

DATE 12/02/2010

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000029041

APPLICANT WENDY GRENNELL PHONE 386-288-2428
ADDRESS 3104 SW OLD WIRE RD FORT WHITE FL 32038
OWNER CAROLYN SIMMONS (KRYSTAL SCHRECENGOST) PHONE 386-266-9009
ADDRESS 1396 SE ADAMS STREET HIGH SPRINGS FL 32643
CONTRACTOR TERRY THRIFT PHONE 386-623-0115
LOCATION OF PROPERTY 441-S, L ADAMS ST, TO END LAST ON RIGHT

TYPE DEVELOPMENT ***VOID***MH ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING AG-3 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 1 FLOOD ZONE FL X DEVELOPMENT PERMIT NO.

PARCEL ID 11-7S-17-09983-009 SUBDIVISION BICENTENNIAL ACRES
LOT 16 BLOCK PHASE UNIT 1 TOTAL ACRES 5.00

IH1025139

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 10-0523 BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: MINIMUM ELEVATION SET @ 52.5', NEED ELEVATION CONFIRMATION LETTER

BEFORE POWER (((OWNER CANCELED-NOT BUYING THIS MH-LETTERS ATTACHED)))

STUP-10-16/ 5 YEAR PERMIT FOR DAUGHTER Check # or Cash CASH

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by
Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by
Framing Insulation
date/app. by date/app. by
Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by
Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by
Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 64.20 WASTE FEE \$ 167.50
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 606.70

INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

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Rough-in plumbing above slab and below wood floor Electrical rough-in
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Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
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INSPECTORS OFFICE L. J. J. J. CLERKS OFFICE

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PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

606.70

For Office Use Only (Revised 1-10-08) Zoning Official _____ Building Official 7.C. 11-30-10

AP# 1011-45 Date Received 11/24 By JIN Permit # 29041

Flood Zone Floodable Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Elevation Confirmation Letter Required

FEMA Map# 0514 Elevation 52.5' Finished Floor 52.5' River SANTA FE In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-0523 ☒ EH Release ☒ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☒ STUP-MH 10-16 ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL _____ Impact Fees Suspended March 2009 _____

Property ID # 11-75-17-09983-009 Subdivision Bicentennial Acres Unit 1 Lot 16

- New Mobile Home ☒ Used Mobile Home _____ MH Size 28x52 Year 2010
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Road Ft White FL 32038
- Name of Property Owner Carolyn Schrecengost Simmons Phone # 386-266-9009
- 911 Address 1396 SE Adams Street High Springs, FL 32643
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Krystal Schrecengost Phone # 386-454-1969
Address 1448 SE Adams St. High Springs FL 32643
- Relationship to Property Owner daughter
- Current Number of Dwellings on Property 1
- Lot Size _____ Total Acreage 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 No
- Driving Directions to the Property 441 South past Oleno State Park to SE Adams Street turn (L) to end, last property on (R)
- Name of Licensed Dealer/Installer TERRY JOFT Phone 387-52-4210
- Installers Address 448 NW NYE HUNTER LN LAKE CITY FL 32055
- License Number IA 1025139 Installation Decal # 3337

300 64.20

167.50

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

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

Installer TERESA L. THURTELL License # 1A-1005139

11 Address where home is being installed. SE Adams Street
High Springs FL 32064

Manufacturer Tru-Homes Length x width 50' x 68'

