

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

☒ SERIAL #

For Office Use Only (Revised 1-11) Zoning Official PK 15 Jan. 2014 Building Official TM 1/14/14

AP# 1401-18 Date Received 1/10 By L Permit # 31697

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Section 2.3.1 Legal Non-Conforming Lots of Record.

FEMA Map# N/A Elevation N/A Finished Floor 1 Above River River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 14-0015-E ☐ EH Release ☒ Well letter ☐ Existing well

☒ Recorded Deed or Affidavit from land owner ☐ Installer Authorization ☐ State Rd Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☒ App Fee Pd ☐ VF Form

IMPACT FEES: EMS ☐ Fire ☐ Corr ☐ Out County ☒ In County

Road/Code ☐ School ☐ = TOTAL ☐ Suspended March 2009 ☐ Ellisville Water Sys

Property ID # 35-45-17-09030-105 Subdivision Hopeful Circle LOTS 586

▪ New Mobile Home ☐ Used Mobile Home ☒ MH Size 24x54 Year 1992

▪ Applicant DANNY SULLIVAN Phone # 386-288-6558

▪ Address 6624 So. US Hwy 441 LAKE CITY, FL. 32025

▪ Name of Property Owner DANNY SULLIVAN Phone # 386-288-6558

▪ 911 Address 669 SE MAYHALL TER. LAKE CITY FL. 32025

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home DANNY SULLIVAN Phone # 386-288-6558

Address 6624 So. US Hwy 441 LAKE CITY, FL. 32025

▪ Relationship to Property Owner SELF/OWNER

▪ Current Number of Dwellings on Property None

▪ Lot Size Total Acreage 2 ac

▪ 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 441 So. To Alford MARKHAM (R) ON MAYHALL TER.
1/2 mile on (L) AT 669 MAYHALL TER.

▪ Name of Licensed Dealer/Installer Rush L. Knowles Phone # 386-755-6441

▪ Installers Address 5801 SW SR 47 LAKE CITY FL 32024

▪ License Number IH 1038219 Installation Decal # 18203

He spoke w/ Danny 1.15.15

\$657.33

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Rusty L. Kowals License # EH 11038219

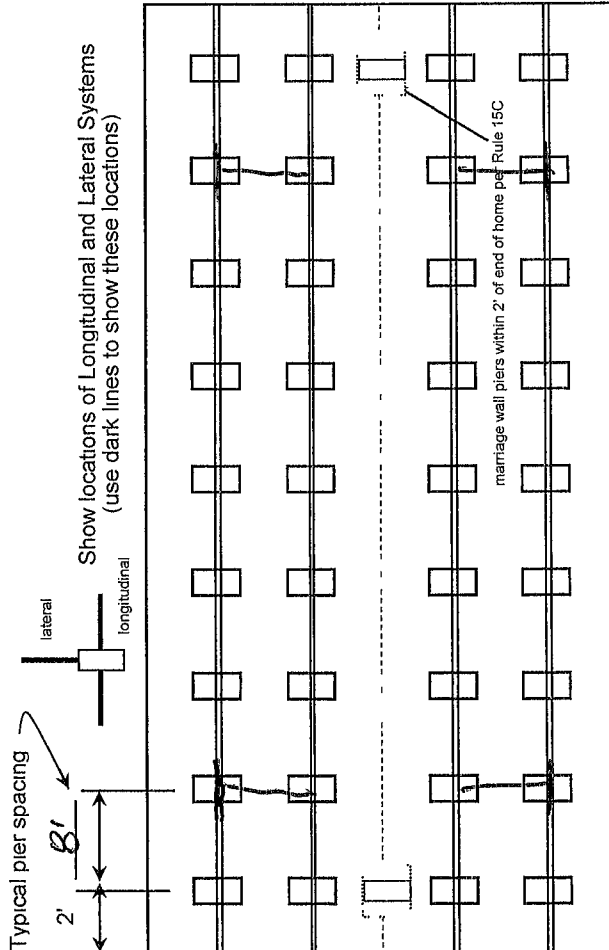
911 Address where home is being installed 669 Mayhew Terr.

