	This Porm		Bullding Pe		000023747
APPLICANT ANGI	ELA KNOWLES	it Expires one re	PHONE	754-8886	
ADDRESS 401	SW DARWIN GLE	N	LAKE CITY	<u>I</u>	FL 32024
OWNER ANGI	ELA KNOWLES		PHONE	754-8886	
ADDRESS 401	SW DARWIN GLE	N	LAKE CITY	<u>I</u>	FL 32024
CONTRACTOR	JOE CHATMAN		PHONE	497-2277	
LOCATION OF PRO			CHETUCKENEE ROAD,	TR ON DARWIN	
		THE END DRIVEWA		NAME OF TAXABLE PARTICINA	00
TYPE DEVELOPME	NT MH,UTILITY	ES	STIMATED COST OF CO		
HEATED FLOOR AF	LEA	TOTAL ARI	EA	HEIGHT00	STORIES
FOUNDATION _	WAL	LS I	ROOF PITCH	FLOO	OR
LAND USE & ZONI	NG A-3		MAX	. HEIGHT	
Minimum Set Back Ro	equirments: STREET-	FRONT 30.00	REAR	25.00 S	IDE 25.00
NO. EX.D.U. 0	FLOOD ZONE	x	DEVELOPMENT PER	MIT NO.	
	openfinal Sport Sport (1990)			-	
PARCEL ID 25-5S	5-15-00479-005	SUBDIVISIO	Back around	Wiles 100 MANAGEMENT	
LOT BLOO	CK PHASE .	UNIT _	TOT.	AL ACRES	
				Check # or Cash	1 CASH
T P	FOR BU		NG DEPARTMENT		(footer/Slab)
Temporary Power _		Foundation		Monolithia	
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NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

## This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only Zoning OfficialBuilding Official OK 57H 10-19-0
AP# Date Received By
Flood Zone Y p 25 to Development Permit Zoning A 13 Land Use Plan Map Category Comments
FEMA Map # Elevation Finished Floor River In Floodway
Site Plan with Setbacks shown Environmental Health Signed Site Plan Env. Health Release
□ Well letter provided □ Existing Well Revised 9-23-04
Property ID 35-5S-15-00 479-005 Must have a copy of the property deed
New Mobile Home Used Mobile Home Year1990
Subdivision Information NA
Applicant angela Knowles Phone # 386-754 -8886
Address 401 Sw Darwin glen lake city if 1. 32024
Name of Property Owner Lee Perry Phone# 752-6190
911 Address SAmo as above
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progressive Energy
Name of Owner of Mobile Home <u>Circle 14 Knowles</u> Phone # 386-7548886
Relationship to Property Owner
Current Number of Dwellings on Property
Lot Size 10.8 acreS Total Acreage 10.8 acreS
Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
Driving Directions 47 South to 240. Make Right on 240-
make lefton old Idutuknee Kd 1. Righton Dorwinger
Follow to dead end, make night on last or mewers
Is this Mobile Home Replacing an Existing Mobile Home NO
A.
Name of Licensed Dealer/Installer <u>Joe ChAlman</u> Phone # <u>186-497-227</u>
Installers Address 9241 SW 45 Hwy 27 FT. White FL. J2038
License Number <u>TH-0000 240</u> Installation Decal # <u>253956</u>

Business
Plumbing
onnect electrical conductors between multi-wide units, but not to the main power course. This includes the bonding wire between mult-wide units. Pg.
Electrical
Date Tested 16-12-05
Installer Name Joseph A CHAIMAN
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 2 9 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 archors.
TORQUE PROBE TEST
×
3. Using 500 lb. increments, take the lowest reading and round down to that increment.
2. Take the reading at the depth of the footer.
1. Test the perimeter of the home at 6 locations.
POCKET PENETROMETER TESTING METHOD
×   × 
The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.
POCKET PENETROMETER TEST

Connect all potable water supply piping to an existing water meter, water tap, or other

Installer Signature

manufacturer's installation instructions a

fid or Rate 15C-1 & 2

Date 10-12-05

independent water supply systems. Pg.

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

Installer verifies all information given with this permit worksheet

is accurate and thue based on the

Type gasket Pg. a result of a poorly installed or no gasket being installed. I understand a strip Dryer vent installed outside of skirting. Yes N//
Range downflow vent installed outside of skirting. Yes Skirting to be installed. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Siding on units is installed to manufacturer's specifications. Yes of tape will not serve as a gasket Electrical crossovers protected. Walls: Roof: Floor: Drain lines supported at 4 foot intervals. Yes The bottomboard will be repaired and/or taped. Yes homes and that condensation, mold, meldew and buckled marriage walls are Water drainage: Natural Debris and organic material removed I understand a properly installed gasket is a requirement of all new and used will be centered over the peak of the roof and fastened with galv For used homes a/min. 30 gauge, 8"wide, galvanized metal strip Type Fastener:
Type Fastener: roofing nails at 2" on center on both sides of the centerline. Type Fastener: Gasket (weatherproofing requirement) Fastening multi wide units Swale Weatherproofing Site Preparation Miscellaneous Installer's initials No Installed: Length: Length: Length: / Bottom of ridgebeam Yes Between Walls Yes Between Floors Yes Spacing: Spacing: Spacing: Other NA

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: 05-1035-E ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT ERRY/CR 03-1479 Vacant 670 FT. North 10.08 acres Camper (temporary) V Site 1 TBM in 8" oak Site 2 a 14×70 250 270' to existing well Slope 870' Waterline Future house 2001 Existing well on adjacent property >75' from property line Unpaved \ drive Vacant 240' 271' Easement 1 inch = 60 feet Site Plan Submitted By 0/28/23 Plan Approved. ). Knowles CPHU Notes:

TO: COLUMBIA CO. HEALTH DES IL LEE B. PERRY OWNER OF 10 AC LOCATED AT 401 SW DARWIN GLA LAKE CITY FL. 32024 BIVE ANGELA KNOWLES PERMISSION
TO PULL AND SERMISSION
TO PLACE A MOBILE HOME
ON THE ABOVE GTATED 10 AC SEPTIC # 03-0958-1 TOR Kelvy LEE R SERAY 346 GW VELLEE CT MAKE CITY F1 32024 PHH (386) 752-6190 TAX ID 25-5-5 RISE 00 479 - 005

## CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

PRELIMINARY MOBILE HOME INSPECTION REPORT				
DATE RECEIVED 10-7-05 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?				
OWNERS NAME we Perry Angela Noels PHONE 386-754-8886 (FELL				
ADDRESS 345 Vellee Rd Lake Coty for 32055				
MOBILE HOME PARKSUBDIVISIONSUBDIVISIONSUBDIVISION				
DRIVING DIRECTIONS TO MOBILE HOME 47 S, (R) 240, (D) OLD Itch Rd, (R)				
Darwin flen to end all on the (d) on hill at				
MOBILE HOME INSTALLER JOE Charman PHONE 497-2272 CELL				
MOBILE HOME INFORMATION				
MAKE <u>Flectwood</u> YEAR 90 SIZE 14 x 70 COLOR Grey?				
SERIAL No. ? 0-21532 GA -270-5-C				
WIND ZONE Must be wind zone II or higher NO WIND ZONE I ALLOWED				
INTERIOR: INSPECTION STANDARDS  (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 REINSPECTION FOR FOLLOWING CONDITIONS				
SIGNATURE Day A ID NUMBER 706 DATE 10-11-05				
IN HOUSE TO THE TOTAL TO THE TOTAL TO THE TOTAL TOTAL TOTAL TO THE TOTAL				

## LIMITED POWER OF ATTORNEY

1, Joseph of CHOTM, license # IH-0000 240 hereby
authorize <u>Ongele Knowles</u> to be my representative and act on my behalf
in all aspects of applying for a mobile home permit to be placed on the following
described property located in County, Florida.
Property owner: Lee Perry
Sec <u>25</u> Twp. <u>6</u> S Rge <u>15 -</u> E
Tax Parcel No. 25-55-15-00479-005
Mobile Home Installer
<u>10 - 12 - 05</u> (Date)
Sworn to and subscribed before me this 12 day of 0000 n, 20 05.
Notary Public  Sandra J. Chavez  Commission # DD298602  Expires March 9, 2008  Bended Trey Faith - Indurance, Inc. 800-385-7016
My Commission expires:  Commission No.  Personally known:  Produced ID (Type) DL# C355-481-6 0-011-0

## MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

	_, license number IH_0000 240
do hereby state that the installation of the ma	
at	Applicant 40150 Dores for glew, JUKO 6:44fl. 32024
will be done under my supervision.	911 Address
Japho Clathun Signature	
Sworn to and subscribed before me this <u>/2</u> 20 <u>05</u> .	_ day of _OCTOBER,
Notary Public: Signature Signature	_
My Commission Expires:  Sandra J. Ch Commission # DE Expires March 9,	avez 0298602 2008
DURING ITOY Pain - Insurance, inc	BESTERATE MIN