

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                       |                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------|----------------------------------|
| <i>For Office Use Only</i> (Revised 7-1-15)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          | Zoning Official _____ | Building Official _____          |
| AP# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date Received _____      | By _____              | Permit # _____                   |
| Flood Zone _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Development Permit _____ | Zoning _____          | Land Use Plan Map Category _____ |
| Comments _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                       |                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                       |                                  |
| FEMA Map# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Elevation _____          | Finished Floor _____  | River _____ In Floodway _____    |
| <input type="checkbox"/> Recorded Deed or <input type="checkbox"/> Property Appraiser PO <input type="checkbox"/> Site Plan <input type="checkbox"/> EH # _____ <input type="checkbox"/> Well letter OR<br><input type="checkbox"/> Existing well <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Installer Authorization <input type="checkbox"/> FW Comp. letter <input type="checkbox"/> App Fee Paid<br><input type="checkbox"/> DOT Approval <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> STUP-MH _____ <input type="checkbox"/> 911 App<br><input type="checkbox"/> Ellisville Water Sys <input type="checkbox"/> Assessment _____ <input type="checkbox"/> Out County <input type="checkbox"/> In County <input type="checkbox"/> Sub VF Form |                          |                       |                                  |

Property ID # 18-75-16-04236-1260 Subdivision \_\_\_\_\_ Lot# 51

- New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 16x12 Year 2014
- Applicant JAMES BOGLE Phone # 352-870-1002
- Address 741 SW Longhorn Ter. Ft White FL 32038
- Name of Property Owner James Bogle Phone# 352-870-1002
- 911 Address 741 Longhorn Ter Fortwhite 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 James Bogle Phone # 352-870-1002  
 Address 741 Longhorn Ter Fortwhite FL
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 0
- Lot Size \_\_\_\_\_ Total Acreage 1.52 AC
- 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 NO
- Driving Directions to the Property TAKE 47 toward trenton turn  
right on Holling worth rd Come to End turn left  
come down 400 ft+ property will be on left.
- Name of Licensed Dealer/Installer Glen Williams Phone # 386-344-3669
- Installers Address 660 SE Putnam St Lake City FL
- License Number 1H 1054853 Installation Decal # 78441

48829



# Mobile Home Permit Worksheet

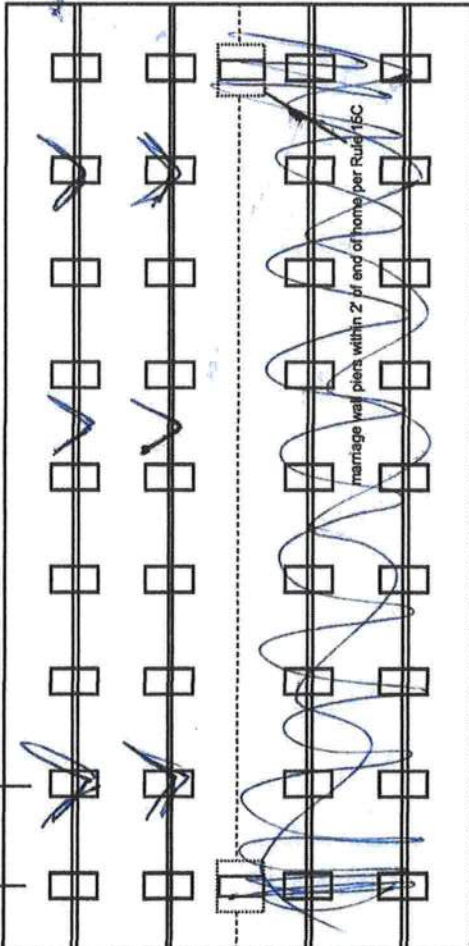
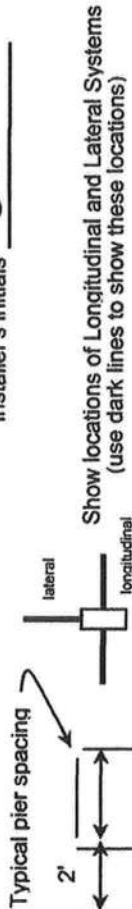
Installer: 61 License # 11-1054853

Address of home being installed: 741 Longhorn Ter Fort Worth, TX 76111

Manufacturer: Desway Length x width: 16x76

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: GW



Frame ties

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

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 # 78441

Triple/Quad ☐ Serial # FLE 2606A 13-61003A

## 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)* | 26" x 26" (676) |
|-----------------------|---------------------|-----------------|-------------------------|-----------------|------------------|------------------|-----------------|
| 1000 psf              | 3'                  | 3'              | 4'                      | 5'              | 6'               | 7'               | 8'              |
| 1500 psf              | 4' 6"               | 4' 6"           | 6'                      | 7'              | 8'               | 8'               | 8'              |
| 2000 psf              | 6'                  | 6'              | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 2500 psf              | 7' 6"               | 7' 6"           | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 3000 psf              | 8'                  | 8'              | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 3500 psf              | 8'                  | 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.) \_\_\_\_\_

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

4 ft ☒ 5 ft

## FRAME TIES

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

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer \_\_\_\_\_

## OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall



# Mobile Home Permit Worksheet

## 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 280 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 requires anchors with 4000 lb holding capacity.

Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Glen Williams

Date Tested

3-18-21

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.

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.

Application Number:

Date:

## Site Preparation

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

## Fastening multi wide units

Floor: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Walls: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Roof: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
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

Glen Williams

Date

3-18-21



# Columbia County Property Appraiser

Jeff Hampton

**2021 Working Values**

updated: 3/18/2021

Parcel: << 18-7S-16-04236-126 (22472) >>

Aerial Viewer Pictometry Google Maps

## Owner & Property Info

Result: 1 of 1

|              |                                                              |              |          |
|--------------|--------------------------------------------------------------|--------------|----------|
| Owner        | BOGLE JAMES R<br>741 SW LONGHORN TER<br>FORT WHITE, FL 32038 |              |          |
| Site         | 741 LONGHORN TER, FORT WHITE                                 |              |          |
| Description* | LOT 51 CEDAR SPRING SHORES REPLAT. 906-1827, WD 1402-2605,   |              |          |
| Area         | 1.52 AC                                                      | S/T/R        | 18-7S-16 |
| Use Code**   | VACANT (0000)                                                | Tax District | 3        |

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code 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

| 2020 Certified Values |                                                                       | 2021 Working Values |                                                             |
|-----------------------|-----------------------------------------------------------------------|---------------------|-------------------------------------------------------------|
| Mkt Land              | \$15,000                                                              | Mkt Land            | \$15,000                                                    |
| Ag Land               | \$0                                                                   | Ag Land             | \$0                                                         |
| Building              | \$0                                                                   | Building            | \$0                                                         |
| XFOB                  | \$0                                                                   | XFOB                | \$0                                                         |
| Just                  | \$15,000                                                              | Just                | \$15,000                                                    |
| Class                 | \$0                                                                   | Class               | \$0                                                         |
| Appraised             | \$15,000                                                              | Appraised           | \$15,000                                                    |
| SOH Cap [?]           | \$0                                                                   | SOH Cap [?]         | \$0                                                         |
| Assessed              | \$15,000                                                              | Assessed            | \$15,000                                                    |
| Exempt                | \$0                                                                   | Exempt              | \$0                                                         |
| Total Taxable         | county:\$15,000<br>city:\$15,000<br>other:\$15,000<br>school:\$15,000 | Total Taxable       | county:\$15,000<br>city:\$0<br>other:\$0<br>school:\$15,000 |



## Sales History

| Sale Date | Sale Price | Book/Page | Deed | V/I | Qualification (Codes) | RCode |
|-----------|------------|-----------|------|-----|-----------------------|-------|
| 12/6/2019 | \$17,500   | 1402/2605 | WD   | V   | Q                     | 01    |
| 6/28/2000 | \$5,000    | 0906/1827 | WD   | V   | U                     | 01    |

## Building Characteristics

| Bldg Sketch | Description* | Year Blt | Base SF | Actual SF | Bldg Value |
|-------------|--------------|----------|---------|-----------|------------|
| NONE        |              |          |         |           |            |

## Extra Features & Out Buildings (Codes)

| Code | Desc | Year Blt | Value | Units | Dims |
|------|------|----------|-------|-------|------|
| NONE |      |          |       |       |      |

## Land Breakdown

| Code | Desc          | Units               | Adjustments             | Eff Rate     | Land Value |
|------|---------------|---------------------|-------------------------|--------------|------------|
| 0000 | VAC RES (MKT) | 1.000 LT (1.520 AC) | 1.0000/1.0000 1.0000/ / | \$13,000 /LT | \$13,000   |
| 9946 | WELL (MKT)    | 1.000 UT (0.000 AC) | 1.0000/1.0000 1.0000/ / | \$2,000 /UT  | \$2,000    |

Search Result: 1 of 1





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, Glenn Williams, give this authority for the job address show below  
Installer License Holder Name

only, 741 SW Inghearn Ter Fort White, and I do certify that  
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

| Printed Name of Authorized Person | Signature of Authorized Person | Authorized Person is... (Check one)                                                                                   |
|-----------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| James R. Boyle                    |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input checked="" type="checkbox"/> Property Owner |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner            |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner            |

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

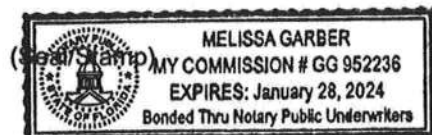
License Holders Signature (Notarized)  
1H1054808 License Number  
9-17-21 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Damarcus Williams, personally appeared before me and is known by me or has produced identification (type of I.D.) 23rd on this March day of 2021.

NOTARY'S SIGNATURE



## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Glen Williams PHONE 366-344-3669

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

***Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.***

|                                  |                                                                                                              |                                                                 |
|----------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>ELECTRICAL</b>                | Print Name <u>James R. Boyle</u><br>License #: _____<br><br>Qualifier Form Attached <input type="checkbox"/> | Signature <u>James R. Boyle</u><br>Phone #: <u>352-870-1002</u> |
| <b>MECHANICAL/<br/>A/C _____</b> | Print Name <u>James R. Boyle</u><br>License #: _____<br><br>Qualifier Form Attached <input type="checkbox"/> | Signature _____<br>Phone #: <u>352-870-1002</u>                 |

**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.

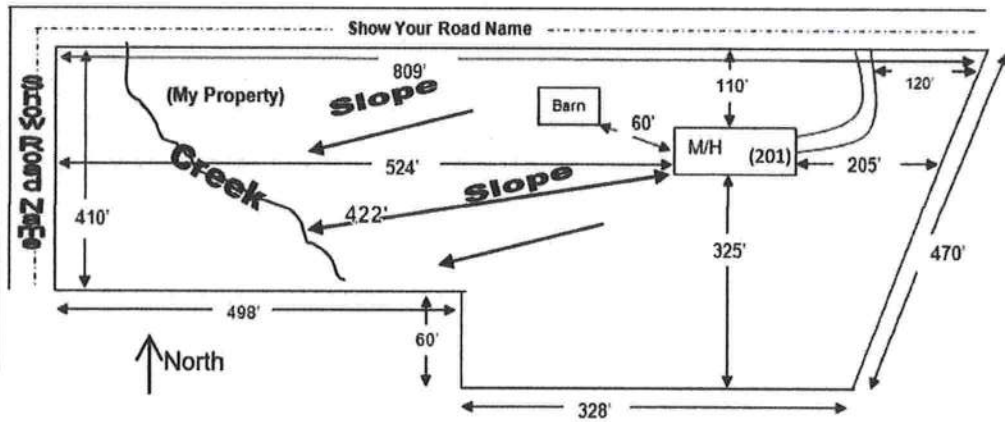


### SITE PLAN CHECKLIST

- \_\_\_ 1) Property Dimensions
- \_\_\_ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- \_\_\_ 3) Distance from structures to all property lines
- \_\_\_ 4) Location and size of easements
- \_\_\_ 5) Driveway path and distance at the entrance to the nearest property line
- \_\_\_ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- \_\_\_ 7) Show slopes and or drainage paths
- \_\_\_ 8) Arrow showing North direction

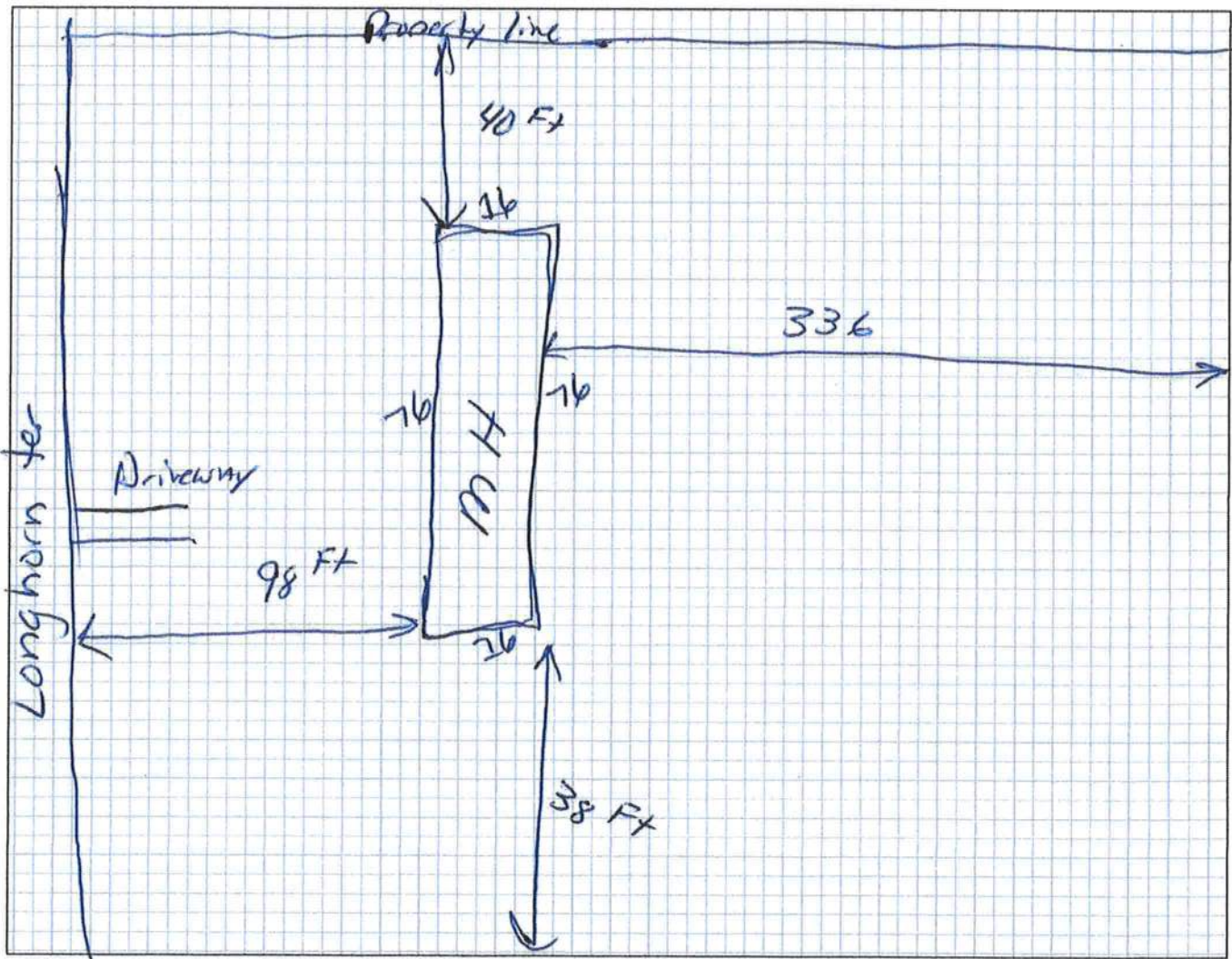
### SITE PLAN EXAMPLE

Revised 7/1/15



#### NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.



**CODE ENFORCEMENT DEPARTMENT  
COLUMBIA COUNTY, FLORIDA  
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Alachua County  
OWNERS NAME James R. Bogle PHONE \_\_\_\_\_ CELL 352-870-1002  
INSTALLER \_\_\_\_\_ PHONE \_\_\_\_\_ CELL \_\_\_\_\_  
INSTALLERS ADDRESS 660 Se Putnam

**MOBILE HOME INFORMATION**

MAKE Tan YEAR 2014 SIZE 16 X 72  
COLOR Tan SERIAL No. \_\_\_\_\_  
WIND ZONE 2 SMOKE DETECTOR \_\_\_\_\_

INTERIOR:  
FLOORS Good  
DOORS Good  
WALLS Good  
CABINETS \_\_\_\_\_

ELECTRICAL (FIXTURES/OUTLETS) Good

EXTERIOR:  
WALLS / SIDING Good  
WINDOWS Good  
DOORS Good

INSTALLER: APPROVED ☒ NOT APPROVED \_\_\_\_\_

INSTALLER OR INSPECTORS PRINTED NAME Glean Williams

Installer/Inspector Signature Glean Williams License No. 1H1051858 Date 9-17-21

NOTES: Data Plate in m/bedroom closet.

**ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.**

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

**BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.**

**ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.**

Code Enforcement Approval Signature [Signature] Date 3/23/21