

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

<i>For Office Use Only</i> (Revised 7-1-15)		Zoning Official _____	Building Official _____
AP# <u>52795</u>	Date Received <u>12/9/21</u>	By <u>MG</u>	Permit # _____
Flood Zone _____	Development Permit _____	Zoning _____	Land Use Plan Map Category _____
Comments _____			
FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____			
<input type="checkbox"/> Recorded Deed or <input checked="" type="checkbox"/> Property Appraiser PO <input checked="" type="checkbox"/> Site Plan <input checked="" type="checkbox"/> EH # _____ <input type="checkbox"/> Well letter OR <input type="checkbox"/> Existing well <input type="checkbox"/> Land Owner Affidavit <input checked="" type="checkbox"/> Installer Authorization <input type="checkbox"/> FW Comp. letter <input checked="" type="checkbox"/> App Fee Paid <input type="checkbox"/> DOT Approval <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> STUP-MH _____ <input checked="" type="checkbox"/> 911 App <input type="checkbox"/> Ellenville Water Sys <input checked="" type="checkbox"/> Assessment <u>Owed</u> <input type="checkbox"/> Out County <input type="checkbox"/> In County <input checked="" type="checkbox"/> Sub VF Form			

Property ID # 02-3s-16-01946-039 Subdivision Northwood Acres Lot# 26

▪ New Mobile Home Yes Used Mobile Home _____ MH Size 28x56 Year 2022
 ▪ Applicant Sonya North Phone # 863-517-5701
 ▪ Address 3311 SW State Rd 247 Lake City FL 32024

▪ Name of Property Owner Ernest + Noreen Langley Phone# 908-415-9774
 ▪ 911 Address 274 NW Michelle Pl 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 Ernest and Noreen Langley Phone # 908-415-9774
 Address 543 NW Cripple Creek St Lake City FL 32055

▪ Relationship to Property Owner same
 ▪ Current Number of Dwellings on Property _____

▪ Lot Size _____ Total Acreage 1

▪ 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 L on NE Madison St, R on US-41N,
L on NW Michelle Pl, property on L

▪ Name of Licensed Dealer/Installer Ernest Johnson Phone # 352-441-8099
 ▪ Installers Address 22204 SE US Highway 301 Hawthorne FL 32640
 ▪ License Number FH1025249 Installation Decal # 85899



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 AGENT AUTHORIZATION

I, Ernest Scott Johnson, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
Sony North	Sony North	

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.

Ernest Scott Johnson TH 1025249 12/2/21
License Holders Signature (Notarized) License Number Date

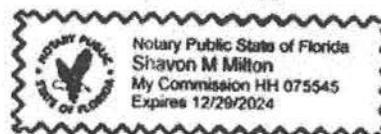
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Alachua

The above license holder, whose name is Ernest Scott Johnson, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 2 day of December, 2021.

Shawn M. Milton
NOTARY'S SIGNATURE

(Seal/Stamp)



Mobile Home Permit Worksheet

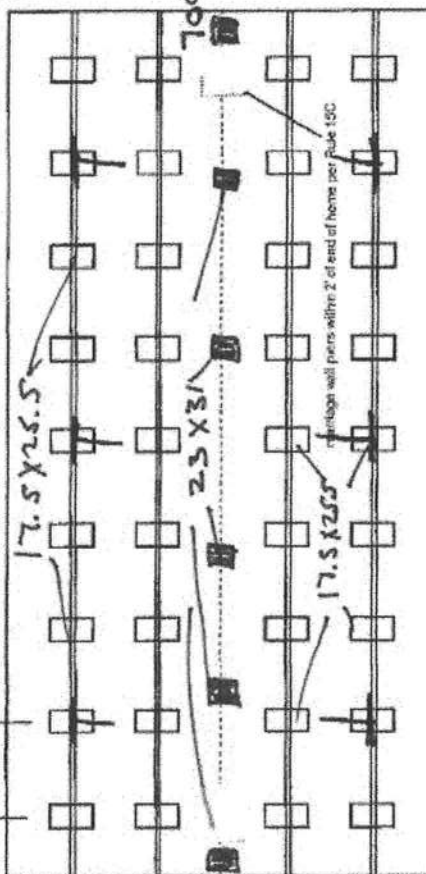
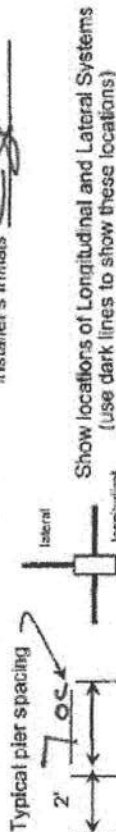
Installer: Ernest Scott Johnson License # TH1025249