Manufacturer Kortan Length x width 24x48 Box

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 RLK



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 # 18203
Triple/Quad ☐ Serial # GFD 702413, 414

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'	5'	6'	7'	8'	8'	8'
2000 psf	5'	6'	7'	8'	8'	8'	8'
2500 psf	6'	7'	8'	8'	8'	8'	8'
3000 psf	7'	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 23 1/2 x 31 1/4
Penmeter pier pad size N/A
Other pier pad sizes (required by the mfg) 16 x 16

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 10' Pier pad size 16 x 16

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

OLIVER TECH

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

4

2

2

2

2

COLUMBIA COUNTY 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 1.0 x 1.0 x 1.0

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 1.0 x 1.0 x 1.0

TORQUE PROBE TEST

The results of the torque probe test is NA 451.9 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

Rusty L. Kwoles

Date Tested

1-9-19

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 152-1

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg 152-1
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems Pg 152-1

Site Preparation

Debris and organic material removed ☒
Water drainage Natural _____ Swale _____ Pad ☒ Other _____

Fastening multi wide units

Floor Type Fastener LARS Length 6" Spacing 20"
Walls Type Fastener Staples Length 4" Spacing 24"
Roof Type Fastener Staples Length 1 1/2" Spacing 48"
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 RLK

Type gasket Rollform

Installed
Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped Yes ☒ Pg 152-1
Siding on units is installed to manufacturer's specifications Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water Yes ☒

