

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Replacement
STATEMENT
Letter
NGC
PER
BRAND
Troy

For Office Use Only

(Revised 7-1-15)

Zoning Official

Building Official

AP#

44218

Date Received

12/19

By

Permit #

39673

Flood Zone

Development Permit

Zoning

Land Use Plan Map Category

Comments

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☐ Recorded Deed or

☒ Property Appraiser PO

☒ Site Plan

☒ EH #18-0742

☐ 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 owed

☐ Out County

☒ In County

☐ Sub VF Form

12.20.19

Property ID #

0345-17.07570-087

Subdivision

SUZANNE

Lot#

Unit 3
13

- New Mobile Home ☐ Used Mobile Home ☒ MH Size 24X36 Year 2004
- Applicant Kristine Sistrunk Phone # 386 438 3566
- Address 823 SE Rogers Dr. Lulu FL 32061
- Name of Property Owner James & Kristine Sistrunk Phone # 386 438 3566
- 911 Address 298 SE Scarlett Way, Loxley, FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home James Sistrunk Phone # 386 361 1166
- Address 823 SE Rogers Dr. Lulu FL 32061
- Relationship to Property Owner Spouse
- Current Number of Dwellings on Property 1
- Lot Size .46 Total Acreage .46
- 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 Hwy 100 to 245 (Pine creek)
turn R - turn R - first rd past GP stay
R at the divide turn left on Scarlett. Last
mobile home on R
- Name of Licensed Dealer/Installer Bernard Thrift Phone # 386 623 0046
- Installers Address 5557 NW Falling creek rd White Springs FL 32096
- License Number IH1025155/1 Installation Decal # 63490

12/20 spoke w/ Kristine 12.23.19

SCANNED

Mobile Home Permit Worksheet

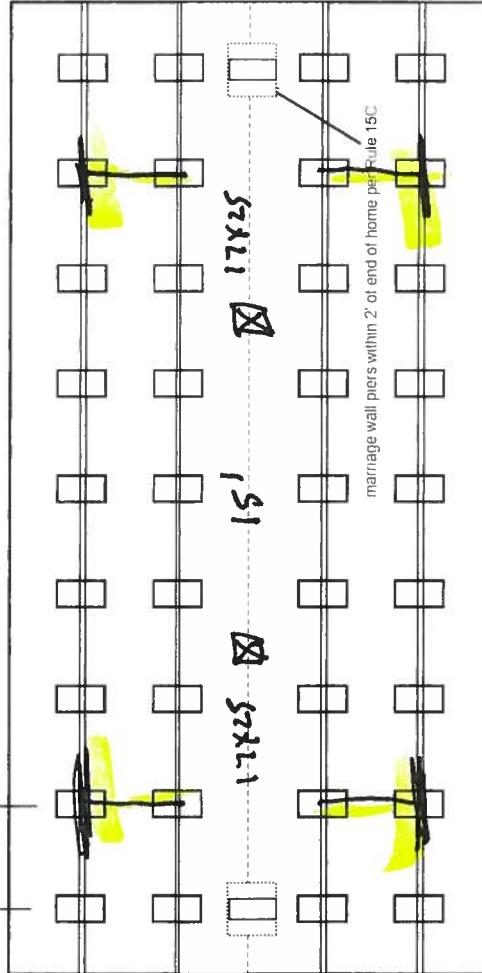
Application Number: _____

Date _____

Installer Bernard Thrist License # IH1025155
 Address of home being installed 298 Scarlett way SE
Lake City FL
 Manufacturer Kingson Length x width 36' x 24'

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 BT



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 # 63490
 Triple/Quad ☐ Serial # 11395 ALA

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'	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'	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) 16x16

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 15' Pier pad size 17x25

ANCHORS

4 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 Model 1101 LV

Oliver Systems

OTHER TIES

Number

Sidewall 16

Longitudinal 4

Marriage wall 4

Shearwall 2

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 1500 x 1500

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 1500 x 1500 x 2000

TORQUE PROBE TEST

The results of the torque probe test is 2901 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.

BT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernard Thrift

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 12

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg 13

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg 16

Application Number:

Date:

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 3/8 x 7" L Length: 7" Spacing: 24" OC
Walls: Type Fastener: #8 Screws Length: 7" Spacing: 18" OC
Roof: Type Fastener: Flashing Length: 36" Spacing: 36"
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 Scan Seal

Installed

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg 12
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes no

Miscellaneous

Skirting to be installed. Yes ☒ No ☐
Dryer vent installed outside of skirting. Yes ☒ N/A ☐
Range downflow vent installed outside of skirting. Yes ☒
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

Bernard Thrift

Date

10-8-19

Columbia County Property Appraiser

updated: 11/27/2019

Parcel: 03-4S-17-07570-087

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

2019 TRIM (pdf)

Interactive GIS Map

Print

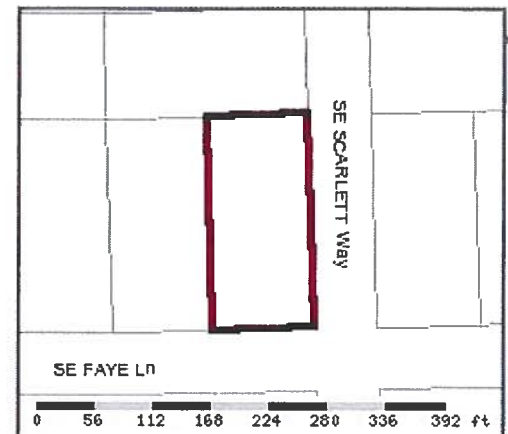
<< Prev

Search Result: 9 of 16

Next >>

Owner & Property Info

Owner's Name	SISTRUNK JAMES &		
Mailing Address	KRISTINE SISTRUNK 823 SE ROGERS DR LULU, FL 32061		
Site Address	298 SE SCARLETT WAY		
Use Desc. (code)	MISC RES (000700)		
Tax District	2 (County)	Neighborhood	3417
Land Area	0.460 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 13 SUZANNE S/D UNIT 3, 681-283, 806-1433, WD 1282-238 WD 1337-365,			



Property & Assessment Values

2019 Certified Values		
Mkt Land Value	cnt: (0)	\$11,750.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (1)	\$720.00
Total Appraised Value		\$12,470.00
Just Value		\$12,470.00
Class Value		\$0.00
Assessed Value		\$12,470.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$12,470 Other: \$12,470 Schl: \$12,470	

2020 Working Values			(.. Hide Values)
Mkt Land Value	cnt: (0)	\$11,750.00	
Ag Land Value	cnt: (2)	\$0.00	
Building Value	cnt: (0)	\$0.00	
XFOB Value	cnt: (1)	\$720.00	
Total Appraised Value		\$12,470.00	
Just Value		\$12,470.00	
Class Value		\$0.00	
Assessed Value		\$12,470.00	
Exempt Value		\$0.00	
Total Taxable Value	Cnty: \$12,470 Other: \$12,470 Schl: \$12,470		

NOTE: 2020 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
5/17/2017	1337/365	WD	V	Q	01	\$10,000.00
9/25/2014	1282/238	WD	V	U	11	\$1,000.00
6/7/1995	806/1433	WD	I	U	12	\$20,000.00
4/6/1989	681/283	WD	I	Q		\$21,000.00

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)
0294	SHED WOOD/	1998	\$720.00	0000192.000	12 x 16 x 0	AP (050.00)

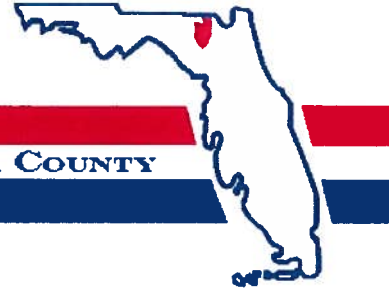
Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000700	MISC RES (MKT)	1 LT - (0000000.460AC)	1.00/1.00/1.00/1.00	\$10,500.00	\$10,500.00
009947	SEPTIC (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$1,250.00	\$1,250.00

Columbia County Property Appraiser

updated: 11/27/2019

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
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

Date/Time Issued: **12/19/2019 9:29:30 PM**
Address: **298 SE SCARLETT Way**
City: **LAKE CITY**
State: **FL**
Zip Code **32025**

Parcel ID **07570-087**

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**

12/17/19

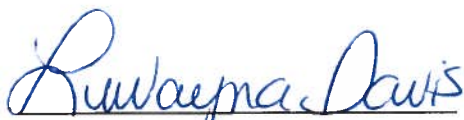
Ref: 03-4S-17-07570-087

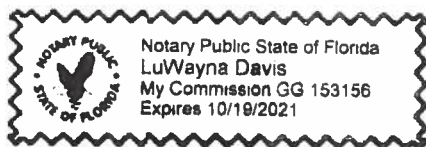
298 Scarlett Way
Lot 13 Suzanne S/D

I James & Kristine Sistrunk confirm that the reset mobile home was a replacement of the previous mobile home with in a 1-year period.


James Sistrunk


Kristine Sistrunk


Notary 12-17-19



Mobile Home

App# 44218 Applicant: KRISTINE SISTRUNK (386.438.3566) Application Date: 12/19/2019

Convert To ▾

Entered By: Janice Williams

Updated By: Janice Williams on 12/20/2019 8:26 AM

Previous | Next | Last ☐ Permits Only

1. JOB LOCATION

Completed Inspections

Add Inspection

Release Power

Schedule Inspection (ScheduleInspection.aspx?Id=44218)

Inspection	Date	By	Notes
Passed: Mobile Home - In County Pre-Mobile Home before set-up	12/20/2019	TROY CREWS	GI V -

4. APPLICANT

5. REVIEW

The completion date must be set To release Certifications to the public.

6. FEES/PAYMENT

(\$65.00 - \$65.00 =
\$0.00)

Permit Completion Date
(Releases Occupancy and Completion Forms)

7. DOCUMENTS/REPORTS (1)

Permit Closed On

8. NOTES/DIRECTIONS

Incomplete Requested Inspections

Inspection	Date	By	Notes
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9. INSPECTIONS (1)



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

PERMIT NO. 18-0742
DATE PAID: 8/14/18
FEE PAID: 600.00
RECEIPT #: 1362014

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: James Sistrunk

AGENT: _____ TELEPHONE: 438 3566

MAILING ADDRESS: 843 SE Rogers Dr 32401

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: 13 BLOCK: _____ SUBDIVISION: Sumner U3 PLATTED: 1928

PROPERTY ID #: 03-43-17-07570-0870 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 46 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [X] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 298 Scarlett Way SE

DIRECTIONS TO PROPERTY: _____

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>SFR MH</u>	<u>2</u>	<u>864</u>	
2				
3				
4				

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

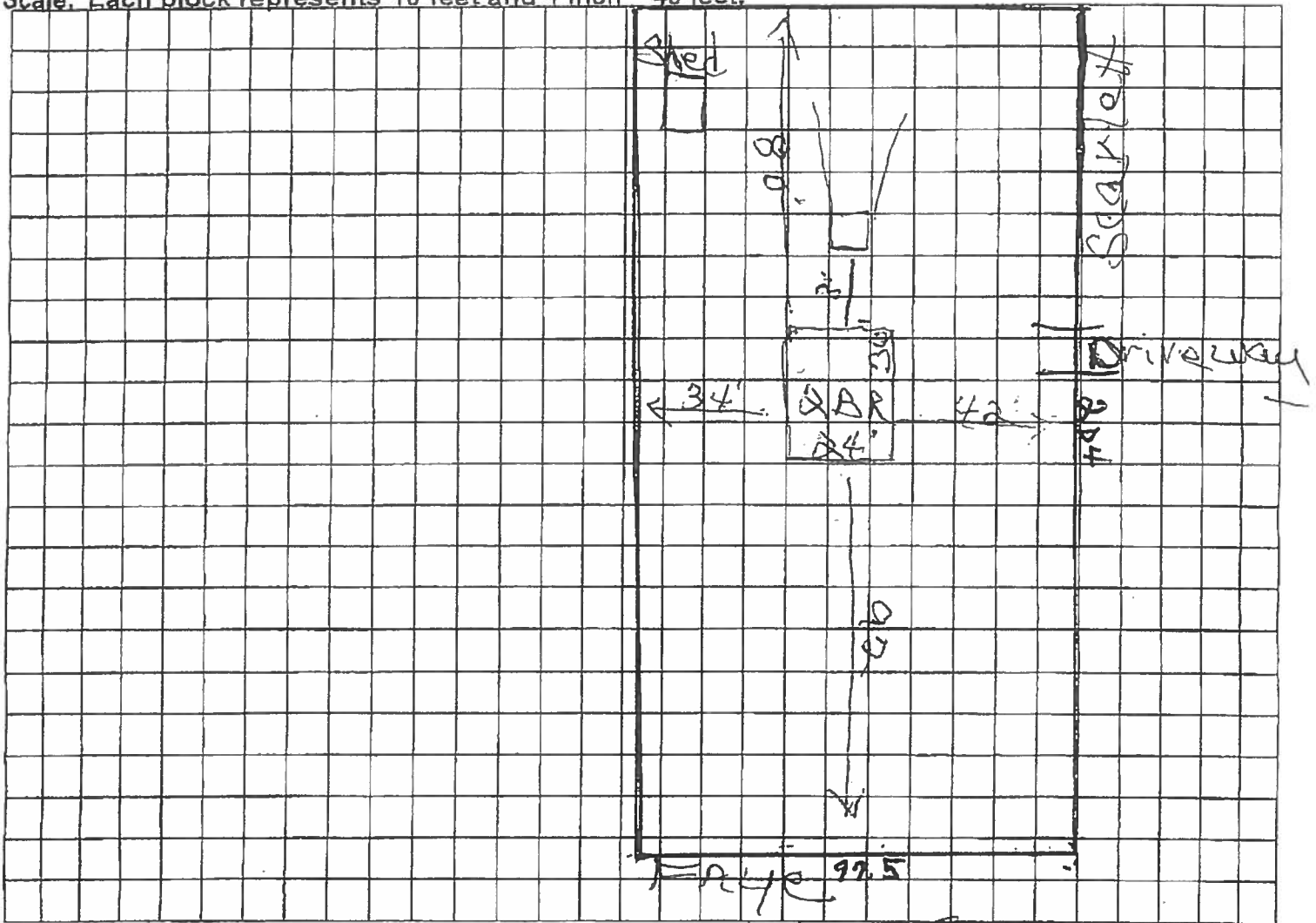
SIGNATURE: James Sistrunk DATE: 8-29-18

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0742

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

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



Notes: Water System
No Well

Site Plan submitted by: Jama Bistrup
Plan Approved X **REVIEWED** Not Approved _____ Date 8/29/18
By [Signature] FSH Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

44218

CONTRACTOR

B THAI FT

PHONE

386 623 0046

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>Kristine Sistrunk</u> License #: _____ Qualifier Form Attached ☐	Signature <u>Kristine Sistrunk</u> Phone #: <u>386 438 3564</u>
✓ MECHANICAL/ A/C _____	Print Name <u>Kristine Sistrunk</u> License #: _____ Qualifier Form Attached ☐	Signature <u>Kristine Sistrunk</u> Phone #: <u>386 438 3564</u>

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, Bernard Thrift, give this authority for the job address show below
Installer License Holder Name

only, 298 Scarlett way SE, 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)
Christine Sistrunk	<i>Christine Sistrunk</i>	☐ 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.

Bernard Thrift
License Holders Signature (Notarized)

IH1025155
License Number

10-9-19
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Bernard Thrift, personally appeared before me and is known by me or has produced identification (type of I.D.) 9th on this October day of 2019.

LouWayna Davis
NOTARY'S SIGNATURE

