

21627

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Albright Liability

For Office Use Only (Revised 1-11) Zoning Official RLK 16 MAY 2012 Building Official 7.C. 5-15-12

AP# 1205-30 Date Received 5/11 By TW Permit # 30179

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

Comments Replacing existing MH

FEMA Map# N/A Elevation N/A Finished Floor 1' above River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 120254E ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☐ State Rd Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☐ App Fee Pd ☒ VF Form

IMPACT FEES: EMS ☐ Fire ☐ Corr ☒ Out County ☒ In County pd

Road/Code ☐ School ☐ = TOTAL ☐ Suspended March 2009 ☐ Ellisville Water Sys

Property ID # 12-45-15-00347-014 Subdivision _____

- New Mobile Home _____ Used Mobile Home ☒ MH Size 28x60 Year 2000
- Applicant Steven and Peggy Davidson Phone # 386-752-0489
- Address 1623 SW Brim Street Lake City, FL 32024
- Name of Property Owner Steven and Peggy Davidson Phone# 386-752-0489
- 911 Address 1623 SW Brim Street 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 Steven and Peggy Davidson Phone # 386-752-0489
Address 1623 SW Brim Street Lake City, FL 32024
- Relationship to Property Owner self
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 5
- Do you : Have 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 Yes (pd)
- Driving Directions to the Property 90 West - Pinemount - (L) Dekle - (R) Brim - 1/2 mile on (R)
- Name of Licensed Dealer/Installer Paul C Albright Phone # 365-5374
- Installers Address 1995-10 Thomas Ter, Lake City, FL 32024
- License Number EH1025239/1 Installation Decal # 7340

\$375.00

Tw spoke w/ Mr. Davidson 5.17.12

Tree

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

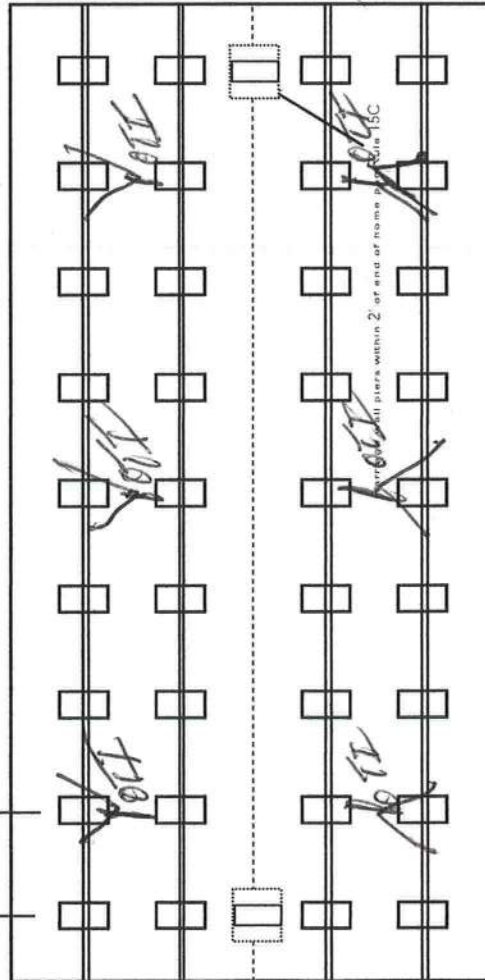
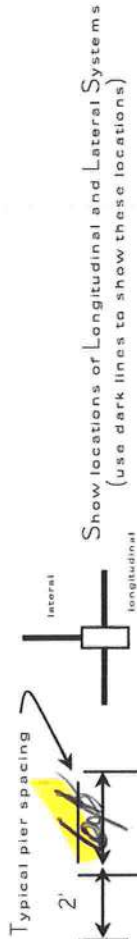
These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Paul E. Hildebrandt License # IT 1025239-1
911 Address where home is being installed. 1623 New Bern Street
Manufacturer Podder Length x width 28x60
City, State, Zip L.C., SC 29024

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 PH



PIER SPACING TABLE FOR USED HOMES

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)*	26" x 26" (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 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

Perimeter pier pad size

Other pier pad sizes (required by the mfg.)

12x25
16x16
17x25

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

Pier pad size

4 12x25

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Number
Sidewall
Longitudinal
Marriage wall
Shearwall

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Longitudinal Stabilizing Device w/ Lateral Arms

POCKET PENETROMETER TEST

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

X 1425

X 1425

X 1425

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 1420

X 1420

X 1420

TORQUE PROBE TEST

The results of the torque probe test is 280 inch pounds or check here if you are declaring 5' anchors without testing in footer. 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. 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.

KEH Installer's Initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Paul E. Wright

Date Tested

5-9-12

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. _____

Plumbing

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

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

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 8x99s Length: 8 Spacing: 2' 0"
Walls: Type Fastener: 5x8x8 Length: 8 Spacing: 4' 0"
Roof: Type Fastener: 8x9 Length: 8 Spacing: 3' 0"

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 PEH

Type gasket 70 Am Seal

Pg. 5' feet OTC

Installed:

Between Floors Yes ✓

Between Walls Yes ✓

Bottom of ridgebeam Yes ✓

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 2
Siding on units is installed to manufacturer's specifications. Yes ✓ Pg. NA
Fireplace chimney installed so as not to allow intrusion of rain water. Yes NA

Miscellaneous

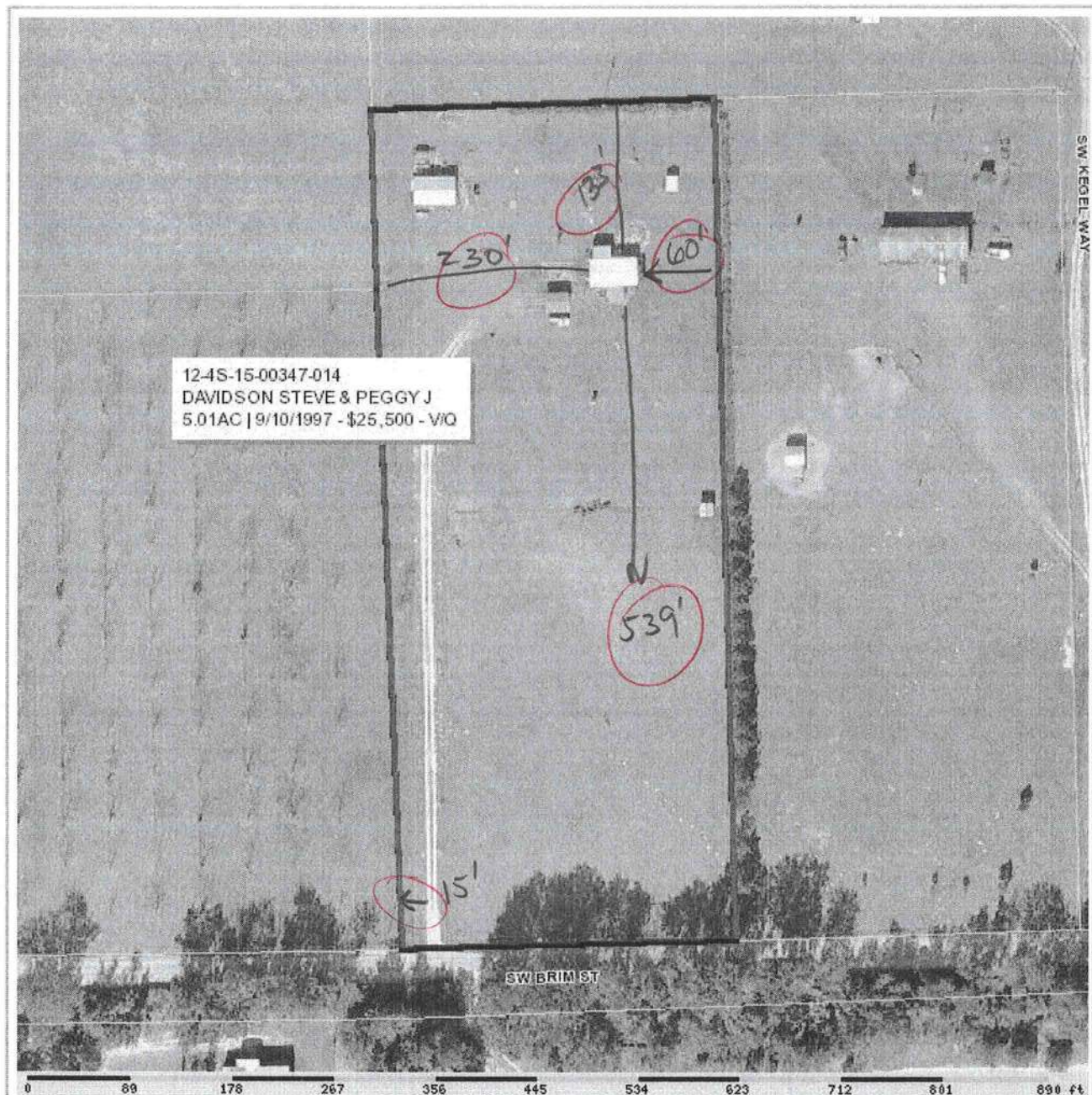
Skirting to be installed. Yes ✓ No ✓
Dryer vent installed outside of skirting. Yes ✓ N/A ✓
Range downflow vent installed outside of skirting. Yes ✓ N/A ✓
Drain lines supported at 4 foot intervals. Yes ✓
Electrical crossovers protected. Yes ✓
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Paul E. Wright