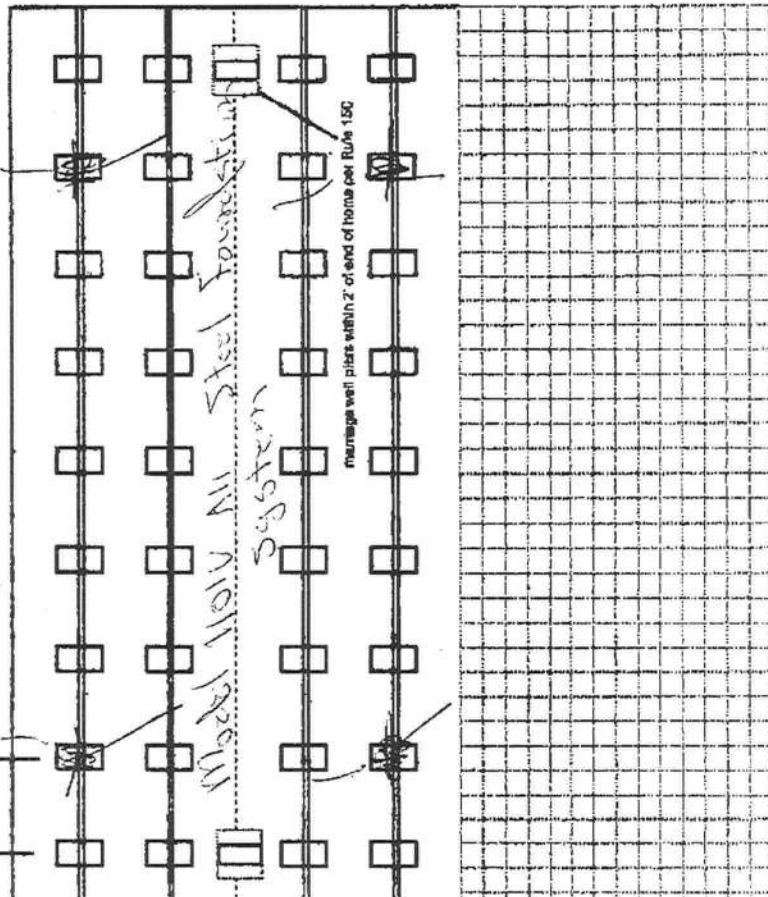
NOTE: If home is a single wide fill out one half of the blocking plan.
If home is a triple or quad wide sketch in remainder of home.

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 TH



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



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 Decat # 3339
Triple/Quad ☐ Serial # _____

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)	25" x 25" (625)
1000 psf	3'	4'	4'	5'	6'	7'	8'
1500 psf	4'	6'	6'	7'	8'	9'	10'
2000 psf	6'	8'	8'	9'	10'	11'	12'
2500 psf	7'	9'	9'	10'	11'	12'	13'
3000 psf	8'	10'	10'	11'	12'	13'	14'
3500 psf	9'	11'	11'	12'	13'	14'	15'

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

PIER PAD SIZES

I-beam pier pad size 12" x 25"
Perimeter pier pad size 15" x 15"
Other pier pad sizes (required by the mfg.) _____

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 19' 6" Pier pad size 19" x 25"

ANCHORS 4 ft 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 Strong Rock

OTHER TIES

Sidewall Number 32
Longitudinal Marriage wall Shearwall 2

342
req.
provided

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psi or check here to declare 1000 lb. soil _____ without testing.

X 1500 X 1500 X 1600
253 755 250

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 1300 X 1500
253 870 265

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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

Installer's Initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

inspect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.

Plumbing

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

inspect 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: 1/2" x 3" Spacing: 24" 32" 50"
Walls: Type Fastener: 1/2" x 3" Spacing: 32" 50"
Roof: Type Fastener: 1/2" x 3" Spacing: 32" 50"
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: Foam Tape

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes
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
Dryer vent installed outside of skirting. Yes
Range downflow vent installed outside of skirting. Yes
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes
Other: N/A

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

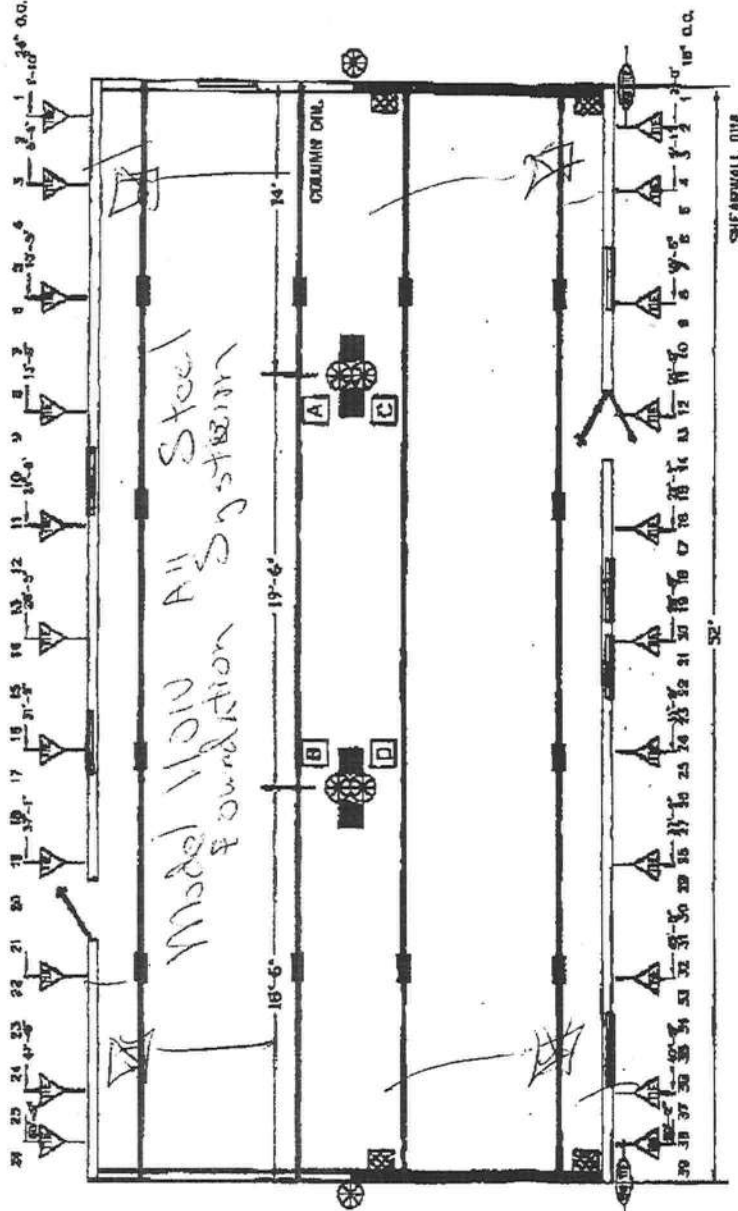
Installer Signature

Date

rep. 1. 2008- 3:25 PM TOWNHOMES LLC

No. 5499 P. 2

check recent
25x52



BLOCKING LEGEND:

1) ALL EXPOSURE DOORS, BAY WINDOWS, RECESSED STAIRWELLS AND EXTERIOR WALL OPENINGS 48" OR GREATER, WILL REQUIRE BLOCKING ON EACH SIDE.

2) 32" DIA. HULERS REQUIRED TO BE BLOCKED MIN 8'-0" ON CENTER BETWEEN COLUMNS.

- 1) I-BEAM BLOCKING
- 2) SEE SOIL BEARING CAPACITY CHARTS FOR SPACING
- 3) COLUMN BLOCKING
- 4) SEE SOIL BEARING CAPACITY CHARTS FOR PRO SIZE
- 5) SHEARWALL BLOCKING
- 6) SHEARWALL FRAME TIE
- 7) CENTER LINE TIES
- 8) VERTICAL TIE
- 9) MAX. SPACING 8'-0" CENTER TO CENTER
- 10) LONGITUDINAL TIES

TownHomes 200 S. BOX 1083 LAKE CITY, FLORIDA 33504		Project 2828-183	Sheet 2
Owner 10-2-07	Architect 10-2-07	Engineer 10-2-07	Checker 10-2-07
Permit 10-2-07	Code 10-2-07	Model 2828-183	Block PLAN

282867



26'-8" WIDE HOME
SIDEWALL HEIGHT 8'-0"

REFER OPENING 35 1/2" x 67 1/2"

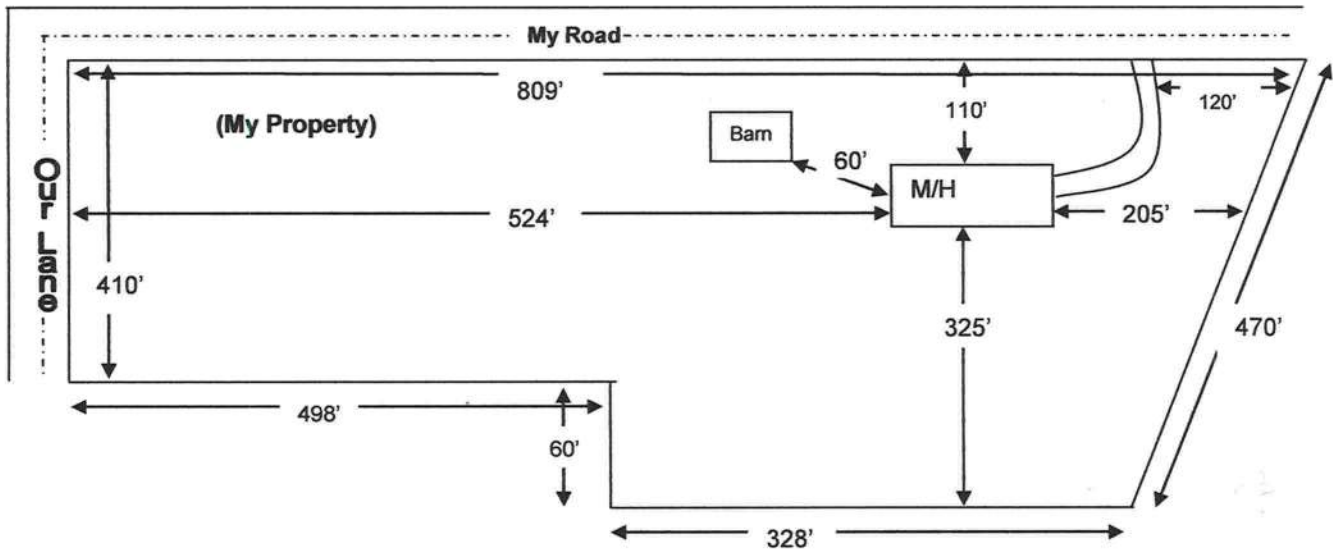
ZONE 1	SW#1		SW#3
ZONE 2	SW#1		SW#3
ZONE 3	SW#1	SW#2	SW#3

		TownHomes P.O. BOX 1088 LAKE CITY, FLORIDA 32068		Card# 28284	
: BARRISTER, LEONARD, JR. & ASSOCIATES		Rentals		Pint	
: 10-2-07		Dn't ROB		2828-183	
Parents NEW		Codes T (07)		Model:	
1		2		3	

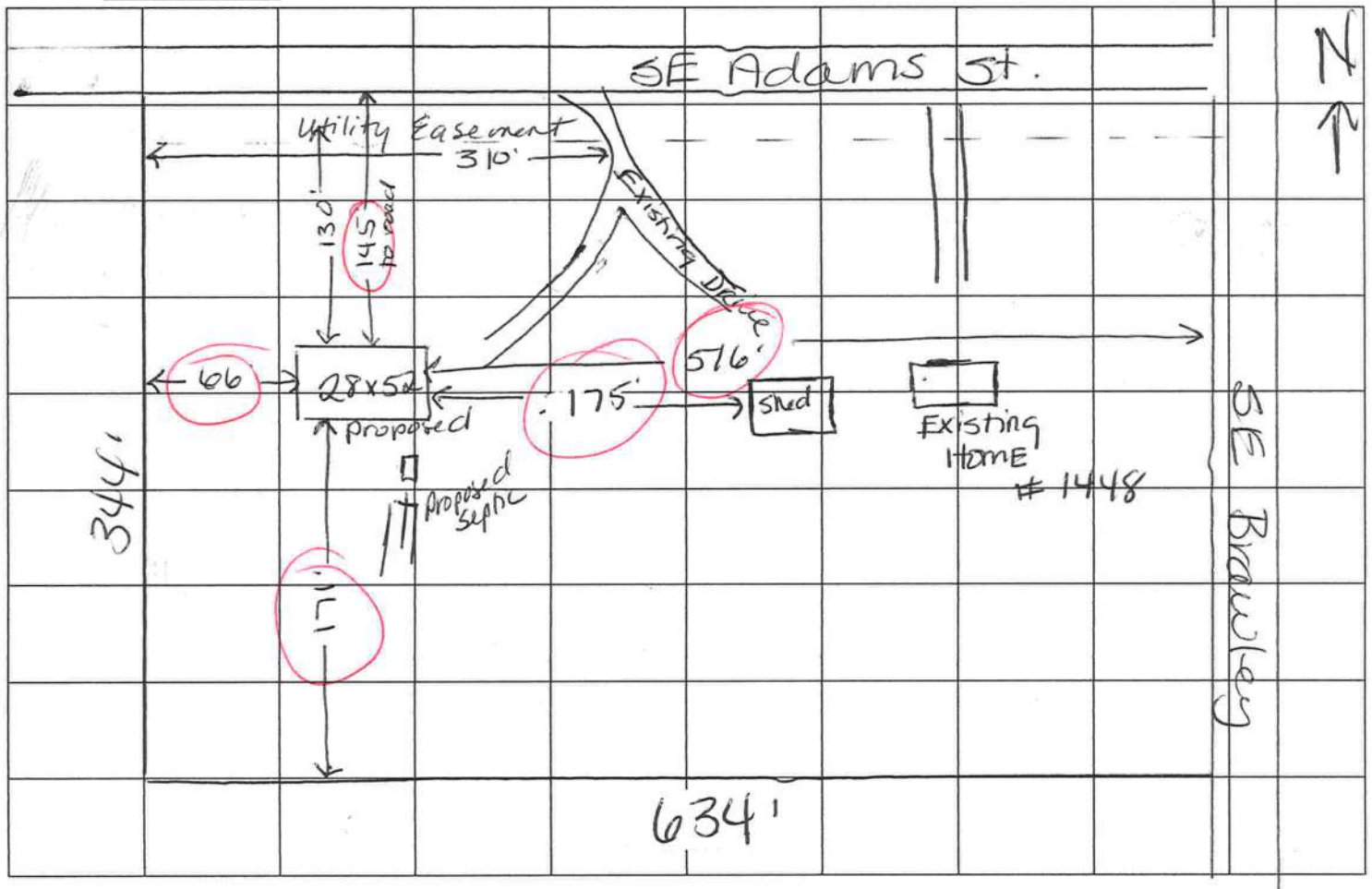
11/2/2010

Schrecengost 2nd residence

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them. Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1011-45 CONTRACTOR Terry Thrift PHONE 386-623-0115
 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 ✓	Print Name: <u>Michael Conner</u> License #: <u>ER13013192</u>	Signature: <u>Michael Conner</u> Phone #: <u>758-2233</u>
MECHANICAL/A/C ✓	Print Name: <u>David Hall</u> License #: <u>CAC057424</u>	Signature: <u>David Hall</u> Phone #: <u>755-9792</u>
PLUMBING/GAS ✓	Print Name: <u>Terry Thrift</u> License #: <u>IH1025139</u>	Signature: <u>Terry Thrift</u> Phone #: <u>386-623-0115</u>
ROOFING	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SHEET METAL	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/SPRINKLER	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SOLAR	Print Name: _____ License #: _____	Signature: _____ Phone #: _____

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Contractor Form: Subcontractor Form: 6/08

Schreengost
*App # 1011-45***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: 11/18/2010 DATE ISSUED: 11/24/2010

ENHANCED 9-1-1 ADDRESS:

1396 SE ADAMS

ST

HIGH SPRINGS FL 32643

PROPERTY APPRAISER PARCEL NUMBER:

11-7S-17-09983-009

Remarks:

2ND LOCATION ON PARCEL

Address Issued By: 

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.

STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

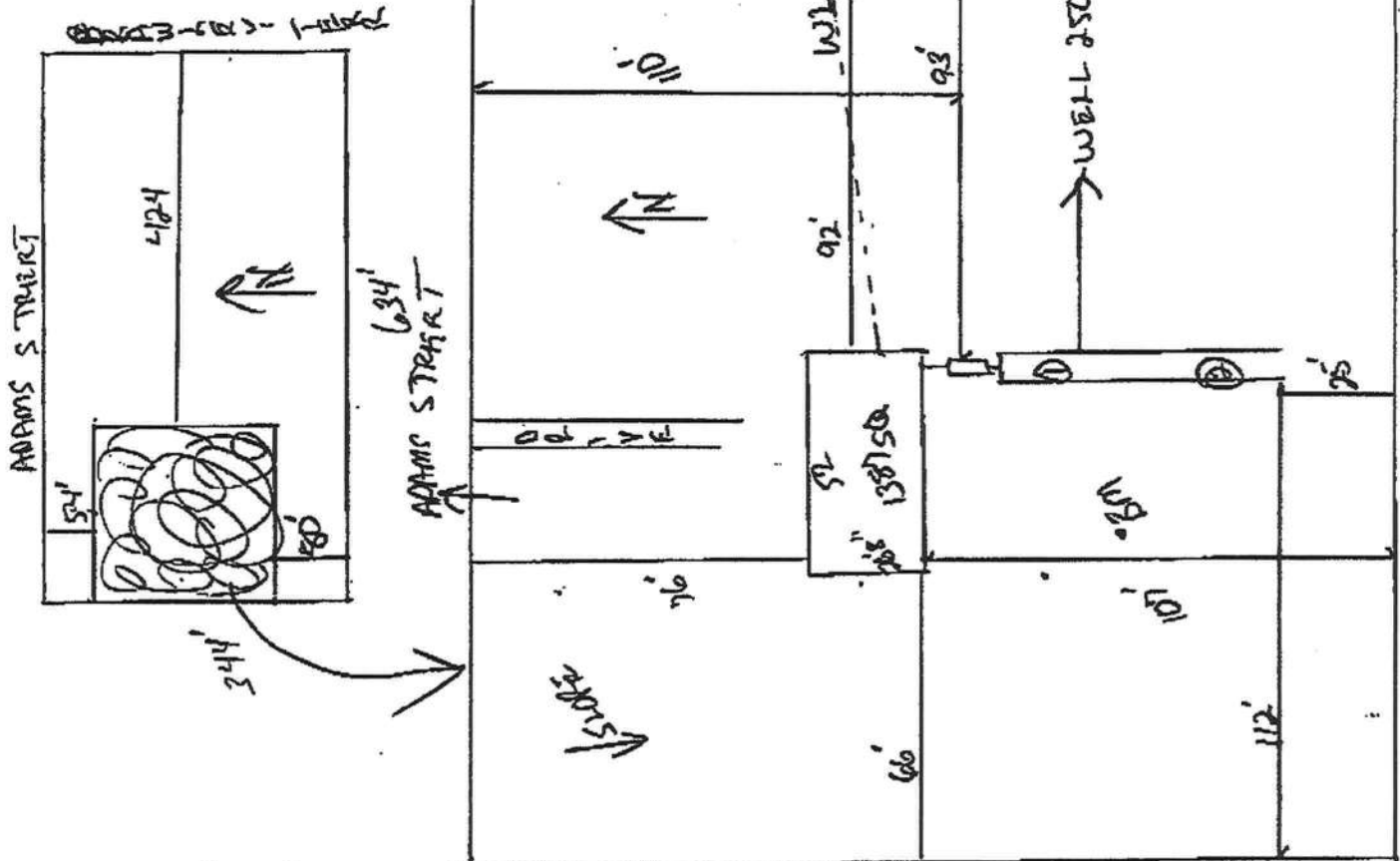
APP# 1011-45

10-0523

Schreckengost

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

1 of 5 Acres

Site Plan submitted by:

Rocky D 7

Plan Approved

Not Approved

By

Sadhi

Send to Director

Columbia CHD

MASTER CONTRACTOR

Date

11-30-10

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT