DATE 01/21/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029137

APPLICANT WENDY GRENNELL PHONE 386-288-2428

ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038

OWNER RANDALL KING PHONE 386-365-0607

ADDRESS 1685 SW KING STREET LAKE CITY FL 32024

CONTRACTOR RONNIE NORRIS PHONE 386-623-7716

LOCATION OF PROPERTY 47 S, R KING ST, GO APPROX. 1.5 MILES TO SITE ON RIGHT,
JUST PAST 1553 IN COW PASTURE

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. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 26-4S-16-03192-000 SUBDIVISION _____

LOT ____ BLOCK ____ PHASE ____ UNIT ____ TOTAL ACRES 5.00

		IH10251451	Wendy Grennell
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor

EXISTING	11-0024	BK	TC	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: DEDICATING 5 ACRES FOR THIS MOBILE HOME
FLOOR ONE FOOT ABOVE THE ROAD

Check # or Cash CASH

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 Insulation _____ 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 Pool _____ date/app. by

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

Pump pole _____ date/app. by Utility Pole _____ date/app. by M/H tie downs, blocking, electricity and plumbing _____ date/app. by

Reconnection _____ date/app. by RV _____ date/app. by Re-roof _____ date/app. by

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

MISC. FEES $ 300.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 57.78 WASTE FEE $ 150.75

FLOOD DEVELOPMENT FEE $ ____ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ ____ **TOTAL FEE** 583.53

INSPECTORS OFFICE _____ CLERKS OFFICE _____

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 NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

For Office Use Only (Revised 1-10-08) Zoning Official BLK 20.9.11 Building Official T.C. 1-19-11

AP# 1101-16 Date Received 1/4 By JW Permit # 29137

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

Comments Dedicating 5 acres for MH

FEMA Map# N/A Elevation N/A Finished Floor 1' above Rd River N/A In Floodway N/A

☐ Site Plan with Setbacks Shown ☑ EH # 11-0024 ☑ EH Release ☑ Well letter ☐ Existing well

☐ Recorded Deed or Affidavit from land owner ☑ Letter of Auth. from installer ☐ State Road Access

On File

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter

IMPACT FEES: EMS Fire Corr Road/Code

School = TOTAL Ø Suspended ☑ FF Signature "Electrical"

☑ Revised 911 sheet.

Property ID # 26-4S-16-03192-000 Subdivision NA

- New Mobile Home ✓ Used Mobile Home MH Size 28x46 Year 2010
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW old Wire Road Ft White FL 32038
- Name of Property Owner Randall King Phone# 386-365-0607
- 911 Address 1685 SW King Street, L.C. FL 32024
- Circle the correct power company - (Circle One) - FL Power & Light - Clay Electric - Suwannee Valley Electric - Progress Energy

- Name of Owner of Mobile Home Randall King Phone # 386-365-0607
  Address 1553 SW King St. Lake City FL 32024
- Relationship to Property Owner Same - home for daughter
- Current Number of Dwellings on Property 1
- Lot Size Total Acreage 78
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (~~Not existing but do not need a Culvert~~)

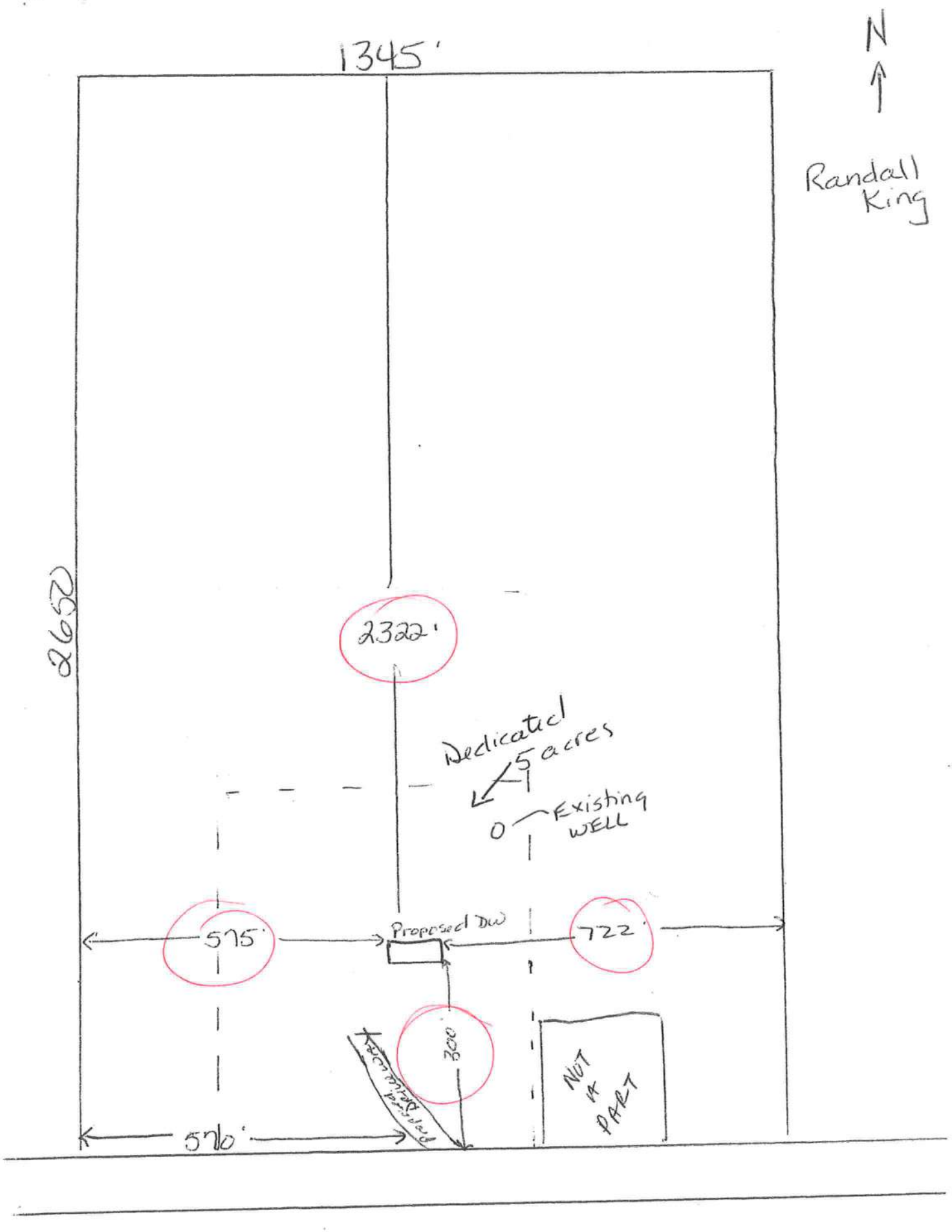
"Using" established

- Is this Mobile Home Replacing an Existing Mobile Home No
- Driving Directions to the Property Hwy 47 South to King Street turn (R) go approx 1 1/2 - 2 miles to site on (R) just past #1553 - site in cow pasture.

- Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terrace Lake City 32024
- License Number IH102514S/1 Installation Decal # 2375

Cash

TW Spoke w/ Wendy 1.19.11


1345'
N
Randall King
2652
2322'
Dedicated 5 acres
Existing WELL
575'
Proposed DW
722'
300'
Proposed Access
570'
NOT A PART

PERMIT WORKSHEET

page 1 of 2

Installer Ronnie Norris License # I#1025145/1

Manufacturer Live Oak Length x Width 48x28

Name of Owner of this Mobile Home Randall King

Phone

Address SW King St. Lake City FL

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 KW

New Home ☑ Used Home ☐ Year

Home installed to the Manufacturer's Installation Manual ☑

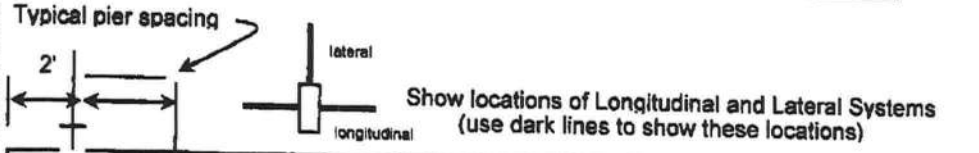
Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

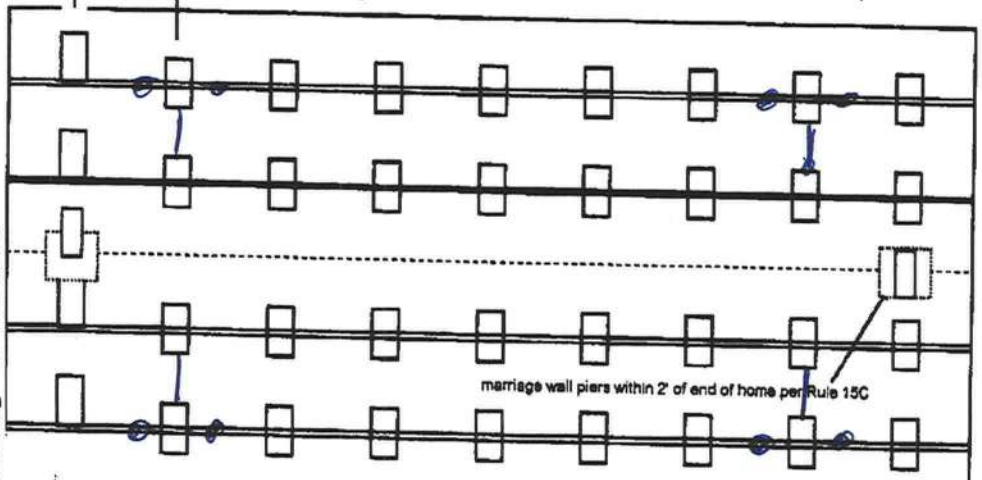
Double wide ☒ Installation Decal # 2375

Triple/Quad ☐ Serial #

Typical pier spacing



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



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.

3 ft 2 Req. 425 Provided

PIER PAD SIZES

I-beam pier pad size 17X25

Perimeter pier pad size NA

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	Pier pad size
8	17X25
4	16X16
4	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

OTHER TIES

	Number
Sidewall	2
Longitudinal	4
Marriage wall	2
Shearwall	2

p.5

3867551031

Wendy Grennell

Jan 08 11 11:11a

PERMIT WORKSHEET

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil ____ without testing.

x 500 x 500 x 500

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 500 x 500 x 500

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.

_____ 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 mult-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 ____ ✓

Water drainage: Natural ____ Swale ____ Pad ____ ✓ Other ____

Fastening multi wide units

Floor:	Type Fastener:	Lag	Length: 6	Spacing:	24
Walls:	Type Fastener:	metal	Length: 6	Spacing:	16
Roof:	Type Fastener:	Screw	Length: 6	Spacing:	16

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 ____

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 ____

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 ____

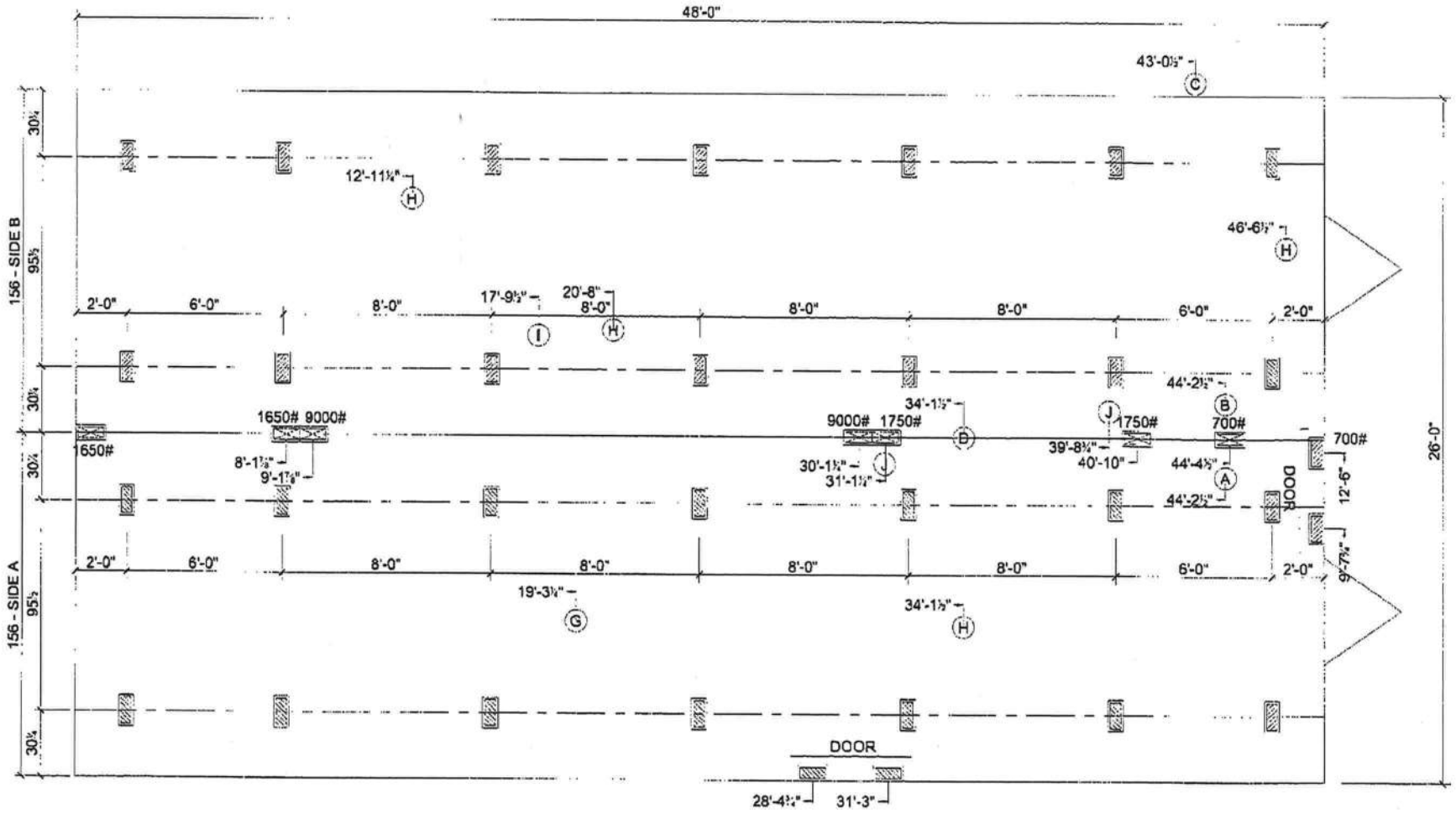
Drain lines supported at 4 foot intervals. Yes ____

Electrical crossovers protected. Yes ____

Other : _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature _____ **Date** 1-10-18



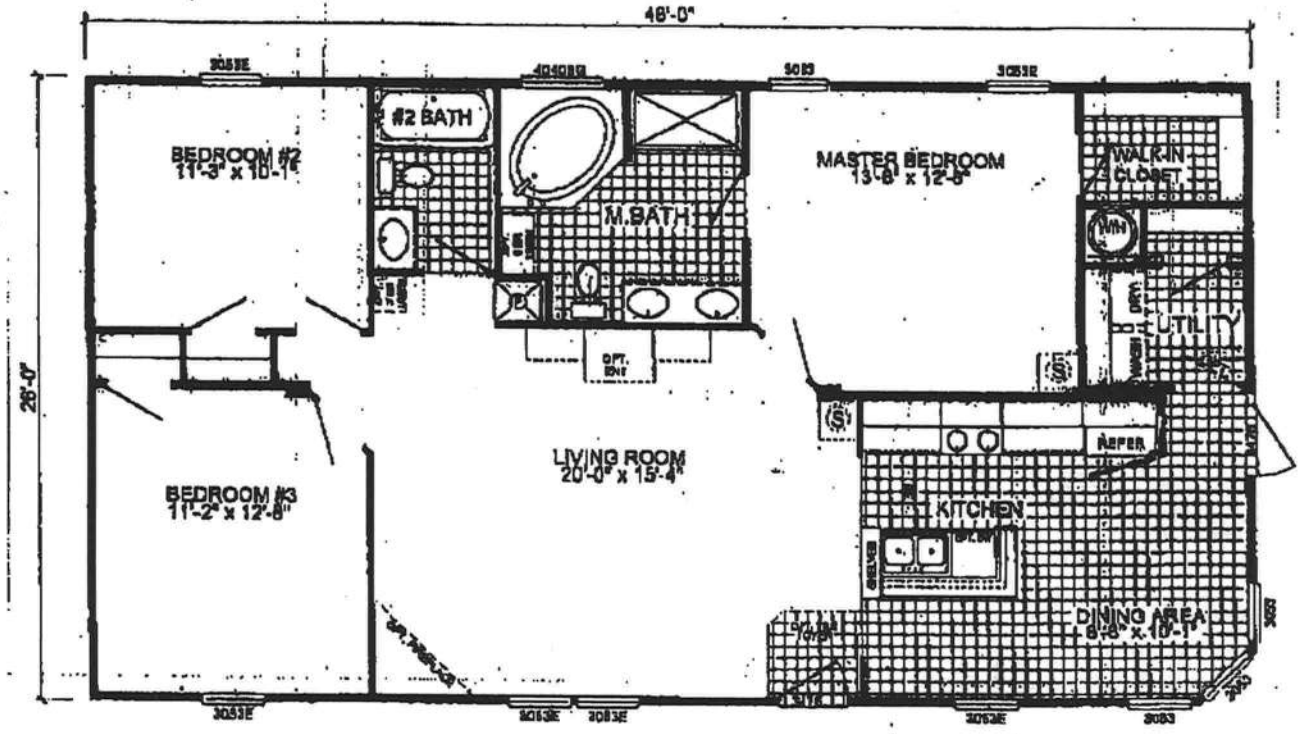
MARRIAGE LINE OPENING SUPPORT PIER/TYP.
SUPPORT PIER/TYP

2/29/08

FOUNDATION NOTES:
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: S-2483A - 28 X 48
3-BEDROOM / 2-BATH

(A) MAIN ELECTRICAL
(B) ELECTRICAL CROSSOVER
(C) WATER INLET
(D) WATER CROSSOVER (IF ANY)
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ANY)
(G) DUCT CROSSOVER
(H) SEWER DROPS
(I) RETURN AIR (W/OPT. HEAT PUMP OH DUCT)
(J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)



S-2483A

3-BEDROOM / 2-BATH

28 x 52 - Approx. 1245 Sq. Ft.

Date: 2/20/07

* All room dimensions include closets and square footage figures are approximate.

Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

PARCEL: 26-4S-16-03192-000 - IMPROVED A (005000)

W1/2 OF SW1/4 EX 2 AC DESC ORB 851-812

Name:	KING RANDALL R & SIBYL	**2010 Certified Values**	
Site:	1553 SW KING ST	Land	$15,163.00
Mail:	1553 SW KING ST LAKE CITY, FL 32024	Bldg	$48,127.00
		Assd	$48,433.00
Sales Info	NONE	Exmpt	$25,000.00
		Taxbl	Cnty: $23,433 Other: $23,433 | Schl: $23,433

NOTES:

In accordance with the property appraiser website measuring tool.

>> Print as PDF <<

W1/2 OF SW1/4 EX 2 AC DESC ORB 851-812

KING RANDALL R & SIBYL
1553 SW KING ST
LAKE CITY, FL 32024

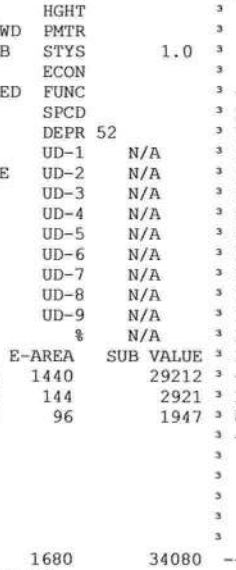
26-4S-16-03192-000

Columbia County 2011 R
CARD 001 of 001
PRINTED 1/06/2011 11:22 BY JEFF
APPR 1/03/2010 TWHC

BUSE	000100	SINGLE FAM		AE? Y		1584	HTD AREA	88.200	INDEX	26416.00	DIST 3		PUSE	005000	IMPROVED AG
MOD	1	SFR	BATH	1.00		1680	EFF AREA	40.572	E-RATE	100.000	INDX	STR 26- 4S- 16			
EXW	08	WD OR PLY	FIXT			68161	RCN			1955	AYB	MKT AREA 01			34,080 BLDG
%		0000000000	BDRM	3		50.00	%GOOD	34,080	B BLDG VAL	1955	EYB	(PUD1			9,960 XFOB
RSTR	03	GABLE/HIP	RMS									AC	78.000		12,282 LAND
RCVR	12	MODULAR MT	UNTS									NTCD			14,152 CLAS
%		N/A	C-W%									APPR CD			242,494 MKTUSE
INTW	05	DRYWALL	HGHT									CNDO			298,816 JUST
50%	02	WALL BD/WD	PMTR									SUBD			70,474 APPR
FLOR	06	VINYL ASB	STYS	1.0								BLK			
30%	14	CARPET	ECON									LOT			0 SOHD
HTTP	04	AIR DUCTED	FUNC									MAP#			0 ASSD
A/C	03	CENTRAL	SPCD									HX			0 EXPT
QUAL	05	05	DEPR	52								TXDT	002		0 COTXBL
FNDN		N/A	UD-1	N/A											
SIZE	03	RECTANGLE	UD-2	N/A											
CEIL		N/A	UD-3	N/A											
ARCH		N/A	UD-4	N/A											
FRME	01	NONE	UD-5	N/A											
KTCH	01	01	UD-6	N/A											
WNDO		N/A	UD-7	N/A											
CLAS		N/A	UD-8	N/A											
OCC		N/A	UD-9	N/A											
COND	03	03	%	N/A											

SUB	A-AREA	%	E-AREA	SUB VALUE
BAS93	1440	100	1440	29212
FEP93	180	80	144	2921
FOP93	320	30	96	1947
TOTAL	1940		1680	34080

FIELD CK:
LOC: 1553 KING ST SW LAKE CITY



BLDG TRAVERSE
BAS1993=W15 FEP1993=N12 W15 S12 E15$ W17 S45 FOP1993=S10 E32 N10W32$ E32 N45$.

PERMITS

NUMBER	DESC	AMT	ISSUED

SALE

BOOK	PAGE	DATE	PRICE
GRANTOR			
GRANTEE			
GRANTOR			
GRANTEE			

EXTRA FEATURES

AE	BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UNITS	UT	PRICE	ADJ UT PR	SPCD %	%GOOD	XFOB VALUE
N		0030	BARN,MT	40	24		1		0000	1.00	1.000	UT	3500.000	3500.000		100.00	3,500
Y		0040	BARN,POLE	32	32		1		1993	1.00	1024.000	SF	2.500	2.500		100.00	2,560
Y		0040	BARN,POLE	32	42032		1		1993	1.00	1260.000	SF	2.500	2.500		100.00	3,150
Y		0294	SHED WOOD/VI				1		1993	1.00	1.000	UT	750.000	750.000		100.00	750

FIELD CK:

AE	LAND CODE	DESC	ZONE	ROAD	UTIL	UD1	UD2	UD3	UD4	FRONT	DEPTH	DT	ADJUSTMENTS	UNITS	UT	PRICE	ADJ UT PR	LAND VALUE
Y	000100	SFR	A-1	0002	0002								1.00 1.00 1.00 1.00	1.000	AC	12282.190	12282.19	12,282
N	005200	CROPLAND 2	A-1	0002	0002								1.00 1.00 1.00 1.00	53.000	AC	200.000	200.00	10,600AG
N	005600	TIMBER 3	A-1	0002	0002								1.00 1.00 1.00 1.00	24.000	AC	148.000	148.00	3,552AG
N	009910	MKT.VAL.AG	A-1	0002	0002								1.00 1.00 1.00 1.00	77.000	AC	3149.280	3149.28	242,494MK

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Ronnie Norris PHONE 386-623-7716

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 _____ License #:	Signature _____ Phone #:
MECHANICAL/ A/C ____ ✓	Print Name Robert Grant License #: CAC1814931	Signature _____ Phone #: 8008593708
PLUMBING/ GAS ✓	Print Name NORRIS MOBILE HOME SET-UP LLC License #: IH1025145/1	Signature _____ Phone #: 386-752-3871
ROOFING	Print Name _____ License #:	Signature _____ Phone #:
SHEET METAL	Print Name _____ License #:	Signature _____ Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name _____ License#:	Signature _____ Phone #:
SOLAR	Print Name _____ License #:	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

> Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of $150.

I, Lonnie Noggis (Please Print), license number IH IH/1025145/1
do hereby state that the installation of the manufactured home for Randall (Applicant)
King at SW King Street (911 Address)
will be done under my supervision.

Signature

Sworn to and subscribed before me this 10 day of January, 20 11.

Notary Public: Shirley M Bennett (Signature)

My Commission Expires: 7-8-12 (Date)

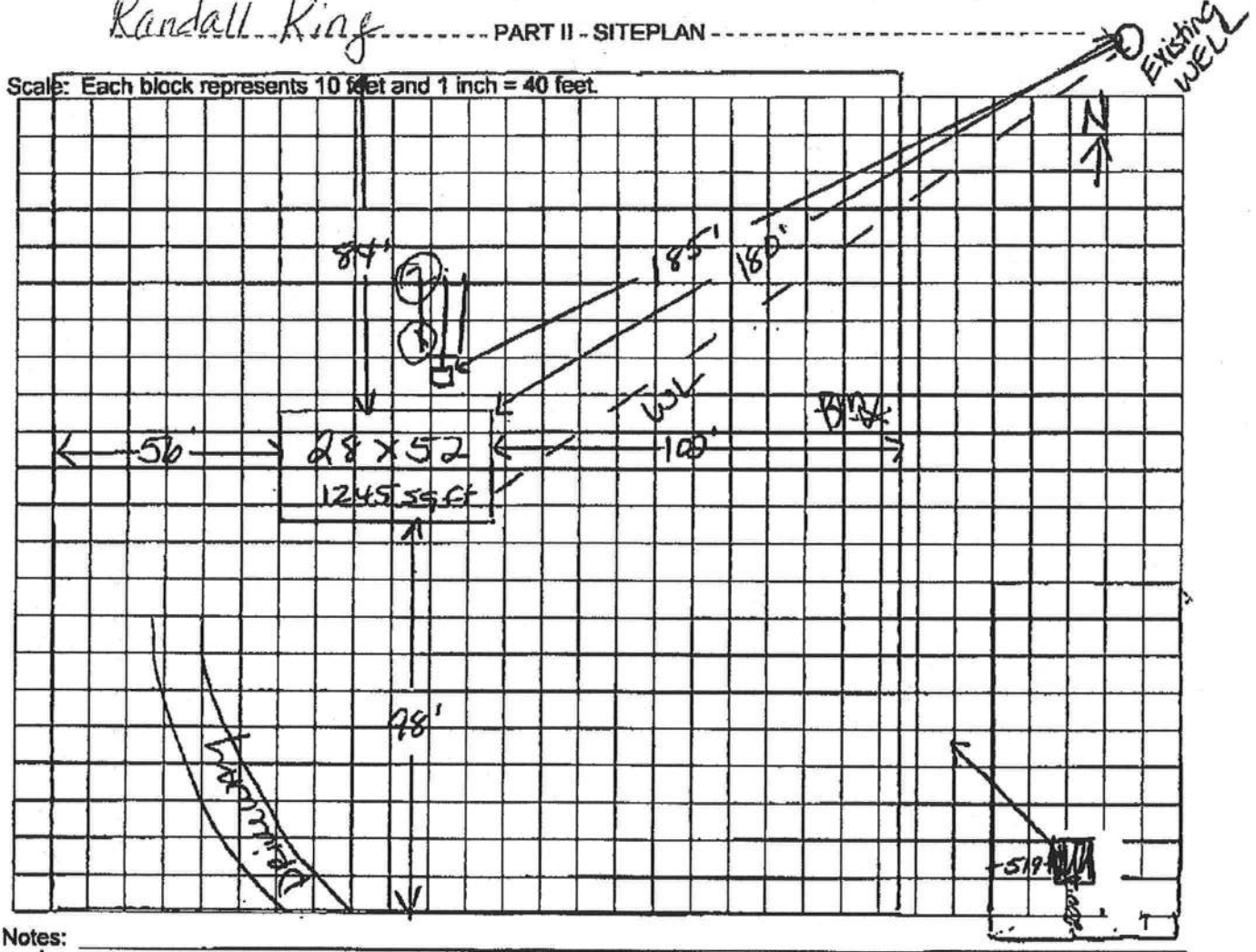
SHIRLEY M. BENNETT
MY COMMISSION # DD804429
EXPIRES July 08, 2012
(407) 398-0153 FloridaNotaryService.com

App# 1101-16

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 11-0024

Randall King ..... PART II - SITEPLAN .....



Notes: 1 acre shown out of 78: see attached

RC Ford - M Contractor.

Site Plan submitted by: Wendy Grennell Agent 1/14/11

Plan Approved ✓ Not Approved ____ Date 1-19-11

By Sallie Ford EH Director. Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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: 1/10/2011 **DATE ISSUED:** 1/20/2011

ENHANCED 9-1-1 ADDRESS:

1685 SW KING ST

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

26-4S-16-03192-000

Remarks:

2ND LOCATION ON PARCEL

Address Issued By: SIGNED: / RONAL N. CROFT
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.

1887

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1101-16 CONTRACTOR Ronnie Norris PHONE 386-623-7716

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 Randall King License #: OWNER	Signature Randall R. King Phone #: 386-365-0607
MECHANICAL/ A/C _____	Print Name License #:	Signature Phone #:
PLUMBING/ GAS	Print Name NORRIS MOBILE HOME SET-UP LLC License #: IH1025145/1	Signature Phone #: 386-752-3871
ROOFING	Print Name License #:	Signature Phone #:
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature Phone #:
SOLAR	Print Name License #:	Signature Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

CERTIFICATE OF

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 26-4S-16-03192-000 **Building permit No.** 000029137

Permit Holder RONNIE NORRIS

Owner of Building RANDALL KING

Location: 1685 SW KING STREET

Date: 02/15/2011

Joey Crews

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)