	nty Bullaing Permit PERMIT one Year From the Date of Issue 000025023
APPLICANT STACY BECKHAM Glen William	PHONE 352 745-2738
ADDRESS 269 SW PARKER LANE	<u>LAKE CITY</u> <u>FL</u> <u>32024</u>
OWNER RANDY HORTON	PHONE 961-8081
ADDRESS 191 NE JAMES AVE	LAKE CITY FL 32024
CONTRACTOR STACY BECKHAM	PHONE 352 745-2738
LOCATION OF PROPERTY 90E, TL ON CRAIG AVE,	5TH LOT ON LEFT
TYPE DEVELOPMENT MH,UTILITY	ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTA	AL AREA HEIGHT STORIES
FOUNDATION WALLS	ROOF PITCH FLOOR
LAND USE & ZONING CI	MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT	20.00 REAR 15.00 SIDE 5.00
NO. EX.D.U. 0 FLOOD ZONE X	DEVELOPMENT PERMIT NO.
PARCEL ID 33-3S-17-06500-000 SUBD	IVISION R & J MHP
LOT 4 BLOCK PHASE UN	IIT TOTAL ACRES
EXISTING 06-0820-E BK Driveway Connection Septic Tank Number LU & COMMENTS: ONE FOOT ABOVETHE ROAD, 2.3.8 NON-CO	& Zoning checked by Approved for Issuance New Resident ONFORMING LEGAL MH PARK
	Check # or Cash 515
Temporary Power Foundation	ONING DEPARTMENT ONLY (footer/Slab) Monolithic
date/app. by	date/app. by date/app. by
Under slab rough-in plumbing	Slab Sheathing/Nailing
Framing Rough in plum	date/app. by date/app. by
Rough-in plum	bing above slab and below wood floor date/app. by
Electrical rough-in Heat & Air Du	
date/app. by	date/app. by date/app. by
Permanent power C.O. Final	date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing	Pool
Reconnection Pump pole	date/app. by Utility Pole
date/app. by M/H Pole Travel Trailer	date/app. by date/app. by Re-roof
date/app. by	date/app. by date/app. by
BUILDING PERMIT FEE \$ 0.00 CERTIFICATION	ON FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 200.00 ZONING CERT. FEE \$	50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ / FLOOD ZONE FEE \$	
INSPECTORS OFFICE TO TENT	——————————————————————————————————————
INDITIONS OFFICE / WILL COOP	CLERKS OFFICE

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.

AND THE PROPERTY WANDE OF THE INSTALLATION APPLICATION
For Office Use Only (Revised 6-23-05) Zoning Official Off
AP# 0609-19 Date Received 5-8-66 By CH Permit # 75022
Flood Zone X Development Permit NA Zoning Land Use Plan Map Category Comments
2.3.8 non-conforming legal MA Park
FEMA Map# Elevation Finished Floor * River In Floodway
Site Plan with Setbacks Shown EH Signed Site Plan EH Release Well letter Existing well
Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer
Property ID # 8-33-35-17-06500-000 Must have a copy of the property deed
New Mobile Home Used Mobile Home Year // // Year // // // Year // //
· Applicant Stack Breathern
- Applicant Stay Beetham Phone # 352-745-8758 - Address 268 Sur Perto W. Lyte Colly 9672014
Name of Branch Council Co.
Name of Property Owner Randy Horton Phone# 961-8081 911 Address AV NE Crain for Luk Ch Al. 30.78
Circle the correct nower company
(Circle One) - Suprementation of the Circle One)
T TOGIESS ENERGY
Name of Owner of Mobile Home Randy Hontag Phone # 961-8081 Address 1721 Fast Doval
Relationship to Property Owner
Current Number of Dwellings on Property
- Lot Size Block & Highand 1st Spotal Acreage 8 Ac 2.985
Do you : Have an Existing Drive or need a <u>Culvert Permit</u> or a <u>Culvert Waiver</u> (Circle one)
Is this Mobile Home Replacing an Existing Mobile Home
Driving Directions to the Property Of Craice Property Sth Let M Of Craice Property Of Craice Pro
Lest bot #4
Name of Licensed Dealer/Installer Stack Beckham Phone # 72-745-27.33
Installers Address 269 Sw Renter LN lake Ch N 72026
License Number 146000 5/2 Installation Decal # 014949

Pam - 961-8081

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CKCCE PKCEE IEST

showing 275 inch pounds or less will require 4 foot anchors. here if you are declaring 5' anchors without testing The results of the torque probe test is inch pounds or check

Note: A state approved lateral arm system is being used and 4 ft. reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft requires anchors with 4000 lb betting capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

This includes the bonding wire between mult-wide units. electrical conductors between multi-wide units, but not to the main power

source. Connect

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

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

Electrical crossovers protected. Drain lines supported at 4 foot intervals. Yes Range downflow vent installed outside of skirting. Dryer 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 The bottomboard will be repaired and/or taped. Yes ğ Miscellaneous 8 Š S ¥ ĕ

Installer Signature Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the Date Ski

RELIMINARY MOBILE HOME INSPECTION REPORT

RELIMINARY MOBILE HOME INSPECTION REPORT
DATE RECEIVED 4-6-06 BY CH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME Randy Horton PHONE 697-9292 CELL Ken
ADDRESS 1721 E Duvalst.
MOBILE HOME PARKSUBDIVISION
DRIVING DIRECTIONS TO MOBILE HOME FOE, L Craig Ave, Lot 4 on (1)
MOBILE HOME INSTALLER
MOBILE HOME INFORMATION
MAKE Flintstone YEAR 8 / SIZE 14 x 52 COLOR While / The Time
SERIAL NO. 45 485142 FB 2967 GA WIND JONE TO THE MAN HOLD HOLD TO BE SERIAL NO. 45 48514 Geo 28716
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
WALLS () SOLID + STRUCTURALLY UNSOUND Rother boards around windows
WALLS () SOLID HISTRUCTURALLY UNSOUND Rotter boards around windows
WINDOWS () OPERABLE () INOPERABLE
PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING OUTLET COVERS MISSING 1 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 SEC above at home
prost of white that year
7. 18-06
SIGNATURE Day A DATE Y-6-06
Ken Rich sold homes!

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MANUFACTURING



Flintatone Industries, Inc. P. O. Box 587 Ocilla, Georgia 31774 Ph. (912) 468-7464

COMPLIANCE CLATIFICATE

Date of Manufacture

F\$49\$142FB2967GA 201 1984

Manufacturer's Serial Number and Model Unit Designation

HWC

Design approval by (D.A.P.(A.)

If guestions reporting the operation, maintenance, warranty or performance of this mobils home should arise places contact the dealer from whom it was purchased, the manufacturing plant listed below arts

Armore to most questions reporting operation, installation, melabonards and design aspectables are found in the appropriate sections of the average resintances and interested installation installation installation terminal with each mobile home.

This mobile home is designed to comply with the federal mobile home safety standard in force at the time of manufacture. The factory installed equipment includes: Hanyles were Model No. Equipment Enultment Manufacture Coleman 7555-856 For heating Plumbed not tostalied Washer Fer air sociing .NA. Clothes Dryer NA Hacte Cher 1131DA702 For cooking Clahumah N Wastingnouse RC131GCD2 Refrigerator Garbage Disposal MA MorFlo Witter heater ZHEER225TRV Other STRUCTURAL DESIGN BASIS CERTIFICATE North-

Middle Note: Havrall and Canal Zone - Zone I Pwerto Higo and Virgin Islands = Zone Nets: Hawaii, Canal Zone, Puerto Rico and Virgin Islands are South Zone Alaris Zone i DESIGN ROOF LOAD ZONE MAP DESIGN WIND ZONE HAP Squips Z 20 PSF Standard Wind Zond I 16 PGP Harizontal 9 PSF Upility 30 PS# Midate 25 PSF Horizontal 16 PSF Updit 40 PSF Dun. .Other PSP Hortzontal __PSF tiphft

HEATING AND COOLING DESIGN BASIS CERTIFICATE



The shows herding equipment has the capacity to maintain on resign 70° F temperature in this Lome at continue temperatures of

To exclusive furness operating economy, and to consurve everyy. It is recommended that this home he invaded where the custom where design compensure BYTEN is not higher that __F.

The above information has been related examing a maximum wind velocity of 15 MPH at absoluted streamful pressure.

Zone II...

INF JRMATION PROVIDED BY THE MANUFACTURER NECES SARY TO CALCULATE SENSIBLE HEAT GAIN.

Manual ships a server

NAME OF THE OWNER OWNER OF THE OWNER O

Micernate 2 Camiori Coulley Cortificate Atanufactured home Manufactures

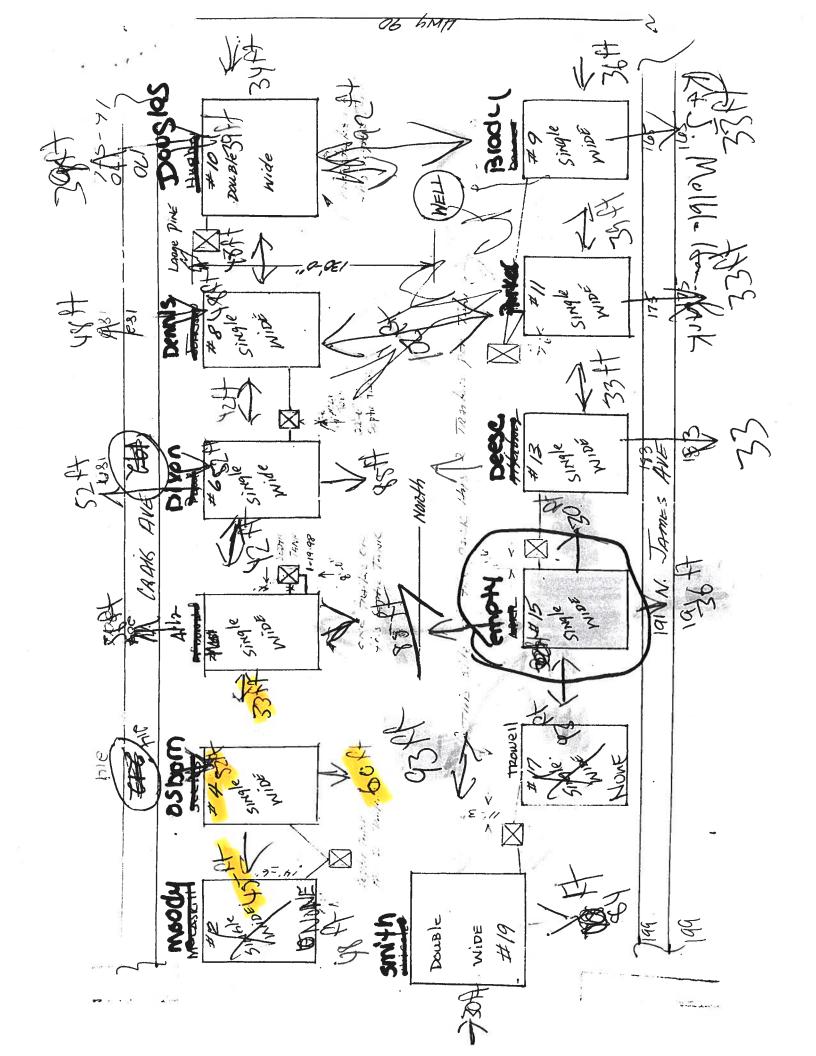
Manufactured Home Model

This air distribution system of this house is sintable for the installation of central air conditioning.

The supply air distribution avetern installed in this harm in sired for Manufactured Home Central Air Condissioning System of ation for all annuarisations course visit of apacity which are certified in accordance with the appropriate Air Conditioning and Refrigeration Institute Mendards. When the sit curvalence of such oir conditions tion that true near area. Then are an experience of greater for the cooling air delivered to the manufactured home supply air duct system.

Information necessary to calculate cooling loads at various locations and orientations is provided in the special Comfert Cooling information provided with this manufactured home.

@ CAM112M01 S 9/08/2006 11:09 Year T Property 2006 R 33-3S-17-0 BAR D MH HORTON RAN		Maintenance Sel	151950 137711 16870 306531		02 00 13
3 BLOCK 2 HIGH 5 JTWRS 921-26 7 THRU 2344, W 9 11 13 15 17 19 21 23 25	LAND ESTATES S/D. 09, PROB#03-54-CP D 1042-79.	9, 10, 11, 12, 13, 14 ORB 411-212, 631-765, JAMES A REGISTER 975- Mnt 4/12/2 To PgUp/PgDn F24=More	_65,0,-,8,3,5, 2,3,3,7,	4 6 8 10 12 14 16 18 20 22 24 26 28	



LETTER OF AUTHORIZATION

Date: 9.27.06	- · · · · · · · · · · · · · · · · · · ·
	T -
Columbia County Building Department P.O. Drawer 1529 Lake City, FL 32056	
I FACY BECKNAM, License No. 440	0000 <u>5/</u> do hereby
Authorize (1/ENN William) to my	Il and sion nameter are
behalf. For Roundy Harplans IS wed the number of Sincerely, 2006	3 Dean. Is
Is wed the number of	of Sentanter of
Sincerely, Ocob	
A A A A A A A A A A A A A A A A A A A	
Sworn to and subscribed before me this 27 day	of <u>Sept.</u> ,2006.
Notary Public: Lai ff	MY COMMISSION DD 333583
My commission expires: June 28, 2008	EXPIRES: Jupe 8822088 **Samped There Notary Public Medium (British
Personally Known	
Produced Valid Identification:	

Revised: 3/2006