Parcel:

26-6S-17-09777-001

Owner & Property Info

Result: 1 of 1

PONDS CHRISTOPHER

Owner

3879 NW 23RD CIR

BELL, FL 32619

Site

Description* W1/2 OF NW1/4 OF NE1/4. 1130-2669, 1334-448,

20 AC

S/T/R 26-6S-17

Use Code** TIMBERLAND (005600) Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	Brent Strickland	PHONE 386-365-7043

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Christopher Ponds

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> 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 Glenn Whittington	Signature
	License #: EC 13002957	Phone #: 386-972-1700
	Qualifier Form	Attached X
MECHANICAL/	Print Name Michael Boland	Signature
A/C	License #: CAC 1817716	Phone #:386-972-1700
	Qualifier Form	Attached

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.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

1. Come Whitington	(license holder name), licensed qualifier				
for Whitmaten ELREKK S	(company name), do certify that				
the below referenced person(s) listed on this form holder, or is/are employed by me directly or throu officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and				
Printed Name of Person Authorized	Signature of Authorized Person				
1. UNESUS	1				
3.	3.				
4.	4.				
5.	5.				
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer agents, employee(s), or					
officer(s), you must notify this department in writ authorization form, which will supersede all previunauthorized persons to use your name and/or li	ious lists. Failure to do so may allow				
Licensed Qualifiers Signature (Notarized)	EC 1300 2957 3/2/16 License Number Date				
NOTARY INFORMATION: STATE OF: Country OF: Columbia					
personally appeared before me and is known by	me or has produced identification this day of, 20				
LICE POSHOP NOTARY'S SIGNATURE	Seal/Starke) Y R BISHOP Notary Public - State of Florida Commission # FF 243986				
	My Comm. Expires Jun 24 2010				



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFI	ER AUTHORIZATION
1. My hARI A DOLAND	(license holder name), licensed qualifier
for ACIE A/L OF OCA/A	(company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ough an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said discontrol and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DAM EAR	1698
2. Kally Bishop	2. Kelly Bishop
3. Kocky Ford	3. Jah, 1) - of
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complex Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted.	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and cons committed by him/her, his/her agents, assibility for compliance with all statutes, codes
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or l	ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	
STATE OF COUNTY OF	maia
The above license holder, whose name is \(\sum_{\text{O}} \) personally appeared before me and is known by (type of I.D.) on	me or has produced identification this day of 1000 MOV, 20 15
NOTARY'S SIGNATURE	- (Seal/Stamp)



		auriage well plats within 2' of end of home policiule 15C			Typical pier spacing lateral Show locations of Longitudinal and Lateral Systems longitudinal (use dark lines to show these locations)	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 carnot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. Installer's initials	Installer Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043 Address of home being installed LAKKOVA FL 33034 Manufacturer LIVEOAC Length x width 80x32
within 2' of end of hornespaced at 5" 4" oc Cornespaced at 5" at 5" oc Cornespaced at 5" oc Corn	Opening Pier pad size 4 ft 5 ft FRAME TIES	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 pac sizes below. List all marriage wall openings greater than 4 foot and their pier pac sizes below. ANCHORS	16 × 18 18.5 × 18.5 18.5 × 22.5 17 × 22 13 1/4 × 26 1/4	Jing table. 8:	ize (256) 1/2" (342) (400) (484)* (576)* (6 qin) (256) 1/2" (342) (400) (484)* (576)* (6 qin) (476)* (476)	8	lied to the Mai

is accurate and true based on the	PIRAMINA
	Electrical Connect electrical conductors between multi-wide units, but not to the gatigpower source. This includes the bonding wire between multi-wide units. Pg.
Range downflow vent installed outside of skirling. Yes N/A C Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Cother:	Date Tested 7-13-2020
snoe	Installer Name
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	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
Type gasket FXXM Installed: Between Floors Yes 1 Between Walls Yes 1 Bottom of ridgebeam Yes 1	TORQUE PROBE TEST The results of the torque probe test is
a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	×1000 ×1500 ×1500
Gesket tweetherprogram 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	3. Using 500 lb. increments, take the lowest reading and round down to that increment.
Type Fastener: Length:	POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations. 2. Take the reading at the depth of the footer.
Fastening multi wide units Type Fastener: 1443 Length: 5	XIS
Debris and organic material removed	The pocket penetrometer tests are rounded down to 500 psf or check here to declare 1000 lb. soil without testing.
Site Preparation	DOCKET DENETBOMETED TEST

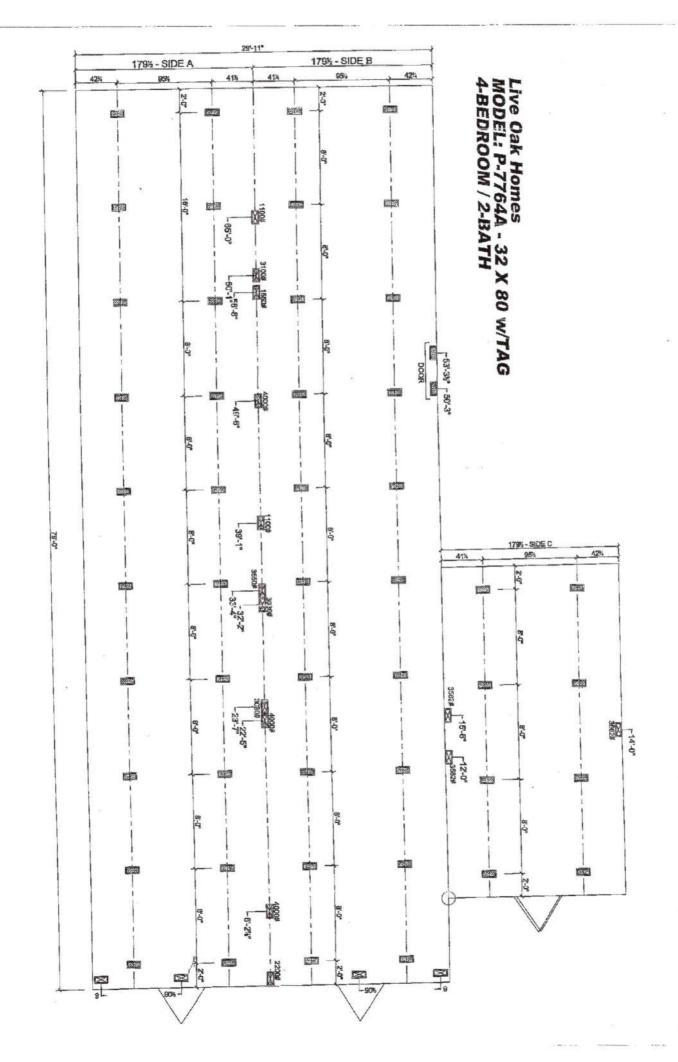
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.

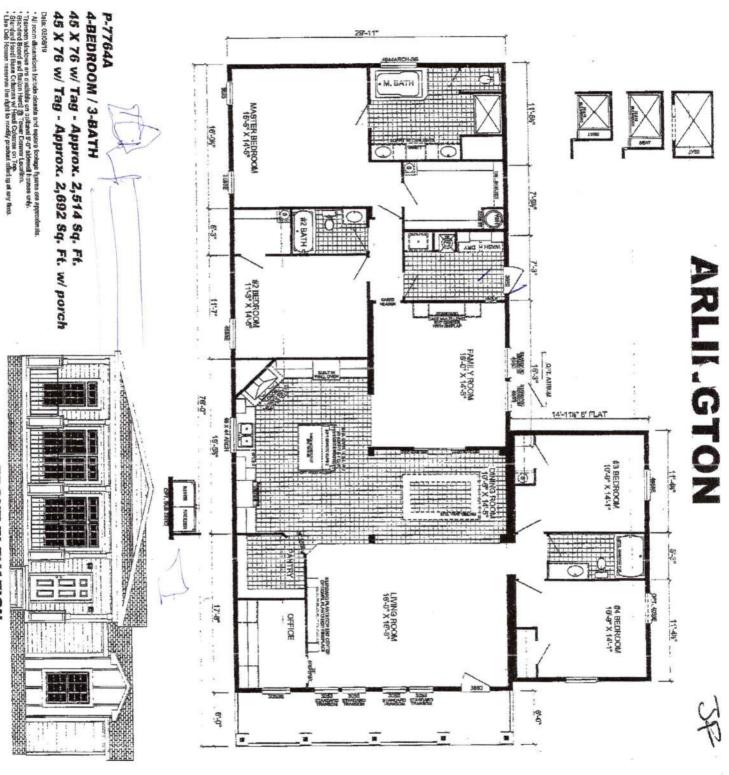
Installer Signature

WWW. Date 7-15-202D

manufacturer's installation instructions and or Rule 15C-1 & 2

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





FRONT ELEVATION

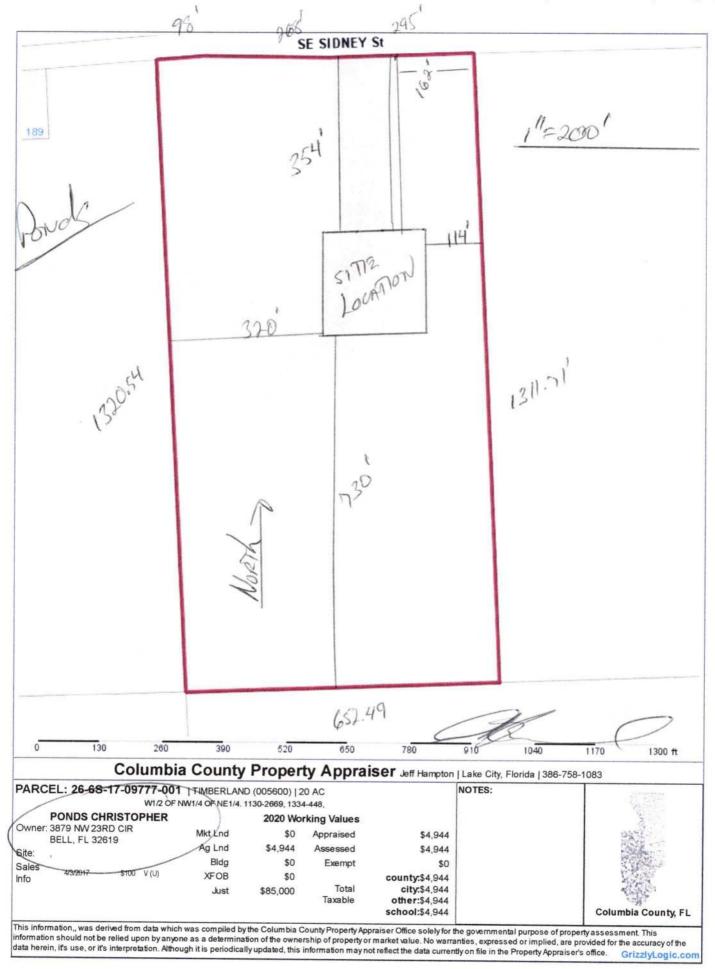
1

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

<u> </u>	Permit Application N	Number
Provide		. 1
	PART II - SITEPLAN	210
Scale: 1 inch = 40 feet.		701
210	13 13 13 13 13 13 13 13 13 13 13 13 13 1	55 BRIVE SU 58 58
Notes:		
	20 ACIRS SEE ATTACHE	
- V)	The state of the s	4
Site Plan submitted by:	2	CONTRACTOR
Plan Approved	Not Approved	Date
Ву		County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

- (O) 386-758-3409
- (F) 386-758-3410
- (C) 386-623-3151

7/14/2020

To: Columbia Co	ounty Building Departme	nt
Description of well to be Located at Address:	installed for Customer:	Christophe Ponds
1 hp 15 GPM Submersib flow prevention, With SF		86 gallon captive tank and back
Bruc Park	_	
Sincerely		
Bruce Park		
President		