.

FLORIDA MULTI-WIDE PIER BLOCKING DIAGRAM

ATTACHED FOR USE WITH THE SOIL PRESSURE



Pier	Pier Load (lbs)	Required Footing Area (sq. ft.) for soil pressure specified
A	3562	1800 PSF 1500 PSF 2000 PSF 2500 PSF 3000 PSF
B	5120	868 558 411 326 270
C	3562	618 398 293 232 192
D	3562	618 398 293 232 192
E	4452	761 489 361 286 237
F	4006	689 443 327 259 214

HERITAGE

3276214HER

LAST SIGN. REVIEW DATE: 4/4

THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION
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Authorized by Act of October 3, 1917

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COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: ron_craft@columbiacountyfla.com



ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

A Residential or Other Structure(s) on Parcel Number:
24-4S-17-08728-011 (AKA LOT 19 OF AN UNREC S/D)

Address Assignment(s):
4773 SE COUNTY ROAD 252, LAKE CITY, FL, 32025

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.



Columbia County Property Appraiser

DB Last Updated: 5/6/2010

2009 Tax Roll Year
[Tax Collector](#)
[Tax Estimator](#)
[Property Card](#)
[Parcel List Generator](#)
[Interactive GIS Map](#)
[Print](#)
Parcel: 24-4S-17-08728-011
[<< Next Lower Parcel](#)
[Next Higher Parcel >>](#)

Owner & Property Info

Owner's Name	DUREN SCOTT L & ANNA T		
Mailing Address	551 SE OLD COUNTRY CLUB RD LAKE CITY, FL 32025		
Site Address	4773 SE COUNTY ROAD 252		
Use Desc. (code)	MISC RES (000700)		
Tax District	3 (County)	Neighborhood	24417
Land Area	15.390 ACRES	Market Area	04
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
THE E 296.63 FT OF THE W 813.55 FT OF SW1/4 OF SE1/4 LYING N OF CR-252 (AKA LOT 18 OF UNREC S/D) & ALSO THE EAST 403.79 FT OF SW1/4 OF SE1/4 AS LIES N OF CR-252 (AKA LOT 19 OF AN UNREC S/D). ORB 428-637, ORB 545-590, 793-547, 918-541, 919-716, WD 1043-2222, WD 1051-1005, WD 1185-1777,			



Search Result: 1 of 1

Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$22,989.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (1)	\$1,440.00
Total Appraised Value		\$24,429.00
Just Value		\$24,429.00
Class Value		\$0.00
Assessed Value		\$24,429.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$24,429 Other: \$24,429 Schl: \$24,429	

2010 Working Values

NOTE:
2010 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
12/9/2009	1185/1777	WD	V	Q	01	\$50,000.00
5/23/2005	1051/1005	WD	V	U	09	\$80,000.00
4/15/2005	1043/2222	WD	V	Q		\$50,000.00
1/30/2001	919/716	WD	V	Q		\$26,000.00
1/15/2001	918/541	WD	V	U	08	\$15,000.00
7/15/1994	793/547	WD	V	U	12	\$16,500.00
7/1/1984	545/590	WD	V	Q		\$13,800.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0294	SHED WOOD/	2005	\$1,440.00	0000192.000	12 x 16 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000700	MISC RES (MKT)	5.38 AC	1.00/1.00/1.00/1.00	\$2,700.95	\$14,531.00
000000	VAC RES (MKT)	10.01 AC	1.00/1.00/1.00/1.00	\$2,700.95	\$27,036.00
009945	WELL/SEPT (MKT)	1 UT - (00000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 5/6/2010

1 of 1

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

PK 0919 PG0716

11275

OFFICIAL RECORDS

01-01844

FILED AND RECORDED IN PUBLIC
RECORDS OF COLUMBIA COUNTY, FL.

01 JAN 31 PM 2:48

Warranty Deed

Individual to Individual

THIS WARRANTY DEED made the 30th day of January, 2001

KAY M. PRIEST, AND HER HUSBAND, ROBERT L. PRIEST
hereinafter called the grantor, to

SCOTT L. DUREN, AND HIS WIFE ANNA T. DUREN
whose post office address is: RT. 7 Box 377-K, Lake City, FL 32055
hereinafter called the grantee:



(Wherever used herein the terms "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 corporation)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliena, remises, releases, conveys, and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida, viz: Parcel ID# R08728-011

SEE EXHIBIT "A" ATTACHED HERETO AND BY THIS REFERENCE MADE A PART
HEREOF.

TOGETHER with all 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, 2000.

