Parcel:

11-6S-16-03815-168

Owner & Property Info

Result: 1 of 1

BAIRD BOBBY

P O BOX 326 Owner

CARYVILLE, TN 37714

Site

LOT 68 CARDINAL FARMS UNREC: COMM SE COR & RUN W 5311.34

Description* FT TO SW COR, N 1995.16 FT, W 60.18 FT, N 1780.79 FT, N 77 DG E 887.51

FT TO POB, N 500.08 FT, E 872.18 FT, S 500.08 FT, W 872.18 FT TO POB.

WD 1024-838, WD 1385-8, WD 1402-2172,

10.01 AC Area

S/T/R 11-6S-16

Use Code** VACANT (000000) Tax District 3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER			CONTRACTOR	Brent Strickland	PHONE_386-365-7043				
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT									
					Bobby Baird				
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</u> 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	Print Name	Glenn Whittingto	n	Signature					
	License #: _	EC 13002957		Phone #:38	6-972-1700				
		Qua	lifier Form Attac	thed X					
MECHANICAL/	Print Name	Michael Boland	Í	Signature					
A/C	License #:	CAC 1817716		Phone #:38	6-972-1700				
		Qua	lifier Form Attac	hed X					
Qualifier Forn	Qualifier Forms cannot be submitted for any Specialty License.								
Specialty L	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 QUALIFIER AUTHORIZATION

1. Chard Whitington	(license holder name), licensed qualifier
for Whittington ELRENK ?	(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-	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in 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. LARSURD 2. Recky Ford	2. 8 07 13
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complet 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 officer(s), you must notify this department in write authorization form, which will supersede all prevenauthorized persons to use your name and/or li	iance with all Florida Statutes, Codes, and and 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
Licensed Qualifiers Signature (Notarized)	EC 1300 2957 3/7/16 License Number Date
NOTARY INFORMATION: STATE OF:COUNTY OF:	Colimbia
The above license holder, whose name is	me or has produced identification this day of



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

VIII O	
, LICENSED QUALIFIE	ER AUTHORIZATION
1. My hARIA DOLAND	(license holder name), licensed qualifier
for ACIE A/L OF OCA/A	(company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ough an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said discontrol and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DAIR EAD	1.618
2. Kally Dishop	2. Kelly Bishop
3. Kocky Forel	3. Jah, 1) 7 of
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for complex 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.	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and cons committed by him/her, his/her agents, insibility for compliance with all statutes, codes
If at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prev unauthorized persons to use your name and/or I	ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	
STATE OF COUNTY OF	maion
The above license holder, whose name is \(\sum_{\text{l}} \) personally appeared before me and \(\text{is known by} \) (type of I.D.) \(\text{on} \)	me or has produced identification this day of 1000 months 20 15
NOTARYS SIGNATURE	(Seal/Stamp)



			ф-	arriance well there will the 2 of end of home to Rule 15C			Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Typical pier spacing	I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.	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	Menufacturer Live DOL Length x width 52 x 5 2	Address of home \$386-365-7043	Installer Brent Strickland License # IH 1104218	PERMIT NUMBER
Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w Lateral Arms Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer	within 2' of end of horne spaced at 5' 4" oc	Opening Pier pad size 4 ft 5 ft	List all marriage wall openings greater than 4 foot 26 x 26 676 and their pier pad sizes below.	20 x 20 /16 x 25 3/16 1/2 x 25 1/2	Other pier pad sizes. 17 x2 18.5 360 (required by the rafg.) 17 x22 374 18.4 344 344 344 344 344 344 344 344 344 3	from Rule 150-1 pler specing table. PIER PAD SIZES POPULAR PAD SIZES	1500 psf 4 6 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	oter 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" X 24" 26" ze (256) 1/2" (342) (400) (484)* (576)* (8	PIER SPACING TABLE FOR USED HOMES	Serial #	Single wide Wind Zone II Wind Zone III Double wide Sala Installation Decal # 65746	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	New Home D Used Home	Page 1 of 2

PERMIT NUMBER

	ALL TESTS MUST BE PERFORMAD BY A LICENSED INSTALLER Installer Name BY 0.7 - 2020 Date Tested 8- 1-2020	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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 p helding capacity. Installer's initials	TORQUE PROBE TEST The results of the torque probe test is 295 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.	reading and round down to that increment. x1600 ×1500 ×1500		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 1600
Other	Miscellaneous Skirting to be installed. Yes Vo 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 N/A Electrical crossovers protected. Yes	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	Type gasket Toa M Installed: Pg Between Floors Yes Between Walls Yes Between of ridgebeam Yes	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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.	Spacing: (6) Spacing: (6) Spacing: (6) Wide, galvanized metal strength and fastened with galvasides of the centerline.	and organic material removed Chainage: Natural Fastening multi wide units Type Fastener: 1 283 Length: 5

1

Site Preparation

Dryer vent installed outside of skirling. Yes N/A Range downflow vent installed outside of skirling. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:
nstalled nflow ve nflow ve support
outside outside ont Insta ed at 4
of skir liled out foot inte cted. Y
thing. Y
es skirting Yes
1 5
NA \
7
1 \

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

independent water supply systems. Pg. ...

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

Installer Signature

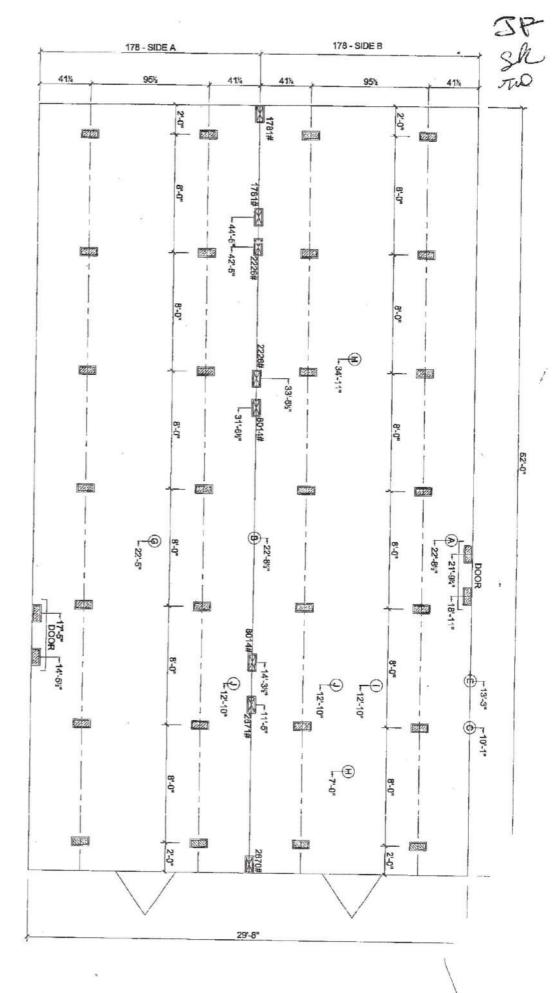
Connect all sewer drains to an existing sewer tap or septic tank. Pg.

Plumbing

source.

Connect electrical conductors between multi-wide units, but not to the paint power

This includes the bonding wire between mult-wide units. Pg.



FOUNDATION NOTES:

SUPPORT PIER/TYP

MARRIAGE LINE OPENING SUPPORT PIER/TYP.

THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS. - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

6-26-09

4-BEDROOM / 2-BATH MODEL: L-3524F -Live Oak Homes 32 X 52

(A) MAIN ELECTRICAL
(B) ELECTRICAL CROSSC
(C) WATER INLET
(D) WATER CROSSOVER
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ELECTRICAL CROSSOVER

WATER CROSSOVER (IF ANY)

GAS CROSSOVER (IF ANY)

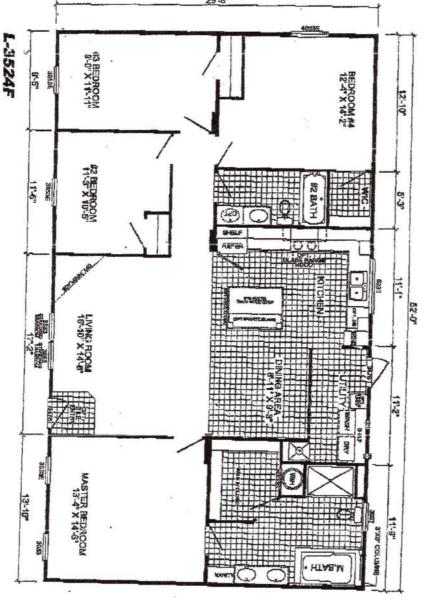
(E)(a) DUCT CROSSOVER

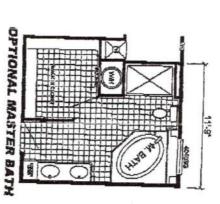
SEWER DROPS

() RETURN AIR (W/OPT, HEAT PUMP OH DUCT) RETURN AIR (W/OPT, HEAT PUMP OH DUCT)

L-3521F

RAPTOR





32 X 56 - Approx. 1525 Sq. Ft.

Date: 0201/19

*All round dimensions include closeds and square footage figures are approximate.

*Transpare variables are available on optional 8-0 address increase only.

4-BEDROOM / 2-BATH

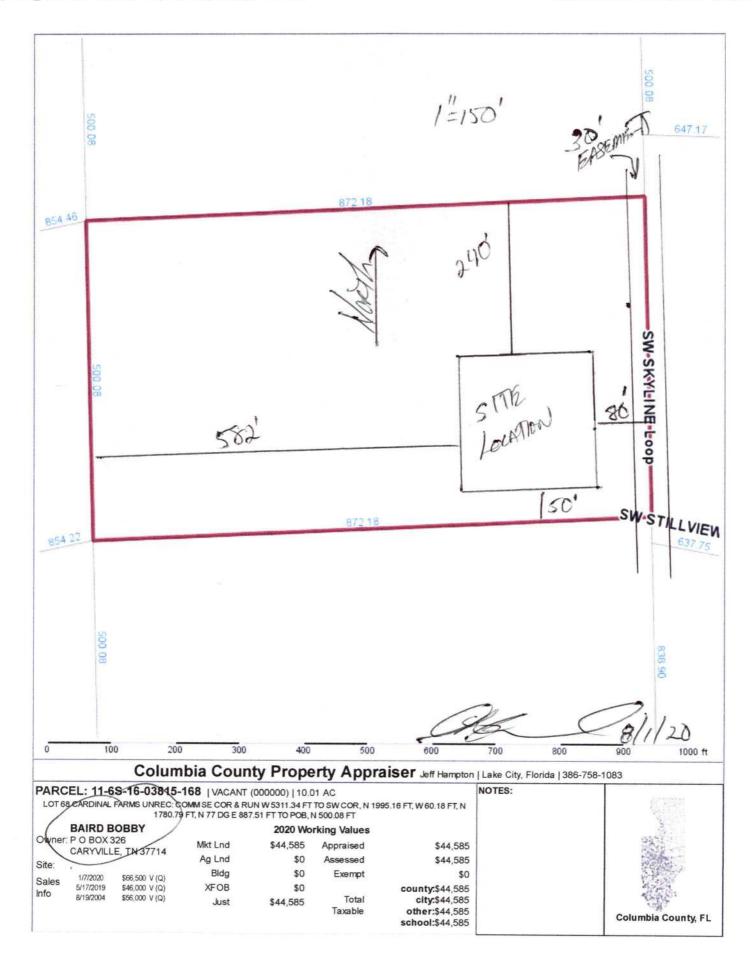
,

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

- 1	Permit Application N	Number_
BAIRD	PART II - SITEPLAN	210'
Scale: 1 inch = 40 feet.	137' 130' 130' 130' 130' 130' 130' 130' 130	BR 50
Notes: 1 o	F 10.01 ACNES SEE ATIA	chro
Site Plan submitted by:	8/1/20	CONTRACTOR
Plan Approved	Not Approved	Date
Ву		County Health Department
		Journ, Hourt Dopartment

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road

Lake City, FL, 32055

- (O) 386-758-3409
- (F) 386-758-3410
- (C) 386-623-3151

8/1/2020

To: Campis	County Building 1	Department		
Description of well to	be installed for Cu	stomer:	BAIRd	
Located at Address:	SW	Styling	Loop, FW,	32058
1 hp 15 GPM Submers flow prevention, With		Irop pipe, 86 gal	llon captive tank	k and back
Ince 1	ark			
Sincerely				
Bruce Park				
President				