Lot# 40295

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official AG Building Official TC 2-8-18

AP# 1802-15 Date Received 2-6 By _____ Permit # 36386

Flood Zone X Development Permit _____ Zoning A3 Land Use Plan Map Category A

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor 1' above road River _____ In Floodway _____

☑ Recorded Deed or ☐ Property Appraiser PO ☑ Site Plan ☑ EH # 18-0124 ☐ Well letter OR

☑ Existing well ☐ Land Owner Affidavit ☑ Installer Authorization ☐ FW Comp. letter ☑ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____ ☑ 911 App

☐ Ellisville Water Sys ☐ Assessment Paid on Property ☐ Out County ☑ In County ☑ Sub VF Form

Property ID # 10-7S-17-09969-017 Subdivision OAK RIDGE FOREST S/D Lot# 7

- New Mobile Home ✓ Used Mobile Home _____ MH Size 13X72 Year 2016
- Applicant PAUL BARNEY Phone # 386-209-0906
- Address 4166 S.W. DEP. J. DAVIS LN, LAKE CITY, FL 32024
- Name of Property Owner VICTORIA S. KEENE Phone# 352-339-1684
- ✓ 911 Address 612 MAID MARION LN, HIGH SPRINGS, FL 32643
- Circle the correct power company - FL Power & Light - (Clay Electric)
  (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home KYLE & VICTORIA KEENE Phone # 352-665-0698
  Address 17401 N.W. US HWY 441, HIGH SPRINGS, FL 32643
- Relationship to Property Owner SELF
- Current Number of Dwellings on Property 1 BEING REPLACED
- Lot Size _____ Total Acreage .95
- 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 YES
- Driving Directions to the Property US 90 TO I-75 SOUTH TO EXIT 414 T/R TO US 441/41 TO MAID MARION T/L TO SITE ON RIGHT AT 612 MAID MARION LN, HIGH SPRINGS, FL
- Name of Licensed Dealer/Installer PAUL ALBRIGHT Phone # 386-365-5314
- Installers Address 199 SW THOMAS TERR LAKE CITY, FL 32024
- License Number IH 102 5239 Installation Decal # 45953

Sent Email 2.7.18

$325.10

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Paul C Wright License # 1025239

911 Address where home is being installed. 612 SE Main Ln
High Springs FL

Manufacturer Live Oak Length x width 14 X 76

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 PCW

New Home ☑ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☑

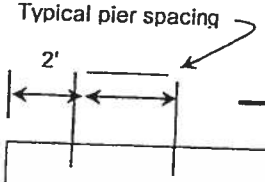
Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

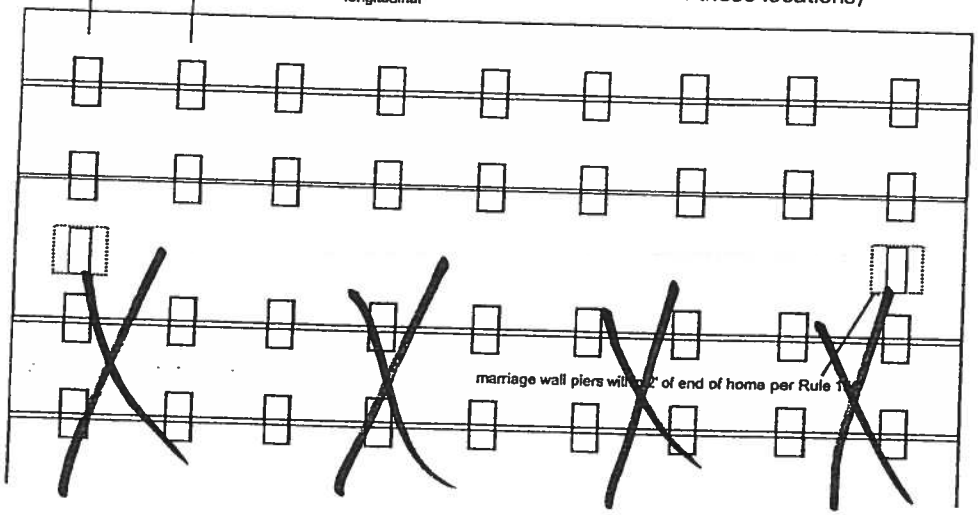
Double wide ☐ Installation Decal # 458853

Triple/Quad ☐ Serial # 30855

Typical pier spacing



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)*	26" 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 17 X 22

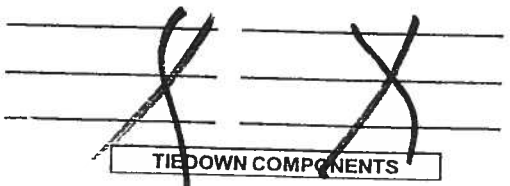
Perimeter pier pad size 16 X 16

Other pier pad sizes (required by the mfg.) N/A

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



TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

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

ANCHORS

4 ft ✓ 5 ft Shear Walls

FRAME TIES

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

OTHER TIES

	Number
Sidewall	20+2
Longitudinal	8
Marriage wall	N/A
Shearwall	2

COLUMBIA COUNTY 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 185 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.

PGH Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Paul C Wright

Date Tested ___

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: PG4

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. PG4

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: ___ Length: ___ Spacing: N/A
Walls: Type Fastener: ___ Length: ___ Spacing: N/A
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, 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.

Type gasket N/A
Pg. ___

Installer's initials ___

Installed:
Between Floors Yes ___
Between Walls Yes N/A
Bottom of ridgebeam Yes

Weatherproofing

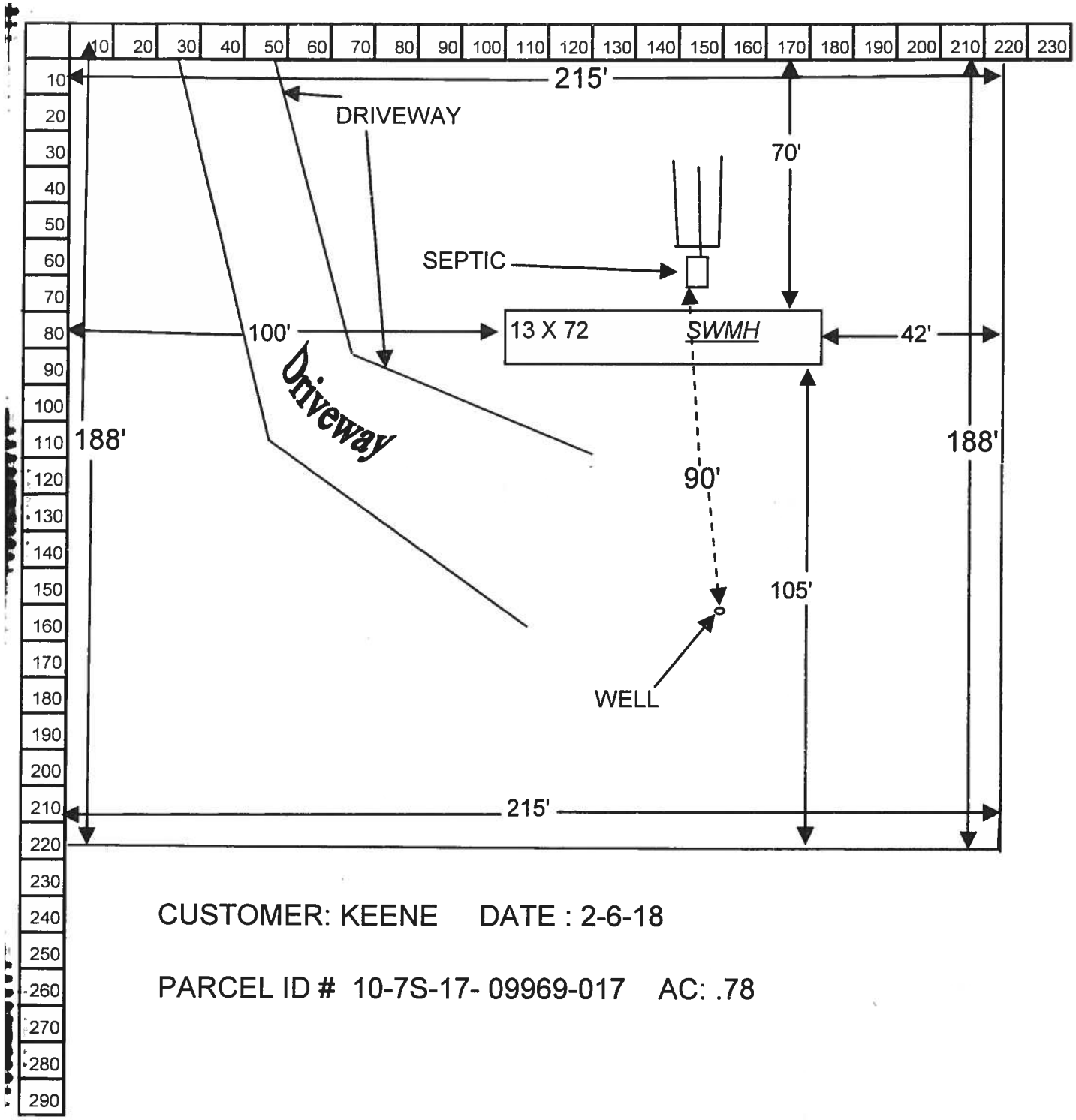
The bottomboard will be repaired and/or taped. Yes ✓. Pg. ___
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ___

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 N/A.
Other : ___

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Paul C Wright Date ___



CUSTOMER: KEENE DATE : 2-6-18

PARCEL ID # 10-7S-17- 09969-017 AC: .78

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:	**2/8/2018 2:40:04 PM**
Address:	**612 SE MAID MARION Ln**
City:	**HIGH SPRINGS**
State:	**FL**
Zip Code	**32643**
Parcel ID	**09969-017**

REMARKS: Address Verification.

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

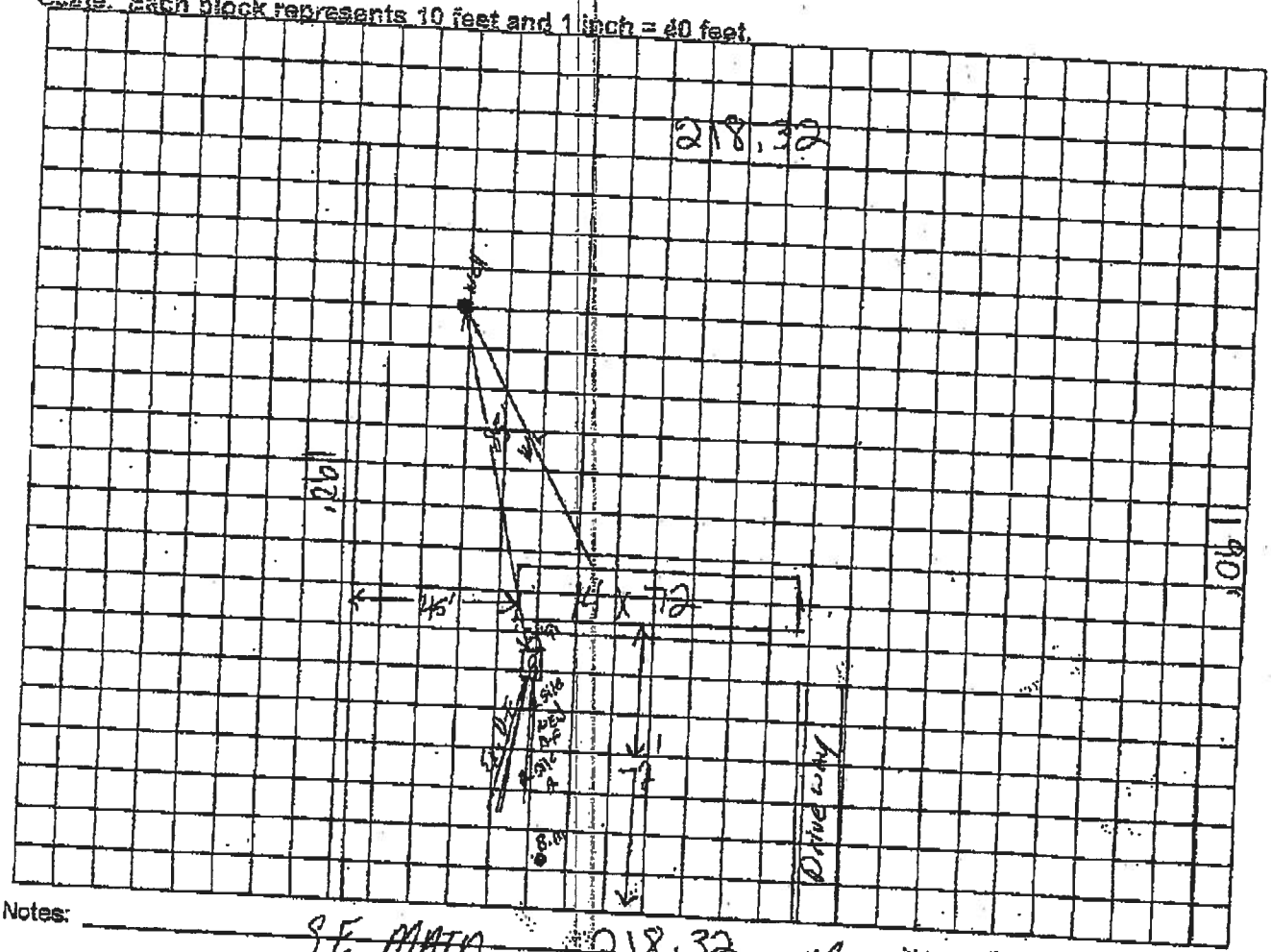
COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT
263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0124 Keene

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: SE MAIN 218.32 MARION LN.

Site Plan submitted by: [signature] 2-13-18

Plan Approved Y Not Approved ____ Date 2/22/18

By [signature] Calculation County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-002-4015-6)

3867582187

11:12:53 a.m. 02-26-2018 2/3

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT #: 12-SC-1823250
APPLICATION #: AP1328831
DATE PAID: 2/14/18
FEE PAID: 240.00
RECEIPT #: 354823A
DOCUMENT #: PR1095290

CONSTRUCTION PERMIT FOR: OSTDS Existing Modification
APPLICANT: VICTORIA**18-00124 KEENE
PROPERTY ADDRESS: 812 SE MAID MARION Ln Lake City, FL 32025
LOT: 7 BLOCK: SUBDIVISION: Oak Ridge Forest
PROPERTY ID #: 09969-017 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER] [OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [900] GALLONS / GPD Existing Septic Tank CAPACITY
A [ ] GALLONS / GPD N/A CAPACITY
N [ ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [ ] GALLONS DOSING TANK CAPACITY [ ]GALLONS @[ ]DOSES PER 24 HRS #Pumps [ ]

D [375] SQUARE FEET Drainfield SYSTEM
R [ ] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [x] STANDARD [ ] FILLED [ ] MOUND [ ]
I CONFIGURATION: [x] TRENCH [ ] BED [ ]
N
F LOCATION OF BENCHMARK: 12" tree northwest of system site
I ELEVATION OF PROPOSED SYSTEM SITE [28.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [55.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O 1.) The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.
T 2.) Modification permit. Do not disturb the existing system, instead add 150 SQFT to the existing 225 SQFT to achieve the required area.
H 3.) An outlet filter device is required.
E
R

SPECIFICATIONS BY: Robert W Ford TITLE: Mass Outreach
APPROVED BY: Derek K Gibson TITLE: Environmental Specialist I Columbia CHD
DATE ISSUED: 02/26/2018 EXPIRATION DATE: 08/25/2019

DH 4015, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

v 1.1.e AP1328831 SE1065162 Page 1 of 3

p.1

Feb 26 18 12:31p

Prepared by and return to:
Victoria Keene
P.O. Box 976
High Springs, FL 32655

Tax Parcel # R09969-017

Inst 201512000196 Date 1/7/2015 Time 3:56 PM
Doc Stamp-Deed 0.70
DC P.DeWitt Cason Columbia County Page 1 of 1 B 1287 P 953

Warranty Deed

This Indenture, Made this 5th day of January 2015, between Victoria S. Keene and Christina A. Davis (Christina A. Summers) as grantors, and Victoria S. Keene grantee, whose address is
769 SW Woodland Ave, Fort White, Fl 32038.

WITNESSETH: That said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS ($10.00) and other valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold, to the said grantee, and grantee's heirs and assigns forever, the following described land, situated, lying and being in Columbia County, Florida, wit:

Lot 7, Oak Ridge Forest, a subdivison as recorded in in Plat Book 4, Page 121, of the Public Records of Columbia County, Florida.

Together with a 1981 Mobile Home with ID #GDWSGA268056618 and Florida Title No. 19346678

The subject property is not the homestead property of the Grantors, and the subject property is not contiguous to the homestead of the grantors.

Subject to restrictions, reservations and limitations of record, if any, and taxes for the year 2014, and subsequent years.

And said grantors hereby fully warrant the tile to said land, and will defend the same against the lawful claims of all persons whomever.

INWITNESS WHEREOF, grantors has hereunto set grantor's hand and seal the 5th day of January 2015.

Witnesses:

Christina A (Summers) Davis
Christina A. (Summers) Davis

Victoria S. Keene

STATE OF FLORIDA
COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me this 5th day of January 2015, by Christina A. Davis and Victoria S. Keene, who is personally known to me.

Notary Public

WILSON A. STEEN
Notary Public, State of Florida
Commission # EE 872078
My comm. expires Feb. 06, 2017

Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year
updated: 2/1/2018

Parcel: << **10-7S-17-09969-017** >>

Aerial Viewer | Pictometery | Google Maps

Owner & Property Info

Result: 12 of 19

Owner	KEENE VICTORIA S 17401 NW US HWY 441 HIGH SPRINGS, FL 32643		
Site	612 MAID MARION LN, HIGH SPRINGS		
Description *	LOT 7 OAK RIDGE FOREST S/D. ORB 562-407, 982-1227, WD 1287 -953,		
Area	0.95 AC	S/T/R	10-7S-17
Use Code *	MOBILE HOM (000200)	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. Please contact the Columbia County Planning & Development office for specific zoning information.

Property & Assessment Values

2017 Certified Values		2018 Working Values	
Mkt Land (2)	$12,047	Mkt Land (2)	$13,051
Ag Land (0)	$0	Ag Land (0)	$0
Building (1)	$6,223	Building (1)	$6,243
XFOB (0)	$0	XFOB (0)	$0
Just	$18,270	Just	$19,294
Class	$0	Class	$0
Appraised	$18,270	Appraised	$19,294
Exempt	$0	Exempt	$0
Assessed	$18,270	Assessed	$19,294
Total Taxable	county:$18,270 city:$18,270 other:$18,270 school:$18,270	Total Taxable	county:$19,294 city:$19,294 other:$19,294 school:$19,294

Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
1/5/2015	$100	1287/0953	WD	I	U	11
5/2/2003	$25,000	982/1227	WD	I	Q	
10/1/1981	$2,300	477/0260	WD	V	Q	

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1981	770	770	$6,243

Extra Features & Out Buildings - (Show Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

License Number: IH / 1025239 / 1 Name: PAUL E. ALBRIGHT

Order #: 2989 Label #: 45853	Manufacturer: LivOak	(Check Size of Home)
Homeowner: Keene	Year Model: 2016	Single ✓
Address: 612 SE Maid Ln	Length & Width: 14 X 76	Double ___
City/State/Zip: High Springs FL	Type Longitudinal System:	Triple ___
Phone #: 352-339 1844	Type Lateral Arm System: 6	HUD Label #:
Date Installed:	New Home: ✓ Used Home: ___	Soil Bearing / PSF: 1500
Installed Wind Zone:	Data Plate Wind Zone:	Torque Probe / in-lbs: 285
Note:		Permit #:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

45853
LABEL # DATE OF INSTALLATION

PAUL E. ALBRIGHT
NAME

IH / 1025239 / 1 2989
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 [illegible] AND KEEP ON FILE [illegible] MINIMUM OF 2 YEARS. [illegible] ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

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 AGENT AUTHORIZATION

I, PAUL E ALBRIGHT, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
PAUL BARNEY	Paul a Barney	FREEDOM HOMES

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.

Paul E Albright — License Holders Signature (Notarized)
RH1025239 — License Number
3-2-17 — Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: SUWANNEE

The above license holder, whose name is PAUL E ALBRIGHT, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 2 day of MARCH, 2017.

Paul a Barney
NOTARY'S SIGNATURE

PAUL A BARNEY
MY COMMISSION # GG 040180
EXPIRES: October 19, 2020
Bonded Thru Budget Notary Services
(Seal/Stamp)

12/30/2016 10:30 Freedom Mobile Home Sales (FAX)3867524757 P.002/002
Dec 30 16, 04:01p Whittington electric inc, 3866843906 p.1
12/29/2016 15:57 Freedom Mobile Home Sales (FAX)3867524757 P.002/002

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1802-15 CONTRACTOR PAUL Albritton PHONE 386.365.5314

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.

ELECTRICAL 1074	Print Name WHITTINGTON ELECTRIC Signature [signature] License #: E1300 2957 Phone #: 386 972 1700 Qualifier Form Attached ☐
MECHANICAL/ A/C 1669	Print Name STYLE CREST Signature Ronald E Bonds SR License #: CAC1817658 Phone #: 850-769-1453 Qualifier Form Attached ☐

Qualifier Forms cannot be submitted for any Specialty License:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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.

Revised 10/30/2015