Therond Affidavit

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

TO THE ME THE ATTENDATION
For Office Use Only (Revised 7-1-15) Zoning Official Building Official AP# 1905 - 10 Date Received 5/1
By Some Received 12 Permit # 30147
Flood Zone
Comments 2nd Unit on Property, 5 yr temp use permit for Daughter Donna Campbell
FEMA Map# Elevation Finished Floor River In Floodway
Recorded Dood or F Property Assessing DO November 1 Con 2 CO 2 C
Recorded Deed or Property Appraiser PO Site Plate BEH# 19-0398 Well letter OR
Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
DOT Approval Parent Parcel # STUP-MH 1905- 24 P911 App
□ Ellisville Water Sys Assessment wed for and Out County □ In County □ Sub VF Form
Unit
Property ID #25-75-16-04821-038 subdivision Rum Tstand Ranches Lot#14-13
New Mobile Home MH Size 30x76 Year 2019
- Applicant e#386-963-4298
- Address 3860 150th pl Lake City FL 32024
Name of Property Owner Wayne & Dana Anders Phone# 04-673-0371
= 911 Address 244 Granini Gla Ft White FL 32038
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
Name of Owner of Mobile Home Donna and James Cambridge Phone # \$901-673-037
Address 244 Compa Long Comes Samp Phone # 8901-673-037
Address 244 Gemini Gin Ft White Ft 32038
Relationship to Property Owner <u>Daughter</u>
Current Number of Dwellings on Property
Lot Size 5 PCRES Total Acreage 5 ACRES
Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) 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
Driving Directions to the Property Had Nov Ne Hernando Ave toward NE
Justice St (1) NE Madison St. Tum O first cross St onto N. Manin
@ m to w Duval St, left@ 3rd cross St onto Sw main. Slighter 47
Dinto US-27 S. Ronto SW Coring Rd 138 Conto Sw Lynn Shoman Fer
Name of Licensed Dealer/Installer Juliam Region Phone # 380-963-4298
Installers Address 3360 150th pt Lako City PL 32024
License Number 1-1041936 Installation Decal # 59476

LH-LATMessage for Jessie 5-7-19 & Recieved STUP Payment
UN - Emerled Jessie 5/21/19

Typical pier spacing being installed Address of home Installer: Manufacturer 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. **Mobile Home Permit Worksheet** lateral longitudinal CIN'DI Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Length x width Installer's initials age wall piers within 2" of end of home License # RYXQ8 ログに とういる 041936 Rule 15C Application Number: Manufacturer Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms capacity List all marriage wall openings greater than 4 foot and their pier pad sizes below. bearing Longitudinal Stabilizing Device (LSD) Other pier pad sizes (required by the mfg.) Perimeter pier pad size I-beam pier pad size interpolated from Rule 15C-1 pier spacing table. Load Triple/Quad Double wide Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C, New Home 2000 psf 2500 psf 2500 psf 1000 psf Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS PIER PAD SIZES 16" x 16" PIER SPACING TABLE FOR USED HOMES 以口 (256)Serial # COHGADIG 34443 AB Installation Decal # Wind Zone II Used Home Pier pad size 18 1/2" x 18 1/2" (342) 16x 16 20" x 20" (400) Longitudinal Marriage wall Shearwall 22" x 22" Wind Zone III 9LF155 4 |† within 2' of end of home spaced at 5' 4" oc Sidewall (484)* ထ ထ္ POPULAR PAD SIZES Date: 16 x 18 18.5 x 18.5 16 x 22.5 Pad Size 16 x 16 OTHER TIES 1/2 × 25 1/2 FRAME TIES **ANCHORS** 24" X 24" (576)* _5 ₹

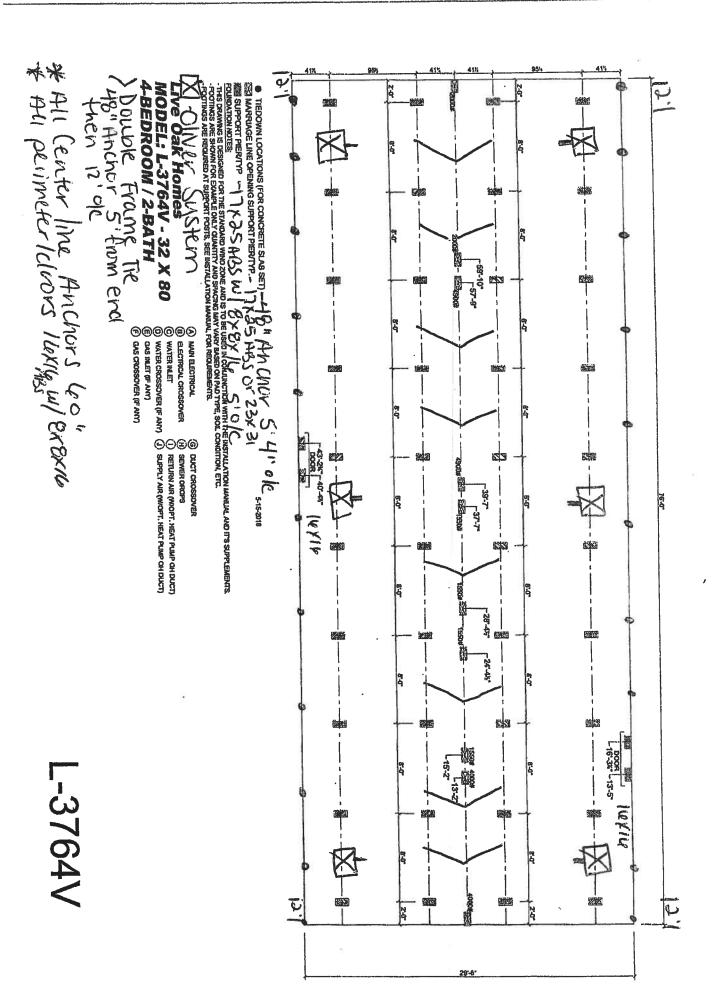
X

26" x 26" (676)

Mobile Home Permit Worksheet

Application Number:

Connect all potable water supply piping to an existing-water meter, water tap, or other independent water supply systems. Pg.	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Pg.	It testing. X_ NG METHO 6 locations. le footer. lowest crement. X_ X_ X_ I understar swhere the ome manufa. Iller's initials ENSED INS	POCKET PENETROMETER TEST The pocket penetrometer tests are rounded down to / LO / psf
Installer Signature Date 4/18 19	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	Fastening multi wide units Floor. Type Fastener. A Length: Spacing: 18 // Walls: Type Fastener. A Length: Spacing: 18 // 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 (westterproofing requirement) I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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 Weatterproofing Type gasket Pg. LL Weatterproofing Weatterproofing The bottomboard will be repaired and/or taped. Yes Between Floors Yes Between Walls Yes Between Walls Yes Between Walls Yes Between Walls Yes Between Floors Yes Between Floors Yes Between Walls Yes Between Walls Yes Siding on units is installed to manufacturer's specifications. Yes Siding to be installed of skirting. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes Skirting to be installed of skirting. Yes Pg. Siding on units at 16 toot intervals. Yes No Other: Other:	Site Preparation







Columbia

Order #: 3766	Label #: 59476	Manufacturer:	(Check Size of Home)
Homeowner:		Year Model:	Single
Address.		Length & Width:	Double
			Triple
City/State/Zip:		Type Longitudinal System:	HUD Label #:
Phone #:		Type Lateral Arm System:	Soil Bearing / PSF:
Date Installed:		New Home: Used Home:	Torque Probe / in-lbs:
Installed Wind Zone:	*8	Data Plate Wind Zone:	Permit #:
Note:			0.000 0.000

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

59476

LABEL#

DATE OF INSTALLATION

WILLIAM R PRICE

NAME

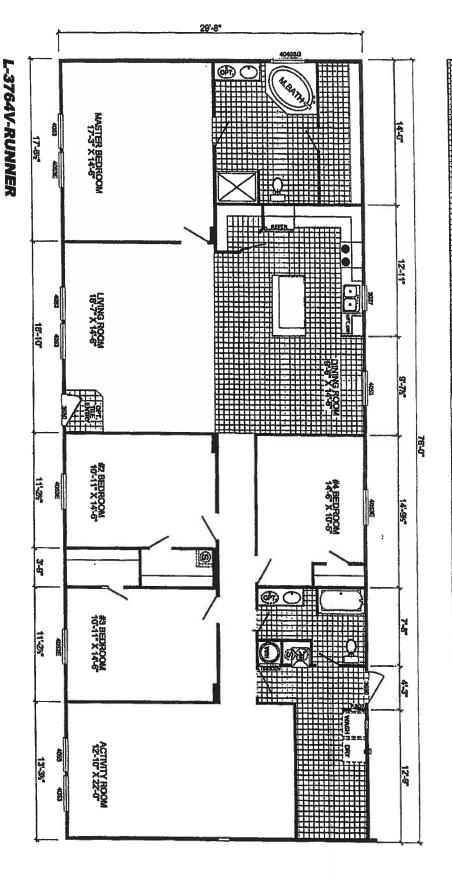
IH / 1041936 / 1

3766

LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320,8249, 320,8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.



32 X 80 - Approx. 2254 Sq. Ft. 4-BEDROOM / 2-BATH

Dute: 4-11-2018

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

* Transcen windows are available on optional 9-0* sidewall houses only.

* Storing attent to optional.

* Standing attent is optional only

Legend

2018Aerials

×

Parcels

Roads

Roads

others

Dirt 💮

Interstate

Main

Other

Paved

Private

Addresses

DevZones1

others

□ A-1

□ A-2

D A-3

O CG

CHI

D CI

CN CN

CSV

D ESA-2

01

D ILW MUD-I

PRD

PRRD

RMF-1

RMF-2

■ RO

RR RR

RSF-1

RSF-2

RSF-3

RSF/MH-1

RSF/MH-2

RSF/MH-3 **DEFAULT**

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

B A

B AE AH

Columbia County, FLA - Building & Zoning Property Map

Printed: Tue May 07 2019 09:22:33 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 25-7S-16-04321-038

Owner: ANDERS WAYNE T & DANA L Subdivision: RUM ISLAND RANCHES UNR

Lot:

Acres: 4.882964 Deed Acres: 5 Ac

District: District 2 Rocky Ford Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

All data, information, and maps are provided as is without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implies warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.



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 LETTER OF AUTHORIZATION

I, Mican Phi Installer License Holder No	give this authority	for the job address show below
only, 244) Gemini	Fle Ft Unite FL 3	20.38 , and I do certify that
the below referenced person(s) listed on this form is/are under m	
and is/are authorized to purcha	ase permits, call for inspections an	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Ma Price	Olar Princes	AgentOfficer Property Owner
Jessie Shepard	gslu	Agent Officer Property Owner
	0'	Agent Officer Property Owner
I, the license holder, realize that	t I am responsible for all permits p responsible for compliance with a	urchased, and all work done
Local Ordinances.	Series Williams	in Figure Statutes, Codes, and
holder for violations committed	nsing Board has the power and auby him/her or by his/her authorized sponsibility for compliance granted	d person(s) through this
License Holders Signature (Note	arized) License Nu	191936 4/13/19 mber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: Shwainy	<u> </u>
The above license holder, whos personally appeared before me (type of I.D.) NOTARY'S SIGNATURE	e name is \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ed identification f April , 2019.
THE DISTATIONE	(S	eal/Stamp) Notary Public State of Florida
		John Davis My Commission GG 299936 Expires 02/10/2023

Columbia County Property Appraiser

2018 Tax Roll Year updated: 3/5/2019

Jeff Hampton

Parcel: << 25-7S-16-04321-038 >>>

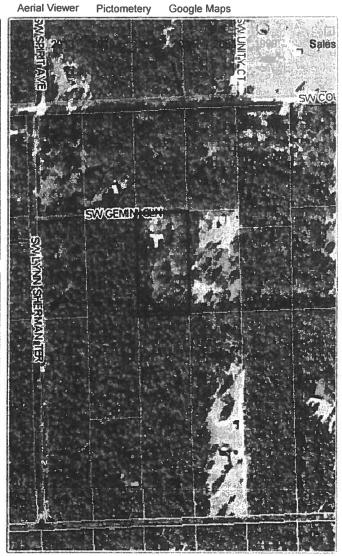
Owner & Pr	operty Info	Res	ult: 1 of 1	
Owner	ANDERS WAYNE T 242 SW GEMINI GL FT WHITE, FL 3203	EN		
Site	242 GEMINI GLN, FT WHITE			
Description*	S1/2 OF W1/2 OF E1/2 OF SW1/4 OF NE1/4. (A LOT 14-B RUM ISLAND RANCHES S/D UNREC ORB 761-810, 957-2580,			
Area	5 AC	S/T/R	25-7S-16	
Use Code**	SINGLE FAM (000100)	Tax District	3	

^{*}The <u>Description</u> above is not to be used as the Legal Description for this parcel

in any legal transaction.

**The <u>Use Code</u> 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						
2018 Certified Values			2019 Working Values			
Mkt Land (1)		\$29,744	Mkt Land (1)		\$29,744	
Ag Land (0)		\$0	Ag Land (0)		\$0	
Building (1)		\$75,697	Building (1)		\$75,644	
XFOB (7)		\$14,788	XFOB (7)		\$14,788	
Just		\$120,229	Just		\$120,176	
Class		\$0	Class		\$0	
Appraised		\$120,229	Appraised		\$120,176	
SOH Cap [?]		\$4,754	SOH Cap [?]		\$3,870	
Assessed		\$114,137	Assessed		\$116,306	
Exempt	нх нз	\$50,000	Exempt	нх нз	\$50,000	
	l .	y:\$64,137		1	ty:\$66,306	
Total	l .	y:\$64,137		ci	ty:\$66,306	
Taxable	l	er:\$64,137	Taxable	other:\$66,306		
	scho	oi:\$89,137		scho	ol: \$91,306	



▼ Sales History					and the second	The second state of the second
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/12/2002	\$139,800	957/2580	WD	1	Q	file of the manufacture of the control of the contr
6/12/1992	\$94,000	761/0810	WD	1	U	12

▼ Building Characteristics						
Bldg Sketch	Bldg Item	Bldg Desc*	Year Bit	Base SF	Actual SF	Bldg Value
Sketch	1	SINGLE FAM (000100)	1986	1856	3126	\$75,644

^{*}Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good
0190	FPLC PF	0	\$1,200.00	1.000	0 x 0 x 0	(00.00)
0280	POOL R/CON	1986	\$9,728.00	512.000	32 x 16 x 0	(000.00)
0070	CARPORT UF	1993	\$1,620.00	540.000	30 x 18 x 0	(000.00)
0040	BARN,POLE	1993	\$640.00	512.000	16 x 32 x 0	AP (050.00)
0169	FENCE/WOOD	1993	\$1,000.00	1.000	0x0x0	AP (050.00)

District No. 1 - Ronald Williams District No. 2 - Rocky Ford District No. 3 - Bucky Nash District No. 4 - Toby Witt District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued:

4/23/2019 2:53:12 PM

Address:

244 SW GEMINI Gln

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

04321-038

REMARKS: Address for proposed structure on parcel. 2nd address on this parcel.

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

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

lacreShown on 5 acres

Scale

Dona & James Campbell

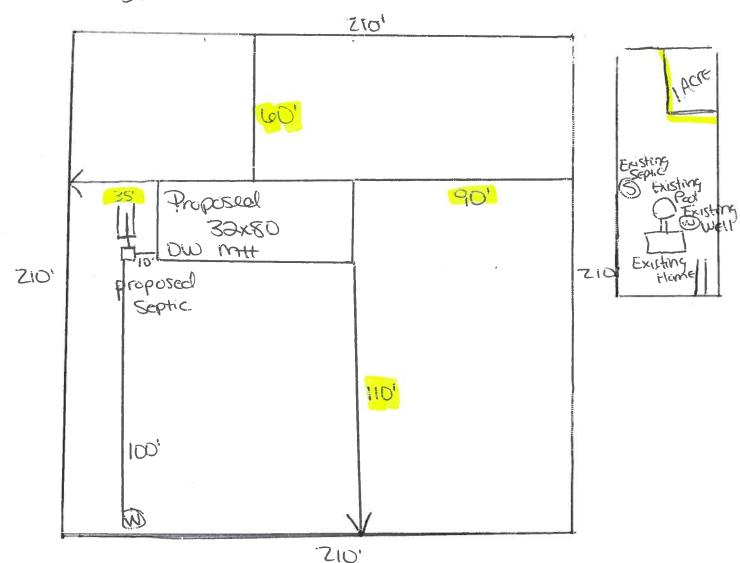
Site Plan

244 SW Gemini Glen Ff White FL.

parcel # 25-75-16-04321-038

No Well or Septic w/ in 75'

32×80 DW MH



STATE OF FLORIDA COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Wayne Anders
as the owner of the below described property:
Property tax Parcel ID number <u>25-75-16-04321-038</u>
Subdivision (Name, lot, Block, Phase) Rum Island Ranches
Give my permission for Junes and Danna Cambell to place a
Circle one - Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home / Barn – Shed – Garage / Culvert / Other
This is to allow a 2 nd Mobile Home on the above listed property for a family member through Columbia County's Special Temporary Use provision.
Family Members Name Donna Cambell
Family Members Name Donna Cambell Relationship to Lessee Daughter
I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.
Many J. Cale 24-18-19 Date Date
Owner Signature Date
Sworn to and subscribed before me this 18 day of 17pm, 2019. This
These) person(s) are personally known to me or produced ID (Type)
Jahn Davis
Notary Public Signature Notary Printed Name
Notary Stamp/ Notary Stamp/ Notary Public State of Florida John Davis My Commission GG 299938 Expires 02/10/2023

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	WBER 1905-10 CONTRACTOR	William	Price	PHONE 407-448-	_0457
	THIS FORM MUST BE SUBMITTED PRIOR	R TO THE ISSUANC	E OF A PERMIT		
Ordinance 89-	ounty one permit will cover all trades doing work subcontractors who actually did the trade specificate of a contractor shall require all subcontractors to neral liability insurance and a valid Certificate of	c work under ti	he permit. Per Flo	orida Statute 440 and	
Any changes, (start of that st	the permitted contractor is responsible for the contractor beginning any work. Violations wil	orrected form b I result in stop	eing submitted t work orders and,	o this office prior to the or fines.	e
ELECTRICAL	Print Name Blem W. Futtington License #: EC 13002957	Signature_	Man tathette 386 972 1	nation 100	
1074	Qualifier Form Attached				
MECHANICAL/	Print Name				
	Qualifier Form Attached				

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

ij	APPLICATION NUIV	IBER 1905-10 CONTRACTOR W	illiam	price	PHONE 407-448-	_ઈ'ઉંકે
		THIS FORM MUST BE SUBMITTED PRIOR TO	THE ISSUANC	E OF A PERMIT		
4	records of the s Ordinance 89-6 exemption, ger	unty one permit will cover all trades doing work at table on the contractors who actually did the trade specific will, a contractor shall require all subcontractors to properly insurance and a valid Certificate of Contractor is responsible for the corresponsible for the corr	ork under t wide evider npetency lic	he permit. Per F nce of workers' c ense in Columbi	lorida Statute 440 and compensation or ia County.	e
		bcantractor beginning any work. Violations will re				
- Acquisite and	ELECTRICAL	Print Name				-
Photographic and design		License #:	Phone #:_	 		
A CHARLES OF THE PARTY OF THE P		Qualifier Form Attached				
	MECHANICAL/	Print Name RONALD & Bonds 5R License #: CAC 1817658	Signature	Ronald 6 850.76	2 David FR	
	A/C 1661	License #: <u>CAC / 8 / 7 6 5 8</u>	Phone #:	850.76	7.75	
-		Qualifier Form Attached]			

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.



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

PERMIT NO.	19-1392
DATE PAID:	3/14/8
FEE PAID:	31070
RECEIPT #:	1414040

Page 1 of 4

APPLICATION FOR: New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Wayne Anders
AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dortch Street, 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: NA BLOCK: NA SUB: NA PLATTED:
PROPERTY ID #: 25-7s-16-04321-038 ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 5 ACRES WATER SUPPLY: [\(\) PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/N] DISTANCE TO SEWER: N
PROFERTY ADDRESS: 242 SW Gemini Glen, Fort White
SR-47 S. Rango to 1-758, Oxit 414, TR onto US-416, Thouto US-416, Routo SR-47 S. Rango to 1-758, Oxit 414, take US-4418, TR onto SW Oak Ridge St., Thouto US-27, Tr onto Sw Skilonst, Thouto Sw Spirit Are TR on Bridlewood Rd, Lon Sw 470 Sherman Ter, The onto Sw Germini Gien.
No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
SF Residential L 2a54
3
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: (31/2) DATE: 4/16/2019
DH 4015, 08/09 (Obsoletes previous editions which may not be used)

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number_ Wayne Anders PART II - SITEPLAN -----SW Gennin Gln Scale: 1 inch = 40 feet. 11750 NO wells Within 75' YBK 911) 35 Notes: 2101 act c MASTER CONTRA Plan Approved Not Approved By

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08i09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6,001, FAC (Stock Number: 5744-002-4015-6)

County Health Department