

Parcel:  
03-6S-16-03766-111

Owner & Property Info

Result: 2 of 4

Owner	<b>BLOM SUSAN A</b> 965 SW APPALACHEE TER FORT WHITE, FL 32038		
Site	1044 APPALACHEE TER, FORT WHITE		
Description*	LOT 11 APPALACHIE TRACE UNR: COMM NW COR OF NE1/4, RUN E 566.55 FT FOR POB, CONT E 949.70 FT, S 459.43 FT TO S'LY END OF A PRIVATE RD, W ALONG END OF RD 30 FT TO A PT ON W R/W OF SAME RD, S ALONG R/W 45.42 FT, W 450 FT, CONT W 471.57 FT, N 429.05 FT TO POB. 854-1351, 886-1979, 970-291, QC 978-842, DC 1389-2677, QC 1422-2592 <a href="#">less</a>		
Area	10.17 AC	S/T/R	03-6S-16
Use Code**	MOBILE HOM (000200)	Tax District 3	

STATE OF FLORIDA  
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Susan Blom,  
as the owner of the below described property:

Property tax Parcel ID number 03-6S-16-03766-111

Subdivision (Name, lot, Block, Phase) Appalachee Trace Unrec

Give my permission for Bradley Ott to place a

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

Susan G. Blom Jan 13, 2021  
Owner Signature Date


\_\_\_\_\_  
Owner Signature Date

\_\_\_\_\_  
Owner Signature Date

Sworn to and subscribed before me this 13 day of JAN, 2021. This  
(These) person(s) are personally known to me or produced ID FL DL.  
(Type)

[Signature]  
Notary Public Signature

Notary Stamp/

Notary Dale R. Burd  
 Dale R. Burd  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# GG231750  
Expires 7/16/2022

## 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

Bradley Blom

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>Glenn Whittington</u>	Signature 
	License #: <u>EC 13002957</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Ronald Bonds Sr.</u>	Signature 
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

*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

I, Glen Whittington (license holder name), licensed qualifier  
for Whittington Electric Inc (company name), do certify that  
the below referenced person(s) listed on this form is/are contracted/hired by me, the license  
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an  
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said  
person(s) is/are under my direct supervision and control and is/are authorized to purchase and  
sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dan Burt</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done  
under my license and fully responsible for compliance with all Florida Statutes, Codes, and  
Local Ordinances. I understand that the State and County Licensing Boards have the power and  
authority to discipline a license holder for violations committed by him/her, his/her agents,  
officers, or employees and that I have full responsibility for compliance with all statutes, codes  
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or  
officer(s), you must notify this department in writing of the changes and submit a new letter of  
authorization form, which will supersede all previous lists. Failure to do so may allow  
unauthorized persons to use your name and/or license number to obtain permits.

Glen Whittington EL13002957 3/7/16  
Licensed Qualifiers Signature (Notarized) License Number Date

#### NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) FL DL on this 7 day of MARCH, 20 16.

[Signature]  
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

# LICENSED QUALIFIER AUTHORIZATION

I, Michael A Boland (license holder name), licensed qualifier  
for ACE A/C of Ocala, LLC (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dale Ford</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Rocky Ford</u>	3. <u>[Signature]</u>
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

[Signature]  
Licensed Qualifiers Signature (Notarized)

CAC1817716 License Number  
ES120926 Date  
11/17/15

NOTARY INFORMATION:  
STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) \_\_\_\_\_ on this 17th day of November, 20 15

[Signature]  
NOTARY'S SIGNATURE

(Seal/Stamp)





# PERMIT NUMBER

# PERMIT WORKSHEET

page 1 of 2

Installer Robert Sheppard License # IH 1025386

Installer Mobile Phone # 386-623-2203

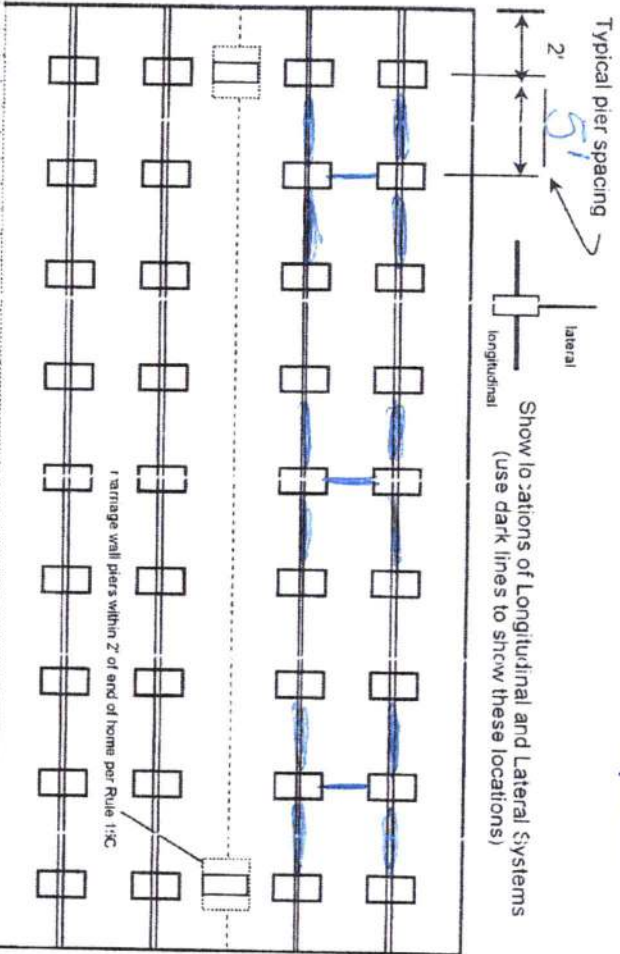
Address of home 1044 Appalachee Trail  
Fort White, FL 32058

Manufacturer LIVE Oak Length x width 76x16

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: RS



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 # 61891

Triple/Quad ☐ Serial # 10HBA22035584

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 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

Perimeter pier pad size

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

## 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

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

## OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

OTHER TIES



# PERMIT NUMBER

## PERMIT WORKSHEET

page 2 of 2

### 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 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 cantilever tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

BS Installer's initials

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

Installer Name

Robert J. Haggard

Date Tested

1-15-2021

#### 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. 3/32 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 requirements

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:

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

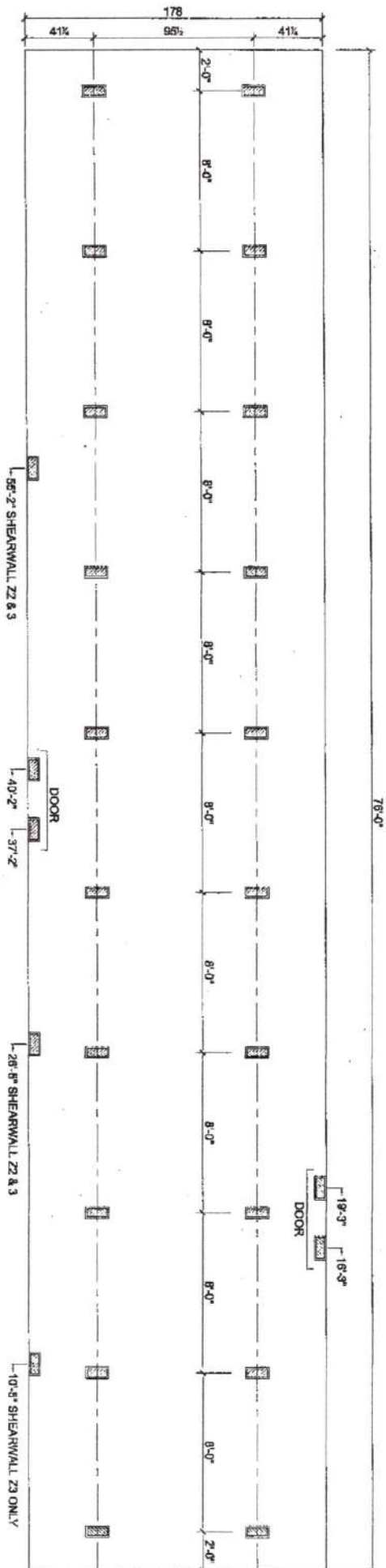
Skirting to be installed. Yes ☒ No ☒ Dryer vent installed outside of skirting. Yes ☒ N/A ☒ Range downflow vent installed outside of skirting. Yes ☒ N/A ☒ Drain lines supported at 4 foot intervals. Yes ☒ Electrical crossovers protected. Yes ☒ Other: \_\_\_\_\_

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

Robert J. Haggard

Date 1-15-21



# **SUPPORT PIER/TYP**

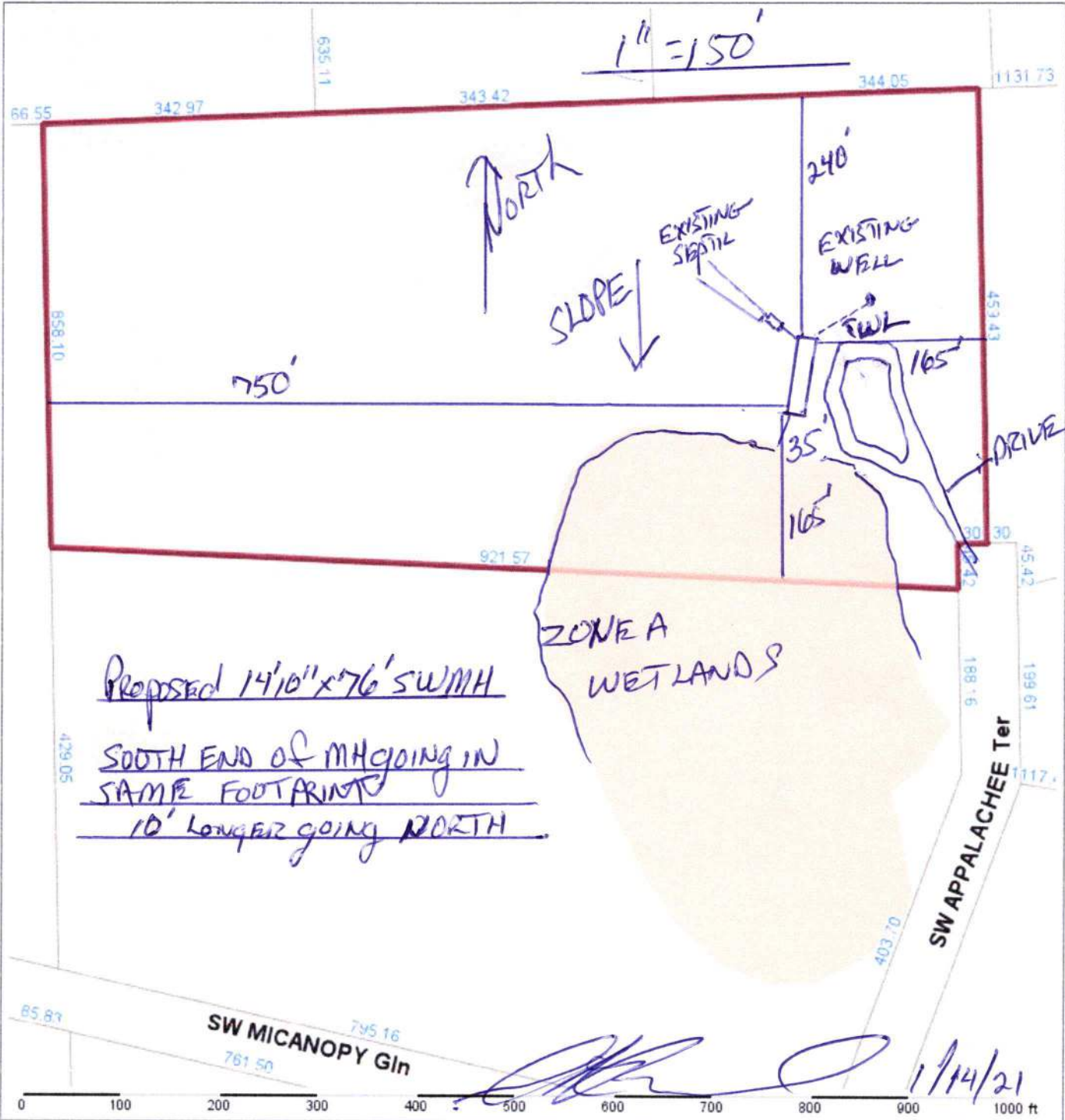
- FOUNDATION NOTES:**
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
  - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
  - FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.


08/18/20

**Live Oak Homes**  
**MODEL: V-5763P - 16 X 80**  
**3-BEDROOM / 2-BATH**

**V-5763P**

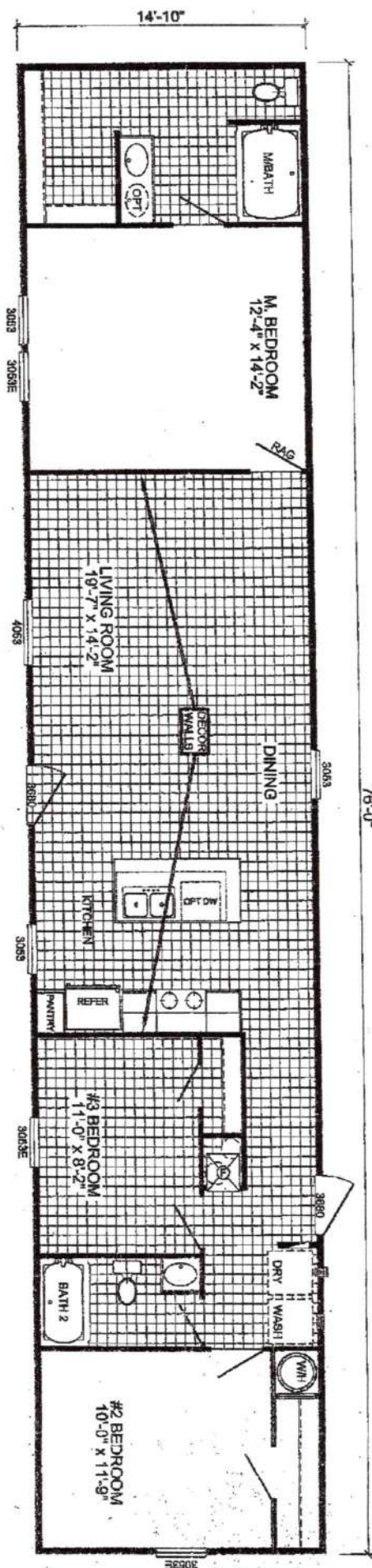




Columbia County Property Appraiser					Jeff Hampton   Lake City, Florida   386-758-1083	
PARCEL: 03-6S-16-03766-111   MOBILE HOM (000200)   10.17 AC					NOTES:	 Columbia County, FL
LOT 11 APPALACHIE TRACE UNR: COMM NW COR OF NE 1/4, RUN E 566.55 FT FOR POB, CONT E 949.70 FT, S 459.43 FT TO S'LY END OF A PRIVATE RD, W ALONG END OF						
BLOM SUSAN A		2021 Working Values				
Owner: 965 SW APPALACHEE TER FORT WHITE, FL 32038	Site: 1044 APPALACHEE TER, FORT WHITE	Mkt Lnd	\$48,547	Appraised	\$57,402	
		Ag Lnd	\$0	Assessed	\$57,402	
Sales Info	10/7/2020 \$100 I(U) 1/17/2003 \$100 I(U) 12/13/2002 \$68,300 I(Q)	Bldg	\$8,519	Exempt	\$0	
		XFOB	\$336	Total	county:\$57,402	
		Just	\$57,402	Taxable	city:\$57,402	
				other:\$57,402	school:\$57,402	
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. <a href="http://GrizzlyLogic.com">GrizzlyLogic.com</a>						



# TROY



**V-5763P - SUWANNEE VALLEY**

## 3-BEDROOM / 2-BATH

**16 X 80 - Approx. 1127 Sq. Ft.**

Date: 06/12/20

- \* All room dimensions include closets and square footage figures are approximate.
- \* Transoms windows are available on optional 9'-0" skidwall houses only.

1/14/21



District No. 1 - Ronald Williams  
District No. 2 - Rocky Ford  
District No. 3 - Robby Hollingsworth  
District No. 4 - Toby Witt  
District No. 5 - Tim Murphy



**BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY**

**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: **1/15/2021 5:13:11 PM**  
Address: **1044 SW APPALACHEE Ter**  
City: **FORT WHITE**  
State: **FL**  
Zip Code **32038**

---

Parcel ID **03766-111**

---

REMARKS: Address Verification.

**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: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY  
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125  
Email: [gis@columbiacountyfla.com](mailto:gis@columbiacountyfla.com)