Parcel:

14-6S-16-03818-183 (19801)

Owner & Property Info

Result: 1 of 1

**DOZIER DAVID & JACQUELINE** 

**DOZIER JACQUELINE** Owner

298 SW PIONEER WAY FT WHITE, FL 32038

298 SW PIONEER WAY, FORT WHITE Site

Description\* LOT 3 BLK D OLD WIRE FARMS. ORB 804-1435 & ORB 1000-1138 QCD 1003-2295, WD 1012-

2812, WD 1176-2387

Area 4.01 AC S/T/R 14-6S-16

Use Code\*\* MOBILE HOME (0200) Tax District 3

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER CONTRACTOR Br	ent Strick	Eland PHONE 386-365-7043
	THIS FORM MUST BE SUBMITTED PRIOR TO	THE ISSUAN	CE OF A PERMIT
			David Dozier
records of the Ordinance 89- exemption, ge	Sounty one permit will cover all trades doing work at subcontractors who actually did the trade specific was a contractor shall require all subcontractors to prepare all liability insurance and a valid Certificate of Contractor is responsible for the corresponding to the contractor beginning any work. Violations will response to the contractor beginning any work.	vork under to ovide evide evide mpetency lie	the permit. Per Florida Statute 440 and note of workers' compensation or tense in Columbia County.  The permit Per Florida Statute 440 and note of workers' compensation or tense in Columbia County.
ELECTRICAL	Print Name Glenn Whittington	Signature	
	License #:EC 13002957	Phone #:	386-972-1700
	Qualifier Form Attached		
MECHANICAL/	Print Name Michael Boland	Signature	26
A/C	License #:CAC 1817716	Phone #:	352-274-9326
	Qualifier Form Attached		

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015



## COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

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

LICENSED QUALIFIE	ER AUTHORIZATION
1. Charl Whitington	(license holder name), licensed qualifier
for Whittington ELBERIC S	Twc(company name), do certify that
the below referenced person(s) listed on this form holder, or is/are employed by me directly or throu officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	ugh an employee leasing arrangement; or, is an n Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DARSUR	1
2. Rexplitand	2. 1 mls 1) for
3.	3.
4.	4.
5.	5.
under my license and fully responsible for complet Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted officer(s) you must notify this department in written authorization form, which will supersede all previous unauthorized persons to use your name and/or license.	nd County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits.  is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Lown Whitting to	EC 1300295) 3/7/16
NOTARY INFORMATION: STATE OF:COUNTY OF:	Colombia Date
The above license holder, whose name is	me or has produced identification this day of, 20
LICE POSHOP NOTARY'S SIGNATURE	Seal/Stance Y R BISHOP  Notary Public - State of Florida  Commission # FF 243986  My Comm. Expires Jun 24, 2019



# COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFI	ER AUTHORIZATION
1. Illy hARI A DOLAND	(license holder name), licensed qualifier
FOR ACE A/C OCA/A	LLC (company name), do certify that
the below referenced person(s) listed on this for	m is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DAIR End	1.678
2. Kally Bishop	2 Kelly Brishop
3. Kocky Ford	3. fah, U / of
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for comp Local Ordinances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted.  If at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all prevunauthorized persons to use your name and/or I	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and cons committed by him/her, his/her agents, usibility for compliance with all statutes, codes by issuance of such permits.  is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
NOTARY INFORMATION: STATE OF: COUNTY OF:	win
The above license holder, whose name is Migpersonally appeared before me and is known by (type of I.D.) on	me or has produced identification this day of November 20 15
MOTARY'S SIGNATURE	(Seal/Stamp)
	AMANDA FLOOD



	marriage well piers within 2' of end of home per Rule 15C			Typical pier spacing  Installer's initials  Show locations of Longitudinal and Lateral Systems  (use dark lines to show these locations)	NOTE: if home is a single wide fill out one haif 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 Brent Strickland License # IH 1104218 Installer Mobile Phone # 386-365-7043 Address of home 348 SW Rowaze WA being installed For Whom PL 32038  Manufacturer Live Out Length x width 56x16
within 2' of end of home spaced at 5' 4" oc	17 1/2 x 25 1/2 24 x 24 26 x 26 ANCHORS 4 ft 5 ft	Perimeter pier pad size	AD SIZES  AD SIZES  AD SIZES  Pad Size Size Size Size Size Size Size Size	142) 20" x 20" 22" (400)	Roof System: Typical Hinged PIER SPACING TABLE FOR USED HOMES	None III

is accurate and true based on the	Plumbing
Installer verifies all information given with this permit worksheet	source. This includes the bonding wire between mult-wide units. Pg.
	Electrical
Other:	
at 4 foot i	
Range downflow vent installed outside of skirting. Yes N/A	Date Tested 8-27-2021
	installer Name
Mis	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
Fireplace chimney installed so as not to allow intrusion of rain water. Yes	D.S Installer's initials
alled to manufacturer's sp	requires anchors with 4000 lb holding capacity.
The hottomhoard will be renaized and/or taned. Yes	reading is 275 or less and where the mobile home manufacturer may
Weatherproofing	anchors are allowed at the sidewall locations. I understand 5 ft
	Note: A state approved lateral arm system is being used and 4 ft.
Bottom of ridgebeam Yes	showing 275 inch pounds or less will require 5 foot anchors.
	here if you are declaring 5' anchors without testing A test
Pg. Between Floors Yes	The results of the torque probe test is 200 inch pounds or check
7	TORQUE PROBE TEST
Installer's initials	
of tape will not serve as a gasket	× TOCO × TOCO
a result of a poorly installed or no gasket being installed. I understand a strip	3
homes and that condensation, mold, meldew and buckled marriage walls are	
understand a property installed pasket is a requirement of all new and used	reading and round down to that increment
Gasket (weatherproofing requirement)	
rooting halls at 2 on center on both sides of the centerline.	<ol><li>Take the reading at the depth of the footer.</li></ol>
will be centered over the beak of the roof and fastened with galv.	<ol> <li>Test the perimeter of the home at 6 locations.</li> </ol>
Type Fastener: Length:	POCKET PENETROMETER TESTING METHOD
Floor Type Fastener Length: Spacing:	
Fastening multi wide units	×1000 ×1000 ×1000
	ut testing.
Debris and organic material removed  Water drainage: Natural Swale Pad Other	The pocket penetrometer tests are rounded down to psf
	POCKET PENETROMETER TEST
Site Preparation	

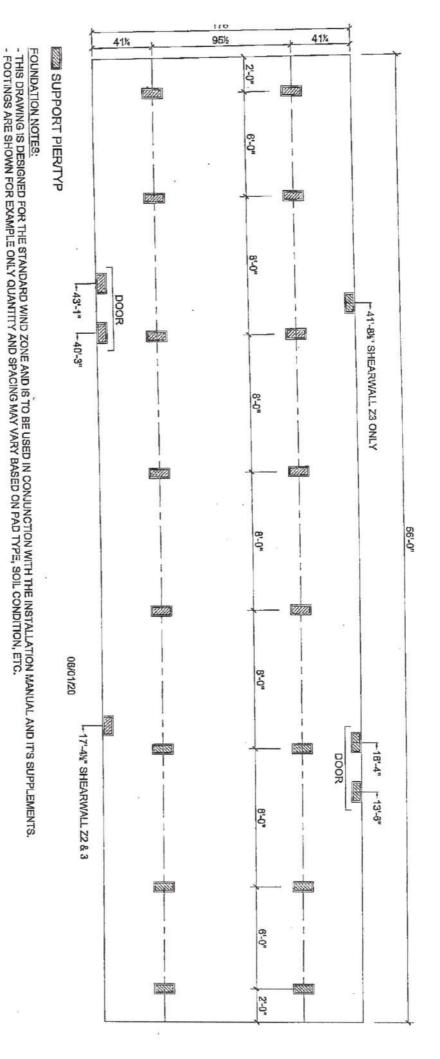
manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the ith this permit worksheet

Date 8.27-2021

Installer Signature 4

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

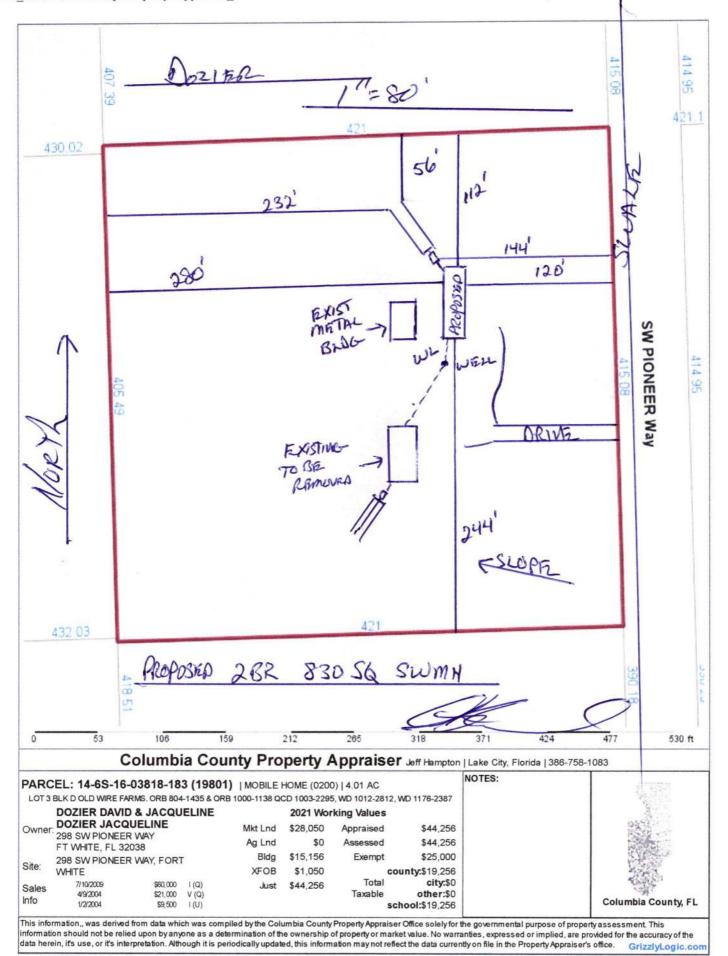
Connect all sewer drains to an existing sewer tap or septic tank. Pg.



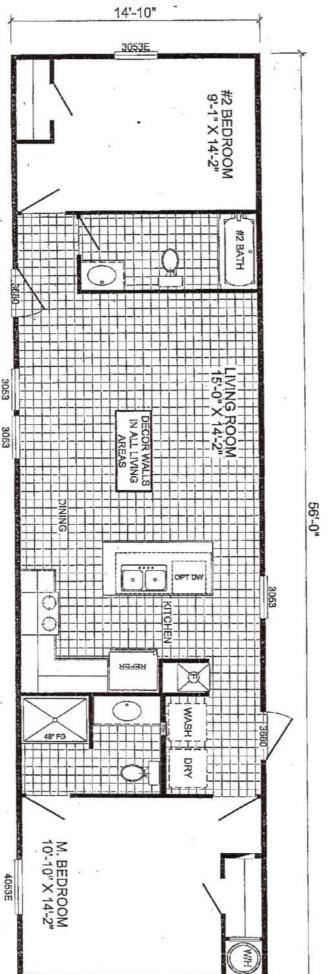
Live Oak Homes / 4 X 60 MODEL: V-5562K - 4 X 60 2-BEDROOM / 2-BATH



V-5562K



#5



# 2-BEDROOM / 2-BATH 16 X 60 - Approx. 830 Sq. Ft. V-5562K

Date: 05/21/20

<sup>\*</sup> All room dimensions include closets and square footage figures are approximate.
\* Live Oak Homes reserves the right to change product offering at any time.