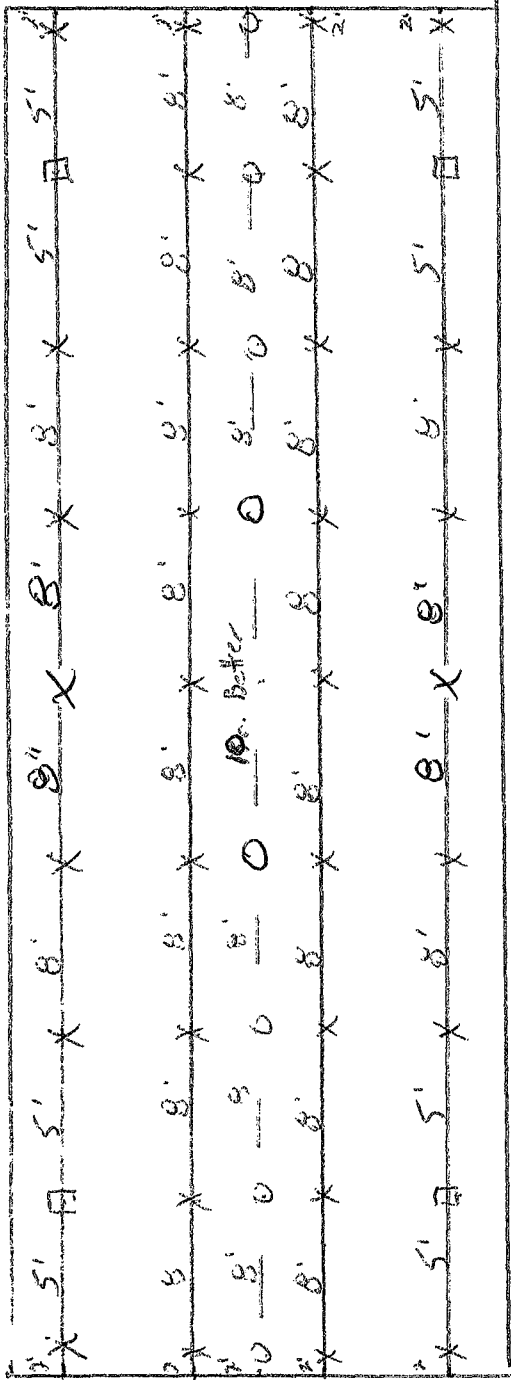
Miscellaneous

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

Installer Signature

Date 1-9-19

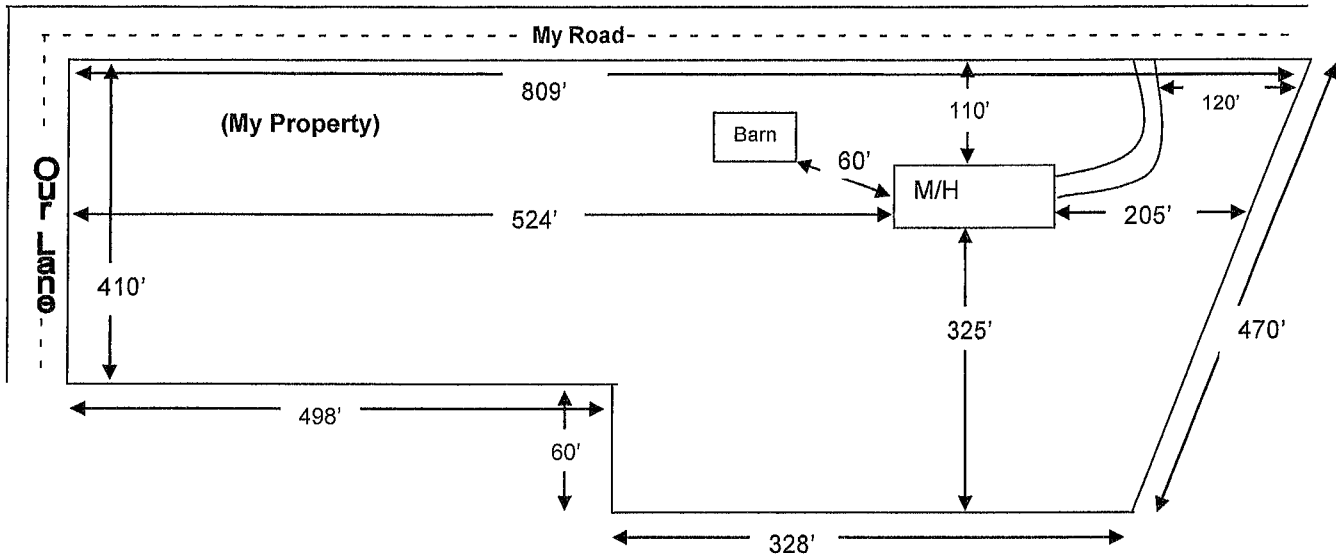


X - I Beam piers 8' OC using 23 1/4' x 31 1/4' abutments

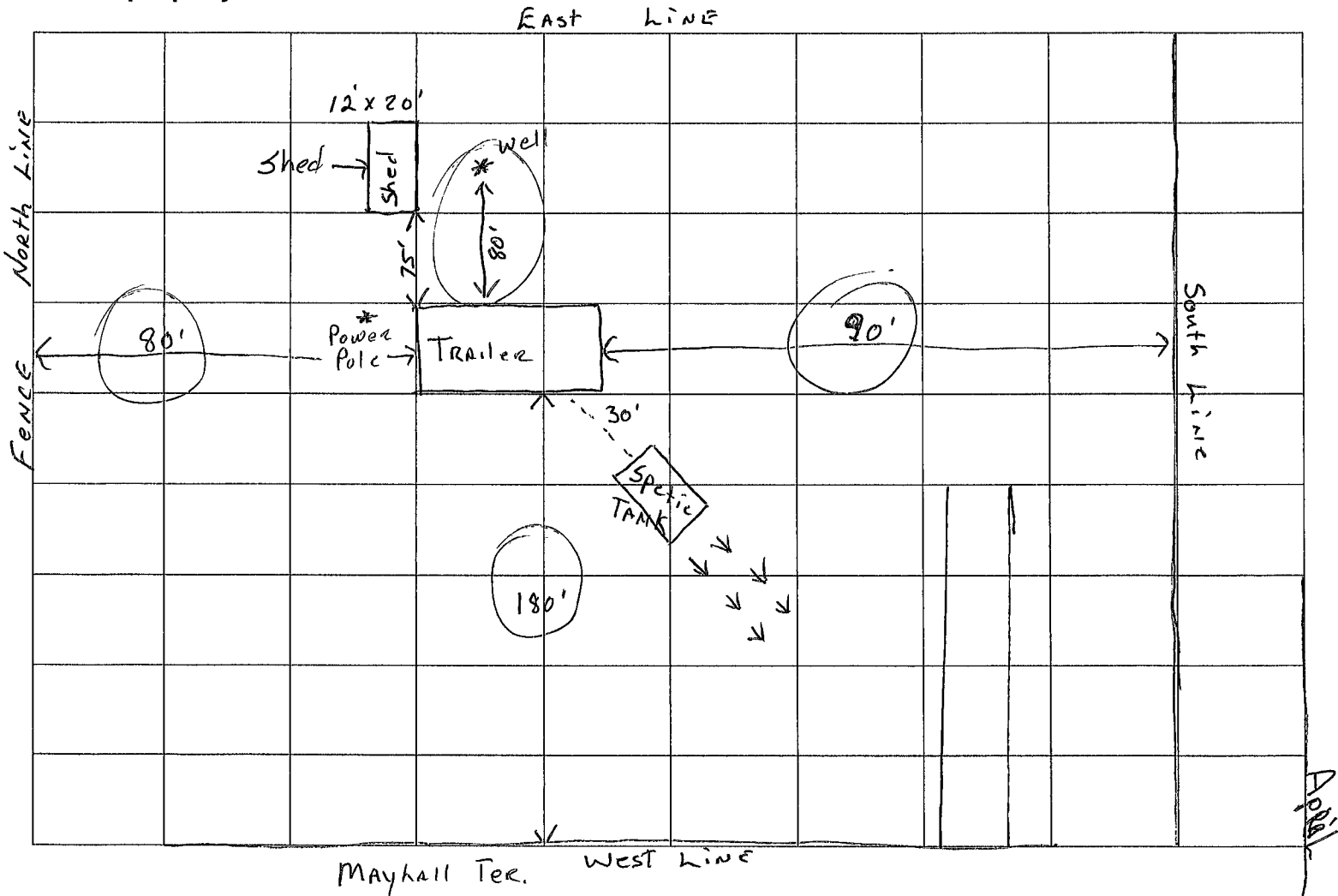
□ - 6 1101V All steel foundations from Oliver Technology

○ - Center line piers 8' OC using 16x16 Abutment

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1401-18 CONTRACTOR Rusty Knowles PHONE 386.755.6441

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>DANNY SULLIVAN</u> License # _____	Signature <u>Danny R Sullivan</u> Phone # <u>386-288-6558</u>
✓ MECHANICAL/ A/C _____	Print Name <u>DANNY SULLIVAN</u> License # _____	Signature <u>Danny R Sullivan</u> Phone # <u>386 288 6558</u>
✓ PLUMBING/ GAS	Print Name <u>Rusty L Knowles</u> License # <u>EH 1038219</u>	Signature <u>[Signature]</u> Phone # <u>386.755-6441</u>

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.



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, Rusty L. Knowles, give this authority for the job address show below
Installer License Holder Name

only, _____, 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)
✓ DANNY SULLIVAN	Danny R Sullivan	☐ Agent ☐ Officer ☒ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ 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.

[Signature] License Holders Signature (Notarized) IH1038219 License Number 1-9-14 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is RUSTY L KNOWLES,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 9 day of January, 2014.

April D Madden
NOTARY'S SIGNATURE

(Seal/Stamp)



Columbia County Property Appraiser

CAMA updated 12/3/2013

2013 Tax Year

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Parcel: 35-4S-17-09030-105

<< Next Lower Parcel

Next Higher Parcel >>

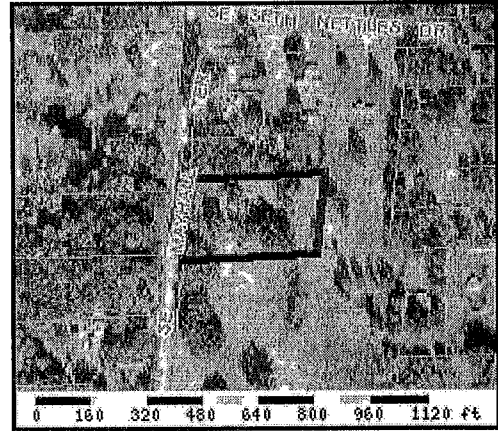
Interactive GIS Map

Print

Owner & Property Info

Search Result 1 of 1

Owner's Name	SULLIVAN DANNY RAY & BRENDA J		
Mailing Address	6624 SOUTH U S HIGHWAY 441 LAKE CITY, FL 32025		
Site Address			
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	35417
Land Area	2.000 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction		
LOTS 5 & 6 HOPEFUL CIRCLE S/D ORB 767-2204, 899-1803, SWD 1148-1570 WD 1152-309 & WD 1256-500			



Property & Assessment Values

2013 Certified Values		
Mkt Land Value	cnt (0)	\$34,760.00
Ag Land Value	cnt (3)	\$0.00
Building Value	cnt (0)	\$0.00
XFOB Value	cnt (0)	\$0.00
Total Appraised Value		\$34,760.00
Just Value		\$34,760.00
Class Value		\$0.00
Assessed Value		\$34,760.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$14,697 Other: \$14,697 Schl: \$34,760	

2014 Working Values

NOTE:
2014 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/10/2013	1256/500	WD	V	U	37	\$50,000.00
6/10/2008	1152/309	WD	V	U	01	\$100.00
4/22/2008	1148/1570	WD	V	U	01	\$100.00
11/30/1992	767/2204	WD	V	Q		\$19,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
			NONE			

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
						NONE

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
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10.00
350.00
360.00

WARRANTY DEED

THIS INDENTURE, made this 10th day of June, 2013, between DMAC OF LAKE CITY, INC., a Florida corporation, whose address is Post Office Box 2103, Lake City, Florida 32056-2103, Grantor, and DANNY RAY SULLIVAN and BRENDA JUNE SULLIVAN, husband and wife, whose address is 6624 South U.S. Highway 441, Lake City, Florida 32025, Grantees,

W I T N E S S E T H:

That said Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS, and other good and valuable considerations to said Grantor in hand paid by Grantees, the receipt whereof is hereby acknowledged, has granted, bargained and sold to Grantees, and Grantees' heirs, successors and assigns forever, the following described lands in COLUMBIA County, Florida: 911 NW 669 SE Mayhall Tr.

Lots 5 and 6, Hopeful Circle Subdivision, a recorded subdivision situated in Section 35, Township 4 South, Range 17 East, Columbia County, Florida.

(Tax parcel number 35-4S-17-09030-105)

SUBJECT TO: Taxes for 2013 and subsequent years; restrictions and easements of record; and easements shown by the plat of said property.

Said Grantor does hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, Grantor has caused this instrument to be executed by its duly authorized officer the day and year above written.

Signed, sealed and delivered
in the presence of:

Eddie M. Anderson
Print Name: Eddie M. Anderson

Donna H. Anderson
Print Name: DONNA H. Anderson
Witnesses as to Grantor

DMAC OF LAKE CITY, INC.

David E. Mangrum
David E. Mangrum, President

This Instrument Was Prepared By:

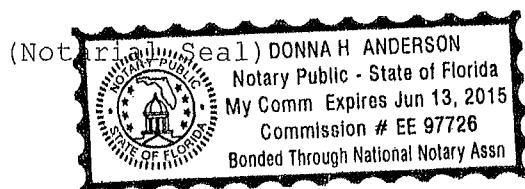
EDDIE M. ANDERSON, P.A.

Post Office BOX 1179

LAKE CITY, FLORIDA 32056-1179

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 10th day of June, 2013, by DAVID E. MANGRUM, as President and on behalf of DMAC OF LAKE CITY, INC., a Florida corporation. He is personally known to me.



Donna H. Anderson
Notary Public
My commission expires:

Hall's Pump & Well Service, Inc. 904 NW Main Blvd, Lake City FL. 32055

386-752-1854 Phone

This document is an agreement between Hall's Pump & Well Service

And Danny Sullivan

1. Hall's Pump & Well is to drill 4 inch well using steel casing to 100 feet, and
Install 1/2 hp pump and motor on 1 1/2 inch drop pipe
with 81 gallon bladder over tank setup

Permit: 40.00

Cost: 2850.00

2. Initial, all drilling and casing over 100 ft is additional cost per ft @ \$17.00
3. 1 Initial, Quality of water cannot be guaranteed.

Note: Volume of water will be ample to sustain pump.

4. All labor and material to complete job is to be furnished by Hall's Pump & Well.

5. All trenches and pipe run for distribution or wire for power supply will be extra. \$5.00 per ft

ALL MATERIAL SHALL REMAIN PROPERTY OF HALL'S PUMP & WELL UNTIL PAID IN FULL, TERMS TO BE PAID IN FULL WHEN WORK IS COMPLETED – we reserve the right to repossess all material if not paid when completed.

In the event Hall's Pump & Well has to refer a past due contract or any part to an attorney or collection agency the purchaser agrees to pay all attorney fees and court cost or collections agency fees.

We require a deposit of a minimum of 50% down payment. Not required if bank loan approved.

Deposit Required: CC

Purchaser Information:

Date: 1-8-14

Print Name: Danny Sullivan

Sign Name: Danny H. Sullivan

Billing Address:

Street: 6624 South US Hwy 441

City: Lake City FL 32025

State & Zip:

Phone #: 1386288-6558

911 Addresses: 669 May Hall St

Lake City FL 32025

Property ID: _____

Hall's Pump & Well Service

Sign Name: Mitchell Cam

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 1/10 BY SW 1401-18 IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO
OWNERS NAME Danny Sullivan PHONE 386 CELL 288-6558
ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____
DRIVING DIRECTIONS TO MOBILE HOME ROSE CREEK JONAS VILLAGE - off 441S
Call - 867.9280 - BRENDA

MOBILE HOME INSTALLER Rusty Knowles PHONE 752.6441 CELL _____

MOBILE HOME INFORMATION

MAKE HORON YEAR 1992 SIZE 24 x 48 COLOR Gray
SERIAL No. GIEG702413/414

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 PLEASE CALL
P DOORS () OPERABLE () DAMAGED MS. BRENDA PRIOR to going !!
P WALLS () SOLID () STRUCTURALLY UNSOUND
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:

