

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

For Office Use Only (Revised 7-1-15) Zoning Official ES Building Official \_\_\_\_\_

AP# 48978 Date Received 4/8 By LE Permit # \_\_\_\_\_

Flood Zone X Development Permit \_\_\_\_\_ Zoning I Land Use Plan Map Category I

Comments Watertown Overlay

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FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor 1' above River In Floodway \_\_\_\_\_

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☐ EH # \_\_\_\_\_ ☐ 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

Property ID # 26-35-17-05570-000 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

- New Mobile Home \_\_\_\_\_ Used Mobile Home X MH Size 14x60 Year 1997
- Applicant William Russell JR. Phone # 386 569 9850
- Address PO Box 1444 Lake City FL 32056
- Name of Property Owner William Russell Phone# 386-569-9850
- ✓ 911 Address 405 NE Oklawaha Lake City FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home William Russell JR. Phone # 386 569 9850  
Address SAME AS APPLICANT
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 0 (REMOVED)
- Lot Size \_\_\_\_\_ Total Acreage .42
- 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 Yes
- Driving Directions to the Property 405 NE Oklawaha St LC FL 32055

- Name of Licensed Dealer/Installer Brent Strickland Phone # 386-365-7043
- Installers Address 1294 N.W Hamp Farmer Rd Lake City FL 32055
- License Number IH1104218 Installation Decal # 93505



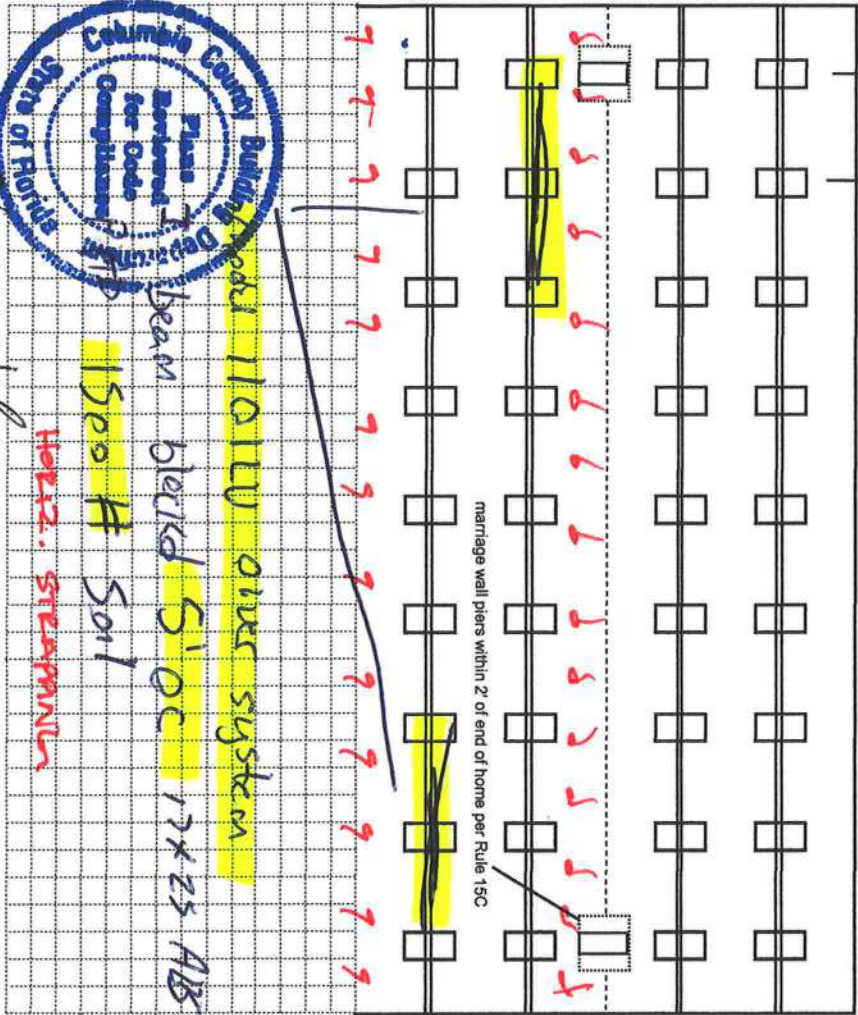
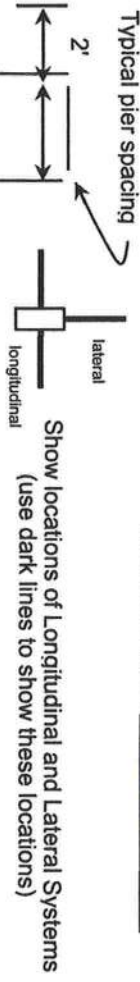
Mobile Home Permit Worksheet

Installer : Brent Stuckard License # ILH1109218  
Address of home being installed 405 NE Burbank Ter

Manufacturer Fleetwood Length x width 14x66

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 BS



Application Number: 48978 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 # 43905  
Triple/Quad ☐ Serial # GAFV39408108V411

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 psf	3'	4'	4'	5'	6'	7'	8'
1500 psf	4'	6'	6'	7'	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 17x25  
Perimeter pier pad size 16x16  
Other pier pad sizes (required by the mfg.) N/A

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

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 N/A Pier pad size

ANCHORS

FRAME TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
Manufacturer O'Keefe  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall  
Number 24



# Mobile Home Permit Worksheet

## 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 1700 X 1600

### 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 1700 X 1600 X 1500

## 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 centerline 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

Bart Strickler

Date Tested

2/19/21

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.

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## Site Preparation

Debris and organic material removed ☒ Swale ☐ Pad ☒ Other ☐

### Fastening multi wide units

Floor: \_\_\_\_\_ Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: N/A  
Walls: \_\_\_\_\_ Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: N/A  
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, 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 BS

Type gasket \_\_\_\_\_

Pg. \_\_\_\_\_

Installed: \_\_\_\_\_  
Between Floors Yes N/A  
Between Walls Yes N/A  
Bottom of ridgebeam Yes N/A

### 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

BS

Date

2/19/21

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER 48978 CONTRACTOR Shen Strickland PHONE 386 365 7043

**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.***

<p><b>ELECTRICAL</b></p>	<p>Print Name: <u>William Russell</u></p> <p>License #: <u>Owner</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature: <u>[Signature]</u></p> <p>Phone #: <u>386 569 9850</u></p>
<p><b>MECHANICAL/ A/C</b></p>	<p>Print Name: <u>William Russell</u></p> <p>License #: <u>Owner</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>	<p>Signature: <u>[Signature]</u></p> <p>Phone #: <u>386 569 9850</u></p>

**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, Brent Strickland, give this authority for the job address show below  
Installer License Holder Name  
only, 405 NE Burbank Ter, Lake City, FL 32055, 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)
William Russell	<i>William Russell</i>	<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.

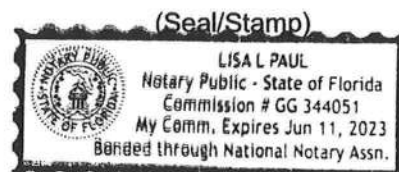
*Brent Strickland* License Holders Signature (Notarized) IH1104218 License Number 2/19/21 Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Brent Strickland, personally appeared before me and is known by me or has produced identification (type of I.D.) 19th on this February, 2021.

*Lisa L. Paul*  
NOTARY'S SIGNATURE



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

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Date/Time Issued: **3/1/2021 6:12:25 PM**  
Address: **405 NE OKINAWA St**  
City: **LAKE CITY**  
State: **FL**  
Zip Code **32055**

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Parcel ID **05570-000**

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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)**



## SITE PLAN CHECKLIST

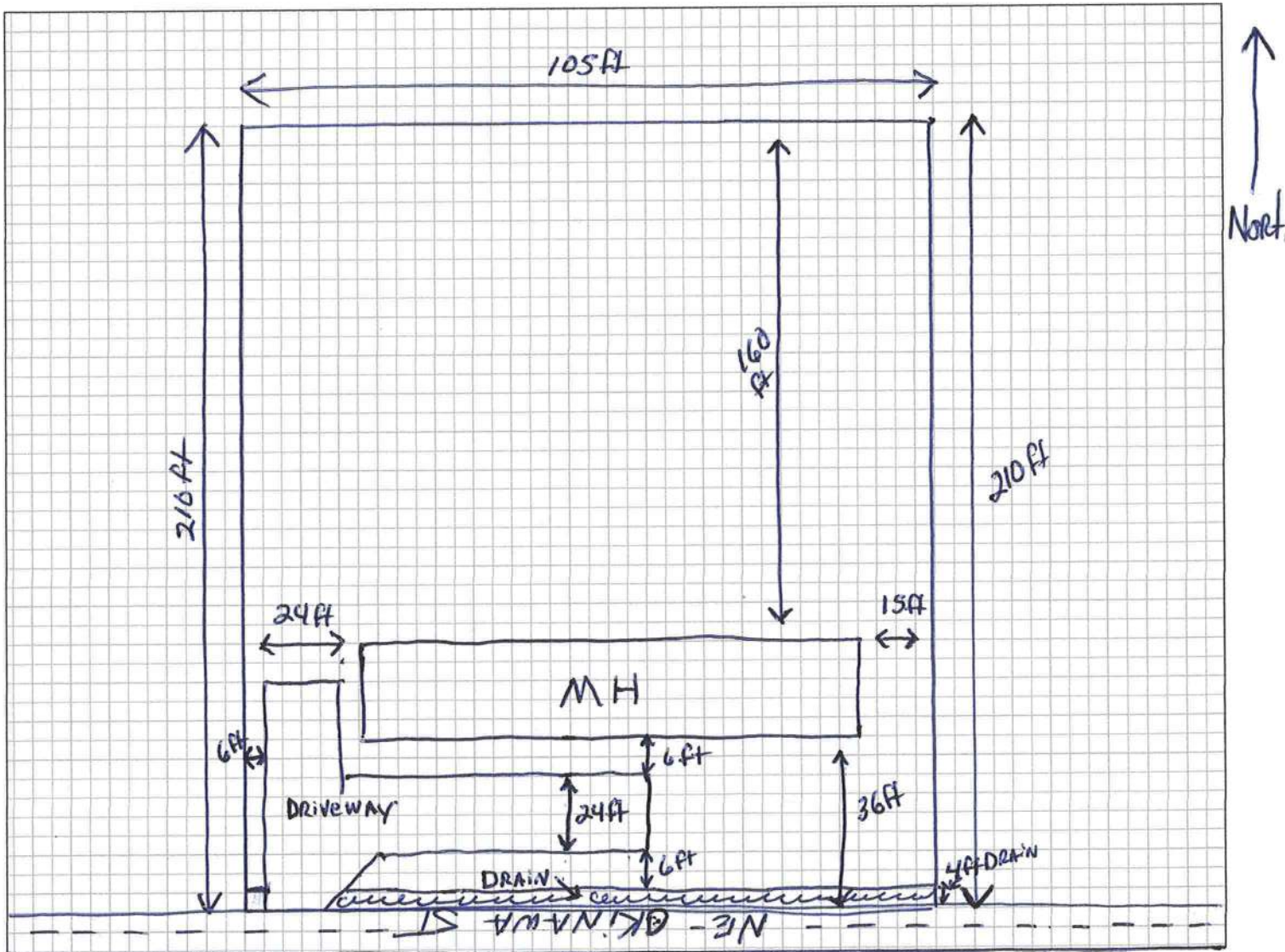
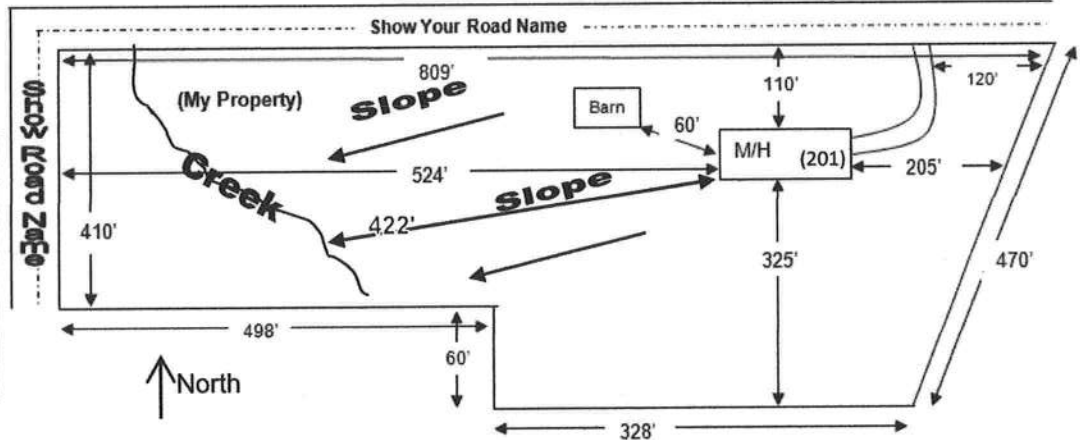
- \_\_\_ 1) Property Dimensions
- \_\_\_ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- \_\_\_ 3) Distance from structures to all property lines
- \_\_\_ 4) Location and size of easements
- \_\_\_ 5) Driveway path and distance at the entrance 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.



405



# Columbia County Property Appraiser

Jeff Hampton

**2021 Working Values**

updated: 4/8/2021

Parcel: << 26-3S-17-05570-000 (25587) >>

## Owner & Property Info

Result: 1 of 1

Owner	RUSSELL WILLIAM JR P O BOX 1644 LAKE CITY, FL 32056		
Site	405 OKINAWA ST, LAKE CITY		
Description*	COMM SW COR OF SE1/4 OF SW1/4, RUN E 210 FT FOR POB, N 210 FT, E 105 FT, S 210 FT, W 105 FT TO POB. QC 1188-966, DC 1431-658,		
Area	0.429 AC	S/T/R	26-3S-17
Use Code**	MOBILE HOME (0200)	Tax District	3

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code 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.

## Property & Assessment Values

2020 Certified Values		2021 Working Values	
Mkt Land	\$7,925	Mkt Land	\$7,926
Ag Land	\$0	Ag Land	\$0
Building	\$3,724	Building	\$3,841
XFOB	\$0	XFOB	\$0
Just	\$11,649	Just	\$11,767
Class	\$0	Class	\$0
Appraised	\$11,649	Appraised	\$11,767
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$11,649	Assessed	\$11,767
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$11,649 city:\$11,649 other:\$11,649 school:\$11,649	Total Taxable	county:\$11,767 city:\$0 other:\$0 school:\$11,767

Aerial Viewer Pictometry Google Maps

2019 2016 2013 2010 2007 2005 Sales



## Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
3/12/2009	\$100	1188/0966	QC	I	U	16

## Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	MOBILE HME (0800)	1982	672	672	\$3,841

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

## Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
NONE					

## Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0200	MBL HM (MKT)	18,703.000 SF (0.429 AC)	1.0000/1.0000 1.0000/ /	\$0 /SF	\$4,676
9945	WELL/SEPT (MKT)	1.000 UT (0.000 AC)	1.0000/1.0000 1.0000/ /	\$3,250 /UT	\$3,250



**CODE ENFORCEMENT**  
**PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? \_\_\_\_\_

OWNERS NAME William Russell PHONE 386-569-9850 CELL 569-9850

ADDRESS PO Box 1444 Lake City FL 32056

MOBILE HOME PARK NO SUBDIVISION NO

DRIVING DIRECTIONS TO MOBILE HOME down Washington St pass boy clubs  
1st Rd to left over RR track go straight to 3rd  
traveller on left

MOBILE HOME INSTALLER Brent Strickland PHONE \_\_\_\_\_ CELL 386-345-7043

**MOBILE HOME INFORMATION**

MAKE Flee YEAR 1997 SIZE 14 x 64 COLOR Silver

SERIAL No. GAFLV39AD8V411

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

**INSPECTION STANDARDS**

**INTERIOR:**

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

\_\_\_\_\_ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

\_\_\_\_\_ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION \_\_\_\_\_

\_\_\_\_\_ DOORS ( ) OPERABLE ( ) DAMAGED

\_\_\_\_\_ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

\_\_\_\_\_ WINDOWS ( ) OPERABLE ( ) INOPERABLE

\_\_\_\_\_ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

\_\_\_\_\_ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

\_\_\_\_\_ 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 \_\_\_\_\_ ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_