

DATE 03/29/2004

Columbia County Building Permit**PERMIT**

This Permit Expires One Year From the Date of Issue

000021663

APPLICANT CHUCK DOUGLASS PHONE 984-0502
 ADDRESS RT 10 BOX 526J LAKE CITY FL 32025
 OWNER FRED AUGUSTN PHONE _____
 ADDRESS 9117 SW TUSTENUGGEE AVE LAKE CITY FL 32024
 CONTRACTOR RONNIE NORRIS PHONE _____
 LOCATION OF PROPERTY 415 TO C131, 9 1/2 MILES ON THE LEFT, HEAVILY FLAGGED

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION .00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____
 FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
 LAND USE & ZONING A-3 MAX. HEIGHT _____
 Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
 NO. EX D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 32-5S-17-09477-106 SUBDIVISION NEW HOPE ESTATES
 LOT 3 BLOCK _____ PHASE _____ UNIT 2 TOTAL ACRES .90

IH0000049
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 04-0333-N BK RK Y
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: ONE FOOT ABOVE ROADCheck # or Cash 1024**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer:Slab)

Temporary Power _____ date/app. by _____ Foundation _____ date/app. by _____ Monolithic _____ date/app. by _____
 Under slab rough-in plumbing _____ date/app. by _____ Slab _____ date/app. by _____ Sheathing/Nailing _____ date/app. by _____
 Framing _____ date/app. by _____ Rough-in plumbing above slab and below wood floor _____ date/app. by _____
 Electrical rough-in _____ date/app. by _____ Heat & Air Duct _____ date/app. by _____ Peri. beam (Lintel) _____ date/app. by _____
 Permanent power _____ date/app. by _____ C.O. Final _____ date/app. by _____ Culvert _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ date/app. by _____ Pool _____ date/app. by _____
 Reconnection _____ date/app. by _____ Pump pole _____ date/app. by _____ Utility Pole _____ date/app. by _____
 M/H Pole _____ date/app. by _____ Travel Trailer _____ date/app. by _____ Re-roof _____ date/app. by _____

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
 MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 39.69 WASTE FEE \$ 85.75
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 375.44
 INSPECTORS OFFICE Mike Teller CLERKS OFFICE CH

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 INCONVENIENCE. PHONE 758-1008 THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

*** The well affidavit, from the well driller, is required before the permit can be issued.***
***This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted

26.03.04

For Office Use Only		Zoning Official <u>BLK</u>	Building Official <u>RK 329</u>
AP# <u>0403-63</u>	Date Received <u>3/19/04</u>	By <u>JW</u>	Permit # <u>21663</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>A-3</u>
Comments _____			

- Property ID # 32-55-17-09477-106 *(Must have a copy of the property de
- New Mobile Home ✓ Used Mobile Home _____ Year 03
- Applicant Rhonda Ingram Phone # 386-397-2336
- Address 9117 SW Tustenegee Av Lake City FL 32024
- Name of Property Owner Fred Augustin Phone# _____
- Address Rt 2 Box 364-B Lake City FL 32024
- Name of Owner of Mobile Home Rhonda Ingram Phone # _____
- Address SAME
- Relationship to Property Owner N/A
- Current Number of Dwellings on Property -0-
- Lot Size 176 X 225 Total Acreage .90 Acre
- Current Driveway connection is Needs existing ~~Colocated~~ Application ~~Not~~
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Name of Licensed Dealer/Installer Ronnetta Morris Phone # 961-6419
- Installers Address Rt 11 Box 507 Lake City 32055
- License Number I#0000049 Installation Decal # 216374

The Permit Worksheet (2 pages) must be submitted with this application.
Installers Affidavit and Letter of Authorization must be notarized when submitted.



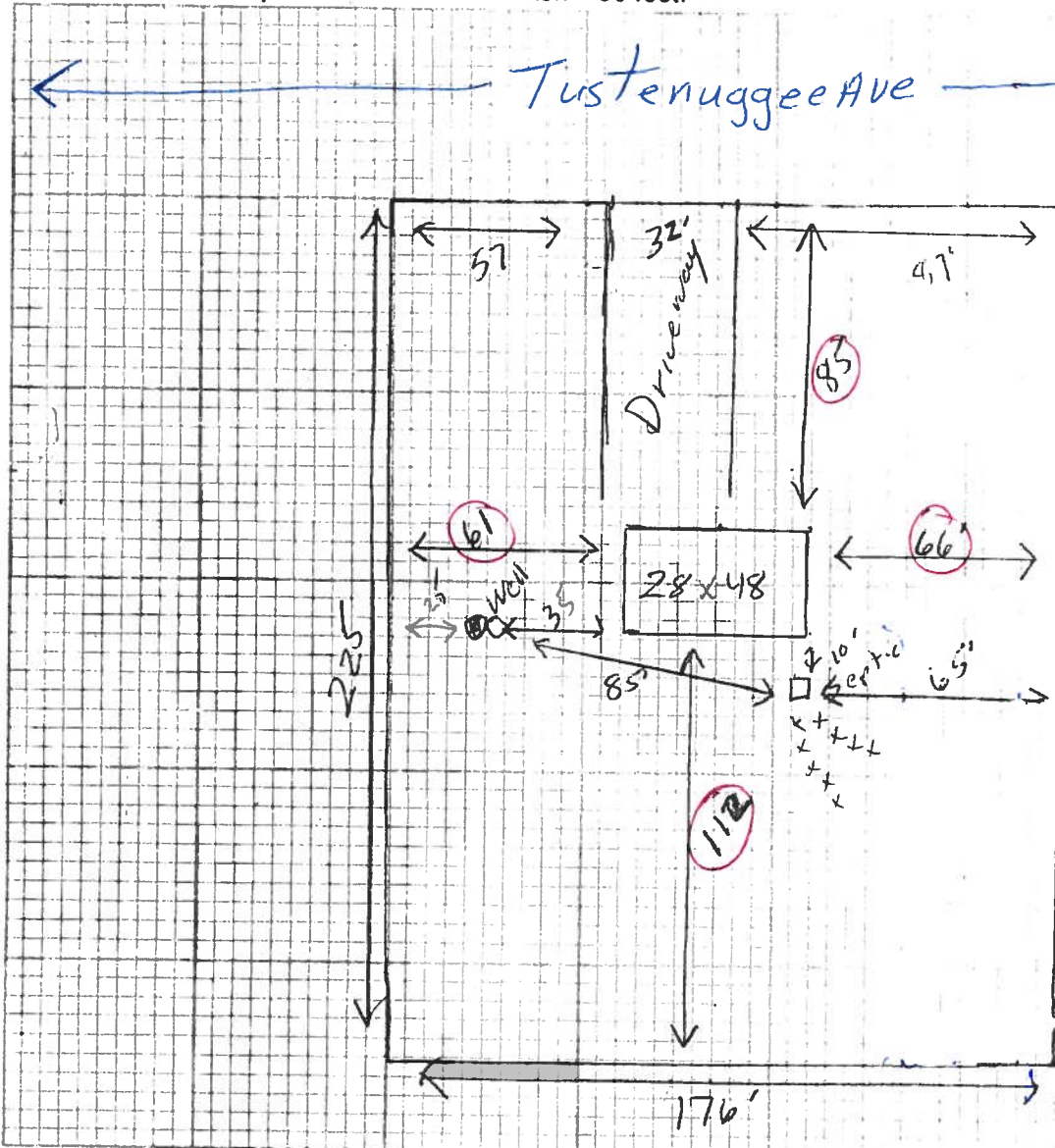
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

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



36314 SW
70
911 Address
Next to
Lot

Property Next
Door is
36314 Tustenuggee
Ave.

Notes: Fred Augustin 32-55-17-09477-106

House to nearest Lot Line is 61', House to septic 10'
Septic to nearest Lot Line 65', Septic to well 85'
Well to house 35', well to nearest Lot Line 25'

Site Plan submitted by: Rodney Douglas

Signature

Title

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1 525 1 51 1

Columbia Coui

PRINTED 3/15/2004 9:09
APPR 5/13/1999 HC

TOTAL

L002 - 1.08 AC
2004

CONSENT

This is to certify that I, (We), Fred Augustin as
owner(s) of the below described property:

Sec. 32 Twp. 55 Rge. 17 Tax Parcel No. 09477-106
Lot: 3 Block: B Subdivision: New Hope Estates

give permission for Rhonda Ingram to place a
Mobile Home on my property in Columbia County.
(Mobile Home/Travel Trailer/SFD)

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Dated this 18 day of March, 2004.

Witness

X Fred A Augustin
Owner

Witness

Owner

Sworn to and subscribed before me this 19th day of March
2004, by Fred Augustin
Property owner(s) name(s)

Amanda B Stratton
Notary's name printed/typed

Amanda B Stratton
Notary Public, State of Florida
Commission No. _____
Personally known _____
Produced ID (type) _____



Amanda B Stratton
My Commission DD042089
Expires July 15, 2006

ERMIT NUMBER

Installer

Tom & Norris

License #

IH000049

Address of home being installed

Manufacturer

Home mat

Length x width

40x28

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 lies exceed 5 ft 4 in.

Installer's initials

[Signature]

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 #

216374

Triple/Quad

☐

Serial #

ELHMBH165349374AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footers size (sq ft)	15' x 16" (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'						
1500 psf	4'6"						
2000 psf	6'						
2500 psf	7'6"						
3000 psf	8'						
3500 psf	8'						

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size

17x22

Perimeter pier pad size

11x14

Other pier pad sizes (required by the mfg.)

16x16

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

20x

20x22

16

20x22

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

OTHER TIES

Sidewall
Longitudinal Marriage wall
Shearwall

Number

2

4

2

2

2

2

Pad Size	Sq ft
16 x 16	256
16 x 18	288
18.5 x 18.5	342
18 x 22.5	360
17 x 22	374
13 1/4 x 28 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

POPULAR PAD SIZES

ANCHORS

4 ft

5 ft

FRAME TIES

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

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil

x 1500 without testing. 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 inch pounds or check here if you are declaring 5 anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A slide 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 corners/points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. loading capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

POURCE NASE

Date Tested

APR 18 04

Electrical

X

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 lap or septic tank. Pg.

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

Site Preparation

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

Fastening multi-wide units

Floor: Type Fastener: Length: Spacing: 24
Walls: Type Fastener: Length: Spacing: 12
Roof: Type Fastener: Length: Spacing: 12
For used homes 3/16 in. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galy. roofing nails at 2" on center on both sides of the centerline.

Gashead fastening requirements

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

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

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

Miscellaneous

Stirling to be installed. Yes No
Dryer vent installed outside of stirring. Yes N/A
Range downflow vent installed outside of stirring. Yes N/A
Drain lines supported at 4 foot intervals. Yes
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

POURCE NASE

Date 4/18/04

GM WELL DRILLING, INC.
15235 29TH ROAD
LAKE CITY, FL 32024
386/963-1566 FAX 386-963-3549

TO WHOM IT MAY CONCERN:

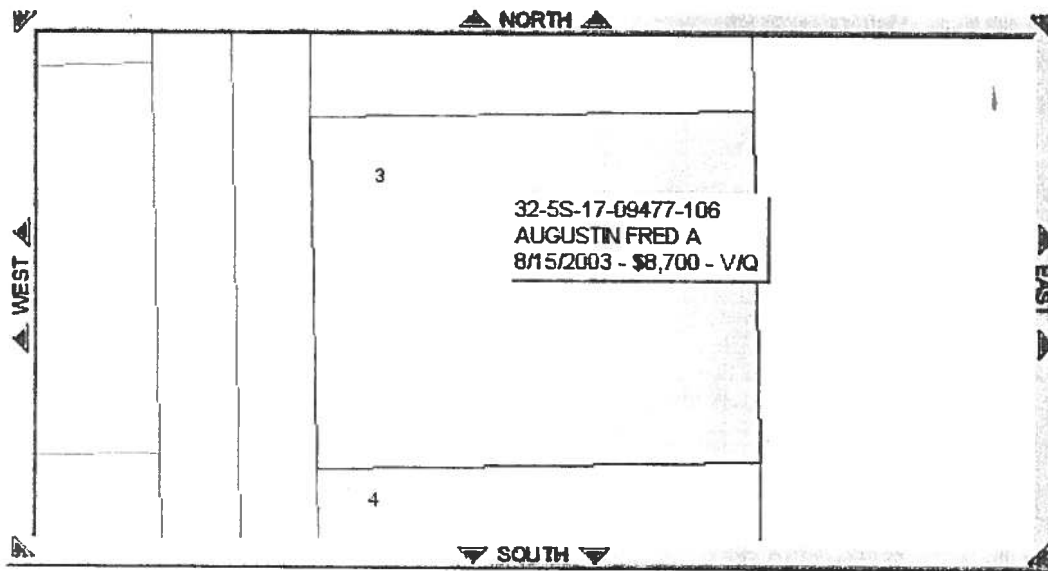
4" WELL WITH 1 HP SUB, PUMP, 1 1/2 GALV. DROP PIPE AND 81 GAL BLADDER TANK
PUMP GIVES 20 GPM A MINUTE, TANK HAS 25.1 DRAWDOWN AT 30/50 PRESSURE.
TANK PC244.

NO CYCLE STOP VALVE IS USED . TANK GIVES US DRAWDOWN THAT WE NEED.

SINCERELY,

A handwritten signature in black ink, appearing to read "Ronnie Morris", written in a cursive style.

RONNIE MORRIS
PRESIDENT



LIMITED POWER OF ATTORNEY

I, Ronnie Norris, license # IH0000049 hereby authorize
Rodney or Chuck Douglass to be my representative and
act on my behalf in all aspects of applying for a mobile
home permit to be placed on the following described
property located in Columbia County, Florida.

Property owner: Fred Augustin

911 Address : _____

Parcel ID #: 09477-106

Sect: 32 Twp: 55 Rge: 17

Ronnie Norris
Mobile Home Installer Signature

3/18/04
Date

Sworn to and subscribed before me this 18th day of March,
2004.

Amanda B. Stratton
Notary Public



Amanda B Stratton
My Commission DD042089
Expires July 15, 2005

My Commission expires: July 15, 2005

Commission Number: DD042089

Personally known: _____

Produced ID (type): _____

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 hereby state that the

installation of the manufactured home for Rhonda Ingram
(applicant)

at _____ will be done under my
(911 Address)

supervision.

Ronnie Norris
(Signature of Installer)

Sworn to and subscribed before me this 18th day of March,
2004.

Notary Public: Amanda B. Stratton
(Signature)

My Commission Expires: July 15, 2005



Amanda B Stratton
My Commission DD042089
Expires July 15, 2005

Columbia County Building Department Culvert Permit

Culvert Permit No.
000000237

DATE 03/19/2004 PARCEL ID # 32-5S-17-09477-106
APPLICANT RODNEY DOUGLASS PHONE 984.0502
ADDRESS 510 BRODERICK DRIVE LAKE CITY FL 32025
OWNER RHONDA INGRAM PHONE 397.2336
ADDRESS 9117 SW TUSTENUGGEE AVENUE LAKE CITY FL 32024
CONTRACTOR RONNIE NORRIS PHONE 961.6419
LOCATION OF PROPERTY 41-S TO C-131- 9 1/2 MILES ON THE LEFT. HEAVILY FLAGGED. CULVERT IS
MARKED.

SUBDIVISION/LOT/BLOCK/PHASE/UNIT NEW HOPE ESTATES 3 B 2

SIGNATURE

Rodney Douglass

INSTALLATION REQUIREMENTS



Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.



Culvert installation shall conform to the approved site plan standards.



Department of Transportation Permit installation approved standards.



Other _____

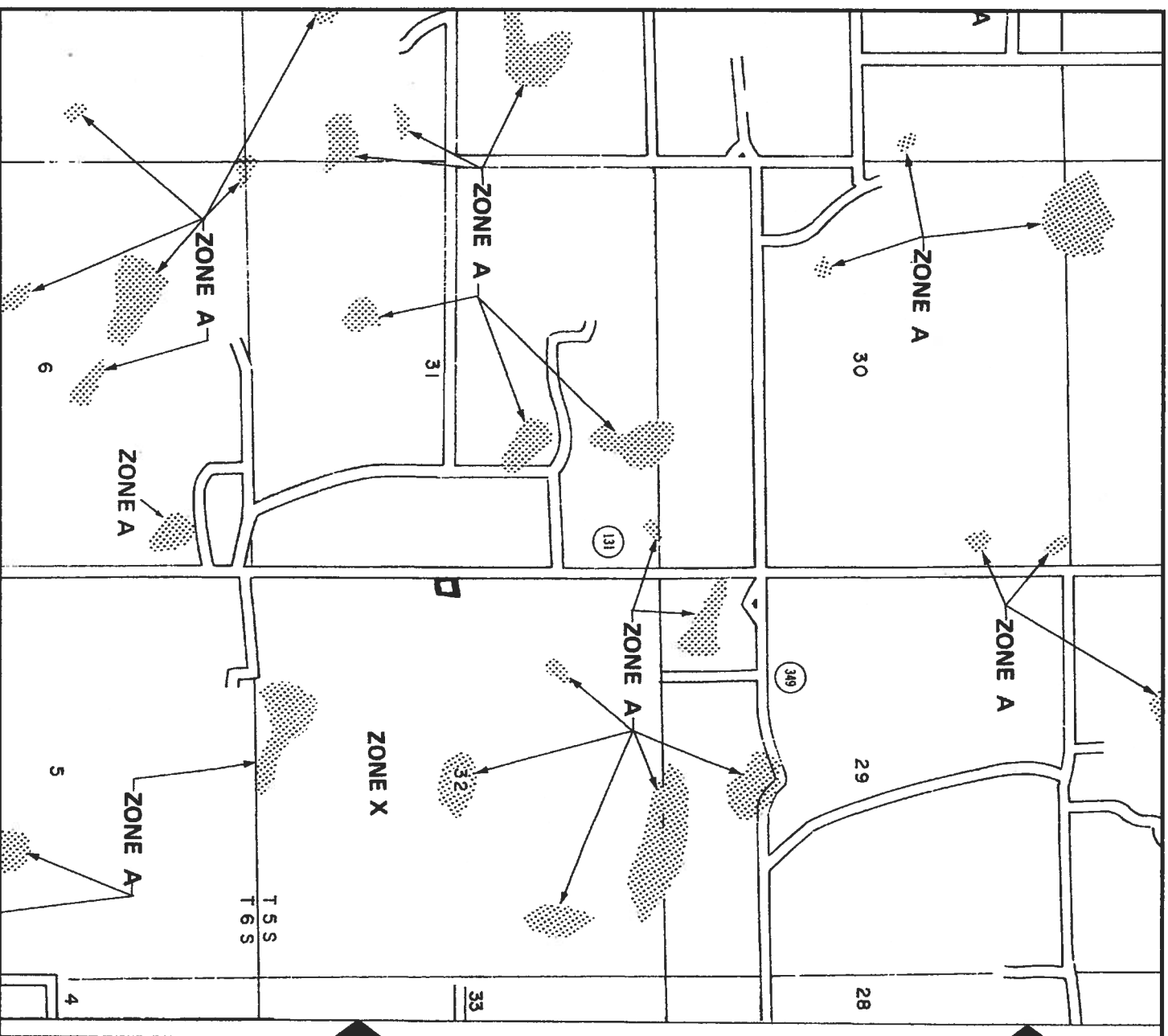
ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED
DURING THE INSTALATION OF THE CULVERT.

135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160



Amount Paid 25.00



0403-63



APPROXIMATE SCALE IN FEET
2000 0 2000

NATIONAL FLOOD INSURANCE PROGRAM	
FIRM FLOOD INSURANCE RATE MAP	
COLUMBIA COUNTY, FLORIDA (UNINCORPORATED AREAS)	
PANEL 225 OF 290	
 PANEL LOCATION	
COMMUNITY-PANEL NUMBER 120070 0225 B	
EFFECTIVE DATE: JANUARY 6, 1988	
 Federal Emergency Management Agency	

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nifmsd

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949

PHONE: (386) 752-8787 * 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 ISSUED: March 19, 2004

ENHANCED 9-1-1 ADDRESS:

9117 SW TUSTENUGGEE AVE (LAKE CITY, FL 32024)Addressed Location 911 Phone Number: NOT AVAIL.OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: _____

PROPERTY APPRAISER PARCEL NUMBER: 32-5S-17-09477-106

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: _____

Address Issued By: Shelley A. Mesoner

Columbia County 9-1-1 Addressing Department

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

FILED
FEB 12 2004

COLUMBIA COUNTY, FLORIDA

DEPT

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 32-5S-17-09477-106

Building permit No. 000021663

Permit Holder RONNIE NORRIS

Owner of Building FRED AUGUSTINE

Location: 9117 SW TUSTENUGGEE AVENUE, LAKE CITY, FL 32024

Date: 04/12/2004

Harry Dickie

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

