

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>2266-3-3012</u>	Building Official <u>1.C. 3-30-12</u>
AP# <u>120355</u>	Date Received <u>3-23-12</u>	By <u>LH</u>	Permit # <u>30043</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>A-3</u>	Land Use Plan Map Category <u>AG</u>
Comments <u>floor use ft above the road</u> <u>Letter from</u>			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>N/A</u>	River <u>N/A</u> In Floodway <u>N/A</u>
☒ Site Plan with Setbacks Shown	☒ EH # <u>12-0173</u>	☐ EH Release	☒ Well letter <u>N/A</u> Existing well
☐ Recorded Deed or Affidavit from land owner	☒ Installer Authorization	☐ State Road Access	☒ 911 Sheet
☐ Parent Parcel #	☐ STUP-MH	☒ W Comp. letter	☒ VF Form
IMPACT FEES: EMS		Fire	Corr
Road/Code		School	= TOTAL Impact Fees Suspended March 2009

Property ID # 15-55-16-03626-113 Subdivision Hi-Dei Acres Unit 2 Lot 122

- New Mobile Home _____ Used Mobile Home ☒ MH Size 42x60 Year 2000
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner Donald, Marielle + Deborah Robert Phone# 386-984-5313
- 911 Address 403 SW Kestrel Way Lake City FL 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Deborah Robert Phone # 386-984-5313
Address 351 SW Kestrel Way Lake City FL 32024
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 2 on separate lots (nothing on this lot)
- Lot Size _____ Total Acreage 3.23
- 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 No
- Driving Directions to the Property Hwy 47 South to Bedrock turn
(R) to Kestrel turn (R) 1st drive on (R)
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terr Lake City FL 32024
 - License Number IH1025145/1 Installation Decal # 10050

Lot 113

Lot 121



Deborah Robert
Hi-Dei Acres Unit 2
Lot 122
Parcel # 15-55-16-03626-113
also contains Lot 121 + 113

Columbia County Property Appraiser

DB Last Updated: 3/12/2012

2011 Tax Year

Parcel: 15-5S-16-03626-113

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

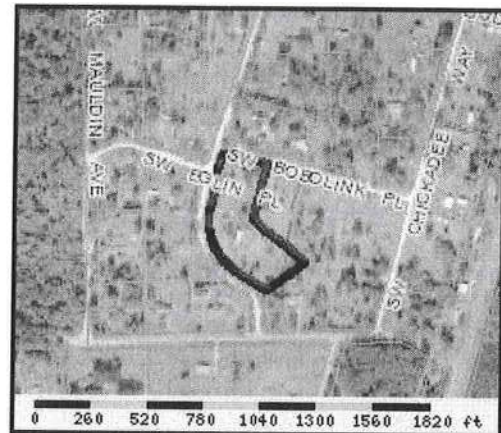
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	ROBERT DONALD P & MARIELLE C &		
Mailing Address	DEBORAH A ROBERT (JTWRS) 351 SW KESTREL WAY LAKE CITY, FL 32024		
Site Address	351 SW KESTREL WAY		
Use Desc. (code)	MOBILE HOM (000202)		
Tax District	3 (County)	Neighborhood	15516
Land Area	3.230 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. LOTS 113, 121 & 122 HI-DRI ACRES UNIT 2. ORB 443-50, 637-488, 639-001, 774-370, 806-42, 806-1574, 807-1429,		



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$30,943.00
Ag Land Value	cnt: (4)	\$0.00
Building Value	cnt: (2)	\$21,729.00
XFOB Value	cnt: (2)	\$600.00
Total Appraised Value		\$53,272.00
Just Value		\$53,272.00
Class Value		\$0.00
Assessed Value		\$52,356.00
Exempt Value	(code: HX)	\$25,000.00
Total Taxable Value	Cnty: \$27,356 Other: \$27,356 Schl: \$27,356	

2012 Working Values

NOTE:

2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/27/1995	807/1429	WD	I	Q		\$23,000.00
5/31/1995	806/42	PR	I	U	03	\$0.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1973	BELOW AVG. (03)	960	1328	\$3,612.00
2	SFR MANUF (000200)	1996	MOD METAL (25)	924	924	\$17,317.00

Note: All S.F. calculations are based on exterior building dimensions.

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2007	\$200.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2007	\$400.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 3/19/2012 DATE ISSUED: 3/21/2012

ENHANCED 9-1-1 ADDRESS:

403 SW KESTREL WAY

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

15-5S-16-03626-113

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL. 3RD LOCATION
ON PARCEL

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION
INFORMATION RECEIVED FROM THE REQUESTER. SHOULD,
AT A LATER DATE, THE LOCATION INFORMATION BE FOUND
TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.**

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

March 21, 2012

To: Columbia County Building Department

Description of Well to be installed for Customer

Deborah Bobert

Located @ Address:

403 SW Restrel Way LC 32024

1 HP 15 GPM submersible pump, 1 1/4" drop pipe, 86 gallon captive tank, and backflow prevention.
With SRWMD permit.

Bruce N. Park

Sincerely,
Bruce N. Park
President

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Ronnie Norris

PHONE

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 OK	Print Name: <u>Michael Conner</u> License #: <u>ER13013192</u>	Signature: <u>Michael A Conner</u> Phone #: <u>386-758-2233</u>
MECHANICAL/A/C	Print Name: <u>Deborah Robert</u> License #: <u>OWNER</u>	Signature: <u>Deborah Robert</u> Phone #: <u>386-984-5313</u>
PLUMBING/GAS	Print Name: <u>RONNIE D. NORRIS</u> License #: <u>IH1025145/1</u>	Signature: <u>Ronnie Norris</u> Phone #: <u>386-623-7716</u>

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.

Ordinance Form: Subcontractor Form 1/11

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Bonnie Norris License # ETH/0231451

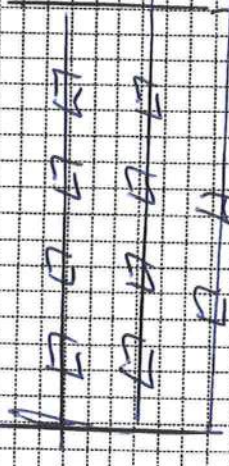
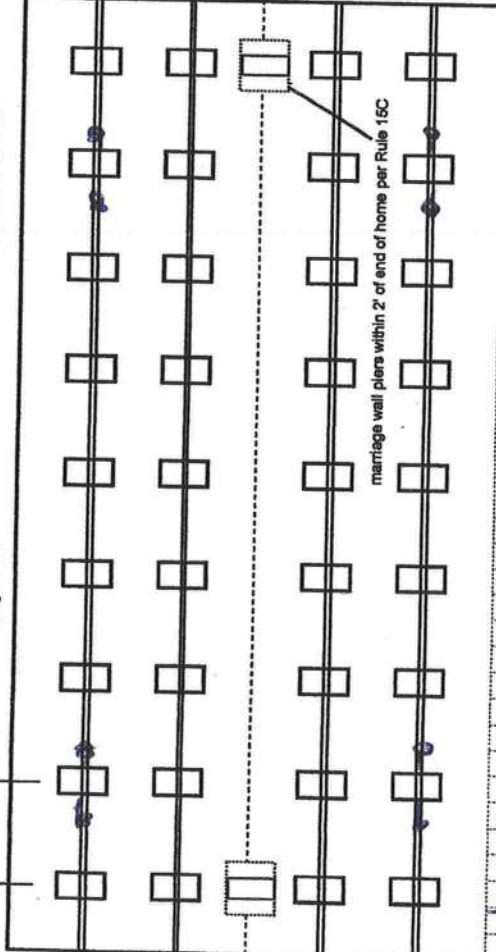
911 Address where home is being installed. SW Kestrel Way

Manufacturer General Length x width 28x60w/ky

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 BN



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 # 10050

Triple/Quad ☒ Serial # 66320

425 provided

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	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 dsf	3'	4'	4'	5'	6'	7'	8'
1500 dsf	4'	5'	5'	6'	7'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17x25
Perimeter pier pad size NA
Other pier pad sizes (required by the mfg.) 10x16

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 8 Pier pad size 4
4
4

ANCHORS

4 ft 4 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

OTHER TIES

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

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

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

TORQUE PROBE TEST

The results of the torque probe test is 225 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 ✓
Water drainage: Natural ✓ Swale ✓ Pad ✓ Other ✓

Fastening multi wide units

Floor: Type Fastener: LM Length: 6 Spacing: 24
Walls: Type Fastener: SM Length: 6 Spacing: 16
Roof: Type Fastener: SM Length: 6 Spacing: 16
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

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

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: _____

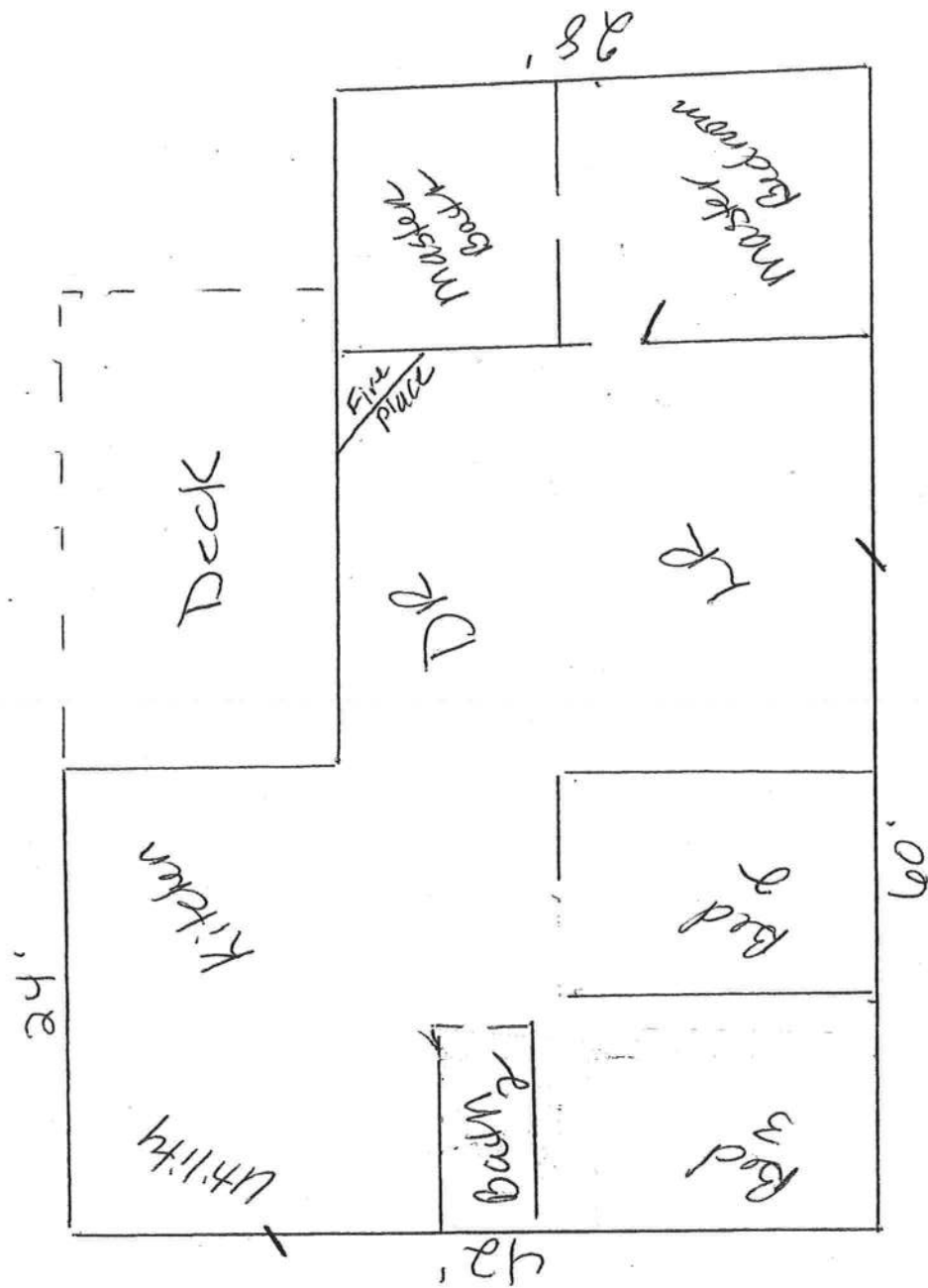
Installer verifies all information given with this permit worksheet
is accurate and true based on the

Installer Signature

Date

3-16-01

Deborah Robert



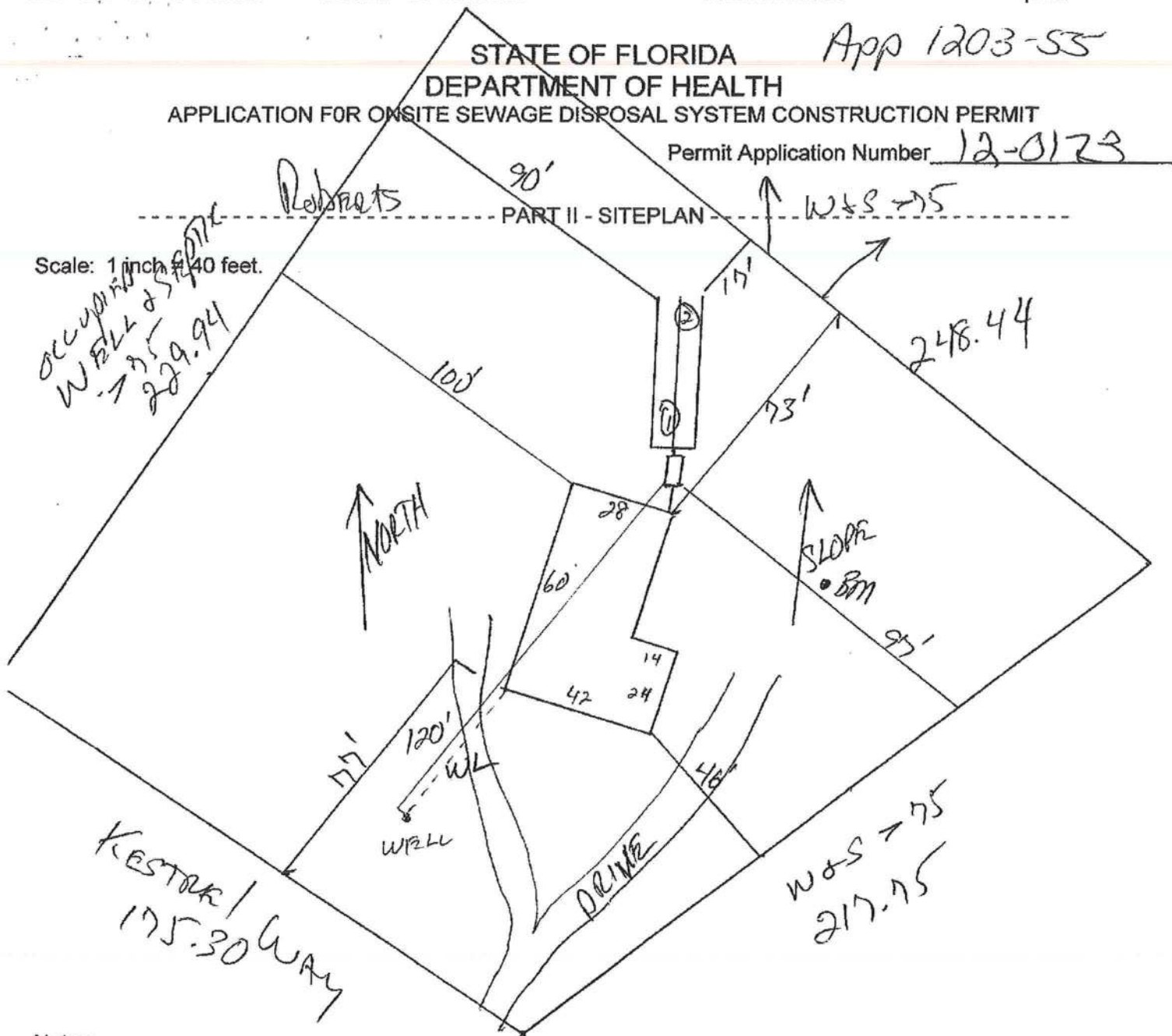
STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

 Permit Application Number 12-0123

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

Site Plan submitted by:

 Plan Approved ☒

 Not Approved ☐

By

MASTER CONTRACTOR

 Date 3/27/12

Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3-23-12 BY UH IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? 10

OWNERS NAME Deborah Robert PHONE _____ CELL 386-984-5313

ADDRESS 351 SW Kestrel Way Lake City FL 32024

MOBILE HOME PARK _____ SUBDIVISION Hi-Dri Acres Unit 2

DRIVING DIRECTIONS TO MOBILE HOME 90 West to First Coast Homes on (R)
on lot back (L) see Paula

MOBILE HOME INSTALLER Ronnie Norris PHONE 386-752-3871 CELL 386-623-7716

MOBILE HOME INFORMATION

MAKE General YEAR 2000 SIZE 28 w/ tag 42 x 60 COLOR Beige

SERIAL No. 66320

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

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

P SMOKE DETECTOR () OPERATIONAL () MISSING
P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
P DOORS () OPERABLE () DAMAGED
P WALLS () SOLID () STRUCTURALLY UNSOUND
P WINDOWS () OPERABLE () INOPERABLE
P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
P CEILING () SOLID () HOLES () LEAKS APPARENT
P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
P ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE July Ann ID NUMBER 304 DATE 3-26-12

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We). Donald & Marielle Robert
owner of the below described property:

Tax Parcel No. 15-55-16-0362b-113

Subdivision (name, lot, block, phase) Hi-Dei Acres

Give my permission to Deborah Robert to place a
mobile home travel trailer/single family home (circle one) on the above mentioned
property.

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

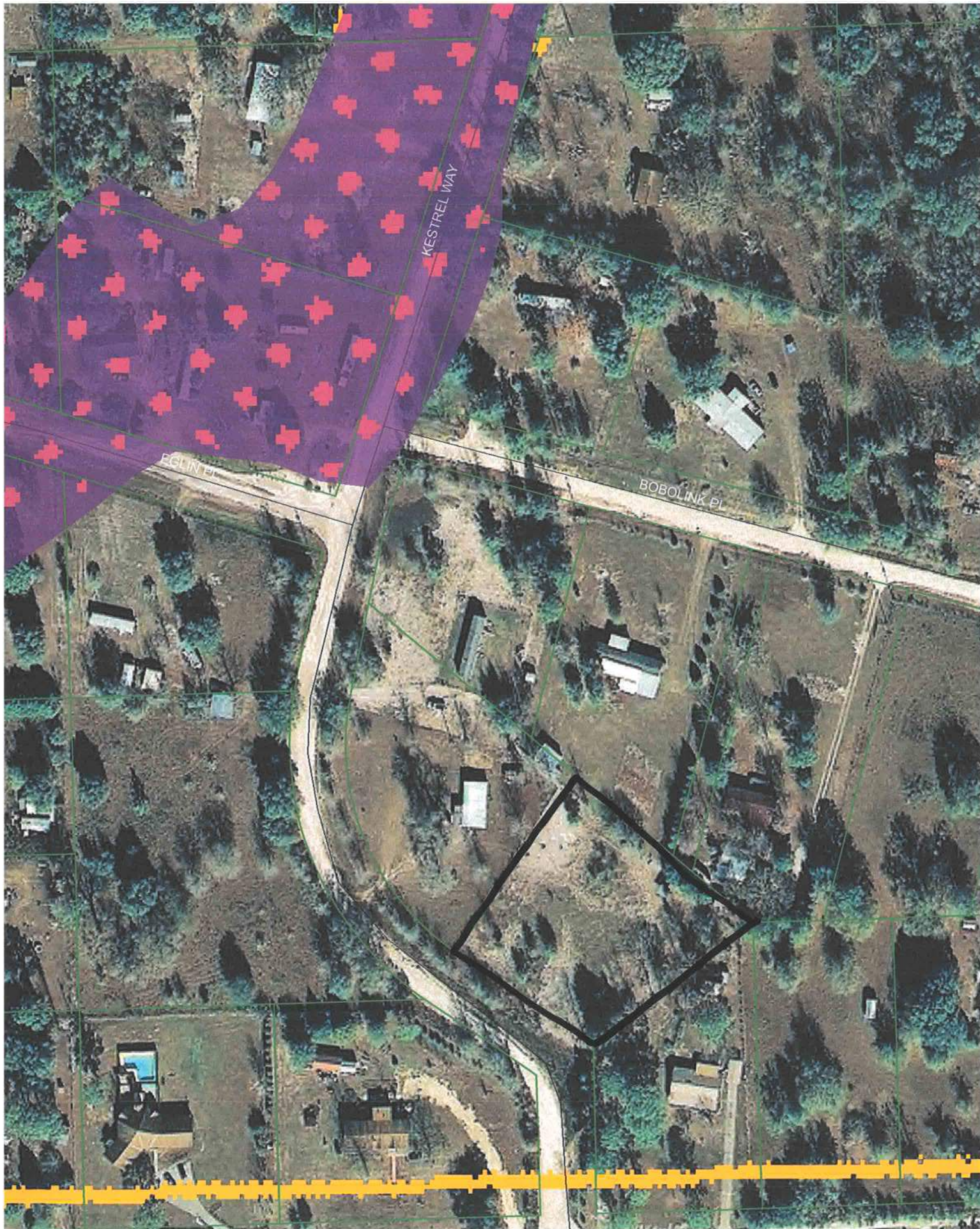
Donald P. Robert
Owner

Marielle Robert
Owner

SWORN AND SUBSCRIBED before me this 30 day of March
2012. This (these) person(s) are personally known to me or produced
ID FLDLs

Laurie Hodson
Notary Signature





Zone X

03626-113 Lot 122 U-2