Typical pier spacing Manufacturer Wayne Address of home William R I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. 5 ofc 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 Maccieny lateral longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) marriage wall piers within 2' of end of home per Rule 15C alethorpe Installer's initials WHA Length x width JH-IDYIQZW Saxue Manufacturer Manufacturer Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms and their pier pad sizes below. List all marriage wall openings greater than 4 foot Other pier pad sizes (required by the mfg.) Perimeter pier pad size capacity bearing I-beam pier pad size interpolated from Rule 15C-1 pier spacing table 1500 psf 2000 psf 2500 psf 3000 psf 3500 psf Coad Triple/Quad Double wide 1000 psf Single wide Opening Home health wall openings 4 foot or greater, symbol to show the piers. Draw the approximate locations of marriage (sq in) Footer size TIEDOWN COMPONENTS PIER PAD SIZES 16" x 16" ග් ග් ථ 4.6 (256)Pier spacing Table for USED Homes ගු the Manuscriptors included by in accordance with Rule 15-C Pier pad size Senal # installation Decal # Hencz bring 18 1/2" x 18 1/2" (342) 00 00 00 00 0 Use this SE PILLER OF ROOTHS HOT 20" x 20" (400)CO CO CO CO C Longitudinal Marriage wall Shearwall Sidewall within 2' of end of home spaced at 5' 4" oc 4ft XX 22" x 22" Pad Size 16 x 16 16 x 18 18.5 x 18.5 16 x 22.5 17 x 22 13 1/4 x 26 1 20 x 20 Wind Zone II 一切のコン (484)= POPULAR PAD SIZES 00 00 00 00 17 1/2 x 25 24 x 24 3/16 x 25 3/16 OTHER TIES 26 x 26 FRAME TIES ANCHORS 24" X 24" 5 ft (576)= 00 00 00 00 26" × 26"

676 446

360 348

288

(676)

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Page 1 of 2

Connect all sewer drains to an existing sewer tap or septic tank. Pg. Connect electrical conductors between multi-wide units, but not to the main power Date Tested Installer Name Note: The results of the torque probe test is 3 10 here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot anchors. This includes the bonding wire between mult-wide units. or aheat here to declare 1000 lb. soil The posted pensitrometer less are rounded down to 1500 ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER requires anchors with 4000 lb holding capacity. anchors are required at all centerline tie points where the torque test A state approved lateral arm system is being used and 4 ft. reading is 275 or less and where the mobile home manufacturer may anchors are allowed at the sidewall locations. I understand 5 ${\it ft}$ 4 1000 (w) N Using 500 lb. increments, take the lowest POCKET PENETROMETER TESTING HETHOD Take the reading at the depth of the footer. Test the perimeter of the home at 6 locations. reading and round down to that increment 9 250 TORQUE PROBE TES Electrical Installer's initials without teating. inch pounds or check Pg. A test 0000 X 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. Type gasket

of tape will not serve as a gasket.

Roof. Sile W Floor

Type Fastener: Screws Length:

Length:

Spacing:

Type Fastener: Lags

aing multi wido units

will be centered over the peak of the roof and fastened with galv. Type Fastener nytal sorw sength: Spacing: 18'.
For used homes a min. 30 gauge, 8" wide, galvanized metal strip

roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

Water drainage; Natural

Dubrite and organic material removed 90 % -

ムス

Chier

a result of a poorly installed or no gasket being installed. I understand a strip homes and that condensation, mold, meldew and buckled marriage walls are understand a properly installed gasket is a requirement of all new and used

Installer's initials

Weatherproofing

Bottom of ridgebeam Yes Between Walls Yes Between Floors Installed:

Yes

Miscellaneous

Yes V

Other: Electrical crossovers protected. Range downflow vent installed outside of skirting. Drain lines supported at 4 foot intervals. Dryer vent installed outside of skirting. Yes Skirting to be installed. Yes Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the Yes NA

Installer Signature

independent water supply systems.

Connect all potable water supply piping to an existing water meter, water tap, or other

Date 10/7/0



Note:



Columbia WFMac

License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE

Label #: 79573	Manufacturer:	(Check Size of Home)
	Year Model:	Single
	Length & Width:	Double
		Triple
	Type Longitudinal System:	HUD Label #:
	Type Lateral Arm System:	Soil Bearing / PSF:
	New Home: Used Home:	Torque Probe / in-lbs:
	Data Plate Wind Zone:	Permit #:
	Label #: 79573	Year Model: Length & Width: Type Longitudinal System: Type Lateral Arm System: New Home: Used Home:

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

79573

LABEL#

DATE OF INSTALLATION

WILLIAM R PRICE

NAME

IH / 1041936 / 1

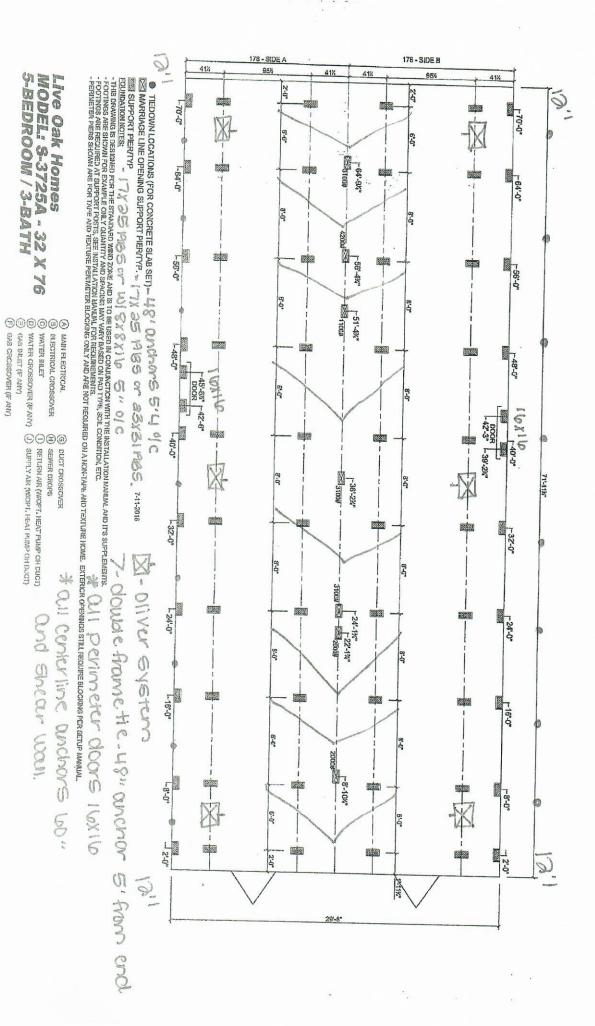
4869

LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF TON AND AFFIX

OF MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.



MODEL: S-3725A - 32 X 76 5-BEDROOM / 3-BATH

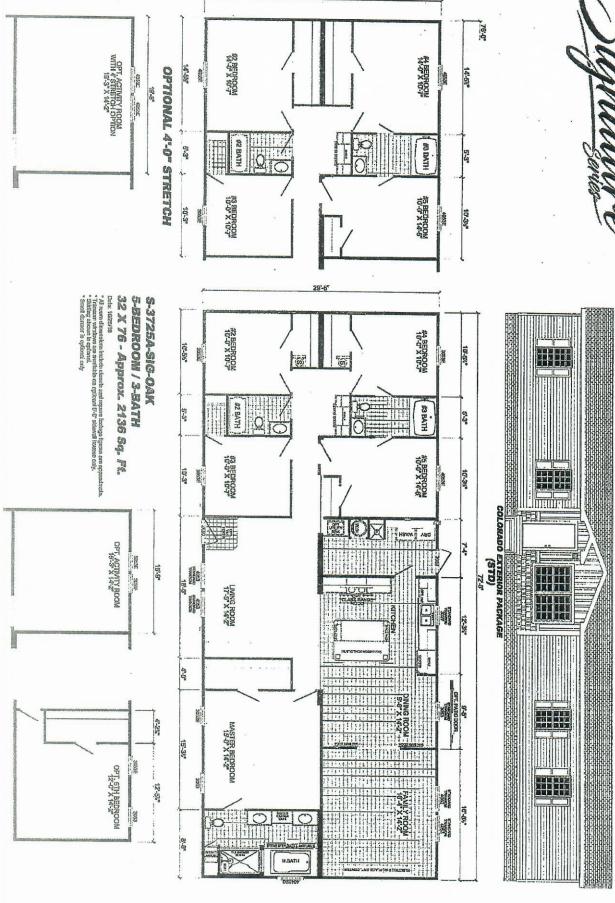
DUCT GROSSOVER
 DUCT GRO

and shear wall

Live Oak Homes



MANSION





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 AGENT AUTHORIZATION

, william R. Drice ,give this authority a	nd I do certify that the below
referenced person(s) listed on this form is/are under my direct sur	Dervision and control and
is/are authorized to purchase permits, call for inspections and sign	n on my behalf.
Printed Name of Authorized Person Signature of Authorized Person	Agents Company Name
Oda price Contr	Drice Rite Enterprise
Jessie Shepard anith Shepan	Orice Rite Enterprise
Amy Johnson Quy Johnson	Onice Rite Enterprise
I, the license holder, realize that I am responsible for all permits pu	irchased, and all work done
under my license and I am fully responsible for compliance with all	Florida Statutes, Codes, and
Local Ordinances.	and the second second
I understand that the State Licensing Board has the power and authorized holder for violations committed by him/her or by his/her authorized document and that I have full responsibility for compliance granted	person(s) through this
License Holders Signature (Notarized) License Num	1936 13 7 31 Date
NOTARY INFORMATION: STATE OF:FloridaCOUNTY OF: Suvunue	
The above license holder, whose name is will and Price personally appeared before me and is known by me or has produce (type of I.D.) on this day of	Notary Public State of Florida
of the Se	My Commission GG 299936



Installer License Holder Name

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

Orice ,give this authority for the job address show below

only, 17 NW Cale	HOVODE Ter GI	CCCity, and I do certify that
the below referenced person(s)	listed on this form is/are under	my direct supervision and control
and is/are authorized to purcha	se permits, call for inspections a	and sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized	Authorized Person is (Check one)
Oda price	Colfe	Agent Officer Property Owner
Jessie Snepard	Jun Sly	Agent Officer Property Owner
Amy Johnson	aug Johnson	Agent Officer Property Owner
I, the license holder, realize that under my license and I am fully Local Ordinances.	I am responsible for all permits responsible for compliance with	purchased, and all work done all Florida Statutes, Codes, and
I understand that the State Licer holder for violations committed be document and that I have full res	by him/her or by his/her authorize	ed person(s) through this
License Holders Signature (Nota	rized) License N	119310 13 17 131 Date
NOTARY INFORMATION: STATE OF:Florida	COUNTY OF: Shrame	u_
The above license holder, whose personally appeared before me a (type of I.D.)	e name is <u>William R. Pn</u> and is known by me or has produ on this <u>Th</u> day	iced identification
NO ARY'S SIGNATURE		Notary Public State of Florida Seal/Stamp vis My Commission GG 299936 Expires 02/10/2023



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:

6/22/2020 2:45:09 PM

Address:

172 NW OGLETHORPE TER

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

14-3S-16-02123-009

REMARKS:

This address is a verified address in the county's addressing system.

Verification ID: 6cadac0b-fc92-4795-a21c-422657b6f940

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:

GIS Specialist

Columbia County GIS/911 Addressing Coordinator