

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

<u>For Office Use Only</u> (Revised 7-1-15)		Zoning Official _____	Building Official _____
AP# _____	Date Received _____	By _____	Permit # _____
Flood Zone _____	Development Permit _____	Zoning _____	Land Use Plan Map Category _____
Comments _____			
FEMA Map# _____	Elevation _____	Finished Floor _____	River _____ In Floodway _____
<input type="checkbox"/> Recorded Deed or <input type="checkbox"/> Property Appraiser PO <input type="checkbox"/> Site Plan <input type="checkbox"/> EH # _____ <input type="checkbox"/> Well letter OR <input type="checkbox"/> Existing well <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Installer Authorization <input type="checkbox"/> FW Comp. letter <input type="checkbox"/> App Fee Paid <input type="checkbox"/> DOT Approval <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> STUP-MH _____ <input type="checkbox"/> 911 App <input type="checkbox"/> Ellisville Water Sys <input type="checkbox"/> Assessment _____ <input type="checkbox"/> Out County <input type="checkbox"/> In County <input type="checkbox"/> Sub VF Form			

Property ID # 21-75-17-10084-001 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 14x56 Year 2021
- Applicant Sonya North Phone # 863-517-5701
- Address 3311 Sw State Rd 247 Lake City, FL 32024
- Name of Property Owner Frank Hutcheon Phone# 561-313-3106
- 911 Address 1290 Sw Acie James Rd High Springs, FL 32643
- Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Frank Hutcheon Phone # 561-313-3106  
 Address 170 Shore Dr Riviera Beach, FL 33414
- Relationship to Property Owner \_\_\_\_\_
- Current Number of Dwellings on Property 0
- Lot Size 6660 X 1326 Total Acreage 20
- 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)  
Replacement home
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property Turn R on Baya, L on US-441, L on US-41, R, R onto Sw Acie James Rd follow all the way around until you come to a gate that has posted "1290" on it
- Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- Installers Address 6355 SE CR 245 Lake City, FL 32025
- License Number IH1025386 Installation Decal # 61904

opened Gate is not locked & can

DATE OF BIRTH	
BUYER	
CO-BUYER	11/27/1952

IRONWOOD HOMES OF LAKE CITY LLC

4109 WEST U.S. HIGHWAY 90

Lake City, FL 32055

(386) 754-8844 fax (386) 7540190

BUYER HUTCHEON FRANK EADIE	PHONE 561-313-3106	DATE 5/18/2021
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ADDRESS 170 SHORE DR RIVERA BEACH FL 33404-2419	SALES PERSON MIKE COX
DELIVERY ADDRESS 1290 SW ACIE JAMES RD HIGH SPRINGS FL 32643	

MAKE & MODEL LIVE OKA HOMES L-4562A-R	YEAR 2021	BEDROOMS 2X2	FLOOR SIZE 14X56	HITCH SIZE L 32 14X60
SERIAL NUMBER LOHGA20036477	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		COLOR	
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	
CEILING				
EXTERIOR				
FLOORS				

This insulation information was furnished by the manufacturer and is disclosed

in compliance with the Federal Trade Commission Rule 16CFR, Sec. 460.16.

NON-TAXABLE ITEMS			
<b>LAND IMPROVEMENT COST</b>		<b>FHA 3RD PARTY FEES</b>	
		SURVEY	
		Insurance	\$0.00
			\$0.00
<b>IMPACT FEES</b>	<b>CUSTOMER</b>	<b>FLOOD</b>	
PERMITS...ALL	\$1,200.00	CREDIT REPORT	
DIRT PAD	\$1,400.00	Appraisal	\$0.00
SEPTIC TANK	NA	Attorney Fees	\$0.00
	NA	Mortgage Co. Fees	
<b>DRAIN FIELD MOIFICATION</b>		<b>FHA WATER TEST</b>	
WELL	\$3,900.00	Inspection	\$0.00
DEL & SET	\$5,500.00		
AC UNIT	include	Inspection	
WIRING, HOUSE	\$2,600.00	Water Test	\$0.00
SKIRTING	include	Plot Plan	\$0.00
STEPS X2	include	Soil Test	\$0.00
PLUMBING HOUSE	\$895.00		
TAPE & TEXTURE TRIM OUT	NA	<b>FHA 3RD PARTY FEES</b>	
TRIM OUT	NA	Other	\$0.00
			<b>\$15,495.00</b>

NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE			
DESCRIPTION OF TRADE-IN	YEAR	SIZE	
MAKE	MODEL	BEDROOMS	
TITLE NO.	SERIAL	COLOR	
AMOUNT OWING TO WHOM	NO.		

ANY DEBT BUYER OWES ON THE TRADE-IN IS TO BE PAID BY THE ☐ DEALER ☐ BUYER

THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures Buyer is purchasing the above described trailer, manufactured home or vehicle, the optional equipment and accessories, the insurance as described has been voluntary. that Buyer's trade-in is free from all claims whatsoever, except as noted.

BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER HAS READ AND UNDERSTANDS THE BACK OF THIS AGREEMENT.

By 	#REF1	DEALER	BUYER 
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent		SOCIAL SECURITY NO.	BUYER
APPROVED		SOCIAL SECURITY NO.	

PROPOSED DELIVERY DATE TBD	KEY NUMBERS
BASE PRICE OF UNIT	\$46,900.00
OPTIONAL EQUIPMENT (Taxable)	\$0.00
Other (non-taxable)	\$15,495.00
SUB-TOTAL	\$62,395.00
SALES TAX 6%	\$3,743.70
If Base Price < \$5,000 1%	\$0.00
County Surtax (Sales price over \$5,000)	\$50.00
Tag & Title Fees	\$180.00

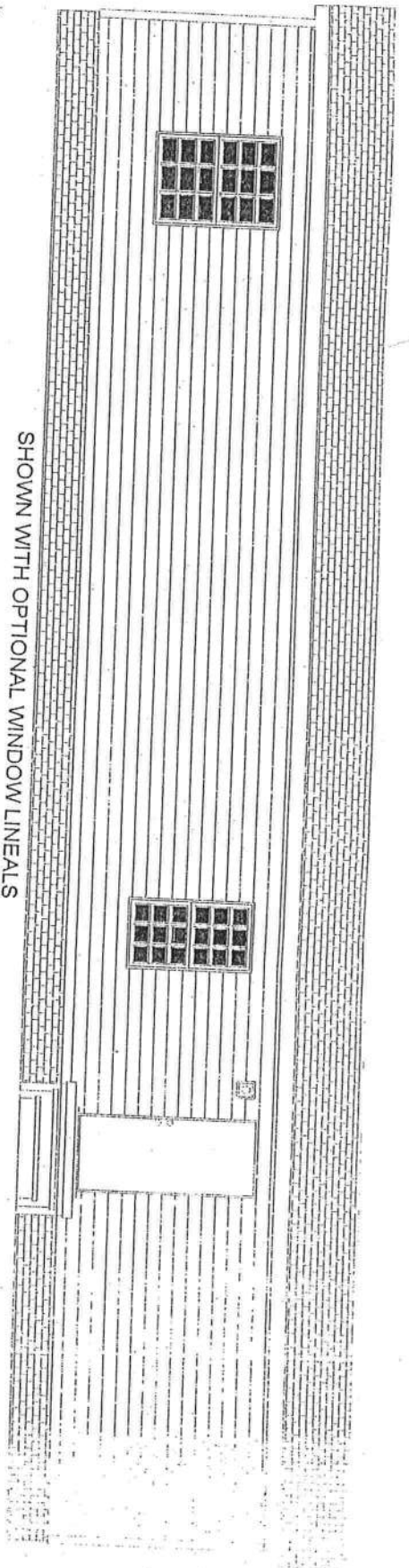
LAND PURCHASE	
CLOSING COST	
Points	\$0.00
Security Interest	\$0.00
1. CASH PURCHASE PRICES	\$66,368.70
TRADE IN ALLOWANCE	\$
LESS BAL. DUE ON ABOVE	\$
NET ALLOWANCE	\$
	\$ 0.00
PRE PAIDS	\$
2. LESS TOTAL CREDITS	\$ 66,368.70
SUB-TOTAL	\$ 0.00
SALES TAX (not included above)	\$0.00
3. UNPAID BAL. OF CASH SALE PRICE	\$ 0.00

REMARKS:  
NO VERBAL AGREEMENTS WILL BE HONORED.  
Initial: \_\_\_\_\_

Connect water & sewer within 20 ft. to existing facilities  
Customer responsible for any gas or electrical hookups  
Wheels & Axles deleted from sale price of home. Will lend for a local move

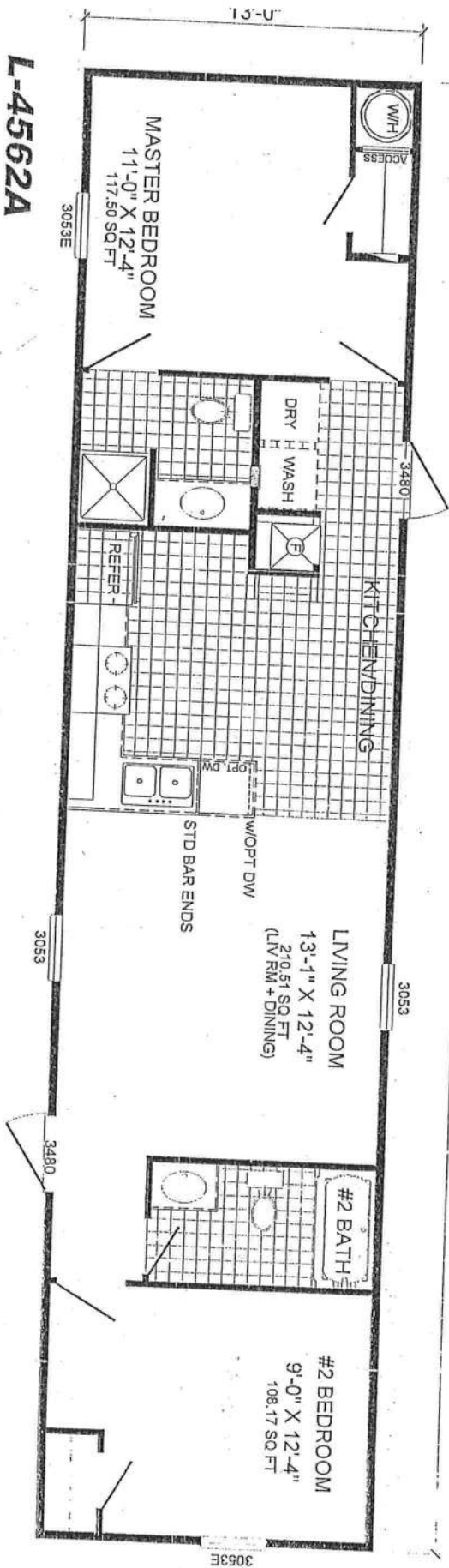
Customer responsible for releveling of home after initial setup.  
Cannot be responsible for settling of land.

PRICE INCLUDES SET-UP A/C STEPS AND STANDARD WHITE SKIRTING



SHOWN WITH OPTIONAL WINDOW LINEALS

56'-0"



**L-4562A**  
**2-BEDROOM / 2-BATH**  
**14 X 56 - Approx. 728 Sq. Ft.**

Date: 2-18-2014

\* All room dimensions include closets and square footage figures are approximate.





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 AGENT AUTHORIZATION

I, Robert Sheppard, give this authority and I do certify that the below  
Installers Name

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	Agents Company Name
Sonya North	Sonya North	Provision permitting

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.

Robert Sheppard

License Holders Signature (Notarized)

TH-1025386

License Number

5-21-2021

Date

## NOTARY INFORMATION:

STATE OF: Florida

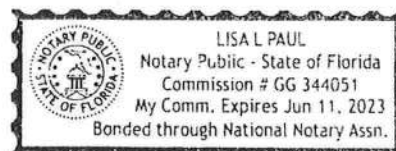
COUNTY OF: Suwannee

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) \_\_\_\_\_ on this 21st day of May, 20 21.

Lisa L. Paul

NOTARY'S SIGNATURE

(Seal/Stamp)



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

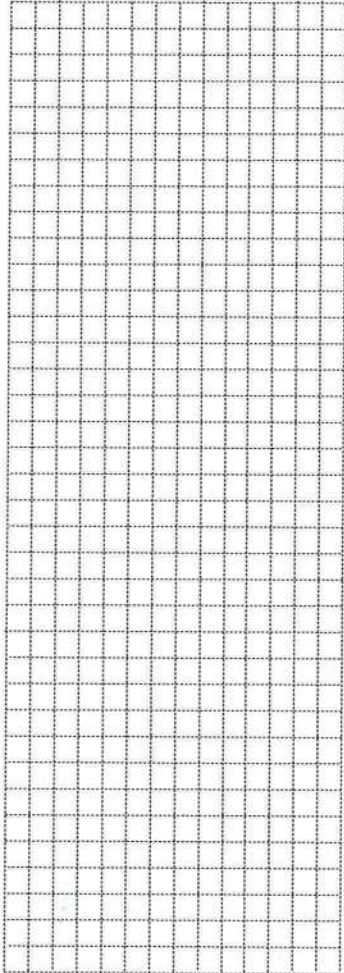
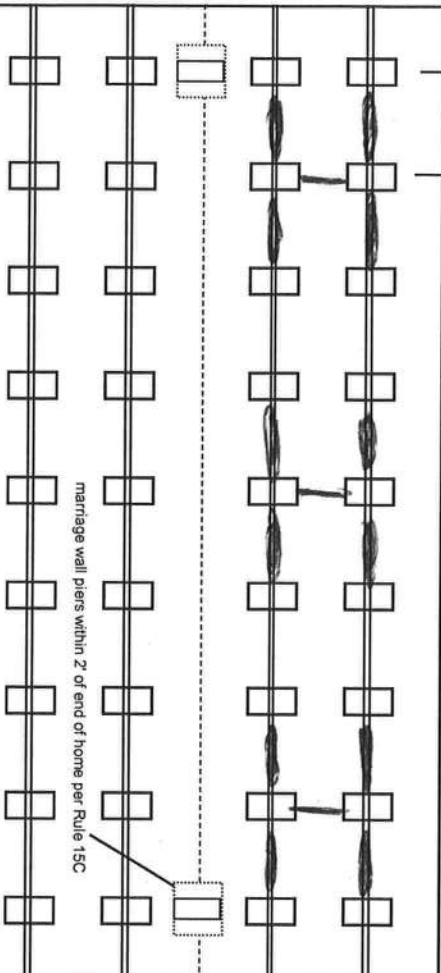
Installer: Robert Shepard License # TH-1025386

Address of home being installed: 1290 SW Ache James Rd.  
High Springs, FL 32643

Manufacturer: Live Oak Length x width: 56x14

**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: R.S.



New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual  
Home is installed in accordance with Rule 15-C

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 61904

Triple/Quad ☐ Serial # LDHGA20036477

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	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 psf	3'	4'	5'	6'	7'	8'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

\* Interpolated from Rule 15C-1 pier spacing table.

### PIER PAD SIZES

I-beam pier pad size: 17x25  
Perimeter pier pad size: 16x16  
Other pier pad sizes (required by the mfg.): 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: \_\_\_\_\_

### POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

### ANCHORS

4 ft ☒ 5 ft \_\_\_\_\_

### FRAME TIES

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

### OTHER TIES

### TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
Manufacturer: DMC-1101R

Sidewall Longitudinal Marriage wall Shearwall  
Number: 26  
4



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

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

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

### 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 \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

## TORQUE PROBE TEST

The results of the torque probe test is 295 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.

**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 require anchors with 4000 lb holding capacity.

R.S. Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

5-21-2021

## 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. 29

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

## Site Preparation

Debris and organic material removed ☒  
Water drainage: Natural ☒ Swale ☐ Pad ☒ Other ☐

## Fastening multi wide units

Floor: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Walls: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Roof: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
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 R.S.

Type gasket \_\_\_\_\_

Installed: ☒  
Between Floors Yes ☒  
Between Walls Yes ☒  
Bottom of ridgebeam Yes ☒

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 29  
Siding on units is installed to manufacturer's specifications. Yes ☒  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

## 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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Robert Sheppard Date 5-21-2021

# Columbia County Property Appraiser

Jeff Hampton

**2021 Working Values**

updated: 5/13/2021

Parcel: << 21-7S-17-10034-001 (37584) >>

## Owner & Property Info

Result: 1 of 1

Owner	HUTCHEON FRANK 170 SHORE DR RIVIERA BEACH, FL 33404		
Site	1290 ACIE JAMES RD, HIGH SPRINGS		
Description*	S1/2 OF NE1/4 OF NW1/4. 574-138, 705-079, 743-1991, 945-383, WD 1214-80, WD 1214-81, WD 1435-389,		
Area	20 AC	S/T/R	21-7S-17
Use Code**	TIMBERLAND 80-89 (5500)	Tax District	3

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

## Property & Assessment Values

2020 Certified Values		2021 Working Values	
Mkt Land	\$6,819	Mkt Land	\$6,850
Ag Land	\$7,562	Ag Land	\$7,562
Building	\$0	Building	\$0
XFOB	\$700	XFOB	\$700
Just	\$48,209	Just	\$48,241
Class	\$15,081	Class	\$15,112
Appraised	\$15,081	Appraised	\$15,112
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$15,081	Assessed	\$15,112
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$15,081 city:\$15,081 other:\$15,081 school:\$15,081	Total Taxable	county:\$15,112 city:\$0 other:\$0 school:\$15,112

Aerial Viewer Pictometry Google Maps

2019 2016 2013 2010 2007 2005 ☒ Sales



## ▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
4/14/2021	\$240,000	1435/0389	WD	I	Q	01
4/28/2011	\$52,000	1214/0081	WD	I	Q	01
4/28/2011	\$52,000	1214/0080	WD	I	Q	01
1/25/2002	\$100	0945/0383	WD	V	U	01
7/25/1989	\$35,000	0705/0079	WD	V	U	
7/1/1984	\$44,000	0548/0264	WD	V	Q	

## ▼ Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
NONE					

## ▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
0040	BARN,POLE	2017	\$200.00	1.00	0 x 0
0040	BARN,POLE	2005	\$500.00	1.00	0 x 0

## ▼ Land Breakdown

Prepared by and return to:

Brent E. Baris, P.A.

Brent Baris, Esq.

18731 NW US Highway 441

High Springs, FL 32643

(386) 454-0688

File Number: 21-156C

Parcel Identification No. 21-7S-17-10034-001

[Space Above This Line For Recording Data]

## Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

**This Indenture** made this 14th day of April, 2021 between Donald Barber, a married man and Duane D. Barber, a married man whose post office address is 450 SW Janis Way, High Springs, FL 32643 of the County of Columbia, State of Florida, grantor\*, and Frank Hutcheon, a single man whose post office address is 170 Shore Dr., Riviera Beach, FL 33404 of the County of Palm Beach, State of Florida, grantee\*,

**Witnesseth**, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in **Columbia County, Florida**, to-wit:

**THE SOUTH ONE HALF OF THE NORTHEAST ONE QUARTER OF THE NORTHWEST ONE QUARTER OF SECTION 21, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA.**

**TOGETHER WITH A NON-EXCLUSIVE PERPETUAL EASEMENT OVER AND ACROSS THE EAST 30 FEET OF THE NORTH ONE HALF OF THE NORTHEAST ONE QUARTER OF THE NORTHWEST ONE QUARTER, AND A NONEXCLUSIVE PERPETUAL EASEMENT OVER AND ACROSS THE NORTH 60 FEET OF THE NORTHWEST ONE QUARTER OF THE NORTHEAST ONE QUARTER, ALL BEING IN SECTION 21, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA.**

Subject to taxes for 2021 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

Grantor, Duane D. Barber, warrants that at the time of this conveyance, the subject property is not his homestead within the meaning set forth in the constitution of the state of Florida, nor is it contiguous to or a part of homestead property. Grantor's residence and homestead address is: 450 SW Janis Way, High Springs, FL 32643.

Grantor, Donald Barber, warrants that at the time of this conveyance, the subject property is not his homestead within the meaning set forth in the constitution of the state of Florida, nor is it contiguous to or a part of homestead property. Grantor's residence and homestead address is: 168 SW 320<sup>th</sup> Ave., Steinhatchee, FL 32359.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

\* "Grantor" and "Grantee" are used for singular or plural, as context requires.



**In Witness Whereof**, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

*Morgan Benton*  
Witness  
Printed Name: Morgan Benton

*D. Barber*  
Duane D. Barber

*Ronald Carter*  
Witness  
Printed Name: Ronald Carter

*Donald Barber*  
Donald Barber

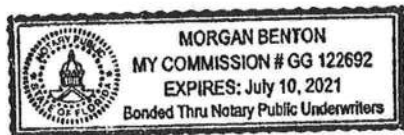
*Morgan Benton*  
Witness  
Printed Name: Morgan Benton

*Ronald Carter*  
Witness  
Printed Name: Ronald Carter

State of Florida  
County of Columbia

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 14th day of April, 2021 by Duane D. Barber and Donald Barber who ☐ are personally known or ☒ have produced drivers' licenses as identification.

[Seal]



*Morgan Benton*  
Notary Public  
Print Name: Morgan Benton  
My Commission Expires: July 10, 2021

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Robert Sheppard PHONE 386-1023-220

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.*

ELECTRICAL	Print Name <u>Glen Whittington</u> License #: <u>EC13002957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Glen Whittington</u> Phone #: <u>386-1084-10001</u>
MECHANICAL/ A/C _____	Print Name _____ License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature _____ Phone #: _____

*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.

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_

CONTRACTOR

Robert Sheppard PHONE 386-623-2203

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

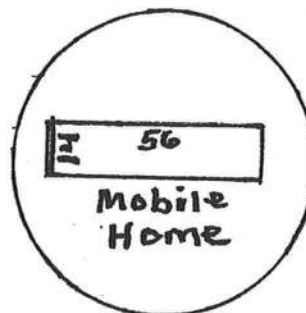
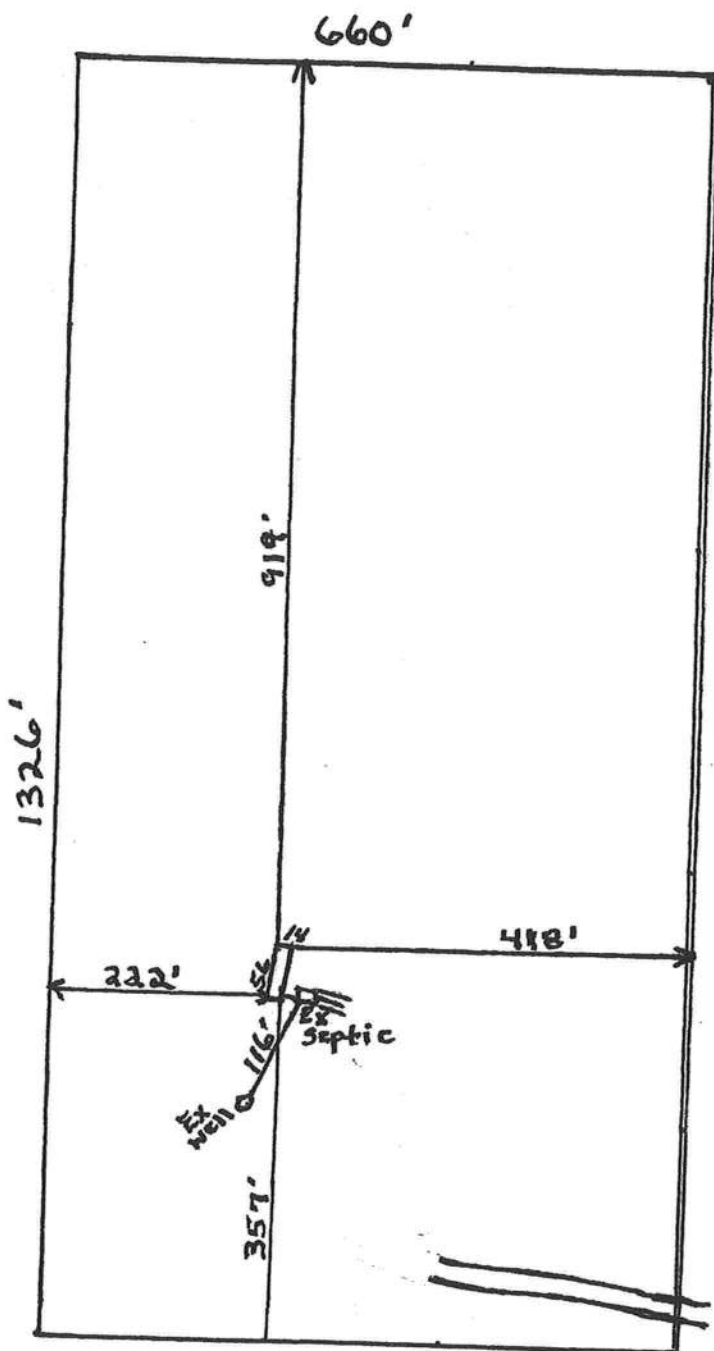
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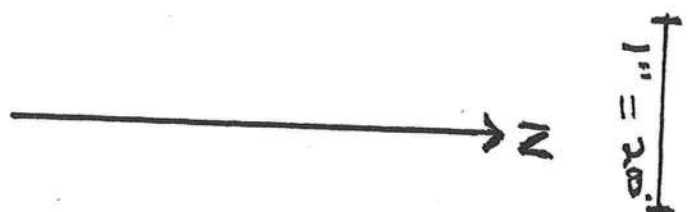
ELECTRICAL	Print Name _____ Signature _____ License #: _____ Phone #: _____ Qualifier Form Attached <input type="checkbox"/>
MECHANICAL/ A/C _____	Print Name <u>Ronan Bonos</u> Signature <u>[Signature]</u> License #: <u>CAC817658</u> Phone #: <u>850-514-0592</u> Qualifier Form Attached <input type="checkbox"/>

**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.





Hutcheon  
1290 SW Acie James Rd



## TAX PARCEL #21-7S-17-10034-001

1290 ACIE JAMES ROAD  
HIGH SPRINGS, FL. 32643



NO. 15, ONE HUNDRED AND FIFTY

David

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