

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

1 William 10 Pince	this authority for the job address show below					
only, 1109 SW HOWELL St La	Ke City FT, and J do certify that					
the below referenced person(s) listed on this form and is/are authorized to purchase permits, call for	is/are under my direct supervision and control					
The second pointing, Gall 1011	inspections and sign on my behalf.					
Printed Name of Authorized Signature of Authorized Person	horized Authorized Person is (Check one)					
Oda Pru Cachi	Agent Officer Property Owner					
Jessie Shepard JA	Agent Officer Property Owner					
	Agent Officer Property Owner					
under my license and I am fully responsible for com Local Ordinances. I understand that the State Licensing Board has the holder for violations committed by him/her or by his/i document and that I have full responsibility for comp	power and authority to discipline a license					
Dellas	1H-1041936 6/2/2					
License Holders Signature (Notarized)	License Number Date					
NOTARY INFORMATION: STATE OF:COUNTY OF:S	Date /					
The above license holder, whose name is \(\mu\) ([1])	am Pru					
personally appeared before me and is known by me (type of I.D.) on this	or has produced identification					
NOTARY'S SIGNATURE	Papines 02/10/2023					
	(Seal/Stamp)					



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Phone: 386-758-1008 Fax: 386-758-2160

William Price	ME INSTALLERS AGENT A	UTHORIZATION
Installers Name	give this authori	ty and I do certify that the below
referenced person(s) listed on is/are authorized to purchase p	this form is/are under my direct ermits, call for inspections and	Supervision and control
Printed Name of Authorized Person	Signature of Authorized	Agents Company Name

Printed Name of Authorized Person	Signature of Authorized	Agents Company Name
Ida Price Jessie Shepard	CelaPiù	Parce Pit Anten
Essie Shepard	() All	PRICE RITE Inten
		1-1-616
ne license holder, realize that	I am responsible for all permits	purchased, and all work done
cal Ordinances.	esponsible for compliance with	all Florida Statutes, Codes, and
	sing Board has the nouse	authority to discour
derstand that the State Licen:	and and the power and	Pull Office of Grand and Grand
riolations committed by	nim/ner or by his/her authorize	ad person/a) the second
nderstand that the State Licens der for violations committed by cument and that I have full resp	nim/ner or by his/her authorize	ed person(s) through this ed by issuance of such permits.

License Holders Signature (Notarized) NOTARY INFORMATION: STATE OF: __Florida COUNTY OF: SHUAMY The above license holder, whose name is will in the Price personally appeared before me and is known by me or has produced identification (type of I.D.) on this 2 day of day of NOTARY'S SIGNATURE (Seal/Stamp) Notary Public State of Florida John Davis My Commission GG 299936

Expires 02/10/2025

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360

Sq In

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288

676 576 26" x 26"

(676)

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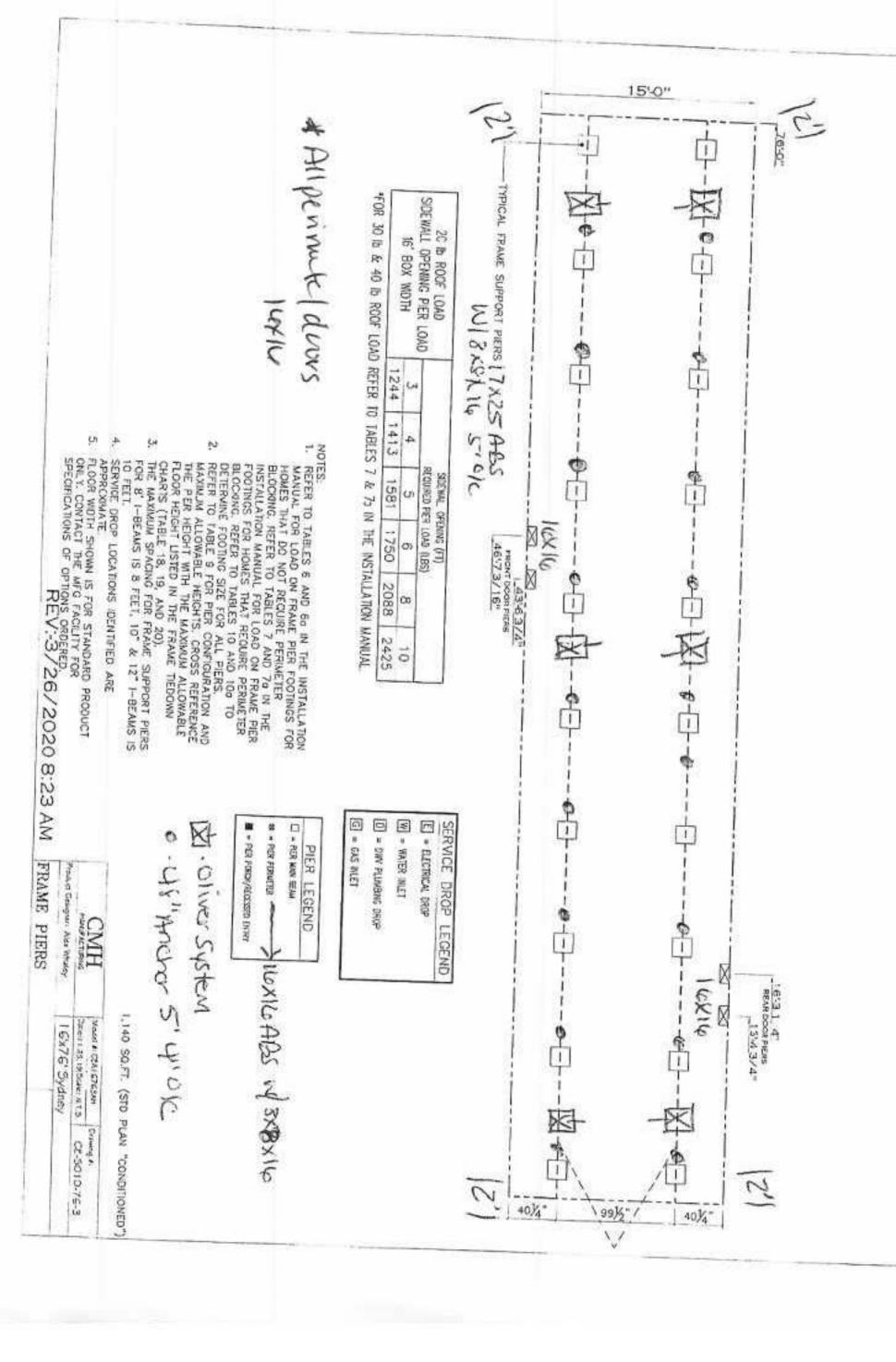
Mobile Home Permit Worksheet

Connect all sewer drains to an existing sewer tap or septic tank. Pg.	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg.	Date Tested U(2/22	Installer Name William R. Price BY A LICENSED INSTALLER	installer's intials	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.	Note: A state approved lateral arm system is being used and 4 ft.	- W	× x x x x x x x x x	reading and round down to that increment.	11/100	- the	or check here to declare 1000 lb. soil without testing. × 100 × 1	POCKET PENETROMETER TEST
manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the worksheet	Installer verifies all information gives	Drain lines supported at 4 foot intervals. Yes N/A Electrical crossovers protected. Yes	1	Miscellaneous	The bottomboard will be repaired and/or taped. Yes Pg. Pg. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Weatherproofing	Type gasket Type gasket Pg. Between Hoors Yes Between Walls Yes Bottom of ridgebeam Yes	nomes 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.	I understand a properly installed gasket is a requirement of all so	Fastener: Fastener: sed homes sed homes centered of	Type Fastener: Length: Co.	Debris and organic material removed Water drainage: Natural Swale Pad Other Fastening multi wide units	Site Preparation

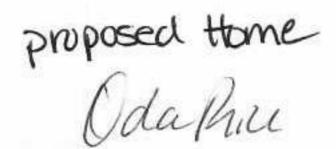
Independent water supply systems. Pg-

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Y White







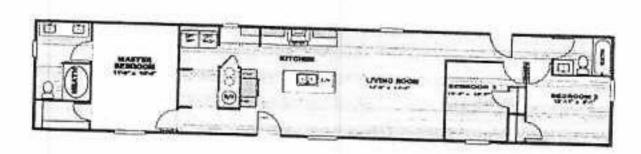
SYDNEY

WHC027141GA 3 beds • 2 baths 1,140 sq. ft.









MODEL #CEA16769AH DRAWING # CES010-76-3 16'X76' SYDNEY

(352) 629-1346

Monday - Friday: 9am - 6pm Saturday: 9am - 5pm Sunday: Closed CLAYTON HOMES-OCALA 6150 SOUTH PINE AVENUE OCALA, FL 34480

Our home building facilities invest in continuous product and process improvements. Plans, dimensions, features, materials, specifications, and availability are subject to change without notice or obligation. Renderings and floor plans are representative likenesses of our homes and many differ from actual homes. We invite you to tour a Home Center near you and inspect the highest value in quality housing available or call (865) 688-6110 to speak with a Home Consultant, ©2022, CMH, All rights reserved.

Collins 16x74 Columbia License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE Order #: 5373 Label #: 89684 Manufacturer: (Check Size of Home) Homeowner: Year Model: Single Address: Length & Width: Double City/State/Zip; Triple 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: Data Plate Wind Zone: Permit #: Note:

INSTALLA	STATE OF FLOR ATION CERTIFICA	IDA ATION I ABET
89684		THON LABEL

LABEL#

DATE OF INSTALLATION

WILLIAM R PRICE

NAME

IH / 1041936 / 1

5373

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.