Parcel:

32-58-17-09477-203 (34827)

Owner & Property Info

Result: 2 of 2

WYERS DAVID A

Owner 114 N METEOR AVE

CLEARWATER, FL 33765-1440

Site 289 SW GRANT Gln, LAKE CITY

Description* LOT 3 PLEASANT ACRES S/D. 847-1716, 850-1580, WD 1106-1677, AG 1106-1680, WD 1183-2729,

Area 5.68 AC S/T/R 32-5S-17E

Use Code** VACANT (0000) Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR_	Ernest Scott Johnson	PHONE 352-494-8099

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

David Wyers

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> 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_ Glenn Whittington	Signature
	License #: EC 13002957	Phone #: 386-972-1700
	Qualifier Form At	lacried
MECHANICAL/	Print Name Timothy Shatto License #: CAC 057875	Signature
	Qualifier Form At	tached X

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

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

CI LICENSED QUIENTE	ACTO THOUSE THE
1. CAMIN Whitington	(license holder name), licensed qualifier
for WhitThaten ELERKIC S	(company name), do certify that
the below referenced person(s) listed on this form holder, or is/are employed by me directly or throu officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	ugh an employee leasing arrangement; or, is an n Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DAKBUR	1
2. Rocky Ford	2. Jones 1))
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for comp Local Ordinances. I understand that the State at authority to discipline a license holder for violatic officers, or employees and that I have full response and ordinances inherent in the privilege granted officer(s), you must notify this department in write authorization form, which will supersede all prevunauthorized persons to use your name and/or Licensed Qualifiers Signature (Notarized)	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, insibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ting of the changes and submit a new letter of rious lists. Failure to do so may allow
NOTARY INFORMATION: STATE OF:COUNTY OF	Colombia
The above license holder, whose name is	me or has produced identification this, 20_6. Seal/Starkelly R BISHOP Notary Public - State of Florida Commission # FF 243986



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

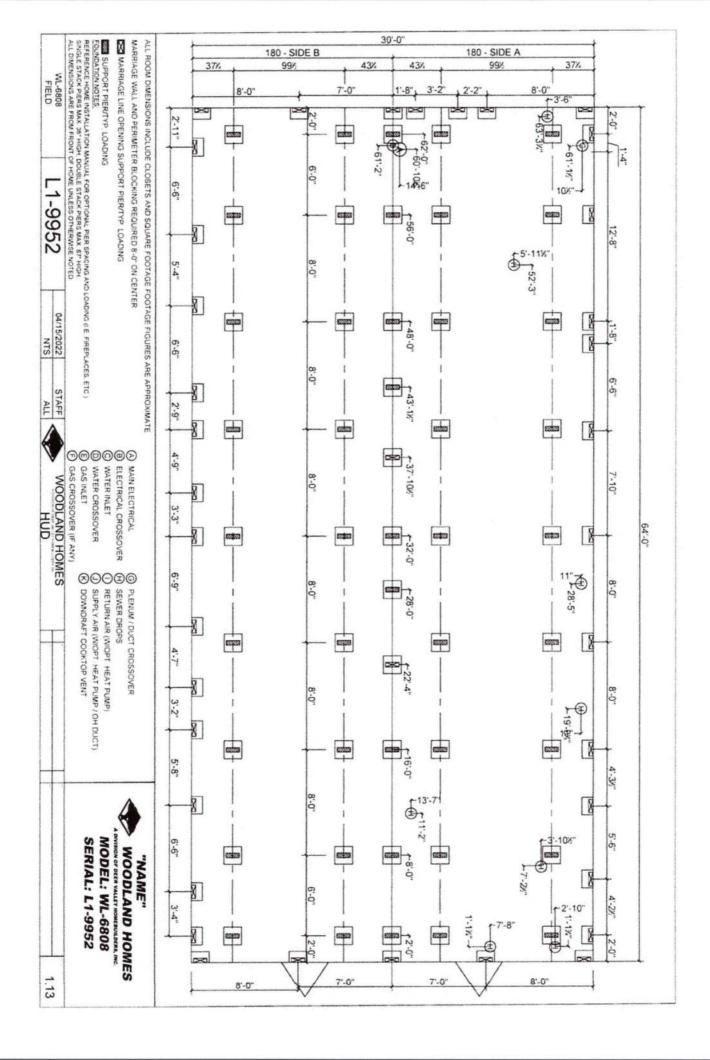
LICENSED QUALIFIER AUTHORIZATION

, Timothy Shatto	(license holder name), licensed qualifier
for Shatto Heat & Air	(company name), do certify that
person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	rm is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said discontrol and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. Bo Royals	1. Both
2. Dale Burd	2.
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complet Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted officer(s), you must notify this department in writing authorization form, which will supersede all previous unauthorized persons to use your name and/or license.	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, assibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	
NOTARY INFORMATION: STATE OF: FOLIA COUNTY OF:	Union
Victoria / Palmer	me or has produced identification this 20 day of February, 2018.
NOTARY'S SIGNATURE	(Seal/Stamp) VICTORIA K. PAL Notary Public - State

Commission # FF 207489 My Comm. Expires Mar 9, 2019 Bonded through National Notwy Assn

	man large vall plers within 2" of end of home per Rule 15C	B B B B B B B B B B B B		Typical pier spacing 2' 2' Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	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.	nstaller Mobile Phone # 352-494-8099 Address of home 284 SW GRAF GIRV being installed LAKK AM FL 2024 Manufacturer Decrualley Length x width 64X30	Scott
Opening Pier pad size Aft 5ft FRAME TIES within 2' of end of home spaced at 5' 4" oc The Down Components Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms Marriage wall Manufacturer O(NCR 8 N Shearwall Shearwall	" 	Pad Size Sq in 16 × 16 256 Sq in 16 × 18 288 Sq in 16 × 18 342 Sq in 16 × 22.5 360 374 374 375	7.6" 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'	6" 18 1/2" x 18 20" x 20" 22" x 22" 24" 1/2" (342) (400) (484)* (5 6' 7' 8' 8' 8' 8' 8' 8'	Roof System: Typical Hinged PIER SPACING TABLE FOR USED HOMES	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Single wide	New Home D Used Home

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Pg.	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.	Date Tested ASSumed Clivex 1101 V USES 4\$5	reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity. Installer's initials	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	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.	TORQUE PROBE TEST	×	Using 500 lb. increments, take the lowest reading and round down to that increment.	Take the reading at the depth of the footer.		× 9400 × ×	or check liefe to declare 1000 ib. son y without testing.	inded do	DOCKET DENETDOMETED TEST
Installer Signatur Muest & Share Date	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		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	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	Weatherproofing	Pg. Between Floors Yes Between valls Yes Bottom of ridgebeam Yes	_	a result of a poorty installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are	Gasket (weatherproofing regularment)	Type Fastener 1495 Type Fastener 1495 For used homes a rinf. 30 g will be centered over the per roofing nails at 2" on center	195 Length: 7	Fastening multi wide units	Debris and organic material removed Water drainage: Natural Swale Pag Other	Site Preparation



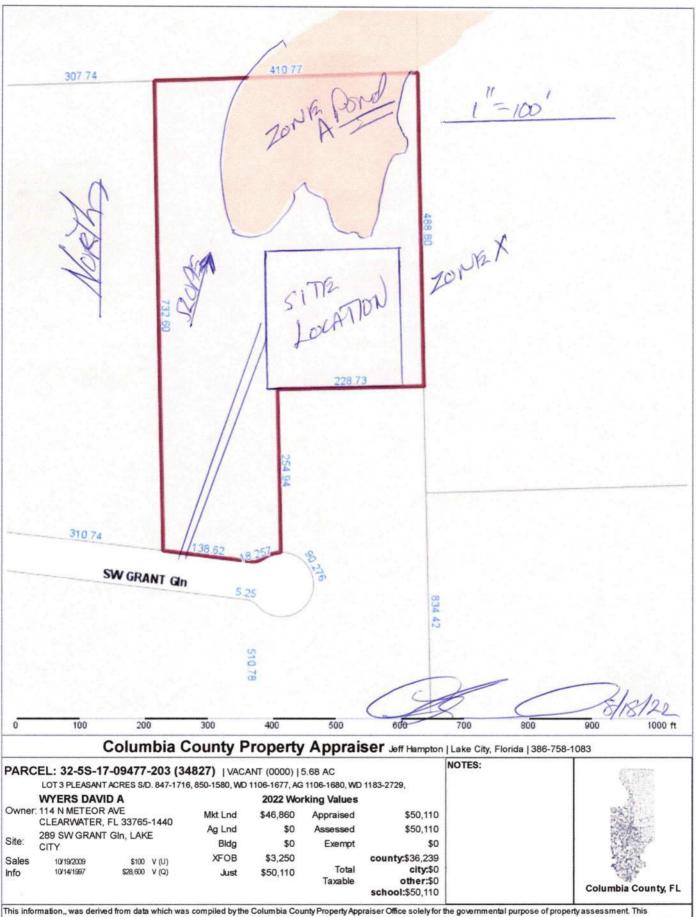
STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

Wyers	PART II - SITEPLAN -	
Scale: Each block represents 10		210
Scale: Each block represents 10		108
S B WE	23' 38'R 30' 1920 SQ	102' North 102' WELL 123'
Notes:	38h 7	116
1	of 5.68 ACRES	
	Si	OR ATTACKED
Site Plan submitted by:		Contractor
Plan Approved	Not Approved	Date
Ву		County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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.

GrizzlyLogic.com

CAROL CHADWICK, P.E.

Civil Engineer
1208 S.W. Fairfax Glen
Lake City, FL 32025
307.680.1772
ccpewyo@gmail.com
www.carolchadwickpe.com

August 18, 2022

David Wyers 727.480.9766 david@wyers.com

re: ELEVATION LETTER - 289 SW GRANT GLEN, LAKE CITY, FL

As requested, I inspected the building site for the proposed construction at the above referenced site. The home location had been staked at the time of the inspection. The photo was taken from SW Grant Glen looking north. The site drains to the north. Per the attached SRWMD Flood Report, a wetland is present on the north end of the property. As shown on the attached site plan by others, the home will be placed in the location marked 2 which is clearly outside the wetland.



The approximate ground elevation of building site is 80.0 +/-. The elevation of the street centerline varies from 90.2 +/- to 88.8 +/-. The minimum finished floor elevation shall be **82.50**. The finished floor elevation is sufficient to protect the structure against water damage from a base flood event. The site will be graded to channel direct precipitation runoff from the home.

I certify that the minimum finished floor elevation listed above will protect the structure against water damage from a base flood event, as defined in Article 8 of the Land Development Regulations.

Should you have any questions, please don't hesitate to contact me.

Respectfully,



Digitally signed by Carol Chadwick DN: c=US, o=Florida, dnQualifier=A01410 D0000017EB6D924 CE0005954C, cn=Carol Chadwick Date: 2022.08.18 11:20:05 -04'00'

Carol Chadwick, P.E.

attachments: Aerial Photo, SRWMD Flood Report \$ Site Plan by others

EFFECTIVE FLOOD INFORMATION REPORT



Location Information

County: COLUMBIA

Parcel: 32-5S-17-09477-203

Flood Zone: , ×

Flood Risk: H G H

1% Annual Chance Base Flood Elev* Applicable

10% Annual Chance Flood Elev* Not Applicable

50% Annual Chance Flood Elev* Not Applicable

are derived from FEMA flood mapping products, rounded to * Flood Elevations shown on this report are in NAVD 88 and the note below the nearest tenth of a foot. For more information, please see

Legend with Flood Zone Designations

Wetlands

				.,	12023C0395C		FIRM
zard Area	Special Flood Hazard Area	2/4/2009	Map Effective Date		Santa Fe	shed	Watershed
		ormation	Supplemental Inf				
	River Marks	X	BaseFlood Elevations (BFE)	}	0.2% Flood-Shaded Zone X (Moderate Risk)	0.2% FI (Modera	
	Parcels	В	Depressions		1% Flood - Zone VE (HighRisk)	1% Flood . (HighRisk)	1000
	FIRM Panel Index		SFHA Increase		1% Flood - Zone A (HighRisk)	1% Flood - (HighRisk)	
	County Boundaries		SFHA Decrease		1% Flood - Zone AE (High Risk)	1% Flo Risk)	
	CrossSections	1	Area Not included		1% Flood -Floodway (High Risk)	1% Flo Risk)	2

Anywhere it can rain, it can flood Know your risk.



Yes

www.srwmdfloodreport.com

Panel(s)

The information herein represents the best available data as of the effective map date shown. The Federal Emergency Management Agency (FEMA) Flood Map Service Center (https://msc.fema.gov) maintains the database of Flood Insurance Studies and Digital Flood Insurance Rate Maps, as well as additional information such as how the Base Flood Elevations (BFEs) and/or floodways have been determined and previously issued Letters of Map Change. Requests to revise flood information may be provided to the District during the community review period on preliminary maps, or through the appropriate process with FEMA Change Your Flood Zone Designation | FEMA.gov. Information about flood insurance may be obtained at preliminary maps, or through the appropriate process with FEMA Change Your Flood Zone Designation | FEMA.gov. Information about flood insurance may be obtained at (https://www.floodsmart.com)



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:

12/15/2020 7:37:47 PM

Address:

289 SW GRANT GLN

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

32-5S-17-09477-203

REMARKS:

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

Verification ID: 85c44c28-07b3-4a00-848b-68e73130d245

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

Columbia County
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456

