

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official afs / 1/19/07 Building Official OK JH / 1/16/07

AP# 0701-53 Date Received 1-16-07 By UH Permit # 25463

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

Comments panel 150 2.3.1 legal non-conf. lot

Pre Insp. Requested. Ok Per Dept.

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

NA State Road Access Parent Parcel # _____ STUP-MH _____

Property ID # 04-35-17-04838-007 Subdivision _____

- New Mobile Home _____ Used Mobile Home Year 96
- Applicant Stacy Beckham Phone # 352-745-2738
- Address 269 SW Parker LN Lake City FL 32024
- Name of Property Owner Jay Davis Phone# 961-1482
- 911 Address 115 NE Clouds Ctn
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Jay Davis? Phone # 961-1482
 Address _____
- Relationship to Property Owner Same.
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage .92 + .77
- 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 \$275 (pd)
- Driving Directions to the Property 441 N to Chestnut Rd
TR to Triple Run TR Cloudy Ctn TR
on right corner.
- Name of Licensed Dealer/Installer Stacy Beckham Phone # 352-745
- Installers Address 269 SW Parker LN Lake City FL 32024
- License Number I#0000512 Installation Decal # 520 4/14

PERMIT NUMBER

PERMIT WORKSHEET

Installer Shay Beckham License # FL0000572

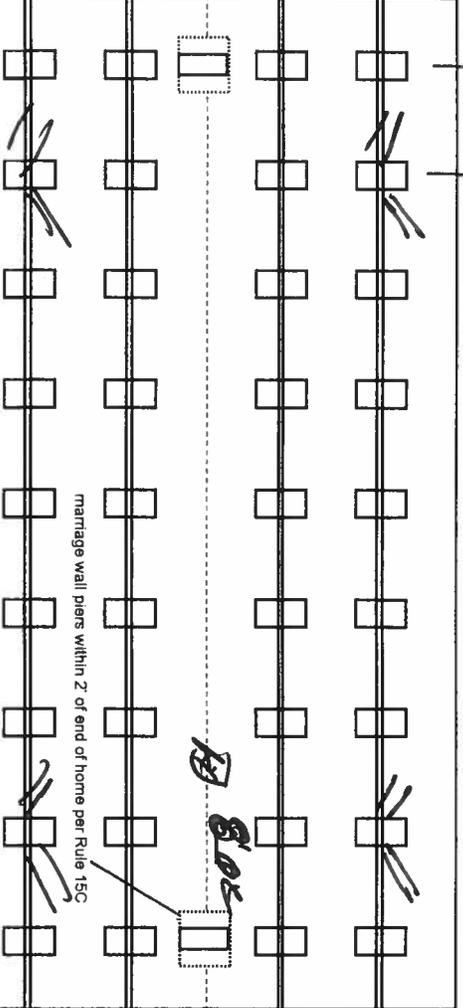
Address of home being installed 115 NE Clouds Cir

Manufacturer Defin Length x width 20' x 48'

NOTE: If home is a single wide fill out one half of the blocking plan if home is a triple or quad 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 SB



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 # 520 414

Tripler/Quad Serial # 048550AB

PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity (sq in) | Footer size (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' |
| 1500 psf | 4'6" | 6' | 7' | 8' | 8' | 8' |
| 2000 psf | 6' | 8' | 8' | 8' | 8' | 8' |
| 2500 psf | 7'6" | 8' | 8' | 8' | 8' | 8' |
| 3000 psf | 8' | 8' | 8' | 8' | 8' | 8' |
| 3500 psf | 8' | 8' | 8' | 8' | 8' | 8' |

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

PIER PAD SIZES

I-beam pier pad size 12x22

Perimeter pier pad size 10x16

Other pier pad sizes (required by the mfg.) _____

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 _____

ANCHORS

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____

Manufacturer Defin

Longitudinal Stabilizing Device w/ Lateral Arms _____

Manufacturer SB

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall _____

Number _____

FRAME TIES

4 ft _____ 5 ft _____

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 |

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 448 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.

