

C/C#

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official OK 12/11/07 Building Official OK JTH 12-5-07

AP# 0712-11 Date Received 12/4/07 By LH Permit # 26511

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

Comments Per-Inspection Approved

FFMA Map# _____ Elevation 0 Finished Floor _____ River 1.1 In Floodway _____

☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ 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 _____

Property ID # 26-55-15-00479-103 Subdivision FLAH SD, Lot 3

▪ New Mobile Home SKY line Used Mobile Home yes Year 1995

⊙ Applicant DALE Houston Phone # 386-752-7814

⊙ Address 136 SW Barrs Glen Lake City FL 32024

▪ Name of Property Owner Alma Tillman Phone # 755-4693

▪ 911 Address 119 SW Darwin Glen, Lake City Lake City FL 32024

▪ Circle the correct power company - FL Power & Light - Clay Electric

(Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home Alma Tillman Phone # 755-4693

Address _____

▪ Relationship to Property Owner Same

▪ Current Number of Dwellings on Property (1)

▪ Lot Size _____ Total Acreage 5.04

▪ 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 (owes)

▪ Driving Directions to the Property 475, TR CR 240 TR on

Ichetucknee Ave, past Ford Lane, RT Darwin then

1st lot on, @ see Gate on Right

▪ Name of Licensed Dealer/Installer DALE Houston Phone # 386-752-7814

▪ Installers Address 136 SW Barrs Glen LAKE CITY FL 32024

▪ License Number TH0000040 Installation Decal # _____

Spoke to Cindy 278743
12/11/07



Columbia County Property Appraiser

10000 Highway 19, Lake City, Florida 33607-7501

PARCEL: 25-5S-15-00479-103 - VACANT (000000)

Name: PERRY VELMA C	LandVal	\$42,500.00
Site:	BldgVal	\$0.00
Mail: 345 SW VELLE CT	ApprVal	\$42,500.00
LAKE CITY, FL 32024	JustVal	\$42,500.00
Sales	Assd	\$42,500.00
Info	Exmpt	\$0.00
	Taxable	\$42,500.00

0 0.1 0.2 0.3 mi



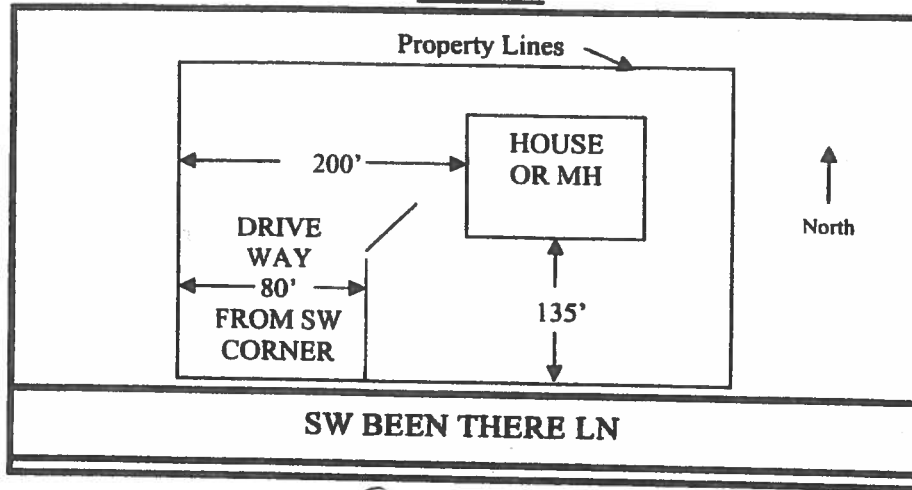
This information, GIS
Office solely for
determination of the c
herein, it's use, or i
Property Appraiser's o

*Is getting
plus for
no deed*

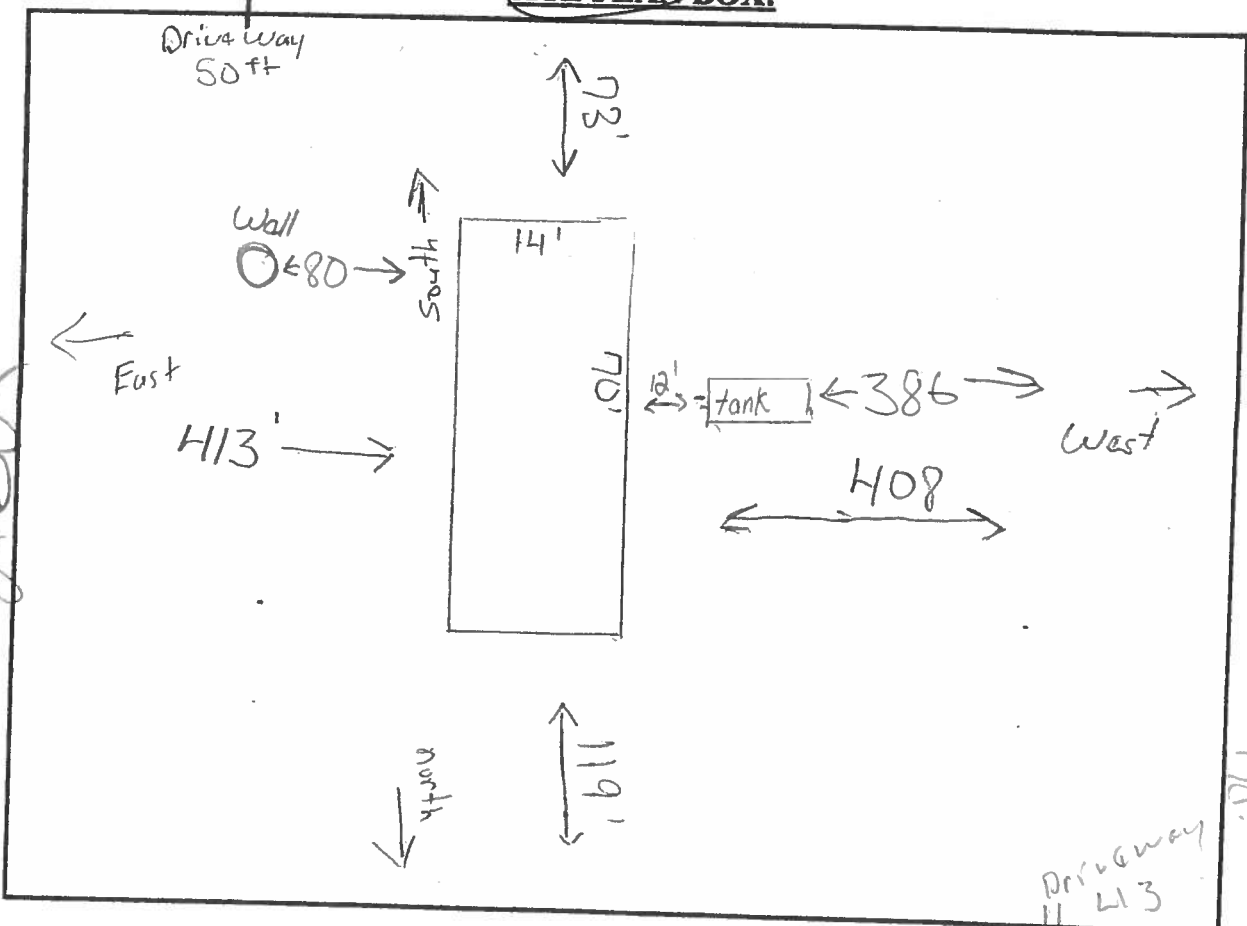
om data which was compiled by the Columbia County Property Appraiser
assessment. This information should not be relied upon by anyone as a
warranties, expressed or implied, are provided for the accuracy of the data
updated, this information may not reflect the data currently on file in the
d values and therefore are subject to change before being finalized for ad
essment purposes.

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 11/26/2007 DATE ISSUED: 11/29/2007

ENHANCED 9-1-1 ADDRESS:

119 SW DARWIN

GLN

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

25-5S-15-00479-103

Remarks:

LOT 3 FLATT S/D.

Address Issued By: 
Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

Approved Address

NOV 29 2007

911Addressing/GIS Dept

1034

PERMIT NUMBER

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ or check here to declare 1000 lb. soil _____

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.

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 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

Date Tested

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. N/A

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. N/A

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. N/A

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: _____
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

Type gasket Pg. _____

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 Pg. _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

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 Yes
Electrical crossovers protected. Yes 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 [Signature] Date 9/9/27

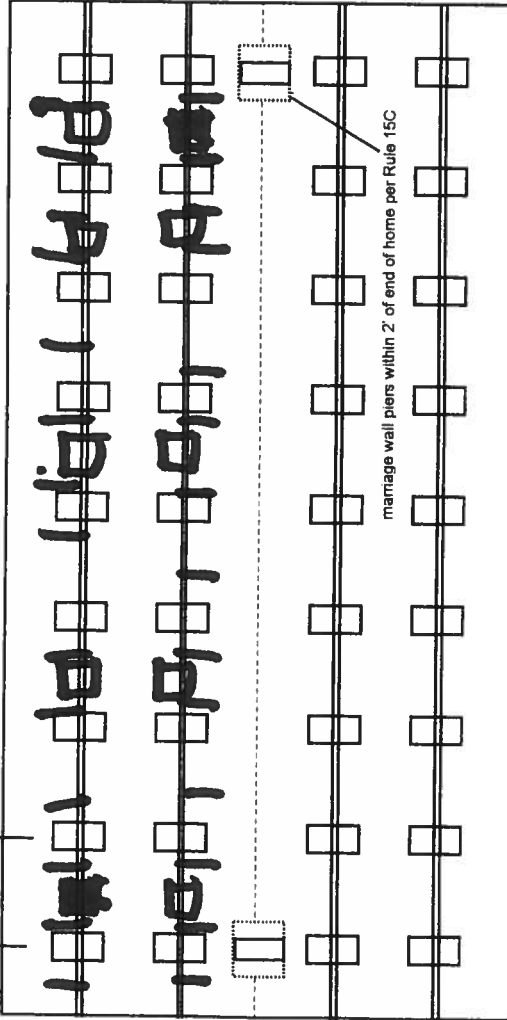
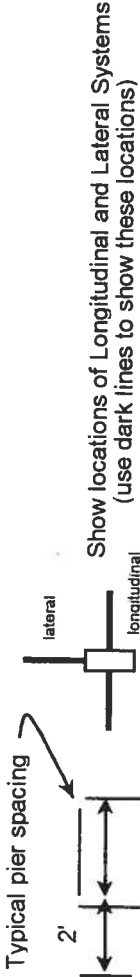
PERMIT NUMBER

Installer Dale Husher License # TH0000040
Address of home being installed 244 SW Dairy St
Lake City, NC 3204
Manufacturer Skyline Length x width 606 X 14

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 DH



14X44-1000-17X25
Piers 14perside 5'001c
Anchor 13perside 5'41c
2. Longitudinal System

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 # 278743
Triple/Quad ☐ Serial # 27611027H

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'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	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.) _____

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 _____

4 ft

5 ft

ANCHORS

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 _____

OTHER TIES

Number _____

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

Five Tail connections

BUILDING + ENGINEERING DIVISION 1066-750-2160

1001 04 2001 03:00 PM

PRELIMINARY MOBILE HOME INSPECTION REPORT

RECEIVED 9-4-07 BY CH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
OWNER NAME Aime Tillman PHONE 755-4683 CELL _____
ADDRESS 246 SW 24th St. Lake City FL 32025
MOBILE HOME PARK _____ SUBDIVISION _____
GIVING DIRECTIONS TO MOBILE HOME 47 S. R 240, (R) Wauldin, (L) Perry
after Curve then 2nd Drive to Left

MOBILE HOME INSTALLER Dale Houston PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Scot YEAR 95 SIZE 14 x 66 COLOR White
SERIAL No 226110274
WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

ATTENTION:

INSPECTION STANDARDS

(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 REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Art S. Powell ID NUMBER 402 DATE 9-5-07

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), Velma C. Perry
owner of the below described property:

Tax Parcel No. 26 55 15E 00 479-103

Subdivision (name, lot, block, phase) FLATT Subdivision LOT 3

Give my permission to ALNA TILLMAN to place a
mobile home/travel trailer/single family home (circle one) on the above mentioned
property.

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Velma C. Perry
Owner

Owner

SWORN AND SUBSCRIBED before me this 11 day of DEC,
2007. This (these) person(s) are personally known to me or produced
ID FL DRIVER LIC

Jessica L. Ash
Notary Signature

NOTARY PUBLIC-STATE OF FLORIDA
Jessica L. Ash
Commission #DD696788
Expires: JULY 18, 2011
BONDED THRU ATLANTIC BONDING CO., INC.