

Worrell's

- Need MH Data Plat from C&G

LLC Document

THOMAS, EX-0

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

DAVID MORRELL

For Office Use Only (Revised 1-11) Zoning Official BLK 04 Dec 2012 Building Official on the Authority

AP# 121-33 Date Received 11/26 By JW Permit # 30648

Flood Zone X Development Permit N/A Zoning N/A Land Use Plan Map Category A-3

Comments Section 2.3.1

FEMA Map# N/A Elevation N/A Finished Floor 1st floor River N/A In Floodway N/A

Site Plan with Setbacks Shown EH # 12-0518 EH Release Well letter Existing well

Recorded Deed or Affidavit from land owner Installer Authorization State Road Access 911 Sheet

Parent Parcel # _____ STUP-MH _____ F W Comp. letter VF Form

IMPACT FEES: EMS _____ Fire _____ Corr _____ Out County In County

Road/Code _____ School _____ = TOTAL _____ Impact Fees Suspended March 2009 See notes on Pre-Instp

Property ID # 10.5.16.03507-125 Subdivision COLUMBIA City Homesites Unit I LOT 25

- New Mobile Home _____ Used Mobile Home MH Size _____ Year 2006
- Applicant David MORRELL Phone # 386.365.7690
- Address 212 SW Cottage Glen, L.C. FL 32024
- Name of Property Owner MORRELLI MOBILE PROPERTIES Phone# _____
- 911 Address 8756 SW SR 47 Lake City FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home OLISA PROPERTIES, LLC Phone # 386.365.7690
Address 212 SW Cottage Glen, L.C. FL 32024
- Relationship to Property Owner MGIRM
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage .50
- Do you : Have EXIST 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 NO
- Driving Directions to the Property 47 South, go 3/4 m.ye past Columbia City on Right.
- Name of Licensed Dealer/Installer Bernie Thru.M Phone # 386-623 0076
- Installers Address 5557 NW FALLING CREEK ROAD W.S. FL 32096
 - License Number IH1025155 Installation Decal # 11407

Spoke to David 12-5-12

cl#:109

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer. Submit the originals with the packet.

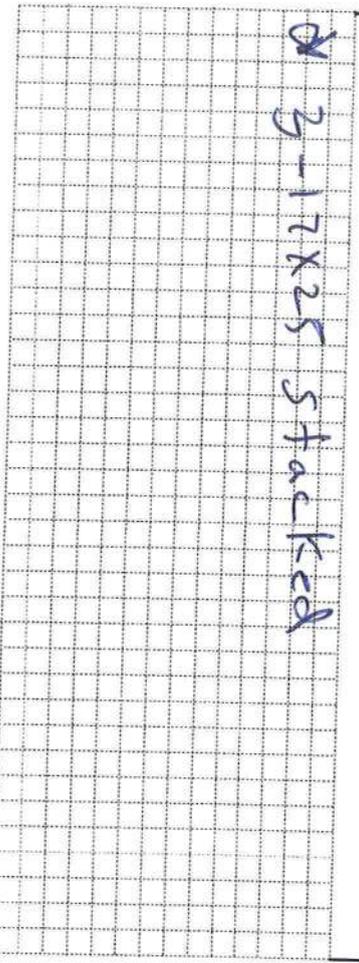
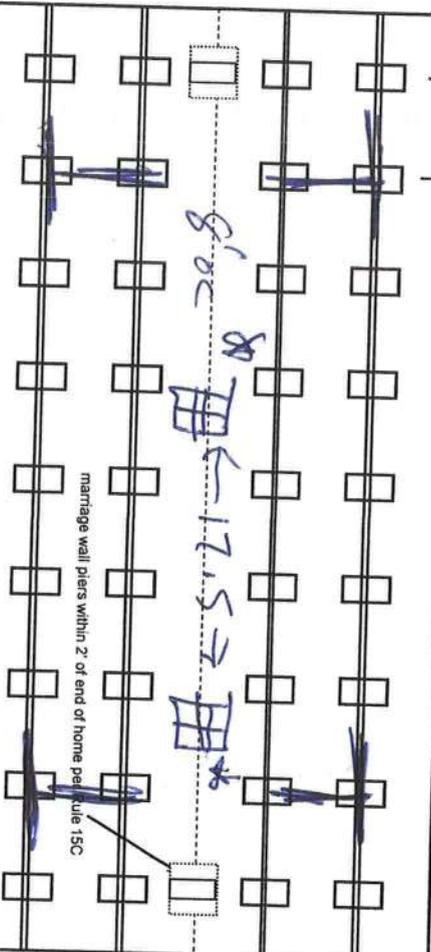
Installer Bernie Thrift License # IH1025155
 911 Address where home is being installed _____

Manufacturer Scotbuilt Length x width 40x28

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 BT



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 # 11407

Triple/Quad Serial # DISH01366A1R

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4.6"	6'	7'	8'	8'	8'
2000 dsf	6"	8'	8'	8'	8'	8'
2500 dsf	7.6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x22
 Perimeter pier pad size 16x16

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 17.5 Pier pad size 3-17x25 stacked ft 4
 _____ Pier pad size _____ ft _____
 _____ Pier pad size _____ ft _____

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____
 Manufacturer _____
 Longitudinal Stabilizing Device w/ Lateral Arms _____
 Manufacturer Model 11011C
Diver Systems

OTHER TIES

Sidewall _____
 Longitudinal Marriage wall _____
 Shearwall _____
 Number 24
4
4
2

FRAME TIES

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

ANCHORS

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	446
24 x 24	576
26 x 26	676

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil _____ without testing.

X 2000 X 2500 X 2000

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 2000 X 2500 X 2000

TORQUE PROBE TEST

The results of the torque probe test is 290 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. 1 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.

BT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Bernie Thrift
 Date Tested 11-28-12

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. 3

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 5

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 3/8 Lags Length: 7" Spacing: 24" oc
 Walls: Type Fastener: Flashing Length: 8" Spacing: 12"
 Roof: Type Fastener: Flashing Length: 8" Spacing: 48"
 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 BT

Type gasket Seam Seal Installed: _____
 Pg. 18 Between Floors Yes _____
 Between Walls Yes _____
 Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. 19
 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

Installer Signature Bernie Thrift Date 11-28-12

**CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED 11/26 BY JW IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME DAVID MORRELL PHONE _____ CELL 365.7690

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME C&G by [unclear]
See C&G REPRESENTATIVE - "GARDNER"

MOBILE HOME INSTALLER BERNIE WRIGHT PHONE _____ CELL 623-0096

MOBILE HOME INFORMATION

MAKE DESTINY YEAR 2006 SIZE 24 X 48 COLOR White

SERIAL No. DISH 01366A1B

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

- (P or F) - P= PASS F= FAILED \$50.00
- P SMOKE DETECTOR () OPERATIONAL () MISSING Date of Payment: 1126.12
 - P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION Paid By: David MORRELL
 - P DOORS () OPERABLE () DAMAGED Notes: 1211-33
 - P WALLS () SOLID () STRUCTURALLY UNSOUND
 - P WINDOWS () OPERABLE () INOPERABLE
 - F PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
 - F CEILING () SOLID () HOLES () LEAKS APPARENT old fire place
 - P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

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

Need Data Plate
From C & G

STATUS

APPROVED WITH CONDITIONS: Fix hole L.B. ceiling, missing cabinets & plumbg.

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Crew ID NUMBER 306 DATE 11-27-12

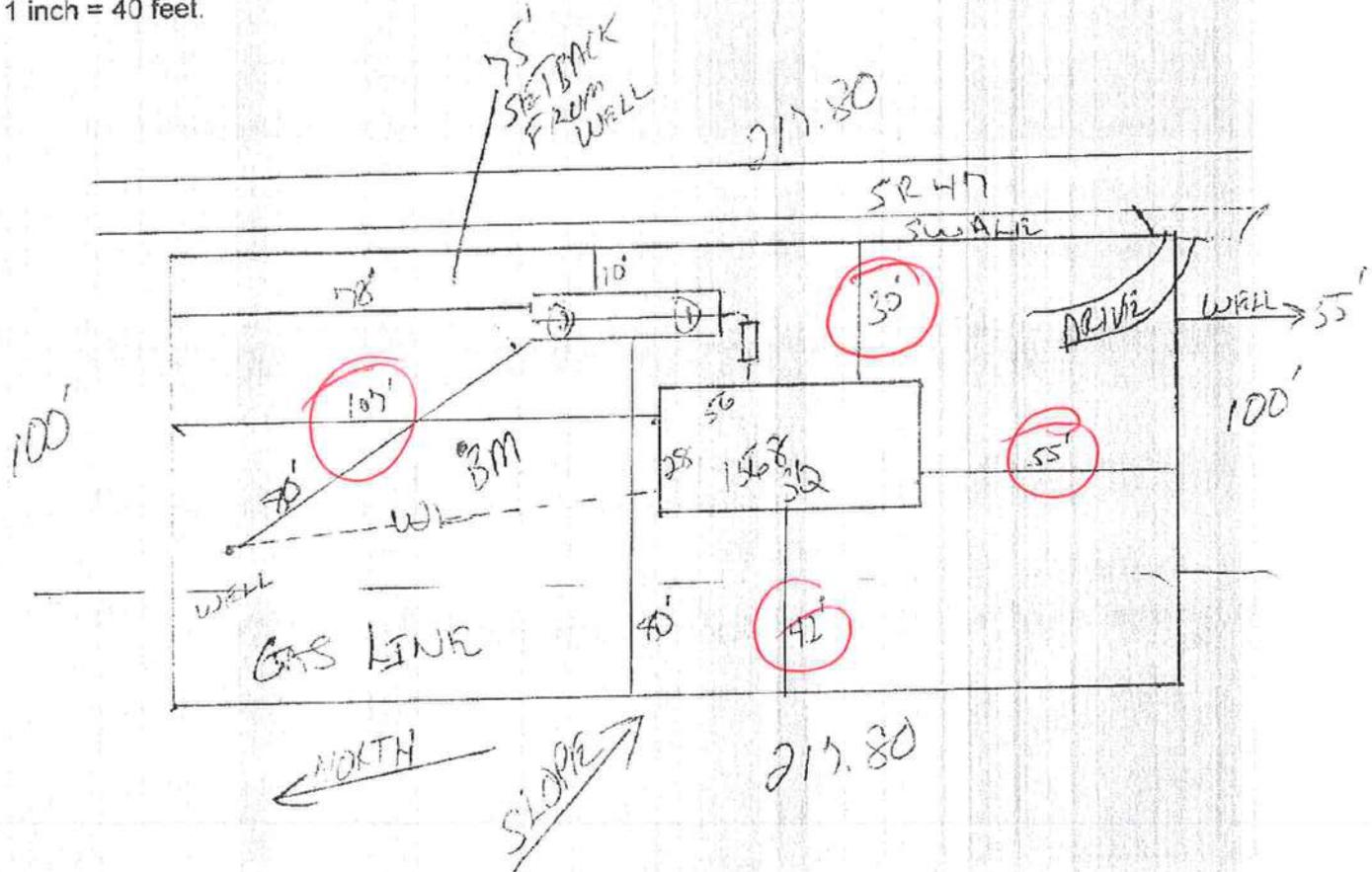
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

MORRILL + MABILIZ

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

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: *Rodney D. F...*

MASTER CONTRACTOR

Plan Approved _____ Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Columbia County Property Appraiser

CAMA updated: 10/15/2012

2012 Tax Year

Tax Collector

Tax Estimate

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 10-5S-16-03507-125

<< Next Lower Parcel

Next Higher Parcel >>

Search Result: 1 of 19

Next >>

Owner & Property Info

Owner's Name	MORRELL & MABILE PROPERTIES		
Mailing Address	212 SW COTTAGE GLN LAKE CITY, FL 32024		
Site Address	COTTAGE GLN		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	10516
Land Area	0.500 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 25 COLUMBIA CITY HOMESITES UNIT 1. ORB 970-1210.			



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$5,051.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$5,051.00
Just Value		\$5,051.00
Class Value		\$0.00
Assessed Value		\$5,051.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$5,051 Other: \$5,051 Schl: \$5,051

2013 Working Values

NOTE:
2013 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
12/19/2002	970/1210	WD	V	Q		\$56,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

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

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1 LT - (0000000.500AC)	1.00/1.00/0.77/1.00	\$5,051.00	\$5,051.00

Columbia County Property Appraiser

CAMA updated: 10/15/2012



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

PERMIT NO. 14-0518
DATE PAID: 11/21/12
FEE PAID: 5000
RECEIPT #: 1089701

APPLICATION FOR:

- [X] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Morrell & Mabiule Properties

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. 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: 25 BLOCK: na SUB: Columbia City Homesites unit 1 PLATTED: 87

PROPERTY ID #: 10-5S-16-03507-125 ZONING: Res I/M OR EQUIVALENT: [Y] [N]

PROPERTY SIZE: .5 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] [N] DISTANCE TO SEWER: FT

PROPERTY ADDRESS: SW SR 47, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: 47 South Through Columbia City, 1/2 mile on right past CR 240

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

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

Table with 5 columns: Unit No, Type of Establishment, No. of Bedrooms, Building Area Sqft, Commercial/Institutional System Design. Row 1: 1, SF Residential, 3, 1568.

[N] Floor/Equipment Drains [N] Other (Specify)

SIGNATURE: Rocky D Ford DATE: 11/21/2012

THIS INSTRUMENT WAS PREPARED BY:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

Inst 2062025305 Date 12/23/2002 Time 13.28
Doc Stamp-Deed : 392.00
- J. J. A. I.C.P DeWitt Cason, Columbia County B:970 P:1210

RETURN TO:

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328
07-900
Property Appraiser's
Parcel Identification No.
03626-305; 03626-306;
03626-307; 03626-308;
03626-311; 03507-124;
03507-125; 03507-126

WARRANTY DEED

THIS INDENTURE, made this 11th day of December, 2002, between COLUMBIA SERVICE COMPANY, INC., a corporation existing under the laws of the State of Florida, whose post office address is Post Office Box 2817, Lake City, FL 32056-2817, and having its principal place of business in the County of Columbia, State of Florida, party of the first part, and MORRELI & MABILLI PROPERTIES, L.L.C., whose post office address is Route 21, Box 544, Lake City, FL 32024, of the County of Columbia, State of Florida, party of the second part,

WITNESSETH: that the said party of the first part, for and in consideration of the sum of Ten Dollars (\$10.00), to it in hand paid, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, remised, released, conveyed and confirmed, and by these presents doth grant, bargain, sell, alien, remise, release, convey and confirm unto the said party of the second part, and its heirs and assigns forever, all that certain parcel of land lying and being in the County of Columbia and State of Florida, more particularly described as follows:

Lot 5, 6, 7, 8, 11, 24, 25 and 26, COLUMBIA CITY HOMESITES UNIT 1, a subdivision according to the plat thereof recorded in Plat Book 5, Page 106 of the public records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

TOGETHER with all the tenements, hereditaments and appurtenances, with every privilege, right, title, interest and estate, reversion, remainder and easement thereto belong or in anyway appertaining:

TO HAVE AND TO HOLD the same in fee simple forever.

And the said party of the first part doth covenant with said party of the second part that it is lawfully seized of said premises; that they are free of all encumbrances, and that it has good right and lawful authority to sell the same; and the said party of the first part does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the party of the first part has caused these presents to be signed in its name by its President, and its corporate seal to be affixed, the day and year above written.

Signed, sealed and delivered in our presence:

COLUMBIA SERVICE COMPANY, INC.

DeEtte F. Brown

By: W. L. Summers
W. L. Summers, President

DeEtte F. Brown
(Name of Witness)

Crystal L. Brunner

Crystal L. Brunner
(Name of Witness)

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 19th day of December, 2002, by W. L. Summers, President of COLUMBIA SERVICE, INC., a State of Florida corporation, on behalf of the corporation. He is personally known to me and did not take an oath.

DeEtte F. Brown
Notary Public
My Commission Expires: _____



COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 11/16/2012 DATE ISSUED: 11/21/2012

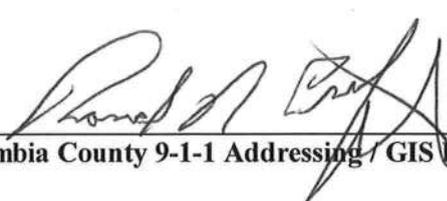
ENHANCED 9-1-1 ADDRESS:

8756 SW STATE ROAD 47
LAKE CITY FL 32024
PROPERTY APPRAISER PARCEL NUMBER:
10-5S-16-03507-125

Remarks:

ADDRESS FOR PROPOSED LOCATION ON PARCEL.

Address Issued By: _____


Columbia County 9-1-1 Addressing / GIS Department

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



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Entity Name Search

No Events

No Name History

Submit

Detail by Entity Name

Florida Limited Liability Company

OLISA PROPERTIES, L.L.C.

Filing Information

Document Number L04000050400
FEI/EIN Number 870741515
Date Filed 07/02/2004
State FL
Status ACTIVE

Principal Address

212 SW COTTAGE GLEN
 LAKE CITY FL 32024

Mailing Address

212 SW COTTAGE GLEN
 LAKE CITY FL 32024

Registered Agent Name & Address

MORRELL, DAVID W
 212 SW COTTAGE GLEN
 LAKE CITY FL 32024

Manager/Member Detail

Name & Address

Title MGRM
 MORRELL, DAVID W
 212 SW COTTAGE GLEN
 LAKE CITY FL 32024

Annual Reports

Report Year Filed Date
 2010 01/12/2010
 2011 01/04/2011
 2012 01/12/2012

Document Images

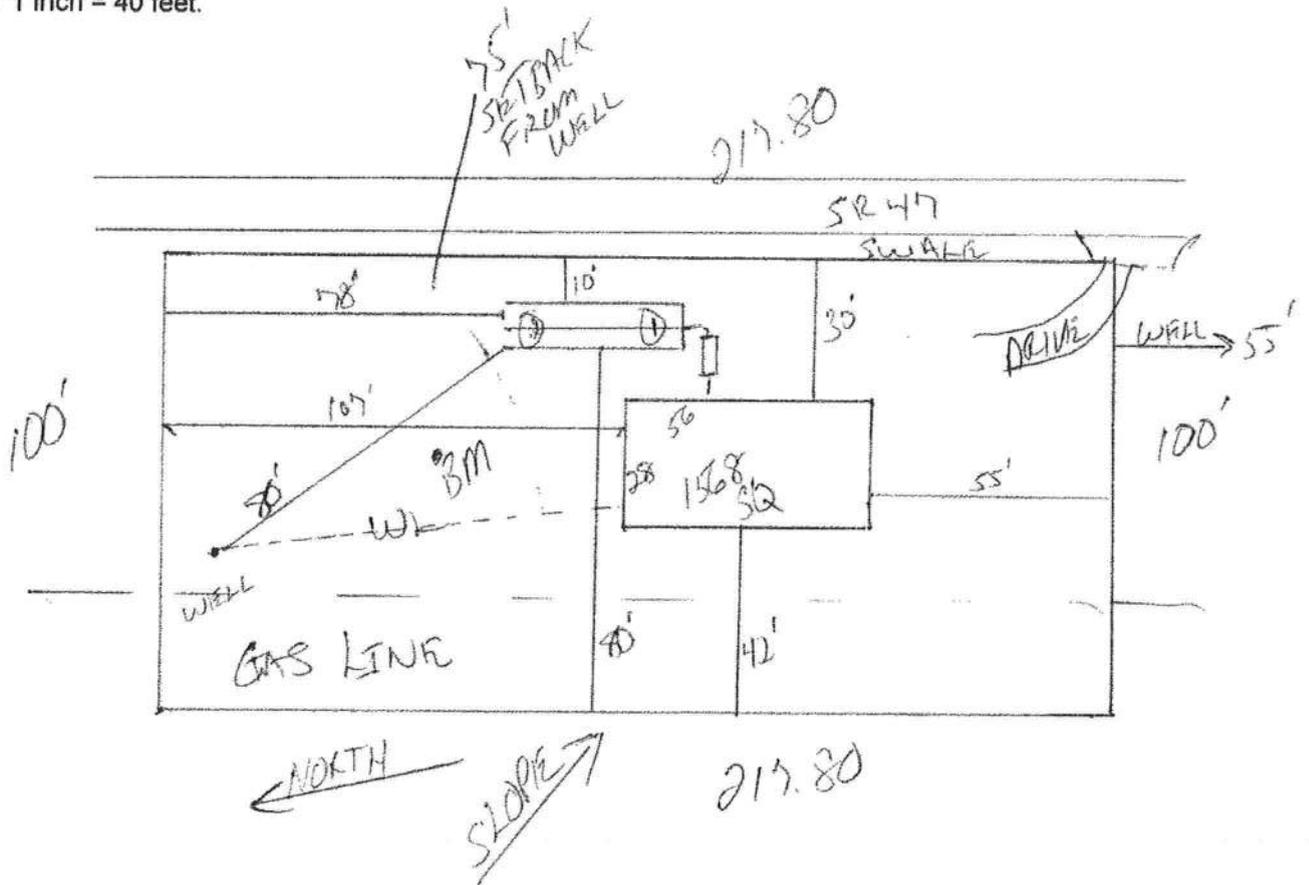
- 01/12/2012 -- ANNUAL REPORT
- 01/04/2011 -- ANNUAL REPORT
- 01/12/2010 -- ANNUAL REPORT

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

Permit Application Number 12-2518

MORRILL & MABILE ----- PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: Roch D F

MASTER CONTRACTOR

Plan Approved Not Approved _____

Date 12-10-12

By Sallie Ford Env Health Director Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1211-33 CONTRACTOR Fernie Wright PHONE 623-0046

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.

<input checked="" type="checkbox"/> ELECTRICAL <i>535</i> <i>Start Clean Ex. Prod.</i>	Print Name <u>Steve Thomas</u>	Signature <u>G. Steven Thomas</u>
	License #: <u>EC0001121</u>	Phone #: <u>752-8125</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C <u>327</u>	Print Name <u>Henry Moseley</u>	Signature <u>Henry Moseley</u>
	License #: <u>RA0030316</u>	Phone #: <u>386-288-9300</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name <u>David Marshall</u>	Signature <u>D. Marshall</u>
	License #:	Phone #: <u>386-365-7690</u>

**Benn Th...*

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.

Laurie Hodson

From: Cray, Dale [Dale.Cray@dot.state.fl.us]
Sent: Tuesday, November 20, 2012 4:35 PM
To: Laurie Hodson
Cc: Miles, Neil
Subject: Existing Driveway for Mr. David Morrell

Laurie

Please except this as approval notice for joint-use driveway above. This project was inspected on 11-20-2012. The land partial # is 1603507-125 SR-47 South. If you need further info please call.

Thanks



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, Bernie Thrift, 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
David Morrell		

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.

Bernie Thrift
 License Holders Signature (Notarized)

1H1025155 11-29-12
 License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Bernie Thrift, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 29 day of Nov, 2012.

Nicole Coleman
 NOTARY'S SIGNATURE

(Seal/Stamp)



NICOLE COLEMAN
 MY COMMISSION # EE 167275
 EXPIRES: June 7, 2016
 Bonded Thru Budget Notary Services

1211-33



Destiny Industries
P.O. Box 2947
Moultrie, GA 31771

Plant Number **I**

Date of Manufacture **9-28-05** HUD Label No. (s) **GEO 1433385**
1433386

Manufacturer's Serial Number and Model Unit Designation
DT5HO1366 GA A44B 0523-06

Design Approval by (D.A.P.I.A.)
N.T.A.

This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture.
(For additional information, consult owner's manual.)

The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	<u>DorDyne</u>	<u>GR4-3A</u>
For air cooling	<u>GE</u>	<u>UB507</u>
For cooking	<u>GE</u>	<u>GB18DCR</u>
Refrigerator	<u>GE</u>	<u>LA190DHYAS</u>
Water Heater	<u>InTerTherm</u>	
Washer		
Clothes Dryer		
Dishwasher	<u>GE</u>	<u>GD3200</u>
Garbage Disposal		
Fireplace	<u>InTerTherm</u>	<u>BM36HCD</u>
Whirlpool Tub		

HOME CONSTRUCTED FOR Zone I Zone II Zone III

This home has not been designed for the higher wind pressure and anchoring provisions required for coastal areas and should not be located within 1600' of the coastline in Wind Zones II and III, unless the home and its anchoring and foundation system have been designed for the increased requirements specified for Exposure D in ANSI/ACCE 7-88.

This home has has not been equipped with storm shutters or other protective coverings for windows and exterior door openings. For homes designed to be located in Wind Zones II and III, which have not been provided with shutters or equivalent covering devices, it is strongly recommended that the home be made ready to be equipped with these devices in accordance with the method recommended in manufacturer's printed instructions.

BASIC WIND ZONE MAP



DESIGN ROOF LOAD ZONE MAP



COMFORT HEATING

This manufactured home has been thermally insulated to conform with the requirements of the federal manufactured home construction and safety standards for all locations within LVC value zone 2. (See map at bottom)

Heating equipment manufacturer and model (see list at left).
The above heating equipment has the capacity to maintain an average 70° F temperature in

this home at outdoor temperatures of _____°F.
To maximize furnace operating economy, and to conserve energy, it is recommended that this home be installed where the outdoor winter design temperature (BT 1/2%) is not higher than

_____ degrees Fahrenheit.
The above information has been calculated assuming a maximum wind velocity of 10 mph at standard atmospheric pressure.

COMFORT COOLING

Air conditioner provided at factory (Alternate I)

Air conditioner manufacturer and model (see list at left).

Certified capacity _____ B.T.U./hour in accordance with the appropriate air conditioning and refrigeration institute standards.
The central air conditioning system provided in this home has been sized ensuring an

orientation of the front (pitch end) of the home facing _____. On this basis the system is designed to maintain an indoor temperature of 75° F when outdoor

temperatures are _____°F dry bulb and _____°F wet bulb.

The temperature to which this home can be cooled will change depending upon the amount of exposure of the windows of this home to the sun's radiant heat. Therefore, the home's heat gains will vary dependent upon its orientation to the sun and any permanent shading provided. Information concerning the calculation of cooling loads at various locations, window exposures and shadings are provided in Chapter 22 of the 1989 edition of the ASHRAE Handbook of Fundamentals.

Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this home.

Air conditioner not provided at factory (Alternate II)

The air distribution system of this home is suitable for the installation of central air conditioning.

The supply air distribution system installed in this home is sized for a manufactured home:

central air conditioning system of up to 9200 B.T.U./hr. rated capacity which are certified in accordance with the appropriate air conditioning and refrigeration institute standards, when the air circulation of such air conditioners are rated at 0.3 inch water column static pressure or greater for the cooling air delivered to the manufactured home supply air duct system.

Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this manufactured home.

Air conditioning not recommended (Alternate III)

The air distribution system of this home has not been designed in anticipation of its use with a central air conditioning system.

To determine the required capacity of equipment to cool a home efficiently and economically, a cooling load (heat gain) calculation is required. The cooling load is dependent on the orientation, location and the structure of the home. Central air conditioners operate most efficiently and provide the greatest comfort when their capacity closely approximates the calculated cooling load. Each home's air conditioner should be sized in accordance with Chapter 22 of the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) Handbook of Fundamentals 1989 edition, once the location and orientation are known.

**INFORMATION PROVIDED BY THE MANUFACTURER
NECESSARY TO CALCULATE SENSIBLE HEAT GAIN**

Walls (with windows and doors)	°F	<u>794</u>
Ceilings and roofs of light color	°F	<u>1644</u>
Ceilings and roofs of dark color	°F	<u>114</u>
Floors	°F	<u>923</u>
Air ducts in floor	°F	<u>114</u>
Air ducts in ceiling	°F	<u>1238</u>
Air ducts installed outside the home	°F	<u>1238</u>

The following are the duct areas in this home:

Air ducts in floor	sq. ft.	<u>102.4</u>
Air ducts in ceiling	sq. ft.	<u>121.6</u>
Air ducts outside the home	sq. ft.	

LVC VALUE ZONE MAP



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

12/5/2012

To: Columbia County Building Department

Description of well to be installed for Customer: Morrell
Located at Address: SR 47 South

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park

Sincerely
Bruce Park
President

CHERRYBROOK CALVERT OPEN

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 10-5S-16-03507-125

Building permit No. 0000330648

Permit Holder BERNIE THRIFT

Owner of Building MORRELL & MABLE PROPERTIES

Location: 8756 SW STATE ROAD 47, LAKE CITY, FL 32024

Date: 01/25/2013



Greg Cunn

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)