Installer's initials [Signature]

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Steve Bohman
Date Tested 1-5-07

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. 15C

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C

Site Preparation

Debris and organic material removed Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: var Length: 6" Spacing: 16"
Walls: Type Fastener: galv Length: 4" Spacing: 12"
Roof: Type Fastener: galv Length: 4" Spacing: 16"
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 [Signature]

Type gasket Penum Installed:
Pg. 15C Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. 15C
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 N/A
Electrical crossovers protected. Yes

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 [Signature] Date 1-16-07

@ CAM112M01 S CamaUSA Appraisal System
 1/16/2007 11:32 Legal Description Maintenance
 Year T Property Sel
 2007 R 04-3S-17-04838-007

Columbia County
 10452 Land 002
 AG 000
 Bldg 000 *
 Xfea 000
 10452 TOTAL B*

DAVIS JAY S

| | | | |
|----|--------------------------------|-----------------------------|----|
| 1 | COMM NW COR OF SE1/4 OF NW1/4, | RUN E 1049.94 FT TO W R/W | 2 |
| 3 | OF DOUBLE RUN RD, SW ALONG R/W | 431 FT FOR POB, CONT SW 210 | 4 |
| 5 | FT, NW 175 FT, NE 210 FT, SE | 175 FT TO POB. ORB 720-376, | 6 |
| 7 | 798-1746, CT 1015-2411. | | 8 |
| 9 | | | 10 |
| 11 | | | 12 |
| 13 | | | 14 |
| 15 | | | 16 |
| 17 | | | 18 |
| 19 | | | 20 |
| 21 | | | 22 |
| 23 | | | 24 |
| 25 | | | 26 |
| 27 | | | 28 |

Mnt 5/24/2004 KYLIE

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More



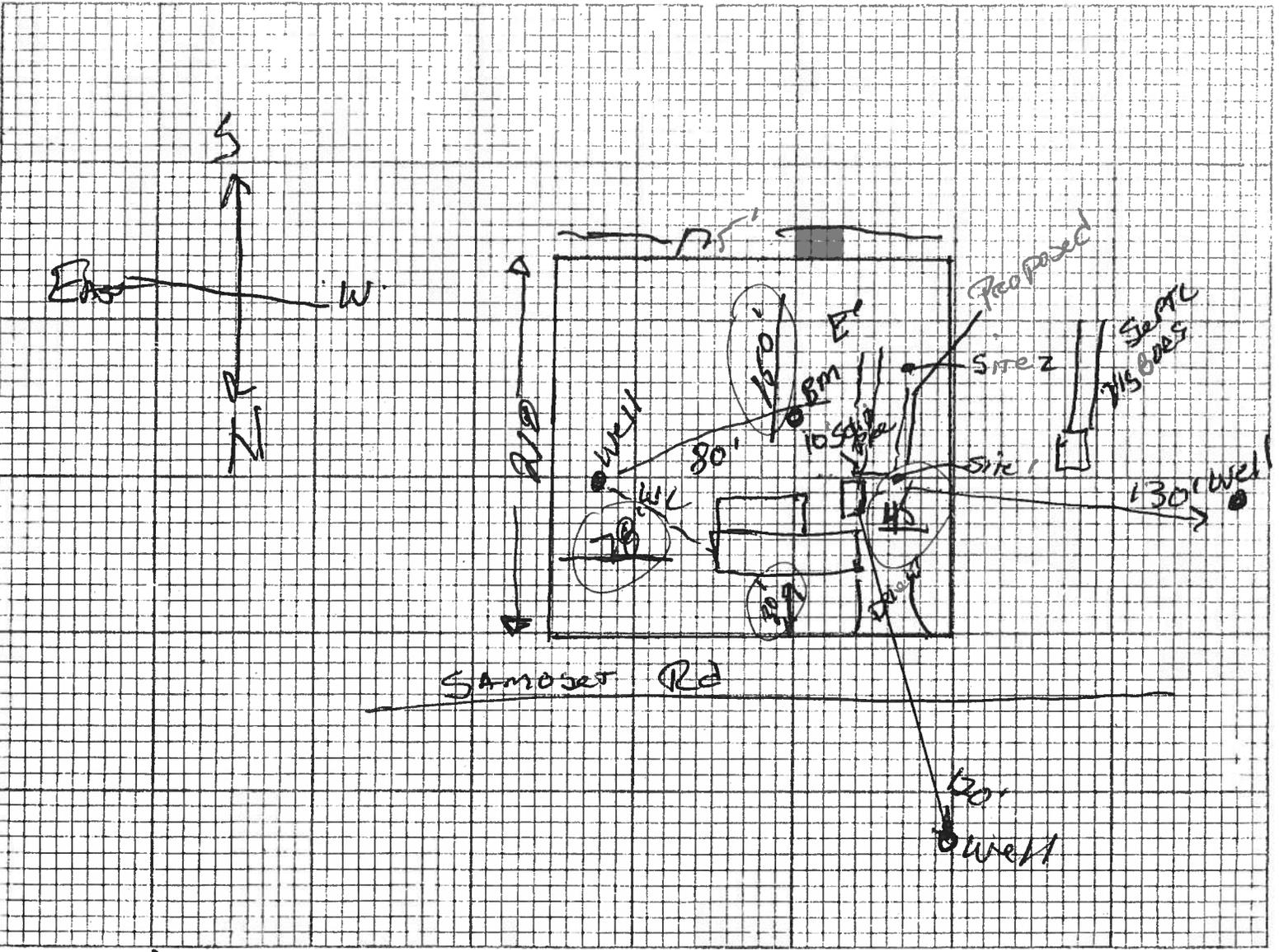
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 07-00016R

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: JAY DAVIS
LOT 27

Site Plan submitted by: Robert W. Juel Signature Agust Title

Plan Approved APPROVED Not Approved _____ Date 1/9/7

By [Signature] **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 1-16-07 BY LH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Jay Davis PHONE 961-1482 CELL 80

ADDRESS _____

MOBILE HOME PARK N/A SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 N to Cheshire Rd TR to Triple Run
TL Cloudy Glen, TL on Right Corner

MOBILE HOME INSTALLER Stacy Beckham PHONE _____ CELL 352-745-2738

MOBILE HOME INFORMATION

MAKE Destiny YEAR 96 SIZE 24 X 48 COLOR _____

SERIAL No. 048550A&B

WIND ZONE II 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 / 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 REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Jay Beckham ID NUMBER 326 DATE 1-16-07

*Oops, Stacy said he already talked to you about this job.
LH*

Columbia County Property Appraiser

DB Last Updated: 12/29/2006

2007 Proposed Values

Parcel: 04-3S-17-04838-007

[Tax Record](#)
[Property Card](#)
[Interactive GIS Map](#)
[Print](#)

Owner & Property Info

Search Result: 1 of 1

| | | | |
|-------------------------|--|---------------------|----|
| Owner's Name | DAVIS JAY S | | |
| Site Address | | | |
| Mailing Address | 1925 NW LAKE JEFFERY RD LAKE CITY, FL 32055 | | |
| Use Desc. (code) | NO AG ACRE (009900) | | |
| Neighborhood | 4317.00 | Tax District | 3 |
| UD Codes | MKTA03 | Market Area | 03 |
| Total Land Area | 0.770 ACRES | | |
| Description | COMM NW COR OF SE1/4 OF NW1/4, RUN E 1049.94 FT TO W R/W OF DOUBLE RUN RD, SW ALONG R/W 431 FT FOR POB, CONT SW 210 FT, NW 175 FT, NE 210 FT, SE 175 FT TO POB. ORB 720-376, 798-1746, CT 1015-2411. | | |

GIS Aerial



Property & Assessment Values

| | | |
|------------------------------|----------|-------------|
| Mkt Land Value | cnt: (2) | \$10,452.00 |
| Ag Land Value | cnt: (0) | \$0.00 |
| Building Value | cnt: (0) | \$0.00 |
| XFOB Value | cnt: (0) | \$0.00 |
| Total Appraised Value | | \$10,452.00 |

| | |
|----------------------------|-------------|
| Just Value | \$10,452.00 |
| Class Value | \$0.00 |
| Assessed Value | \$10,452.00 |
| Exempt Value | \$0.00 |
| Total Taxable Value | \$10,452.00 |

Sales History

| Sale Date | Book/Page | Inst. Type | Sale VImp | Sale Qual | Sale RCode | Sale Price |
|-----------|-----------|------------|-----------|-----------|------------|------------|
| 4/7/2004 | 1015/2411 | CT | I | U | 01 | \$7,000.00 |
| 12/2/1994 | 798/1746 | WD | I | U | 02 | \$0.00 |

Building Characteristics

| Bldg Item | Bldg Desc | Year BIt | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value |
|-----------|-----------|----------|------------|-------------|-------------|------------|
| NONE | | | | | | |

Extra Features & Out Buildings

| Code | Desc | Year BIt | Value | Units | Dims | Condition (% Good) |
|------|------|----------|-------|-------|------|--------------------|
| NONE | | | | | | |

Land Breakdown

| Lnd Code | Desc | Units | Adjustments | Eff Rate | Lnd Value |
|----------|-----------------|---------------------|---------------------|-------------|------------|
| 009900 | AC NON-AG (MKT) | .770 AC | 1.00/1.00/1.00/.90 | \$12,600.00 | \$9,702.00 |
| 009947 | SEPTIC (MKT) | 1.000 UT - (.000AC) | 1.00/1.00/1.00/1.00 | \$750.00 | \$750.00 |

Columbia County Property Appraiser

DB Last Updated: 12/29/2006



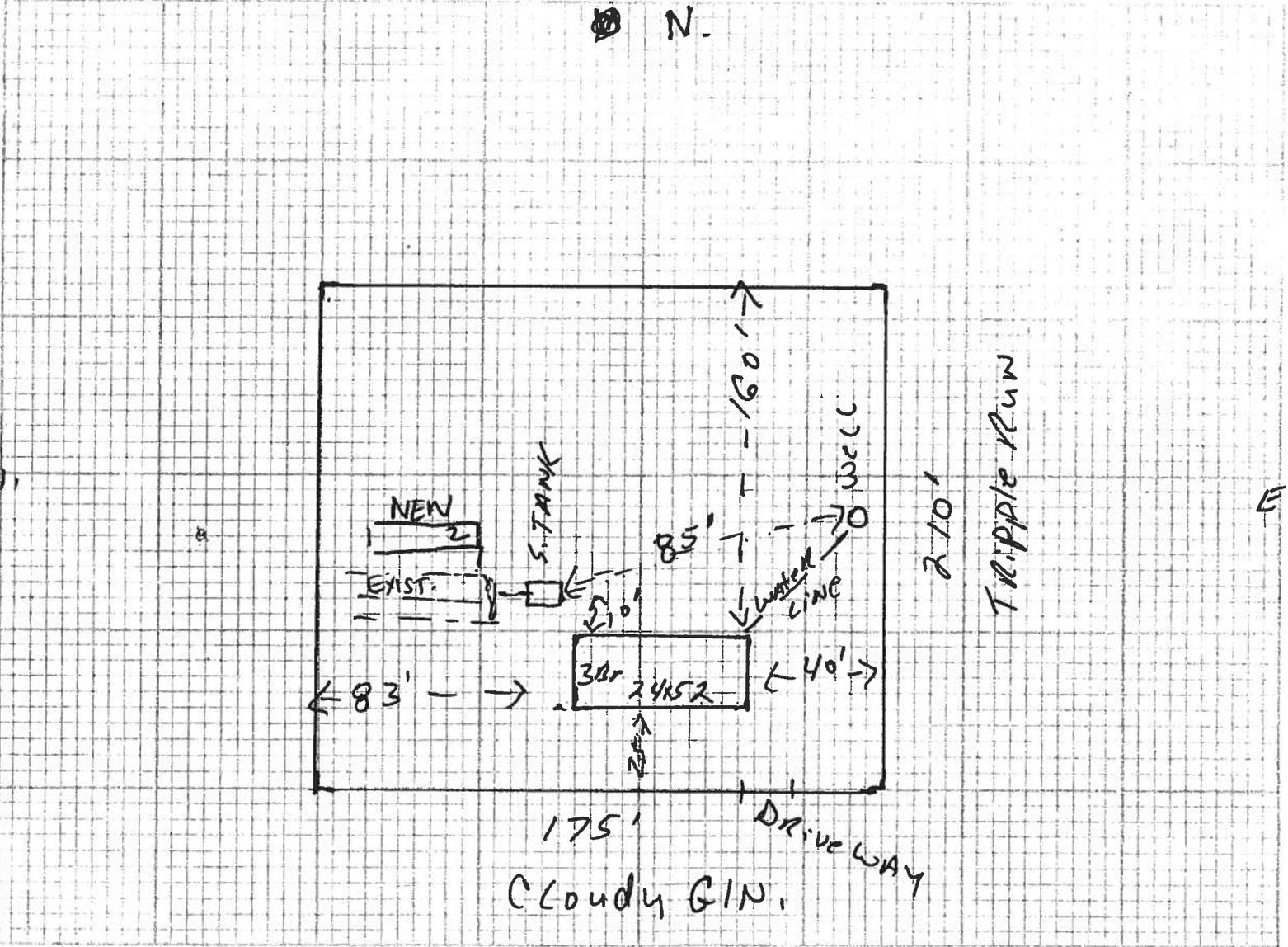
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-0982E

----- PART II - SITE PLAN -----

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: [Signature] Signature _____ Title Agent

Plan Approved X Not Approved _____ Date 11-21-06

By [Signature] ESII **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT