

DATE 08/04/2011

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029603

APPLICANT BERNIE THRIFT PHONE 752-9561
ADDRESS 5557 NW FALLING CREEK RD WHITE SPRINGS FL 32096
OWNER ARDEN HAJOS/DAVID HAJOS PHONE 386-454-5688
ADDRESS 195 SW RABBIT LN LAKE CITY FL 32024
CONTRACTOR BERNIE THRIFT PHONE 752-9561
LOCATION OF PROPERTY 90 W, L MAYO RD, R RABBIT, 1ST ON RIGHT

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING AG-3 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 25-3S-15-00195-003 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES 5.00

IH10251551
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 11-0296-M BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

OWNER AFFIDAVIT ON FILE

NO CHARGE BURN OUT REPLACEMENT - SEE FIRE REPORT

Check # or Cash NO CHARGE

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 Insulation 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 Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ CULVERT FEE \$ TOTAL FEE 0.00
INSPECTORS OFFICE CLERKS OFFICE

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."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BK 26 July 2011 Building Official J.C. 7-22-11

AP# 1107-49 Date Received 7-21-11 By LH Permit # 29603

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

Comments No Change - Burnt MH - See fire report

FEMA Map# N/A Elevation N/A Finished Floor 12' above River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☐ EH # 11-0296-m ☐ EH Release ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☒ State Road Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☒ V Form

IMPACT FEES: EMS ☐ Fire ☐ Corr ☐ Out County ☒ In County forced

Road/Code ☐ School ☐ = TOTAL ☐ Impact Fees Suspended March 2009 7-21-11

Property ID # 25-3S-15-00195-003 Subdivision

☐ New Mobile Home ☒ Used Mobile Home ☒ MH Size 1680 Ft² Year 1985

☐ Applicant David Hajos Phone # 386-454-5688

☐ Address PO Box 475 High Springs FL 32655

☐ Name of Property Owner Arden Hajos Phone# 386-454-5688

☒ 911 Address 195 SW Rabbit Lane Lake City, FL 32024

☐ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

☐ Name of Owner of Mobile Home David Hajos Phone # 386-454-5688
Address PO Box 475 High Springs FL 32655

☐ Relationship to Property Owner SON

☐ Current Number of Dwellings on Property 0 (this will replace burned home)

☐ Lot Size 5 acres Total Acreage 5 acres

☐ 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 Replacing burnt down mobile

☐ Driving Directions to the Property go west past I-75 to Mayo Rd left at stopsign go left to 1st Right Rabbit Lane First property on Right. 623-0046

☐ Name of Licensed Dealer/Installer Bernie Thrift Phone # 386-752-9561

☐ Installers Address 5557 NW Falling creek rd White Springs FL 32096

☐ License Number #1025155/1 Installation Decal # 5587

Spoke to Jen 7-26-11

jenn@gatewayfarms.net

Left message for Bernie 8-1-11

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psi
or check here to declare 1000 lb. soil without testing.

X 2000 X 2000 X 2000

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 2500 X 2500 X 2500

TORQUE PROBE TEST

The results of the torque probe test is 290 ft 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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernie Thrift

Date Tested

7-6-11

Electrical

Install electrical conductors between multi-wide units, but not to the main power line. This includes the bonding wire between multi-wide units. Pg. 5

Plumbing

Install all sewer drains to an existing sewer tap or septic tank. Pg. 5

Install all potable water supply piping to an existing water meter, water tap, or other dependent water supply systems. Pg. 5

Site Preparation

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

Fastering multi wide units

Floor: Type Fastener: Lags Length: 5' Spacing: 24"
Walls: Type Fastener: 2x4s Length: 8' Spacing: 24"
Roof: Type Fastener: Flashlag Length: 10' Spacing: 56"
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

BT

Type gasket Seam Seal

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 5
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

Installer Signature

Bernie Thrift Date 7-7-11



STATE OF FLORIDA
DEPARTMENT OF HEALTH

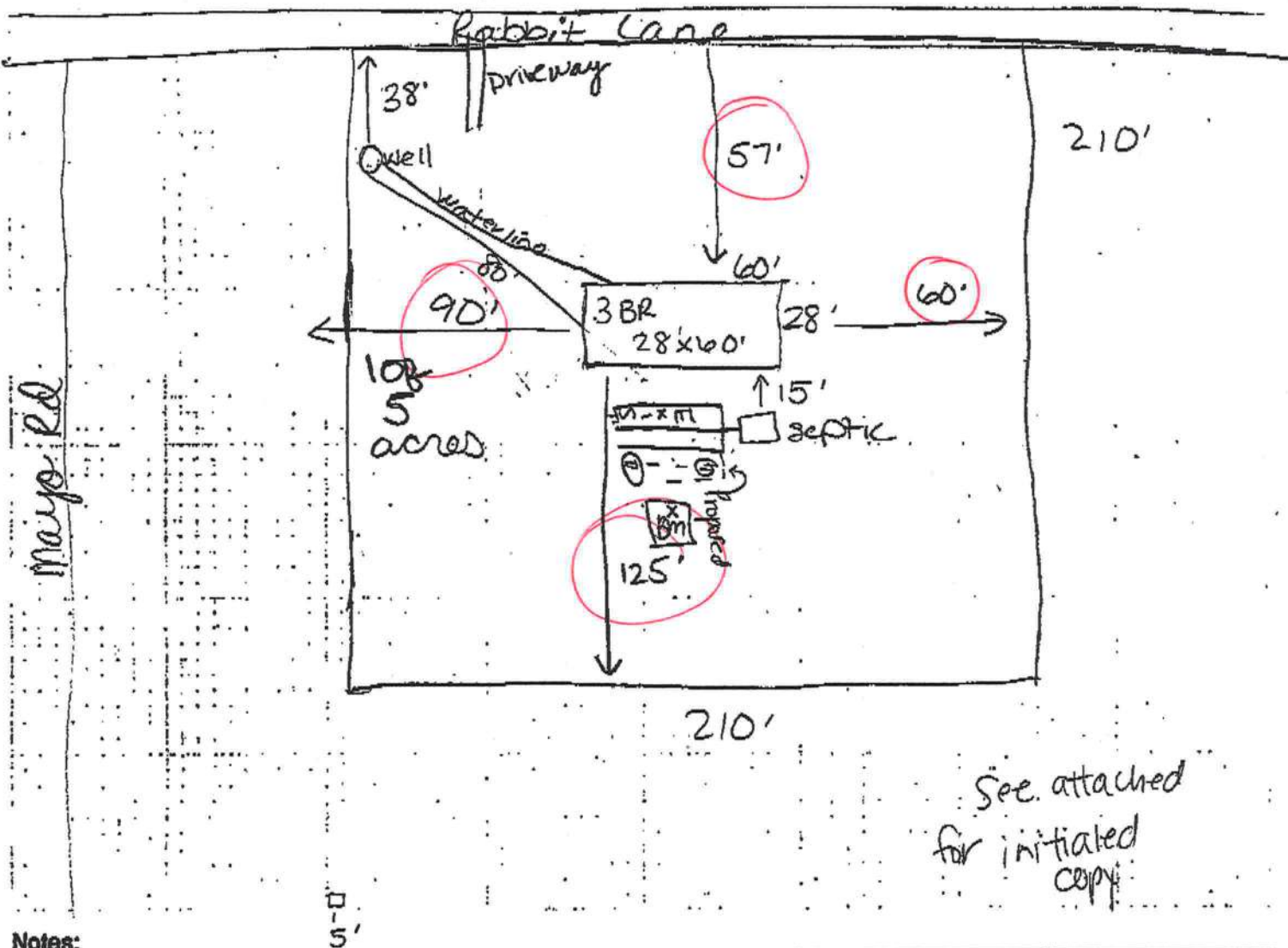
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

11-0296-m

PART II - SITE PLAN

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



Notes:

Site Plan submitted by:

David H. S.

Signature

Agent

Title

Plan Approved ☒

Not Approved ☐

Date

7-15-11

By

Salhi Ford Env Health Director - Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), Arden Hajos
owner of the below described property:

Tax Parcel No. 25-38-15-00195-003

Subdivision (name, lot, block, phase) N/A

Give my permission to David Hajos to place a
mobile home travel trailer/single family home (circle one) on the above mentioned
property.

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

Arden Hajos Kopp
Owner

7-27-11
Owner

SWORN AND SUBSCRIBED before me this 27 day of July,
2011. This (these) person(s) are personally known to me or produced
ID Florida Drivers License

Nicole Storer
Notary Signature



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1107-49 CONTRACTOR Bernie Thrift PHONE 752-9561

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	Print Name <u>David Hajos</u> License #:	Signature <u>David Hajos</u> Phone #: <u>352-281-0235</u>
MECHANICAL/ A/C	Print Name <u>David Hajos</u> License #:	Signature <u>David Hajos</u> Phone #: <u>352-281-0235</u>
PLUMBING/ GAS	Print Name <u>Bernie Thrift</u> License #: <u>1410251551</u>	Signature <u>Bernie Thrift</u> Phone #: <u>752-9561</u>

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.



Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

PARCEL: 25-3S-15-00195-003 - MOBILE HOM (000200)

S 330.70 FT OF W1/2 OF NW1/4 OF SE1/4, ORB 812-1015

Name: HAJOS ARDEN

Site: 195 SW RABBIT LN

Mail: 22413 NORTHWEST 227TH DRIVE
HIGH SPRINGS, FL 32643-7104

Sales
Info

NONE

2010 Certified Values

Land	\$38,012.00
Bldg	\$2,887.00
Assd	\$40,899.00
Exmpt	\$0.00
Taxbl	Cnty: \$40,899
	Other: \$40,899 Schl: \$40,899

NOTES:



Columbia County Property Appraiser

DB Last Updated: 6/22/2011

2010 Tax Year

Parcel: 25-3S-15-00195-003

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

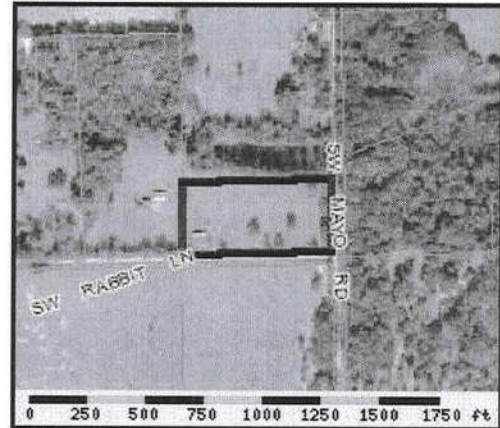
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	HAJOS ARDEN (David's Mom)		
Mailing Address	22413 NORTHWEST 227TH DRIVE HIGH SPRINGS, FL 32643-7104		
Site Address	195 SW RABBIT LN		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	25315
Land Area	5.000 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
S 330.70 FT OF W1/2 OF NW1/4 OF SE1/4. ORB 812-1015			



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$38,012.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$2,887.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$40,899.00
Just Value		\$40,899.00
Class Value		\$0.00
Assessed Value		\$40,899.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$40,899 Other: \$40,899 Schl: \$40,899	

2011 Working Values

NOTE:

2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1980	AL SIDING (26)	672	672	\$2,887.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

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

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	5 AC	1.00/1.00/1.00/1.00	\$6,482.27	\$32,411.00
009945	WELL/SEPT (MKT)	1 UT - (0000000.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Florida Division of State Fire Marshal

ACISS Primary Investigation Report

Report Number: 10-3916

Report Date: 12/24/2010

Physical Evidence Information - Continued

Latent Prints: No
Impression: No
Documents: No
Other Evidence: No
Lab Used: Bureau of Forensic Fire and Explosive Analysis SFM

Description/Collection From

Digital Photographs documented the fire scene
Sketch of scene (not to scale)
Q-1 Heavily burned fire debris from the living room floor
Q-2 Fire debris/soil from ground under living room floor

Fire Origin Information

Area/Origin	Description
F Kitchen, cooking area, stove, range, etc.	Stove Top right side

Agency Reference Numbers

Agency	Case/File Number
Columbia County Sheriff's Office CCSO	
Florida State Fire Marshal	
Office of the Medical Examiner, Jacksonville	
Columbia County Fire Rescue CCFR	

Synopsis

Address #1 - FIRE SCENE #1 - 195 Rabbit Ln

Primary Information - 195 Rabbit Ln

Address: 195 Rabbit Ln, Lake City, Florida 32024 , United States of America
Description: Single Wide Mobile Home
Office: Ocala
Region: Northeast

Laurie Hodson

From: Ron Croft
Sent: Thursday, July 21, 2011 10:00 AM
To: Laurie Hodson
Subject: RE: Verification of existing address

If New MH is going back in same location with same access address will remain the same.

PARCEL_N	ADDRESS	CITY	ST	ZIP
25-35-15-00195-003	195 SW RABBIT LN	LAKE CITY	FL	32024

Ron

Ronal N. Croft

Columbia County 911 Addressing / GIS Department

P.O. Box 1787

Lake City, FL 32056-1787

Phone: 386-758-1125

Fax: 386-758-1365

E-Mail: ron_croft@columbiacountyfla.com

From: Laurie Hodson
Sent: Thursday, July 21, 2011 9:51 AM
To: Ron Croft
Subject: Verification of existing address

Ron,

The original MH burnt. They are putting the new MH in the same spot. The address I have is 195 SW Rabbit Lane, Lake City, FL 32024 on parcel # 00195-003. Can you confirm this for me.

Thank you,
Laurie

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7-21-11 BY LA 1107-49 IS THE M/H ON THE PROPERTY? YES WILL THE PERMIT BE ISSUED? YES
OWNER'S NAME David Hayes PHONE 386 154-3688 352-281-0235
ADDRESS 195 SW Rabbit Lane Lake City, FL 32024
MOBILE HOME PARK NO SUBDIVISION NO
DRIVING DIRECTIONS TO MOBILE HOME 90 West past 1-75 4.5 miles turn
left onto Mayo Rd. at stop sign turn left to
next Rd. Rabbit Lane make Right 1st prop on Right
MOBILE HOME INSTALLER Bernay Thrift PHONE 386-623-0046

MOBILE HOME INFORMATION

MAKE Flotewood YEAR 1985 SIZE 24 x 60 COLOR Brown
SERIAL No. GAFL2AF10344345

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P = PASS F = FAILED

☒ SMOKE DETECTOR () OPERATIONAL () MISSING
☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
☒ DOORS () OPERABLE () DAMAGED
☒ WALLS () SOLID () STRUCTURALLY UNSOUND
☒ WINDOWS () OPERABLE () INOPERABLE
☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
☒ CEILING () SOLID () HOLES () LEAKS APPARENT
☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
☒ WINDOWS () CRACKED / BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: Replace Rotten Siding

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE

A. S. Paul

ID NUMBER

402

DATE

7-21-11