Address of home being installed: 274 NW Michelle Place
Lake City, FL 32055

Manufacturer: Champion Length x width: 56x28

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: ES



Application Number: _____

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 # 85899

Triple/Quad ☐ Serial # FL261-00P-H-B202850AB

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'	5'	6'	7'	8'	8'
2000 psf	5'	6'	7'	8'	8'	8'
2500 psf	6'	7'	8'	8'	8'	8'
3000 psf	7'	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 17.5x25.5

Perimeter pier pad size 17.5x25.5

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
<u>23x31</u>	<u>23x31</u>
<u>23x31</u>	<u>23x31</u>
<u>23x31</u>	<u>23x31</u>

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

Number 28

Number 28

Number 2

Number 2

Olivia 1101 V

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to without testing. psf

x 1000 x 1000 x 1000

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 1000 x 1000 x 1000

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 require anchors with 4000 lb. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Ernest Scott Johnson

Date Tested

Assumed Oliver 1101 v uses 485 Anderson Both

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
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 1995 Length: 74 Spacing: 20
Walls: Type Fastener: 1995 Length: 74 Spacing: 20
Roof: Type Fastener: 1995 Length: 20 Spacing: 20
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. 11

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
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
Dryer vent installed outside of skirting. Yes
Range downflow vent installed outside of skirting. Yes
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other: N/A

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 Ernest Scott Johnson Date

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Ernest Johnson PHONE 352-494-8099

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>Glenn Whittington</u> License #: <u>EC13002957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Glenn Whittington</u> Phone #: <u>386-684-6001</u>
MECHANICAL/ A/C _____	Print Name _____ License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature _____ Phone #: _____

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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 INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Ernest Johnson

PHONE

352-494-8009

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	<div>Print Name _____ Signature _____</div> <div>License #: _____ Phone #: _____</div> <div>Qualifier Form Attached <input type="checkbox"/></div>
MECHANICAL/ A/C _____	<div>Print Name <u>Ronald Bonds</u> Signature <u>[Signature]</u></div> <div>License #: <u>CAC1817658</u> Phone #: <u>850-514-0592</u></div> <div>Qualifier Form Attached <input type="checkbox"/></div>

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.

Revised 4/27/2017

Home only or Land & Home
Financed By
Southern Insurance?

IRONWOOD HOMES OF LAKE CITY LLC

4109 WEST US HWY 90

Lake City, FL 32055

(386) 754-8844 fax (386) 754-0190

BUYER	561PHONE	DATE
LANGLEY ERNEST CHRISTOPHER & LANGLEY ETTA NOREEN	908-415-9774 908-489-2550	12/1/2021

ADDRESS	COLUMBIA COUNTY	SALES PERSON
543 NW CRIPPLE CREEK STREET LAKE CITY FL 32055		MIKE COX

DELIVERY ADDRESS	
274 NW MICHELLE PL LAKE CITY FL 32055	

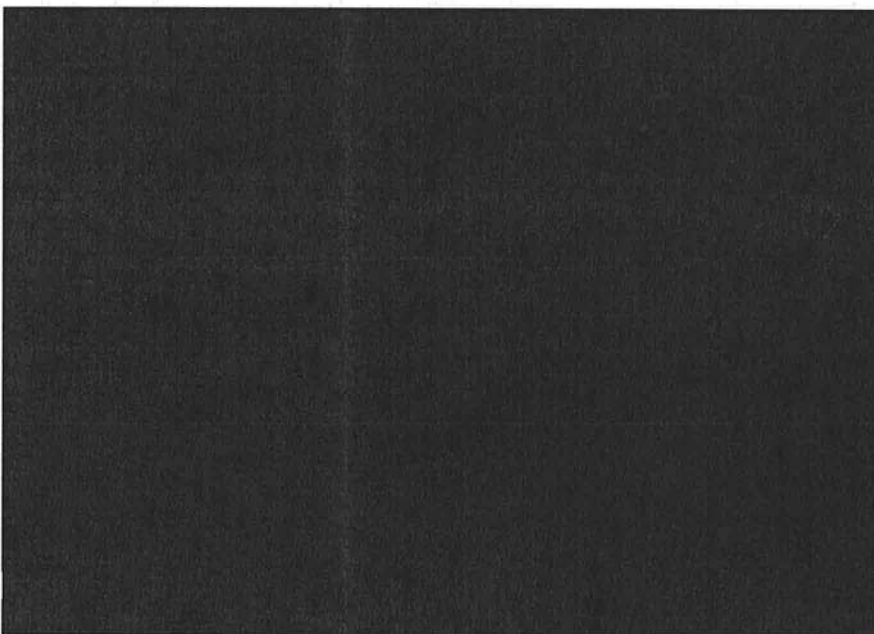
MAKE & MODEL	YEAR	BEDROOMS	FLOORSIZE	HITCHSIZE
CHAMPION 2856H32P01	2022	3X2	28X56	L 28X60

SERIAL NUMBE	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED	COLOR	ROPOSED DELIVERY DATE	KEY NUMBERS
FL261-00P-H-B202850AB			TBD	

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
CEILING			
EXTERIOR			
FLOORS			

This insulation information was furnished by the manufacturer and is disclosed

in compliance with the Federal trade Commission Rule 16CFR, Sec. 460.16.



NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.		
DESCRIPTION OF TRADE-IN	YEAR	SIZE
MAKE	MODEL	BEDROOMS
TITLE NO.	SERIAL	COLOR
AMOUNT OWING TO WHOM	NO.	

ANY DEBTBUYER OWES ON THE TRADE-IN IS TO BE PAID BY THE	<input type="checkbox"/> DEALER	<input type="checkbox"/> BUYER
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THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures. Buyer is purchasing the above described trailer, manufactured home or vehicle: the optional equipment and accessories, the insurance as described has been voluntary: that Buyer's trade-in is free from all claims whatsoever, except as noted.

OF THIS ORDER AND THAT BUYER HAS READ A UNDERSTANDS THE BACK OF THIS AGREEMENT.

BUYER ACKNOWLEDGES RECEIPT OF A COPY

Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent	DEALER	SIGNED X	BUYER
By		SOCIAL SECURITY NO.	
APPROVED		SIGNED X	BUYER
		SOCIAL SECURITY NO.	

BASE PRICE OF UNIT	\$81,900.00
OPTIONAL EQUIPMENT (Taxable)	\$15,105.00
Other (taxable)	\$0.00
SUB-TOTAL	\$97,005.00
SALES TAX 6%	\$5,820.30
If Base Price<5,000 1%	\$0.00
County Surtax (Sales price over \$5,000)	\$50.00
Tag & Title Fees	
Non-taxable items	\$9,720.00
LAND PURCHASE	
Points	\$0.00
Security Interest	\$0.00
1.CASH PURCHASE PRICES	\$112,595.30
TRADE IN ALLOWANCE	\$ 0.00
LESS BAL. DUE ON ABOVE	\$ 0.00
NET ALLOWANCE	\$
CASH DOWN PAYMENT	\$
PRE PAIDS	\$ 0.00
2. LESS TOTAL CREDITS	\$ 50,000.00
SUB-TOTAL	\$ \$62,595.30
SALES TAX(not included above)	\$0.00
3. UNPAID BAL OF CASH SALE PRICE	\$ \$62,595.30

REMARKS:

NO VERBAL AGREEMENTS WILL BE HONORED.

Initial: _____

Connect water & sewer within 20 ft. to existing facilities

Customer responsible for any gas or electrical hookups

Wheels & Axiles deleted from sale price of home. Will lend for a local move

Customer responsible for releleveling of home after intial setup. Cannot be responsible for settling of land.

PRICE INCLUDES SET-UP A/C STEPS AND STANDARD WHITE SKIRTING

Columbia County Property Appraiser

Jeff Hampton

2022 Working Values

updated: 11/25/2021

Parcel: (<<) 02-3S-16-01946-039 (6396) (>>)

Owner & Property Info

Result: 7 of 11

Owner	LANGLEY NOREEN E LANGLEY ERNEST C 543 NW CRIPPLE CREEK ST LAKE CITY, FL 32055		
Site	274 NW MICHELLE PI, LAKE CITY		
Description*	COMM SE COR OF SEC, RUN W 617.23 FT TO W R/W US-41, NW 791.98 FT W 858.32 FT FOR POB, CONT W 141 FT, N 309.54 FT, E 141 FT, S 309.54 FT TO POB. (KA LOT 26 BLOCK B NORTHWOOD ACRES S/D UNREC). 441-671, 647-417, 701-583, 738-146, 739-170, 946-1068, WD 1068-2 ...more>>>		
Area	1 AC	S/T/R	02-3S-16
Use Code**	VACANT (0000)	Tax District	3

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

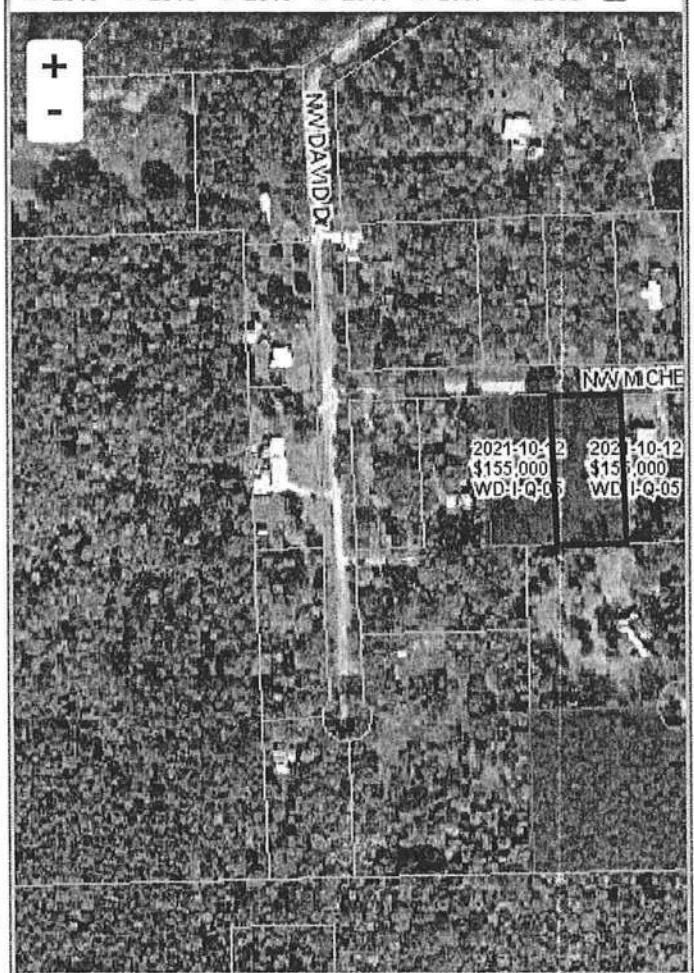
**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2021 Certified Values		2022 Working Values	
Mkt Land	\$15,950	Mkt Land	\$15,950
Ag Land	\$0	Ag Land	\$0
Building	\$0	Building	\$0
XFOB	\$200	XFOB	\$200
Just	\$16,150	Just	\$16,150
Class	\$0	Class	\$0
Appraised	\$16,150	Appraised	\$16,150
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$16,150	Assessed	\$16,150
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$16,150 city:\$0 other:\$0 school:\$16,150	Total Taxable	county:\$16,150 city:\$0 other:\$0 school:\$16,150

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
10/12/2021	\$155,000	1449/2205	WD	I	Q	05 (Multi-Parcel Sale) - show
3/12/2021	\$100	1432/1152	WD	I	U	11
1/11/2021	\$28,900	1427/2489	WD	I	Q	01
6/26/2018	\$16,700	1363/0868	WD	I	U	37
12/21/2005	\$20,000	1068/2676	WD	I	Q	
2/11/2002	\$4,500	0946/1068	WD	I	U	06
12/14/1990	\$6,000	0739/0170	WD	V	Q	
11/3/1989	\$6,000	0701/0583	WD	V	U	

▼ Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
NONE					

▼ Extra Features & Out Buildings (Codes)

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CHAMPION
HOME BUILDERS

2856H32P01
3 BEDROOM 2 BATH
55'-0" X 26'-8"
1498 SQ. FT. TOTAL
06-16-2020

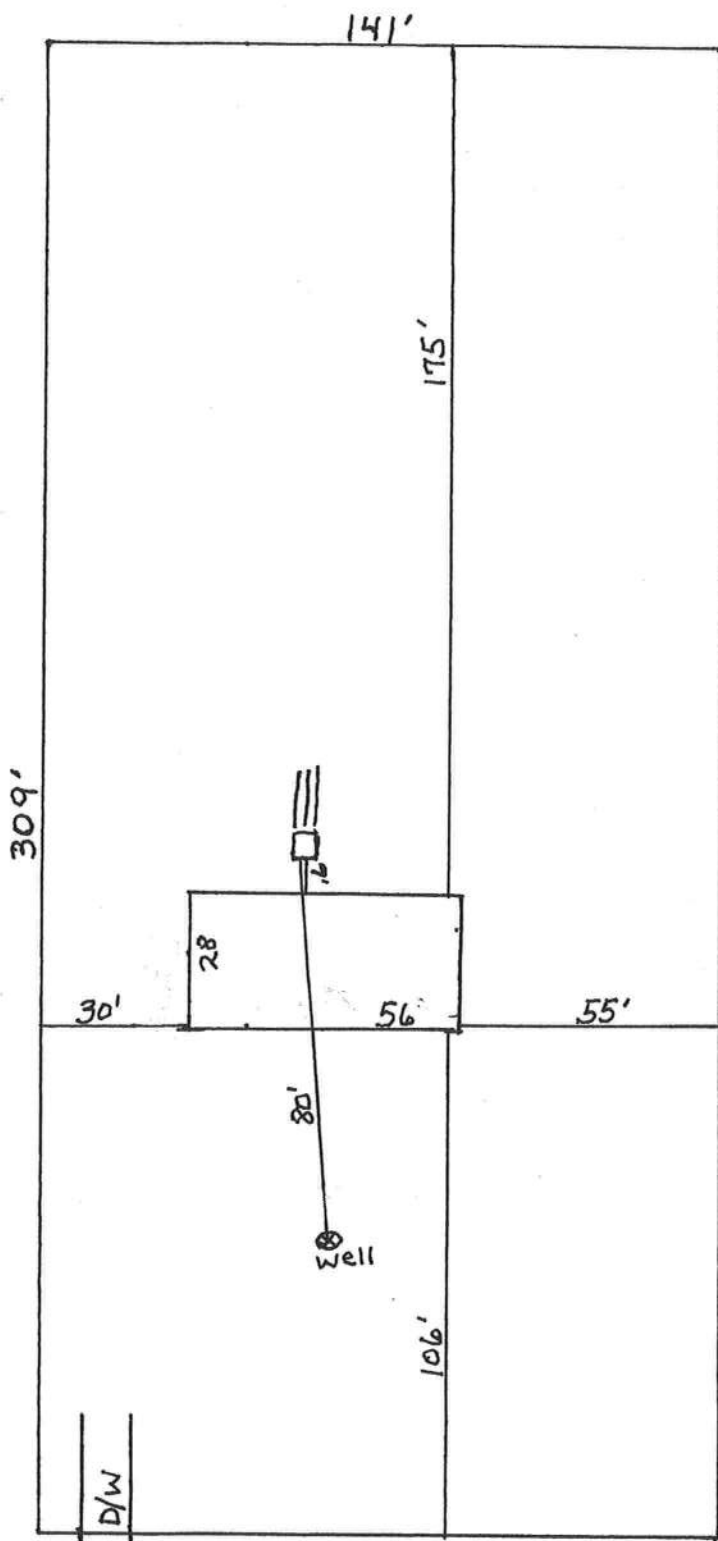


100' F/G

100' S/G

LITERATURE
PLAN

L-101



1" = 40'



247 NW Michelle PL

LANGLEY