

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 8-23-05) Zoning Official _____ Building Official OK JTH 5-22-06
 AP# 0605-68 Date Received 5/17/06 By GE Permit # 24579
 Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____
 Comments _____

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

- ☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ EH Release ☐ Well letter ☐ Existing well
☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from installer

Received letter from town of Ft. White Letter of Auth. from owner of land

- Property ID # 33-65-16-04024-001 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home ☒ Year 83
- Applicant Robert & Irene Taylor Phone # 755-1783
- Address 137 Daniel Ave Ft. White, FL 32038
- Name of Property Owner Robert & Irene Taylor Phone# 386-853-5105 cell
- 911 Address POB 14 Ft. White, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home ROBERT TAYLOR Phone # 386-853-5105 cell
- Address PO Box 744 Ft. White, FL 32038
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 2.02
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 441 S to 47 to Ft. White turn R on 27 follow to B&B food store turn R on Gerald Rd follow to Daniel Ave turn R around corner property on R.
- Name of Licensed Dealer/Installer Bruce Gorton Phone # 755-1783
- Installers Address 1505 SW CR 252B LC FL
- License Number FH-0000702 Installation Decal # 263476

JW LEFT MESSAGE: 5-23-06 - Bruce
NUMBER - 210 AREA 52422

20000-

Town of Fort White

Post Office Box 129 Fort White, Florida 32038-0129
Town Hall - (386) 497-2321 • Public Works - (386) 497-3345
Email: townofftwhite@alltel.com • Web site: Townoffortwhitefl.com

CERTIFICATE OF COMPLIANCE & REQUEST FOR ISSUANCE OF BUILDING PERMIT

The undersigned hereby certify the following property is in compliance with the Town of Fort
White's Comprehensive Plan and Land Development Regulations for the stated development purposes:

OWNER'S NAME: Irene Taylor

ADDRESS: P.O. Box 744 Fort White, FL 32038

PROPERTY DESCRIPTION: 137 Amiel Ave. Fort White, FL 32038
(parcel number if possible)

2.02 Acres Parcel #4024-001

DEVELOPMENT: RSF/ME

You are hereby authorized to issue the appropriate building permits.

3/29/06
DATE

Janis E. Revels Ba
LAND DEVELOPMENT REGULATION
ADMINISTRATOR
TOWN OF FORT WHITE

District #1
Donald Cook
497-1086

District #2
Henry Mann
497-2992

District #3
John Gloskowski
497-3999

District #4
Demetric Jackson
497-2078

Mayor
Truett George
497-4741

PERMIT NUMBER

Installer

Bruce Goodson License # 74-000702

Address of home being installed

3700001 Ave
St Albans LA 30238

Manufacturer

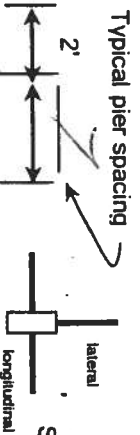
Pine Length x width 14x20

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

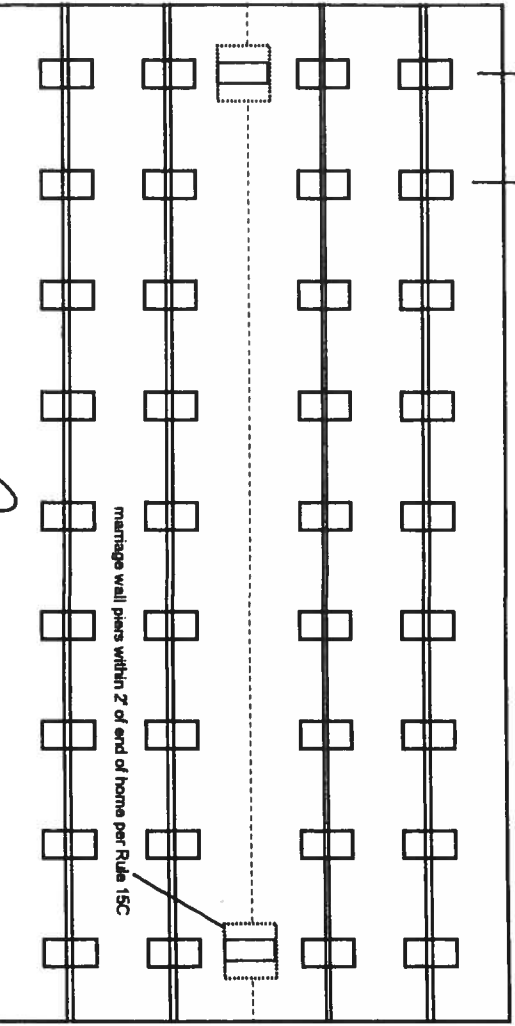
I understand Lateral Arm Systems cannot be used on any home (new or used), where the sidewall ties exceed 5 ft 4 in.

Installer's initials

BE



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



23x31 ABS pads 8' oc
4x4 spdy anchors 5 ft oc
14x14 heavy anchoring
ABS Drive Plate

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 # 263476

Triple/Quad ☐ Serial # 2386

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

23x31

Perimeter pier pad size

4/4

Other pier pad sizes (required by the mfg.)

4/4

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening Pier pad size

4/4

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Oliver Tool
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver Tool

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall
Number 38
4/4
4/4

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

ANCHORS

Pad Size	Sq Ft
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

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1000 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 275 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.

DB Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. _____

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 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 girth, 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Type gasket

Pg. _____

Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. _____
Siding on units is installed to manufacturer's specifications. Yes
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

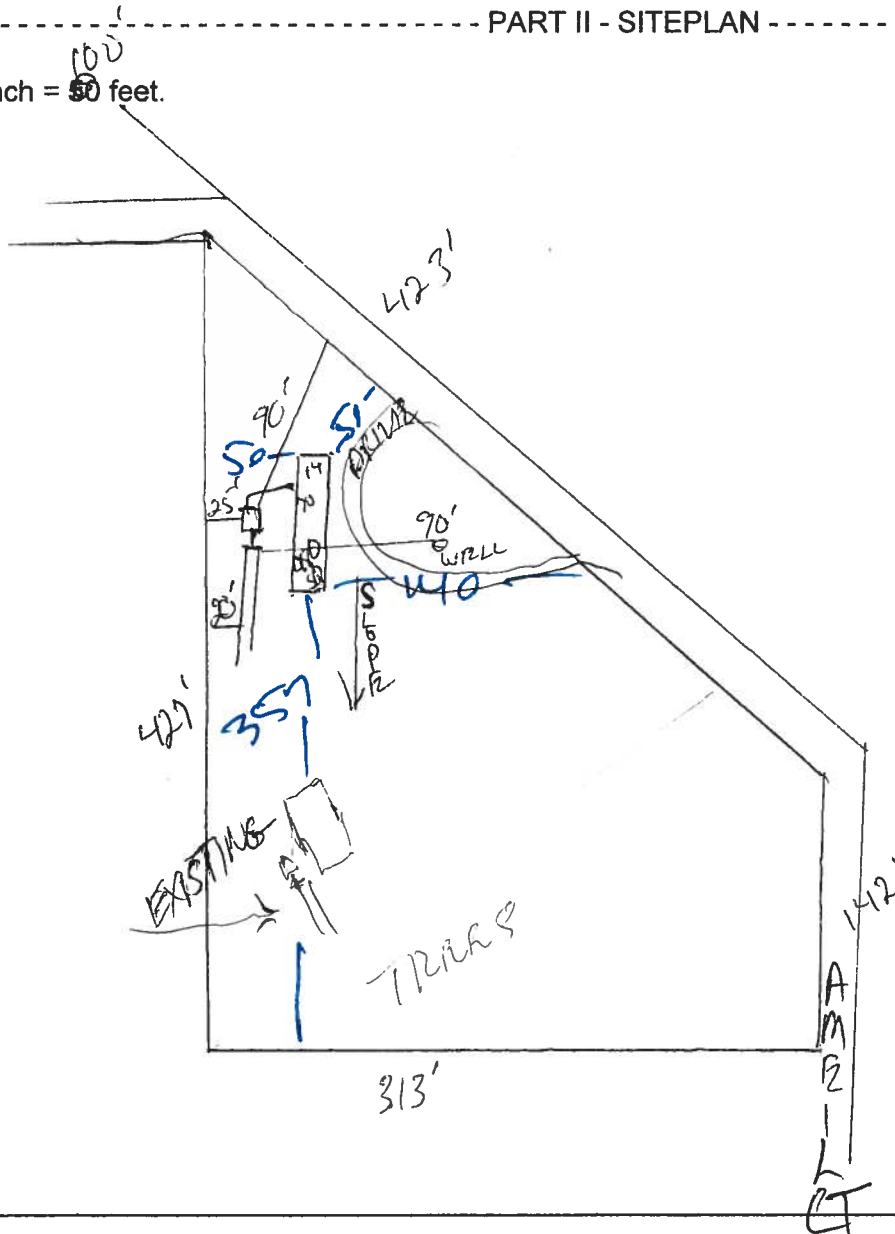
Installer Signature Alvin B. Jones Date 4/24/08

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

Permit Application Number 016-0449E

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

Scale: 1 inch = ¹⁰⁰~~50~~ feet.



Notes: _____

Site Plan submitted by: Rock D F O

MASTER CONTRACTOR

Plan Approved ☒ Not Approved ☐

Date 5-11-06

By S. Madely - ESII

Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

RONNIE BRANNON
COLUMBIA COUNTY TAX COLLECTOR

Individual Tax Certificate 2005 114720.000
NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

ACCOUNT NUMBER	ESCROW CD	ASSESSED VALUE	EXEMPTIONS	TAXABLE VALUE	MILLAGE CODE
2004 1 001		62.143		69.143	004

Prior Years Taxes Due

SHARDS CLYDE W
POCA L BRYANT R
LEAHOMIA PRICE
P O BOX 14
FT WHITE FL

32038

Holder 387
33-6S-16 9000/0200 2.02 Acres
BEG SE COR OF NW1/4 OF NW1/4
RUN N 142.22 FT, NW 423.74 FT,
S 427.06 FT, E 313.73 FT TO
TO POB. (AKA PARCEL 1)
See Additional Legal on Tax Roll

PAY IN U.S. FUNDS TO RONNIE BRANNON TAX COLLECTOR • 135 NE HERNANDO AVE. — SUITE 125, LAKE CITY, FL 32055-4006

2004	2004	2004	2004	2004	2004
1,335.22	1,335.22	1,335.22	1,335.22	1,335.22	1,335.22
1,335.22	1,335.22	1,335.22	1,335.22	1,335.22	1,335.22
1,335.22	1,335.22	1,335.22	1,335.22	1,335.22	1,335.22

0000000000 0000139861.0000001147200000 0001 9

LETTER OF AUTHORIZATION

Date: 4/26/06

Columbia County Building Department
P.O. Box 1529
Lake City, FL 32056

I Bruce Gordon, License No. TH-000002 do hereby
Authorize Robert or Irene Taylor to pull and sign permits on my
behalf.

Sincerely,

Bruce Gordon

Sworn to and subscribed before me this 26 day of April, 2006

Notary Public: Susan N. Villegas

My commission expires: 12/15/07

Personally Known ✓

Produced Valid Identification: _____



Susan Nettles Villegas
My Commission DD267694
Expires December 15, 2007

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 5.8.06 BY GF IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____
 OWNERS NAME Robert & Ilene Taylor PHONE 853-5105 CELL 497-4431
 ADDRESS 1193 SE Adams High Spring, FL
 MOBILE HOME PARK _____ SUBDIVISION _____
 DRIVING DIRECTIONS TO MOBILE HOME 4415, past Oleno, TL Adams,
TL Jefferson Glen, 2nd lot on left.

MOBILE HOME INSTALLER Bruce Goodson PHONE 623-4308 CELL _____

MOBILE HOME INFORMATION

MAKE Pine YEAR 1983 SIZE 14 x 70 COLOR _____
 SERIAL No. 2386
 WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INTERIOR:

INSPECTION STANDARDS

(P or F) - P= PASS F= FAILED

/ SMOKE DETECTOR () OPERATIONAL () MISSING
/ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
/ DOORS () OPERABLE () DAMAGED
/ WALLS () SOLID () STRUCTURALLY UNSOUND
/ WINDOWS () OPERABLE () INOPERABLE
/ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
/ CEILING () SOLID () HOLES () LEAKS APPARENT
/ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

/ WALLS/SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
/ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
 _____ ROOF () APPEARS SOLID () DAMAGED

STATUS:

APPROVED / WITH CONDITIONS: _____
 NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Day RA ID NUMBER 306 DATE 5-15-06

May 31, 2006

To Whom It May Concern:

I, Rosa Lee Bryant, give permission for Irene and Robert Taylor to set their mobile home on my landing Ft. White, Florida.

ROSALLEE BRYANT
Rosa Lee Bryant

County of Suwannee
State of Florida

Rosa Lee Bryant, personally known, appeared before me this 31st day of May, 2006.

Mary R. Roberts
Notary



MARY R. ROBERTS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD284000
EXPIRES 02/01/2008
BONDED THRU 1-888-NOTARY1