

DATE 06/11/2010

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028650

APPLICANT WENDY GRENNELL PHONE 288-2428
ADDRESS 3104 SW OLD WIRE RD FT. WHITE FL 32038
OWNER STEVE ROGERS PHONE 454-8751
ADDRESS 3283 SW CR 778 FT. WHITE FL 32038
CONTRACTOR WENDELL CREWS PHONE 352 351-6100
LOCATION OF PROPERTY 47S, TR ON US 27, TL CR 778, 4/10 MILES ON LEFT

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 A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 12-7S-16-04188-002 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 10.00

IH0000629
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 10-282 BK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, MEETS DENISITY REQUIREMENTS

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 \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 375.00
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.

COLUMBIA COUNTY FLORIDA

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 12-7S-16-04188-002

Building permit No. 000028650

Permit Holder WENDELL CREWS

Owner of Building STEVE ROGERS

Location: 3283 SW CR 778, FT. WHITE, 32038

Date: 08/02/2010

Steve Rogers

Building Inspector



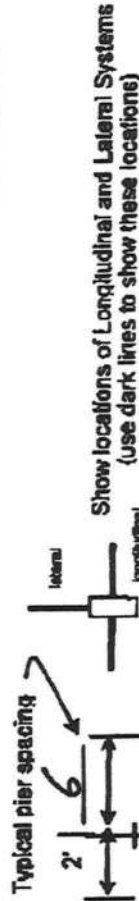
POST IN A CONSPICUOUS PLACE
(Business Places Only)

spoke to Wendy
6/8/10

New Home	☒	Used Home	☐	Year	2010
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 #	1496		
Triple/Quad	☐	Serial #	73D		

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

PIER SPACING TABLE FOR USED HOMES



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

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)	28" x 28" (676)
1000 nsf	3'		4'	5'	6'	7'	8'
1500 nsf	4' 6"		6'	7'	8'	8'	8'
2000 nsf	6'		8'	8'	8'	8'	8'
2500 nsf	7' 6"		8'	8'	8'	8'	8'
3000 nsf	8'		8'	8'	8'	8'	8'
3500 nsf	8'		8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 price spacing table.

PIER PAD SIZES

beam pier pad size 25x31

Perimeter pier pad size

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 and sizes below.

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	448
	24 x 24	576
	26 x 26	676

ANCHORS

4n ✓ 5n

FRAME TIES

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

OTHER TIES

Sidewall	Number	5406
Longitudinal		
Marriage wall		
Shearwall		

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer 06200 11010

3867551031

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May 26 10 11:39a

PERMIT NUMBER

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

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 Wendell Crews

Date Tested 5-28-10

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. 35

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 39

Site Preparation

Debris and organic material removed ☒
Water drainage: Natural ☒ Swale ☒ Pad ☒ Other ☒

Fastening multi wide units

Floor: Type Fastener: Leg Length: 3 1/2 x 3" Spacing: 16"
Walls: Type Fastener: Leg Length: 3 1/2 x 4" Spacing: 16"
Roof: Type Fastener: Leg Length: 3 1/2 x 3" 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, 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 WC

Type gasket Leg

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 ☒ Pg. 13
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 ☒
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 Wendell Crews Date 5-28-10

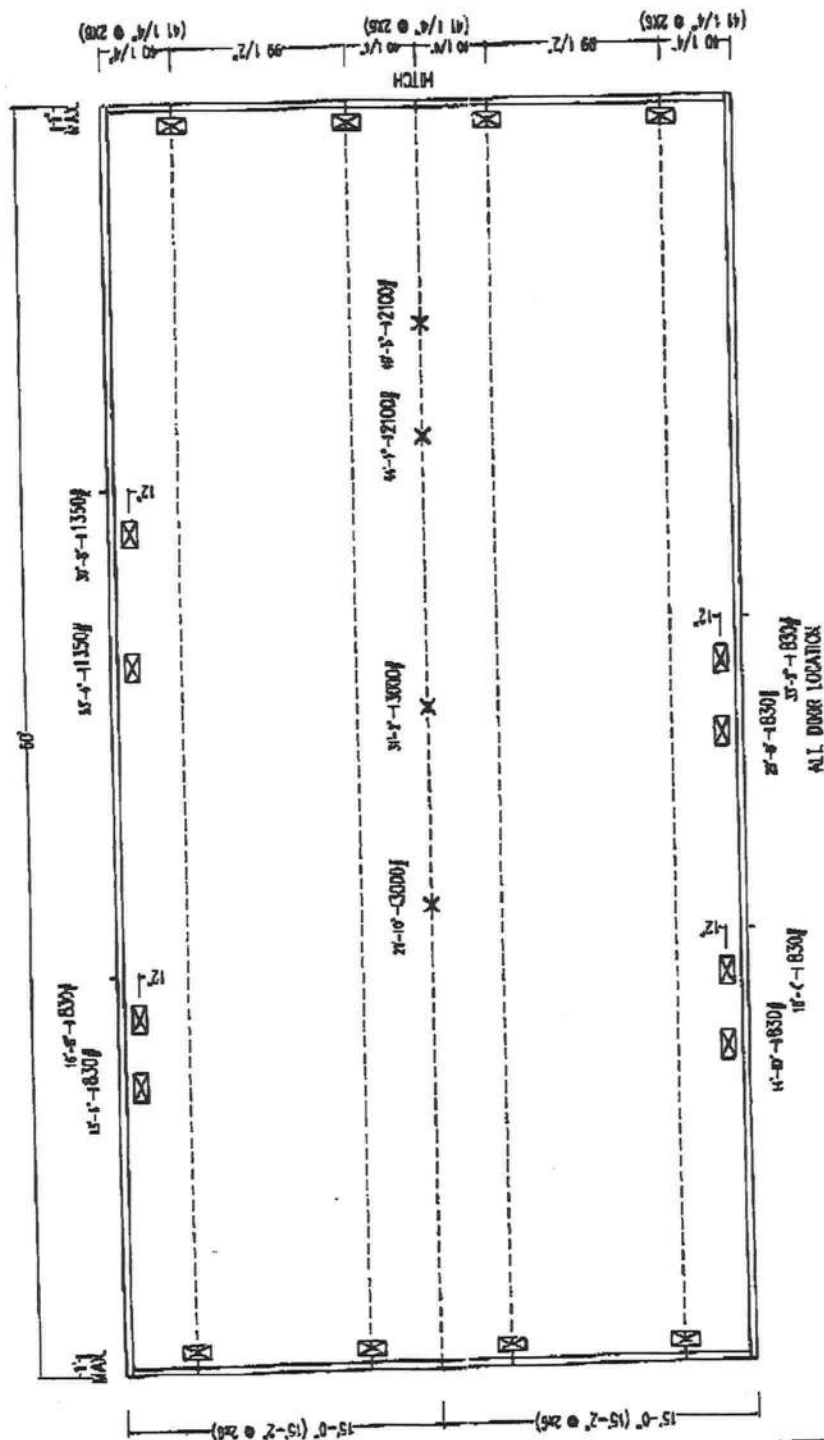
TOTAL P.01

April

P.01/01

STANDARD INDEX

PIER POINT LAYOUT



FLORIDA ONLY

FLORIDA ONLY
 2000 POSTALWAY / BOX 10000 / MIAMI, FL 33101-0000

DESIGNED FOR 20 PSI ROOF ZONE

DESIGNED FOR 20 PSE-RUGG ZIRIL

SIDEWALL PIER SUPPORTS: SEE INSTALLATION MATERIAL TABLE 5, FIG. 9 FOR SPACING AND LOAD REQUIREMENTS. SEE ABOVE WALL END OF ME STD. PATIO DOORS OR 48" OR LARGER OPENINGS.

X COLUMN SUPPORTS: SEE ABOVE DIAGRAM FOR LOCATIONS & LOAD REQUIREMENTS @ 20M ROOF ZONE.
SEE ABOVE DIAGRAM FOR LOCATIONS & LOAD REQUIREMENTS @ 20M ROOF ZONE.

SEE TABLE 10 OF INSTALLATION MANUAL FOR FOOTING SIZES.

DIVISIONS		SKOTSLAND		BOX LENGTH		DESCRIPTION	
111	343	552					
112	344	553					
115	345	571					
126	355	598					
131	526	592					
145	591						
353 X	555						
171	598						
181	595						
				60'-0"		6092-33M-28-CATH	

494-CT

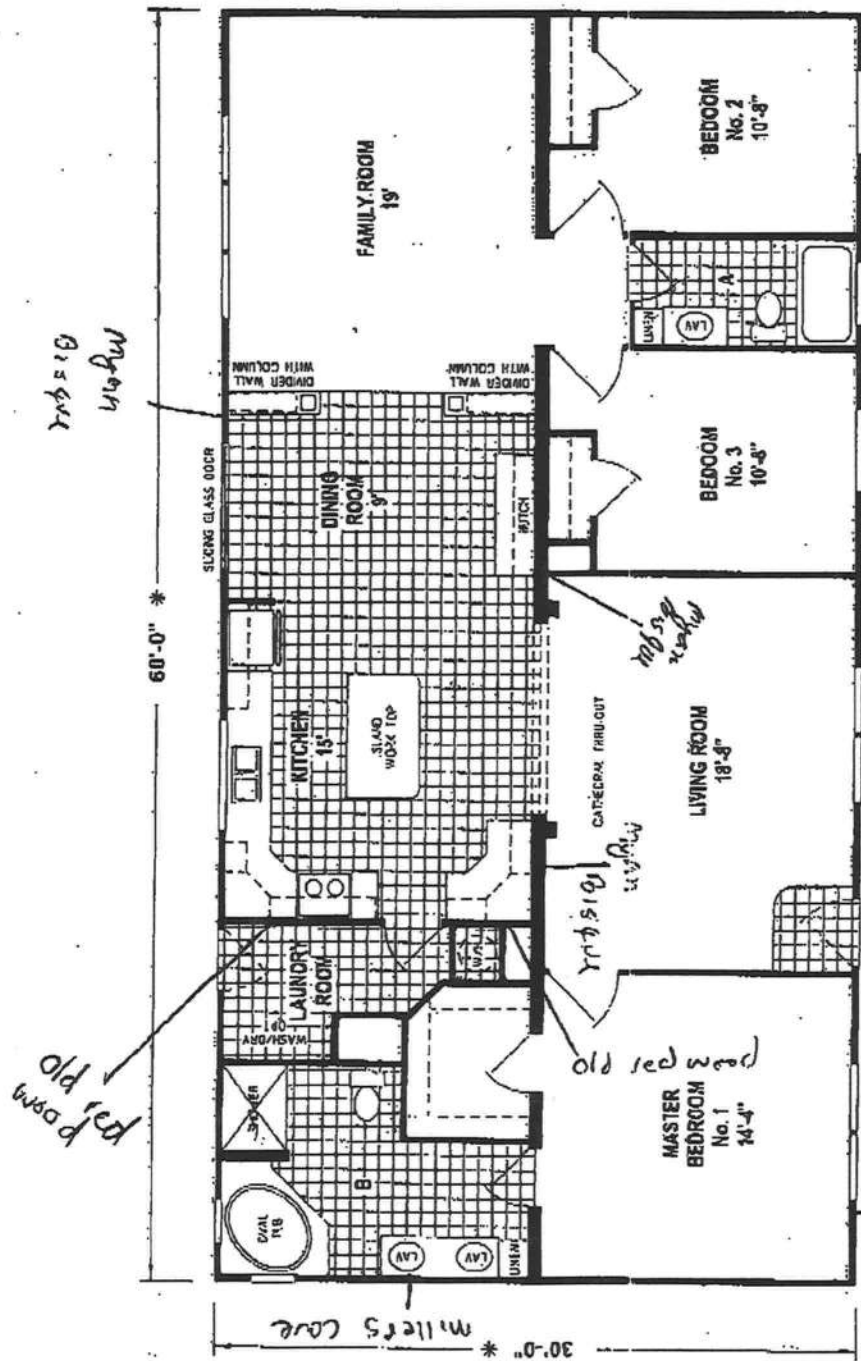
MAY-12-2010 17:05

DWM INC. 22
194E 9/25/10

01/02/15 20:05

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התאריך: 15.05.2019



494CT6032 (1,800 SQ. FT.) 3BEDROOM - 2BATHS - CATHEDRAL THRU-OUT

[illegible]



Installation Instructions for ABS Pads

For use on all Mobile and Manufactured Homes, including HUD approved Homes and Modular Housing
patents 5505500 and other patents pending

GENERAL INSTRUCTIONS:

- All pads are to be installed flat side down, ribbed side up.
- The ground under the pads should be leveled as smooth as possible with all vegetation removed. Pads to be placed on fully compacted or undisturbed soil at or below the frost-line, or per local jurisdiction.
- Pier & pad spacing will be determined by the manufacturer's written set-up instructions or any local or state codes.
- The open cells between the ribbing on the upper side of the pads may be filled with soil or sand after installation to prevent any accumulation of stagnant water in the pads.
- A pocket penetrometer may be used to determine the actual soil bearing value. If soil-bearing equipment is not available, use an assumed soil value of 1000 lbs. / square foot.
- All pad sizes shown are nominal dimensions and may vary up to 1/8".
- The maximum deflection in a single pad is 5/8" measured from the highest point to the lowest point of the top face. (NOTE: Actual test results were less than 5/8")
- In frost areas, a 6" deep confined gravel base installed in well drained, non-frost susceptible soil is recommended.
- Pad loads are the same when using single stack or double stack blocks.
- The maximum load at any intermediate soil value may be determined as the average of the next lower and next higher soil value given in the table below.
- Any configuration (see reverse side) may be used to replace a home manufacturer's recommended concrete or wood base pad.
- If the home manufacturer shows soil densities greater than 3000 lb. when using ABS pads, do not exceed 3000 lb. soil pier spacing.

Pad Size	ID No.	Pad Area	1000 PSF Soil	2000 PSF Soil	3000 PSF Soil
OVAL 16" x 10.5"	1055-23	288 sq. in.	2000 lbs.	4000 lbs.	6000 lbs.
OVAL 17" x 22"	1055-16	360 sq. in.	2500 lbs.	5000 lbs.	7500 lbs.
OVAL 17.5" x 22.5"	1055-21	384 sq. in.	2667 lbs.	5334 lbs.	8000 lbs. *
OVAL 17.5" x 25.5"	1053-17	432 sq. in.	3000 lbs.	6000 lbs.	9000 lbs. *
OVAL 21" x 29"	1053-22	576 sq. in.	4000 lbs.	8000 lbs. *	12000 lbs. *
OVAL 23.25" x 31.25"	1055-20	675 sq. in.	4694 lbs.	9388 lbs. *	14082 lbs. *

Pad Size	ID No.	Pad Area	1000 PSF Soil	2000 PSF Soil	3000 PSF Soil
16" x 16"	1055-14	256 sq. in.	1780 lbs.	3560 lbs.	5333 lbs.
18.5" x 18.5"	1055-9	342 sq. in.	2373 lbs.	4750 lbs.	7100 lbs. *
20" x 20"	1055-7	400 sq. in.	2750 lbs.	5500 lbs.	8250 lbs. *
24" x 24"	1055-13	576 sq. in.	4000 lbs.	8000 lbs. *	12000 lbs. *

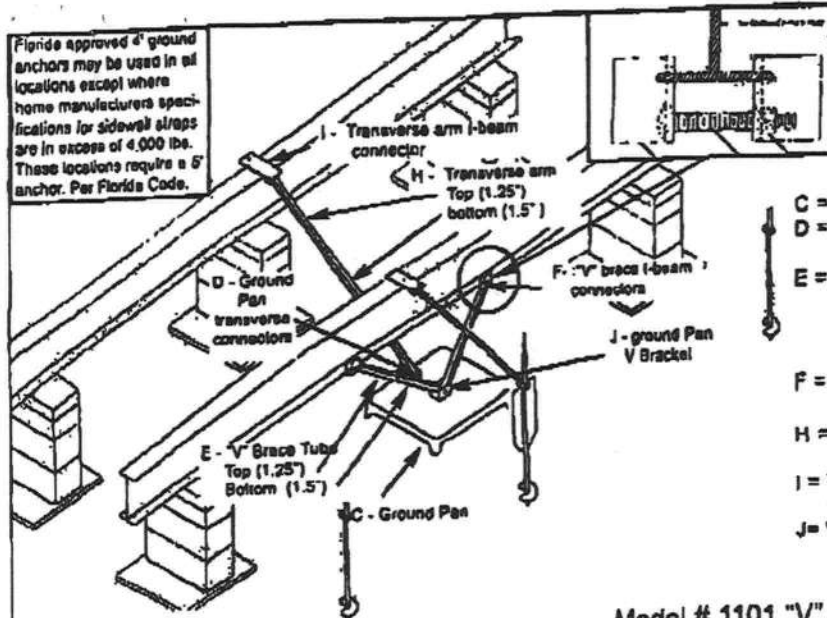
- * Concrete blocks are required to be double blocked.
13. ALABAMA ONLY: The 16" x 16" ID# 1055-14, 16" x 18.5" ID# 1055-23, 17" x 22" ID# 1055-16, 17.5" x 22.5" ID# 1055-21, 17.5" x 25.5" ID# 1053-17 are the only pads approved in the state of Alabama, and must not have more than 5/8" deflection. See chart below for details on correct installation in Alabama.
14. TEXAS ONLY: 17.5" x 22.5" ID# 1055-21 and 23.25" x 31.25" ID# 1055-20 may not be installed in the State of Texas.
15. Steel Piers: All pads are tested with steel piers on 1000 PSF soil density unless otherwise noted. (#16)
16. Available pads tested on 2000 PSF soil density are: ID#s 1055-14, 1055-9, 1055-7, 1055-13, 1055-23, 1055-16, 1055-21, 1053-17.

Example: 16' x 80' section

PAD SIZE	1000 Lb Psf	2000 Lb Psf
16" x 16" Pad	2' 9"	5' 6"
16" x 18.5" Oval Pad	3' 0"	6' 0"
17" x 22" Oval Pad	3' 9"	7' 6"
17.5" x 22.5" Oval Pad	4' 0"	8' 0"
17.5" x 25.5" Oval Pad	4' 5"	8' 0"
21" x 29" Oval Pad	6' 0"	8' 0"



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.

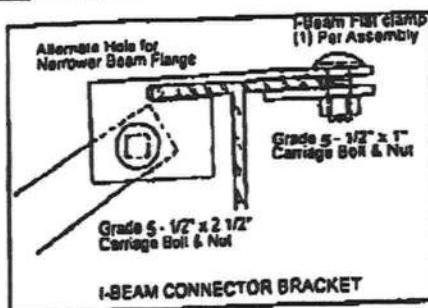


- C = GROUND PAN
- D = GROUND PAN CONNECTOR
- U BRACKETS TRANSVERSE
- E = TELESOPING V BRACE TUBE ASSEMBLY W/ 1.5 BOT. TOM TUBE AND 1.25 TUBE INSERT
- F = "V" BRACE I-BEAM CONNECTORS ASSEMBLY
- H = TELESOPING TRANSVERSE ARM ASSEMBLY
- I = TRANSVERSE ARM I-BEAM CONNECTOR
- J = V PAN BRACKET

Model # 1101 "V"

Longitude dry concrete bracket part # 1101 D-CPCA

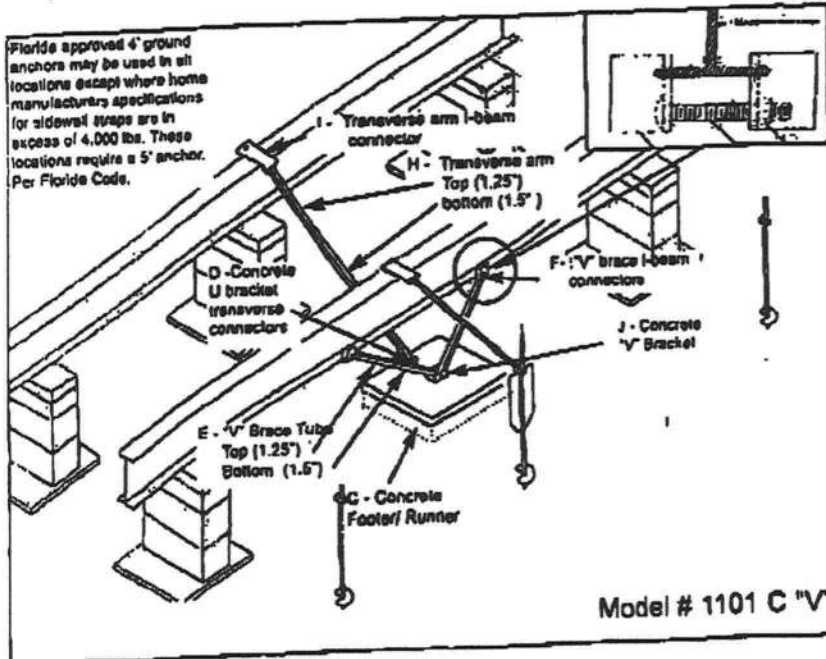
Wet bracket part # 1101 W-CPCA not shown



Model 1101 CVB

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"

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

Telephone: 831-788-4555
Fax: 831-796-8811
www.olivertechnologies.com

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INSTALLATION USING CONCRETE RUNNER / FOOTER

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

- 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.

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-GPCA (wetset), simply install the bracket in runner/footer OR When installing in cured concrete use Part # 101-D-GPCA (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 end 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.

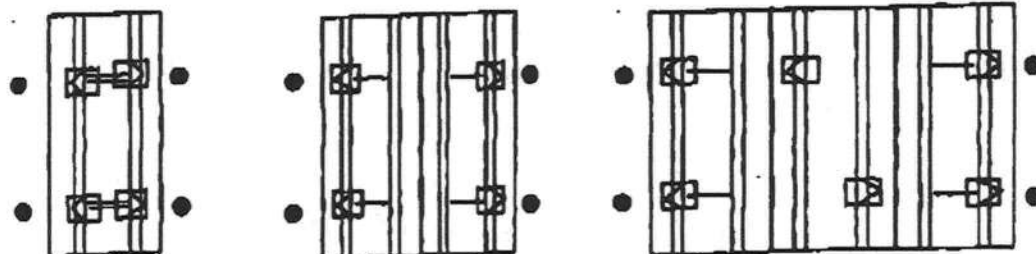
19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

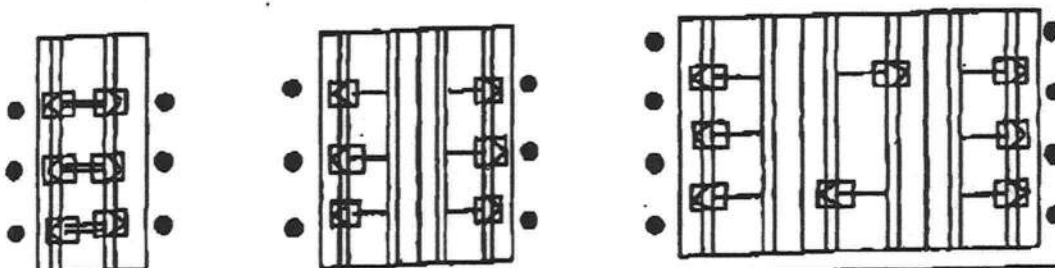
- LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pen or concrete)
- ☐ = LOCATION OF LONGITUDINAL BRACING ONLY
- ☐ = TRANSVERSE & LONGITUDINAL LOCATIONS

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

ALL WIDTHS; AND LENGTHS UP TO 52'



ALL WIDTHS; AND LENGTHS OVER 52' TO 80'



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 to 80'. One stabilizer plate and frame tie required at each lateral bracing system.

3-08 4

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

ENGINEER'S STAMP

ENGINEER'S 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 16" 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.
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Telephone: 931-796-4555
Fax: 931-796-8811
www.olivertechnologies.com



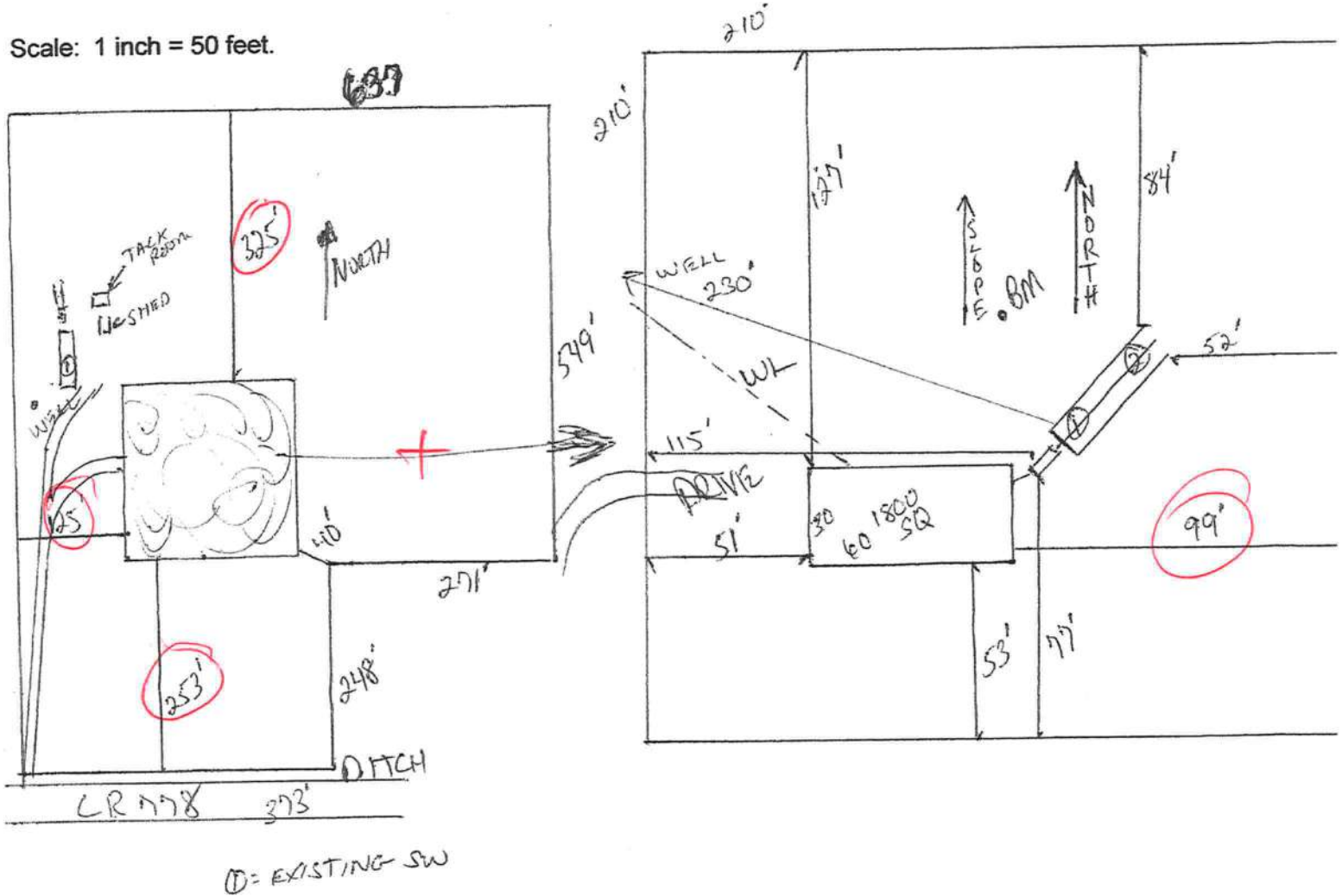
284

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

Permit Application Number _____

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

Scale: 1 inch = 50 feet.



Notes: 1 of 10 Acres

Site Plan submitted by: Red 7-5

Plan Approved _____

Not Approved _____

By _____

MASTER CONTRACTOR

Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

QUIT CLAIM DEED

This Indenture made this 30 day of **OCTOBER, 2002**, BETWEEN **JACKIE ALFORD**, GRANTOR*, whose address is 448 SW OLD NIBLACK AVE., FT. WHITE, FL 32038, and **STEVE A. ROGERS AND JEAN D. ROGERS, HUSBAND AND WIFE**, as GRANTEE*, whose address is 6314 NW 30TH STREET, OKEECHOBEE, FL 34972.

WITNESSETH. That said Grantor, for and in consideration of the sum of **TEN AND 00/100'S (\$10.00) Dollars** and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the grantee and grantee's heirs forever the following described land located in the County of **COLUMBIA**, State of **Florida**, to-wit:

SEE ATTACHED EXHIBIT "A"

GRANTOR WARRANTS THAT SUBJECT PROPERTY DOES NOT REPRESENT HER HOMESTEAD.

THIS DEED REPRESENTS A FAMILY EXCHANGE OF PROPERTIES AND NO MONETARY CONSIDERATION HAS BEEN EXCHANGED IN THIS TRANSACTION.

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereunto belonging or in any wise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the Grantor, either in law or equity, to the only proper use, benefit and behalf of the said Grantee forever.

(*Singular and plural are interchangeable as context requires.)

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal this day and year first above written.

WITNESSES

Jannette S. Boyd Jackie Alford
Jannette S. Boyd JACKIE ALFORD
Leslie Kitchel
Leslie Kitchel

COUNTY OF ALACHUA
STATE OF FLORIDA

I HEREBY CERTIFY that on this 30 day of October, 2002, before me, an officer duly qualified to take acknowledgements, personally appeared: **JACKIE ALFORD**, to me known to be the persons or has produced A DRIVER'S LICENSE as identification and who did (did not) take an oath, described in and who executed the foregoing instrument and acknowledged before me that they executed the same.

Jannette S. Boyd
NOTARY PUBLIC
COMMISSION EXPIRATION:



Jannette S. Boyd
MY COMMISSION & COINSURE EXPIRES
August 7, 2005
PONDIC, (P) PONDIC INSURANCE, INC.

Inst:2002022301 Date:11/08/2002 Time:11:19

Doc Stamp-Deed : 0.70

MCK DC, P. Dewitt Cason, Columbia County B:967 P:191

EXHIBIT "A"

Commence at the Northeast corner of the Southeast $\frac{1}{4}$ of the Southeast $\frac{1}{4}$ of Section 12, Township 7 South, Range 16 East, Columbia County, Florida and run South $02^{\circ} 21' 25''$ East along the East line of said Section 12, 498.08 feet; thence South $86^{\circ} 37' 41''$ West 422.05 feet to the Point of Beginning; thence South $00^{\circ} 36' 12''$ East, 549.75 feet; thence South $87^{\circ} 46' 37''$ West, 271.01 feet; thence South $02^{\circ} 23' 31''$ East, 248.27 feet to the North Right-of-Way line of County Road C-778; thence South $89^{\circ} 21' 44''$ West, along said North Right-of-Way line, 270.07 feet to a Point of Curve; thence Westerly along said curve, concave to the South having a radius of 5769.578 feet and a central angle of $01^{\circ} 01' 33''$, an arc distance of 103.31 feet; thence North $00^{\circ} 36' 12''$ West, 775.51 feet; thence North $86^{\circ} 37' 41''$ East 637.31 feet to the Point of Beginning.

Containing 10.00 acres, more or less.

Columbia County Property Appraiser

DB Last Updated: 5/6/2010

2009 Tax Roll Year

Parcel: 12-7S-16-04188-002

[<< Next Lower Parcel](#)
[Next Higher Parcel >>](#)
[Tax Collector](#)
[Tax Estimator](#)
[Property Card](#)
[Parcel List Generator](#)
[Interactive GIS Map](#)
[Print](#)

Owner & Property Info

Owner's Name	ROGERS STEVE A & JEAN D		
Mailing Address	6314 NW 30TH ST OKEECHOBEE, FL 34972		
Site Address	3283 SW COUNTY ROAD 778		
Use Desc. (code)	IMPROVED A (005000)		
Tax District	3 (County)	Neighborhood	12716
Land Area	10.000 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM NE COR OF SE1/4 OF SE1/4, RUN S 498.08 FT, W 422.05 FT FOR POB, RUN S 549.75 FT, W 271.01 FT, S 248.27 FT TO N R/W CR-778, W ALONG R/W 270.07 FT TO PT OF A CURVE, CONT WLY ALONG R/W 103.31 FT, N 775.51 FT, E 637.31 FT TO POB. ORB 906-1263, 967-188, 967-190		

<< Prev Search Result: 39 of 39



Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (1)	\$13,605.00
Ag Land Value	cnt: (2)	\$1,800.00
Building Value	cnt: (1)	\$18,863.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$34,268.00
Just Value		\$84,409.00
Class Value		\$34,268.00
Assessed Value		\$34,268.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$34,268 Other: \$34,268 Schl: \$34,268	

2010 Working Values

NOTE:
2010 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
10/30/2002	967/190	WD	V	U	01	\$100.00
10/25/2002	967/188	WD	V	U	01	\$100.00
7/13/2000	906/1263	WD	V	Q		\$38,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SFR MANUF (000200)	1993	MOD METAL (25)	858	1058	\$17,046.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

--	--	--	--	--	--	--

Telephone: (386) 758-1125 • Fax: (386) 758-1365 • Email: run_croft@columbiacountyfla.com

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

12-7S-16-04188-002

3283 SW COUNTY ROAD 778, FORT WHITE, FL, 32038

Any questions concerning this information should be referred to the Columbia County
911 Addressing / GIS Department at the address or telephone number above.

**COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED**

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, Wendell Crews, license number TH10000629

state that the installation of the manufactured home for owner

Steve Rogers at

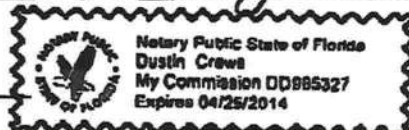
911 Address: 3283 SW CR 778 City Fort White

will be done under my supervision.

Signed: Wendell Crews
Mobile Home Installer

Sworn to and described before me this 28 day of May 20 12

Dustin Crews
Notary public



Dustin Crews
Notary Name

Personally known ☒

DL ID _____



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, Wendell Crews, give this authority for the job address show below
Installer License Holder Name

only, 3283 SW CR 778 Fort White, 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)
Wendy Grannell	Wendy Grannell	☒ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ 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.

Wendell Crews
License Holders Signature (Notarized)

TH0000629
License Number

5-26-10
Date

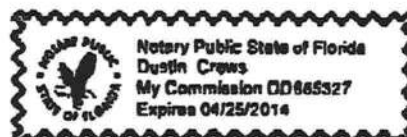
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Marion

The above license holder, whose name is Wendell Crews, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 28 day of May, 2010.

Dustin Crews
NOTARY'S SIGNATURE

(Seal/Stamp)



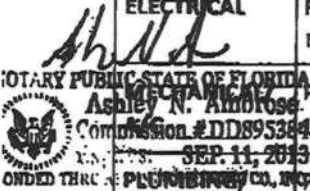
SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1006-02 CONTRACTOR Wendell Crews PHONE _____

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 #: _____
	Print Name <u>David Hall</u> License #: <u>CACO 57424</u>	Signature <u>[Signature]</u> Phone #: <u>386-755-9792</u>
GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
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.

06/10/2010 16:07 3867502160

BUILDING AND ZONING

PAGE 01/01

Jun 07 10 01:57p Wendy Grennell

3867551031

p.1

06/07/2010 08:13 3867523737

CIRCUIT ELECTRIC

p.2

Jun 07 10 08:20a Wendy Grennell

3867551031

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1006-02 CONTRACTOR Wendell Crews PHONE 352-351-6100
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 05-5, 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 433	Print Name: <u>David Christian</u>	Signature: <u>[Signature]</u>
	License #: <u>EC0002840</u>	Phone #: <u>352-351-5488</u>
MECHANICAL/ A/C <u>B</u>	Print Name: <u>David Hall's, Inc.</u>	Signature: <u>[Signature]</u>
	License #: <u>CAC057424</u>	Phone #: <u>352-351-9792</u>
PLUMBING/ GAS	Print Name: <u>Wendell Crews</u>	Signature: <u>[Signature]</u>
	License #: <u>IH0000029</u>	Phone #: <u>352-351-6100</u>
ROOFING	Print Name: _____	Signature: _____ Phone #: _____
SHEET METAL	Print Name: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: _____	Signature: _____ Phone #: _____
SOLAR	Print Name: _____	Signature: _____ Phone #: _____

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. 440.105 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. 440.30 and 440.33, and shall be presented each time the employer applies for a building permit.

Columbia County Building Department Form 008

752-3737

Thanks!
752-3737
Please fax this back to



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

10-0000
967823
PERMIT NO. 101310
DATE PAID: 310.00
FEE PAID: 1242925
RECEIPT #:

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Steve RogersAGENT: Wendy GrennellTELEPHONE: 386-288-2428MAILING ADDRESS: 3104 SW Old Wize Road, Fort White, FL, 32038

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: na BLOCK: na SUB: na PLATTED: _____PROPERTY ID #: 12-7S-16-04188-002 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☒ NPROPERTY SIZE: 10 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☒ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: 3283 SW County Road 778, Fort White, FL, 32038

DIRECTIONS TO PROPERTY: 47 South, TL on US 27, TL on CR 778, property 4/10ths
miles on left. Address on mailbox

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit Type of No. of Building Commercial/Institutional System Design
No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC

1 SF Residential 3 1800

2

3

☒ Floor/Equipment Drains ☒ Other (Specify) _____

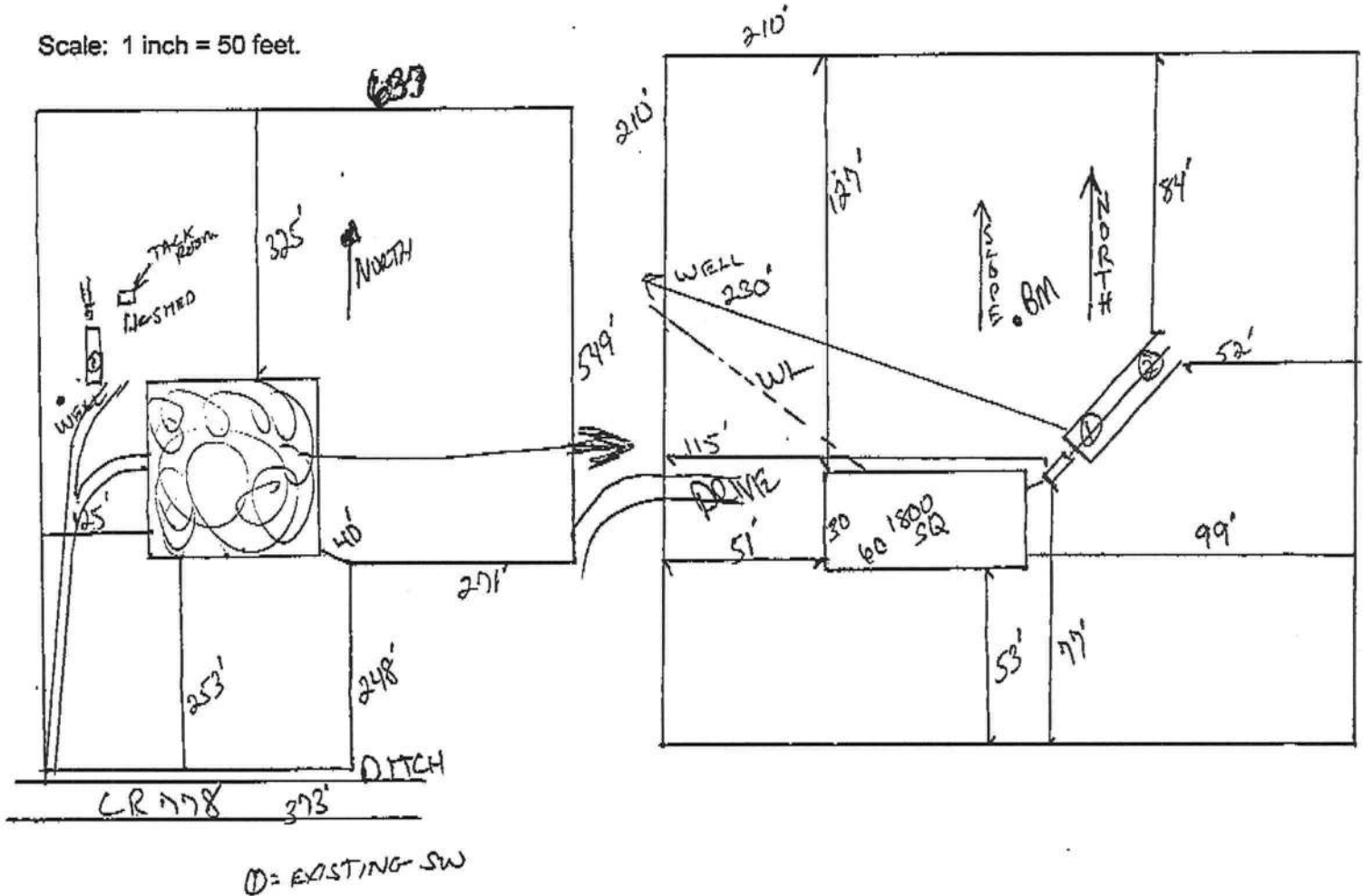
SIGNATURE: Wendy Grennell DATE: 5/19/2010

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

Permit Application Number 10-0282

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

Scale: 1 inch = 50 feet.



Notes:

1 of 10 Acres

Site Plan submitted by: Paul D. F. D.

Plan Approved X

Not Approved _____

MASTER CONTRACTOR

Date 11/11/10

By: [Signature]

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT