Ck#2488

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 11-30-07) Zoning Official CAS 12/19/07 Building Official OK JTH 12-13-07

AP# 0712-46 Date Received 12/12/07 By G Permit # 26527

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

Comments Finished floor elev. conf. req'd.

FEMA Map# _____ Elevation _____ Finished Floor 35' River _____ In Floodway _____

■ Site Plan with Setbacks Shown ☐ EH # 07-0911-N ☐ EH Release ☐ Well letter ■ Existing well

■ Copy of Recorded Deed or Affidavit from land owner ■ Letter of Authorization from installer

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

☐ Unincorporated area ☐ Incorporated area ☐ Town of Fort White ☐ Town of Fort White Compliance letter

Property ID # 00000-00-01154-000 Subdivision 3 Rivers Estates

- New Mobile Home ✓ Used Mobile Home _____ Year 2008
- Applicant Mike Bond, Bobby Ford or Kelly Bishop Phone # 386-497-2311
- Address PO Box 39, Ft White, FL 32038
- Name of Property Owner Christian Kearney Phone# 904-246-8081
- 911 Address 305 SW Delaware Way, Ft. White, FL
- Circle the correct power company - FL Power & Light - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy

- Name of Owner of Mobile Home SAME Phone # SAME
  Address SAME
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property 0
- Lot Size 100 x 400 Total Acreage .91
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 47 S, TR on US 27, TL on Riverside, TL on Montana, TL on Delaware Approx 700 feet on right

- Name of Licensed Dealer/Installer Kenny Norris Phone # 752-3891
- Installers Address 1004 SW Charles Trail, Lc, FL, 32024
- License Number IH-0000049 Installation Decal # 288401

Inst:200712026689 Date:12/4/2007 Time:2:21 PM
Doc Stamp-Deed:0.70
DC,P.DeWitt Cason,Columbia County Page 1 of 2

Above Space Reserved for Recording
[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

Date of this Document: 12 - 4th 2007

Reference Number of Any Related Documents: 0000000 1154 000

Grantor:

Name: Brian E Jones Wanda C. Jones
Street Address: 940 W Doty Branch Ln.
City/State/Zip: Jax FL. 32259

Grantee:

Name: Christian A. Keeney Barbara J Keeney
Street Address: 1810 4 st
City/State/Zip: Neptune Bch FL. 32266

Abbreviated Legal Description (i.e., lot, block, plat *or* section, township, range, quarter/quarter *or* unit, building and condo name): Lot 180 Unit 18

Assessor's Property Tax Parcel/Account Number(s): 0000000 1154000

THIS QUITCLAIM DEED, executed this 4TH day of DECEMBER, 20 07, by first party, Grantor, BRIAN E AND WANDA L JONES, whose mailing address is 940 W DOTY BRANCH LN JAX FL 32259, to second party, Grantee, CHRISTIAN A KEENEY AND BARBARA J KEENEY, whose mailing address is 1810 4TH ST NEPTUNE BCH FL 32266.

WITNESSETH that the said first party, for good consideration and for the sum of TEN Dollars ($ 10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of _____, State of _____ to wit: _____

LOT 180 UNIT 18 THREE RIVERS ESTATES. ORB 766-1821 953-602.

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of:

Signature of Witness _____ C A Schmitt

Print Name of Witness C A Schmitt

Signature of Witness _____ Jeffrey Smith

Print Name of Witness Jeffrey Smith

Signature of Grantor Brian E Jones _____ Wanda L Jones

Print Name of Grantor Brian E Jones Wanda L Jones

State of Florida)
County of St. Johns)

On Dec 3, 2010, before me, Brian & Wanda Jones appeared FL Drivers Lic, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Bridget Leirvik
Signature of Notary

BRIDGET LEIRVIK
MY COMMISSION # DD 600965
EXPIRES: October 2, 2010
Bonded Thru Notary Public Underwriters

Affiant _____Known ___✓___Produced ID
Type of ID FL Drivers Lic
(Seal)

Columbia County Property Appraiser

DB Last Updated: 11/15/2007

2008 Proposed Values

Tax Record | Property Card | Interactive GIS Map | Print

Parcel: 00-00-00-01154-000

<< Prev Search Result: 3 of 3

Owner & Property Info

Owner's Name	JONES BRIAN E & WANDA L		
Site Address			
Mailing Address	940 W DOTTY BRANCH LN JACKSONVILLE, FL 32259		
Use Desc. (code)	VACANT (000000)		
Neighborhood	100000.18	**Tax District**	3
UD Codes	MKTA02	**Market Area**	02
Total Land Area	0.918 ACRES		
Description	LOT 180 UNIT 18 THREE RIVERS ESTATES. ORB 766-1821 953-602.		

GIS Aerial

Property & Assessment Values

Mkt Land Value	cnt: (1)	$18,000.00
Ag Land Value	cnt: (0)	$0.00
Building Value	cnt: (0)	$0.00
XFOB Value	cnt: (0)	$0.00
Total Appraised Value		$18,000.00

Just Value	$18,000.00
Class Value	$0.00
Assessed Value	$18,000.00
Exempt Value	$0.00
Total Taxable Value	$18,000.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
5/1/2002	953/602	WD	I	Q		$30,000.00
10/27/1992	766/1821	WD	V	U	12	$4,500.00

PERMIT WORKSHEET

PERMIT NUMBER

Installer Ronnie Norris License # IH0000049

Address of home being installed SW Dekalb Way Fort White FL 32038

Manufacturer Destex Length x width 32X80

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 RN

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 # 205701

Triple/Quad ☐ Serial #

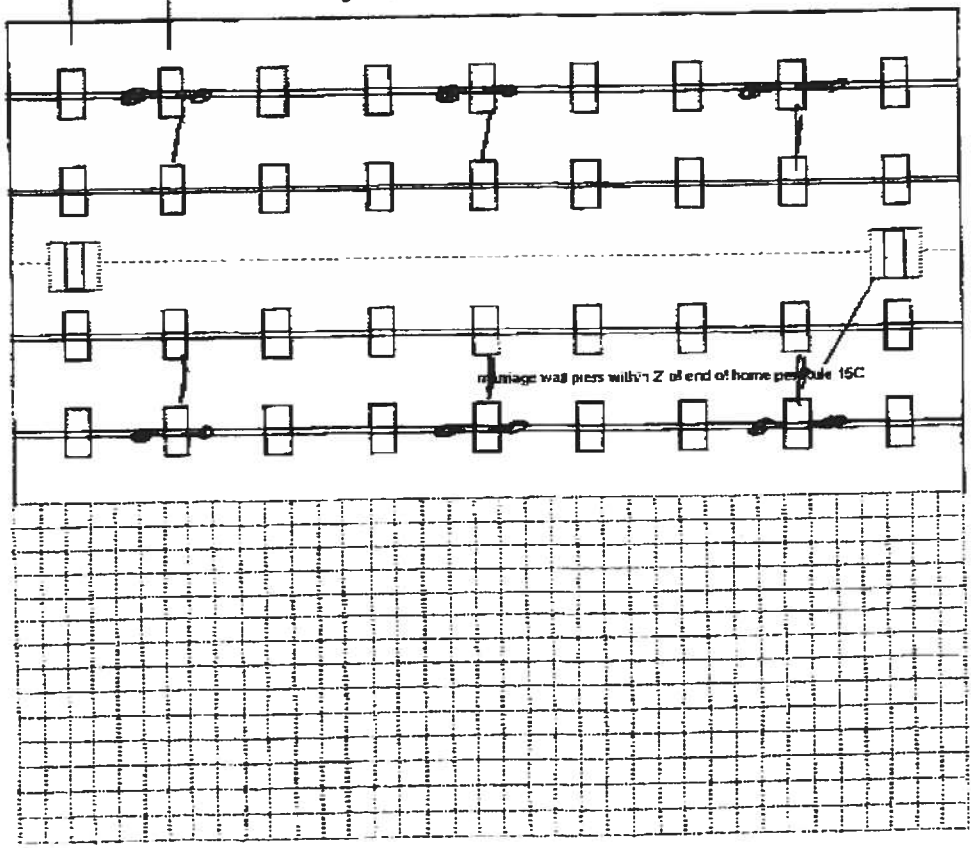
Typical pier spacing

2' 5'4"

lateral

longitudinal

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	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)*	25" 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 17X25