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:

Charity M. Mathis
Witness: Charity M. Mathis

Lyndi Skinner
Witness: Lyndi Skinner

Kay M. Priest
Kay M. Priest

SSN: 262-92-0141

Robert L. Priest
Robert L. Priest

SSN: 262-68-4346

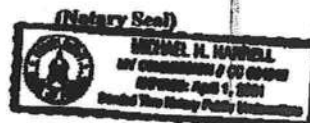
STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 30th day of January, 2001 by KAY M. PRIEST, AND HER HUSBAND, ROBERT L. PRIEST personally known to me or, if not personally known to me, who produced Driver's License No. _____ for identification and who did not take an oath.

Prepared by:
Michael H. Harrell
Abstract & Title Services, Inc.
420 W. Baya Avenue
Lake City, FL 32025

Notary Public

Documentary Stamp \$ 182.00
Intangible Tax 0
P. Deven Owen
Clerk of Court
[Signature]



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EXHIBIT "A"

BK 0919 PG 0717

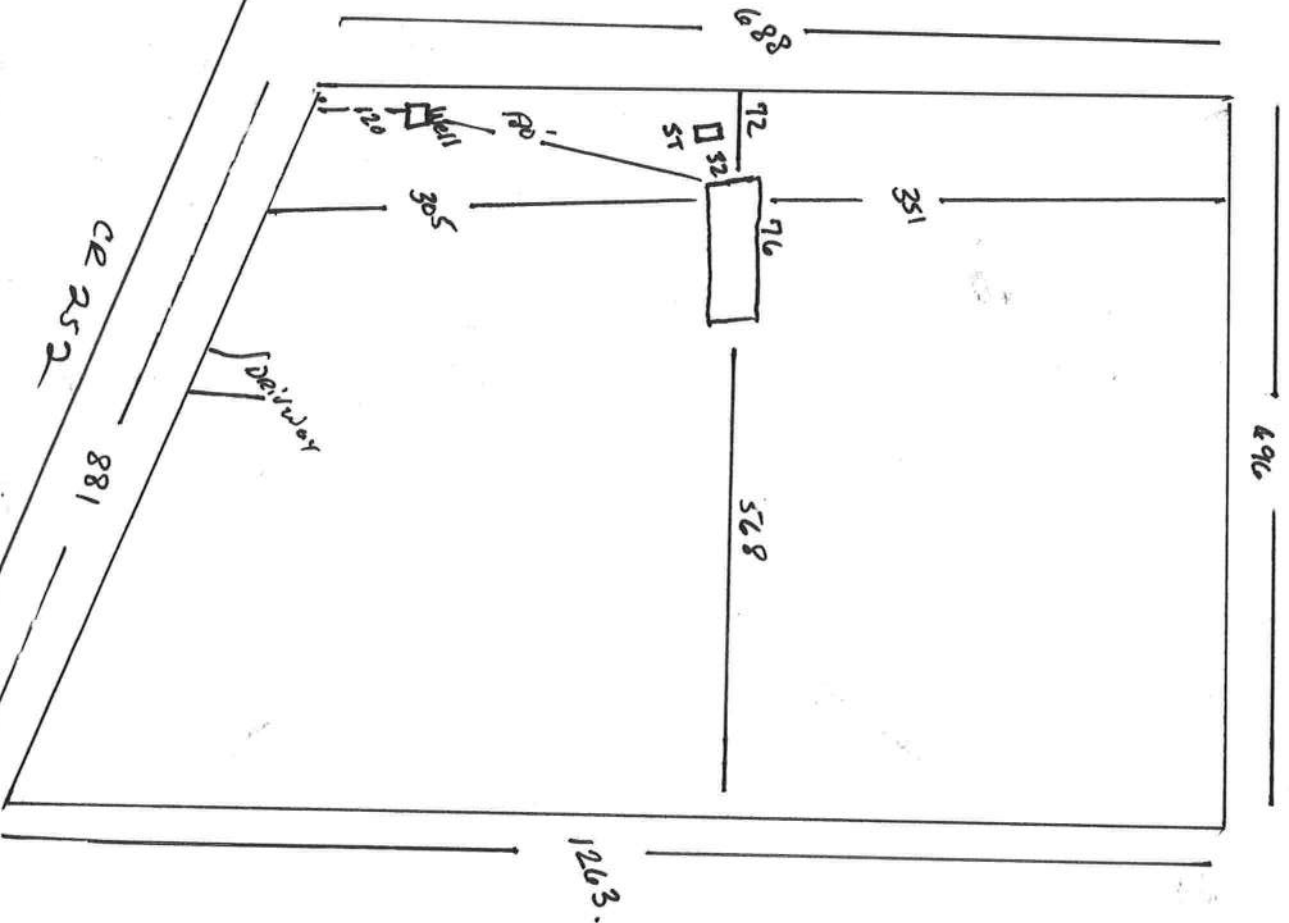
ATS # 11275

OFFICIAL RECORDS

Township 4 South, Range 17 East

Section 24: The East 296.63 feet of the West 813.55 feet of the SW $\frac{1}{4}$ of the SE $\frac{1}{4}$ as lies North of Highway No. S-252 (measured along the North line of said SW $\frac{1}{4}$ of the SE $\frac{1}{4}$), Columbia County, Florida.

