

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION Walker

For Office Use Only

(Revised 7-1-15)

Zoning Official _____ Building Official _____

AP# _____ Date Received _____ By _____ Permit # _____

Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ 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 _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 10-4S-16-02862-116 Subdivision Chippdale Estates Lot# 10

▪ New Mobile Home ☒ Used Mobile Home _____ MH Size 16x76 Year 2023

▪ Applicant Sonya North Phone # 863-517-5701

▪ Address 3311 SW State Rd 247 Lake City FL 32024

▪ Name of Property Owner Pamela Steele Phone# _____

▪ 911 Address SW Tray St 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 Jersee Walker
Justin Sirmans Phone # 386-344-1466

Address 274 SW Tray St Lake City FL 32024

▪ Relationship to Property Owner grand daughter

▪ Current Number of Dwellings on Property _____

▪ Lot Size _____ Total Acreage 2.59

▪ 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 NO

▪ Driving Directions to the Property _____

Email Address for Applicant: provisionpermitting@gmail.com

▪ Name of Licensed Dealer/Installer Dale Houston Phone # 386-623-6522

▪ Installers Address 136 SW Barrs Gin Lake City, FL 32024

▪ License Number 1H1133271 Installation Decal # 98853

Columbia County Fla. 911 Addressing 911 Address Application #61334



APPLICANT: SONYA NORTH

PHONE: 8635175701

EMAIL: provisionpermitting@gmail.com

PARCEL ID: 10-4S-16-02862-110

SUBDIVISION: CHIPDALE ESTATES

LOT: _____

BLOCK: _____

PHASE: _____

UNIT: _____

IS THIS 911 ADDRESS REQUESTED FOR SELF OR IS IT
BEING REQUESTED FOR A COMPANY?

Requested for Self

THIS ADDRESS IS FOR A::

Habitable structure (family home,
business, etc.)



STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Pamela Steele,
(State Corporation Name as it appears on the Property Appraisers Office website)
as the owner of the below described property:

Property tax Parcel ID number 10-48-116-02862-110

Subdivision (Name, lot, Block, Phase) Chipdale Estates Lot 10

Give my permission for Jersee Walker to place a

Circle one Mobile Home Travel Trailer / Utility Pole Only / Single Family Home /
or more — 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.

Pamela Steele
Owner Signature

5/26/23
Date

Owner Signature

Date

Owner Signature

Date

Sworn to and subscribed before me this 26th day of May, 2023, by
☒ physical presence or _____ online notarization and this (these) person(s) are
personally known to me _____ or produced ID S340-662-58-840-0

Paula DuPre
Notary Public Signature

Paula DuPre
Notary Printed Name

Notary Stamp/



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, Dale Houston, give this authority for the job address show below
Installer License Holder Name

only, SW Tray St Lake City FL 32024 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)
Sonya North	Sonya North	<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.

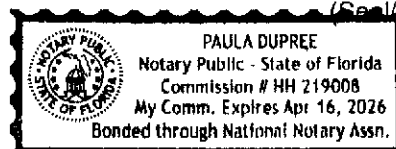
Dale Houston 1H 113.3271 5/22/23
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Dale Houston,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 22nd day of May, 2023.

Paula Dupree
NOTARY'S SIGNATURE





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 AGENT AUTHORIZATION

I, Dale Houston, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
Sony North	Sony North	

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.

Dale Houston HH1133271 5/22/23
License Holders Signature (Notarized) License Number Date

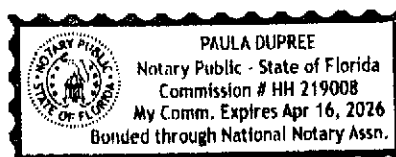
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

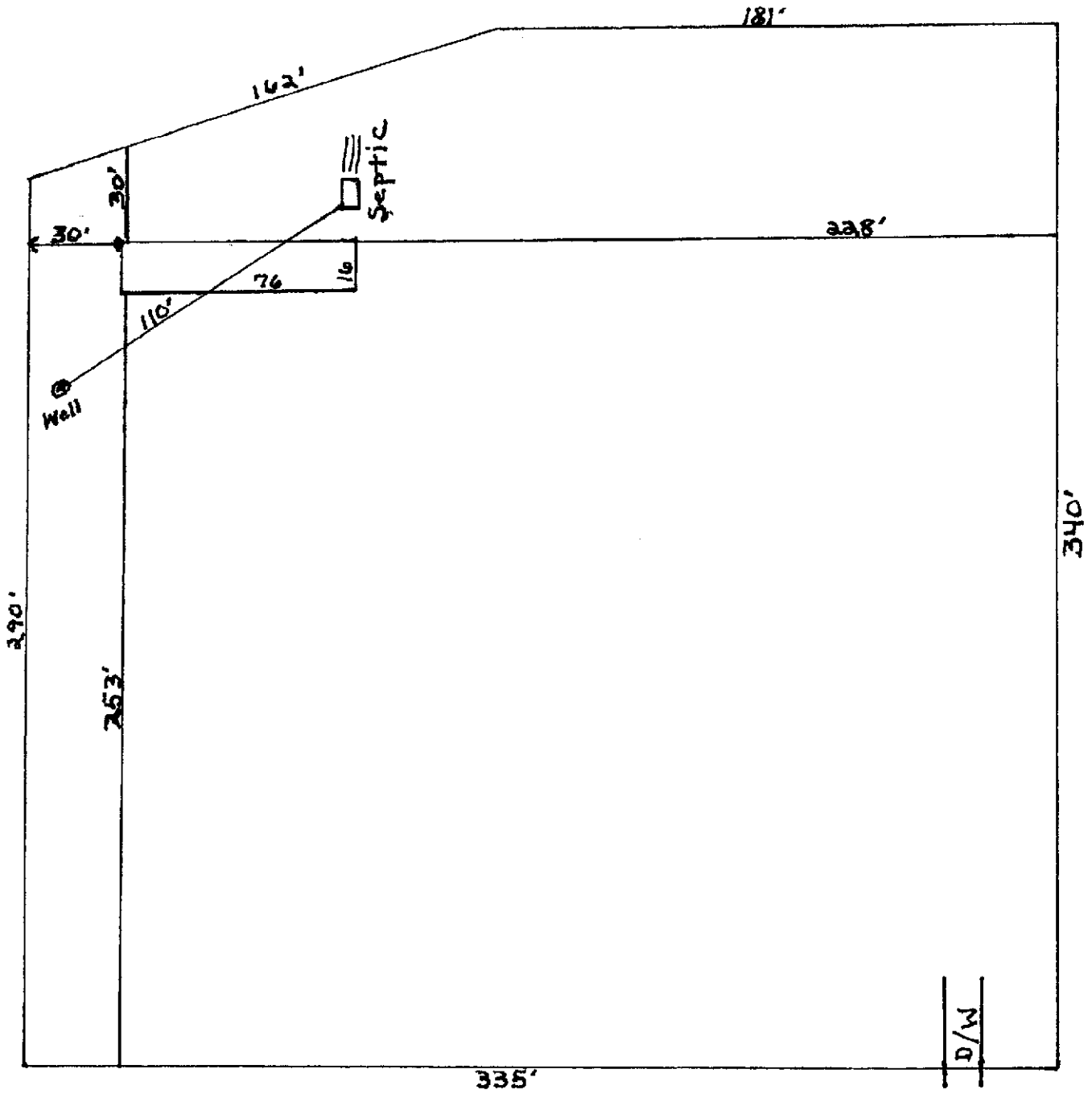
The above license holder, whose name is Dale Houston,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 22nd day of May, 2023.

Paula Dupree
NOTARY'S SIGNATURE

(Seal/Stamp)



1" = 50'



SW Troy St

Walker

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

Installer: Dale Houston License # 1H1133271

Address of home being installed _____

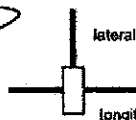
Manufacturer Clayton Length x width 16 x 76

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.

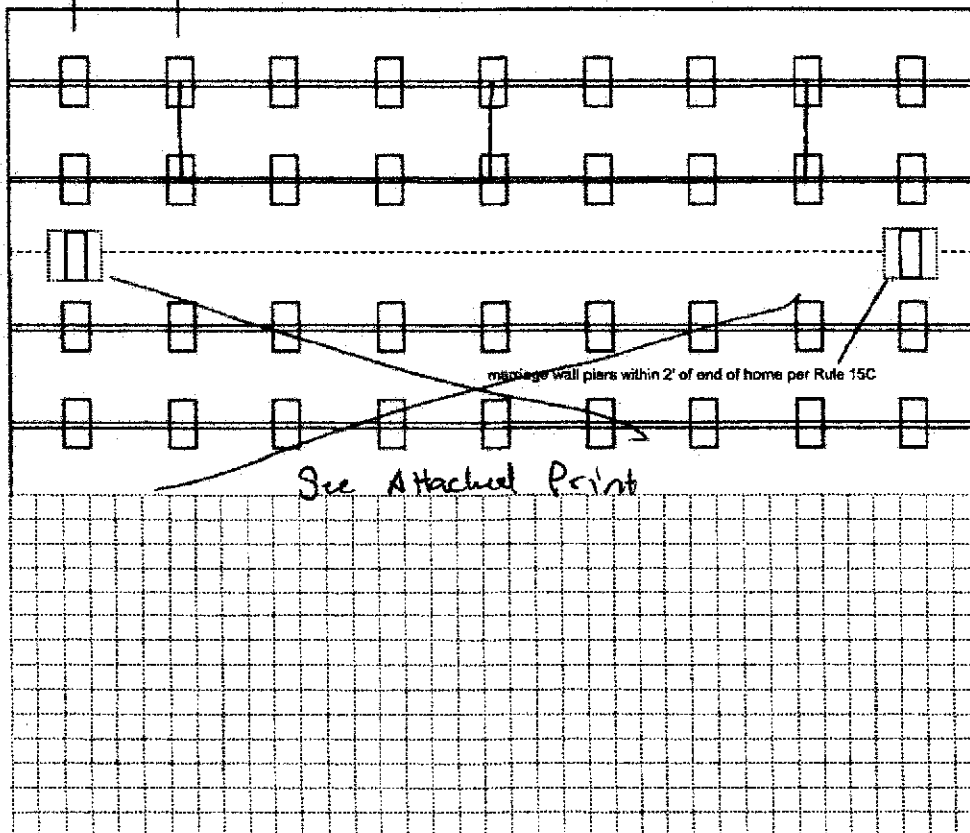
Installer's initials DH

Typical pier spacing

2' 6 1/2'



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



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 # 98853

Triple/Quad ☐ Serial # WHC0293566A

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (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 23 x 31

Perimeter pier pad size 16 x 16

Other pier pad sizes (required by the mfg.) _____

 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
<u>N/A</u>	<u>N/A</u>

POPULAR 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

4 ft 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Other
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Other

OTHER TIES

	Number
Sidewall	<u>5' 4"</u>
Longitudinal	<u>6</u>
Marriage wall	<u>N/A</u>
Shearwall	<u>N/A</u>

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

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 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.

SH Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Dale Hunter

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. 95

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 69

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 98

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: N/A Length: N/A Spacing: N/A
Roof: Type Fastener: _____ Length: _____ Spacing: _____
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 _____

Type gasket N/A
Pg. _____

Installed:
Between Floors Yes
Between Walls Yes N/A
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. 112
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 Dale Hunter

Date 5/22/27

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Dale Houston PHONE 386-623-6522

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 <u>Whittington Electric</u> License #: <u>EC13002957</u>	Signature <u>[Signature]</u> Phone #: <u>386-684-4601</u> Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C _____	Print Name <u>Mollman A/C and Heat</u> License #: <u>CAL1B19696</u>	Signature <u>[Signature]</u> Phone #: <u>352-339-6640</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.

Walker

License Number: IH / 1133271 / 1 Name: DALE HOUSTON		
Order #: 5768	Label #: 98853	Manufacturer:
Homeowner:	Year Model:	(Check Size of Home) Single _____
Address:	Length & Width:	Double _____
City/State/Zip:	Type Longitudinal System:	Triple _____
Phone #:	Type Lateral Arm System:	HUD Label #:
Date Installed:	New Home: _____ Used Home: _____	Soil Bearing / PSF:
Installed Wind Zone:	Data Plate Wind Zone:	Torque Probe / in-lbs:
Permit #:		
Note:		

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

98853	
LABEL #	DATE OF INSTALLATION
DALE HOUSTON	
NAME	
11 / 1133271 / 1	5768
LICENSE #	ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.1249, 320.4825
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS
<p>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.</p>

Columbia County Property Appraiser

Jeff Hampton

2023 Working Values

updated: 5/19/2023

Parcel: 10-4S-16-02862-110 (12585) >>

Aerial Viewer Pictometry Google Maps

2022 2019 2016 2013 2010 Sales

Owner & Property Info

Result: 1 of 1

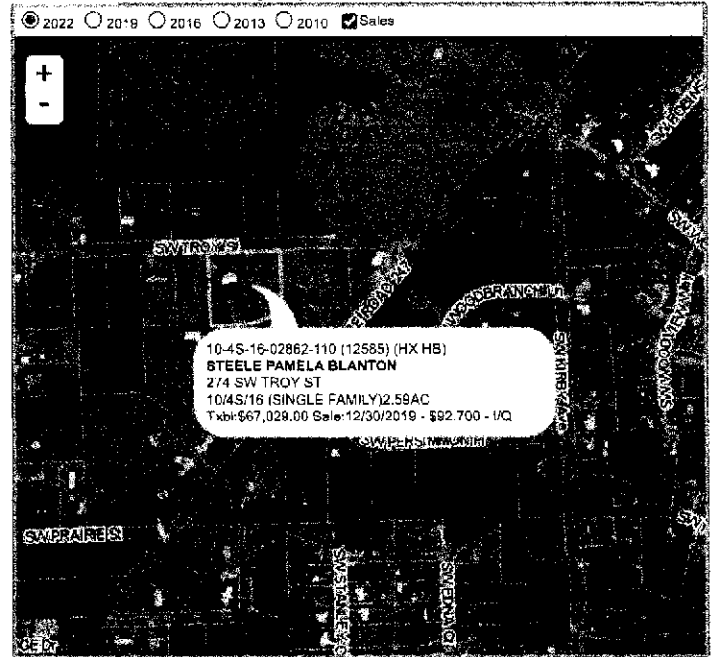
Owner	STEELE PAMELA BLANTON 274 SW TROY RD LAKE CITY, FL 32024		
Site	274 SW TROY ST, LAKE CITY		
Description*	LOTS 10 & 11 CHIPDALE ESTATES S/D DESC AS: COMM INTER OF C/L OF SR 252B & N LINE OF SE 1/4 OF SEC 10, E 1313.26 FT TO NE COR OF SE 1/4, S 30 FT TO S R/W OF OLD TROY RD FOR FDB, E 16.58 FT, S 294.51 FT, SW 169.09 FT, W 167.84 FT, N 340 FT TO S R/W OF OLD TROY ...more>>>		
Area	2.59 AC	S/T/R	10-4S-16
Use Code**	SINGLE FAMILY (0100)	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

2022 Certified Values		2023 Working Values	
Mkt Land	\$24,000	Mkt Land	\$29,600
Ag Land	\$0	Ag Land	\$0
Building	\$114,060	Building	\$130,551
XFOB	\$0	XFOB	\$0
Just	\$138,060	Just	\$160,151
Class	\$0	Class	\$0
Appraised	\$138,060	Appraised	\$160,151
SOH Cap [?]	\$24,440	SOH Cap [?]	\$43,122
Assessed	\$113,620	Assessed	\$117,029
Exempt	HX HB \$50,000	Exempt	HX HB \$50,000
Total Taxable	county:\$63,620 city:\$0 other:\$0 school:\$89,620	Total Taxable	county:\$67,029 city:\$0 other:\$0 school:\$92,029



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
12/30/2019	\$92,700	1402/0887	WD	I	Q	01
11/8/2011	\$90,000	1225/1579	WD	I	Q	01
3/3/2011	\$0	1212/2562	PR	I	U	19

Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	SINGLE FAM (0100)	1983	1564	2519	\$130,551

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

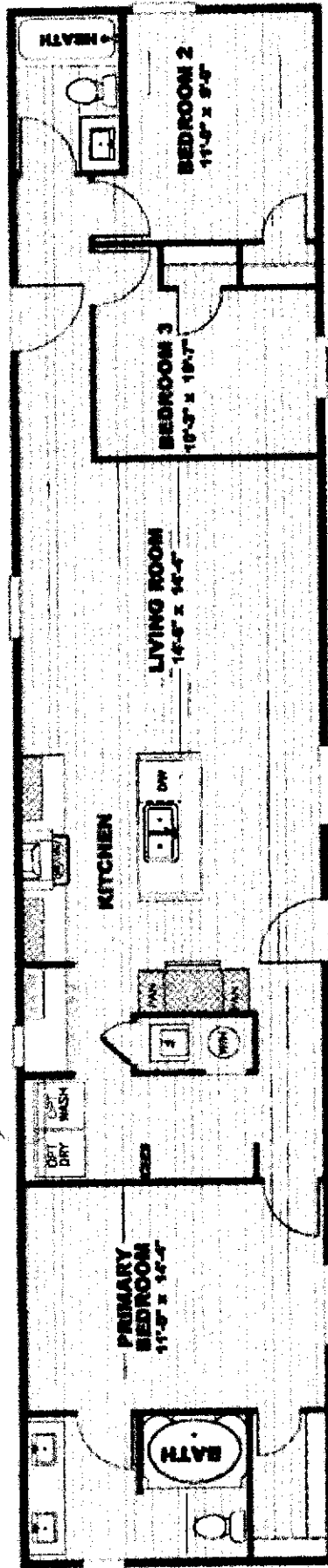
Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
NONE					

Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0100	SFR (MKT)	2.000 LT (2.590 AC)	1.0000/1.0000 1.0000/8000000 /	\$14.800 /LT	\$29,600

Search Result: 1 of 1

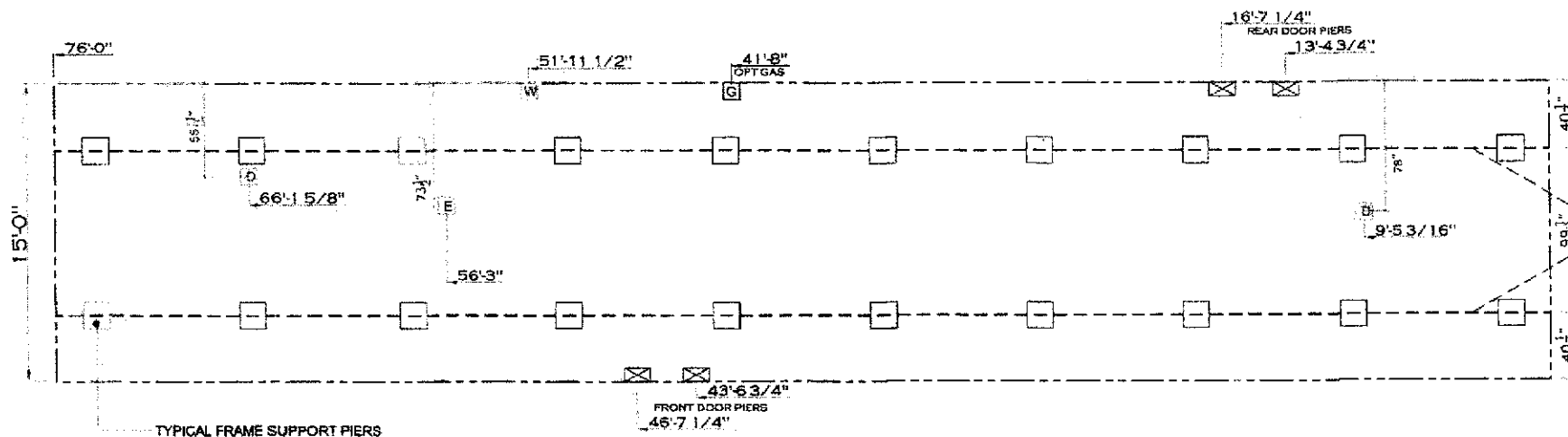


20 lb ROOF LOAD SIDEWALL OPENING PIER LOAD 16' BOX WIDTH	SIDEWALL OPENING (FT) REQUIRED PIER LOAD (LBS)					
	3	4	5	6	8	10
	1244	1413	1581	1750	2088	2425

*FOR 30 lb & 40 lb ROOF LOAD REFER TO TABLES 7 & 7a IN THE INSTALLATION MANUAL.

PIER LEGEND	
	= PIER MAIN BEAM
	= PIER PERIMETER
	= PIER PORCH RECESSED ENTRY

SERVICE DROP LEGEND	
	= ELECTRICAL DROP
	= WATER INLET
	= DWV PLUMBING DROP
	= GAS INLET



NOTES:

1. REFER TO TABLES 6 AND 6a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT DO NOT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 7 AND 7a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS.
2. REFER TO TABLE 9 FOR PIER CONFIGURATION AND MAXIMUM ALLOWABLE HEIGHTS. CROSS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 18, 19, AND 20).
3. THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 8" I-BEAMS IS 8 FEET, 10" & 12" I-BEAMS IS 10 FEET.
4. SERVICE DROP LOCATIONS IDENTIFIED ARE APPROXIMATE.
5. FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY. CONTACT THE MFG FACILITY FOR SPECIFICATIONS OF OPTIONS ORDERED.

		DATE	
		REVISION	
MODEL NAME	Sydney	MODEL NO.	CEA16763AH
BOX SIZE	16' X 76'	BOX NO.	1.140
DRAWN BY		Alex Whaley	
DATE DRAWN		11/25/2019	
DATE PRINTED		3/1/2022	
SCALE		3/16"=1'	
PLAN NO.		CE-S010-76-3	
SHEET NAME		99.5FRAME PIERS	
SHEET NO.		SU-1.	

SALES AGREEMENT

Welcome Home

Buyer(s): JERSEE MARIE WALKER

Phone #:

JUSTIN MICHAEL SIRMANS

Address: 274 SW TROY ST LAKE CITY FL 32024

Delivery Address: TBD SW TROY STREET LAKE CITY FL 32024

Home Info

Pricing

Make: CMH
 Model: 30CEA1676AH23
 Serial #: WHCO29356GA
 Year: 2023
 Size: Length: 76 Width: 16
 Stock #: RSO
☒ New ☐ Used

Home Price \$108,380.00
 State Tax \$3,251.40
 Local Tax \$75.00

Cash Price \$111,706.40

TITLE FEES \$164.35

DOC STAMPS \$376.86

Total Package Price \$112,247.61

Trade Allowance N/A

Less Amount Owed N/A

Trade Equity N/A

Cash Down Payment \$5,586.00

Less All Credits \$5,586.00

Remaining Balance \$106,661.61

Trade Info

Make: N/A
 Model: N/A
 Serial #: N/A
 Year: N/A
 Size: Length: N/A Width: N/A
 Title #:
 Owed to:
 Amount owed will be paid by: ☐ Buyer ☐ Seller

Responsibilities

Seller

Responsibilities: Deliver, set, AC-Heat pump, standard white skirting, 2 sets of code steps, well, septic, electric with hookups, permits.

Buyer

Responsibilities: Have proper access for Clayton to deliver and set home.

Options:

Acknowledgment

New Manufactured Homes meet federal standards for design and construction, but may not meet local codes and standards.

Buyer(s) agree: (1) that the terms and conditions on pages two and three are part of this agreement; (2) to purchase the above home including the options; (3) that they acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) that there are no other agreements, written or verbal, unless evidenced in writing and signed by the parties.

Signature of Buyer: JERSEE MARIE WALKER

Date

Signature of Buyer: JUSTIN MICHAEL SIRMANS

Date

Signature of Buyer:

Date

Signature of Buyer:

Date

Seller: CLAYTON HOMES LAKE CITY, FL
 LAKE CITY FL 32055

Manager's Name

Date

Home Consultant Signature