PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	(Revised 7-1-15)	Zoning Official	Building Officia	
AP#	Date Received	dBy_	Permit #	
Flood Zone De			Land Use Plan Map	Category
FEMA Мар#	_ Elevation	Finished Floor	_ River In Flo	odway
□ Recorded Deed or □	Property Appraiser PC	O □ Site Plan □ EH#_		Well letter OR
□ Existing well □ Lan	d Owner Affidavit	Installer Authorization	□ FW Comp. letter □	App Fee Paid
□ DOT Approval □ Par	rent Parcel #	STUP-M	н	🗆 911 App
□ Ellisville Water Sys	□ Assessment	□ Out County	□ In County □ Sub VF	Form
roperty ID # <u>35-4</u>	5-17-09030-	026 Subdivision		Lot#
New Mobile Home	Used I	Mobile Home	MH Size 14 XS	vear_96_
			hone # <u>38696</u>	
	The state of the s	ACA	ce City F1	
Name of Property	Owner Paul t	Hava	Phone# 3869 214 Fl 3203	657116
110	111 11110			
911 Address 42	D SETHINETTH	es Dr Lake	city F1 3200	25
911 Address 4 C		FL Power & Light		
	power company -		nt - Clay Elect	ric
Circle the correct p	(Circle One) -	FL Power & Light Suwannee Valley Ele	nt - <u>Clay Elect</u> ctric - <u>Duke Ene</u>	rgy
Circle the correct p	(Circle One) -	FL Power & Light Suwannee Valley Ele	nt - Clay Electric - Duke Ene	rgy
Name of Owner of Address 420	(Circle One) - Mobile Home Par	FL Power & Light Suwannee Valley Ele	nt - <u>Clay Elect</u> ctric - <u>Duke Ene</u>	rgy
Name of Owner of Address 420	(Circle One) - (Circle One) - Mobile Home Para SE Seth	FL Power & Light Suwannee Valley Ele Nettes T	nt - Clay Electric - Duke Ene	rgy
Name of Owner of Address 420	(Circle One) - Mobile Home Par	FL Power & Light Suwannee Valley Ele Nettes T	otric - Clay Electronic - Duke Ene	rgy
Name of Owner of Address 420 Relationship to Pro Current Number of Lot Size Do you : Have Exis	(Circle One) - (Circle One) - Mobile Home Paragonical Set Settle operty Owner f Dwellings on Prope	Suwannee Valley Ele Nettles D Orive or need Culver	Phone #38(a)	aiver (Circle one)
Name of Owner of Address 420 Relationship to Pro Current Number of Lot Size Do you : Have Existence	Mobile Home Par SE Seth operty OwnerSting Drive or Private (Blue Rose	Suwannee Valley Ele Nettes T Arty Total Acreage Drive or need Culver (Putting)	Phone #38(a) Ph	aiver (Circle one)
Name of Owner of Address 420 Relationship to Pro Current Number of Lot Size Do you: Have Existence Is this Mobile Home	Mobile Home Pare Set Set Set Set Set Set Set Set Set Se	Suwannee Valley Ele Suwannee Valley Ele Nettes E Orty Total Acreage Drive or need Culver (Putting I	Phone #38(a) Ph	ric rgy -965-711 Y FI 321
Name of Owner of Address 420 Relationship to Pro Current Number of Lot Size Do you: Have Existence Is this Mobile Home	Mobile Home Pares Set	Suwannee Valley Ele Suwannee Valley Ele A HOUS NETTES E Orty Total Acreage Drive or need Culver ad Sign) ting Mobile Home S. TUrn le Ton Seth	Phone #38(a) Ce CI +	aiver (Circle one)
Name of Owner of Address 420 Relationship to Procurent Number of Lot Size Do you: Have Existence Is this Mobile Homo Driving Directions	Mobile Home Park SE Seth operty Owner f Dwellings on Property (Blue Rose) The Replacing an Exist to the Property 41 Have left effective on Property 41 Have left effective on Property 41 Have left effective on Property 41	Suwannee Valley Ele Suwannee Valley Ele A HOUS NETTES E Orty Total Acreage Drive or need Culver ad Sign) ting Mobile Home S. TUrn le Ton Seth	Phone #38(a) Ce CI +	aiver (Circle one) ut do not need a Culvert)
Name of Owner of Address 420 Relationship to Proceed to Size Do you: Have Existing Driving Directions May Hall Email Address for A	Mobile Home Park SE Seth operty Owner Sting Drive or Private (Blue Rose ne Replacing an Exist to the Property 4) Have Jet Applicant:	Suwannee Valley Ele Suwannee Valley Ele A HOUS NETTES E Orty Total Acreage Drive or need Culver ad Sign) ting Mobile Home S. TUrn le Ton Seth	Phone #38(a) Ce CI + The Permit or Culvert W (Not existing to the Color of the Col	aiver (Circle one) ut do not need a Culvert)
Name of Owner of Address 420 Relationship to Proceed to Size Do you: Have Existence Driving Directions May Hall	Mobile Home Park SE Seth operty Owner Sting Drive or Private (Blue Rose ne Replacing an Exist to the Property 4) Have Jet Applicant: Dealer/Installer	Suwannee Valley Ele Suwannee Valley Ele A HOUS NETTES E Orty Total Acreage Drive or need Culver ad Sign) ting Mobile Home S. TUrn le Ton Seth	Phone #38(a) Ce CI +	aiver (Circle one) ut do not need a Culvert)



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

1, John Nettles		ty for the job addre	ess show below
only, 420 SE Sett	Nettles Dr La Job Address	ke City, and	I do certify that
the below referenced person(s)	2000 120000	my direct supervi	ision and control
2 0 Mark 12 20 Mary 22		N W S	
and is/are authorized to purcha	se permits, call for inspections	and sign on my be	ehalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized F (Check one)	
Joy Nettles	04	Agent Propert	Officer y Owner
		Agent Propert	Officer y Owner
		Agent Propert	Officer y Owner
I understand that the State Lice holder for violations committed document and that I have full re	by him/her or by his/her author	rized person(s) thi	rough this
John 70	- Applications	143556	8-23-2023
License Holders Signature (No	tarized) License	e Number	Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: CULUME	ia	
The above license holder, who personally appeared before me (type of I.D.)	se name is <u>Turn May</u> Sand is known by me or has pr	tin NetH	ls, ion, 20 <u>23</u> .
Jalupar			
NOTARY'S SIGNATURE	-11	(Seal/Stamp)	



CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED BY IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME Paul Haug PHONE 3869657116 CELL
ADDRESS 420 SE Seth Nettles De Lakecity FI 32055
MOBILE HOME PARKSUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME 41 South, turn left on 133, take right on
may Hall, take lett on Seth Nettles, 2nd 90° turn
trailer or right
MOBILE HOME INSTALLER JOHN NETTES PHONE 7143226307 CELL
MOBILE HOME INFORMATION
MAKE Redman YEAR 96 SIZE 14 x 56 COLOR Gray
SERIAL NO. FLA 146 10618
WIND ZONE Must be wind zone II or higher NO WIND ZONE I ALLOWED
INSPECTION STANDARDS
INTERIOR: (P or F) - P= PASS F= FAILED
SMOKE DETECTOR () OPERATIONAL () MISSING
FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION
DOORS () OPERABLE () DAMAGED
WALLS () SOLID () STRUCTURALLY UNSOUND
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
CEILING () SOLID () HOLES () LEAKS APPARENT
ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS
SIGNATURE DATE



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:

6/22/2020 2:45:56 PM

Address:

420 SE SETH NETTLES DR

City:

LAKE CITY

State:

FL

Zip Code

32025

Parcel ID

35-4S-17-09030-026

REMARKS:

This address is a verified Current address in the county's addressing system.

Verification ID: d2bf6dcf-0783-4bab-a5a5-2bf2b0c4e989

Address was reassigned from old address: 248 ROUTE 6

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.

Issuance of a 9-1-1 address for your property should not be construed by you or anyone else to mean that your property is buildable pursuant to the Columbia County Land Development Regulations. To determine whether your property is eligible for a building permit please contact the Building and Zoning Department.

Address Issued By:

GIS Specialist

Columbia County GIS/911 Addressing Coordinator

Columbia County
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456

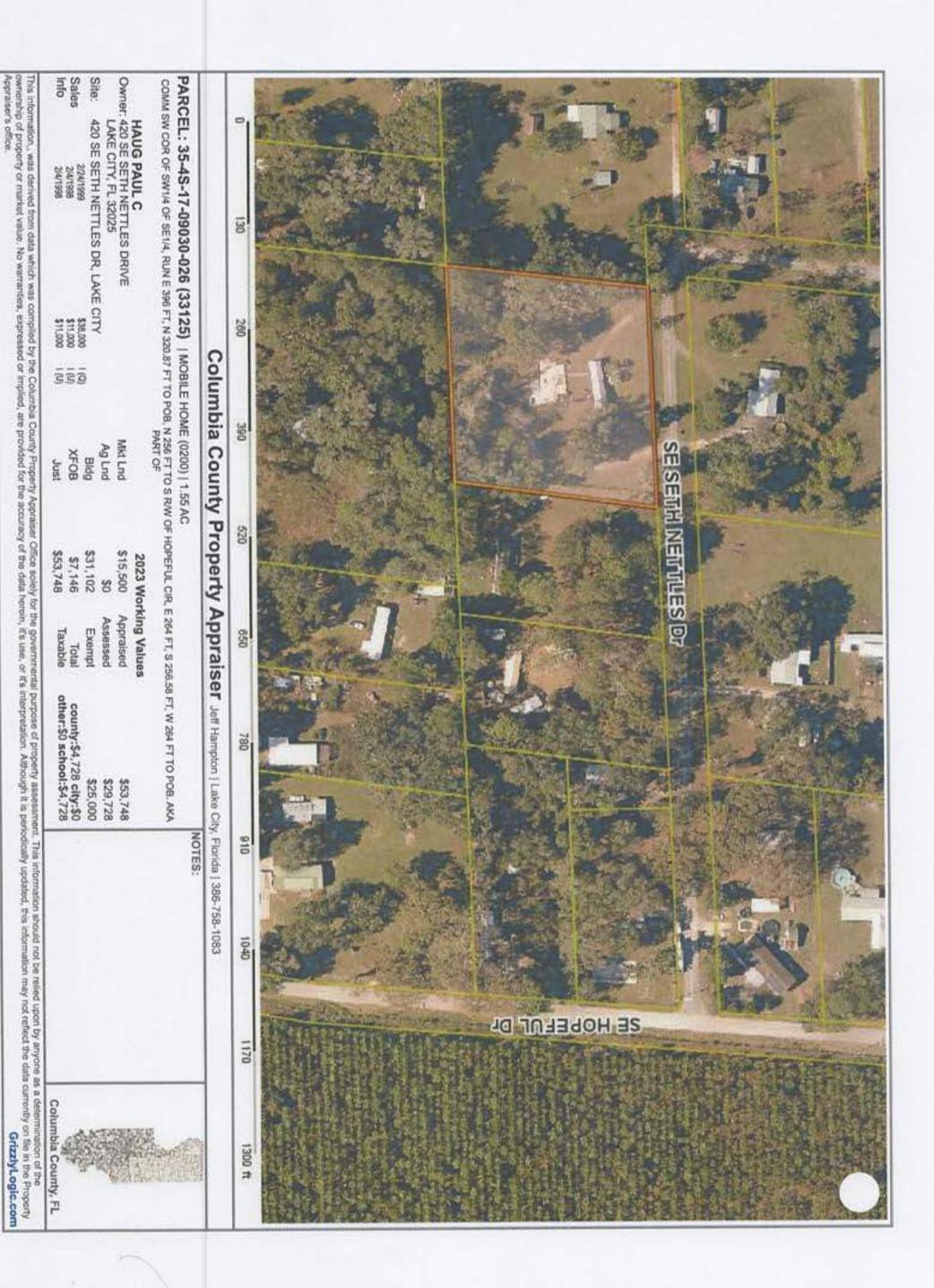
MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

	IBER	CONTRACTOR	PHONE
	THIS FOR	RM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A	A PERMIT
records of the s Ordinance 89-6	ubcontractors who ac , a contractor shall rec	over all trades doing work at the permitted sit tually did the trade specific work under the pe quire all subcontractors to provide evidence of and a valid Certificate of Competency license	ermit. Per Florida Statute 440 and f workers' compensation or
		or is responsible for the corrected form being g any work. Violations will result in stop work	
ELECTRICAL	Print Name		
ELECTRICAL	5- 25		
A.F.G.UANUGAL/	45	Phone #:	
MECHANICAL/	Home ou	Qualifier Form Attached Signature	

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 4/27/2017

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 SITE PLAN EXAMPLE Revised 7/1/15 Show Your Road Name 809" 120 STOS MOST ZUES Slope 110 (My Property) M/H NOTE: (201) 205 This site plan can be copied and used with 410' the 911 Addressing 325 470 Dept. application forms. 498 60" North 264 Driveway Porch 98 14 ×56 5100 Slab se!





Incorporated 62-6.004, FAC

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM (OSTDS)

PERMIT NO. DATE PAID: FEE PAID: RECEIPT #: 1937/82

Page 1 of 4

APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: [] Existing System [] Holding Tank [] Innovative [] Abandonment [] Temporary [] [] New System [] Repair APPLICANT: PAUL HAUG EMAIL: TELEPHONE: 386 956 7116 AGENT: MAILING ADDRESS: 420 JE JETH NOTTED DR KAK C. E. 41 39095 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. OSTDS REMEDIATION PLAN? [Y / N] PROPERTY INFORMATION PLATTED: PROPERTY ID 8: 09070 -076 ZONING: ____ I/M OR EQUIVALENT: [Y / N] PROPERTY SIZE: - ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD []>2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: ____FT PROPERTY ADDRESS: 420 5.6. 30th Metho DR Lak City 330005 DIRECTIONS TO PROPERTY: 4) SOUTH, TURN LEET ON 133 TAKE Right on MAY HALL, TAK LEFT ON SETH BUILDING INFORMATION [RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Unit Type of Bedrooms Area Sqft Table I, Chapter 62-6, FAC Establishment MOBILE HOLD 2 784' [] Floor/Equipment Drains [] Other (Specify) DATE: ()AN DEP 4015, 06-21-2022 (Obsoletes prayious editions which may not be used)

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0124

Page 2 of 4

- PART II - SITEPLAN - -Scale: Each block represents 10 feet and 1 inch = 40 feet. E-0 DRIVOW APA VE ALL Books APA 85-1-I ACRE of 1.5 Notes: Fromite Hord SEPTIC 22 SEPTIC 140 FREM × 2.13.23 Site Plan submitted by Yaure Many Date_ 7/14/23 Not Approved Plan Approved_ County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

incorporated: 82-8:004, F.A.C.

District No. 1 - Ronald Williams

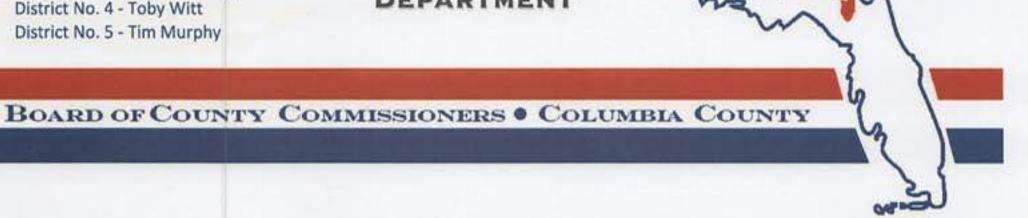
District No. 2 - Rocky Ford

District No. 3 - Robby Hollingsworth

District No. 4 - Toby Witt District No. 5 - Tim Murphy

BUILDING AND ZONING

DEPARTMENT



MOBILE HOME INSTALLER OBLIGATION LETTER

es, of Setup and Installation Lacicense number

14 3556, do hereby agree to affix the installation decal onto this manufactured home as required by law and provide a copy of this decal to the permitting authority.

I further understand that once these decals become available I must provide them to obtain any further permits in Columbia County, Florida.

Signature - Licensed Mobile Home Installer

Job Information

Location: 420 SE Seth Nettles Dr. Lake City F1 32055

Application or Permit #:

Mobile Home Permit Worksheet	Application Number:	Date:
Installer: John Nettie License # IH 1143556	New Home Used Home Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	nual
lake City FI	Single wide Mind Zone II W W Double wide I Installation Decal #	Wind Zone III
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	Triple/Quad Serial #	USED HOMES
where the sidewall ties exceed 5 ft 4 in. Installer's initials Installer's initials	Load Footer 16" x 16" 18 1/2" x 18 20" x 20" 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	22" x 22" 24" X 24" 26" x 26" (484)" (576)" (676)
Typical pier spacing Stateral	(sq in) (200) 172 (342) (400)	7.
Show locations of Longitudinal and Lateral Systems	1500 psf 4'6" 6'	0 00
langitudinal (use dark lines to show these locations)	000	2000
	000	000
	ž	POPULAR PAD SI
	Perimeter pier pad size 17.5 x 25.5	16 x 16
	Other pier pad sizes (required by the mfg.)	2.5
marriage wall piers within 2' of end outgome per Rule 15C	Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.	3/16
	List all marriage wall openings greater than 4 foot and their pier pad sizes below.	x 26
	Opening Pier pad size	4 n 5 n
		within 2' of end of home spaced at 5' 4" oc
	TIEDOWN COMPONENTS Longitudinal Stabilizing Device (LSD)	OTHER TIES Number Sidewall
	Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer	Longitudinal Marriage wall Sheanwall

Mobile Home Permit Worksheet

Connect all potable	Connect all sewer		Connect electrica source. This inclu		Date Tested	ALL TE	Note: A sta anch anch readi requi	The results on there if you are showing 275							The pocket p or check her	1
m	Connect all sewer drains to an existing sewer tap or septic tank. Pg.	Plumbing	electrical conductors between multi-wide units, but not to the main power This includes the bonding wire between mult-wide units. Pg.	Electrical		ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Name	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	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 5 foot anchors.	TORQUE PROBE TEST	x x	Using 500 lb. increments, take the lowest reading and round down to that increment.	 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. 	POCKET PENETROMETER TESTING METHOD	×	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST
Installer Signature		manufacturer'	Installer verifies		Electrical crossovers Other:	Skirting to be installed Dryer vent installed ou Range downflow vent	The bottomboard will be Siding on units is insta Fireplace chimney instanta	To the second se	Type gasket	a result of a poorly ins of tape will not serve a	I understand a properly	will be cente roofing nails	Walls: Type Faster Roof: Type Faster		Water drainage: Natur	Debris and organic ma

	pplication N
	lumber:
Site Pre	
paration	1
	Date:
	1

Gasket (weatherproofing requirement)	3" wide, ga roof and sides of the	Type Fastener: Length: Spacing:	: Type Fastener: Length: Spacing:	Fastening multi wide units	s and organic material removed . r drainage: Natural Swale Pad Other	Site Preparation
	galv.	,			×	

y installed gasket is a requirement of all new and used insation, mold, meldew and buckled marriage walls are talled or no gasket being installed. I understand a strip is a gasket. Installer's initials Installed:

Weatherproofing

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Y

Yes

talled so as not to allow intrusion of rain water. Yes illed to manufacturer's specifications. Yes be repaired and/or taped. Yes Pg.

Miscellaneous

I. Yes No
Itside of skirting. Yes N//
Installed outside of skirting. Yes
at 4 foot intervals. Yes protected. NA NA

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

D