Date 5-11-12

site Plan



Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

PARCEL: 12-4S-15-00347-014 - MOBILE HOM (000200)

COMM SE COR OF SEC, RUN N 39 FT, W 939.98 FT FOR POB, CONT W 293.83 FT, N 732.16 FT, E 302.34 FT, S 732.14 FT TO POB. ORB 838-688, 845-140, 850-2119 &

NOTES:

Name:	DAVIDSON STEVE & PEGGY J			2011 Certified Values	
Site:	1623 SW BRIM ST			Land	\$34,476.00
Mail:	1623 SW BRIM ST			Bldg	\$5,281.00
	LAKE CITY, FL 32024			Assd	\$14,081.00
Sales	8/2/2011	\$100.00	I / U	Exmpt	\$14,081.00
Info	9/10/1997	\$25,500.00	V / Q	Taxbl	Cnty: \$0
					Other: \$0 Schl: \$0



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1205-30 CONTRACTOR Paul E. Albright PHONE 365-5314

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	Print Name <u>Steve Davidson</u>	Signature <u>[Signature]</u>	Phone #: <u>386-752-0489</u>
	License #: <u>Home owner</u>		
<input checked="" type="checkbox"/> MECHANICAL/ A/C <u>837</u>	Print Name <u>Chris Williams</u>	Signature <u>[Signature]</u>	Phone #: <u>386-752-8841</u>
	License #: <u>CAC057795</u>		
<input checked="" type="checkbox"/> PLUMBING/ GAS <u>820</u>	Print Name <u>Paul E Albright</u>	Signature <u>[Signature]</u>	Phone #: <u>386 365-5314</u>
	License #: <u>TH102 5239</u>		

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.

Contractor Forms: Subcontractor form: 1/11

WARRANTY DEED

THIS WARRANTY DEED, Made the 12th day of August 2011, by GAIL DEARVANG (A MARRIED PERSON-THIS IS NOT HER HOMESTEAD hereinafter called the GRANTOR, to STEVE L. DAVIDSON AND HIS WIFE PEGGY J. DAVIDSON whose post office address is 1623 SW BRIM ST. LAKE CITY, FL. 32024 hereinafter called the GRANTEE.

(Wherever used herein the terms GRANTOR and GRANTEE include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH, That the GRANTOR, for and in consideration of the sum of PAYOFF OF AN AGREEMENT FOR DEED and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the GRANTEE all that certain land situate in Columbia County, State of Florida, VIZ:

COMMENCE AT THE SOUTHEAST CORNER OF SEC. 12, TWP 4-S, R-15E, COLUMBIA COUNTY, FLORIDA, THENCE N 01 deg 42' 41" E 39.00 FT., THENCE N 89 deg 10' 24" W 939.98 FT., TO THE POINT OF BEGINNING, THENCE CONTINUE N 89 deg 10' 24" W 293.83 FT., THENCE N 00 deg 22' 41" E 732.16 FT., THENCE S 89 deg 10' 24" E 302.34 FT., THENCE S 01 deg 02' 38" W 732.14 FT. TO THE POINT OF BEGINNING. CONTAINING 5.01 ACRES MORE OR LESS.

SUBJECT TO: OUTSTANDING MINERAL INTERESTS

SUBJECT TO: UTILITY RIGHT OF WAY EASEMENTS

RESTRICTIONS: The property shall not be used to store junk (including junk cars). The property shall not be used as a dumping ground, or for the accumulation of garbage or other refuse, foul smelling matter. NO swine or poultry shall be kept on the property. No more than three (3) dogs are to be housed, penned, or kept on the lot. No activity may be carried on upon the property which is a nuisance to others. The discharge of firearms on any lot is prohibited, including but not limited to hunting and target practice. The purchaser, however, shall have the right to discharge a firearm in the protection of their life, family's safety, or property in accordance with the applicable governmental laws.

TAX ID. #: 12-4S-15-E- 347-014

TOGETHER, with all the tenements, hereditaments appurtenances thereto belonging or in anywise appertaining.

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

AND the GRANTOR hereby covenants with said GRANTEE that the GRANTOR has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except those mentioned above and except taxes accruing subsequent to December 31, 1997

IN WITNESS WHEREOF, the said GRANTOR has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Phyllis C. Redfern
WITNESS
(print) Phyllis A. Redfern

Gail Dearvang
GAIL DEARVANG (GRANTOR)

Deborah R. Dooley
WITNESS
(print) Deborah R. Dooley
STATE OF MICHIGAN
COUNTY OF WAYNE

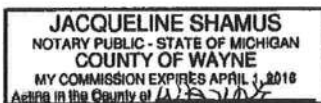
Inst. 201112013316 Date 9/1/2011 Time: 10:42 AM
Doc. Stamp: Deed 0.70
DC.P. DeWitt Cason, Columbia County Page 1 of 1 B:1220 P:1434

I HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, AN OFFICER DULY AUTHORIZED TO ADMINISTER OATHS AND TAKE ACKNOWLEDGMENTS, PERSONALLY APPEARED GAIL DEARVANG KNOWN TO ME TO BE THE PERSON(S) DESCRIBED IN AND WHO EXECUTED THE FORGOING INSTRUMENT, WHO ACKNOWLEDGED BEFORE ME THAT SHE EXECUTED THE SAME, AND AN OATH WAS NOT TAKEN. (CHECK ONE)

() SAID PERSON(S) IS/ARE PERSONALLY KNOWN TO ME
(X) SAID PERSON(S) PROVIDED THE FOLLOWING TYPE OF IDENTIFICATION
MICHIGAN DRIVERS LICENSE

WITNESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE LAST AFORESAID THIS 12th DAY OF AUGUST A.D. 2011.

J. S.
NOTARY PUBLIC



Columbia County Property Appraiser

CAMA updated: 5/2/2012

2011 Tax Year

Parcel: 12-4S-15-00347-014

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

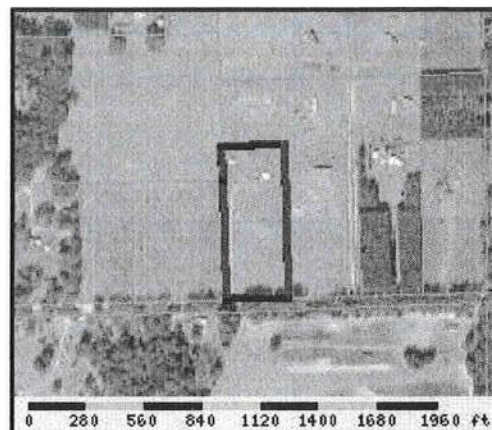
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	DAVIDSON STEVE & PEGGY J		
Mailing Address	1623 SW BRIM ST LAKE CITY, FL 32024		
Site Address	1623 SW BRIM ST		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	12415
Land Area	5.010 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM SE COR OF SEC, RUN N 39 FT, W 939.98 FT FOR POB, CONT W 293.83 FT, N 732.16 FT, E 302.34 FT, S 732.14 FT TO POB. ORB 838-688, 845-140, 850-2119 & WD 1220-1434		



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$34,476.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$5,281.00
XFOB Value	cnt: (2)	\$1,000.00
Total Appraised Value		\$40,757.00
Just Value		\$40,757.00
Class Value		\$0.00
Assessed Value		\$14,081.00
Exempt Value	(code: HX)	\$14,081.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

2012 Working Values

NOTE:

2012 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
8/2/2011	1220/1434	WD	I	U	30	\$100.00
9/10/1997	850/2119	AD	V	Q		\$25,500.00
9/4/1997	845/140	QC	V	U	01	\$24,500.00
4/22/1997	838/688	AD	V	U	13	\$25,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
2	MOBILE HME (000800)	1987	WD SHINGLE (14)	960	1376	\$5,281.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0020	BARN,FR	2005	\$800.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2005	\$200.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	5.01 AC	1.00/1.00/1.00/1.00	\$5,834.04	\$29,228.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

CAMA updated: 5/2/2012

1 of 1

DISCLAIMER

This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.



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, Paul E. Albright, give this authority for the job address show below
Installer License Holder Name

only, 1623 SW Brim St. Lake City FL 32024, 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)
Peggy J Davidson	<i>Peggy J Davidson</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

Paul E. Albright
License Holders Signature (Notarized)

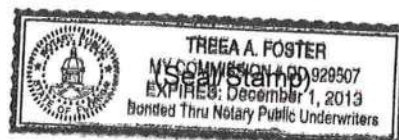
TH 1025239-15-11R
License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Paul Albright, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 11 day of May, 2012.

Shirley A. Foster
NOTARY'S SIGNATURE



1205-30

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Jerry Corbett - Live Oak
 OWNERS NAME Jerry Corbett PHONE 362-4948 CELL 590 0470
 INSTALLER Paul E Albright PHONE 386 365 5314 CELL _____
 INSTALLERS ADDRESS 1995 W Thomas Ter Lake City Florida

MOBILE HOME INFORMATION

MAKE Pioneer YEAR 2000 SIZE 28 X 60
 COLOR Clay SERIAL No. 6092
 WIND ZONE 2 SMOKE DETECTOR 2

INTERIOR:
 FLOORS OK
 DOORS OK
 WALLS OK
 CABINETS OK
 ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:
 WALLS / SIDING Vynle Lap
 WINDOWS Good
 DOORS Good

INSTALLER: APPROVED ✓ PEA NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Paul E Albright

Installer/Inspector Signature Paul E Albright License No. TH1025239/1 Date 5-11-12

NOTES: A Very Good Looking Home

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature Jay Caw Date 5-14-12

LH Called Corbetts 5-17-12 to Advise MH can be brought into Col. Co.

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: 5/11/2012 DATE ISSUED: 5/14/2012

ENHANCED 9-1-1 ADDRESS:

1623 SW BRIM ST

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

12-4S-15-00347-014

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR REPLACEMENT STRUCTURE.

Address Issued By: SIGNED: / RONAL N. CROFT
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.



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

12-02542
PERMIT NO. _____
DATE PAID: 05/10/2012
FEE PAID: 125.00
RECEIPT #: 12-PID-1856480

APPLICATION FOR:

[] New System [x] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Steve and Peggy Davidson

AGENT: Owner

TELEPHONE: 386-752-0489

MAILING ADDRESS: 1623 SW Brim St. Lake City, FL 32024

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 12-45-15-00347-014 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 1623 SW Brim St. Lake City, FL 32024

DIRECTIONS TO PROPERTY: 90W to Pinemount - (L) Dekle (R) Brim
1/2 mile on (R)

BUILDING INFORMATION

[] RESIDENTIAL

[] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	28x60	Snd 43	1680	
2				
3				
4				

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

SIGNATURE: Peggy J. Davidson

DATE: 5-10-12

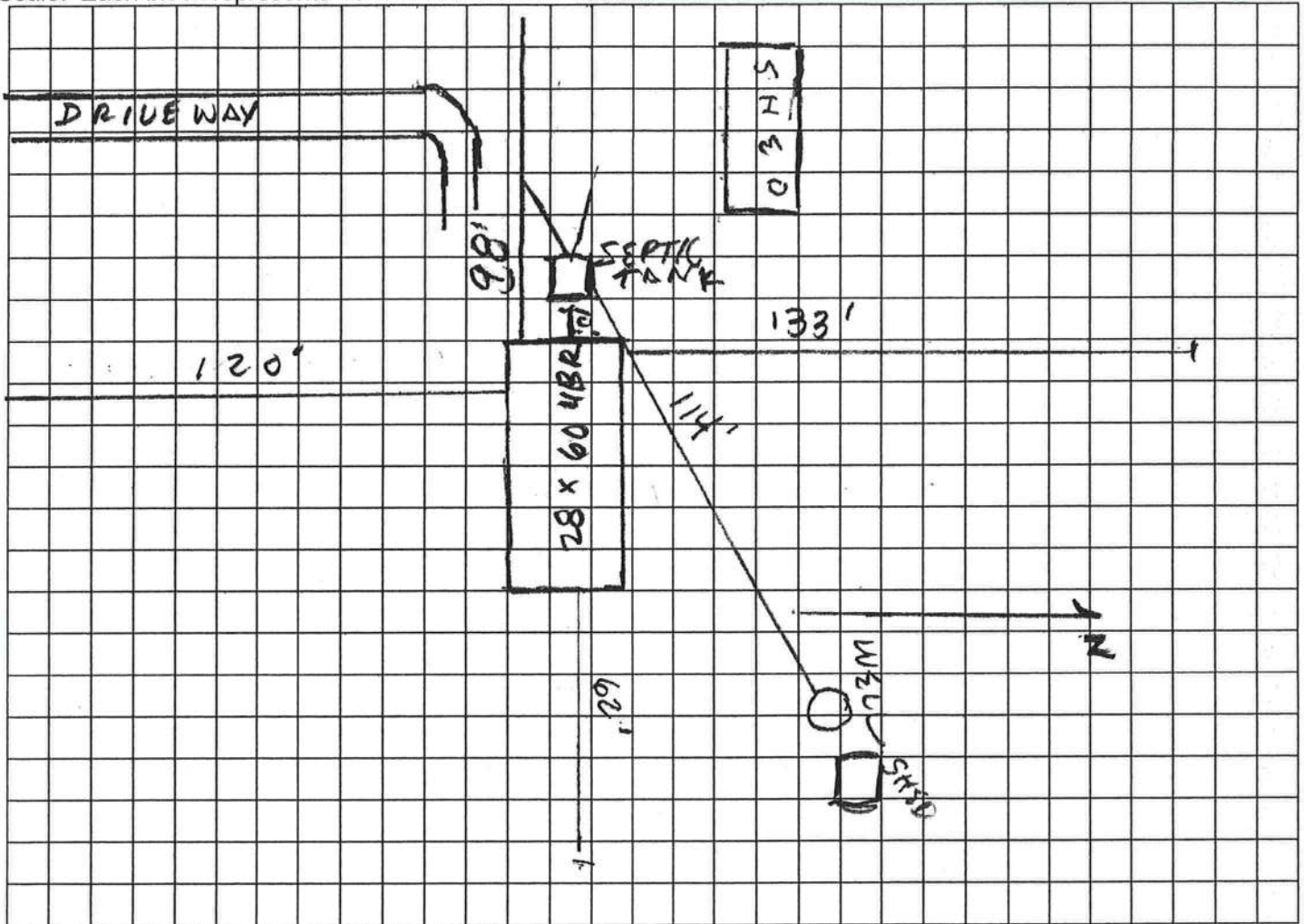
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

12.0254-E

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes:

1 acre of 5

Site Plan submitted by:

Plan Approved ☒

Not Approved ☐

Date 5-10-12

By Peggy J. Dandisi

Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1205-30

DATE RECEIVED 5-21-12 BY CH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Steven & Peggy Davidson PHONE 752-0489 CELL _____

ADDRESS 1623 SW Brim St Lake City, FL 32024

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Take Pinemount, (C) Delde, (C) Brim
Yzmond (C) See (1623)

MOBILE HOME INSTALLER Paul Albright PHONE _____ CELL 305-5314

MOBILE HOME INFORMATION

MAKE Pioneer YEAR 00 SIZE 28 X 60 COLOR 2000

SERIAL No. 6092

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

Date of Payment: 5-11-12

Paid By: Davidson

Notes: _____

_____ 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 / SIDING () 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 _____ ID NUMBER _____ DATE _____

Verbal
OK
5-21-12
TC

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

1205-30

DATE RECEIVED 5-21-12 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

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STATUS

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE John Green ID NUMBER 304 DATE 5-21-12