

Parcel:

**12-5S-16-03602-003**

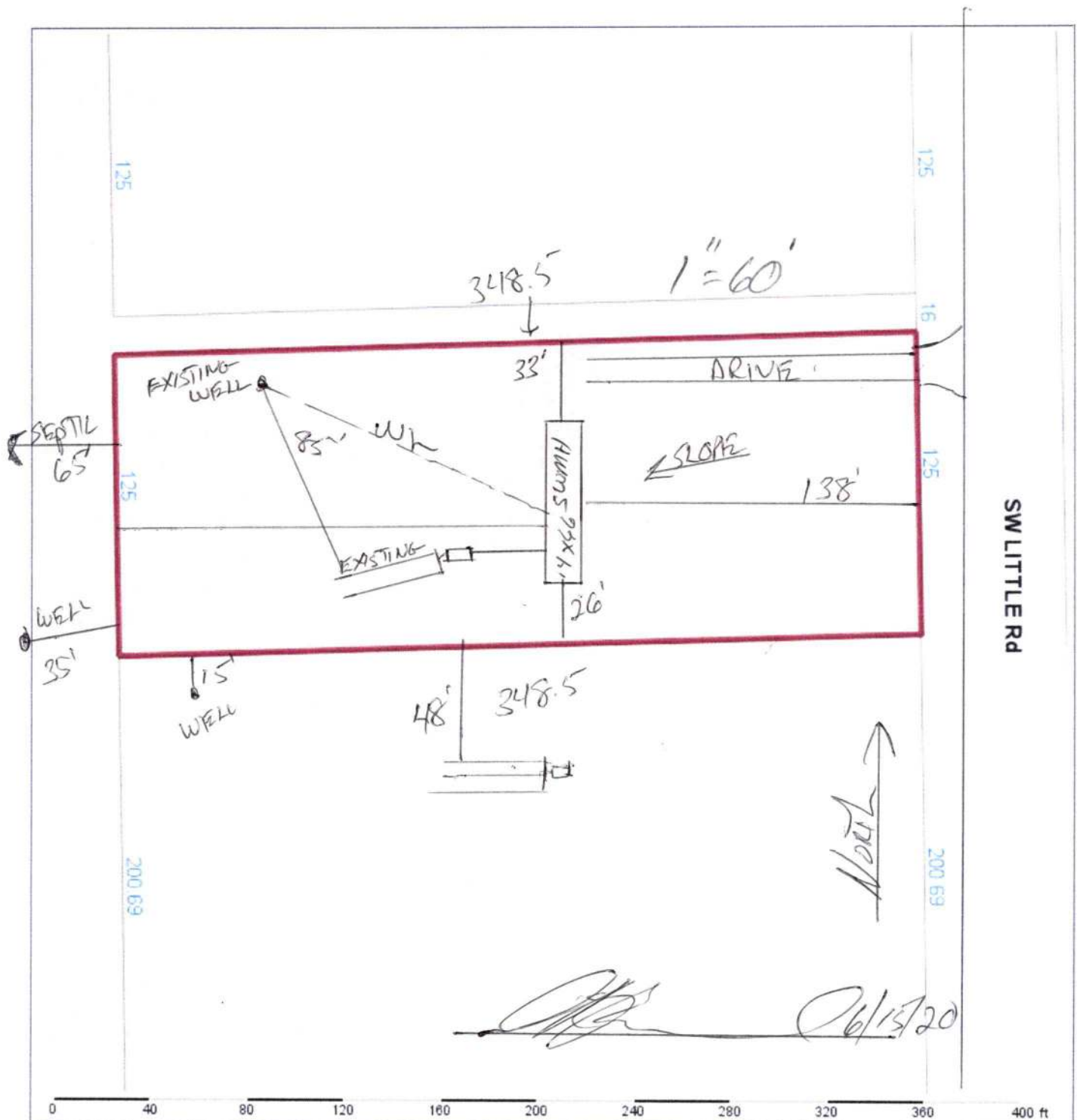
**Owner & Property Info**

Result: 3 of 3

Owner	<b>HADDEN ROSIE</b> 822 SW LITTLE RD LAKE CITY, FL 32024		
Site	470 LITTLE RD, LAKE CITY		
Description*	COMM NE COR, RUN S 141 FT FOR POB, CONT S 125 FT, W 348.50 FT, N 125 FT, E 348.50 FT TO POB. LE 578-298, DC 1168-1362, DC 1254-2421, WD 1271-1660, QC 1297-1531, QC 1329-1331,		
Area	1 AC	S/T/R	12-5S-16
Use Code**	VACANT (000000)	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.



