### PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

1	For Office Use Only (Revised 1-11) Zoning Official BL 8-25-11 Building Official 7.6, 8-23-1/
1	AP# 1/08-40 Date Received 8-19-1/ By LH Permit # 29656
1	Flood Zone Development Permit Zoning A-3 Land Use Plan Map Category A-3
	Comments Replacing Existing MH
F	EMA Map# N/A Elevation N/A Finished Floor River N/A In Floodway N/A
t	Site Plan with Setbacks Shown DEH # 11 - 0361 == EH Release = Well letter Existing well
.,,	Recorded Deed or Affidavit from land owner ( Installer Authorization   State Road Access ( 911 Sheet
9.000	Parent Parcel # □ STUP-MH □ F W Comp. letter □ VF Form
	PACT FEES: EMS Fire Corr DOut County In County
1	ad/Code School = TOTAL _ Impact Fees Suspended March 2009_
Pro	pperty ID # 25-75-16-04321-073 Subdivision Kum Island
	New Mobile Home Used Mobile Home MH Size 32x 60 Year 2007
	Applicant Robert Minnella Phone # (352)472-6010
	Address 25743 Sw. 22 PL Newberry, FL32669
	Name of Property Owner James Hearn Phone# (352) 278-4518
	911 Address 65 Sw Gemini Gln Fortwhite fr 32038
_	70100
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Progress Energy</u>
	Name of Owner of Mobile Home James Hearn Phone # 352) 278-4518
	Address 165 Sw Gemini 610
_	Relationship to Property Owner Same
-	Relationship to Property Owner
•	Current Number of Dwellings on Property
	Lot Size 328 X 6 4 8 Total Acreage 5
	Do you : Have Existing Drive (Currently using) or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
•	Is this Mobile Home Replacing an Existing Mobile Home (UCS)
	Driving Directions to the Property 47 5 to C- \$138 (TL) to Lyn Sherman Terr (TR
	to Gemini Gln (TL) to 1 st dw on left-
•	Name of Licensed Dealer/Installer Dale Houston Phone # (386) 752-7814
	Installers Address 136 5W Barrs GIn Lake City FL 32024
	■ License Number TH 1025142 Installation Decal # 6070
	& 29 8 spoke to Nancy & Rob 0-25-11

				#		15			
		perticipa result pieces within 2 of any of shower profession 42C		Inglished National Residence Sections of the Control of the Contro	Typical pier spacing  Show locations of Longitudinal and Lateral Systems  Show locations of Longitudinal and Lateral Systems	if home is a triple or quad with sketch in remainder of home.  I understand Lateral Arm Systems carnot be used on any home (new or used) where the sidewall lies exceed 5 ft 4 in.	Manufacturer Skyline Length xwidth 6 0 x 32.	Installer Date Houston Genin Glen	COLUMBIA COUNTY PERMIT WORKSHEET
Longifiudinal Stabilizing Device (LSD)  Klanufacturer  K Longifiudinal Stabilizing Device w/ Lateral Azms  K Manufacturer  K M	Opening Pier pad size 4ft 5ft  17x22 17x22 FRAME TIES  3 -17x22 Within 2' of end of home spaced at 5' 4" oc Spaced at 5' 4" oc	Draw the approximate locations of marriage 12 x 20 years wall openings 4 foot or greater. Use this symbol to show the piers. 17 3/15 x 25 3/16 441 17 3/15	16 x 16 16 x 16 16 x 18 18.5 x 18.5 16 x 22.5 17 x 22.5 13 1/4 x 26 1/4	7'6" 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	x 18 20" x 20" 22" x 22" 24" x 24" 45" x2) (400) (484)" (676)" (8 7 8 8 8"	PIER SPACING TABLE FOR USED HOMES	Single wide	New Home Used Home U  Home installed to the Manufacturer's Installation Manual  Home is installed in accordance with Rule 15-C	MIT WORKSHEET page 1 of 2

КОВ АИВ ИРИСУ

SALAG

ZI:IZ TT0Z/LT/80

97/179/986

0Z:60 TT0Z/8T/80

# COLUMBIA COUNTY PERMIT WORKSHEET

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C. Handaring Mile	of check here in decidie indo to, son	Flaor	TORQUE PROBE TEST	The results of the tarque probe test is 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		ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	 	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 500 lb. increments, take the lowest reading and round down to that increment.  3. Using 500 lb. increments, take the lowest reading 500 lb. increments, take the lowest reading 500 lb. increments, take the lowest reading 500 lb. increments the points of the torque probe test is inch pounds or check here if you are cheking 51 anchors with require 5 foot anchors. A test showing 275 inch pounds or less will require 5 foot anchors. I undestand 5 ft anchors are allowed at the sidewall locations. I undestand 5 ft anchors are required at the sidewall locations. I undestand 5 ft anchors are required at the points where the brique test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4094 by highling capacity.  Installer's initials  ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER installer Name  Biocures. This includes the borrding wife between multi-wide units, but not to the main power source. This includes the borrding wife between multi-wide units. Pg.  Connect all sewer drains to an existing sewer lap or septic tank. Pg.  Connect all sewer drains to an existing sewer lap or septic tank. Pg.  Connect all sewer drains to an existing sewer lap or septic tank. Pg.
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						_	_	_    <u>                                  </u>	. Plambing .

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 Other:	Weatherprooting  The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Frechace chimney installed so as not to allow intrusion of rain water. Yes	Type gasket On On Installer's initials On Party Installer's initials On Installer's Instal	Gasket (weathcarecting reviewed)  I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, maldow and buckled manage wate are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	Fastening multi wide units  Floor: Type Fastener: Unit Length: 1/2 L. Spacing: 2  Type Fastener: Unit Length: 3/2 L. Spacing: 2  Rock: Type Fastener: Length: 3/2 L. Spacing: 2  For used hornes: a min 30 gauge, 8" wide: galvanized melal strip will be centered over the peak of the notifiend asserted with gaiv. recting marks at 2" on center on both sides of the centerline.	Site ₹reparation  Debris and organic material removed
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ation given with this permit worksheet and true based on the Date 8/18/11

1102/11/80

ROB AND NANCY

DALES

97/179/986

0Z:60 II0Z/8I/80



# STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

# Columbia County Property

Appraiser
DB Last Updated: 6/22/2011

Parcel: 25-7S-16-04321-073

Next Lower Parcel Next Higher Parcel >> ]

### **Owner & Property Info**

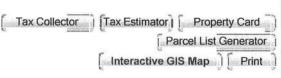
Owner's Name	HEARN JAMES	HEARN JAMES R								
Mailing Address	165 SW GEMIN									
Site Address	165 SW GEMIN	165 SW GEMINI GLN								
Use Desc.	MOBILE HOM (000200)									
Tax District	3 (County)	Neighborhood	25716							
Land Area	5.000 ACRES	Market Area	02							
Description		NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.								
		E1/4. (AKA LOT 15-A RUM IS 475, 696-477, 781-408, PRO								

### **Property & Assessment Values**

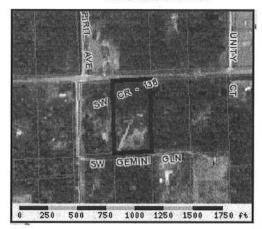
966-1800. CWD 1002-714, QCD 1005-1200.

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$38,286.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$5,063.00
XFOB Value	cnt: (1)	\$600.00
Total Appraised Value		\$43,949.00
Just Value		\$43,949.00
Class Value		\$0.00
Assessed Value		\$28,496.00
Exempt Value	(code: HX VX)	\$28,433.00
Total Taxable Value	Other: \$	Cnty: \$63 63   Schl: \$63

# 2010 Tax Year



<< Prev Search Result: 29 of 81 Next >>



### 2011 Working Values

### NOTE:

2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

**Show Working Values** 

### Sales History

Show Similar Sales within 1/2 mile

L	Sale Date	OR Book/Page	OR Code	Vacant /	Improved	Qualified Sale	Sale RCode	Sale Price
				( N	ONE	)		

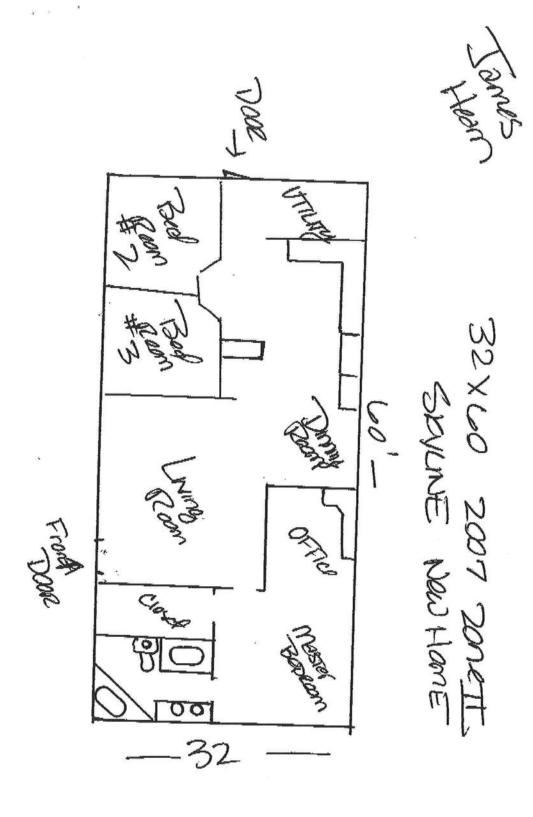
### **Building Characteristics**

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
2	MOBILE HME (000800)	1983	BELOW AVG. (03)	728	728	\$3,865.00
	Note: All S.F. calculation	ns are bas	ed on <u>exterior</u> build	ding dimension	S.	

### **Extra Features & Out Buildings**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0040	BARN,POLE	1993	\$1,800.00	0001200.000	60 x 20 x 0	AP (040.00)
0060	CARPORT F	2010	\$1,260.00	0000720.000	30 x 24 x 0	AP (050.00)
0294	SHED WOOD/	2010	\$1,176.00	0000168.000	12 x 14 x 0	AP (030.00)
0251	LEAN TO W/	2010	\$788.00	0000450.000	15 x 30 x 0	AP (050.00)

### Land Breakdown



PAGE 04/04

08-29-11;03:42PM;

ROB AND NANCY ;386 758-2187

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number\_\_\_\_\_ APP-1108-40

James Hearn ..... PART II - SITEPLAN -----100 Scale: Each block represents 10 feet and 1 inch = 40 feet 648 ole 112 502 pot well-Well Well-to septic= 642 Notes: No Pertinent offsite-features Pump & abandon ala tank 08-18-11 Site Plan submitted by:\_

Signature Not Approved Plan-Approved X County Health Department

CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/36 (Replaces PRE-H-Form 4016 which may be used) (Stock Number: 5744-002-4015-6)

Page 2 of 4

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APPLICATION APPLIC CONTRACTOR Dalo Houston

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in Columbia townry one permit will cover on wader doing work of the permitted else, is is <u>recoursed</u> that we have récorde of the subsumptactors who exhally did the reside specific work under the percit. Per Findië Statute 440 and Codinance 89-6, a contemior abail require all subcontractors op provide exidence of workers' compensation or exemption, append liability insurance and a valid Contilicate of Compensation in Columbia County.

Any clumpes, the pre-mixted contractor is responsible for the corrected form being submixed to this office prior to the etert of that substitutes beginning any work, Violatians will result in 20p work orders and perfect,

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CONCRETE FINISHED			

.P. S. 440,103 building parmits; identification of minimum promiting policy.—Every employer shots, as a condition to applying for and receiving a building permit, abow proof and carbity to the partial leaver that it has sequed compensation for the employees under this anapter as provided in as. AAD. AG ship setucia, and shall be presented each time the employer applies for a building permit.

## **COLUMBIA COUNTY 9-1-1 ADDRESSING**

P. O. Box 1787, Lake City, FL 32056-1787 PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

### Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED:

8/17/2011

DATE ISSUED:

8/25/2011

**ENHANCED 9-1-1 ADDRESS:** 

165

SW GEMINI

GLN

FORT WHITE

FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

25-7S-16-04321-073

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT

Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.



# MI OCCUPAIC

# COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

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DALE HOUSTON

Parcel Number 25-7S-16-04321-073

Building permit No. 000029656

Owner of Building JAMES HEARN

Location: 165 SW GEMINI GLEN, FORT WHITE, FL 32038

Date: 09/20/2011

Permit Holder

**Building Inspector** 

POST IN A CONSPICUOUS PLACE (Business Places Only)

PERMIT Columbia County Building Permit DATE 08/30/2011 This Permit Must Be Prominently Posted on Premises During Construction 000029656 ROBERT MINNELLA PHONE 352-472-6010 APPLICANT 32669 25743 SW 22 PLACE ADDRESS 352-278-4518 PHONE OWNER JAMES HEARN 32038 ADDRESS SW GEMINI GLN FORT WHITE FL DALE HOUSTON CONTRACTOR 47 S, L CR 138, R LYNN SHERMAN TERR, L GEMINI GLN, LOCATION OF PROPERTY THEN 1ST DRIVE ON LEFT ESTIMATED COST OF CONSTRUCTION MH, UTILITY TYPE DEVELOPMENT STORIES HEATED FLOOR AREA TOTAL AREA HEIGHT **FLOOR** FOUNDATION WALLS ROOF PITCH MAX. HEIGHT 35 AG-3 LAND USE & ZONING 25.00 STREET-FRONT 30.00 25.00 SIDE Minimum Set Back Requirments: NO. EX.D.U. FLOOD ZONE DEVELOPMENT PERMIT NO. SUBDIVISION **RUM ISLAND RANCHES** PARCEL ID 25-7S-16-04321-073 UNIT TOTAL ACRES LOT 15-A **BLOCK** PHASE IH1025142 mul Applicant/Owner/Contractor Culvert Waiver Culvert Permit No. Contractor's License Number TC **EXISTING** 11-0361 New Resident Approved for Issuance Driveway Connection Septic Tank Number LU & Zoning checked by COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD REPLACING EXISTING MH Check # or Cash FOR BUILDING & ZONING DEPARTMENT ONLY Foundation Temporary Power Monolithic date/app. by date/app. by date/app. by Under slab rough-in plumbing Sheathing/Nailing Slab date/app. by date/app. by date/app. by Framing Insulation date/app. by date/app. by Electrical rough-in Rough-in plumbing above slab and below wood floor date/app. by date/app. by Heat & Air Duct Peri. beam (Lintel) date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert date/app. by date/app. by date/app. by Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing date/app. by date/app. by date/app. by Reconnection date/app. by date/app. by date/app. by 0.00 0.00 SURCHARGE FEE \$ **BUILDING PERMIT FEE \$ CERTIFICATION FEE \$** FIRE FEE \$ 0.00 ZONING CERT. FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 **CULVERT FEE \$** 375.00 FLOOD DEVELOPMENT FEE \$ TOTAL FEE

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.

INSPECTORS OFFICE

"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."

CLERKS OFFICE

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.