## PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official Building Official Building Official	
AP# 1908 - 16 Date Received 8/13/19 By MG Permit # 38479  Flood Zone X Development Permit Zoning MH-2 Land Use Plan Map Category RUL	_
Flood Zone Development Permit Zoning Will-E Land Use Plan Map Category RUL	<u>د</u>
comments Replacing W/H in existing W/H parle, floor one	6
foot above the road	-
FEMA Map# Elevation Finished Floor River In Floodway	
□ Recorded Deed or Property Appraiser PO Site Plan □ EH# 19-0614 □ 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 Paid on Property □ Out County □ In County ▼Sub VF Form	
Property ID #34-3S-16-02509-001 Subdivision West Lake City Hills Lot# 18	20B
New Mobile Home	_
■ Applicant Dale Burd Phone # 386-365-7674	
• Address 20619 CR 137, Lake City, FL, 32024	
CCF Properties LLC	
911 Address 152 Helen Dr, Lake City, FL,	
Circle the correct power company -   (Circle One) -   (C	
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>	
Name of Owner of Mobile Home Same Phone # Same	
Address11169 Cedar Creek Farms Road, Glen St. Marv. FL. 32040	
• • • • • • • • • • • • • • • • • • • •	
Relationship to Property Owner Same	
Current Number of Dwellings on Property14	
■ Lot Size 312 x 385 Total Acreage 3	
Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle on	e)
(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 Yes	
<ul> <li>Driving Directions to the Property US 90 West, TR Lake City Ave, TR NW Apple Lane, TL</li> </ul>	
Helen Dr, 5th lot on left	_
	_
	_
Name of Licensed Dealer/Installer <u>Brent Strickland</u> Phone # 386-365-7043	
Installers Address 1294 Hamp Farmer Road, LC, FL, 32055	
■ License Number IH-1104218 Installation Decal # 62759	

#### Legend

#### Parcels

2018Aerials



Addresses

SRWMD Wetlands

•

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

BΑ

■ AE

= AH

LidarElevations

# Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Aug 15 2019 15:27:04 GMT-0400 (Eastern Daylight Time)



### Parcel Information

Parcel No: 34-3S-16-02509-001 Owner: CCF PROPERTIES LLC Subdivision: WEST LAKE CITY HILLS

Lot:

Acres: 2.670703 Deed Acres: 3 Ac

District: District 3 Bucky Nash Future Land Uses: Residential - Low

Flood Zones:

Official Zoning Atlas: RSF/MH-2



others

34-3S-16-02509-001 Parcel:

Owner & Property Info		Result: 2 of 2	
Owner	CCF PROPERTIES LLC 11169 CEDAR CREEK FARMS ROAD GLEN SAINT MARY, FL 32040		
Site	134 HELEN DR,		
Description*	LOTS 18, 19, 20-A & 20-B BLOCK A WEST LAKE CITY HILLS S/D. 627-331, 658-700, 692-825, 716 -815, 759-1189, 823-2334, 1005 -2113, WD 1018-2305, WD 1041- 781, WD 1058-1921, WD 1059- 1380, WD 1236-1018, WD 1363- 396,		
Area	3 AC	S/T/R	34-38-16
Use Code**	MH PARK (002802)	Tax District	2

<sup>\*</sup>The Description above is not to be used as the Legal Description for this

### Property & Assessment Values

2018 Certified Values		2019 Wo	rking Values
Mkt Land (3)	\$38,104	Mkt Land (3)	\$39,354
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (9)	\$47,151	Building (8)	\$48,564
XFOB (2)	\$56,400	XFOB (2)	\$56,100
Just	\$141,655	Just	\$144,018
Class	\$0	Class	\$0
Appraised	\$141,655	Appraised	\$144,018
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$141,655	Assessed	\$144,018
Exempt	\$0	Exempt	\$0
	county:\$141,655		county:\$144,018
Total	city:\$141,655	Total	city:\$144,018
Taxable	other:\$141,655	Taxable	other:\$144,018
	school:\$141,655		school:\$144,018

parcel in any legal transaction.

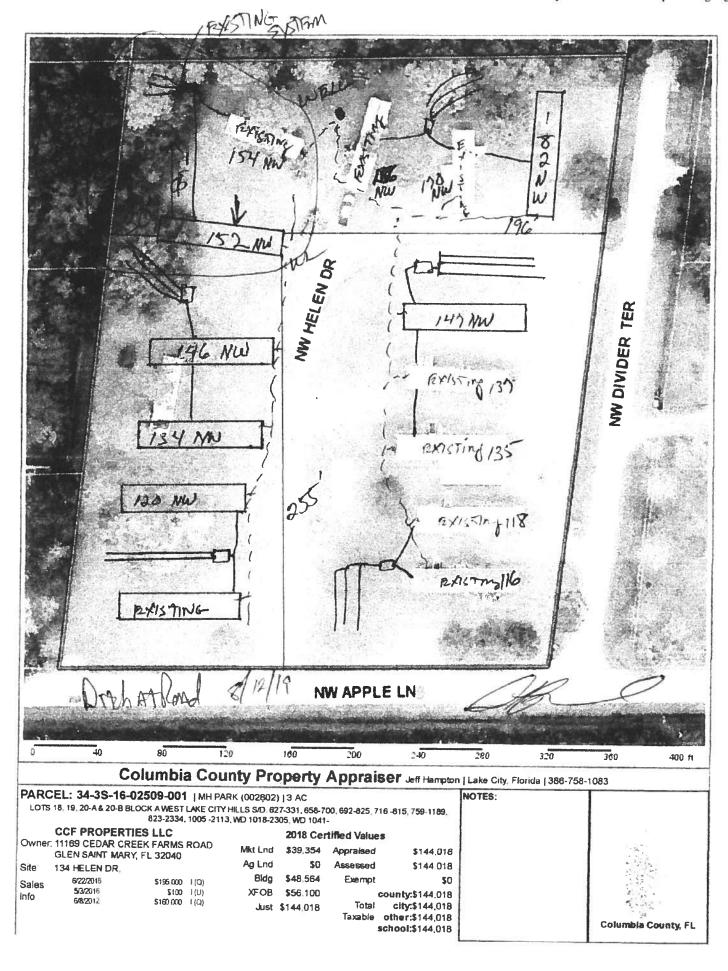
\*\*The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

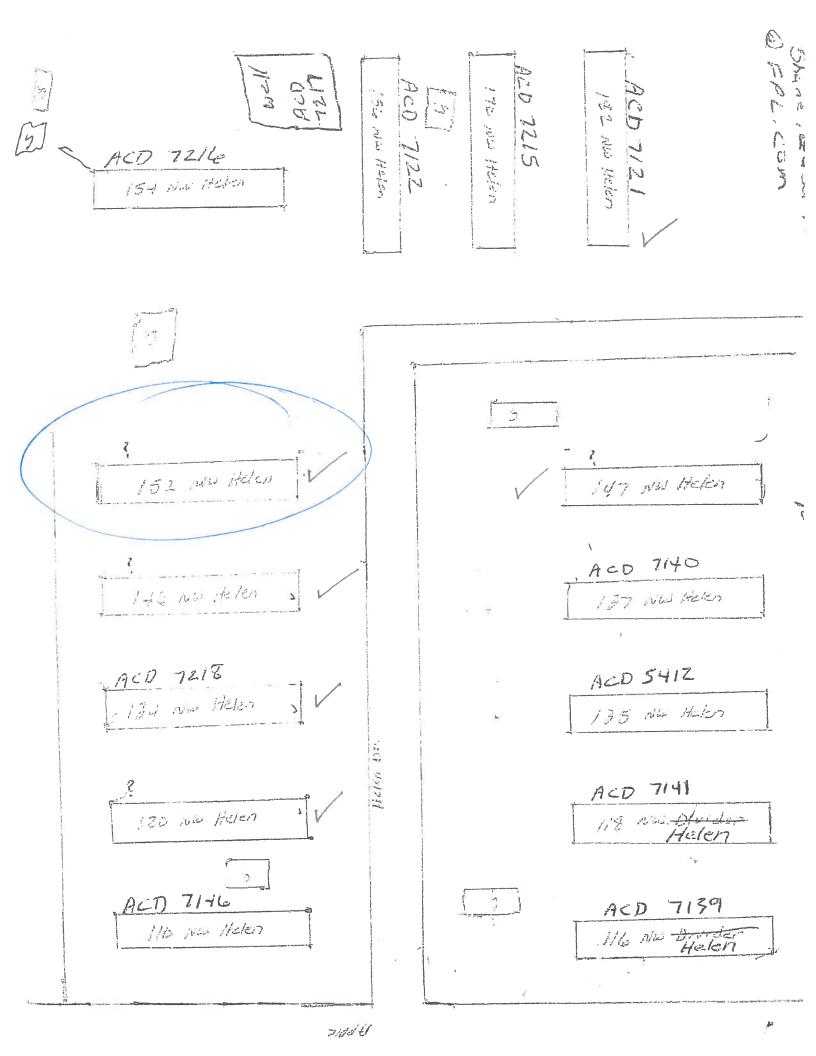
#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER	<del></del>	CONTRACTOR	Brent Strickland	PHONE 386-365-7043
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT  CCF Properties LLC					
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</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.					
					submitted to this office prior to the corders and/or fines.
ELECTRICAL	Print Name	Steve Stewar	t	Signature S	Les Sterast
	ł	Owner		•	4-334-9115
			Qualifier Form Attach		
MECHANICAL/	Print Name	e Steve Stewart		Signature_	in stone
A/C	License #:	Owner		Phone #: 904	4-334-9115
			Qualifier Form Attach	ed	and the second s
Qualifier Forms cannot be submitted for any Specialty License.					
Specialty L	icense	License Number	Sub-Contractor	s Printed Name	Sub-Contractors Signature
MASON					
CONCRETE FIN	IISHER				
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					

Revised 10/30/2015

time the employer applies for a building permit.





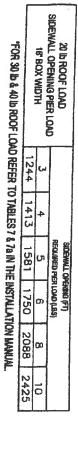
	marriage wall piers within 2' of and of home per Rule 15C		Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	i understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.  Installer's initials  Typical pier spacing  Installer's initials	Installer Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043  Address of home being installed  AKR License # IH 1104218  License # IH 1104218
within 2' of end of home spaced at 5' 4" oc V  Longitudinal Stabilizing Device (LSD)  Manufacturer  Longitudinal Stabilizing Device w/ Lateral Arms  Marnage wall  Shearwall  Shearwall	3/16 1/2 10RS	Piek Pau Size   $1/2/2$   Pad Size   Sq In   Parimeter pier pad size   $1/2/2$   Pad Size   Sq In   $16 \times 16$   $256$   Perimeter pier pad sizes   $1/2/2$   $18.5 \times 18.5$   $342$   Other pier pad sizes (required by the mfg.)   $1/2/2$	8; 8; 8; 8; 8; 8; 8; 8; 8; 8; 8; 8; 8; 8	tem:TypicalHinged  PIER SPACING TABLE FOR USED    oter   16" x 16"	New Home

is accurate and true based on the	Connect all sewer drains to an existing sewer fan or sentic tank. Do
Installer verifies all information given with this	source. This includes the bonding wire between mult-wide units. Pg. 28
	Connect electrical conductors between multi-wide units but not to the main
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	Date Tested B-12-19
Skirting to be installed. Yes No	Installer Name DUIT STICLUSED INSTALLER
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	reading is 2/5 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.  Installer's initials
Weatherproofing	
Pg Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	The results of the torque probe test is 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.
Installer's initials	TORQUE PROBE TEST
a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	×1600 × 1600 × 1500
Gasket (weatherproofing requirement)  I understand a properly installed gasket is a requirement of all new and used	<ol> <li>Using 500 lb. increments, take the lowest reading and round down to that increment.</li> </ol>
Type Fastener: Type Fastener: Type Fastener: For used homes a thin, 30 g will be centered over the pear	POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the home at 6 locations.  2. Take the reading at the depth of the footer.
Fastening multi wide units  Type Fastener:  I enoth:	×1/00 ×1700 ×1000
Debris and organic material removed  Water drainage: Natural Swale Pad Cother	er tests are rounded down to 1500 without testing.
Site Preparation	POCKET PENETROMETER TEST

Installer Signature BALM & Mach Usud Date 8-12-19

independent water supply systems. Pg.

Connect all potable water supply piping to an existing water meter, water tap, or other



15'-4" 1 TYPICAL FRAME SUPPORT PIERS 1 FRONT DOOR PIERS 33'-4" L30'-5 1/2" 0 22'-5" 15'-4" 14'-1" REAR DOOR, PIERS 13'-5 1/2" 710'-2" 42 99 1/2 42

G = GASINLET	D = DWY PLUMBING DROP	W = WATER INLET	E = ELECTRICAL DROP	SERVICE DROP LEGEND	
	ŗ				:

PIER LEGEND

THESE NAMED IS \* PIER PERMETER

# PIER PORCHREDESSED ENTRY

NOTES:

REFER TO TABLES 6 AND 6a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT DO NOT REQUIRE PERIMETER BLOCKING, REFER TO TABLES 7 AND 7a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT REQUIRE PERIMETER BLOCKING, REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS. REFER TO TABLE 9 FOR PIER CONFIGURATION AND MAXIMUM ALLOWABLE HEIGHTS, CROSS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 18, 19, AND 20).

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THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 8" HBEAMS IS 8 FEET, 10" & 12" HBEAMS IS 10 FEET.
SERVICE DROP LOCATIONS IDENTIFIED ARE
APPROXIMATE.
FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY.
CONTACT THE MFG FACILITY FOR SPECIFICATIONS OF
OPTIONS ORDERED.

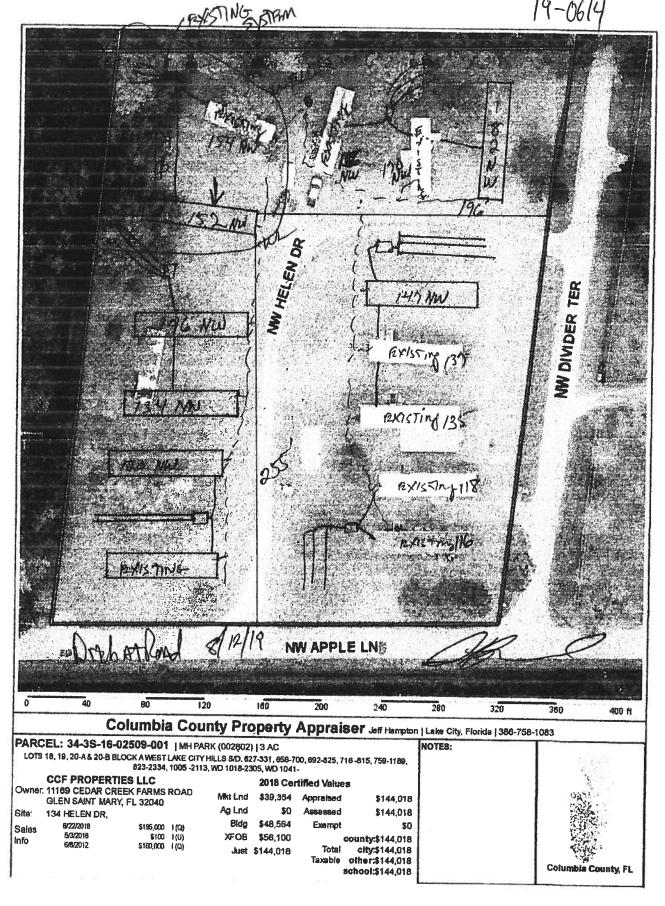
Froduct Designer: History N/A SQ.FT. 1,165 SQ.FT. (STD PLAN "CONDITIONED" (W/OPT. PORCH/RECESS "CONDITIONED" 16' x 76' TR11+ Date:2.19.19 Scale: N.T.S. Model #: TRU | 6763A Drawing #1 TRU-5007-76-3



## STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL

PERMIT NO.	19-0614
DATE PAID:	8/13/19
FEE PAID:	\$ 60,00
RECEIPT #=	1428496
	. 100110

APPLICATION :	FOR CONSTRUCTION	N PERMIT	RECEIPT #= 1428446
APPLICATION FOR:  [ ] New System [ √ ] E:  [ ] Repair [ ] A	xisting System pandonment	[ ] Holding Tan	k [ ] Innovative
APPLICANT: CCF Properties LLC			
AGENT: Dale Burd / Dale Burd LLC		Т	ELEPHONE: 386-365-7674
MAILING ADDRESS: 20619 County R	oad 137, Lake City, FL, 32	024	
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUES	F TO 489.105(3)(m) D PROVIDE DOCUMENTA	OR 489.552, FLORIDATION OF THE DATE TO	A STATUTES. IT IS THE
PROPERTY INFORMATION			
LOT: 18-20B BLOCK: A	SUBDIVISION: West L	ake City Hills S/D	PLATTED: na
PROPERTY ID #: 34-3S-16-02509-00	<u>1</u> 20	NING:I/M	OR EQUIVALENT: [ No ]
PROPERTY SIZE: 3 ACRES	WATER SUPPLY: [ ]	PRIVATE PUBLIC [	✓]<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 38	.0065, FS? [ No	] DIST	ANCE TO SEWER: na FT
PROPERTY ADDRESS: 152 Helen Dr.	Lake City, FL, 32055		
DIRECTIONS TO PROPERTY: US 90	West, TR Lake City Ave,	TR NW Apple Lane, TL NW	V Helen Dr, 5 th lot on left
BUILDING INFORMATION	[✓] RESIDENTIAL	[ ] COMMERC	CIAL
Unit Type of No Establishment	No. of Buildin	ng Commercial/Inst	titutional System Design ar 64E-6, FAC
1 SF Residential	3 1165	SW for SW Mobile h	ome park replacement
2		Floor plans and existi	ng permits attached
3			
4	Marting and the second second		
[ ] Floor/Equipment Drains	[ ] Other (Spec	cify)	
SIGNATURE:			DATE: 8/12/2019



Permit Application Number

# STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

CCF	PART II - SITEPLAN	
Scale: 1 inch = 40 feet.	ANTI OTTEL DAY	
	1	
	Plansia Ampehred	
e		
Notes:		
Site Plan submitted by:	8/12/18	CONTRACTOR
Pian Approved  By	Not Approved	Date \$ 15/18
	1000	County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT