

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Cell # 2391

For Office Use Only (Revised 7-1-15) Zoning Official 274 Building Official 274

AP# 1904-35 Date Received 4/1/19 By J Permit # 38116

Flood Zone X Development Permit Zoning A-3 Land Use Plan Map Category A8

Comments Replacing M/H in existing M/H Park

FEMA Map# Elevation Finished Floor River In Floodway

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ E# 19-0235 ☐ 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 M/H park ☐ Out County ☒ In County ☐ Sub VF Form

Property ID # 21-35-16-02215-028 Subdivision LOT 3 Lot# 3

- New Mobile Home Used Mobile Home ☒ MH Size 14x60 Year 1986
- Applicant KAROL GONZALEZ Phone # 701-681-0262
- Address 15061 SR 51 LIVE OAK FL. 32060
- Name of Property Owner Alejandro E. Karol Gonzalez Phone # 701-681-0262
- 911 Address 566 NW Yates Loop #3 Lake City FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home Alejandro E. Karol Gonzalez Phone # 701-681-0262
- Address 15061 SR 51 LIVE OAK FL. 32060

- Relationship to Property Owner SAME AS ABOVE
- Current Number of Dwellings on Property 5
- Lot Size Total Acreage 2.5
- 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 yes
- Driving Directions to the Property US 90 West, turn right on NW Turner Ave then left on NW Ash Drive, Right on NW Yates loop

- Name of Licensed Dealer/Installer Ronnie Woods Phone # 623 7716
- Installers Address 1004 SW CWTX CHARLES TER, LAKE CITY, FL 32061
- License Number TH 1025451 Installation Decal # 61222

Ut - spoke to Karol 4-17-19 & 4-25-19

\$325.00
37271

SCANNED

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

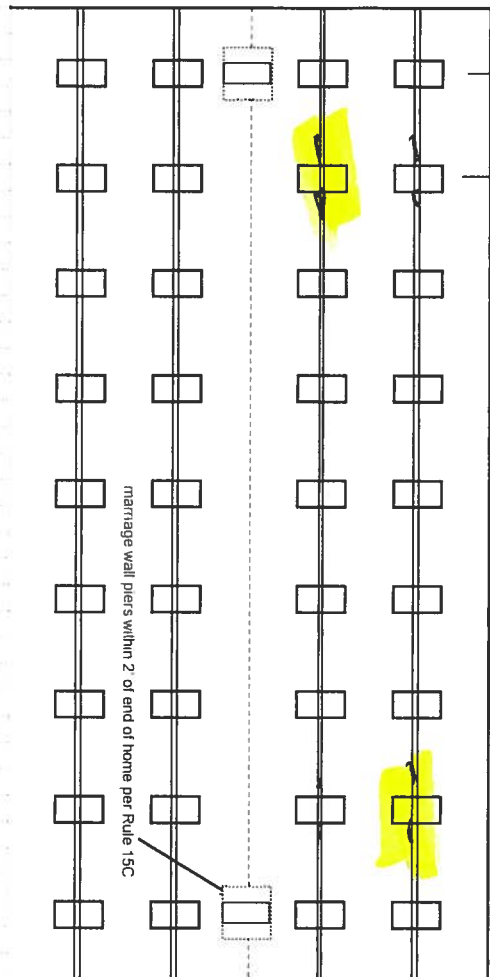
Installer: Revia Works License # TH

Address of home _____
being installed _____

Manufacturer Electra Length x width 14x60

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 AK



Vehicle frame ties

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 # 601222
Triple/Quad ☐ Serial # GIAFLAF 484501377

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 17x85
Perimeter pier pad size NA
Other pier pad sizes (required by the mfg.) NA

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

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 SV Pier pad size SV
SV SV
SV SV

ANCHORS
4 ft
5 ft

FRAME TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

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 285 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.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

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: SW Length: SW Spacing: SW
Walls: Type Fastener: SW Length: SW Spacing: SW
Roof: Type Fastener: SW Length: SW Spacing: SW
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

Type gasket

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

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 ☒
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

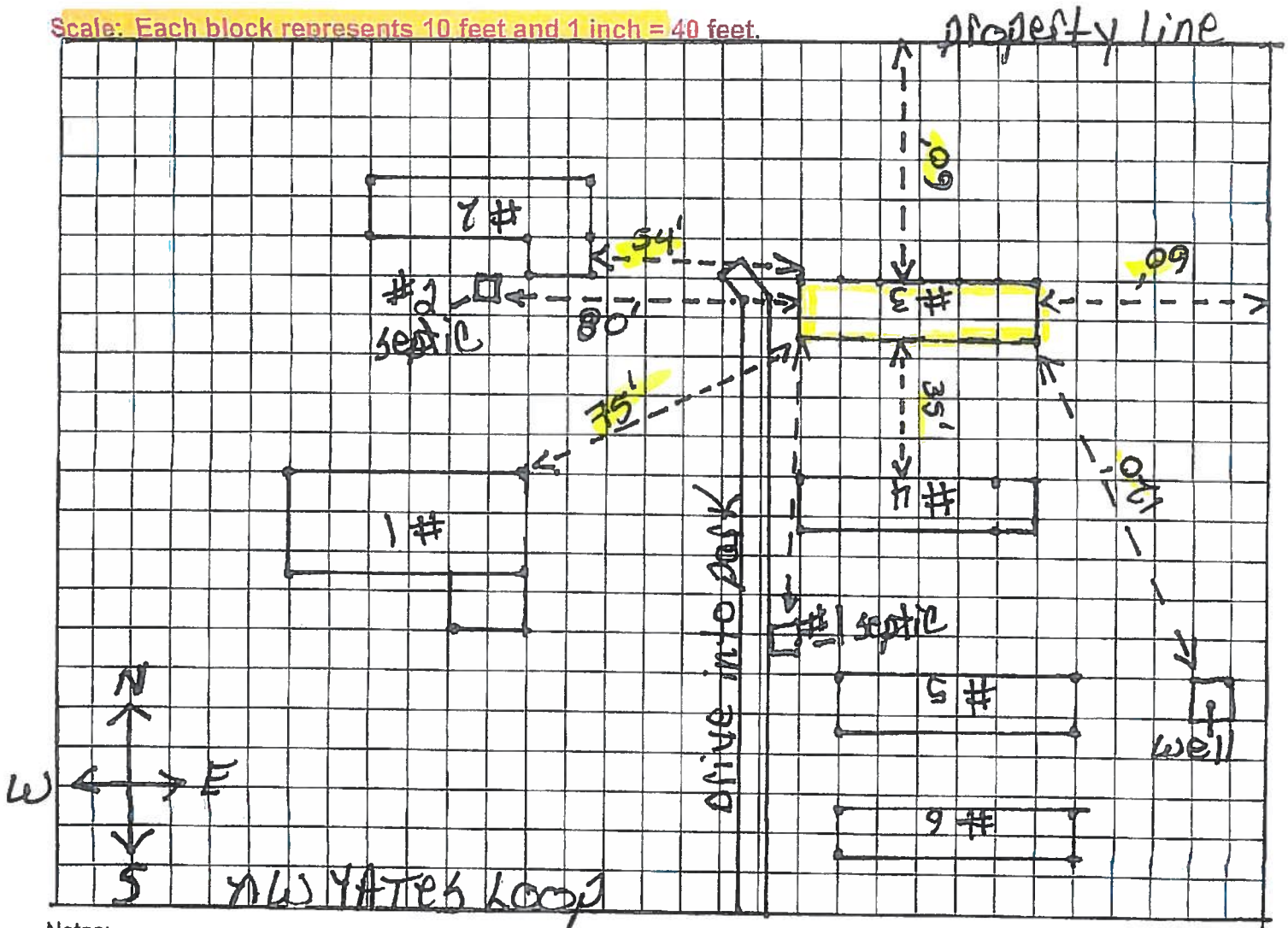
Steve Ann Date 4-11-019

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0235

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

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

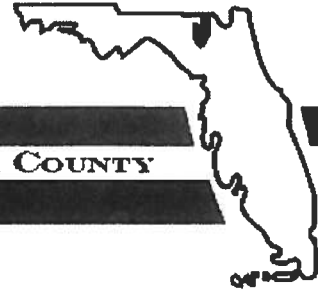


Notes:

Site Plan submitted by: Alejandro Gonzalez Owner 3/19/19
Plan Approved ✓ Not Approved _____ Date 3/21/19
By [Signature] [Signature] ES Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



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:	7/16/2018 3:01:49 PM
Address:	566 NW YATES Loop LOT 3
City:	LAKE CITY
State:	FL
Zip Code	32055

Parcel ID	02215-028
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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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1924-35 CONTRACTOR BONNIE NORRIS PHONE 386.623.7716

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	<div>Print Name <u>Alexandro Gonzalez</u> Signature <u>Alexandro Gonzalez</u></div> <div>License #: _____ Phone #: <u>701 871 7392</u></div> <div>Qualifier Form Attached <input type="checkbox"/></div>
✓ MECHANICAL/ A/C _____	<div>Print Name <u>Alexandro Gonzalez</u> Signature <u>Alexandro Gonzalez</u></div> <div>License #: _____ Phone #: <u>701 871 7392</u></div> <div>Qualifier Form Attached <input type="checkbox"/></div>

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

updated: 3/29/2019

2018 Tax Roll Year

Parcel: 21-3S-16-02215-028

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

<< Next Lower Parcel Next Higher Parcel >>

2018 TRIM (pdf)

Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	GONZALEZ ALEJANDRO &		
Mailing Address	KAROL JEAN GONZALEZ 15061 SR 51 LIVE OAK, FL 32060		
Site Address	566 NW YATES LP		
Use Desc. (code)	MH PARK (002802)		
Tax District	2 (County)	Neighborhood	21316
Land Area	2.500 ACRES	Market Area	01
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
NW1/4 OF NW1/4 OF SW1/4 OF NE1/4, EX RD R/W. (AKA LOT 19 OF AN UNR S/D). 447-403, 808-1935, PB 897-2068, 949-1065, WD 1363-1909,			



Property & Assessment Values

2018 Certified Values		
Mkt Land Value	cnt: (0)	\$19,828.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (5)	\$27,740.00
XFOB Value	cnt: (8)	\$25,384.00
Total Appraised Value		\$72,952.00
Just Value		\$72,952.00
Class Value		\$0.00
Assessed Value		\$68,104.00
Exempt Value	(code: HX H3)	\$24,179.00
Total Taxable Value	Cnty: \$41,566 Other: \$41,566 Schl: \$43,925	

2019 Working Values		
(... Hide Values)		
Mkt Land Value	cnt: (0)	\$19,828.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (5)	\$28,748.00
XFOB Value	cnt: (8)	\$25,384.00
Total Appraised Value		\$73,960.00
Just Value		\$73,960.00
Class Value		\$0.00
Assessed Value		\$73,960.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$73,960 Other: \$73,960 Schl: \$73,960	

NOTE: 2019 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/29/2018	1363/1909	WD	I	Q	01	\$92,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1973	MINIMUM (01)	564	564	\$3,147.00
3	MOBILE HME (000800)	1971	MINIMUM (01)	552	552	\$2,772.00
4	MOBILE HME (000800)	1972	MINIMUM (01)	672	672	\$3,750.00
6	MOBILE HME (000800)	1981	MINIMUM (31)	1560	1824	\$13,382.00
7	MOBILE HME (000800)	1971	BELOW AVG. (03)	720	874	\$5,697.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0021	BARN,FR AE	0	\$800.00	0000001.000	0 x 0 x 0	(000.00)
0259	MHP HOOKUP	1993	\$4,300.00	0000001.000	0 x 0 x 0	(000.00)
0259	MHP HOOKUP	1993	\$17,200.00	0000004.000	0 x 0 x 0	(000.00)
0294	SHED WOOD/	1993	\$600.00	0000001.000	0 x 0 x 0	(000.00)
0210	GARAGE U	1993	\$200.00	0000001.000	14 x 20 x 0	(000.00)

Land Breakdown



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

PERMIT NO. 19-0225
DATE PAID: 3/20/19
FEE PAID: 600.00
RECEIPT #: 404103

APPLICATION FOR:

☐ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Karol Gonzalez

AGENT: _____ TELEPHONE: 701-681-0262

MAILING ADDRESS: 15061 SR 51 Live Oak Fl. 32060

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT # 3 BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 21-36-16-02215-028 ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 2.5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 566 NW Yates Loop Lake City, Fl. 32060

DIRECTIONS TO PROPERTY: US 90W, Turn right onto NW Turner Ave, left on NW Ash Dr., right on NW Yates Loop

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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1	mobile Home	2	840	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Karol Gonzalez DATE: 3-19-19

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM SEWANNEE
OWNERS NAME KAROL GONZALEZ PHONE CELL
INSTALLER RONNIE NORRIS PHONE CELL
INSTALLERS ADDRESS 1004 SW CHARLES TER LAKE CITY FL 32024

MOBILE HOME INFORMATION

MAKE Fleet wall YEAR 85 SIZE 17 x 66
COLOR yellow SERIAL No. 6AFLAF484501377
WIND ZONE II SMOKE DETECTOR

INTERIOR:

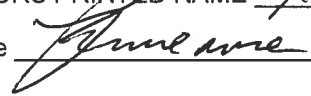
FLOORS OK
DOORS OK
WALLS OK
CABINETS OK
ELECTRICAL (FIXTURES/OUTLETS)

EXTERIOR:

WALLS / SIDING OK
WINDOWS OK
DOORS OK

INSTALLER: APPROVED  NOT APPROVED 

INSTALLER OR INSPECTORS PRINTED NAME RONNIE NORRIS

Installer/Inspector Signature  License No. I H10251511 Date 4-11-09

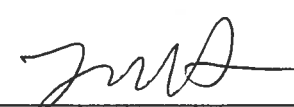
NOTES:

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature  Date 4-18-09

Mobile Home

Applicant: karol gonzalez (701.681.0262) Application Date: 5/8/2019

Action ▼

1. JOB LOCATION

2. CONTRACTOR

3. MOBILE HOME DETAILS

4. APPLICANT

5. REVIEW

6. FEES/PAYMENT

7. DOCUMENTS/REPORTS (1)

8. NOTES/DIRECTIONS

9. INSPECTIONS (1)

Completed Inspections

Add Inspection

Release Power

Schedule Inspection (ScheduleInspection.aspx?Id=40818)

Inspection	Date	By	Notes
Passed: Mobile Home - In County Pre-Mobile Home before set-up	5/9/2019	TROY CREWS	

The completion date must be set To release Certifications to the public.

Permit Completion Date
(Releases Occupancy and Completion Forms)

Permit Closed On

Incomplete Requested Inspections

Inspection	Date	By	Notes
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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

I, Ronnie Norris, give this authority for the job address show below
Installer License Holder Name

only, 566 NW YATES LP, and I do certify that
Job Address

the below 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	Authorized Person is... (Check one)
KAROL GONZALEZ		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
ALEJANDRO GONZALEZ		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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.

License Holders Signature (Notarized)

TH10254511
License Number

4-11-19
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 11th day of April, 2019.

NOTARY'S SIGNATURE

(Seal/Stamp)