N
W + E
S



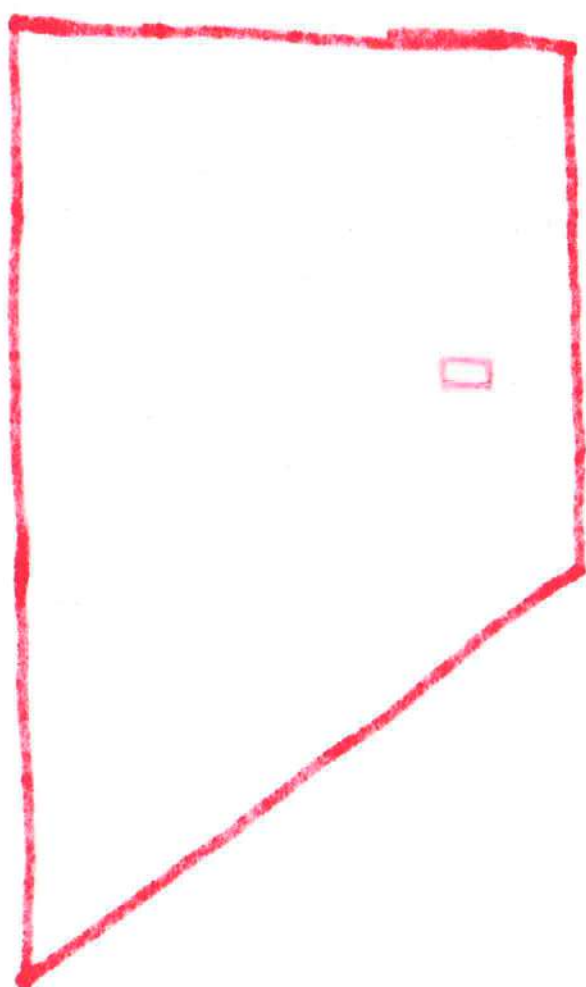
Scott Duren

911 address:

4773 SE CR 252
Lake City FL



1006-53



1000-23

06-18-'10 14:20 FROM-Atlantic / Prime

1-800-859-3709

T-441 P001/001 F-478

Jun 18 10 12:02p

Wholesale Homes of FL

1(386)364-1386

p.2

06-18-'10 09:27 FROM-Atlantic / Prime

1-800-859-3709

1-934

r002/002 p.2

JUN 18 10 09:00a

Wholesale Homes of FL

1(386)364-1386

p.2

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR Rodney FeaglePHONE 352-949-8383

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.

<input checked="" type="checkbox"/> ELECTRICAL 750 700	Print Name: <u>Robert Grant</u> License #: <u>EC0002733</u>	Signature: <u>Robert Grant</u> Phone #: <u>800-859-3708</u>	Lib out 21 Lib out 7
<input checked="" type="checkbox"/> MECHANICAL/A/C 701 700	Print Name: <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature: <u>Robert Grant</u> Phone #: <u>800-859-3708</u>	
<input checked="" type="checkbox"/> PLUMBING/GAS 703	Print Name: <u>Rodney Feagle</u> License #: <u>IH0000526</u>	Signature: <u>Rodney Feagle</u> Phone #: <u>352-949-8383</u>	
ROOFING	Print Name: _____ License #: _____	Signature: _____ Phone #: _____	
SHEET METAL	Print Name: _____ License #: _____	Signature: _____ Phone #: _____	
FIRE SYSTEM/SPRINKLER	Print Name: _____ License #: _____	Signature: _____ Phone #: _____	
SOLAR	Print Name: _____ License #: _____	Signature: _____ Phone #: _____	

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLOC ERECTOR			

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.

Contractor Form; Sub-contractor Form: WUY

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # 10-0210-N
DATE PAID 4-23-10
FEE PAID \$ 310.00
RECEIPT # 1255231
CR # 08-4879

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Temporary/Experimental System
☐ Repair ☐ Abandonment ☐ Other (Specify) _____

APPLICANT: SCOTT DURENTELEPHONE: 397-5377AGENT: PAUL LLOYDMAILING ADDRESS: 4773 SE CR. 262CITY: LAKE CITYSTATE: FL ZIP: 32025

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE
SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION (IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED)

LOT: _____ BLOCK: _____ SUBDIVISION: MEETS & BOUNDS DATESUBD: _____

PROPERTY ID #: 24-4S-17-08728-011 [Section/Township/Range/Parcel] ZONING: AG

PROPERTY SIZE: 15.39 ACRES (Sqft/43560) PROPERTY WATER SUPPLY: ☒ PRIVATE ☐ PUBLIC

PROPERTY STREET ADDRESS: 4773 SE CR. 262DIRECTIONS TO PROPERTY: 41 SOUTH TURN LEFT ON CR 262, CROSS CR 245 APP. 1/2 MILE ON LEFT.

BUILDING INFORMATION

☒ RESIDENTIAL☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	<u>MOBILE HOME</u>	<u>4</u>	<u>2341</u>	<u>4</u>	
2					
3					
4					

Held for revisions, rec'd 5/28

☒ Garbage Grinders/Disposals
☒ Ultra-low Volume Flush Toilets

☐ Spas/Hot Tubs
☐ Other (Specify) _____

☐ Floor/Equipment Drains

APPLICANT'S SIGNATURE: Paul LloydDATE: 4/23/10

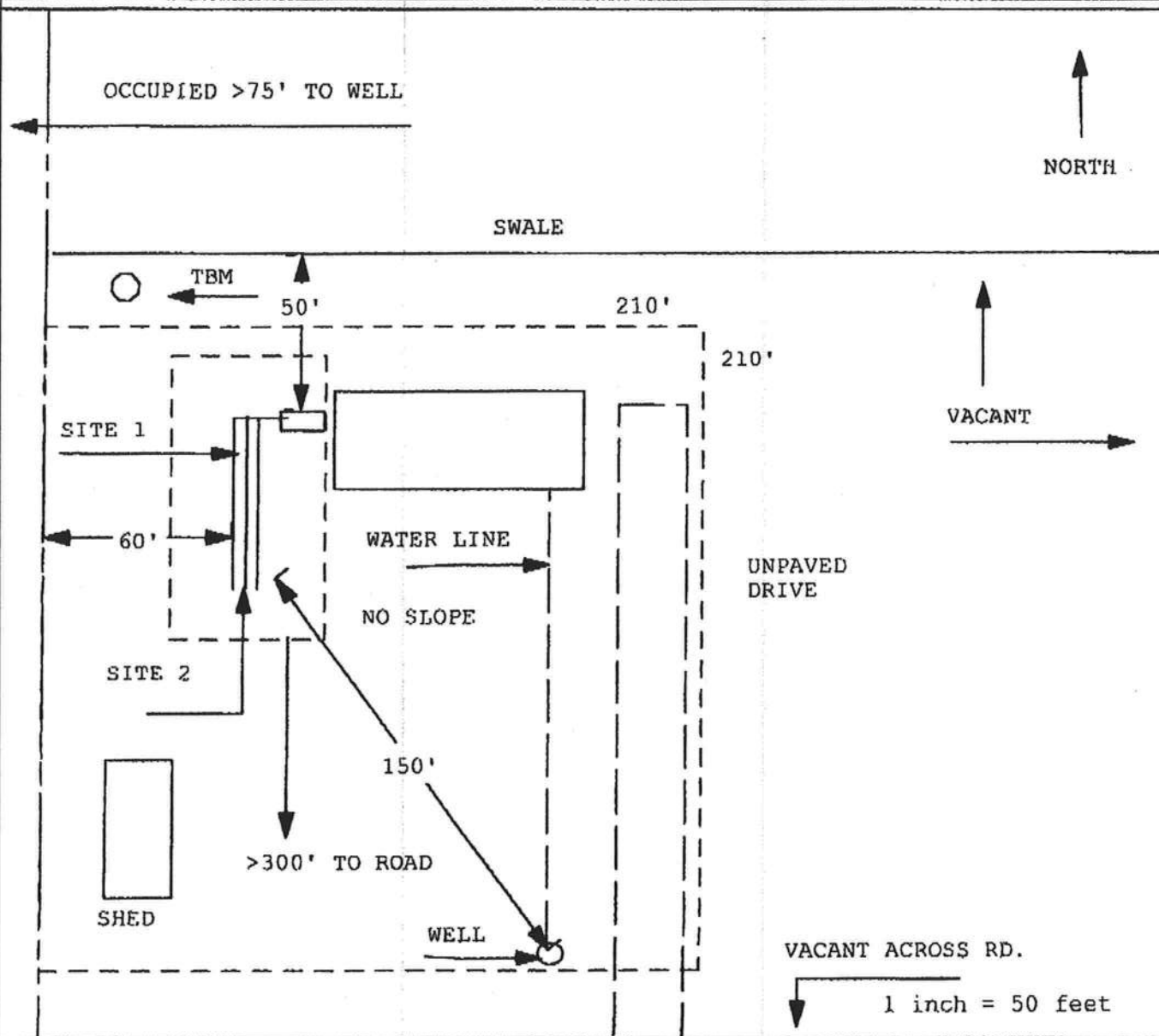
HRS-H Form 4015 March 1992 (Obsoletes Previous Editions Which May Not Be Used)

Page 1 of 3

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 10-0210

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. Lloyd Date 4/22/10
Plan Approved ☒ Not Approved ☐ Date 4-28-10

By Sally Ford - EM Director - Columbia CPHU

Notes: _____





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, RODNEY FEAGLE, give this authority for the job address show below
Installer License Holder Name

only, 4713 SE CR 252 Lake City, FL, 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)
T. Wayne Johnson		<input checked="" 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
		<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.

License Holders Signature (Notarized)

IH 0000526
License Number

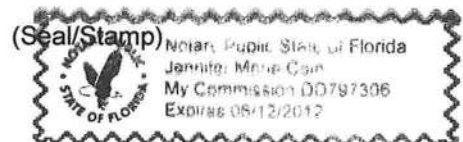
June 17, 2010
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Rodney Feagle, personally appeared before me and is known by me or has produced identification (type of I.D.) Florida D.C. on this 17 day of June, 20 10.

NOTARY'S SIGNATURE



**Florida Mobile Home Installer
License**

LICENSEE: JERRY L. FENCE
LICENSE NUMBER: 001057801
EXPIRATION DATE: 10/1/2009

EXPIRATION DATE: 06/30/2011

ISSUED PURSUANT TO CHAPTER 380, FLORIDA STATUTES, AS AN
OPTIONAL INSTALLER IN MOBILE HOMES AT THE ABOVE DESCRIBED LOCATION.

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

492	
LABEL #	DATE OF INSTALLATION
RODNEY L. PEAGLE	
NAME	
IH / 1025288 /	42
LICENSE #	ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES, BUREAU OF MOBILE HOME AND RECREATIONAL VEHICLE CONSTRUCTION.	

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2
YEARS. YOU ARE REQUIRED
TO PROVIDE COPIES WHEN
REQUESTED.

SCOTT DUREN
32x76 D/W.

COPY OF DECAL TO BE
PUT ON HOME AT SET.

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, RODNEY FEAGLE, license number IH 0000526

state that the installation of the manufactured home for owner

SCOTT DUREN at
911 Address: 4773 SE CR 252 City Lake City

will be done under my supervision.

Signed: [Signature]
Mobile Home Installer

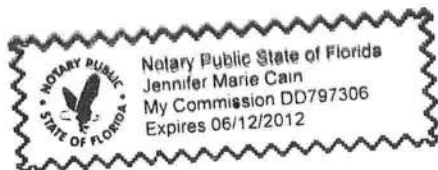
Sworn to and described before me this 17 day of June 2000

[Signature]
Notary public

Jennifer Marie Cain
Notary Name

Personally known

DL ID ✓



DATE 06/28/2010

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction**PERMIT**
000028694

APPLICANT T. WAYNE JOHNSON PHONE 364-8016

ADDRESS 1410 E. HOWARD ST. LIVE OAK FL 32064

OWNER SCOTT DUREN PHONE 397-5377

ADDRESS 4773 SE CR 252 LAKE CITY FL 32055

CONTRACTOR RODNEY FEAGLE PHONE 352 281-2156

LOCATION OF PROPERTY 41S, TL ON CR 252, PAST PRICE CREEK, 1/2 MILE ON
LEFT, DRIVEWAY OPENS TO LARGE CLEARING, POND 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 A-3 MAX. HEIGHT

Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 24-4S-17-08728-011 SUBDIVISION

LOT BLOCK PHASE UNIT 0 TOTAL ACRES 15.39

IH0000526 T. Wayne Johnson
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

EXISTING 10-210 BK HD Y

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROADCheck # or Cash CASHIERS CHECK**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by

Framing Insulation
date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by

Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 48.88 WASTE FEE \$ 67.00

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ **TOTAL FEE** 490.88

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 RECEIVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECEIVED AN APPROVED INSPECTION WITHIN 180 DAYS OF THE PREVIOUS INSPECTION.

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