/ 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 _____

SIGNATURE [Signature] ID NUMBER 313 DATE 1/14/14

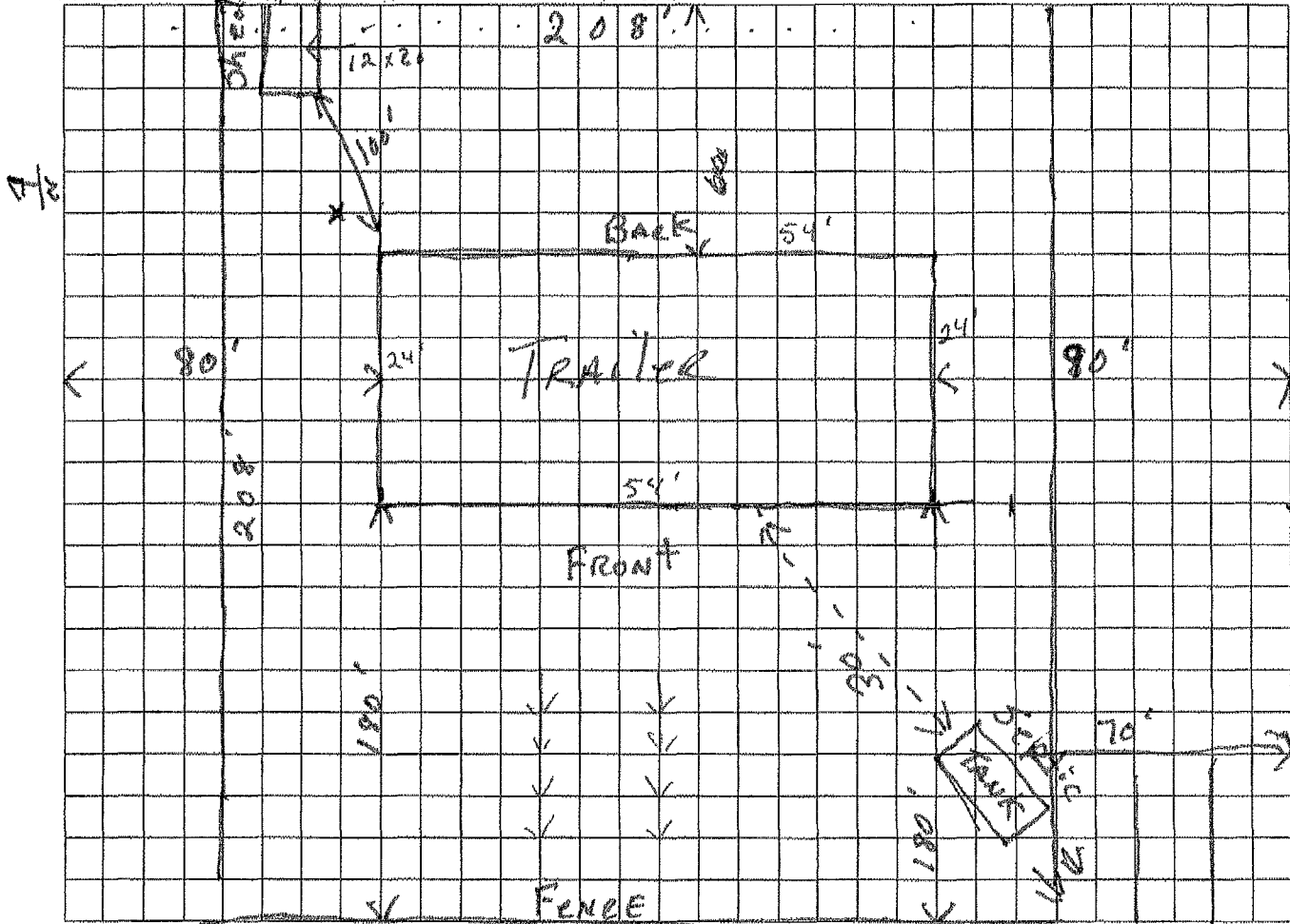
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

14-8015E

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes:

1 AC OR 2

Site Plan submitted by

Darryl R. Sullivan

Plan

REVIEWED

Not Approved

Sullivan

Date 1/14/14

By

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 14-0015E
DATE PAID: 1/10/14
FEE PAID: 68.00
RECEIPT #: 1131285

APPLICATION FOR:

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

APPLICANT: DANNY SULLIVANAGENT: _____ TELEPHONE: 386-288-6558MAILING ADDRESS: 6624 So. US Hwy 441 LAKE O. FL. 32025

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: 546 BLOCK: _____ SUBDIVISION: Hopeful Circle PLATTED: _____PROPERTY ID #: 35-45-17E-09030-105 ZONING: _____ I/M OR EQUIVALENT: [Y / N]PROPERTY SIZE: 2 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: _____

DIRECTIONS TO PROPERTY: 441 So. left on Alford Markham Right on Mayhall Ter.
669 SE Mayhall Ter. on Left.

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>Trailec</u>	<u>3</u>	<u>1300</u>	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Danny P. SullivanDATE: 1/10/14

