

DATE 08/19/2004

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000022215

APPLICANT ROBERT SHEPPARD

PHONE 623-2203

ADDRESS RT 19 BOX 1440

LAKE CITY

FL 32025

OWNER ROBERT GETZAN

PHONE 719-7121

ADDRESS 172 SE VALORIE COURT

LAKE CITY

FL 32025

CONTRACTOR MELVIN SHEPPARD

PHONE 623-2203

LOCATION OF PROPERTY HIGHWAY 100, TR ON 245, TR SHARON LANE, TL ON BONNIE WAY

TL ON BENNY LANE, TR ON VALERIE CT., 2ND ON RIGHT

TYPE DEVELOPMENT MH, UTILITY

ESTIMATED COST OF CONSTRUCTION

.00

HEATED FLOOR AREA

TOTAL AREA

HEIGHT .00

STORIES

FOUNDATION

WALLS

ROOF PITCH

FLOOR

LAND USE & ZONING

RR

MAX. HEIGHT

Minimum Set Back Requirments:

STREET-FRONT

25.00

REAR

15.00

SIDE

10.00

NO. EX.D.U.

0

FLOOD ZONE

A

DEVELOPMENT PERMIT NO.

PARCEL ID 15-4S-17-08355-518

SUBDIVISION

EAGLES RIDGE

LOT 18

BLOCK

PHASE 2

UNIT

TOTAL ACRES

1.00

IH0000035

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

04-0842-N

BK

RK

N

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS: PLAT REQUIRES MIN. FLOOR ELEVATION TO BE SET AT 126'/NEED ELEVATION

CERT. ON FINISHED CONSTRUCTION BEFORE FINAL POWER CAN BE TURNED ON

Check # or Cash 7630

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

Rough-in plumbing above slab and below wood floor

date/app. by

date/app. by

Electrical rough-in

Heat & Air Duct

Peri. beam (Lintel)

date/app. by

date/app. by

date/app. by

Permanent power

C.O. Final

Culvert

date/app. by

date/app. by

date/app. by

M/H tie downs, blocking, electricity and plumbing

date/app. by

Pool

date/app. by

Reconnection

Pump pole

Utility Pole

date/app. by

date/app. by

date/app. by

M/H Pole

Travel Trailer

Re-roof

date/app. by

date/app. by

date/app. by

BUILDING PERMIT FEE \$

.00

CERTIFICATION FEE \$

.00

SURCHARGE FEE \$

.00

MISC. FEES \$

200.00

ZONING CERT. FEE \$

50.00

FIRE FEE \$

11.34

WASTE FEE \$

24.50

FLOOD ZONE DEVELOPMENT FEE \$

CULVERT FEE \$

TOTAL FEE 285.84

126.0' - Need Elevation Certificate on finished construction before final power can be turned on.

Need Recal #

- ☒ Site Plan with Setbacks shown ☒ Environmental Health Signed Site Plan ☐ Env. Health Release
- ☒ Need a Culvert Permit ☒ Need a Waiver Permit ☒ Well letter provided ☒ Existing Well ☒ Water System

lot # 18 Proposed #

- Property ID 15-45-17-08355-518 Must have a copy of the property deed
 - New Mobile Home Used Mobile Home ☒ Year 1995
 - Subdivision Information Exogles Ridge 2 Phase 1 lot 18
 - Applicant Robert W. Betan Phone # 719-7121
 - Address 1173 SW Boadenbough Ln
 - Name of Property Owner Robert W. Betan Phone# 719-7121
 - 911 Address 172 SE Valerie Ct, Lake City, FL 32025
 - Name of Owner of Mobile Home Robert W. Betan Phone # 719-7121
 - Address 1173 SW Boadenbough Ln
 - Relationship to Property Owner Self
 - Current Number of Dwellings on Property 2
 - Lot Size 150 x 290 ± Total Acreage 1
 - Explain the current driveway Asphalt over culvert. Existing
 - Driving Directions SR 160 to CR 345 Turn right go left to hidden Acres turn R shoenlape 1st street on left turn L go to stop sign Turn L go to First Street Turn R 2nd
- Is this Mobile Home Replacing an Existing Mobile Home No One assessment on

PERMIT WORKSHEET

vin Sheppard License # IH000035

172 SE Valje Ct

28x60 Length x width

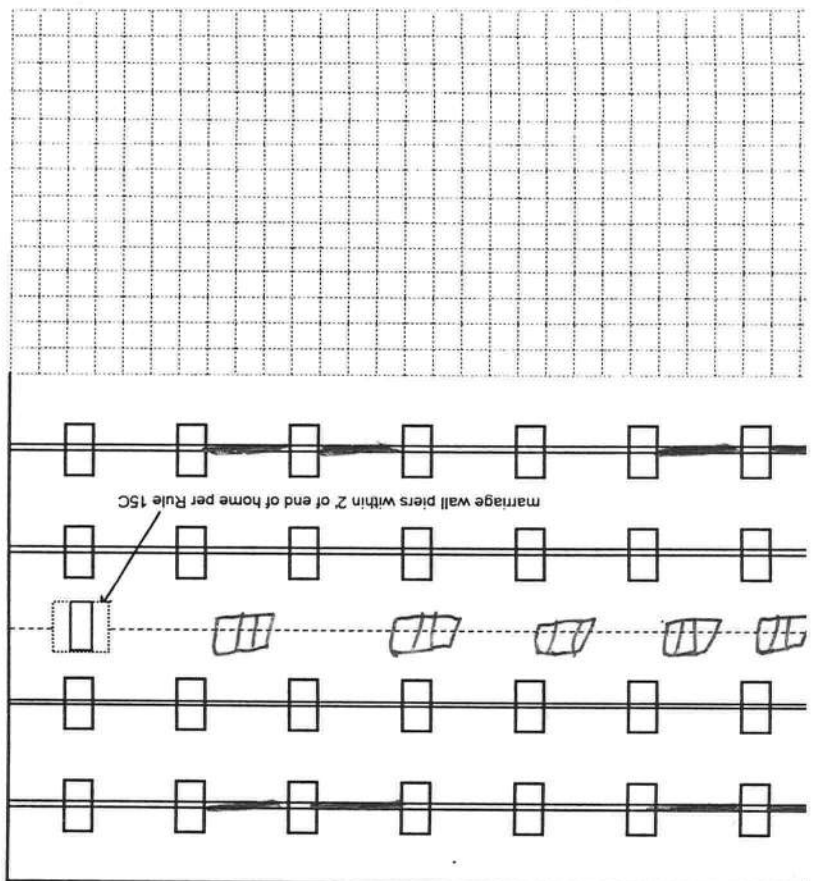
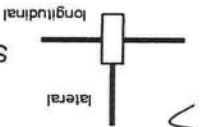
is a single wide fill out one half of the blocking plan is a triple or quad wide sketch in remainder of home

al Arm Systems cannot be used on any home (new or used) ties exceed 5 ft 4 in.

Installer's initials

MS

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footer size (sq in)	16" x 16"	18 1/2" x 18 1/2"	20" x 20"	22" x 22"
1000 psf	3'	4'	5'	6'	6'
1500 psf	4'6"	6'	7'	8'	8'
2000 psf	6'	8'	8'	8'	8'
2500 psf	7'6"	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'
3500 psf	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 10'
Pier pad size 17x22
TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer
Shearwall
Marriage
Longitudinal

0

within 2' spaced

4 ft

Pa

16

16

17

17 3/16

17 1/2

24

26

POP

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NUMBER

Debris and organic material removed ☒ Swale ☐ Pad ☐

Water drainage: Natural ☒

Fastening multi wide units

	Floor:	Walls:	Roof:
Type Fastener:	8 gags	Screws	14 g's
Length:	5"	4"	6"
Spa			
Spa			

For used homes a min. 30 gauge, 8" wide, galvalume will be centered over the peak of the roof and faste roofing nails at 2" on center on both sides of the ce

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of al homes and that condensation, mold, mildew and buckled ma a result of a poorly installed or no gasket being installed. I un of tape will not serve as a gasket.

Installer's initials M

Type gasket Form Pg. 28

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Siding on units is installed to manufacturer's specifications. Y Fireplace chimney installed so as not to allow intrusion of rain

Miscellaneous

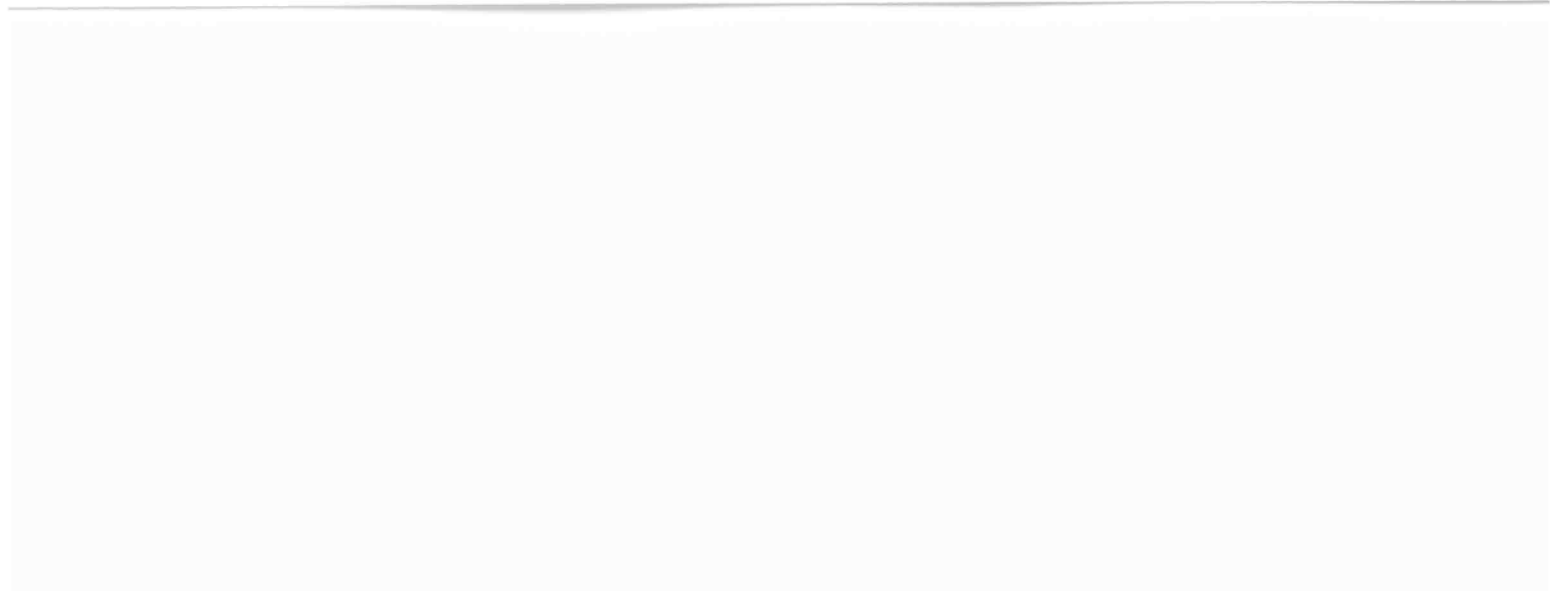
Skirting to be installed. Yes ☒ No ☐ Dryer vent installed outside of skirting. Yes ☒ N/A ☐ Range downflow vent installed outside of skirting. Yes ☒ Drain lines supported at 4 foot intervals. Yes ☒ Electrical crossovers protected. Yes ☒ Other: _____

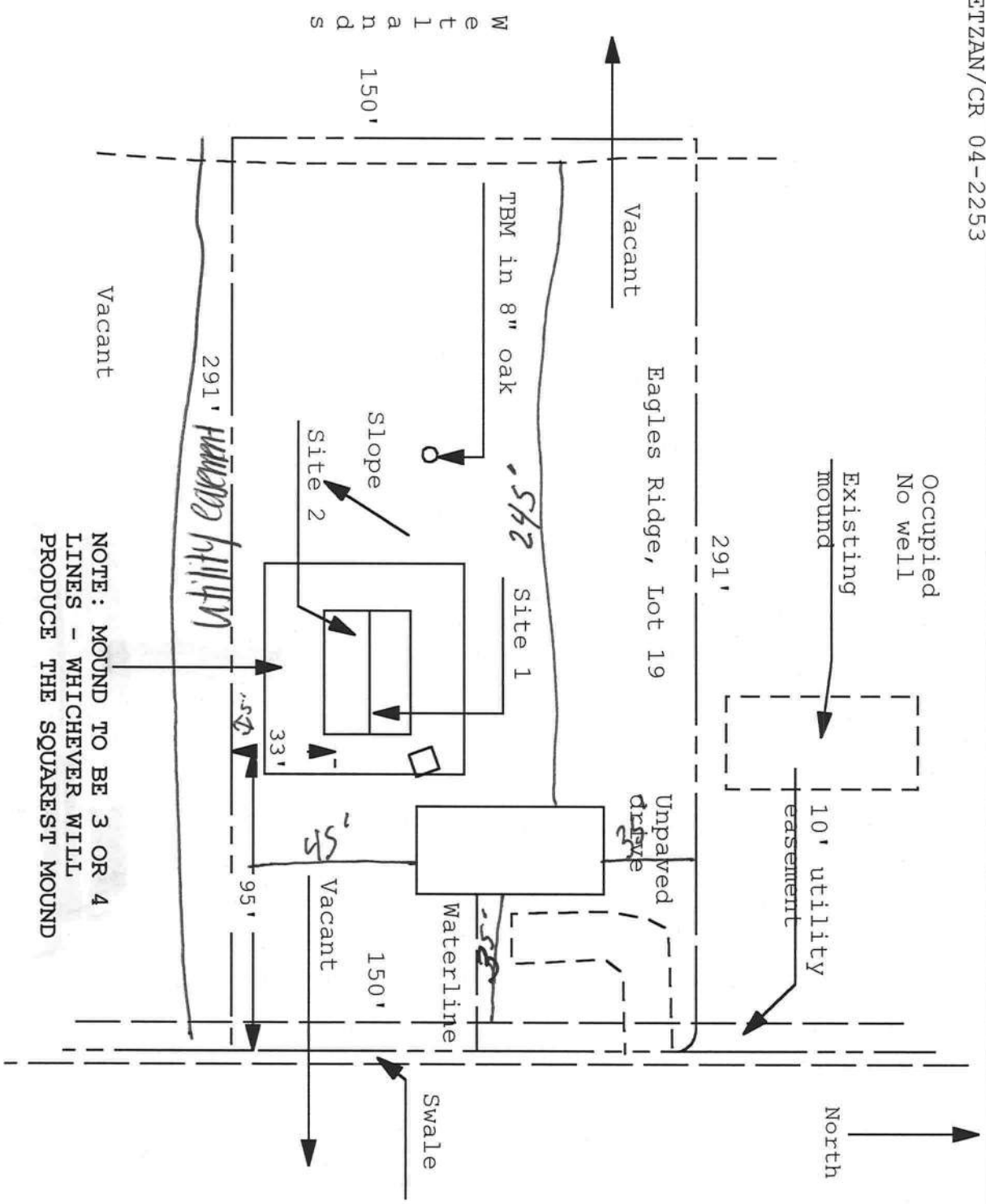
Installer verifies all information given with this pe
is accurate and true based on the
manufacturer's installation instructions and or R

Installer Signature Mark Stepp

POCKET PENETROMETER TEST	
Penetrometer tests are rounded down to <u>1500</u> psf without testing.	X <u>1500</u> X <u>1500</u> X <u>1500</u>
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.	
TORQUE PROBE TEST	
The torque probe test is <u>285</u> inch pounds or check e declaring 5' anchors without testing. A test inch pounds or less will require 4 foot anchors.	
Approved lateral arm system is being used and 4 ft. are allowed at the sidewall locations. Understand 5 ft. are required at all centerline tie points where the torque test is 275 or less and where the mobile home manufacturer may es anchors with 4000 lb. holding capacity.	
Installer's initials <u>MS</u>	
STS MUST BE PERFORMED BY A LICENSED INSTALLER	
<u>Melvin Sheppard</u> <u>8-04-04</u>	

conductors between multi-wide units, but not to the main power	des the bonding wire between multi-wide units.	Pg. 28
Electrical	Plumbing	
	drains to an existing sewer tap or septic tank. Pg. 28	
	a water supply piping to an existing water meter, water tap, or other	19 Pg. 28





Site Plan Submitted BY Paul J. Long Date 8/19/04
Plan Approved Not Approved Date 8/19/04
BY Paul J. Long Sallicia G. Haddock CPHU

Handwritten signature

Handwritten signature

Handwritten text

Handwritten text

NOT FOR CONSTRUCTION

WAIVER NOT APPROVED

PARCEL ID # _____ ZONING _____

SETBACKS: FRONT _____ REAR _____ SIDE _____ HEIGHT _____

FLOOD ZONE _____ SEPTIC _____ NO. EXISTING D.U. _____

TYPE OF DEVELOPMENT Pre-Inspr

SUBDIVISION (Lot/Block/Unit/Phase) _____

OWNER Robert Gethson PHONE _____

ADDRESS _____

CONTRACTOR Melvin Sheppard PHONE _____

LOCATION Price Creek turn into Hidden Acres to 1st Rd to (C) to stop sign (D) 1st to (B) then 2nd on (B)

COMMENTS: _____

INSPECTION(S) REQUESTED: _____ INSPECTION DATE: Thursday

Temp Power _____ Foundation _____ Set backs _____ Monolithic Slab

Under slab rough-in plumbing _____ Slab _____ Framing

Rough-in plumbing above slab and below wood floor _____ Other _____

Electrical Rough-in _____ Heat and Air duct _____ Perimeter Beam (Lintel)

Permanent Power _____ CO Final _____ Culvert _____ Pool _____ Reconnection

Plt M/H tie downs, blocking, electricity and plumbing _____ Utility pole

Travel Trailer _____ Re-roof _____ Service Change _____ Spot check/Re-check

INSPECTORS: _____



CITY, STATE, COUNTY, ZIP (PUD1) (PUD2) (PUD3)

Appr By CM, Date 8/11/2004, AppCode, UseCd 000000, **VACANT**

TxDist Nbhd MktA ExCode Exemption/% TxCode Units Tp

002, 15417.00, 01, DIST 2

House# - Street City Condo .00, **N/A**

Subd N/A

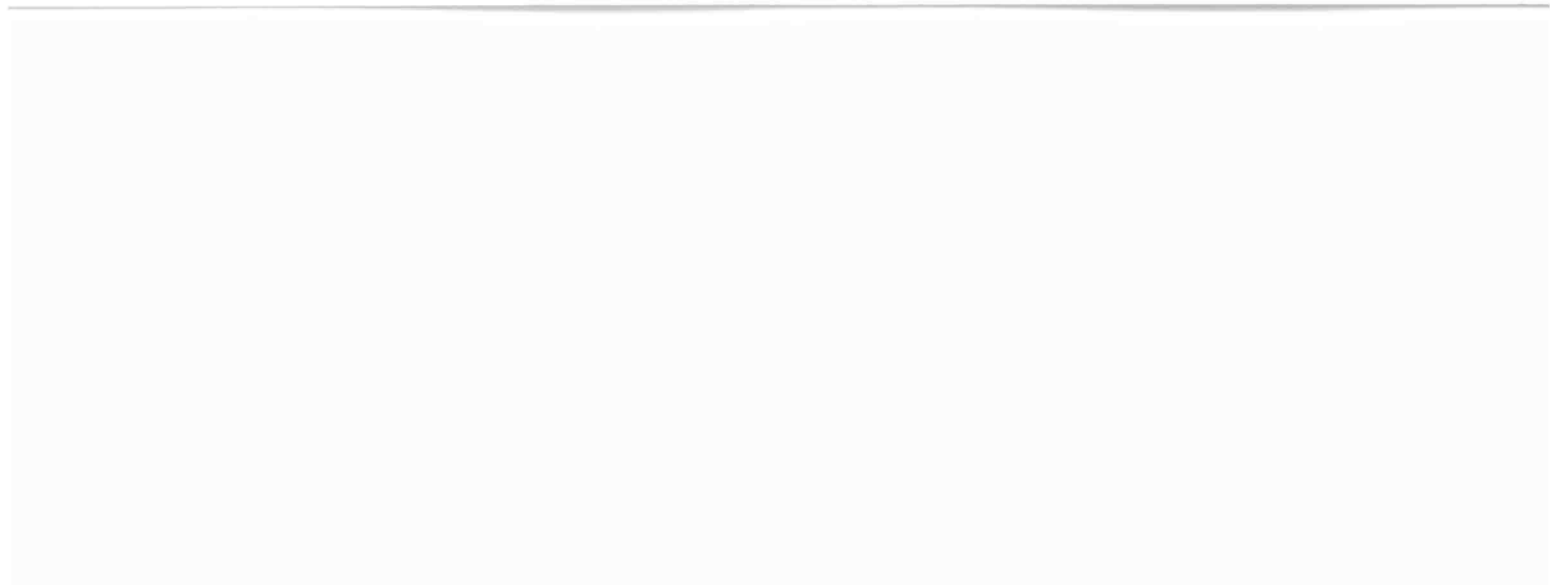
Sect 15, Twn 4S, Rnge 17E, Subd Blk Lot

Legals LOT, 1.8, EAGLES RIDGE, S/D, PHASE, 2

Map# 126-A Mnt 8/11/2004 CHUCK

F1=Task F2=ExtX F3=Exit F4=Prompt F11=Docs F10=GoTo PgUp/PgDn F24=More

COMPTON NIAJIE DŌH COUNCIL



L15266 ☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

☐ Check here if attachments

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building is: __ ft.(m) Datum: __
- G9. BFE or (in Zone AO) depth of flooding at the building site is: __ ft.(m) Datum: __

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE



DIAGRAM 1

All slab-on-grade single- and multiple-floor buildings (other than split-level) and high-rise buildings, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature - The bottom floor is at or above ground level (grade) on at least one side.

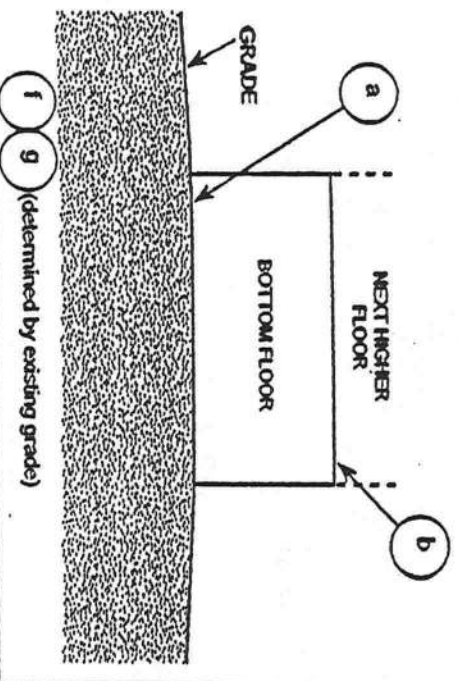


DIAGRAM 2

All single- and multiple-floor buildings with basement (other than split-level) and high-rise buildings with basement, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature - The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.

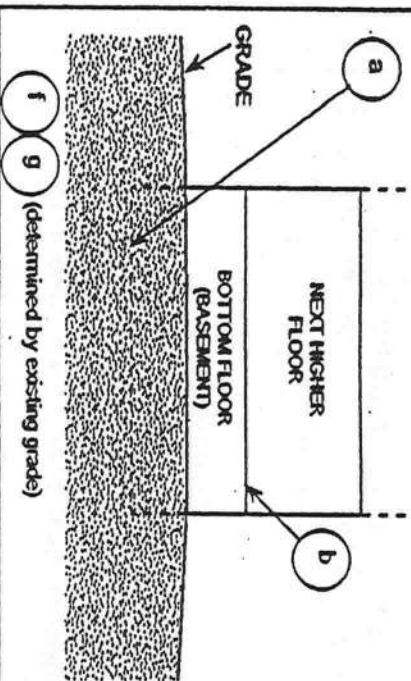


DIAGRAM 3

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature - The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.

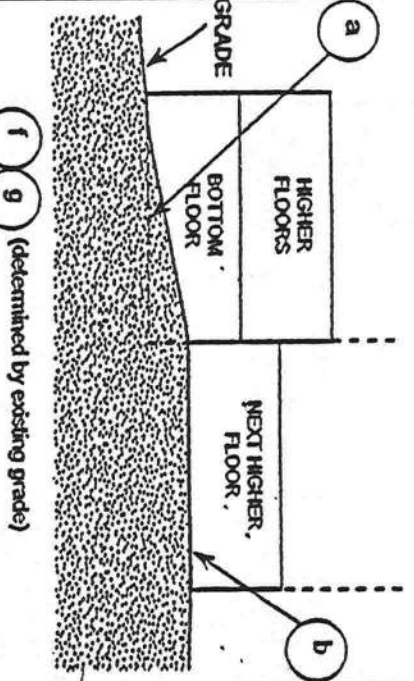
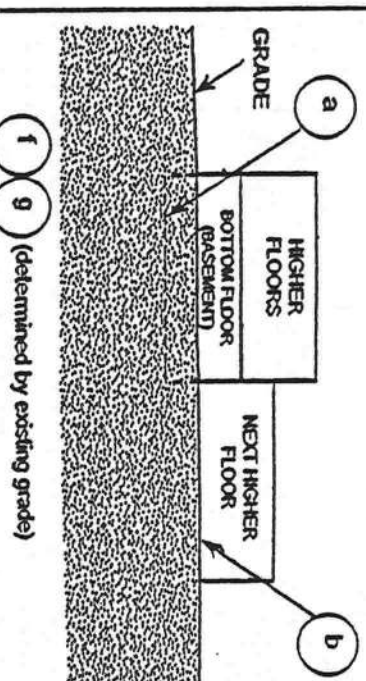


DIAGRAM 4

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature - The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.



Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).

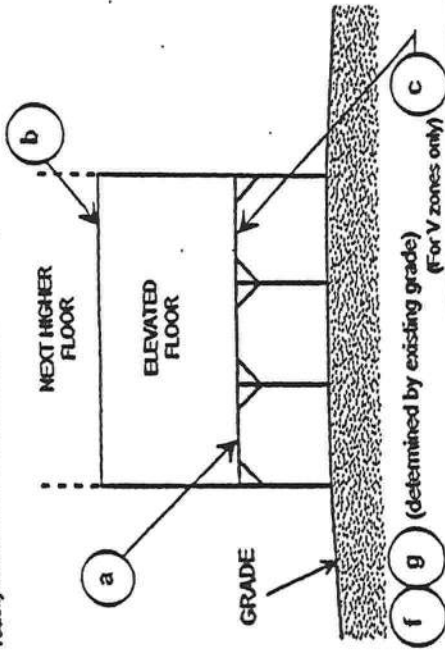


DIAGRAM 7

All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

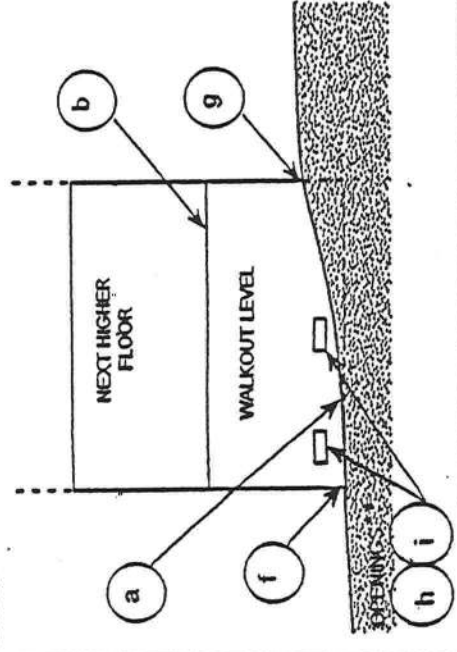
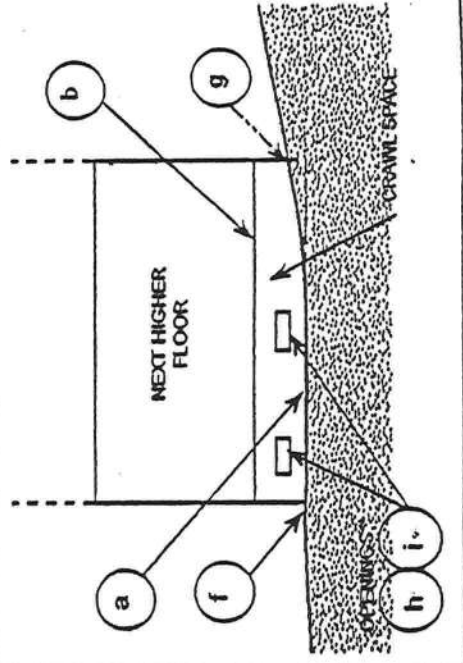


DIAGRAM 8

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A zones, the crawl space is with or without openings present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



An "opening" (flood vent) is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

MEMO OF REVIEW FOR CORRECTNESS & COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

The attached elevation certificate requires corrections by the surveyor of section(s) _____ prior to acceptance by the community.
 The attached elevation certificate is complete and correct.
☒ Minor corrections have been made in the below marked sections by the Community Official.

SECTION A - PROPERTY OWNER INFORMATION				For Insurance Company Use:	
BUILDING OWNER'S NAME Robert Getzan				Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 172 SE Valorie Ct				Company NAIC Number	
CITY Lake City	STATE FL	ZIP CODE 32025			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 19 Eagles Ridge Phase 2					
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential					
LATITUDE/LONGITUDE (OPTIONAL) (###-###-#### or ###-####)		HORIZONTAL DATUM ☐ NAD 1927 ☐ NAD 1983		SOURCE: ☐ GPS (Type): ☐ USGS Quad Map ☐ Other: _____	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Columbia 120070		B2. COUNTY NAME Columbia		B3. STATE FL	

B4. MAP AND PANEL NUMBER 120070 0200	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 88	B7. FIRM PANEL EFFECTIVE/REVISION DATE 6 Jan 1988	B8. FLOOD ZONE(S) X	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 126.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FFS Profile ☐ FIRM ☐ Community Determined ☒ Other (Describe): Curtis Keen PE # 23836 B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): _____ B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date: _____					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
 C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph)
 C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Datum 29
 o e) Lowest elevation of machinery and/or equipment _____ N/A ft(m)
 servicing the building (Describe in a Comments area)
 o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
 o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)
 Comments: N/A