Columbia County Property Appraiser

Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 12-5S-16-03602-003 | VACANT (000000) | 1 AC

COMM NE COR, RUN S 141 FT FOR POB, CONT S 125 FT, W 348.50 FT, N 125 FT, E 348.50 FT TO POB. LE 578-298, DC 1168-1362, DC 1254-2421, WD 1271-1660, QC

HADDEN ROSIE

Owner: 822 SW LITTLE RD  
LAKE CITY, FL 32024

Site: 470 LITTLE RD, LAKE CITY

Sales Info

1/23/2017 \$19,500 V (U)

7/7/2015 \$15,000 V (U)

3/21/2014 \$14,000 V (Q)

2020 Working Values

Mkt Lnd	\$12,691	Appraised	\$12,691
Ag Lnd	\$0	Assessed	\$12,691
Bldg	\$0	Exempt	\$0
XFOB	\$0	Total Taxable	county:\$12,691 city:\$12,691 other:\$12,691 school:\$12,691
Just	\$12,691		

NOTES:

Columbia County, FL

of 2

6/12/2020, 5:18 PM

# PERMIT WORKSHEET

Page 1 of 2

## PERMIT NUMBER

Installer Brent Strickland License # IH 1104218

Installer Mobile Phone # 386-365-7043

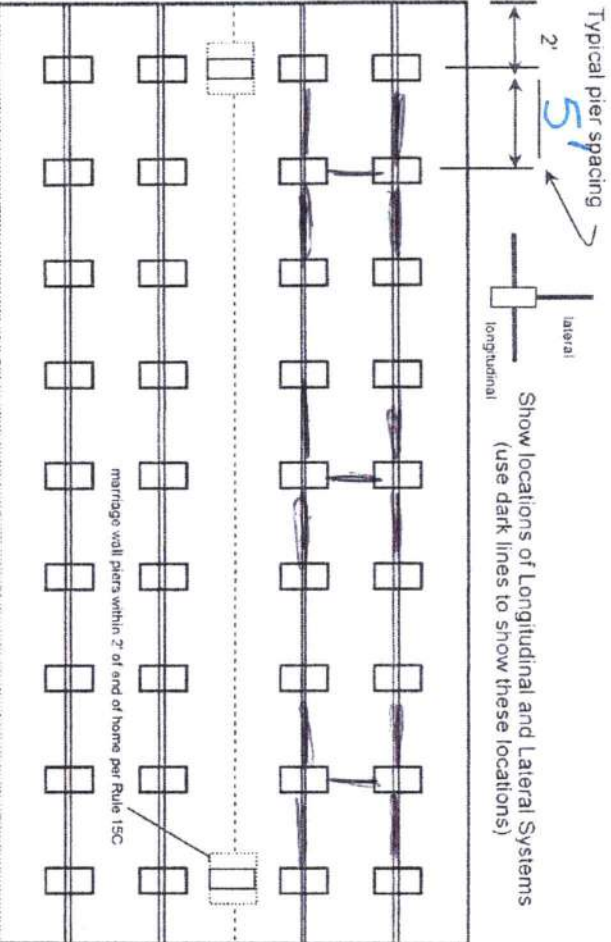
Address of home being installed

Manufacturer Clayton Homes Length x width 60x14

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 B.S.



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 # 605726

Triple/Quad ☐ Serial # CLFL 80016

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 osf	3'	4'	5'	6'	7'	8'
1500 osf	4' 6"	6'	7'	8'	8'	8'
2000 osf	6'	8'	8'	8'	8'	8'
2500 osf	7' 6"	8'	8'	8'	8'	8'
3000 osf	8'	8'	8'	8'	8'	8'
3500 osf	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

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

### OTHER TIES

Sidewall Nurple 4  
Longitudinal Marriage wall 4  
Shearwall 4



# PERMIT NUMBER

## PERMIT WORKSHEET

page 2 of 2

### POCKET PENETROMETER TEST

This 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

This results of the torque probe test is 295 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.

B.S. Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Brent Stuchlow

Date Tested

6-17-2020

### 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. \_\_\_\_\_

### Plumbing

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

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

### 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: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
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

Installed:

Pg. \_\_\_\_\_

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

Brent Stuchlow Date 6-17-2020

## 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

Robert Streetmen

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>Rosie Hadden</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Rosie Hadden</u> Phone #: <u>623-1141</u>
MECHANICAL/ A/C _____	Print Name <u>Rosie Hadden</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Rosie Hadden</u> Phone #: <u>623-1141</u>

*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

Hadden

Proposed

66



Floor  
Plan

  
6/15/20



Hwy. 100 East P.O. Box 1059  
Lake City Fla. 32056-1059

Plant Number

Date of Manufacture 1-8-88 HUD No. Fla. 382260

Manufacturer's Serial Number and Model Unit Designation

CL FL 8 0016

Design Approval by (D.A.P.I.A.)

Radco

This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture.  
(For additional information, consult owner's manual.)

The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	<u>Coleman</u>	<u>7966-856</u>
For air cooling	<u>none</u>	
For cooking	<u>GE</u>	<u>JGSS03 PJIAD</u>
Refrigerator	<u>GE</u>	<u>tbfl6SJB</u>
Water heater	<u>Mor Flo</u>	
Washer	<u>ZHE</u>	<u>FR32STB</u>
Clothes Dryer		
Dishwasher		
Garbage Disposal		
Fireplace		
Smoke Detector	<u>BRK Electronic</u>	<u>18939 ACI</u>

DESIGN WIND  
ZONE MAP

☐ Zone I  
Standard Wind  
15 PSF Horizontal  
9 PSF Uplift

☒ Zone II  
Hurricane Resistant  
25 PSF Horizontal  
15 PSF Uplift



Walls (v  
Ceilings  
Ceilings  
Floors...  
Air ducts  
Air ducts  
Air ducts  
The follow  
Air d  
Air d  
Air d

To determine  
a cooling loa  
tation, locate  
and outside







**COLUMBIA COUNTY BUILDING DEPARTMENT**  
**PRELIMINARY MOBILE HOME INSPECTION REPORT**

Application # \_\_\_\_\_

\$50.00 Fee Paid \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME Rosie Hadden PHONE \_\_\_\_\_ CELL 386-623-1141

ADDRESS 470 Little Road, Lake City, FL, 32024

MOBILE HOME PARK na SUBDIVISION na

DRIVING DIRECTIONS TO MOBILE HOME Lake Jeffery Road west, Cross I-75, TR Lower Springs Road, 1 Mile on right  
1165 Lower Springs Road

MOBILE HOME INSTALLER Brent Strickland PHONE 386-365-7043 CELL 386-365-7043

**MOBILE HOME INFORMATION**

MAKE Clayton Industries YEAR 1988 SIZE 14 x 66 COLOR \_\_\_\_\_

SERIAL No. CL FL 8 0016

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

**INSPECTION STANDARDS**

**INTERIOR:**

(P or F) - P= PASS F= FAILED

\_\_\_\_\_ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

\_\_\_\_\_ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION \_\_\_\_\_

\_\_\_\_\_ DOORS ( ) OPERABLE ( ) DAMAGED

\_\_\_\_\_ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

\_\_\_\_\_ WINDOWS ( ) OPERABLE ( ) INOPERABLE

\_\_\_\_\_ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

\_\_\_\_\_ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

\_\_\_\_\_ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT  
FIXTURES MISSING

**EXTERIOR:**

\_\_\_\_\_ WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

\_\_\_\_\_ WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

\_\_\_\_\_ ROOF ( ) APPEARS SOLID ( ) DAMAGED

**STATUS**

APPROVED \_\_\_\_\_ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

BUILDING INSPECTOR'S SIGNATURE \_\_\_\_\_ ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_