DATE 03/17/2008

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000026855

APPLICANT JOANN SHIPP PHONE 965-8168

ADDRESS 355 NE LAVERNE ST LAKE CITY FL 32055

OWNER LYNN REED PHONE 397-5314

ADDRESS 204 NE RANGE RD LAKE CITY FL 32055

CONTRACTOR JOHN SHIPP PHONE 965-8168

LOCATION OF PROPERTY 90E, TL ON 100, TR ON WILLIAMS ST, TL ON RANGE RD,
1ST DRIVE ON LEFT INTO MH PARK, FOLLOW STRAIGHT TO MH

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT ____ STORIES ____

FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____

LAND USE & ZONING AG-3 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 8 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 27-3S-17-05587-005 SUBDIVISION LYNN'S LAKESIDE MH PARK

LOT 6 BLOCK ____ PHASE ____ UNIT ____ TOTAL ACRES 1.45

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
		IH0000334	JoAnn Shipp

Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident
EXISTING	08-0194	CS	JH	N

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD, EXISTING MH TO BE REMOVED
2.3.8 NON-CONFORMING MH PARK

Check # or Cash 506

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ date/app. by Foundation _____ date/app. by Monolithic _____ date/app. by

Under slab rough-in plumbing _____ date/app. by Slab _____ date/app. by Sheathing/Nailing _____ date/app. by

Framing _____ date/app. by Rough-in plumbing above slab and below wood floor _____ date/app. by

Electrical rough-in _____ date/app. by Heat & Air Duct _____ date/app. by Peri. beam (Lintel) _____ date/app. by

Permanent power _____ date/app. by C.O. Final _____ date/app. by Culvert _____ date/app. by

M/H tie downs, blocking, electricity and plumbing _____ date/app. by Pool _____ date/app. by

Reconnection _____ date/app. by Pump pole _____ date/app. by Utility Pole _____ date/app. by

M/H Pole _____ date/app. by Travel Trailer _____ date/app. by Re-roof _____ date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 250.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 0.00 WASTE FEE $ _____

FLOOD DEVELOPMENT FEE $ _____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ _____ **TOTAL FEE** 325.00

INSPECTORS OFFICE L. Hodges CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED TO BE IN ACTIVE PROGESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

ck# 505

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 11-30-07) Zoning Official cfs 3/14/08 Building Official OK JH 3-11-08

AP# 0803-29 Date Received 3/11/08 By CF Permit # 26855

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

Comments Existing MH to be removed
2.3.8 non-conf. mhp

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☑ Site Plan with Setbacks Shown ☑ EH # _____ ☐ EH Release ☐ Well letter ☑ Existing well

☑ Copy of Recorded Deed or Affidavit from land owner ☐ Letter of Authorization from installer

☐ State Road Access ☐ Parent Parcel # _____ ☐ STUP-MH _____

☐ Unincorporated area ☐ Incorporated area ☐ Town of Fort White ☐ Town of Fort White Compliance letter

Property ID # 27-3S-17-05587-005 Subdivision Lynn's Lakeside Mobile Home Park

- New Mobile Home _____ Used Mobile Home ✓ Year 1981
- Applicant John/Joyann Shipp Phone # 965-8168
- Address 355 NE Laverne St. L.C. 32055
- Name of Property Owner Lynn Reed Phone# 397-5314
- 911 Address 204 NE Range Rd. 32055
- Circle the correct power company - (Circle One) - FL Power & Light - Clay Electric - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Lynn Reed Phone # ~~Ph~~ 397-5314
  Address 204 NE Range Rd. LOT 6 32055
- Relationship to Property Owner SC17
- Current Number of Dwellings on Property 8
- Lot Size _____ Total Acreage 1.45
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home YES
- Driving Directions to the Property HWY 90 EAST TURN LT ON 100 Turn RT ON NE Williams Rd Turn LEFT ON RANGE Rd 1ST DRIVE ON LEFT M.H. STRAIGHT UP.
- Name of Licensed Dealer/Installer John A. Shipp Phone # 965-8168
- Installers Address ~~EH~~ 355 NE LAVERNE ST. L.C. 32055
- License Number IH 0000334 Installation Decal # 290359

- JW called Joann Shipp 3.14.08

PERMIT WORKSHEET

PERMIT NUMBER

Installer John A. Shipp License # IH0000334

Address of home being installed 204 NE Range Rd LOT 6 L.C. 32055

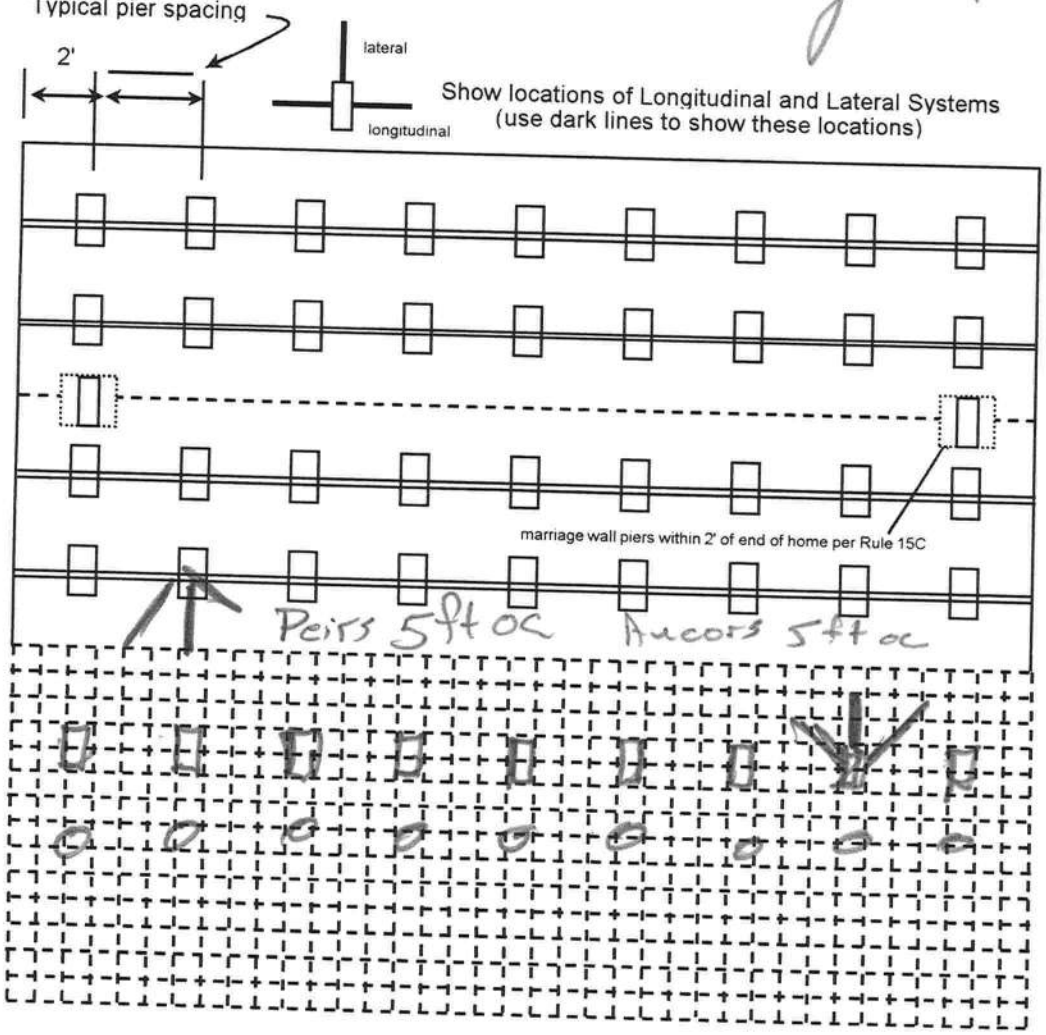
Manufacturer Fleetwood Length x width 14X60

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 J.S

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

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 # 240359

Triple/Quad ☐ Serial # FLA195663

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'
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 20x20

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
Door	16x16

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
2 Olivet Teck

OTHER TIES

	Number
Sidewall	13
Longitudinal	
Marriage wall	
Shearwall	

PERMIT WORKSHEET

PERMIT NUMBER _____

POCKET PENETROMETER TEST

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

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.

JS

X ____ X ____ X ____

TORQUE PROBE TEST

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 4 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.

JS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Jack Shiffler

Date Tested 2/20/07

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.

Plumbing

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

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: N/A

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, 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.

Installer's initials JS

Type gasket N/A
Pg.

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes . Pg. N/A
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 Jack Shiffler **Date** 3/14/07

STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 08-0194

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.

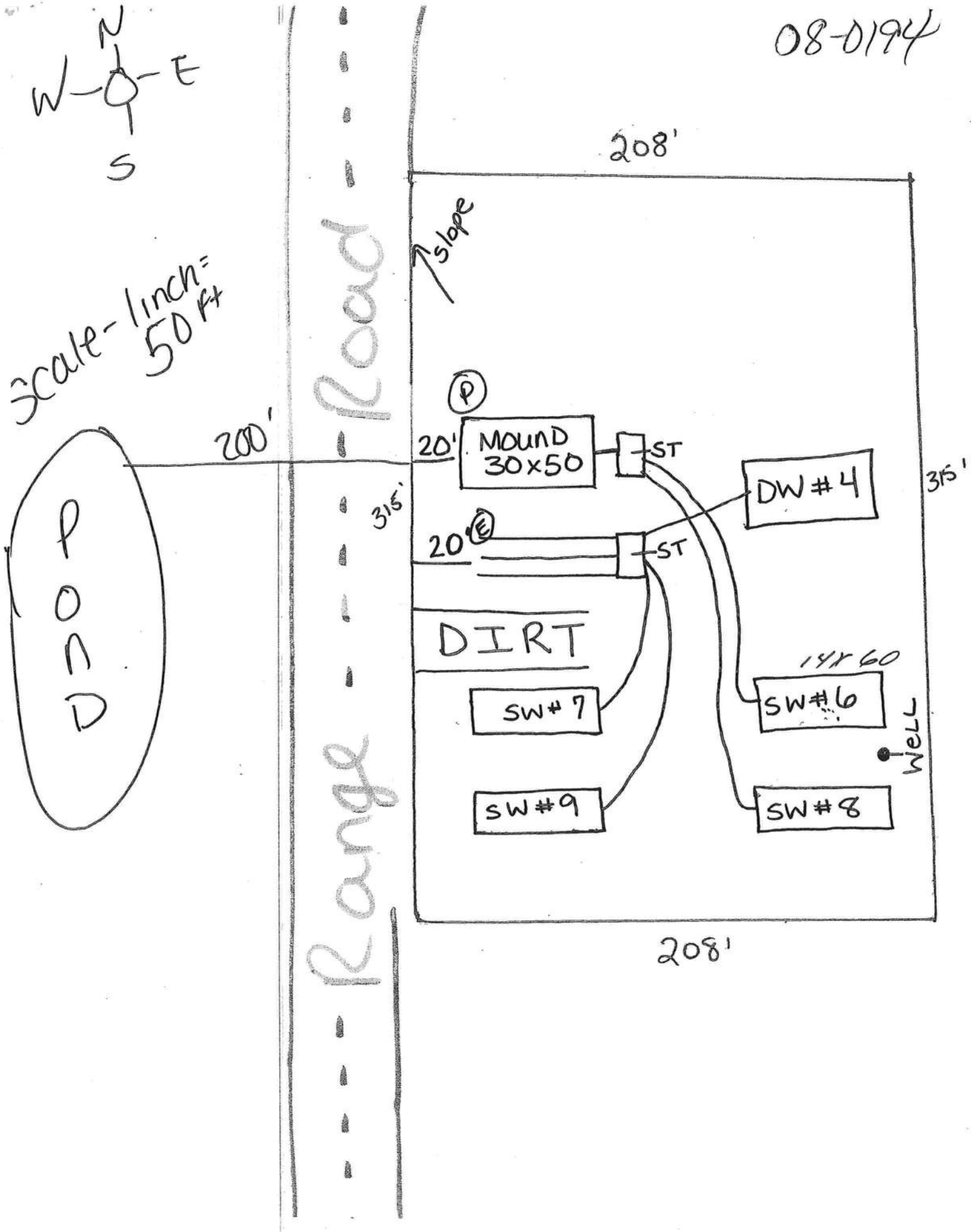
See Attached!
Thanks!
Ford's Septic

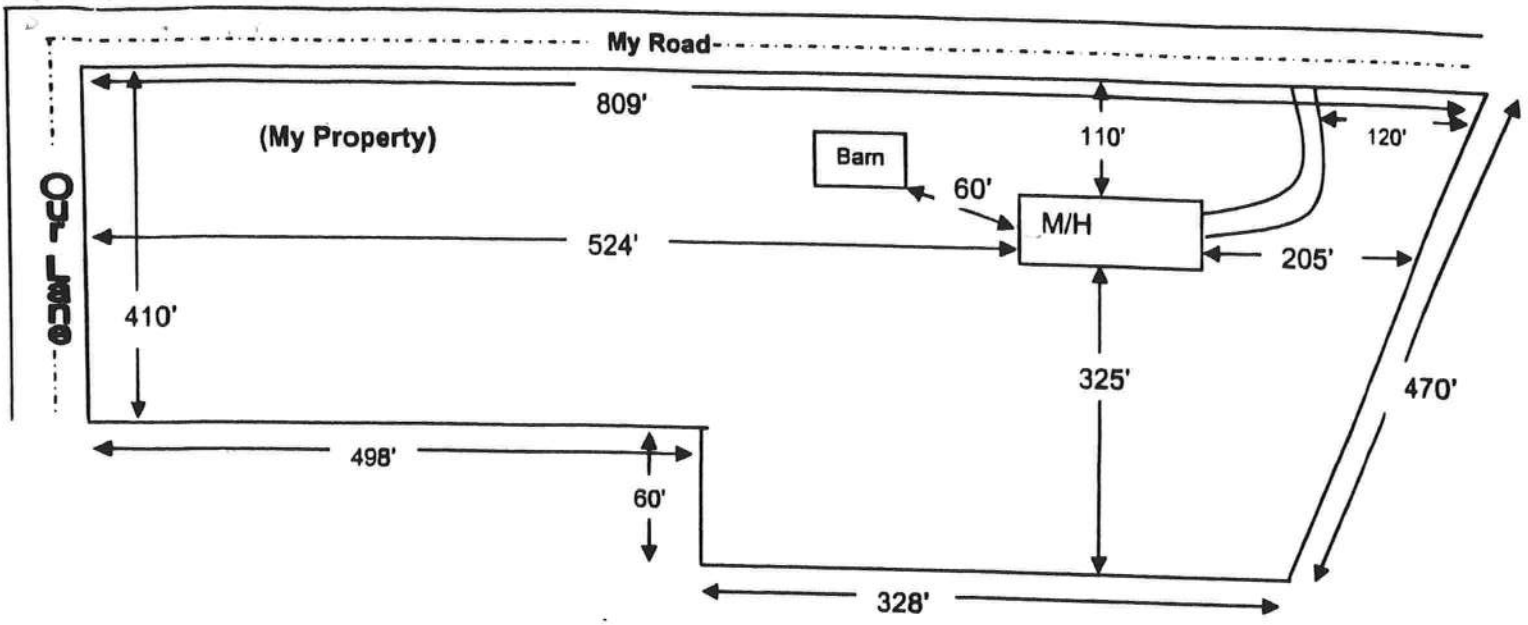
Notes: Lynn Reed

Site Plan submitted by: Ford's Septic (Signature) MASTER (Title)

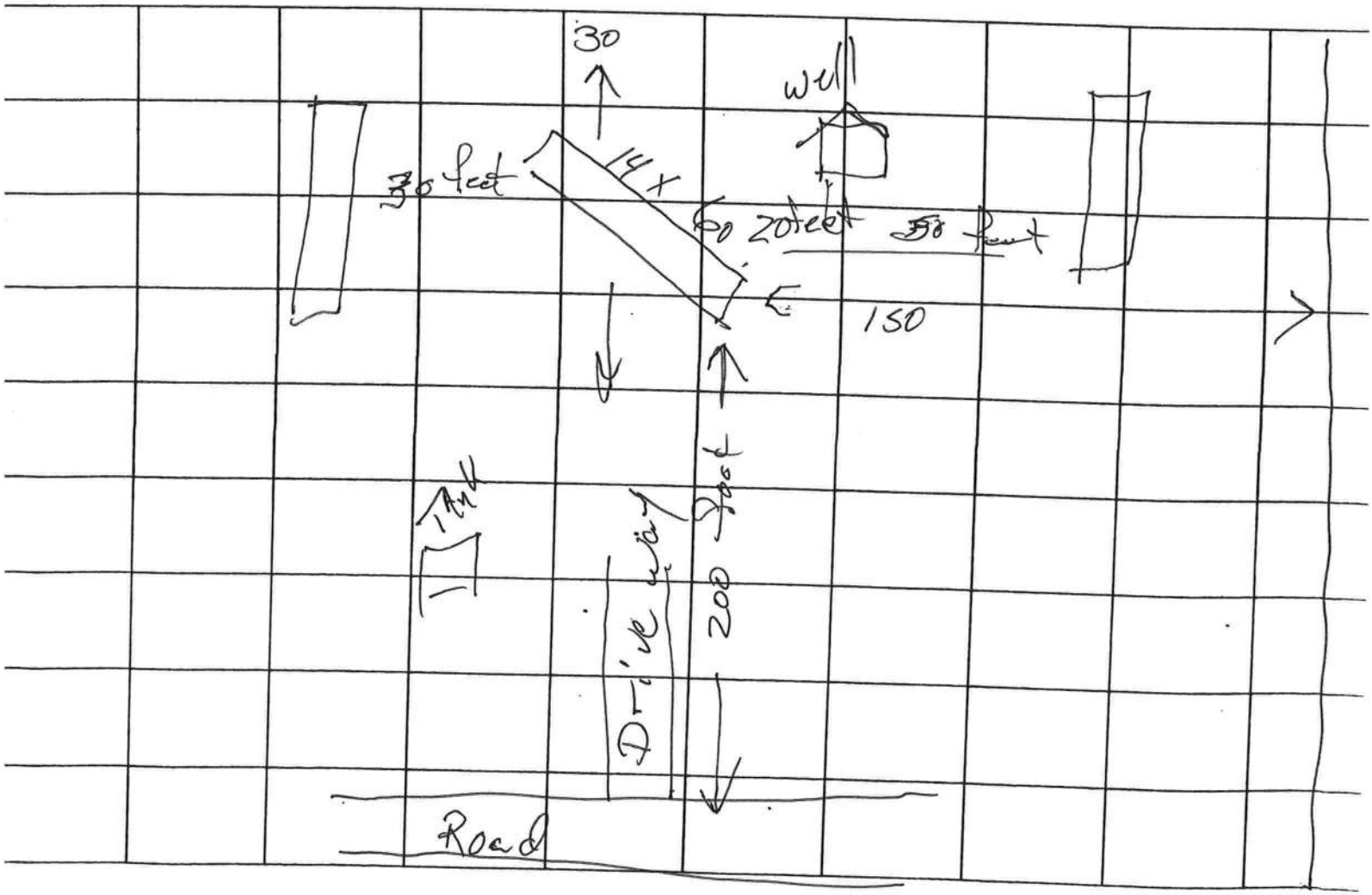
Plan Approved ____ Not Approved ✓ Date ____

By ____ Columbia County Health Departm


08-0194
N
W
E
S
208'
slope
Scale- 1 inch = 50 ft
Road
200'
20'
MOUND 30x50
ST
DW #4
315'
315'
20'
ST
DIRT
14x60
SW#6
SW#7
WELL
SW#9
SW#8
POND
208'



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. <u>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.</u>



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@ CAM112M01        CamaUSA Appraisal System                    Columbia County
 3/11/2008 13:23   Legal Description Maintenance     15950   Land   001
Year T Property                          Sel                   AG     000
2008 R 27-3S-17-05587-005                ...           72578   Bldg   007   *
       204 RANGE RD NE                                 40100   Xfea   003   *
       REED LYNN M                                    128628   TOTAL        C*

  1  BEG 298.71 FT N OF SE COR OF    SW1/4 OF SW1/4, RUN W 190 FT,      2
  3  N 315 FT, E 208.71 FT, S 315    FT TO POB.  ORB 368-171,           4
  5  362-697, 444-415, 771-1677,     (1.45 AC BY SURVEY )               6
  7                                                                     8
  9                                                                    10
 11                                                                    12
 13                                                                    14
 15                                                                    16
 17                                                                    18
 19                                                                    20
 21                                                                    22
 23                                                                    24
 25                                                                    26
 27                                                                    28
                                                 Mnt  5/03/2004 LARRY
F1=Task  F3=Exit  F4=Prompt  F10=GoTo  PgUp/PgDn  F24=More
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CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3/11/08 BY CS IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____

OWNERS NAME Lynn Reed PHONE _____ CELL 397-5314

ADDRESS 204 NE Range Rd, _____

MOBILE HOME PARK _____ Lot 6 SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 90E ~~to~~ 100, TR Mease Lodge Rd, TL on Range Rd, 1st drive on left - straight to house

MOBILE HOME INSTALLER John Shipp PHONE _____ CELL 965-8168

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1981 SIZE 14 x 60 COLOR Tan/Green

SERIAL No. [redacted] FL LAB 357000878 [2602B]

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
- 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 / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
- P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT
- ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: add 2 smoke alarms

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER 402 DATE 3-12-08