Parcel:

34-48-18-10550-005 (43964)

Owner & Property Info

Result: 16 of 28

KOON LOGAN HUNTER KOON TAMMY JALANE

Owner

6099 SW 67TH ST

LAKE BUTLER, FL 32054

Site

BEG SE COR OF LOT 4 FOREST VIEW S/D, E 557.62 FT, N 331.97 FT, W 567.12 FT TO NE COR OF SAID LOT 4, S 332.57 FT TO POB (PRCL 4-A) & COMM SW COR OF SE1/4 OF SW1/4, E 713.33 FT, N 1121.60 FT FOR POB, CONT N 223.68 FT, E 641.17 FT, N 446.28 FT, E 1047.87 FT TO W MAINT R/W SE TULLIE BEACH TER, S ALONG R/W 296.31 FT TO CURVE, SE ALONG CURVE 149.12 FT, S 38 DEG E STILL ALONG R/W 240.91 FT, SE 35.02 FT, W 1876.75 FT TO POB (PRCL 4) EX COMM SW COR OF SE1/4 OF SW1/4, E 713.33 FT, N 1121.60 FT, CONT N 223.68 FT, E 641.17 FT, N Description* 332 FT FOR POB, CONT N 114.28 FT, E 1047.87 FT TO W MAINT R/W OF SE TULLIE BEACH TER,

S 114.29 FT, W 1047.10 FT TO POB & COMM SW COR OF SE1/4 OF SW1/4, E 713.33 FT, N 574.12 FT FOR POB, CONT N 574.48 FT, E 1876.75 FT TO W MAINT R/W OF SE TULLIS BEACH TER, SE ALONG R/W 188.73 FT, S STILL ALONG R/W 363.36 FT, W 1922.35 FT TO POB (PRCL 5) & COMM SW COR OF SE1/4 OF SW1/4, E 713.33 FT FOR POB, CONT E 1937.43 FT TO W MAINT R/W OF SE TULLIE BEACH TER, N 570.76 FT, W 1922.35 FT, S 574.48 TO POB (PRCL 6). WD 1443-

1869 <<< less

Area

71.29 AC

S/T/R 34-4S-18

Use Code** NON AG ACREAGE (9900)

Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	Robert Sheppard	PHONE	386-623-2203

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

Tammy Koon

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 EC 13002957	Signature Phone #: 386-972-1700
		Qualifier Form	Attached
MECHANICAL/	Print Name	Ronald Bonds Sr. CAC 1817658	Signature 800-259-3470
A/C	License #:		
		Qualifier Form	Attached

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

1. CARNI Whitington	(license holder name), licensed qualifier				
for Whittington ELREKIC 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-	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in 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. Cocky Ford	2. Sonly)				
3.	3.				
4.	4.				
5.	5.				
I, the license holder, realize that I am responsible under my license and fully responsible for compl Local Ordinances. I understand that the State an authority to discipline a license holder for violatic officers, or employees and that I have full respon and ordinances inherent in the privilege granted If at any time the person(s) you have authorized officer(s), you must notify this department in writi authorization form, which will supersede all previous unauthorized persons to use your name and/or license.	iance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, asibility 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				
Lord Oveling Signature (New Yord)	EC 1300 2957 3/7/16				
NOTARY INFORMATION: STATE OF:COUNTY OF:					
personally appeared before me and is known by	me or has produced identification this day of, 20				
NOTARY'S SIGNATURE	Seal/Stanke) Y 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

1. LONAld & wond SE	(license holder name), licensed qualifier
for STYLE CREST ENTERPRISE	The (company name), do certify that
the below referenced person(s) listed on this fo holder, or is/are employed by me directly or throofficer of the corporation; or, partner as defined	m is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DALE BURD	1.
2. Rocks Ford	2. (62/37) 7-1
3. Kully Bishap	3. Kelly Brishof
4.	4.
5.	5.
officers, or employees and that I have full respondent ordinances inherent in the privilege granted of at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all prevapauthorized persons to use your name and/or later to the privilege of the privilege of the persons to use your name and/or later to the privilege of the privilege	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
NOTARY INFORMATION: STATE OF:COUNTY OF:	Bay
The above license holder, whose name is Rozz personally appeared before me and is known by type of I.D.)on	me or has produced identification this 16th day of FEB 20 16.
Stack Gna ldopkins	(Seal/Stamp)

Notary Public State of Florida
Stacey Arm Hopkins
My Commission FF 168407
Expires 11/06/2018

	rearriage wall piers within 2' of end of home per Rule 15C			Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Typical pier spacing lateral	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 lunderstand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall fies exceed 5 ft 4 in	Address of home 18D Tollis Spack Trusch being installed Lulu, FL, 320C1 Manufacturer (MUMPION Length x width 48 x 32	oard License #
within 2' of end of home spaced at 5' 4" oc Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Manufacturer Manufacturer Manufacturer FRAME TIES OTHER TIES Number Number Sidewall Ams Sheanwall		Other pier pad sizes (required by the mfg.) (required by the mfg.) (required by the mfg.) (required by the mfg.) 16 x 22.5 360 17 x 22 374 348 13 1/4 x 26 1/4 348 20 x 20 400 wall openings 4 foot or greater. Use this 17 3/16 x 25 3/16 446	POPUL AR PAD SIZ Pad Size 9 16 x 16 16 x 18	1500 psf 4' 6" 6' 7' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'	5" 18 1/2" x 18 20" x 20" 22 1/2" (342) (400) (4	Roof System: Typical Hinged PIER SPACING TABLE FOR USED HOMES	Home is installed in accordance with Rule 15-C Single wide	New Home Some Used Home Some Home installed to the Manufacturer's Installation Manual

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connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.	Electrical	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name OUT SATORICA Date Tested Q-22-2022	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. [2.5] Installer's initials	TORQUE PROBE TEST The results of the torque probe test is	x 1000 x 1000 x 1000 x 1000	77	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing. x 1000 x 1000 x 1000
Installer verifies all information given with this permit worksheet		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:	Weatherproofing The bottomboard will be repaired and/or taped. Yes Pg Pg Pg Pg Pg Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Type gasket FOUM Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	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 a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	Walls: Type Fastener: Length: Spacing: Proper Fastener: Length: Spacing: Spacing: Spacing: Spacing: Will Spacing: Spacing: Will Spacing: Will Spacing: Spacing: Spacing: Spacing: Spacing: Will Spacing:	s and organic material removed Grainage: Natural Swale Pad Other Fastening multi wide units Type Fastener: 1245 Length: 5 ' Spacing:

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

Installer Signature Cobec

Date 5/22/22

manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

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

Plumbing

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

	APPLICATION FOR CONSTRUCTION P	
_	Permit	t Application Number
Tammy Koon	PART II - SITEPLAN	
		210//
Scale: Each block represents 10	feet and 1 inch = 40 feet.	- FIC /
200	60' 3 "154 50	85 90' No. 13
Notes:	71.29 ACKES	
	SER ATTACKED	
Site Plan submitted by:	20	Contractor
Plan Approved	Not Approved	Date

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

County Health Department



