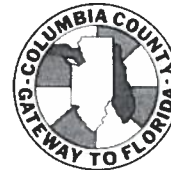




Columbia County, FL. Building & Zoning Mobile Home Permit #000037493



OWNER: TONY & CHRISTY BRANNON

PHONE: 386.623.1189

DATE ISSUED: November 29, 2018

PARCEL ID: 19-4S-16-03062-206

SUBDIVISION: SUN PARK WOODS UNREC.

LOT: 6

ADDRESS:

1722 SW SALEM RD
LAKE CITY, FL 32024

ACRES: 10.01

BLK: **PHASE:** **UNIT:**

ZONING: A-3 A-3

FLOOD ZONE: X

Latitude: 30.128606

Longitude: -82.756421

CONTRACTOR NAME:

MANUEL BRANNAN

ADDRESS:

5107 CR 245
WELBORN, FL 32094

PHONE: 386.590.3289

BUSINESS:

LICENSE: IH1025396 -

PROJECT DETAILS

REPLACING EXISTING MH. 1 FOOT ABOVE ROAD, 6/11/19 REVISED INSTALLER ON PERMIT - SEE ATTACHED LETTER FROM PROPERTY OWNER.

SEPTIC #:

18-0871

DEV PERMIT #:

F023-

SETBACKS FRONT:

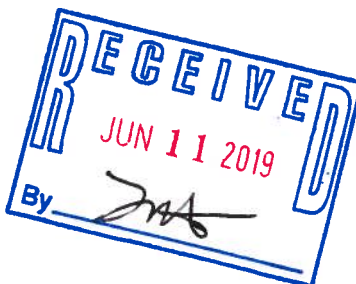
30.00

SETBACK SIDE 1:

25.00

SETBACKS REAR:

25.00



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. The issuance of this permit does not waive compliance by permittee with deed restrictions.

Notice: all other applicable state or federal permits shall be obtained before commencement of this permitted development.

"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 receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous inspection.



Building and Zoning Department

Receipt Of Payment

Applicant Information	Method	Date of Payment	Payment #	Amount of Payment
W. BO ROYALS	Cash	06/11/2019	745474	\$30.00
Permit #: 000037493 Mobile Home Parcel: 19-4S-16-03062-206 Address: 1722 SW SALEM RD LAKE CITY, FL 32024				

Contractor Information
MANUEL BRANNAN 5107 CR 252 WELBORN, FL 32094

Payment History

<u>Date</u>	<u>Description</u>	<u>Amount</u>
06/11/2019	Fee: Revisions After Permitted	\$30.00
06/11/2019	Payment: Cash	(\$30.00)
		<hr/> \$0.00

Contact Us
Phone: (386) 758-1008 After Hours: (386) 758-1124 Customer Service Hours: Monday-Friday From 8:00 A.M. to 5:00 P.M. Email: laurie_hodson@columbiacountyfla.com Website: http://www.columbiacountyfla.com/BuildingandZoning.asp Address: Building and Zoning 135 NE Hernando Ave. Lake City, FL 32055

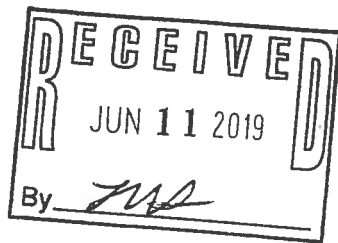
Building Inspector Office Hours
Monday - Friday From 8:00 AM to 10:00 AM and From 1:30 PM to 3:00 PM

Regular Inspection Schedules
<u>All areas North of County Road 242</u> From 10:00 AM to Noon <u>All areas South of County Road 242</u> From 3:00 PM to 5:00 PM

To Request Inspections - (Residential, Commercial, Fire, Zoning, & County Driveway Access)
Online: (Preferred Method) www.columbiacountyfla.com/InspectionRequest.asp Ph: 386-758-1008, 386-758-1124, 386-719-2023, 386-758-1007 (Leave A Message) To Call for an Access (Driveway) Inspection: 386-758-1019 Septic Release Inspections: 386-758-1058 IMPORTANT NOTICE: Any inspection requested after 5:00 pm, no matter the method, will be received the next business day; then that inspection will be scheduled the following business day. All inspections require 24 hours notice. Emergencies will be inspected as soon as possible.

I need to change
installers from
Robert Sheppard to
manuel Brannan.

Christy Brannan



PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official N/A Building Official JMA

AP# _____ Date Received _____ By _____ Permit # 37493

Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____

Comments 37493
6-11-19 New Installer - See Attached Note - Revised Permit Info.

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ Well letter OR

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

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____

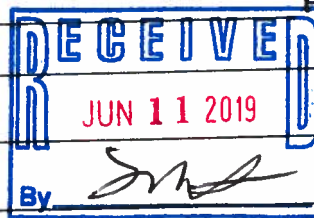
☐ Ellisville Water Sys ☐ Assessment Paid on Property ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 19-45-16-03062-206 Subdivision _____ Lot# _____

- New Mobile Home _____ Used Mobile Home _____ MH Size _____ Year _____
- Applicant Bu. Royals Phone # 754-6737
- Address _____

- Name of Property Owner Tony & Christy Brannon Phone# 623-1189
- ☐ 911 Address 1722 SW Salem Rd Lake City FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home _____ Phone # _____
- Address _____
- Relationship to Property Owner _____
- Current Number of Dwellings on Property _____



- Lot Size _____ Total Acreage _____
- 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 _____
- Driving Directions to the Property _____

- Name of Licensed Dealer/Installer Manuel Brannon Phone # 590-3289
- Installers Address 5107 CR252 Weiborn FL 32094
- License Number 1025394 Installation Decal # 26411

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

Installer

Maxwell Stewart license # 1025394

911 Address where home is being installed.

Manufacturer

Southern Energy

Length x width

32 x 60

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.

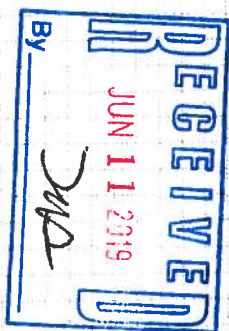
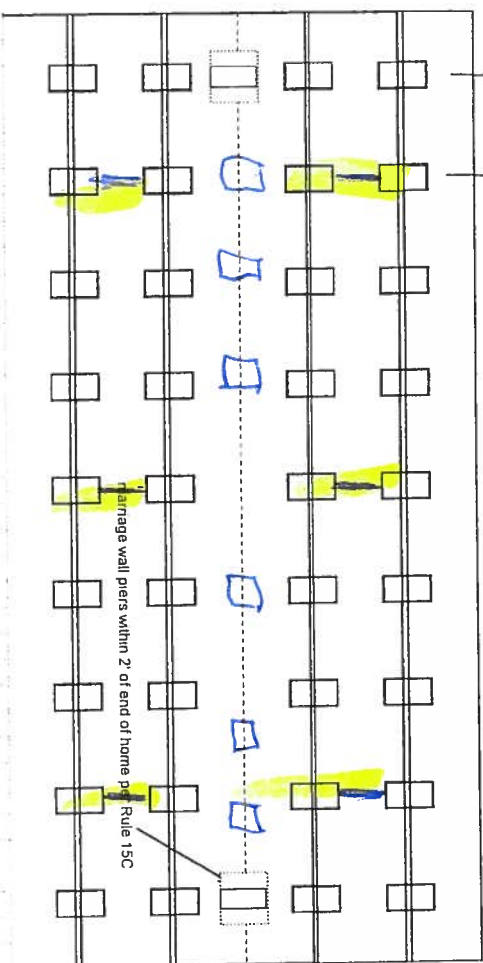
Installer's initials

MS

Typical pier spacing
2' 5'

lateral
longitudinal

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



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 # 26411

Triple/Quad ☐ Serial # DSEA47154 A18

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (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

12x25

Perimeter pier pad size

16x16

Other pier pad sizes (required by the mfg.)

17x25

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

4 ft X 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer Chassis 1101V

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Sidewall

Longitudinal

Shearwall

Number

26

4

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X X X

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 X X

TORQUE PROBE TEST

The results of the torque probe test is 25 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. 1 understand 5 ft anchors are required at all centerline the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 400 lb testing capacity.

Installer's initials MB

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Alcemy D. S. P. A. N. N. N.

Date Tested

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.

Site Preparation

Debris and organic material removed Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 6x6 Length: 6'4" Spacing: 24" C
Walls: Type Fastener: 3x6 Length: 4'4" Spacing: 24" C
Roof: Type Fastener: 3x6 Length: 4'4" Spacing: 24" C
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 MB

Type gasket form

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

Weatherproofing

The bottom board will be repaired and/or taped. Yes No
Siding or gutters is installed to manufacturer's specifications. Yes No
Fireplace chimney installed so as not to allow intrusion of rain water. Yes No

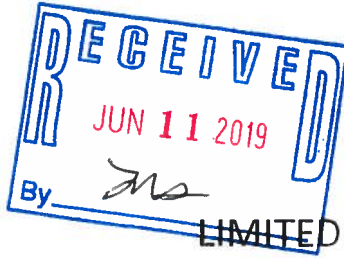
Miscellaneous

Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes No
Range downflow vent installed outside of skirting. Yes No
Drain lines supported at 4 foot intervals. Yes No
Electrical crossovers protected. Yes No
Other:

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

Installer Signature

Alcemy D. S. P. A. N. N. N. Date



LIMITED POWER OF ATTORNEY

I, Manuel Brown Do hereby Authorize William BO Royals

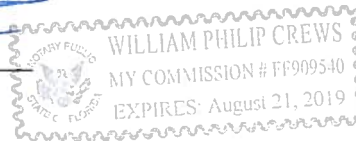
To pull my permits and act on my behalf in all aspects of applying for a Mobile Home Permit located in Columbia County for

(Home Owner)
Manuel Brown
Signature

6-11-19
Date

Sworn to and Subscribed before me on this 11TH Day of June 2019.

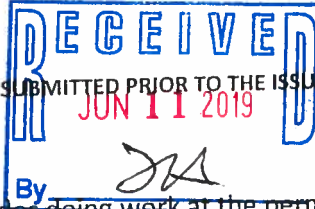
[Signature]
Notary Public



MY Commission Expires: 8-21-19
Commission No. FF909540
Personally Known: ✓
Produced ID. (Type): _____

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____



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 _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name <u>Manuel Brown</u> License #: <u>1075394</u>	Signature <u>[Signature]</u> Phone #: <u>590-3289</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.