

family lot. SFLP 17-95

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official [Signature] Building Official TM 9/4/17
AP# 1708-92 Date Received 8-24-17 By U Permit # 36031
Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category A
Comments _____

FEMA Map# _____ Elevation _____ Finished Floor 1 above River _____ In Floodway _____
☒ Recorded Deed or ☐ Property Appraiser PO ☒ Site Plan ☒ EH # 17-0586 ☐ 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
* w/ conditions

09-55-16.

Property ID # 03496-122 Subdivision _____ Lot# _____

▪ New Mobile Home _____ Used Mobile Home ☒ MH Size 28X60 Year 2000

▪ Applicant James Hollnagel Phone # 386-754-0046

▪ Address 309 SW dairy st, LAKE CITY, FL 32024

▪ Name of Property Owner James Hollnagel, Jr Phone# 386-754-0046

▪ 911 Address 447 SW DAIRY 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 James Hollnagel SR Phone # 386-754-0046

Address 309 SW Dairy St Lake City FL 32055

▪ Relationship to Property Owner SON

▪ Current Number of Dwellings on Property 0

▪ Lot Size _____ Total Acreage 1.76

▪ 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 Take 47 toward Ft white turn
right on Kings st go around curb to mauldin come down
make a right on dairy go down 1/4 mile on right,

▪ Name of Licensed Dealer/Installer Glenn Williams Jr Phone # 386-344-3667

▪ Installers Address 660 SE Putnam st Lake City FL 32025

▪ License Number 1H1054858 Installation Decal # 43007

U - Told Glenn what was need 8-24-17 SW spoke w/ Hollnagel 11.27.17
SW spoke w/ Glenn 11.27.17 - told to call back - m3 - full

Mobile Home Permit Worksheet

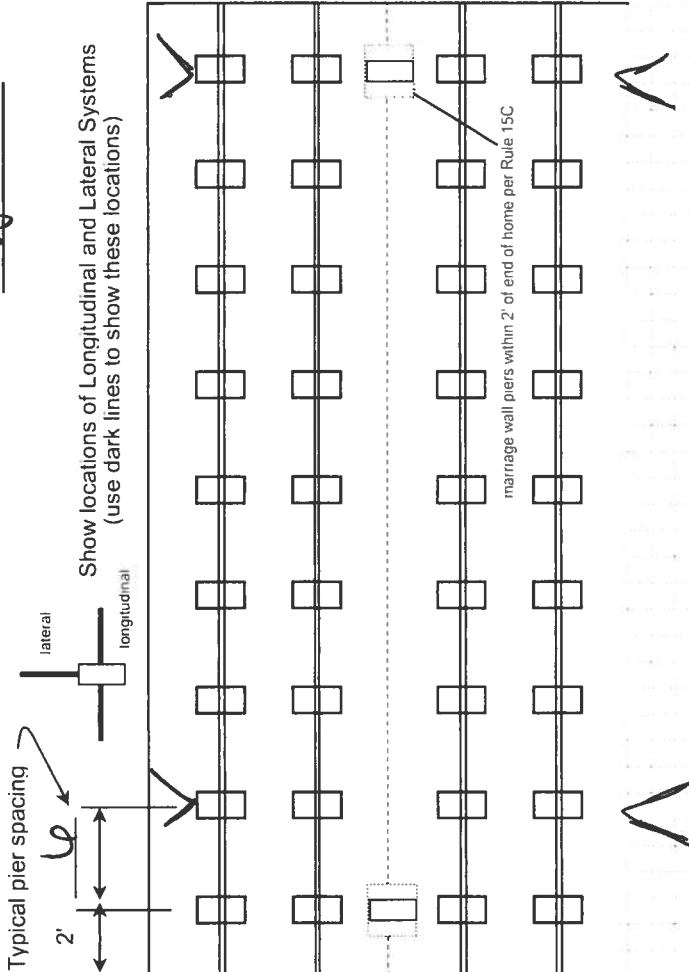
Installer: Glen Williams License # TH 1054858

Address of home being installed: TBD

Manufacturer: Clayton Length x width: 28 X 60

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: GW



Application Number: _____

Date: _____

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 # 43001

Triple/Quad ☐ Serial # 304859 A/B

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'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 18 5/8 X 18 5/8

Perimeter pier pad size 18 5/8 X 18 5/8

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 _____

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 4

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer _____

OTHER TIES

Number

Sidewall 12

Longitudinal 26

Marriage wall 8

Shearwall 1

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil _____ without testing.

x 1500 x 2000 x 1500

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 2000 x 1500 x 1500

TORQUE PROBE TEST

The results of the torque probe test is 280 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.

Installer's initials _____

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Glenn Williams

Date Tested

8-24-17

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: lag Length: 5 Spacing: 24"o
Walls: Type Fastener: lag Length: 5 Spacing: 24"o
Roof: Type Fastener: lag Length: 5 Spacing: 24"o
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 JW

Type gasket Pg. 47

fram

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

Glenn Williams

Date

8-24-17

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Alachua County
OWNERS NAME James Hollnagel PHONE 386-7540046 CELL _____
INSTALLER Glenn Williams PHONE 386-344-3669 CELL _____
INSTALLERS ADDRESS _____

MOBILE HOME INFORMATION

MAKE Clayton YEAR 01 SIZE 28 x 60
COLOR White SERIAL No. 364859
WIND ZONE 2 SMOKE DETECTOR _____

INTERIOR:
FLOORS good
DOORS good
WALLS in one Bed room
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) _____

EXTERIOR:
WALLS / SIDING one room in Home need Drywall replaced
WINDOWS good
DOORS _____

INSTALLER: APPROVED ☒ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Glenn Williams
Installer/Inspector Signature Glenn Williams License No. _____ Date _____

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature] Date 9/14/17

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1708-92

DATE RECEIVED 10/18 BY JW IS THE M H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES

OWNERS NAME JAMES HOLLANDER PHONE 386.754.0046 CELL --

ADDRESS ---

MOBILE HOME PARK --- SUBDIVISION ---

DRIVING DIRECTIONS TO MOBILE HOME 47-5 to King TR AND it turns into MAULDIN
TO DAIRY TR AND it's 1/4 mile on R

MOBILE HOME INSTALLER Glen Williams PHONE 386.344.3669 CELL 386.344.3669

MOBILE HOME INFORMATION

MAKE CLAYTON YEAR 2001 SIZE 28 X 60 COLOR WHITE

SERIAL No. 364859

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

INSPECTION STANDARDS

INTERIOR:

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

P SMOKE DETECTOR () OPERATIONAL () MISSING
P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION ---
P DOORS () OPERABLE () DAMAGED
P WALLS () SOLID () STRUCTURALLY UNSOUND Need patching
P WINDOWS () OPERABLE () INOPERABLE
P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
P CEILING () SOLID () HOLES () LEAKS APPARENT
P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
P ROOF (X) APPEARS SOLID () DAMAGED Shingles are worn

STATUS

APPROVED ✓ WITH CONDITIONS: Insulation exposed and falling out for some of floor
Could not access closets looking for Data Sheet
Could not access bathrooms
Responsibility of Data Sheet on installer

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

SIGNATURE Jay Miller ID NUMBER --- DATE 10/19/17

SITE PLAN CHECKLIST

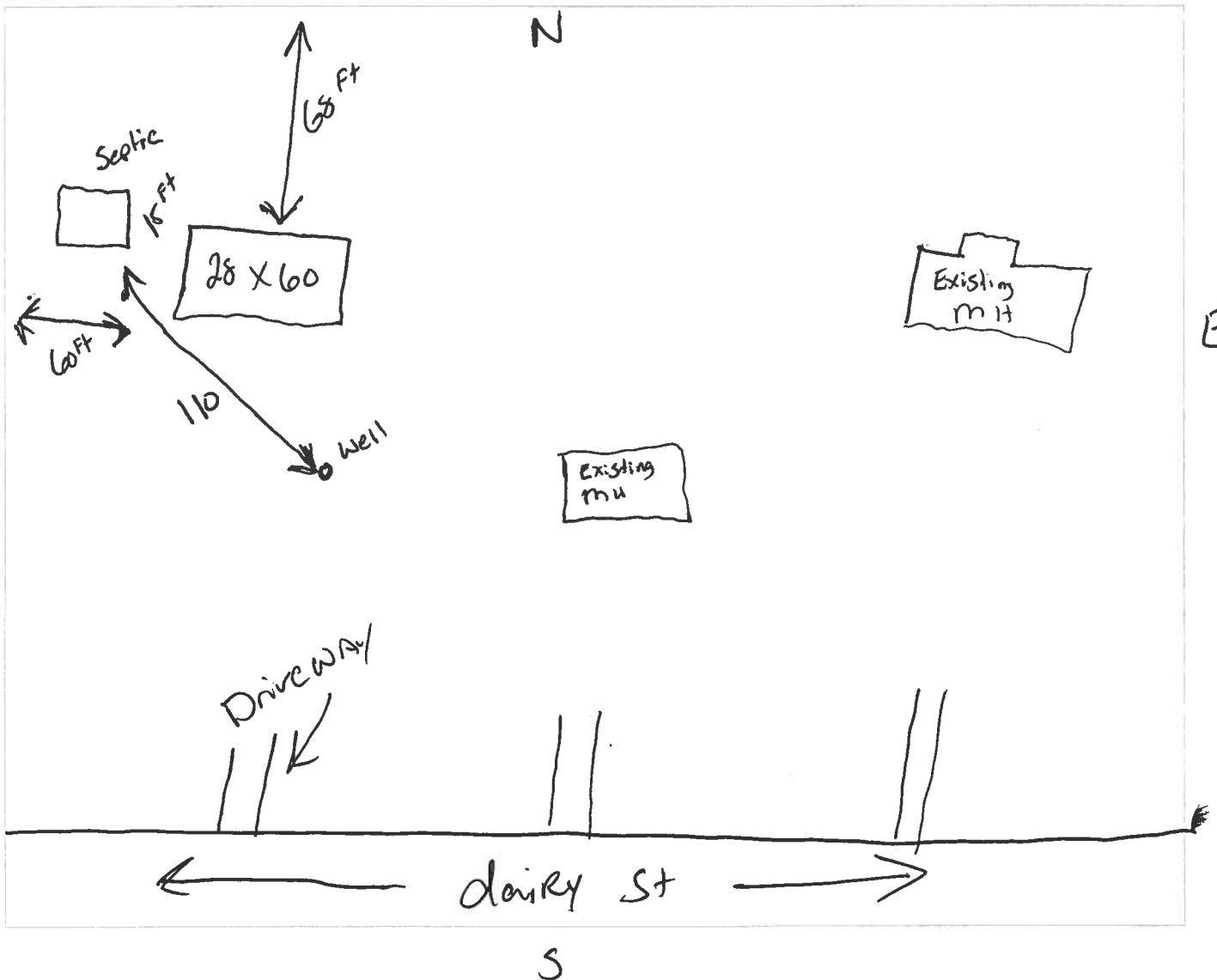
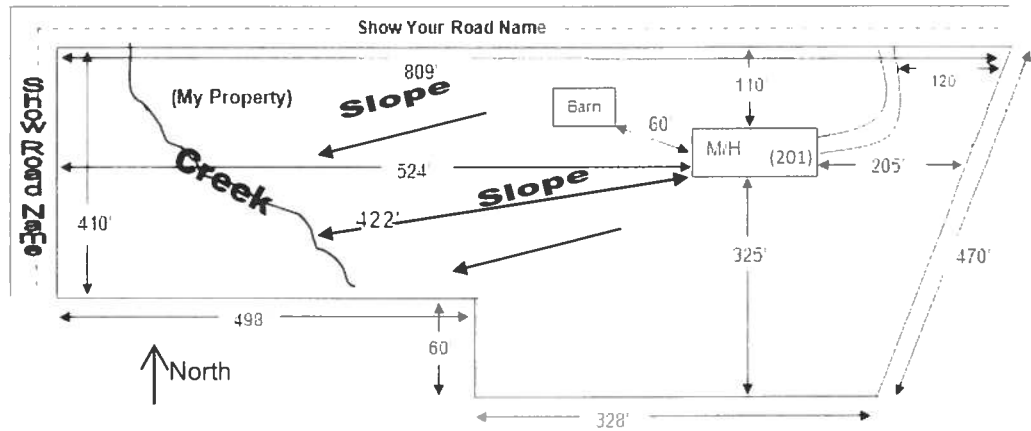
- ☐ 1) Property Dimensions
- ☐ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ☐ 3) Distance from structures to all property lines
- ☐ 4) Location and size of easements
- ☐ 5) Driveway path and distance at the entrance to the nearest property line
- ☐ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ☐ 7) Show slopes and or drainage paths
- ☐ 8) Arrow showing North direction

SITE PLAN EXAMPLE

Revised 7/1/15

NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.



Dec 6 '70 4

This Instrument Prepared by & return to:
Name: JAMES R. HOLLNAGEL
Address: 309 SW DAIRY STREET
LAKE CITY, FLORIDA 32024

Parcel I.D. #: 03496-102

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 17th day of **August**, A.D. 2017, by **JAMES HOLLNAGEL and JENNIFER T. HOLLNAGEL, HIS WIFE**, hereinafter called the grantors, to **JAMES R. HOLLNAGEL and JAMES HOLLNAGEL, AS JOINT TENANTS WITH RIGHTS OF SURVIVORSHIP** whose post office address is **309 SW DAIRY STREET, LAKE CITY, FL 32024**, hereinafter called the grantees:

(Wherever used herein the terms "grantors" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in **Columbia County, State of Florida**, viz:

COMMENCE AT THE NORTHWEST CORNER OF THE NORTHEAST ¼ OF SECTION 9, TOWNSHIP 5 SOUTH, RANGE 16, EAST, COLUMBIA COUNTY, FLORIDA, AND THENCE RUN N 89°29'39" E, ALONG THE NORTH LINE OF SAID SECTION 9, A DISTANCE OF 522.14 FEET TO THE POINT OF BEGINNING; THENCE RUN S 00°35'12" E, A DISTANCE OF 432.04 FEET; THENCE RUN S 87°10'41" E, A DISTANCE OF 384.68 FEET; THENCE RUN N 20°16'17" E, A DISTANCE OF 206.27 FEET; THENCE RUN N 31°37'36" E, A DISTANCE OF 306.59 FEET; THENCE RUN S 89°29'39" W, A DISTANCE OF 621.58 FEET TO THE POINT OF BEGINNING.

THIS DEED WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH AND MAKES NO WARRANTIES AGAINST SAME.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantors hereby covenant with said grantees that they are lawfully seized of said land in fee simple; that they have good right and lawful authority to sell and convey said land, and hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2017.

In Witness Whereof, the said grantors have signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness Signature Tyler Rogers

Printed Name

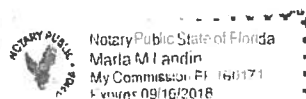
Witness Signature Marla M. Landin

Printed Name

JAMES HOLLNAGEL L.S.
Address:
309 SW DAIRY STREET, LAKE CITY, FL 32024
JENNIFER HOLLNAGEL L.S.
Address:
309 SW DAIRY STREET, LAKE CITY, FL 32024

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 17th day of **August**, 2017, by **JAMES HOLLNAGEL and JENNIFER HOLLNAGEL**, who are known to me or who have produced Driver's License as identification.



Notary Public
My commission expires _____

Columbia County Property Appraiser

updated: 8/17/2017

2016 Tax Year

Tax Collector Tax Estimator Property Card

Parcel: 09-5S-16-03496-102

Parcel List Generator

<< Next Lower Parcel Next Higher Parcel >>

2017 TRIM (pdf)

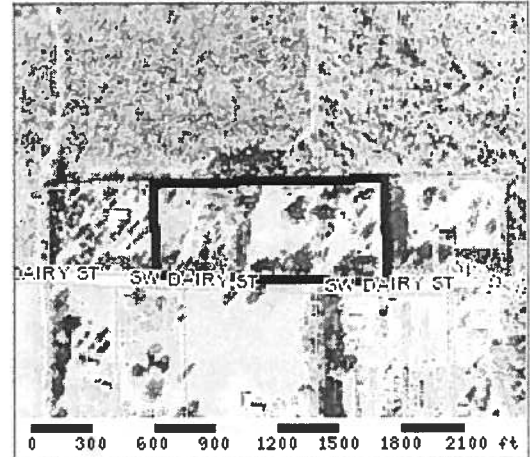
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	HOLLNAGEL JAMES R & JENNIFER T		
Mailing Address	309 SW DAIRY STREET LAKE CITY, FL 32024		
Site Address	309 SW DIARY ST		
Use Desc. (code)	SFRES/MOBI (000102)		
Tax District	3 (County)	Neighborhood	9516
Land Area	11.770 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. BEG NW COR OF NE1/4, RUN E 1627.29 FT, S 492.86 FT TO N R/W LEE DAIRY RD, RUN W 119.37 TO A POINT, CONT W 1510.49 FT, TO W LINE OF NE1/4, THENCE RUN N 401.64 FT TO POB. EXCEPT THE W 5.00 AC'S DESC AS FOLLOWS: BEG NW COR OF NE1/4, RUN S 401.64 FT, E 523.76 FT, NORTH 432.04 FT, W 522.14 FT TO POB. (AKA LOT 2A WOODKNOLL PARCEL NO. 2 REPLAT) PLAT BK 9 PG 97 & 98. ORB 760-282, 764-1164, ORB 764-1862, 9 ...more>>>		



Property & Assessment Values

2016 Certified Values		
Mkt Land Value	cnt: (0)	\$47,053.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$86,897.00
XFOB Value	cnt: (4)	\$6,621.00
Total Appraised Value		\$140,571.00
Just Value		\$140,571.00
Class Value		\$0.00
Assessed Value		\$140,571.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$90,571 Other: \$90,571 Schl: \$115,571	

2017 Working Values (...Hide Values)		
Mkt Land Value	cnt: (0)	\$46,803.00
Ag Land Value	cnt: (4)	\$0.00
Building Value	cnt: (2)	\$98,643.00
XFOB Value	cnt: (4)	\$6,621.00
Total Appraised Value		\$152,067.00
Just Value		\$152,067.00
Class Value		\$0.00
Assessed Value		\$152,067.00
Exempt Value	(code: HX H3)	\$50,000.00
Total Taxable Value	Cnty: \$98,782 Other: \$98,782 Schl: \$127,067	

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
10/25/2004	1032/242	WD	I	U	08	\$142,400.00
6/16/2004	1021/901	CT	I	U	01	\$100.00
1/31/2002	945/2443	WD	I	U	04	\$48,700.00
8/15/1992	764/1164	CD	V	U	13	\$48,632.00
2/24/1992	760/282	WD	V	U	03	\$0.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value

PREPARED BY & RETURN TO:

Name: JAMES HOLLNAGEL

Address: 309 SW DAIRY STREET
LAKE CITY, FL. 32024

Parcel No.: 03496-122

Inst: 201712021579 Date: 11/27/2017 Time: 11:15AM
Page 1 of 1 B: 1348 P: 1819 P: DeWitt Cason, Clerk of Court
Columbia County, By: BD
Deputy Clerk Doc Stamp-Deed: 0.70

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This **QUITCLAIM DEED**, made the 27th day of NOVEMBER, 2017, by JAMES HOLLNAGEL A/K/A JAMES HOLLNAGEL, SR., A SINGLE MAN hereinafter called the Grantor, to JAMES R. HOLLNAGEL A/K/A JAMES R. HOLLNAGEL, JR. whose post office address is 309 SW DAIRY STREET, LAKE CITY, FL. 32024, hereinafter called the Grantee:

WITNESSETH: That the Grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby remise, release, convey and quitclaim unto the Grantee all the right, title, interest, claim and demand which the Grantor has in and to that certain land situate in County of Columbia, State of Florida, viz:

COMMENCE AT THE NW CORNER OF NE ¼ OF SECTION 9, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, N.89°29'39"E., 522.14 FEET; THENCE S.00°35'12"E., 432.04 FEET; THENCE S.87°10'41"E., 192.27 FEET TO THE POINT OF BEGINNING; THENCE S.87°10'41"E., 191.81 FEET; THENCE N.00°29'17"W., 405.91 FEET; THENCE S.89°29'39"W., 191.49 FEET; THENCE S.00°29'17"E., 394.78 FEET TO THE POINT OF BEGINNING CONTAINING 1.76 ACRES, MORE OR LESS

THIS DEED WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH AND MAKES NO WARRANTIES AGAINST SAME.

TOGETHER WITH all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

SUBJECT TO TAXES FOR THE YEAR 2017 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

IN WITNESS WHEREOF, the said Grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Patricia Lang
Witness Signature
Printed Name: **PATRICIA LANG**

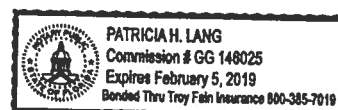
Mary Ann Tomlinson
Witness Signature
Printed Name: MARY ANN TOMLINSON

James Hollnagel, SR L.S.
Name: JAMES HOLLNAGEL, SR
Address: 309 SW DAIRY STREET, LAKE CITY, FL. 32024

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 27th day of NOVEMBER, 2017, by JAMES HOLLNAGEL, SR. who is personally known to me or who has produced Driver's License as identification.

Patricia Lang
Signature of Notary
Printed Name:
My commission expires:





COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT
263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125 x 1 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.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:	9/27/2017 3:46:36 PM
Address:	447 SW DAIRY St
City:	LAKE CITY
State:	FL
Zip Code	32024

Parcel ID	03496-102
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REMARKS: Reissue of existing address for new structure on parcel. 3rd location on parcel.

JAMES HOLLNAGEL

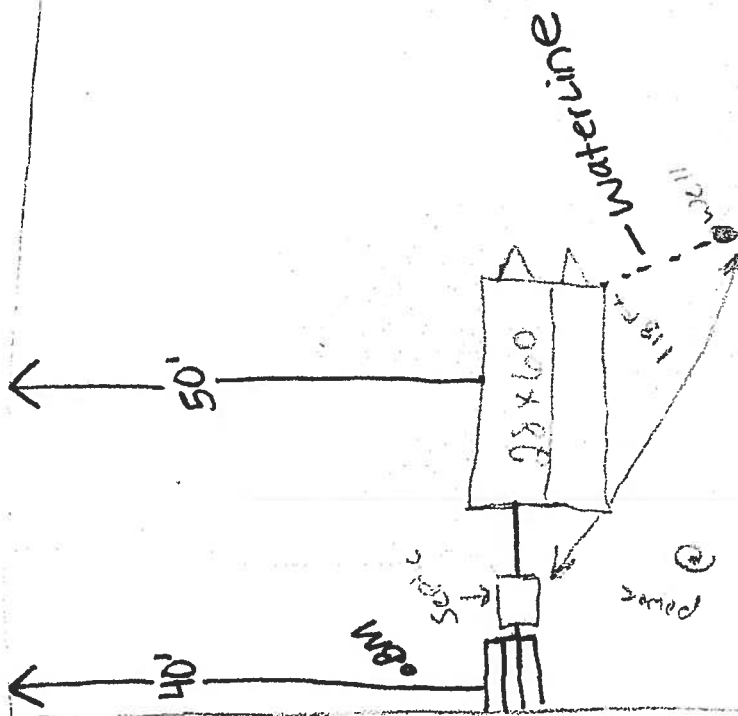
Address Issued By:  Signed: / Ronal N. Croft

Columbia County GIS/911 Addressing Department

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.

Submitted by: Paul 09-06-17
Ronald Ford
SM0001346

N ↑



Existing
plane

Existing
Home

17-2586

Dairy St

SSOCOF#: _____

done on: _____



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 17-0586E
DATE PAID: 9/15/17
FEE PAID: 60.00
RECEIPT #: 1307068

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: James and Jennifer HollnagelAGENT: Ronald Ford - Ford's Septic Tank Service, LLC TELEPHONE: 386-755-6288MAILING ADDRESS: 116 N.W. Lawley Way Lake City, Florida 32055 FAX: 386-755-6944

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 2A BLOCK: _____ SUBDIVISION: Wood Knoll PLATTED: _____PROPERTY ID #: 09-55-16-03496-102 ZONING: Rg I/M OR EQUIVALENT: ☒ Y/NPROPERTY SIZE: 11.77 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: N/A FTPROPERTY ADDRESS: 309 SW Dairy Street Lake City, FL 32024

DIRECTIONS TO PROPERTY:

47 South. (R) on CR 240. (R) on Mauldin Avenue.
(L) on Dairy Street. Home # 309 on right.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>Mobile Home</u>	<u>3</u>	<u>1680</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Ac Ford DATE: 9-5-2017

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

NORTH ↑

Permit Application Number 17-0586

----- PART II - SITEPLAN -----

See
attached.

Notes: _____

Site Plan submitted by: Qc Final

Plan Approved ☒ **REVIEWED**

Not Approved ☐

Agst
Date 11-27-17

By

Sally Ford Env Health Director - Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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, Glenn Williams, give this authority for the job address show below
Installer License Holder Name
only, 447 Scl Dairy St, 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)
James Hallnagel		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" 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.

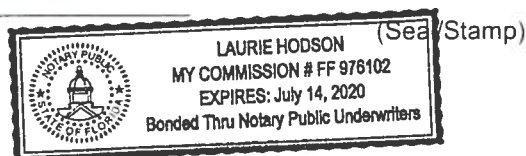
Glenn Williams 1H1054858 8-24-17
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is _____, personally appeared before me and is ~~known by me~~ or has produced identification (type of I.D.) _____ on this 24 day of August, 2017.

NOTARY'S SIGNATURE



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1708-92

CONTRACTOR

Glenn Williams

PHONE

386-348-3669

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>SAMUEL HOLMAGIEL</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>James Holmagiel</u> Phone # <u>386-754-0046</u>
MECHANICAL/ A/C _____	Print Name <u>SAMUEL HOLMAGIEL</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>James Holmagiel</u> Phone # <u>386-754-0046</u>

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.