Perimeter pier pad size 17X25

Other pier pad sizes (required by the mfg.) 16X16

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

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
8	20X20
4	
4	

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

	Number
Sidewall	22
Longitudinal	8
Marriage wall	4
Shearwall	4

PERMIT WORKSHEET

PERMIT NUMBER _____

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 285 inch pounds or check here if you are declaring 5' anchors without testing (4). A test showing 275 inch pounds or less will require 4 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 requires anchors with 4000 lb holding capacity.

_____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested 11-25-07

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.

Plumbing

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

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

Site Preparation

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

Fastening multi wide units

Floor:	Type Fastener: Lag	Length 6	Spacing: 24" oc
Walls:	Type Fastener: Nail	Length: 6	Spacing: 16
Roof:	Type Fastener: Screw	Length: 16	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 _____

Type gasket
Pg.

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

Weatherproofing

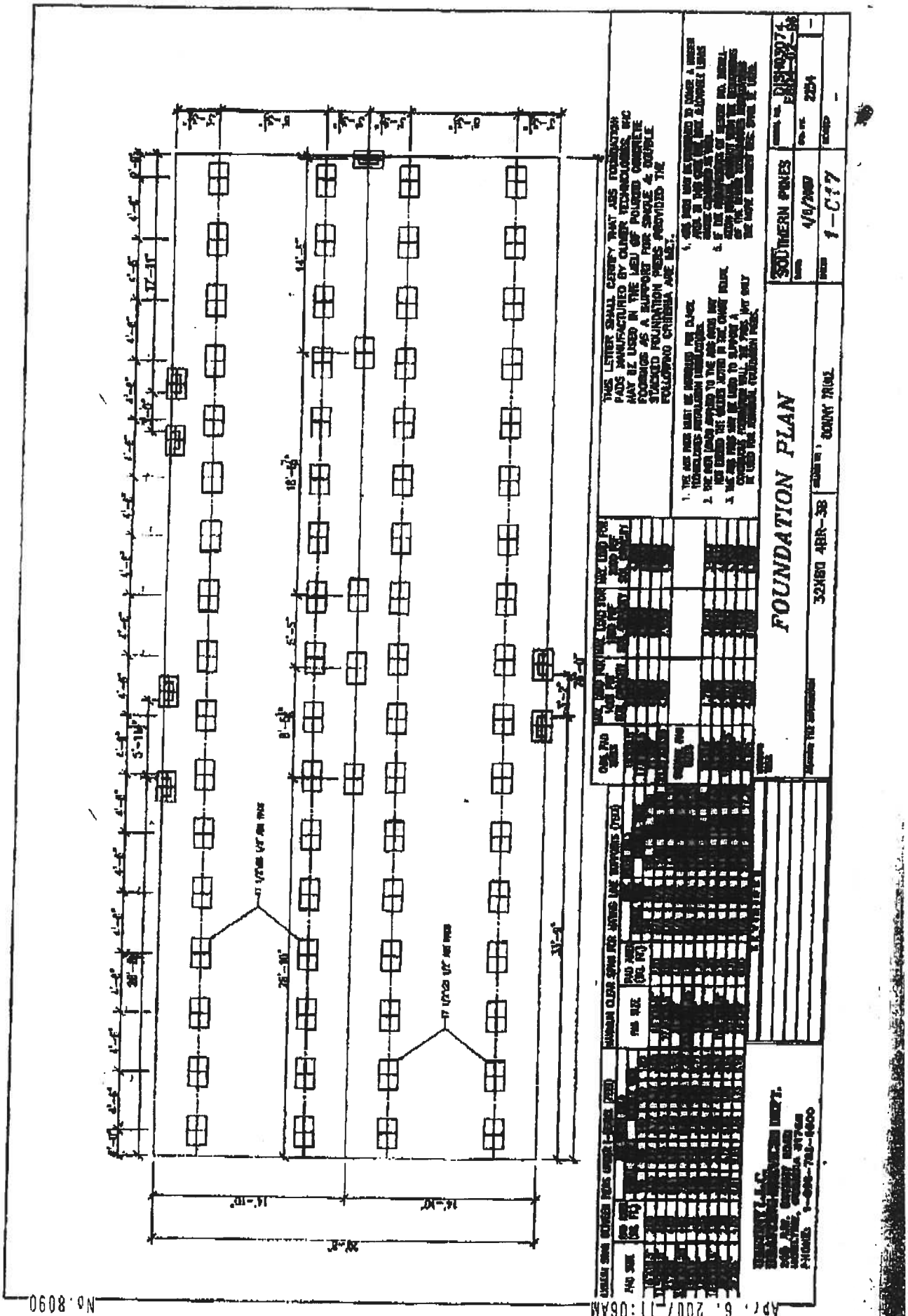
The bottomboard will be repaired and/or taped. Yes Pg.
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

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 _____ Date 11-28-07


FOUNDATION PLAN
32X80 4BR-3B
DONNY TRIAL
SOUTHERN HOMES
1-C17
THIS LETTER SHALL CERTIFY THAT JDS FOUNDATION PADS MANUFACTURED BY CUNDY TECHNOLOGIES, INC MAY BE USED IN THE LIEU OF POURED CONCRETE FOOTINGS AS A SUPPORT FOR SINGLE & DOUBLE STACKED FOUNDATION PADS PROVIDED THE FOLLOWING CRITERIA ARE MET:

LIMITED POWER OF ATTORNEY

I, Ronnie Norris License IH – 0000049 authorize Dale Burd, Rocky Ford or Kelly Bishop to be my representative and act on my behalf in all aspects of applying for a MOBILE HOME PERMIT to be installed any of the following Counties; Alachua, Baker, Bradford, Clay, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Madison, Suwannee & Union. This Power of attorney is valid thru 9/30/08.

Ronnie Norris

(Signature)

11-8-07

(Date)

Sworn and subscribed before me this 8 **day of** Nov **, 2007.**

Notary Public

Personally Known: ✓

Produced ID (Type): _____

DALE R. BURD
Comm# DD0559297
Expires 7/16/2010
Florida Notary Assn. Inc

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said License shall be renewed annually, and each licensee shall pay a fee of $150.

I, Ronnie Norris, license number IH – 0000049 do herby state that the installation of the manufactured home for (applicant) Dale Burd, Rocky Ford or Kelly Bishop (customer name) KEENEY **in** Columbia County **County will be done under my supervision.**

Ronnie Norris
Signature

Sworn to and subscribed before me this 12 **day of** DEC **, 2007.**

Notary Public:

DALE R. BURD
Comm# DD0558297
Expires 7/16/2010
Florida Notary Assn. Inc

lot with well

Inst:200712026888 Date:12/4/2007 Time:2 21 PM
Doc Stamp-Deed:0.70
DC,P.DeWitt Cason,Columbia County Page 1 of 2

Above Space Reserved for Recording
[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

Date of this Document: 12-04-2007

Reference Number of Any Related Documents: 00000001153000

Grantor:

Name: Brian E Jones Wanda L Jones
Street Address: 940 W Doty Branch Ln.
City/State/Zip: Jax Fl. 32259

Grantee:

Name: Barbara J Keeney Wanda L Jones
Street Address: 1810 4th St
City/State/Zip: Neptune Beach FL. 32266

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot 179 Unit 18 Three Rivers Estates

Assessor's Property Tax Parcel/Account Number(s): 00000001153000

THIS QUITCLAIM DEED, executed this 4th day of Dec 2007, by first party, Grantor, Brian E And Wanda L JONES, whose mailing address is 940 W Doty Branch LN JAX FL 32259, to second party, Grantee, Barbara J Keeney and Wanda L Jones, whose mailing address is 1810 4th St Neptune Beach FL 32266.

WITNESSETH that the said first party, for good consideration and for the sum of Ten Dollars ($10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Columbia, State of Florida to wit:

LOT 179 UNIT 18 THREE RIVERS ESTATES. ORB 690-307. 953-602.

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of:

Signature of Witness C A Schmitt

Print Name of Witness C A Schmitt

Signature of Witness

Print Name of Witness Tiffany Smith

Signature of Grantor Brian E Jones Wanda L Jones

Print Name of Grantor Brian E Jones Wanda L Jones

State of Florida
County of St. Johns

On Jan. 3, 2008, before me, Brian & Wanda Jones, appeared FL Drivers Lic, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Bridget Leirvik

Signature of Notary

BRIDGET LEIRVIK
MY COMMISSION # DD 600965
EXPIRES: October 2, 2010
Bonded Thru Notary Public Underwriters

Affiant ____Known ✓ Produced ID
Type of ID FL Drivers Lic
(Seal)

A & B Construction
PO Box 39
Ft. White, FL, 32038
386-497-2311

Date: December 18, 2007

To: Col Co. Bldg Dept. Attn: Connie

From: Dale R. Burd

Phone: (O) 1-386-497-2311 (F) 1-386-497-4866 (C) 1-386-623-3404

Subject: Keeney / Jones Well Permit application # 0712-40

Mark,

This deed shows that the lot is owned by both parties. Therefore no permission will be required by either party to use their jointly owned well.

Total Pages 3

Thank you,

Dale R. Burd
Project Manager
A & B Construction

You will still need to S + pedo the site plan @ environ for Keeney
- Connie
12/18/07

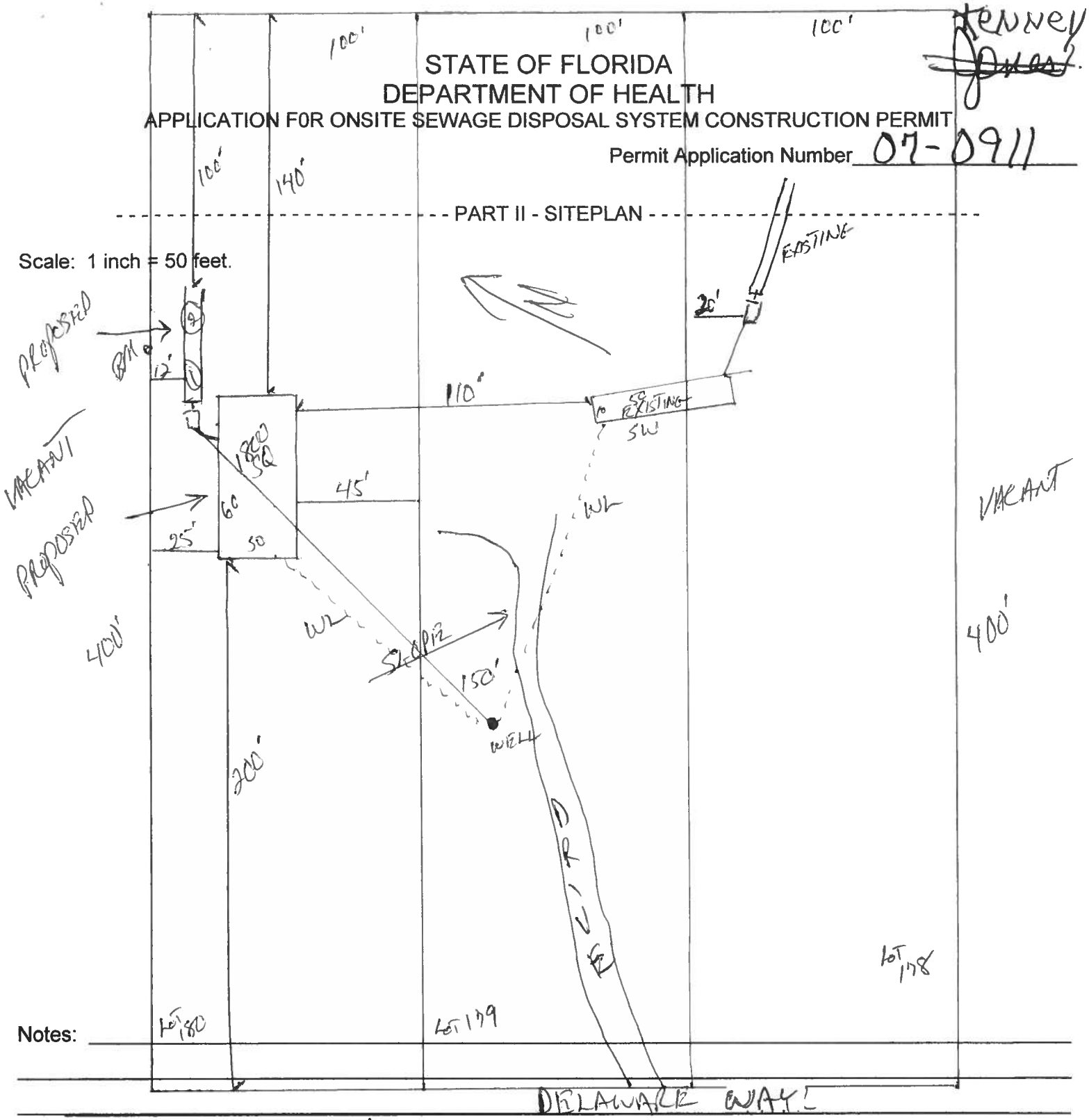
Kenney

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 07-0911

PART II - SITEPLAN

Scale: 1 inch = 50 feet.



Notes: _____

Site Plan submitted by: Rocky Tyo

Plan Approved ✓ Not Approved ____

By _____ Columbia County Health Department

MASTER CONTRACTOR

Date 11/19/07

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

VSD

07-0911

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 611051
DATE PAID: 11/27/07
FEE PAID: 310.00
RECEIPT #: 1662408

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: ~~BRIAN JONES~~ Barbara Keeney - Christian Kenney

AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 180 BLOCK: NA SUB: THREE RIVERS EST. UNIT 18 PLATTED: 12/3/1962 ~~10/03/89~~

PROPERTY ID #: 00-00-00-01154-000 ZONING: SFR I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: .918 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: SW DELAWARE WAY FORT WHITE, FL. 32038

DIRECTIONS TO PROPERTY: 47 SOUTH INTO FORT WHITE- RIGHT ON 27- LEFT ON RIVERSIDE AVE- LEFT ON MONTANA- LEFT ON DELAWARE LOT ON RIGHT.

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	DW Mobile Home	3	2233 RF.	
2				
3				

[N] Floor/Equipment Drains [N] Other (Specify) _____

SIGNATURE: Rocky D Ford DATE: 11/19/2007

DH 4015, 10/97 (Previous Editions May Be Used)

11/27/07

RECEIVED
NOV 27 2007
FLORIDA DEPT. OF HEALTH

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: 12/12/2007 **DATE ISSUED:** 12/14/2007

ENHANCED 9-1-1 ADDRESS:

305 SW DELAWARE WAY

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-01154-000

Remarks:

LOT 180 UNIT 18 THREE RIVERS ESTATES.

C KERNEY
Application #:
0712-40

Address Issued By: _____
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.

Approved Address

DEC 14 2007

911Addressing/GIS Dept

1057

FAXED by: Kristina
Date: 12-14-07

CERTIFICATE OF

M/H OCCUPANCY

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.

Parcel Number 26-6S-15-01154-000 **Building permit No.** 000026527

Permit Holder RONNIE NORRIS

Owner of Building CHRISTIAN KEENEY

Location: 305 SW DELAWARE WAY, FT. WHITE, FL

Date: 01/14/2008

Harry Dicks

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)