

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 6-23-05)

Zoning Official

BLK 19.07.06

Building Official

OK JH 7-17-06

AP# 0602-33

Date Received 7-14-06

By LH

Permit # 24762

Flood Zone

X

Development Permit

N/A

Zoning

A-3

Land Use Plan Map Category

A-3

Comments

Panel 110

Replacing Existing MH

OK 13258

FEMA Map#

Elevation

Finished Floor

River

In Floodway

☒ Site Plan with Setbacks Shown

☒ EH Signed Site Plan

☐ EH Release

☐ Well letter

☒ Existing well

☒ Copy of Recorded Deed or Affidavit from land owner

☒ Letter of Authorization from Installer

Property ID # 29-2S-17-04781-000 Must have a copy of the property deed

New Mobile Home Used Mobile Home X Year 1984

Applicant Dale Suel or Rocky Ford Phone # 586-497-2311

Address PO Box 39, Ft White, FL 32058

Name of Property Owner FRANCISCO SILVA Phone# 752-5158

911 Address 7254 N US HWY 441, LC, FL 32055

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

Name of Owner of Mobile Home STAMIE Phone #

Address 318 NW MERSHON ST, LC, FL, 32055

Relationship to Property Owner STAMIE

Current Number of Dwellings on Property 1 REMOVED

Lot Size IRREGULAR Total Acreage 24.3

Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)

Is this Mobile Home Replacing an Existing Mobile Home YES

Driving Directions to the Property 441 North, Approx 4 miles past KOA to ADDRESS ON LEFT

Name of Licensed Dealer/Installer BEANIE THRIFT Phone # 623-0046

Installers Address 212 NW NYE HUNTER ROAD

License Number TH0000075 Installation Decal # 268625

JW called A/E 7.19.06

\$ 275.00
4.30

Columbia County Property Appraiser

DB Last Updated: 6/19/2006

2006 Proposed Values

Parcel: 29-2S-17-04781-000

Tax Record

Property Card

Interactive GIS Map

Print

Owner & Property Info

<< Prev

Search Result: 4 of 7

Next >>

Owner's Name	SILVA FRANCISCO
Site Address	
Mailing Address	318 NW MERSHON ST. LAKE CITY, FL 32055
Description	E3/4 OF NW1/4 OF NE1/4, EX COMM INTER OF N LINE OF SEC & W R/W US-441, RUN S 100 FT FOR POB, RUN S 208 FT, W 208 FT, N 208 FT, E 208 FT TO POB & EX BEG INTER OF US-441 & S LINE NW1/4 OF NE1/4, RUN W 420 FT, N 210 FT, E 420 FT, S 210 FT TO POB & EX THAT PORTION LYING N OF MERSHON RD & W OF US-441 & EX RD R/W. ORB 720-478, (LEASE ORB 785-857) WD 1049-981.

Use Desc. (code)	MOBILE HOM (000200)
Neighborhood	29217.00
Tax District	3
UD Codes	MKTA03
Market Area	03
Total Land Area	24.370 ACRES

Property & Assessment Values

Mkt Land Value	cnt: (2)	\$99,480.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$14,035.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$113,515.00

Just Value	\$113,515.00
Class Value	\$0.00
Assessed Value	\$113,515.00
Exempt Value	\$0.00
Total Taxable Value	\$113,515.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
5/25/2005	1049/981	WD	I	Q		\$125,000.00
5/25/1990	720/478	WD	I	Q		\$124,000.00
12/9/1987	639/30	WD	I	U		\$99,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1978	Alum Siding (26)	1624	2352	\$14,035.00
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

