Seral#

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

_	
	For Office Use Only (Revised 7-1-15) Zoning Official Building Official Building Official
	AP# 44550 Date Received 218 By M6 Permit # 39341
	Flood Zone Development Permit Zoning Land Use Plan Map Category
	Comments
	FEMA Map# Elevation Finished Floor River In Floodway
1	Recorded Deed on Property Appraiser PO Site Plan EH#_18-05-28
\	Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
	DOT Approval Parent Parcel # STUP-MH 911 App
	□ Ellisville Water Sys Assessment October □ □ Out County □ In County □ Sub VF Form
Pr	operty ID # 35-55:16:03752:417 Subdivision Southern Meadows Lot#17 New Mobile Home MH Size 32x60 Year 2019
	Applicant Jonathan + Junifer Talley Phone # (386) 623.9588 (386) 965.5993
-	
•	Address 1117 SW Baron Gln Ft. White Fl 32038
•	Name of Property Owner Bullard - Denune Investment Phone# (386) 755.4050
•	911 Address 1117 SW Baron Gln Ft. White F1 32038
•	Circle the correct power company - <u>FL Power & Light</u> - <u>Clay Electric</u>
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
•	Name of Owner of Mobile Home Jonathan Talley Phone # (386) 623.9588 Address 1117 Sw Baron Gln Ft. White Fl. 32038
	Relationship to Property Owner
•	Current Number of Dwellings on Propertynow
•	Lot Size 327' x 635.66 Total Acreage 5 Ac 4.77 Ac
•	Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road 1979) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
•	Is this Mobile Home Replacing an Existing Mobile Home^O
•	Driving Directions to the Property From intersection of Hwy 47 & I.75. Travel 8.5
	miles on Hwy 47 south. Turn left anto SW Baron Gln. Travel I mik East on
	Baron Gln. Property is on the left.
	Name of Licensed Dealer/Installer Stephanic Talley Phone # 386-697-7665
•	Installers Address 1120 Sw Siloam Street Lake City FL 32024
•	License Number IH 1124 852-1 Installation Decal # 49721



Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Profit Corporation

BULLARD-DENUNE INVESTMENT CO

Filing Information

Document Number

P97000052510

FEI/EIN Number

59-3451481

Date Filed

06/13/1997

State

FL

Status

ACTIVE

Principal Address

2753 E US 90

LAKE CITY, FL 32055

Changed: 02/09/2004

Mailing Address

PO BOX 1733

LAKE CITY, FL 32056

Registered Agent Name & Address

BULLARD, AUDREY S

1826 SW SR 47

LAKE CITY, FL 32025

Address Changed: 02/22/2005

Officer/Director Detail

Name & Address

Title PDST

BULLARD, AUDREY S

1826 SW SR 47

LAKE CITY, FL 32025

Title DVP

BULLARD, CHRIS A

1826 SW SR 47

LAKE CITY, FL 32025

Columbia County Property Appraiser 2020 Working Values **Columbia County Property Appraiser** updated: 2/11/2020 Jeff Hampton Parcel: (<> 35-5\$-16-03752-417 >> Aerial Viewer Google Maps Pictometery Sales 2019 2016 2013 2010 🗐 2007 2005 **Owner & Property Info** Result: 1 of 1 **BULLARD-DENUNE INVESTMENT CO.** P O BOX 1733 Owner LAKE CITY, FL 32056 Site LOT 17 SOUTHERN MEADOWS S/D PHASE 3. Description* S/T/R 35-5S-16E 4.77 AC Area VACANT (000000) Tax District Use Code** *The Description above is not to be used as the Legal Description for this parcel in any legal Transaction. "The <u>Use Code</u> 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** 2019 Certified Values 2020 Working Values Mkt Land (1) \$27,000 Mkt Land (1) \$27,000 \$0 Ag Land (0) \$0 Ag Land (0) \$0 Building (0) \$0 Building (0) \$0 XFOB (0) \$0 XFOB (0) Just \$27,000 Just \$27,000 \$0 Class \$0 Class Appraised \$27,000 Appraised \$27,000 SOH Cap [?] \$0 SOH Cap [?] \$0 Assessed \$27,000 Assessed \$27,000 Exempt \$0 Exempt \$0 county:\$27,000 county:\$27,000 city:\$27,000 Total city:\$27,000 Total other:\$27,000 Taxable other:\$27,000 Taxable school:\$27,000 school:\$27,000

Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/1	Quality (Codes)	RCode
			NONE			
Building Characte	ristics					
Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value

Extra Feat	ures & Out Bu	ildings (Codes)				
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)

NONE

▼ Land Breakd	lown				
Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000000	VAC RES (MKT)	1.000 LT - (4.770 AC)	1.00/1.00 1.00/1.00	\$27,000	\$27,000

Search Result: 1 of 1

Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com

District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips District No. 5 - Tim Murphy



Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:

3/23/2018 10:53:49 AM

Address:

1117 SW BARON Gln

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

03752-417

REMARKS: Address for proposed structure on parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

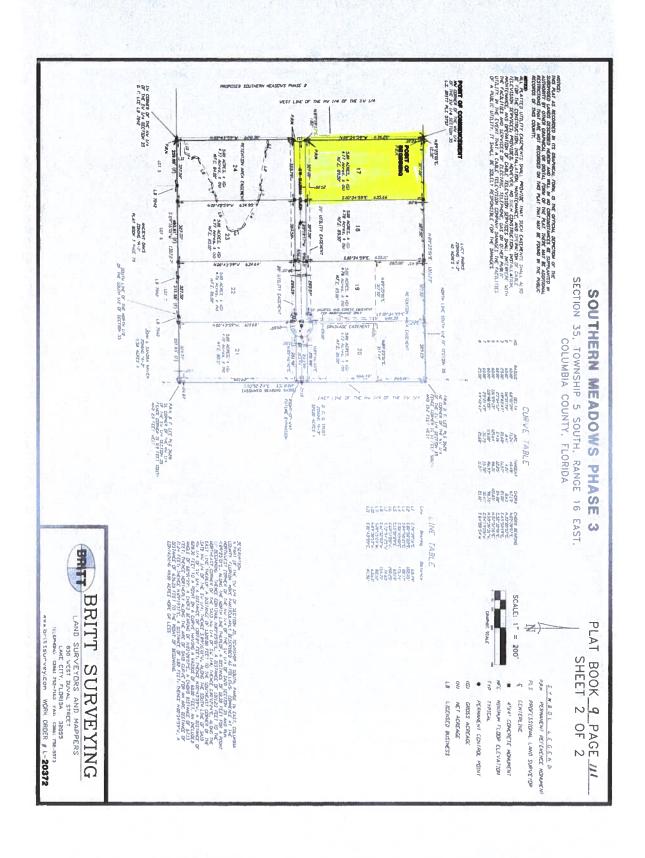
Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125

Email: gis@columbiacountyfla.com







BRITT

SURVEYING

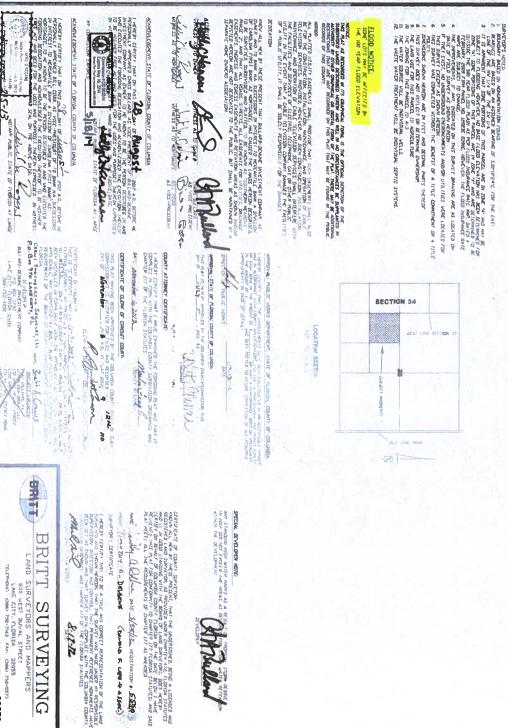
LAND SURVEYDRS AND MAPPERS
930 VEST DUVAL STREET
LAKE CITY, ILDRIDA 32055
TELEPHONE COMM 722-7163 FAX: COMM 732-355

ORDER # L-20372 32055 C306> 75E-5573

SOUTHERN MEADOWS PHASE S

SECTION 34 & 35, TOWNSHIP 5 SOUTH, RANGE 16 COLUMBIA COUNTY, FLORIDA EAST.

> PLAT SHEET 1 OF 2 2 110







Mobile Home Permit Worksheet

Single wide Wind Zone	Fort white FL OWN Hemes me is a single wide fill out o me is a triple or quad wide s ateral Arm Systems cannot be wall ties exceed 5 ft 4 in. Show loc longitudinal (use
Home installed to the Manufacturer's Installation Man	ephanie lalley
Home installed to the Manufacturer's Installation Mar	otephanie lalley License #
Home is installed in accordance with Rule 15-C	
TOTAL TO INSTANCE III GOODI GAILOO WIGHT TOTAL TO O	Address of home III SW Borr Pie
Wind Zone II	THE CASE OF THE PARTY OF THE PA
VVInd Zone II	1
	White TL
×	
2	1022 TOZON Langth & windth
	100% 10% > Length x width
Serial #	
DIED SDACING TARI E EOR LISED	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.
FOOTER 18" x 16" 18 1/2" x 18 20" x 20"	
Size 10 x 10 10 1/2 x 10 20 x 20	
(256) 1/2" (342)	Typical pier spacing /
(sq in) (=35)	\
⊢	lateral
psf 3' 4'	
4500 per	Show looptions of loopituding and lateral systems
יטטטוים אַ ס	Silow locations of coligitudinal and catellar systems
2000 pst 6 8	(use dark lines to show these locations)
7.6" 8.	
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Lheam nier nad size	
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Perimeter pier pad size	7.
_	
(required by the mfg.)	
	1 2 1 2 1 1 2 1 1 2 1 1 2 1
6	
Draw the approximate locations of marriage	
Claw the approximate locations of manuage	
wall openings 4 foot or greater. Use this	
List all marriage wall openings greater than 4 foot	
and their pier pad sizes below.	
2 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
11.7 A1X.74	
TIEDOWN COMPONENTS	
Longitudinal Stabilizing Device (LSD)	
Loughan Capitalia Device (LOD)	
Manufacturer	
Manufacturer	
Walland Cartillian Desired	
Longitudinal Stabilizing Device w/ Lateral Arms	
Founditioning Stabilizing Device MI Fateral Willis	
Manufacturer	
Walluactuici	

:	Application Number:
:	
:	
]	65
	Date
	×

✓ Wind Zone II	Installation Decal #	<u> </u>	Installation D Serial # PIER SPACING TABL
	Decal # 4972	ecal # L	l <u>L</u> D
ne ≡	7	27538	275.78

	iterpolated from Rule 15C-1 pier spacing table	3500 psf	3000 psf	2500 psf	2000 psf	1500 psf	1000 psf	oad Footer 1 aring size bacity (sq in)
PIER PAD SIZES	ule 15C-1	8	æ	7' 6"	<u>ල</u>	4'6"	ω	16" x 16" (256)
SIZES	pier spacing ta	8,	Ø.	œ	8	6	4'	18 1/2" x 18 1/2" (3 4 2)
	호	Н		Н			Н	
3	В	8,	œ	82	82	7'	טַ	20" x 20" (4 00)
POP		ထ္	ထ္	ထ္	ထွ	ထ္	<u>ත</u>	22" x 22" 24" X 24" (484)* (576)*
POPULAR PAD SIZES	- 2	œ	œ	ω	œ	œ	7'	24" X 24" (576)*
SIZES	N N	ထ္	œ	œ	œ	ω	œ	26" x 26" (676)
	11 3							

					W.								
	26 x 26	24 x 24	17 1/2 × 25 1/2	17 3/16 x 25 3/16	20 x 20	13 1/4 x 26 1/4	17 x 22	16 x 22.5	18.5 x 18.5	16 x 18	16 x 16	Pad Size	
J	676	576	446	441	400	348	374	360	342	288	256	Sq In	

ANCHORS

FRAME TIES

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

Sidewall
Longitudinal
Marriage wall
Shearwall OTHER TIES

Mobile Home Permit Worksheet

TORQUE PROBE TEST	× ×	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	Take the reading at the depth of the footer.	1. Test the perimeter of the home at 6 locations.	POCKET PENETROMETER TESTING METHOD	×	The pocket penetrometer tests are rounded down tops or check here to declare 1000 lb. soil (1604) without testing.	POCKET PENETROMETER TEST
	×	/est ment	ooter.	cations.	METHOD	×	sting.	ST

The results of the torque probe test is **AR Hold** 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. in 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 40004b holding capacity Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

tohak 12c10 22

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

4

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

	Application Number:
i	Date
•	Date

Debris and organic material removed Water drainage: Natural Swale Pad Other Fastening multi wide units Floor: Type Fastener: Length: Length: Spacing: Malls: Type Fastener: Length: Length: Spacing: Malls: Type Fastener: Length: Length: Spacing: Type Fastener: Length: Length: Spacing: 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)

a result of a poorly installed or no gasket being installed. I understand a strip 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 of tape will not serve as a gasket

Installer's initials

Type gasket Factor welden

Installed

Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or taped. Yes Weatherproofing Between Walls Yes Bottom of ridgebeam Between Floors (Yes Between Walls (Yes

Miscellaneous

Fireplace chimney installed so as not to allow intrusion of rain water.

Yes

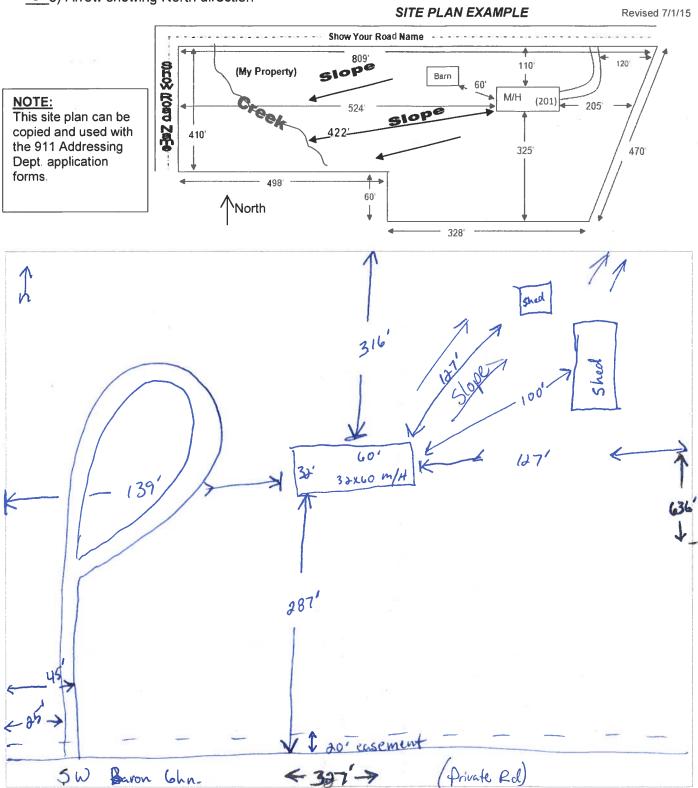
Electrical crossovers protected. Drain lines supported at 4 foot intervals. Yes Range downflow vent installed outside of skirting. Dryer vent installed outside of skirting. Yes Skirting to be installed. Yes Yes Z N/A × ×

Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

Installer Signature Stoppence Talley Date 02/14/2020

SITE PLAN CHECKLIST

- 1) Property Dimensions
 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
 - 3) Distance from structures to all property lines
 - 4) Location and size of easements
- ✓ 5) Driveway path and distance at the entrance to the nearest property line.
- ■ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ₹ 7) Show slopes and or drainage paths
- 8) Arrow showing North direction



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER	CONTRACTOR	PHONE
	THIS FORM MUST BI	E SUBMITTED PRIOR TO THE I	SSUANCE OF A PERMIT
records of the Ordinance 89-	subcontrăctors who actually did	the trade specific work ubcontractors to provide	ermitted site. It is <u>REQUIRED</u> that we have inder the permit. Per Florida Statute 440 and evidence of workers' compensation or ency license in Columbia County.
	he permitted contractor is respondence is respondence in the contractor beginning any work	•	form being submitted to this office prior to the n stop work orders and/or fines.
ELECTRICAL	Print Name Jonathan Tal License #: Owner Qualifier Fo		ne #:
MECHANICAL/ A/C	Print Name Jonathan To		nature
	i e		

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.



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, Stephanie Talley Installer License Holder Nat	give this authority fo	or the job address show below						
only, III1 SW Baron Gle	Job Address Job Address	38, and I do certify that						
the below referenced person(s)	listed on this form is/are under my	direct supervision and control						
and is/are authorized to purcha	se permits, call for inspections and	I sign on my behalf.						
Printed Name of Authorized	Signature of Authorized	Authorized Person is						
Person	Person	(Check one)						
Jonathan Talley	34	Agent Officer Property Owner						
Jennifer Talley		Agent Officer Property Owner						
•		Agent Officer Property Owner						
under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed	responsible for all permits per responsible for compliance with all ensing Board has the power and au by him/her or by his/her authorized esponsibility for compliance granted	Ithority to discipline a license person(s) through this						
License Holders Signature (Not NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: COUNTY	• •						
The above license holder, whose personally appeared before me (type of I.D.) NOTARY'S SIGNATURE	and is known by me or has produced on this day of							
NO IART S SIGNATURE		EXPIRES: August 19, 2022 Bonded Thru Notary Public Underwriters						



TATE OF ILORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

200/M	1813077
PERMIT NO _ DATE PAID :	18-518

APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] [] Temporary [] APPLICANT: Jonathan M. Talley & Sennifer M. Talley AGENT: Andrews Site Prep TELEPHONE: (386) 623-958 MAILING ADDRESS: 505 SE Tribble St. Lake City, Fl. 32025 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: 17 BLOCK: SUBDIVISION: Southern Meadows PLATTED: PROPERTY ID #: 35.55.16.03757.417 ZONING: 4-3 I/M OR EQUIVALENT: [Y / PROPERTY SIZE: 4.77 ACRES WATER SUPPLY: [/ PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] DISTANCE TO SEWER: _____FT PROPERTY ADDRESS: 1117 SE Baron 6ln. Ft. White, F1 32039 DIRECTIONS TO PROPERTY: BUILDING INFORMATION [\sqrt{1} RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Unit Type of Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC No Establishment 2000 3 [] Floor/Equipment Drains [] Other (Specify) envil Pally DATE: 06/85

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-3528

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

LAND OWNER AFFIDAVIT

STATE OF FLORIDA COUNTY OF COLUMBIA

This is to certify that I (We), Bullard Denune Inv Co.
as the owner of the below described property:
Property Tax Parcel ID Number 35-55-16-03752-417
Subdivision (Name, Lot, Block, Phase) T SOUTHER IN MERCHANIC DIS
Give my permission for Jonathan + Jemifer Talley to place a
Circle one - Mobile Home Travel Trailer / Utility Pole Only / Single Family Home / Port
Shed / Garage Culvert / Power Pole / Well / Septic Other:
I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property. 1-2-2020
Owner Signature Date
Swom to and subscribed before me this 2 day of Uanuary, 20 20. This (These) person(s) are personally known to me or produced ID
Notary Public Signature (Type) Holly C. Hanover Notary Printed Name
Notary Stamp HOLLY C, HANOVER Commission # 9G 176466 Expires May 18, 2022 Bonded Thru Troy Fain Insurance 800-385-7018