

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

3710  
325-00

For Office Use Only

(Revised 7-1-15)

Zoning Official LN

Building Official MAA

AP# 1856-82

Date Received 8/28

By LN

Permit # 37262

Flood Zone X

Development Permit

Zoning A3

Land Use Plan Map Category A

Comments Existing w/H Park

FEMA Map#

Elevation

Finished Floor 1' above road

River

In Floodway

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 18-0776 ☐ 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 N/A ☐ Out-County ☐ In-County ☒ Sub VF Form

Property ID # 34-45-17-09016-000

Subdivision Heritage Way

Lot# 189

☒ New Mobile Home ☐ Used Mobile Home ☐ MH Size 14x80 Year

Applicant Oda Price, Jessie Shepard Phone # 386-931-9678

Address 3360 150th Place Lake City FL 32024

Name of Property Owner Gregory Real Estate Holdings LLC Phone # 904-224-5409

911 Address 189 SE Shady Oaks Loop Lake City 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 Gregory Real Estate Holdings LLC Phone # 904-224-5409

Address 6157 Deer Creek Rd MacClenny FL 32063

Relationship to Property Owner Owner

Current Number of Dwellings on Property 8 (per Oda)

Lot Size 5 Total Acreage 5

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

Driving Directions to the Property 6 miles, turn right 89th, then left 1.1m to 252 turn right 5.7 miles SW Deputy Davis, 0.9 turn left 252B, head to Hwy 90W merge 75 S towards Alachua take 423 to SW 247 left then right 242A to US 441 turn right 1.9 miles left on to Shady Loop

Name of Licensed Dealer/Installer William Price Phone # 407-448-0953

Installers Address 3360 150th Pl Lake City FL 32024

License Number IT-1041936 Installation Decal # 52337

Spoke w/ Oda 8.29.18

# Mobile Home Permit Worksheet

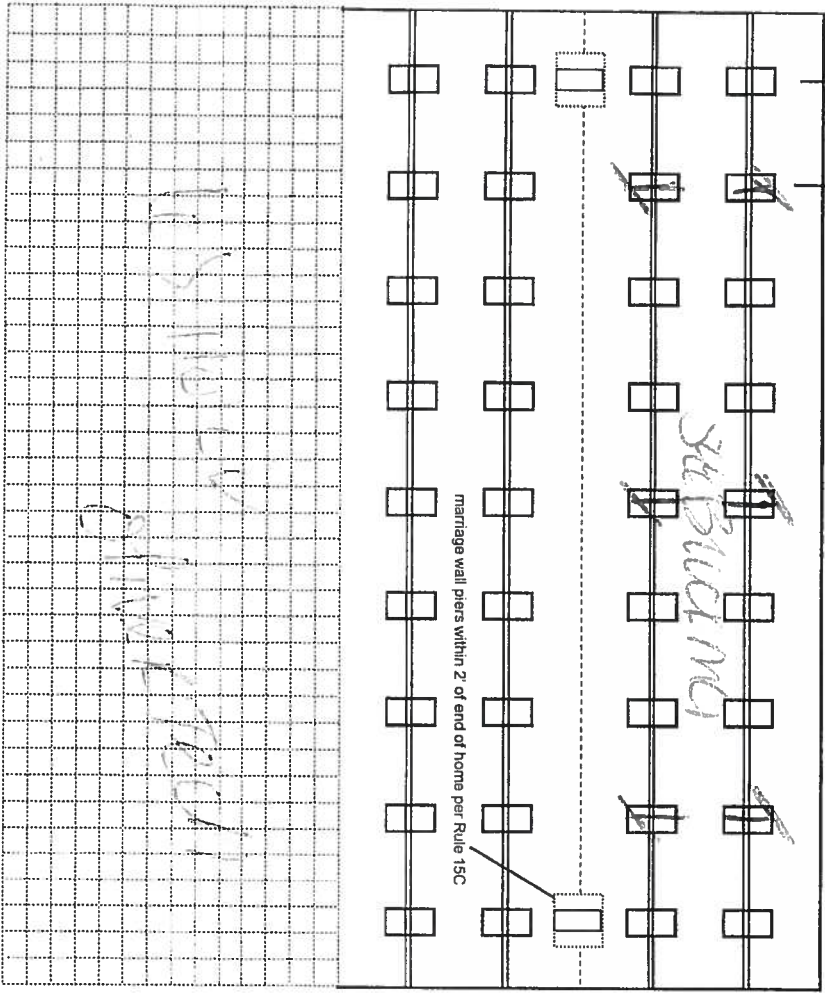
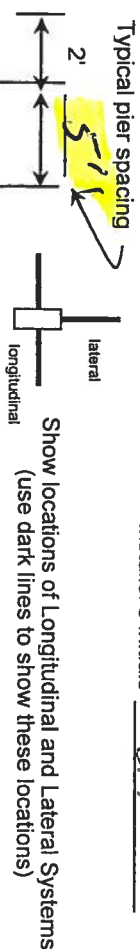
Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

Installer: William Price License # EH-1411936  
 Address of home being installed 173 S. 2nd Street, Oak Grove, LA 70054

Manufacturer LCR Length x width 16x80

**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 WJP



☒ 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 # 52337  
 Triple/Quad ☐ Serial # LC4421833293

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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 18x55  
 Perimeter pier pad size 16x16  
 Other pier pad sizes (required by the mfg.) \_\_\_\_\_

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 \_\_\_\_\_ Pier pad size \_\_\_\_\_

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 \_\_\_\_\_

OTHER TIES

Sidewall \_\_\_\_\_ Number \_\_\_\_\_  
 Longitudinal \_\_\_\_\_  
 Marriage wall \_\_\_\_\_  
 Shearwall \_\_\_\_\_

# Mobile Home Permit Worksheet

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

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

## 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 1500

## TORQUE PROBE TEST

The results of the torque probe test is 350 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. 1 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 William L. Price

Date Tested 8-20-18

## 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.       

## Site Preparation

Debris and organic material removed NO  
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 \_\_\_\_\_ Installed: \_\_\_\_\_  
Pg. \_\_\_\_\_ 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         
Fireplace chimney installed so as not to allow intrusion of rain water. Yes       

## Miscellaneous

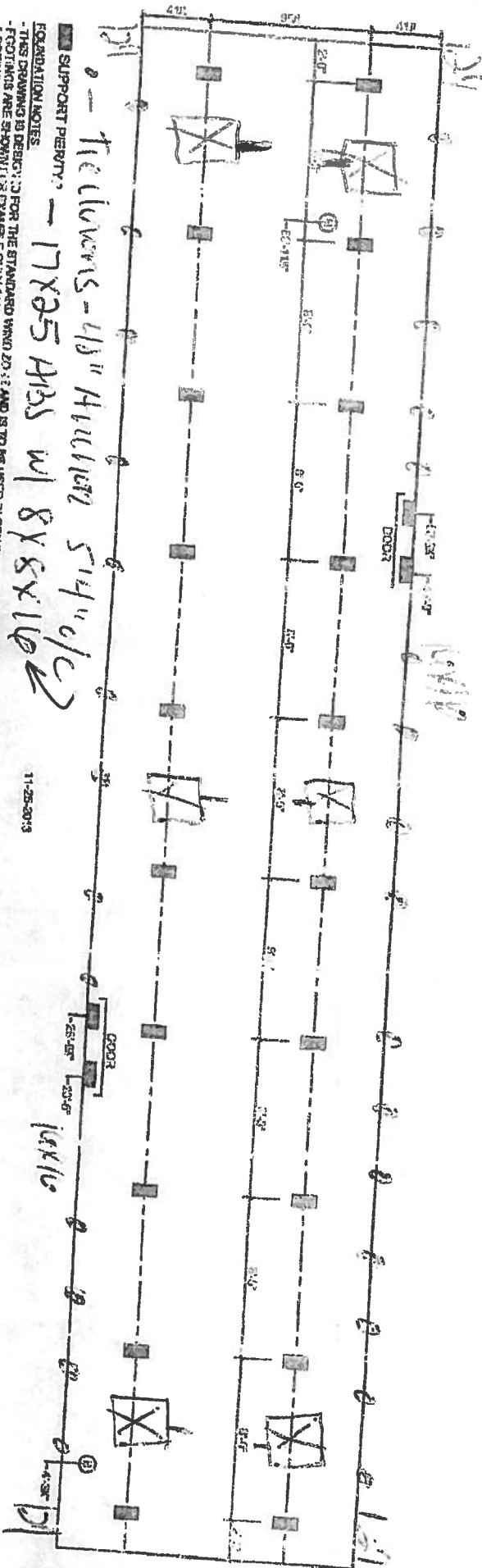
Skirting to be installed. Yes        No         
Dryer vent installed outside of skirting. Yes        N/A         
Range downflow vent installed outside of skirting. Yes        N/A         
Drain lines supported at 4 foot intervals. Yes         
Electrical crossovers protected. Yes         
Other:       

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       

Date 8-20-18

1500 lbs/cf  
17x25 = 7'7" max span



11-25-2013  
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE 2 AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.  
- FOOTINGS ARE SHOWN IN RED. EXACT QUANTITIES AND SPACING MAY VARY BASED ON SOIL TYPE, SOIL CONDITIONS, ETC.  
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INST. LATION MANUAL FOR REQUIRED SIZES.

**Live Oak Homes**  
**MODEL: L-57631 - 16 X 30**  
**3-BEDROOM / 2-BATH**

- ① MAIN ELECTRICAL
- ② ELECTRICAL CROSOVER
- ③ WATER INLET
- ④ WATER CROSOVER (IF ANY)
- ⑤ GAS INLET (IF ANY)
- ⑥ GAS CROSOVER (IF ANY)
- ⑦ DUCT CROSOVER
- ⑧ SEWER DUCT
- ⑨ RETURN AIR (W/OPT. HEAT PUMP ON DUCT)
- ⑩ SUPPLY AIR (W/OPT. HEAT PUMP ON DUCT)

**-OINER SYSTEM**  
All perimeter doors 16x16 w/ 8x8x16

ABS

L-57631



OLIVER TECHNOLOGIES, INC.  
FLORIDA INSTALLATION INSTRUCTIONS FOR THE  
**MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM**  
MODEL 1101"V" (STEPS 1-15)  
LONGITUDINAL ONLY: FOLLOW STEPS 1-9  
FOR ADDING LATERAL ARM : Follow Steps 10-15  
FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - **STOP! Contact Oliver Technologies at 1-800-284-7437 :**  
a) Pier height exceeds 48" b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96"  
e) Location is within 1500 feet of coast

**INSTALLATION OF GROUND PAN**

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C) .  
3. Place ground pan (C) directly below chassis I-beam . Press or drive pan firmly into soil until flush with or below soil.  
**SPECIAL NOTE:** The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

**INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM**

**NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4" . VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.) .**

4. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

PIER HEIGHT  
(Approx. 45 degrees Max.)

1.25" ADJUSTABLE  
Tube Length

1.50" ADJUSTABLE  
Tube Length

7 3/4" to 25"	22"	18"
24 3/4" to 32 1/4"	32"	18"
33" to 41"	44"	18"
40" to 48"	54"	18"

5. Install (2) of the 1.50" square tubes (E {18" tube} ) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.  
6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.  
7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.  
8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.  
9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.

**INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM**

**THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.**

**NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".**

**FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.**

10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. **NOTE:** Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.  
11. **NOTE:** Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.  
12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)  
13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.  
14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector ( I ) with bolt and nut.  
15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" - 14 x 3/4" self-tapping screws in pre-drilled holes.



**OLIVER TECHNOLOGIES, INC.**  
**1-800-284-7437**

Telephone 931-796-4555  
Fax 931-796-8811  
www.olivertechnologies.com

## INSTALLATION USING CONCRETE RUNNER / FOOTER

16. A concrete runner, footer or slab may be used in place of the steel ground pan.

- The concrete shall be minimum 2500 psi mix
- A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
- Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
- If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required.. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

**NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.**

### LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer OR When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

### LATERAL: (Model 1101 TC "V")

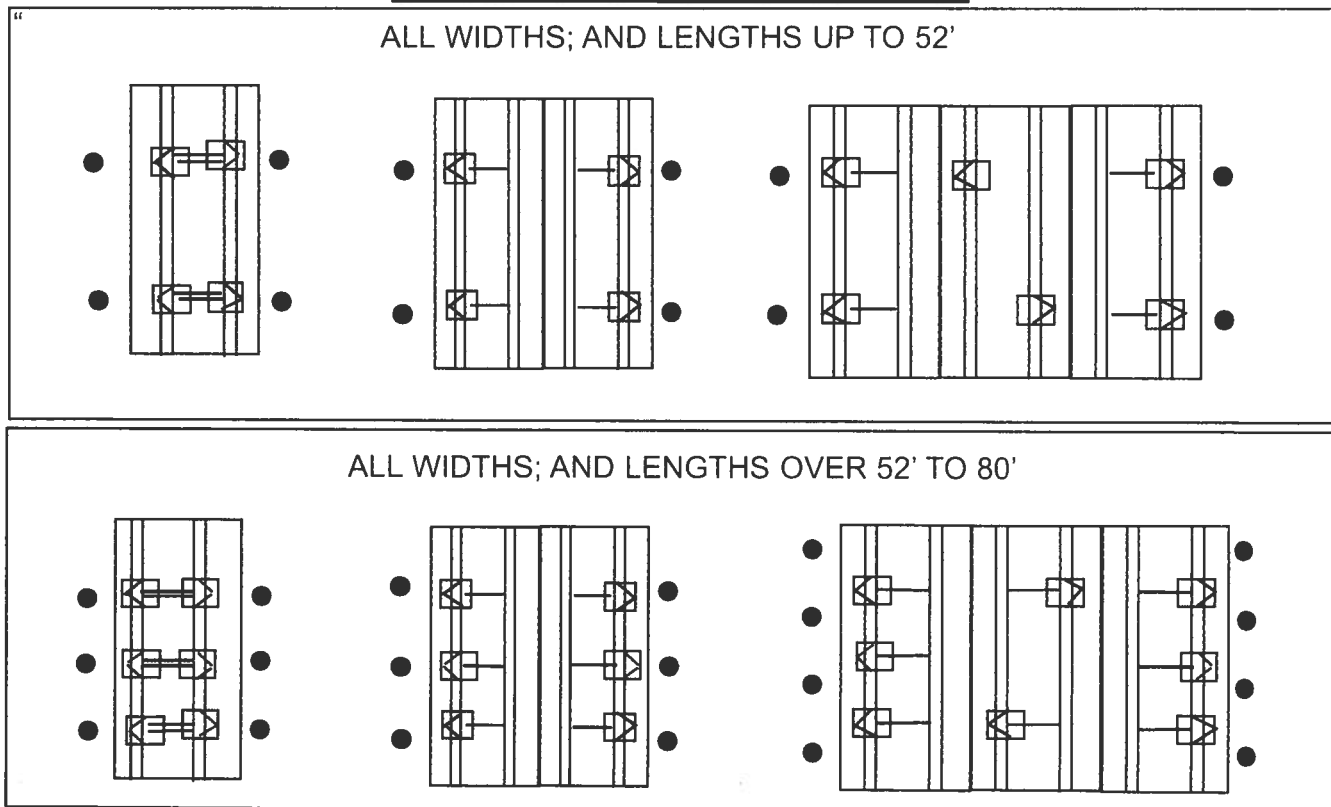
18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.

19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

### Notes:

- LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- ☐ = LOCATION OF LONGITUDINAL BRACING ONLY
- ☐ = TRANSVERSE & LONGITUDINAL LOCATIONS

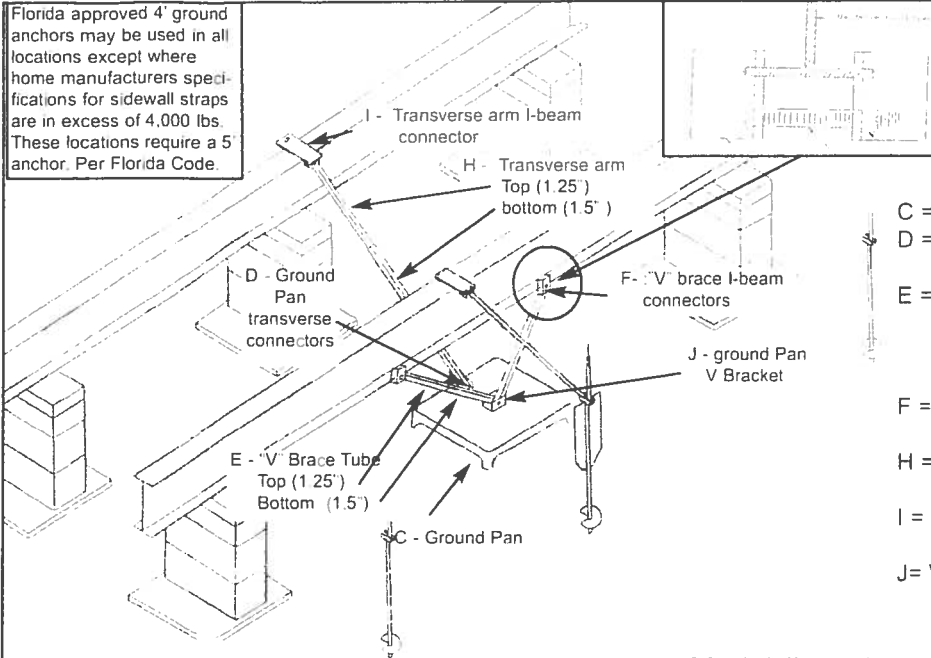
## REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS

6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'. One stabilizer plate and frame tie required at each lateral bracing system.

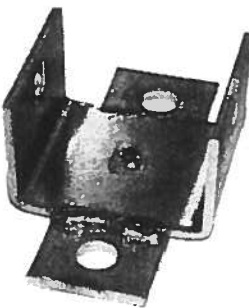
Florida approved 4' ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5' anchor. Per Florida Code.



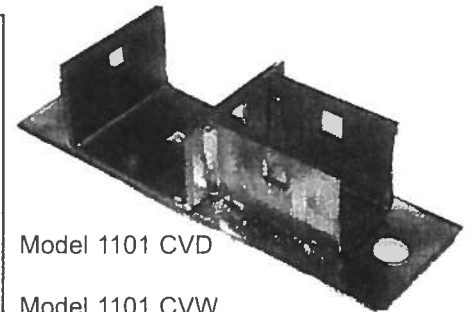
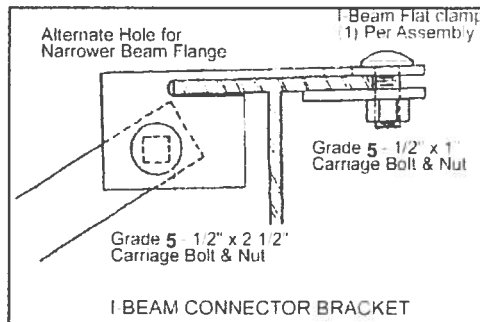
- C = GROUND PAN
- D = GROUND PAN CONNECTOR U BRACKETS TRANSVERSE
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOT-TOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONN-ECTORS ASSEMBLY
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- J = V PAN BRACKET

Model # 1101 "V"

Longitude dry concrete bracket part # 1101 D-CPCA

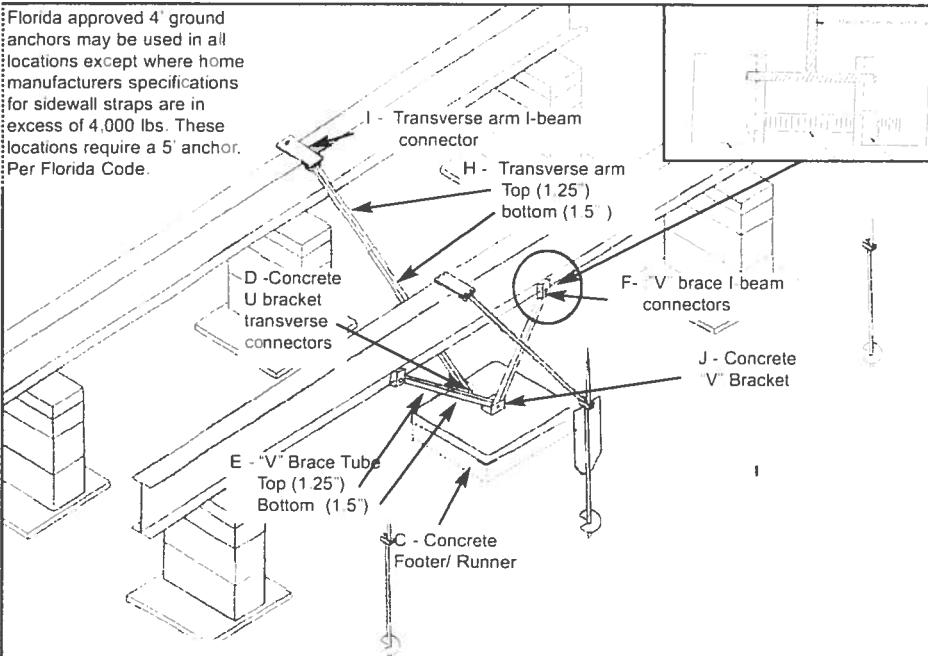


Wet bracket part # 1101 W-CPCA not shown



Model 1101 CVD  
Model 1101 CVW not shown

Florida approved 4' ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5' anchor. Per Florida Code.



- C = CONCRETE FOOTER/RUNNER
- D = CONCRETE U BRACKET TRANSVERSE CONNECTOR (connects with grade 5 -1/2" x 2 1/2" carriage bolt & nut)
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOT-TOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY (connects with grade 5 - 1/2" x 4" carriage bolt & nut)
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 -1/2" x 2 1/2" carriage bolt & nut)
- J = CONCRETE "V" BRACKET (connects with grade 5 - 1/2" x 4" carriage bolt & nut)

Model # 1101 C "V"



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Telephone 931-796-4555  
Fax 931-796-8811  
www.olivertechnologies.com



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, William P. Price, give this authority for the job address show below  
Installer License Holder Name  
only, 189 Shady Oaks Loop Lake City FL 32025 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)
<u>Ada Price</u>	<u>Ada Price</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
<u>Jessie Shepard</u>	<u>Jessie Shepard</u>	<input checked="" 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.

William P. Price License Holders Signature (Notarized) 1H1041936 License Number 8/17/18 Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is William P. Price, personally appeared before me and is known by me or has produced identification (type of I.D.) Personally on this 20th day of August, 20 18.

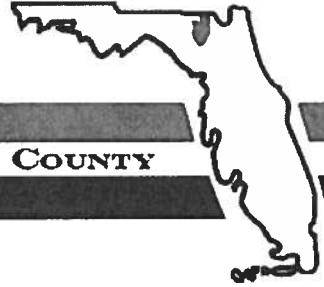
Jessica Prescott  
NOTARY'S SIGNATURE



JESSICA PRESCOTT  
Notary Public, State of Florida  
My Comm. Expires Oct. 1, 2019  
Commission No. FF 923361



District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Everett Phillips  
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: 8/22/2018 11:47:14 AM  
Address: 189 SE SHADY OAKS Loop  
City: LAKE CITY  
State: FL  
Zip Code 32025

Parcel ID 09016-000

REMARKS: Address for proposed structure on parcel. 7th address (MH Park)

**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)

## Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year

updated: 8/1/2018

Retrieve Tax Record

2018 TRIM (pdf)

Property Card

Parcel List Generator

Show on GIS Map

Print

Parcel: &lt;&lt; 34-4S-17-09016-000 &gt;&gt;

Aerial Viewer Pictometry Google Maps

## Owner &amp; Property Info

Result: 1 of 1

Owner	GREGORY REAL ESTATE HOLDINGS LLC 6157 DEERCREEK LANE MACCLENNY, FL 32063		
Site	173 SHADY OAKS LP, LAKE CITY		
Description*	COMM INTERS E R/W US-441 & N LINE SW1/4, RUN S 317 FT, E 1572 FT, S 853 FT, W 1189 FT TO E R/W US-441 FOR POB, RUN N ALONG R/W 600 FT, E 362 FT, S 600 FT, W 362 FT TO POB. 522-194, 727-640, 792-1679, 916-494, WD 1087-1301, WD 1137-529, CT 1171-2765, WD 1182-34 WD 1191-2751, WD 1210-961, WD 1292-540, WD 1340-1961, <<<less		
Area	5 AC	S/T/R	34-4S-17
Use Code**	MH PARK (002802)	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 &amp; Assessment Values

2017 Certified Values		2018 Working Values	
Mkt Land (2)	\$30,457	Mkt Land (2)	\$33,303
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (3)	\$55,572	Building (4)	\$126,177
XFOB (3)	\$18,700	XFOB (7)	\$20,000
Just	\$104,729	Just	\$179,480
Class	\$0	Class	\$0
Appraised	\$104,729	Appraised	\$179,480
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$104,729	Assessed	\$179,480
Exempt	\$0	Exempt	\$0
Total	county:\$104,729	Total	county:\$179,480
Taxable	city:\$104,729	Taxable	city:\$179,480
	other:\$104,729		other:\$179,480
	school:\$104,729		school:\$179,480



## Sales History

Show Similar Sales within 1/2 mile Fill out Sales Questionnaire

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/14/2017	\$247,000	1340/1961	WD	I	Q	01
3/27/2015	\$94,500	1292/0540	WD	I	Q	01
2/18/2011	\$245,000	1210/0961	WD	I	Q	01
4/5/2010	\$100	1191/2751	WD	I	U	11
10/5/2009	\$140,000	1182/0034	WD	I	U	12
4/8/2009	\$100	1171/2765	CT	I	U	18
11/20/2007	\$224,000	1137/0529	WD	I	U	03
6/21/2006	\$99,000	1087/1301	WD	I	Q	
12/12/2000	\$80,000	916/0494	WD	I	U	03
7/1/1994	\$330,000	792/1679	WD	I	U	35
8/1/1990	\$45,000	727/0640	WD	I	Q	

## Detail by Entity Name

Florida Limited Liability Company

GREGORY REAL ESTATE HOLDINGS, LLC

### Filing Information

Document Number	L17000100846
FEI/EIN Number	82-1467198
Date Filed	05/05/2017
State	FL
Status	ACTIVE
Last Event	LC STMNT OF RA/RO CHG
Event Date Filed	05/25/2017
Event Effective Date	NONE

### Principal Address

6157 DEERCREEK LN  
MACCLENLY, FL 32063

### Mailing Address

6157 DEERCREEK LN  
MACCLENLY, FL 32063

### Registered Agent Name & Address

GREGORY, DAVID  
6157 DEERCREEK LN  
MACCLENLY, FL 32063

Name Changed: 05/25/2017

Address Changed: 05/25/2017

### Authorized Person(s) Detail

#### **Name & Address**

Title AMBR

GREGORY, DAVID  
6157 DEERCREEK LN  
MACCLENLY, FL 32063

Title AMBR

GREGORY, SANDRA  
6157 DEERCREEK LN  
MACCLENLY, FL 32063

### Annual Reports

Report Year	Filed Date
2018	03/20/2018

### Document Images

# Gregory Holding

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 188-82 CONTRACTOR William Price PHONE 407-448-8953

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.*

<b>ELECTRICAL</b>	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></p>
<b>MECHANICAL/</b> <b>A/C</b> <u>1669</u>	<p>Print Name <u>Ronald E Bonds SR</u> Signature <u>Ronald E Bonds SR</u></p> <p>License #: <u>CAC 1817658</u> Phone #: <u>850.768.1453</u></p> <p>Qualifier Form Attached <input type="checkbox"/></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.

# Gregory Holdings

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1808-82 CONTRACTOR William Price PHONE 407-448-095

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.*

<b>ELECTRICAL</b>  ✓ 1079	<p>Print Name <u>Glenn Whittington</u> Signature <u>Glenn Whittington</u></p> <p>License #: <u>EC13002957</u> Phone #: <u>386 972 1700</u></p> <p>Qualifier Form Attached <input type="checkbox"/></p>
<b>MECHANICAL/ A/C</b>	<p>Print Name _____ Signature _____</p> <p>License #: _____ Phone #: _____</p> <p>Qualifier Form Attached <input type="checkbox"/></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.



Gregory / WFMAC / Columbia

Color  
Green

License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE

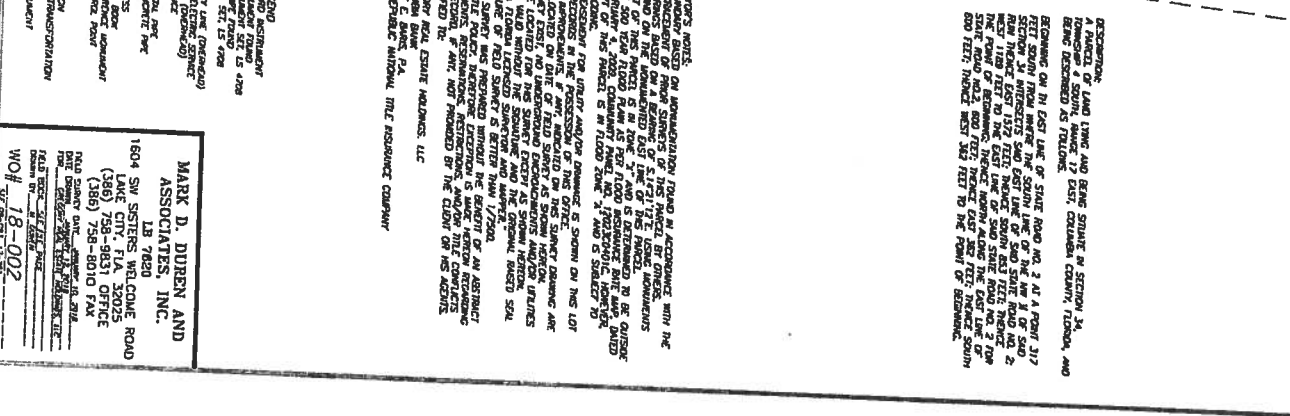
Order #: 3364      Label #: 52337      Manufacturer: \_\_\_\_\_  
Homeowner: \_\_\_\_\_      Year Model: \_\_\_\_\_      (Check Size of Home)  
Address: \_\_\_\_\_      Length & Width: \_\_\_\_\_      Single \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_      Type Longitudinal System: \_\_\_\_\_      Double \_\_\_\_\_  
Phone #: \_\_\_\_\_      Type Lateral Arm System: \_\_\_\_\_      Triple \_\_\_\_\_  
Date Installed: \_\_\_\_\_      New Home: \_\_\_\_\_ Used Home: \_\_\_\_\_      HUD Label #: \_\_\_\_\_  
Installed Wind Zone: \_\_\_\_\_      Data Plate Wind Zone: \_\_\_\_\_      Soil Bearing / PSF: \_\_\_\_\_  
Note: \_\_\_\_\_      Torque Probe / in-lbs: \_\_\_\_\_  
Permit #: \_\_\_\_\_

STATE OF FLORIDA  
INSTALLATION CERTIFICATION LABEL  
52337

LABEL #	DATE OF INSTALLATION
WILLIAM R PRICE	
NAME	
IH / 1041936 / 1	3364
LICENSE #	ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.	

INSTRUCTIONS  
PLEASE WRITE DATE OF  
INSTALLATION AND AFFIX  
LABEL NEXT TO HUD LABEL.  
USE PERMANENT INK PEN  
OR MARKER ONLY.  
COMPLETE INFORMATION  
ABOVE AND KEEP ON FILE  
FOR A MINIMUM OF 2 YEARS.  
YOU ARE REQUIRED TO  
PROVIDE COPIES WHEN  
REQUESTED.

BOUNDARY SURVEY  
IN SECTION 34,  
TOWNSHIP 4 SOUTH,  
RANGE 12 EAST.  
COLUMBIA COUNTY, FLA.



\_\_\_\_\_

57

ABOUT THE BENEFIT OF AN ABSTRACT  
PHONON IS MADE HEREON REGARDING  
TIONS AND FOR THE

ENCROACHMENTS AND/OR UTILITIES  
SURVEY AS SHOWN HEREON.

FOR FLOOD INSURANCE RATE MAP, DAPANEL NO. 1702JC0401C, HOWEVER, FLOOD ZONE "A" AND IS SUBJECT TO

ATION FOUND IN ACCORDANCE WITH THE  
S OF THIS PARCEL BY OTHERS.

THEMCE SOUTH BSS FLETS: THEMCE  
EAST LINE OF SAO STATE ROAD NO. 2  
THEMCE NORTH ALONG THE EAST LINE

17 EAST, COLUMBIA COUNTY, FLORIDA.

10

TOWNSHIP 4  
RANGE 17

Page 10 of 10

SUS HIGHWAY 441

SE SHADY OAKS Loop

151  
155  
167  
173

193  
189

241

243

# 189  
3293

Gregory #1  
# 189  
Dea # 52337

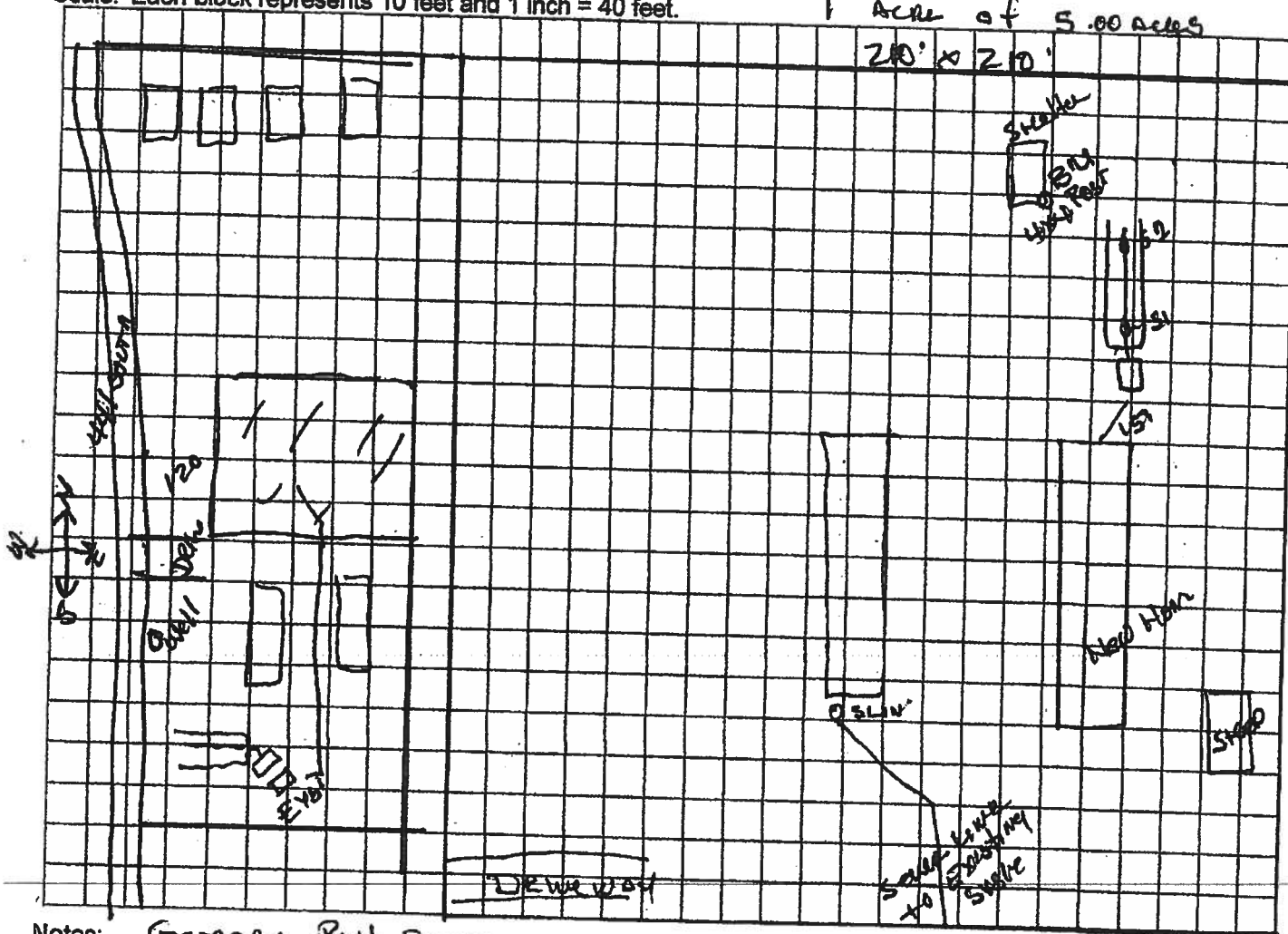
**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT**

Permit Application Number 18-0776

## PART II - SITEPLAN

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

1 acre of 5.00 acres

$$210' \times 210'$$


Notes: Gergory Real Estate  
Shady Oak 3

Site Plan submitted by: Robert W. Ford, Jr. DATE 9/11/17

**Plan Approved**

**Not Approved**

Date 9/20/18

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

New Columbia



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

PERMIT NO. 18-0776  
DATE PAID: 9/13/18  
FEE PAID: 210.00  
RECEIPT #: 1364706

## APPLICATION FOR:

☒ New System  
☐ Repair

☐ Existing System  
☐ Abandonment

☐ Holding Tank  
☐ Temporary

☐ Innovative

APPLICANT: Gregory Real EstateAGENT: Robert W Ford JR NFST INC.MAILING ADDRESS: 741 SE STATE RD 100 LC FIA 32025366  
TELEPHONE: 755-6372

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: — BLOCK: —SUBDIVISION: Heritage Way MHPPROPERTY ID #: 3445-17-00000-000ZONING: S/EPLATTED: 2005PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000\text{GPD}$  ☐  $> 2000\text{GPD}$ IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ NPROPERTY ADDRESS: 173 Shady Oaks LR DISTANCE TO SEWER: NA FTDIRECTIONS TO PROPERTY: Hwy 441 S TO Site on left

## BUILDING INFORMATION

Unit No	Type of Establishment	<input checked="" type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> COMMERCIAL	
		No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC	
1	<u>m/home</u>	<u>3</u>	<u>1180</u>		
2					
3					
4					

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: Robert W Ford JRDATE: 9/10/18

DH 4015, 08/09 (Obsoletes previous editions which may not be used)  
Incorporated 64E-6.001, FAC