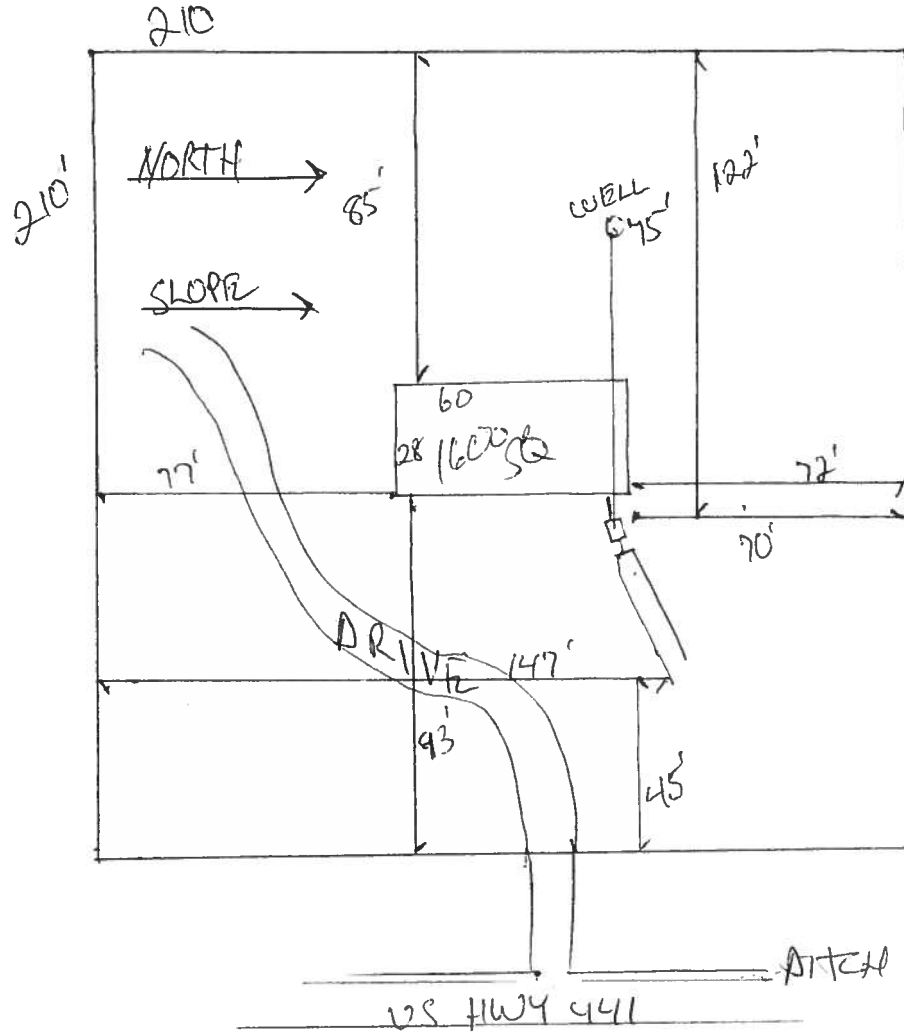
Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000102	SFR/MH (MKT)	24.370 AC	1.00/1.00/1.00/1.00	\$4,000.00	\$97,480.00
009945	WELL/SEPT (MKT)	1.000 UT - (.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

----- PART II - SITEPLAN -----

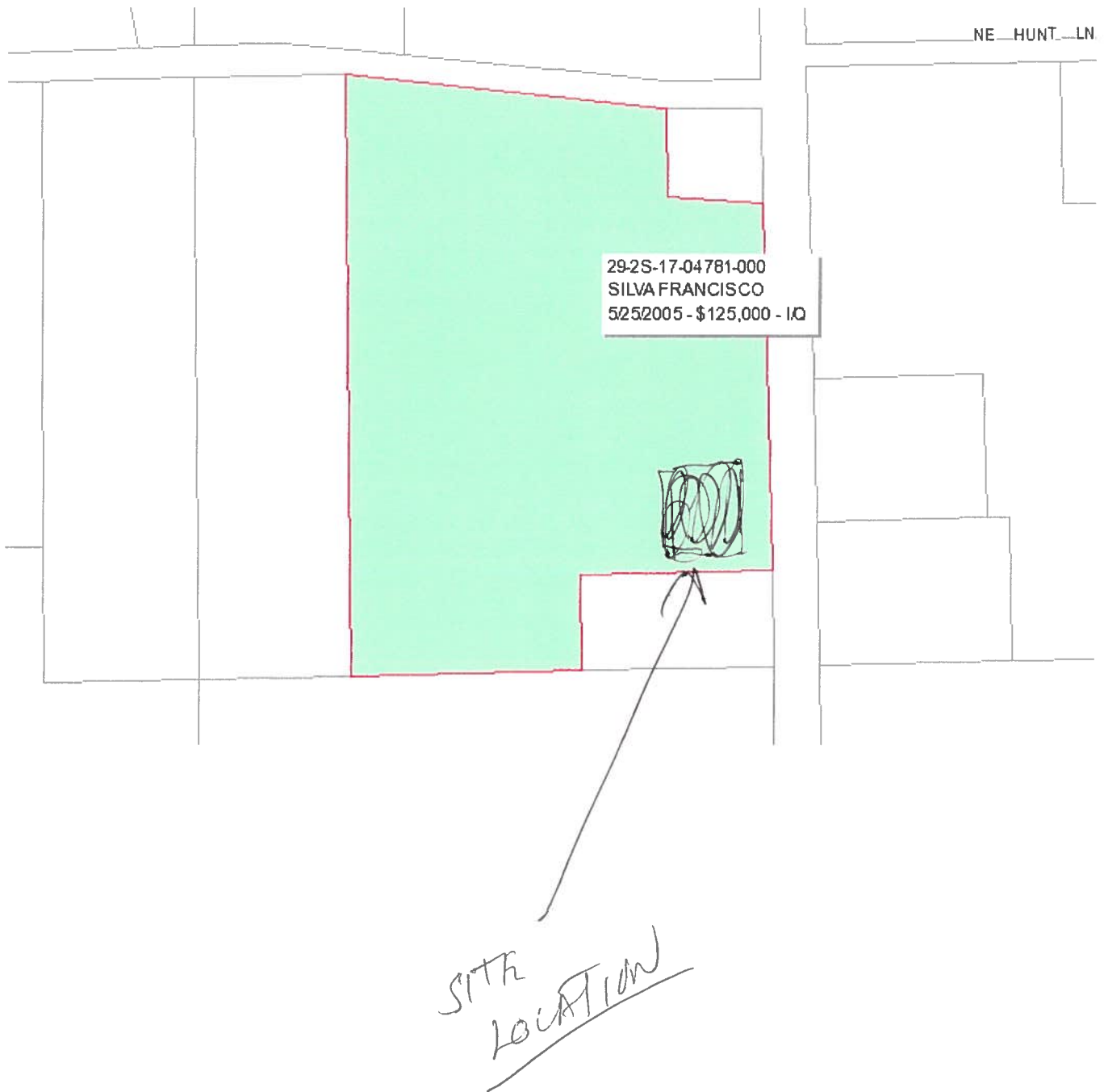
Scale: 1 inch = 50 feet.



Notes: 1 of 24 ACRES SEE ATTACHED

Site Plan submitted by: Rock D. [Signature] MASTER CONTRACTOR
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



PERMIT NUMBER

Installer Bennie Theliff License # TH0000075

Address of home being installed

7254 N US HWY 441
LC FL 32055

Manufacturer Palm Harbor Length x width 61 X 28

NOTE: If home is a single wide fill out one half of the blocking plan. If home is a double or quad wide, sketch the remainder of home.

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall has exceeded 5 ft 4 in.

Installer's initials BT

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 Detail # 268625

Triple/Quad ☐ Serial # 19266A/B

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	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"	5'	6'	7'	8'	9'
2000 psf	6'	6'	7'	8'	9'	10'
2500 psf	7' 6"	8'	9'	10'	11'	12'
3000 psf	9'	10'	11'	12'	13'	14'
3500 psf	10'	11'	12'	13'	14'	15'

* Interpolated from Rule 15-C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17X22
Pole/pier pier pad size 16X16
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 12' Pier pad size 17X22

ANCHORS 4 @ 5 ft

FRAME TIES

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stanchion Device (LSD) Manufacturer Made in China
Longitudinal Stanchion Device w/ Lateral Arms Manufacturer _____

Skewer Longitudinal Marriage wall Strengthen _____
Number 20

PERMIT NUMBER

SILVA

[Signature]

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 3000

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 2000 x 3000 x 3500

TORQUE PROBE TEST

The results of the torque probe test is 2904 inch pounds or check here if you are declaring 5" anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. 1 underground 6 ft anchors are required at all cantilever the points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

BT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Bernard Thiel

Date Tested

7-7-06

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. 5

Plumbing

Connect all sewer drains to an existing sewer lap or septic tank. Pg. 5

Connect all potable water supply piping to an existing water meter, water lap, or other independent water supply systems. Pg. 7

Site Preparation

Debris and organic material removed

Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: 3/8 x 5 1/2" Lags Length: 10" Spacing: 24" OC
Walls: Type Fastener: Flashing Length: 6" Spacing: 7"
Roof: Type Fastener: Flashing Length: 6" Spacing: 6"
For used homes attach 30 gauge, 6" 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 Installation Requirements

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 Seal Seal

Installed:

Between Floors Yes Yes
Between Walls Yes Yes
Bottom of ridgebeam Yes Yes

Weatherproofing

The bulletin board will be repaired and/or taped. Yes Yes Pg. 3
Siding on walls is installed to manufacturer's specifications. Yes Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes Yes

Miscellaneous

Siding 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 Yes
Electrical covers protected. Yes 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

Bernard Thiel

Date 7-7-06

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I, Bernard Thrift, license number IH 0000075
Please Print
do hereby state that the installation of the manufactured home for Dale Burd on Perez
Ford at 7254 N HWY 441
Applicant
911 Address

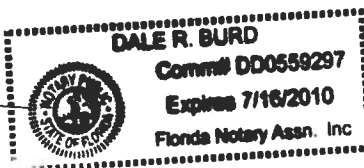
will be done under my supervision.

Bernard Thrift
Signature

Sworn to and subscribed before me this 13 day of JULY,
2006.

Notary Public: [Signature]
Signature

My Commission Expires: _____
Date



LIMITED POWER OF ATTORNEY

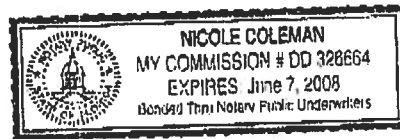
I, BERNARD D. THRIFT, LICENSE #1H-0000075 EXPIRING 09-30-2006. DO HEREBY
AUTHORIZE John Brader Rocky Ford TO BE MY REPRESENTATIVE
AND ACT ON MY BE HALF IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME
MOVE ON PERMIT TO BE INSTALLED IN Columbia COUNTY,
FLORIDA.

Bernard D Thrift
BERNARD D. THRIFT

29/6/06
DATE

SWORN TO AND SUBSCRIBED BEFORE ME THIS 29 DAY OF June
2006.

Nicole Coleman
NOTARY PUBLIC



PERSONALLY KNOWN: X

PRODUCED ID: _____

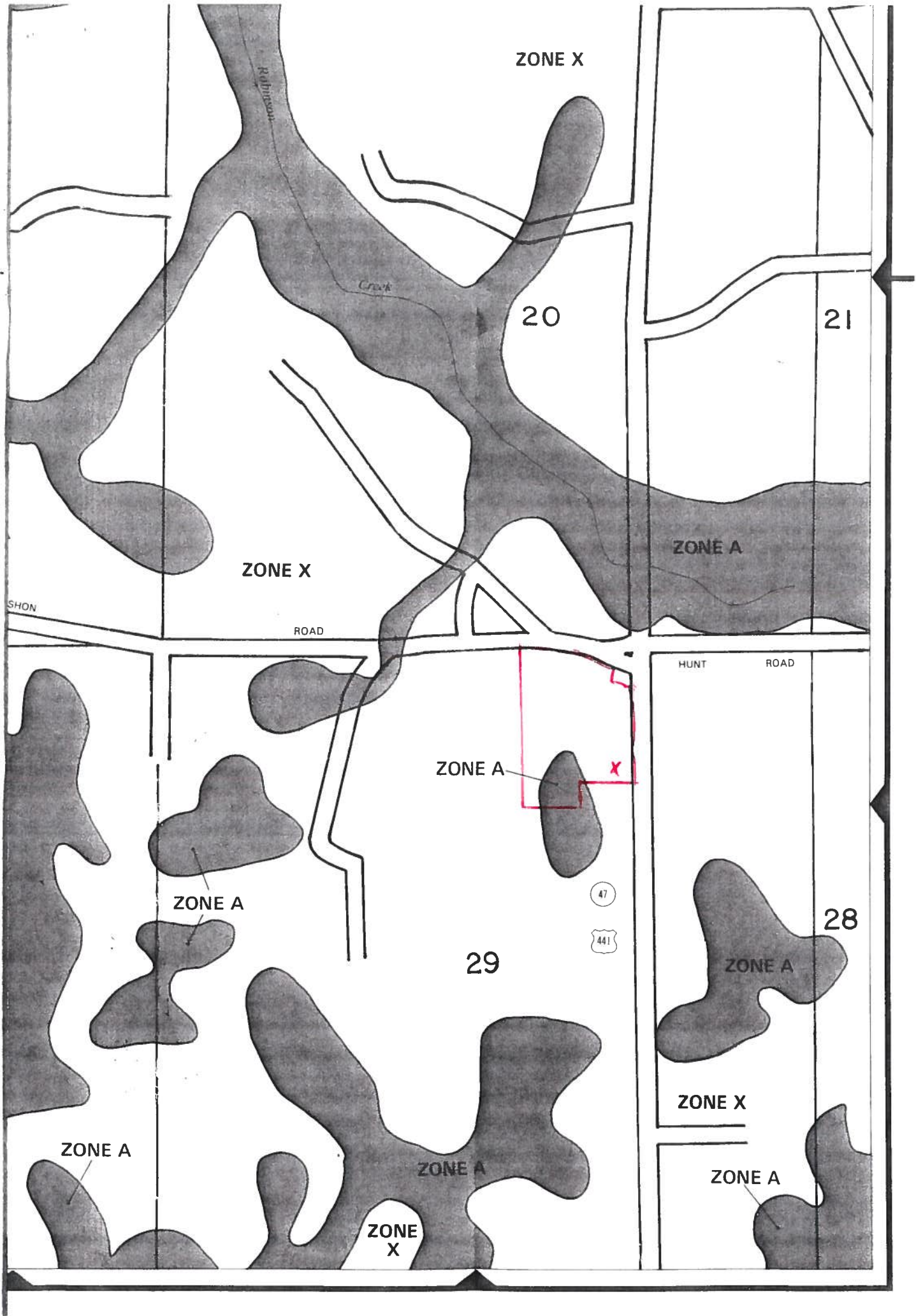
YEAR 84

MAKE Palm Harbor

SN# 19266 A/B

PROPERTY ID/LOCATION N US HWY 441

0607-53



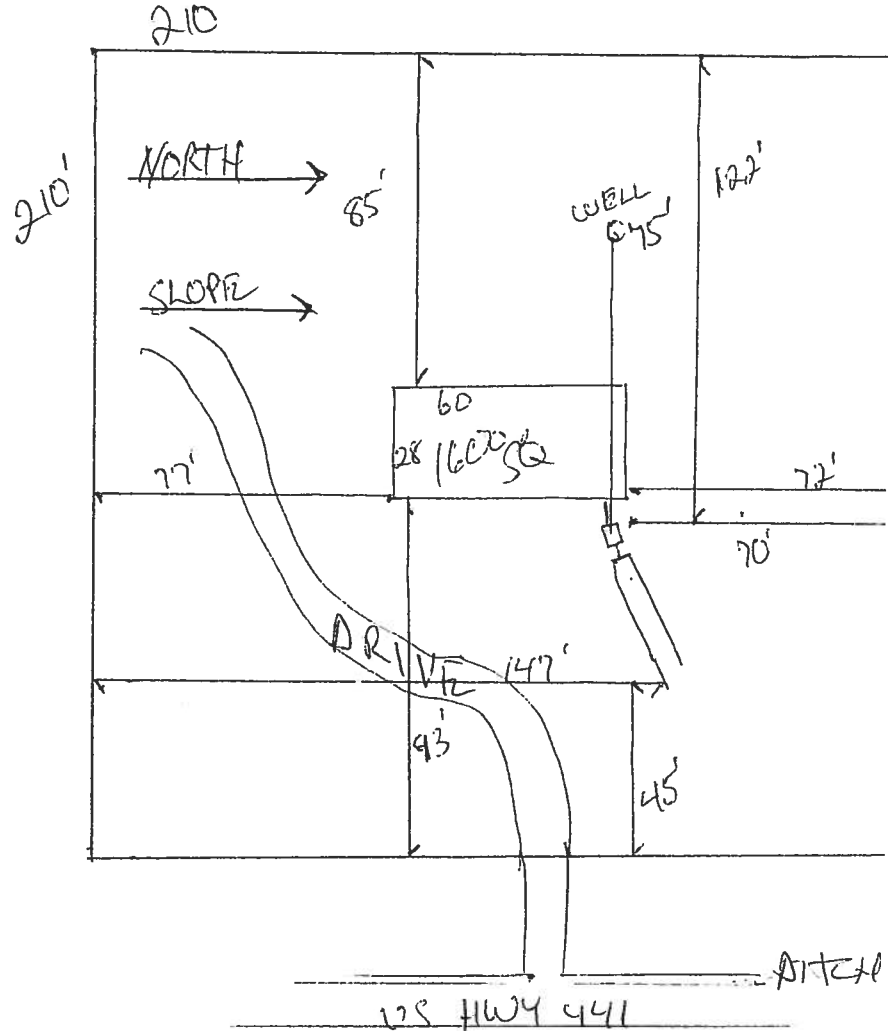
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-0642E

----- PART II - SITEPLAN -----

Scale: 1 inch = 50 feet.

SILVA



Notes: 1 of 24 ACRES SEE ATTACHED

Site Plan submitted by: Roch D. [Signature] MASTER CONTRACTOR
Plan Approved [Signature] Not Approved _____ Date _____
By Sally Graddy ESII **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 7-13-06 BY CH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Silva, Francisco PHONE _____ CELL _____

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME C & G lot 2 talk to Chris
off of Deputy Jeff Davis Lane

MOBILE HOME INSTALLER ~~Robert Harber~~ PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Palm Harbor YEAR 84 SIZE 61 x 28 COLOR Tan

SERIAL No. 19266

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

INTERIOR:

INSPECTION STANDARDS

(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: _____

NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [Signature] ID NUMBER 706 DATE 7-14-06

COLUMBIA COUNTY
FLORIDA

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 29-2S-17-04781-000

Building permit No. 000024762

Permit Holder BERNIE THRIFT

Owner of Building FRANCISCO SILVA

Location: 7254 N US HIGHWAY 441

Date: 08/15/2006



[Signature]

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)