PERMIT APPLICATION / MANUFACTURED HOME INSTAULATION APPLICATION
For Office Use Only (Revised 7-1-15) Zoning Official Building Official AP# 1810 - 34 Date Received 10/10 By Depring Permit # 42434 Flood Zone Development Permit Zoning ESAL Land Use Plan Map Category A Comments
FEMA Map# Elevation Finished Floor read River In Floodway Recorded Deed or Property Appraiser PO Site Plan S
Property ID #Lot#Lot#
New Mobile Home Used Mobile Home MH Size 28x66 Year 97
Applicant Franco Medina Phr 239-229-0978
- Address 141 Sw medina Ct Lake 74: 37024
Name of Property Owner France median Phone# 239-229-09-78
V= 911 Address 622 Se Rolling hills Dr Lake City FI 32025
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 Mebile Home Co. acc. 10 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Name of Owner of Mobile Home Franco medina Phone # 239-229-09-18 Address 141 Su medina Ct Lake City F1 32024
Relationship to Property Owner Self
Current Number of Dwellings on Property
10
Lot Size Total Acreage
Do you : Have Existing Drive or Private Drive (Blue Road Sign) 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
Driving Directions to the Property Take 41 S downers
Ellisville make a Left on CR 238 go down
1/2 mile make right on October and Come down /2 mile
Name of Licensed Dealer/Installer 6km Williams Phone # 386-344-3669
Installers Address 600 Se Rumam St Lake Gy F1 32025
License Number 1H 1054858 Installation Decal # 48116
TO SEAT emecil to MAH 12.2.19
Franco + Giten 15 auni of what's needed 10.30.18 Clean 12.18 Tranco care in 4/8/19 and Thold him what was needed. It sport by 6/
The was The was ready. It stored was needed.

Typical pier spacing Address of home being installed Manufacturer Installer: 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. if home is a single wide fill out one half of the blocking plan Heetwood **Mobile Home Permit Worksheet** iateral longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) marriage wall piers within 2' of end of home per Rule 15C Length x width Installer's initials _License # I 858 1201 X VS+600 9 Application Number: capacity bearing Manufacturer Longitudinal Stabilizing Device (LSD) List all marriage wall openings greater than 4 foot and their pier pad sizes below. Other pier pad sizes (required by the mfg.) Perimeter pier pad size Load Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Longitudinal Stabili<mark>zing</mark> Device w/ Lateral Arms Manufacturer l-beam pier pad size interpolated from Double wide **New Home** Triple/Quad 2000 psf 2500 psf 3000 psf 1000 psf Opening wall openings 4 foot or greater. symbol to show the piers. Draw the approximate locations of marriage psf (sq in) Footer size TIEDOWN COMPONENTS Rule 15C-1 pier spacing table. PIER PAD SIZES 16" x 16" PIER SPACING TABLE FOR USED HOMES 4'6" Q (256)Serial # Wind Zone II Installation Decal # Used Home 18 1/2" x 18 Pier pad size 1/2" (342) တ္အတြက္အတြ GAFL854A/B74262 Use this 20" x 20" 00 R Q (400)တ္ခုတ္ Wind Zone III 22" x 22" Longitudinal Marriage wall Shearwall 4 ft (484)* within 2' of end of home spaced at 5' 4" oc Sidewall POPULAR PAD SIZES 7 3/16 x 25 3/16 8.5 x 18. 16 x 22.5 26 x 26 1/4 x 26 Pad Size 16 x 16 16 x 18 20×20 OTHER TIES FRAME TIES 24" X 24" ANCHORS (576)* 0 00 5ft 26" x 26' (676)6/6

Mobile Home Permit Worksheet

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.
Connect all sewer drains to an existing sewer tap or septic tank. Pg.
Plumbing
Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.
Electrical
8
Installer Name Clean Williams
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
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
The results of the torque probe test is 250 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
aest x cost x
 Using 500 lb. increments, take the lowest reading and round down to that increment.
2. Take the reading at the depth of the footer.
 Test the perimeter of the home at 6 locations.
POCKET PENETROMETER TESTING METHOD
× TELO X TECO
The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.
POCKET PENETROMETER TEST

The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Miscellaneous Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes NA Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes	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 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 Type gasket Type gasket TOA Installed: Between Floors Between Walls Yes Between Walls Yes Between Walls Yes	Debris and organic material removed Water drainage: Natural Swale Pad Other Floor: Type Fastener: A6 Length: Spacing: Spacing: Type Fastener: A6 Length: Spacing: Spacing: Walls: Type Fastener: A6 Length: Spacing: Spacing: 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.	Application Number:Date:
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Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Date

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1810-34	_ CONTRACTOR_()len	n Williams	PHONE 386-344-366

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 <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

a 		
ELECTRICAL	Print Name_Graco Medina License #:	Signature Mel
	Qualifier Form Attached	
MECHANICAL/	Print Name_ franco medina	Signature John Me U.
A/C	License #:	Phone #: 239-229-0978
	Qualifier Form Attached	

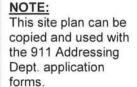
F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

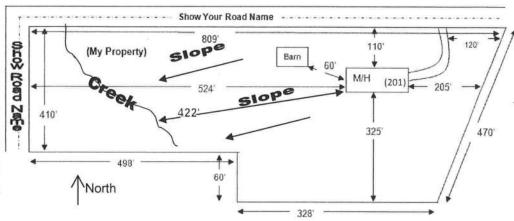
SITE PLAN CHECKLIST

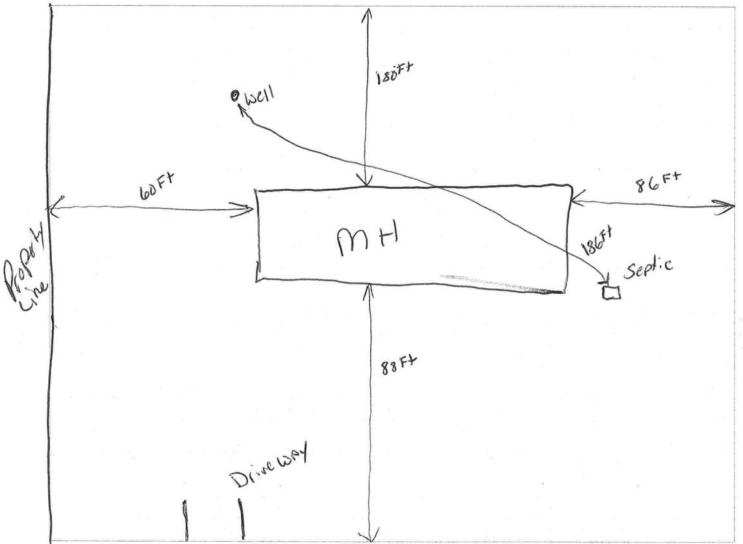
- ___1) Property Dimensions
- 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
 - _3) Distance from structures to all property lines
- 4) Location and size of easements
- ___5) Driveway path and distance at the entrance to the nearest property line
 - __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







Rolling Hills drive

Columbia County Property Appraiser

updated: 8/1/2018

Parcel: 02-6S-17-09553-039

<< Next Lower Parcel | Next Higher Parcel >>

Owner & Property Info

Owner's Name	MEDINA FRANCO		
Mailing Address	141 SW MEDINA CT LAKE CITY, FL 32024		
Site Address	622 SE ROLLING HILLS DR		
Use Desc.	VACANT (0000	000)	
Tax District	3 (County)	Neighborhood	2617
Land Area	1.910 ACRES	Market Area	02
Description		cription is not to be used as his parcel in any legal transa	

COMM NW COR OF NW1/4 OF SE1/4, RUN S 210 FT, E 1235 FT, S 420 FT FOR POB, RUN W 395.70 FT, S 210 FT, E 395.80 FT, N 210 FT TO POB, EX RD R/W. (AKA LOT 11-A ROLLING HILLS S/D UNREC). ORB 448-93, WD 1129-818 & WD 1222-2797

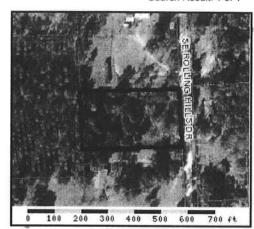
2017 Tax Roll Year

Tax Collector Tax Estimator Property Card

Parcel List Generator

2018 TRIM (pdf) Interactive GIS Map Print

Search Result: 1 of 1



Property & Assessment Values

2017 Certified Values		
Mkt Land Value	cnt: (0)	\$17,150.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (1)	\$1,000.00
Total Appraised Value		\$18,150.00
Just Value		\$18,150.00
Class Value		\$0.00
Assessed Value		\$18,150.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$18,150 Other: \$18,150 Schl:
		\$18,150

2018 Working Values		7 Hide Values)
Mkt Land Value	cnt: (0)	\$18,665.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$18,665.00
Just Value		\$18,665.00
Class Value		\$0.00
Assessed Value		\$18,665.00
Exempt Value		\$0.00
Total Taxable Value	Other: \$18,	Cnty: \$18,665 665 Schl: \$18,665

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
9/29/2017	1345/288	WD	V	Q	01	\$24,000.00
10/12/2011	1222/2797	WD	I	Q	01	\$22,000.00
8/27/2007	1129/818	WD	I	U	01	\$100.00
8/1/1979	438/320	03	V	Q		\$4,000.00

U--4-40E

Building Characteristics

Actual S F

Bldg Value



Institute for Building Technology and Safety (IBTS)

FICATION CERTIFICATE®

Verification:

Issue Date:

12/05/2019

Serial Number(s):

Date of Manufacture:

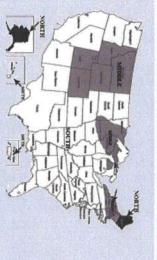
Wind Zone: Zone II

the time the home was labeled. GAFLP54A/B74262-ET

IBTS's Manufactured Home Data Verification Team has researched regulatory records on the Fleetwood Homes #54, Pearson, GA, manufactured home having the serial number(s) and date of manufacture identified below. Based on shipment records maintained by IBTS, as required by the U.S. Department of Housing and Urban Development pursuant to 24 CFR 3282.552 and provided by the home manufacturer, IBTS verifies the following home performance information corresponding to the home's initial destination and the construction standards set forth in 24 CFR 3280 at

12-30-1993

Roof Load Zone: South



Thermal Zone: Zone 1



IBTS Verification Seal



Verification Provided by the Institute for Building Technology and Safety

su. L. Gorani

Chief Executive Officer

This information is applicable only to the home having serial numbering and date of manufacture noted above. IBTS provides this verification based on the production reports provided by the home manufacturer and the zone requirements in effect at the time the home was labeled by the home manufacturer. IBTS is not liable for changes to the home's construction or subsequent home moves that may affect the home performance information verified

The Institute for Building Technology and Safety (a nonprofit organization)

45207 Research Place, Ashburn VA 20147 | 866-482-8868 | www.ibts.org



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

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 Signature of Authorized Authorized Person is Person (Check one) Person 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. NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Course A Date NOTARY INFORMATION: The above license holder, whose name is Shern Limited Ago of October 2018.	I, Glenn Williams , give this authority for the job address show below
and is/are authorized to purchase permits, call for inspections and sign on my behalf. Printed Name of Authorized Signature of Authorized Authorized Person is (Check one) 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. NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columnia Personally appeared before me and is known by me or has produced identification	only, 622 Rolling hills of the, and I do certify that
Printed Name of Authorized Signature of Authorized Person is Person Person (Check one) Person (Check one) Agent Officer Property Owner 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. NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Columbia The above license holder, whose name is Stendard is known by me or has produced identification	the below referenced person(s) listed on this form is/are under my direct supervision and control
Person (Check one) 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. Wotary Information: STATE OF: Florida COUNTY OF: Columnia The above license holder, whose name is Florida Statutes (County of the personally appeared before me and is known by me or has produced identification	and is/are authorized to purchase permits, call for inspections and sign on my behalf.
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. Interest	
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. I HISTES 16-9-18 License Holders Signature (Notarized) NOTARY INFORMATION: STATE OF: Florida COUNTY OF:	
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. I HISTESS 19-9-18 License Holders Signature (Notarized) License Number Date NOTARY INFORMATION: STATE OF: Florida COUNTY OF:	, — — —
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. I HISTISS 10-9-18 License Holders Signature (Notarized) NOTARY INFORMATION: STATE OF: Florida COUNTY OF: COLUMBIA The above license holder, whose name is Florida Florida personally appeared before me and is known by me or has produced identification	
The above license holder, whose name is Steve Williams, JR, personally appeared before me and is known by me or has produced identification	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. IH 1051858 19-9-18
personally appeared before me and is known by me or has produced identification	NOTARY INFORMATION: STATE OF:FloridaCOUNTY OF: COLUMBIA
Jame Hodson.	personally appeared before me and is known by me or has produced identification (type of I.D.) on this 167 day of OCTOBER, 2018.
NOTARY'S SIGNATURE (Seal/Stamp) LAURIE HODSON MY COMMISSION # FF 976102	LAURIE HODSON

EXPIRES: July 14, 2020 Bonded Thru Notary Public Underwriters