## Parcel:

30-28-17-04800-111 (24219)

# **Owner & Property Info**

Result: 2 of 3

	<b>KOENIG HELGA</b>
Owner	P O BOX 37
	NEW PALTZ, NY 12561

Site

Description\* LOT 11 PINES OF FALLING CREEK. WD 1352-1536, WD 1356-54, WD 1398-191,

Area 1.08 AC

Use Code\*\* VACANT (0000)

S/T/R 30-2S-17 Tax District 3

APPLICATION NUMBER

CONTRACTOR Robert Sheppard

PHONE 386-623-2203

#### THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

### Helga Koenig

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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.

ELECTRICAL	Print Name	Glenn Whittington	Signature
	License #:	EC 13002957	Phone #: 386-972-1700
		Qualifier Form Attach	ed X
MECHANICAL/	Print Name	Ronald Bonds Sr.	Signature
A/C	License #:	CAC1817658	Phone #: 800-259-3470
		Qualifier Form Attach	ned X

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

#### LICENSED QUALIFIER AUTHORIZATION

(license holder name), licensed qualifier (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. DARBER	1
2. Locky Ford	2. Jorts Da
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized)

Date

NOTARY INFORMATION: STATE OF:

COUNTY OF: Celumbia

The above license holder, whose name is <u>GBM Whommeter</u> personally appeared before me and is known by me or has produced identification (type of I.D.) <u>FL DL</u> on this <u>day of</u> <u>MARLM</u>, 20<u>16</u>

TARY'S SIGNATURE



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160 LICENSED QUALIFIER AUTHORIZATION Lond (license holder name). licensed qualifier ENTERDENES (company name), do certify that for the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf. Printed Name of Person Authorized Signature of Authorized Person 3 3 4 4 5. 5.

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If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized)

CAC 1817658 2-16.14 License Number Date

NOTARY INFORMATION: COUNTY OF: STATE OF: TL

The above license holder. whose name is Rongla personally appeared before me and is known by me or has produced identification on this 14 day of 8 (type of I.D.)

Ging Hopkins

(Seal/Stamp)



	Installer: Lobert Shuppard License # THO2 5386 Address of home being installed Manufacturer MAMpDA NOTE: if home is a single wide fill out one half of the blocking plan if home is a triple or guad wide sketch in remainder of home understand Lateral Arm Systems cannot be used on any home (new or used) there the spacing Typical pier spacing Congludinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Inteller's initials I.S. THIS INCLUE AND	Mobile Home Permit Worksheet
FRAME TIES    Image: Tiedown components  within 2' of end of home spaced at 5' 4" oc spaced at 5' 4'' 4'' 4'' 4'' 4'' 4'' 4'' 4'' 4''	Image: Space of the Manufacturer's Installation Manual of the Manufacturer's Installation Manual of the Action Decal #  Image: Space of the Manual of the Manual of the Manufacturer's Installation Decal #  Image: Wind Zone II  Wind Zone	Application Number: Date:

Page 1 of 2

Mobile Home Permit Worksheet    POCKET PENETROMETER TEST    The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.    × 1000  x  000  x  000    NOCKET 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 increment  3. Using 500 lb. increments, take the lowest	Application Number:  Site Preparation    Debris and organic material removed Water drainage: Natural Swale Pad Other    Floor:  Type Fastener: Vags Length: 5 ' Spacing: 16 'the Nation Spacing: 16 'the Spacing
	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
The results of the torque probe test is 200 inch pounds or check here if you are declaring 5' anchors without testing . A test	Type gasket FUUM Pg. 24 FUUM Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes
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.	Weatherproofing    The bottomboard will be repaired and/or taped. Yes  . Pg.    Siding on units is installed to manufacturer's specifications. Yes  .    Fireplace chimney installed so as not to allow intrusion of rain water. Yes
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	Skirting to be installed. Yes <u>No</u> 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 <u>Standard</u> Electrical crossovers protected. Yes <u>Standard</u>
Electrical Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 24	Installer verifies all information given with this permit worksheet
Plumbing      Connect all sewer drains to an existing sewer tap or septic tank. Pg. $28$	manufacturer's installation instructions and or Rule 15C-1 & 2
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Installer Signature Kaluert Shupperd Date 3-1-2022

Page 2 of 2









## **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:	3/23/2022 8:36:36 PM
Address:	279 NW TAYLOR MAGEE PI
City:	LAKE CITY
State:	FL
Zip Code	32055
Parcel ID	04800-111

REMARKS: New address for Habitable structure (family home, business, etc.) on the parcel.

#### 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.

Address Issued By:

MOORE, DAVID R.

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



1905 South Main Street Gainesville, Florida 32601-8429 Phone: (352) 378-1444 www.georgefyoung.com

CIVIL & TRANSPORTATION ENGINEERING | ECOLOGY | GIS | LANDSCAPE ARCHITECTURE | PLANNING | SUBSURFACE UTILITY ENGINEERING

March 7, 2022

To whom it may concern

#### **RE: Site Bench Marks**

Dear recipient,

This letter is to certify the elevations of 2 site benchmarks established by George F Young, vertical information is expressed on the North American Vertical Datum of 1988 (NAVD88) and was established using GPS equipment operating on the FDOT Florida Permanent Reference Network and averaging several static observations. Horizontal information is expressed on the Florida State Plane Coordinate System, North Zone, North American Datum of 1983 (2011 Adjustment) and was established using GPS equipment operating on the FDOT Florida Permanent Reference Network and averaged from several static observations. The information for the benchmarks is as follows:

Nail and Disk in Pavement: Northing: 473112.24 Easting: 2551387.89 Elevation 132.14

Iron Rod and Cap at NE corner of home site Northing: 473328.63 Easting: 2551407.40 Elevation:130.62'

Sincerely,



Nathan Weber PSM 7115 Vice President Gainesville-Survey

