PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official LN Building Official AHD

AP# 1808-59 Date Received 8/20 By JW Permit # 37148

Flood Zone X Development Permit _____ Zoning A3 Land Use Plan Map Category A

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor 1' above road River _____ In Floodway _____

☐ Recorded Deed or ☑ Property Appraiser PO ☑ Site Plan ☑ EH # 18-0735 ☑ Well letter OR

☐ Existing well ☐ Land Owner Affidavit ☑ Installer Authorization ☐ FW Comp. letter ☑ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____ ☑ 911 App

☐ Ellisville Water Sys ☐ Assessment owed ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 09-6S-16-03804-120 Subdivision Doe Run Lot# 20

- New Mobile Home ✓ Used Mobile Home _____ MH Size 32x66 Year 2019
- Applicant Sonya Crews / Linda Craft Phone # 863-517-5701
- Address 331 SW SR 247 Lake City FL 32024
- Name of Property Owner Raymond / Tracy Kress Phone# 386-628-6481 386-365-3009
- 911 Address 718 SW Lauman Glen Fort White, FL 32038
- Circle the correct power company - (Circle One) - FL Power & Light - Clay Electric - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Raymond / Tracy Kress Phone # 386-628-6481
  Address 335 SW Tina Glen Lake City, FL 32024
- Relationship to Property Owner _____
- Current Number of Dwellings on Property 0
- Lot Size 881 x 495 Total Acreage 10
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property Go to I-75 get off on 47 exit and turn R on Hwy 47 (when coming off ramp) go 47S about 10 miles. Turn R on Herlong Rd follow and turn L on Centerville then L on Lauman which is a private road it will be the lot just past house # 603 on R
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 623-7716
- Installers Address 1004 SW Charles Terr Lake City, FL 32024
- License Number IH102545/1 Installation Decal # 536025

LH - Emailed Sonya - 8-28-18

* New well - Customer doesn't know who they will be using at this time

$453.95

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

Installer: Ronnie Norris License # IH0251451

Address of home being installed: SW Lauman Gln, Fort White, FL 32038

Manufacturer: Jacobsen Length x width: 32X66

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 # 536025

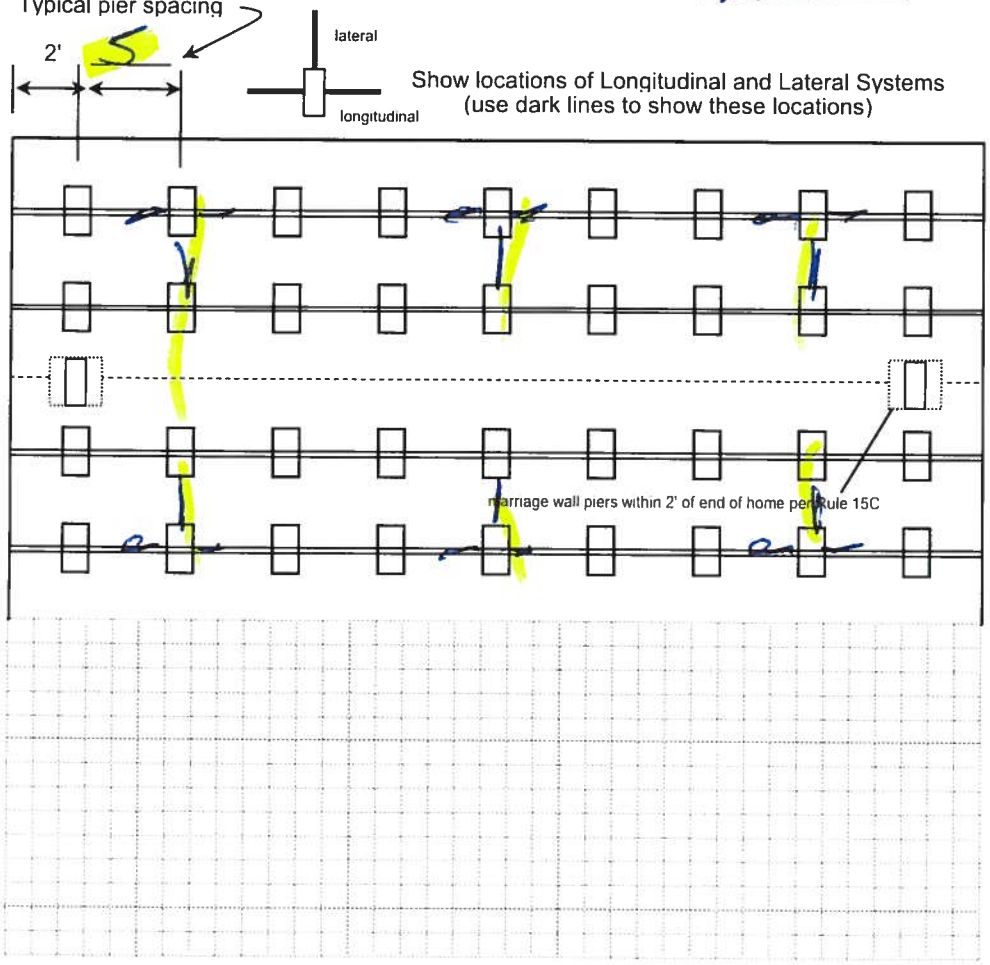
Triple/Quad ☐ Serial # JAC FL 00897 AB

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: KN

Typical pier spacing



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

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 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		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: 17X25

Other pier pad sizes (required by the mfg.): 17X25

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	Pier pad size
8	17X25
4	17X25
4	17X25

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft (4) 5 ft SW

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	22
Longitudinal	6
Marriage wall	6
Shearwall	2

Mobile Home Permit Worksheet

Application Number: _____ **Date:** _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 500 psf
or check here to declare 1000 lb. soil without testing.

x 500 x 500 x 500

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 500 x 500 x 500

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 (4). 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 8-15-15

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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:	L	Length: 6	Spacing: 24
Walls:	Type Fastener:		Length: 6	Spacing: 16
Roof:	Type Fastener:		Length: 6	Spacing: 24

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, 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.

Installer's initials

Type gasket
Pg.

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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature _____ Date 8-15-15

JACOBSEN HOMES

PO BOX 368, 600 PACKARD CT.
SAFETY HARBOR, FLORIDA 34695

(727) 726-1138

www.jachomes.com

WARNING:

INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN SERIOUS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT.

CAUTION:

MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT THAT ALL PERSONNEL, ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADEQUATELY TRAINED. A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED.

REFER TO AD-TB-0250 THROUGH AD-TB-0254 FOR COLUMN ANCHOR SIZES.

COLUMN INFO. TABLE			COLUMN PAD - MIN. SIZES (sq. in.)					
COL. NUM.	SPAN	LOAD (IN POUNDS)	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL
1	8'-4"	3375	486	324	243	194	194	194
2	8'-4"	3375	486	324	243	194	194	194
3	19'-2"	5215	751	501	375	300	300	300
4	19'-2"	5215	751	501	375	300	300	300
5	0"	0	0	0	0	0	0	0
6	0"	0	0	0	0	0	0	0
7	0"	0	0	0	0	0	0	0
8	0"	0	0	0	0	0	0	0
9	0"	0	0	0	0	0	0	0
10	0"	0	0	0	0	0	0	0

NOTES:

1. REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
2. REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERS CAN BE RELOCATED AND/OR SPANS INCREASED PER THE SETUP MANUAL.
3. REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.
4. REFER TO THE APPROVED FLOOR PLAN FOR SHEARWALL LOCATIONS AND LOADS.
5. REFER TO AD-TB-100 FOR SHEARWALL APPLICATIONS AND TIE-DOWNS.
6. REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERS SHALL BE LOCATED WITHIN 6" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERS MAY BE REQUIRED ALONG THE MATING LINE. SEE THE SETUP MANUAL FOR SPECIFICS.
7. ALL 194" WIDE FLOOR SYSTEMS REQUIRE PERIMETER AND MATING LINE BLOCKING.
8. ALL 2x6 FLOOR SYSTEMS WIDER THAN 144" REQUIRE PERIMETER AND MATING LINE BLOCKING.
9. ANY SIDEWALL AREA WITH A HOIST BEAM OR A STRUCTURAL ATTACHMENT SHALL HAVE PIERS AND ANCHORS SPACED NO FURTHER THAN 48" O.C. MAXIMUM. SOME WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION, REFER TO THE JACOBSEN HOMES SETUP MANUAL FOR SPECIFICS (SEE SU-01-0005 AND SU-01-0006). WHEN THE ATTACHED STRUCTURE HAS FOURTH WALL CONSTRUCTION OR IS DESIGNED AND CONSTRUCTED TO BE SELF SUPPORTING, THESE ADDITIONAL PIERS AND ANCHORS ARE NOT REQUIRED.
10. MAX. PIER SPACING ON 8" I-BEAM IS 96". MAX. PIER SPACING ON 10" OR 12" I-BEAM IS 180". SEE NOTE 4 ON PAGES SU-01-0063 THROUGH SU-01-0065.

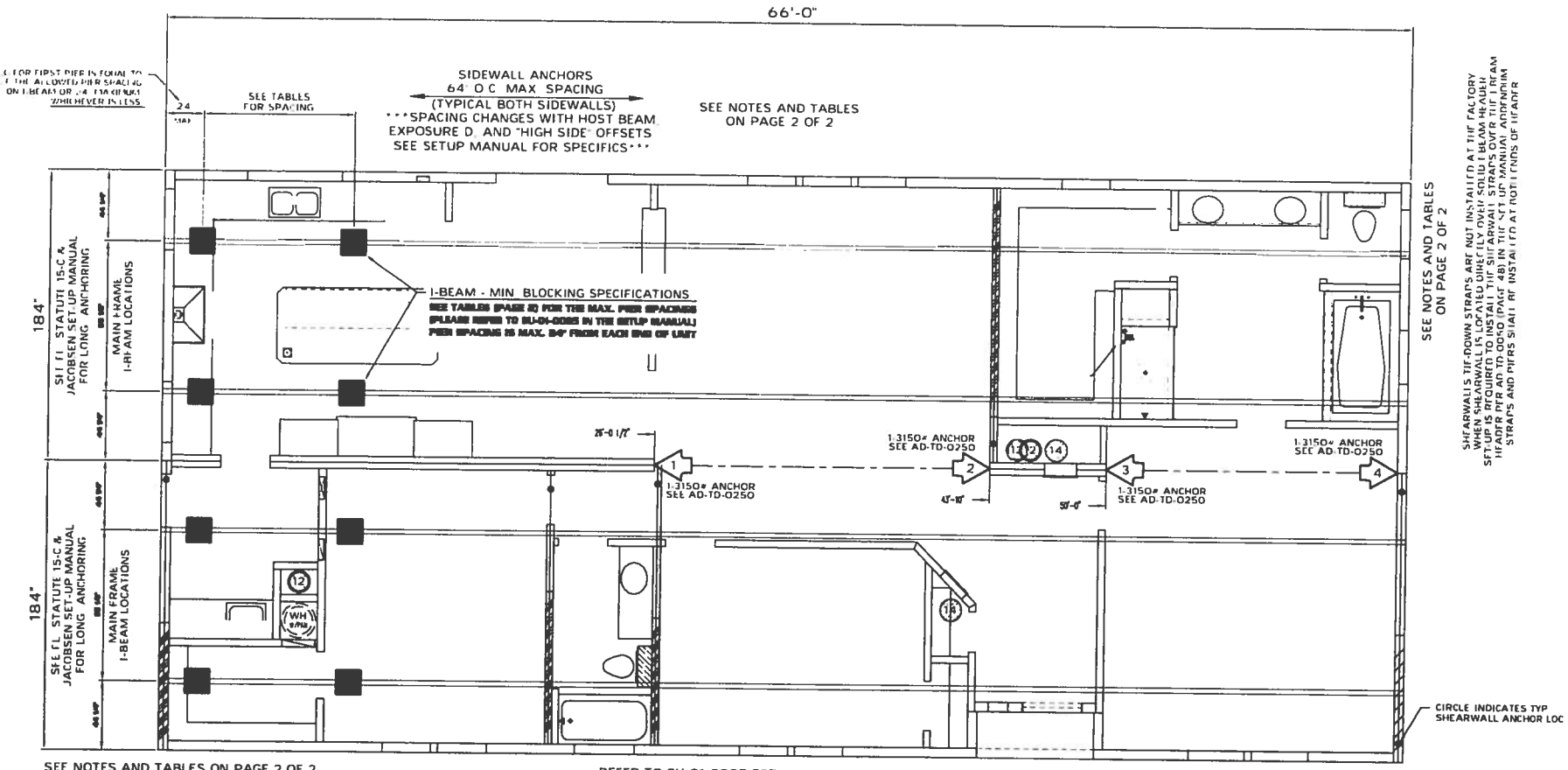
N10 = SEE NOTE 10.
REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.

MINIMUM PIER PAD SIZE (sq.in.)		I-BEAM PIER SPACING						MATING LINE PIER SPACING						PERIMETER PIER SPACING					
		1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL
A	256 sq. in.	30	48 1/2	66 1/2	85	103* N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
B	342.25 sq. in.	42	66 1/2	90 1/2	115* N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
C	396 sq. in.	49	77 1/2	105 1/2* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
D	400 sq. in.	49 1/2	78 1/2	107 1/2* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
E	432.875 sq. in.	54	85	116* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
F	576 sq. in.	74	115* N10	N10 N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
G	676 sq. in.	87 1/2	N10 N10	N10 N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C



SEE NOTES AND TABLES ON PAGE 2 OF 2
SEE WARNINGS AND CAUTIONS ON PAGE 2

REFER TO SU-01-0005 FOR ADD'L PIER REQUIREMENTS

JACOBSEN HOMES
PO BOX 368, 800 PACKARD CT.
SAFETY HARBOR, FLORIDA 34695
(727) 786-1136
www.jachomes.com

REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C
34569 - PAGE 1 OF 2

MODEL # CP-2345-569

IMP-34,569
JACOBSEN HOMES
2
24
24
16
2X8 FLOOR JOIST 16" O.C.

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT
(THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
District No. 5 - Tim Murphy

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

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:	**8/22/2018 11:14:52 AM**
Address:	**718 SW LAUMAN Gln**
City:	**FORT WHITE**
State:	**FL**
Zip Code	**32038**
Parcel ID	**03804-120**

REMARKS: Address for proposed structure on parcel.

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: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

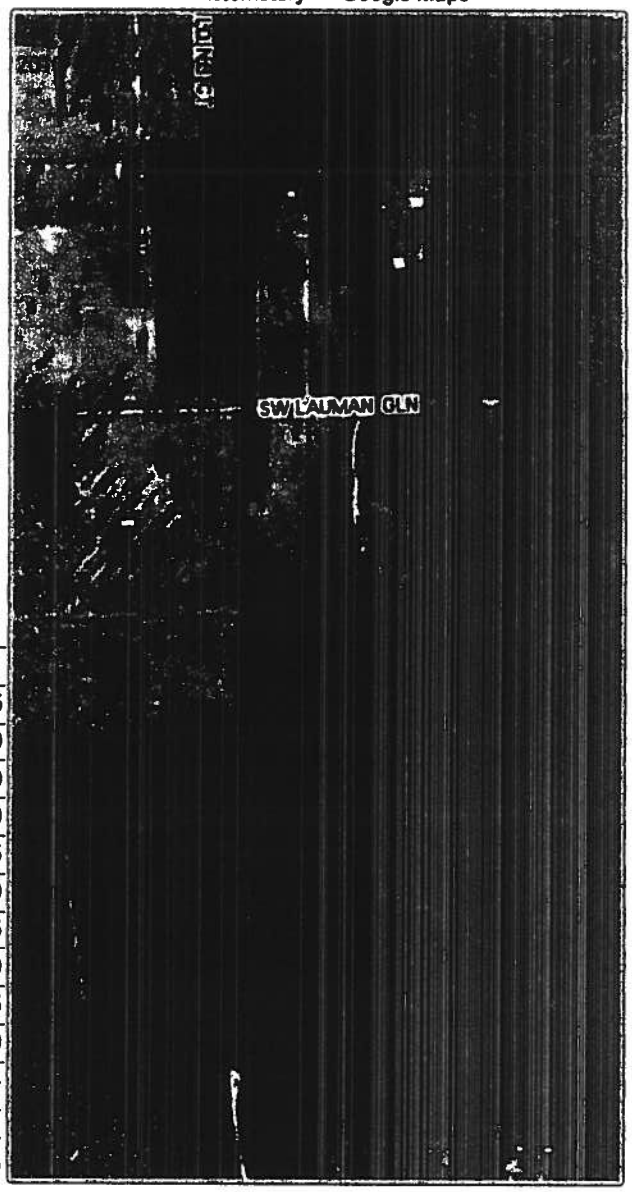
Columbia County Property Appraiser

Jeff Hampton

2017 Tax Roll Year
updated: 8/1/2018

Parcel: << **09-6S-16-03804-120** >>

Aerial Viewer Pictometery Google Maps



Owner & Property Info

Owner	KRESS RAYMOND M & TRACY E P O BOX 3829 LAKE CITY, FL 32056		
Site	,		
Description*	COMM SW COR OF NW1/4 OF SW1/4, RUN N 441.41 FT, E 12 FT TO E R/W LAZY OAK RD, N 883.01 FT, E 2964.22 FT FOR POB, CONT E 494.98 FT, S 881.03 FT, W 494.99 FT, N 881.30 FT TO POB. (AKA LOT 20 DOE RUN S/D UNREC) 933-1919, WD 1363-810,		
Area	10.01 AC	S/T/R	09-6S-16E
Use Code**	VACANT (000000)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.
**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2017 Certified Values		2018 Working Values	
Mkt Land (1)	$40,531	Mkt Land (1)	$44,585
Ag Land (0)	$0	Ag Land (0)	$0
Building (0)	$0	Building (0)	$0
XFOB (0)	$0	XFOB (0)	$0
Just	$40,531	Just	$44,585
Class	$0	Class	$0
Appraised	$40,531	Appraised	$44,585
SOH Cap [?]	$0	SOH Cap [?]	$0
Assessed	$40,531	Assessed	$44,585
Exempt	$0	Exempt	$0
Total Taxable	county:$40,531 city:$40,531 other:$40,531 school:$40,531	Total Taxable	county:$44,584 city:$44,584 other:$44,584 school:$44,585

Sales History

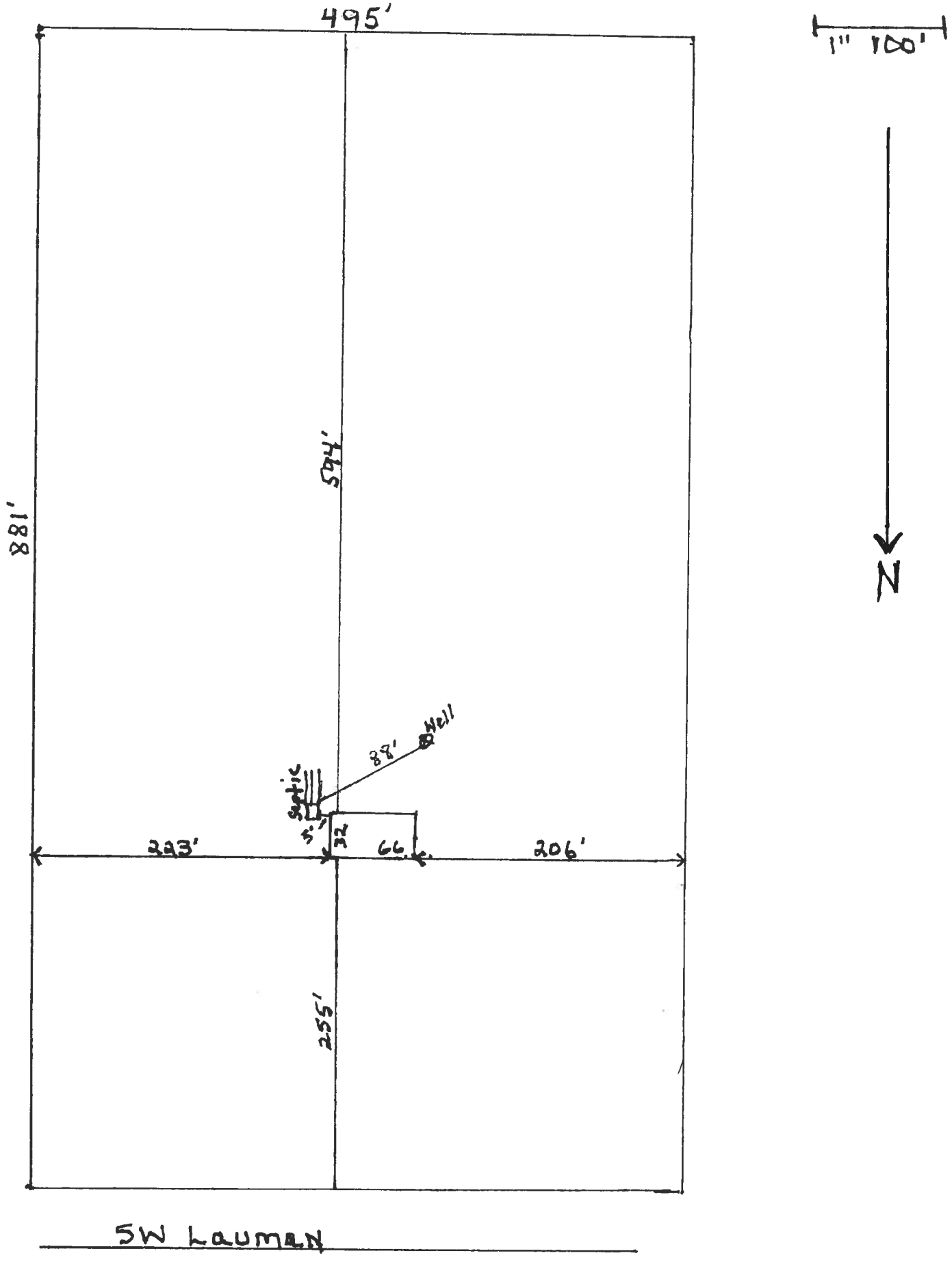
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
6/21/2018	$35,000	1363/0810	WD	V	Q	01
8/17/2001	$29,900	933/1919	WD	V	Q	

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						



KRESS

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

I, Ronnie Norris, give this authority for the job address show below
Installer License Holder Name

only, SW Lauman Gln Fort White, FL 32038, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is… (Check one)
Sonya Crews	Sonya Crews	✓ Agent ___ Officer ___ Property Owner
Linda Craft	Linda Craft	✓ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Ronnie Norris — I H102545 — 8-15-18
License Holders Signature (Notarized) | License Number | Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 15 day of August, 20 18.

Sandra Elizabeth Tope
NOTARY'S SIGNATURE

(Seal/Stamp)

SANDRA ELIZABETH TOPE
Notary Public - State of Florida
Commission # GG 063811
My Comm. Expires Jan 18, 2021
Bonded through National Notary Assn.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1808-59 CONTRACTOR Ronnie Woods PHONE 386.623.7716

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	Print Name_____ Signature_____ License #: _____ Phone #: _____ Qualifier Form Attached ☐
MECHANICAL/ A/C 950 ✓	Print Name Michael A. Boland Signature [signature] License #: CAC1817716 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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1808-59 CONTRACTOR Ronnie Norris PHONE 623-7716

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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 1074	Print Name Glen Whittington Signature Glen Whittington License #: EC 1300 2957 Phone #: 386-972-1701 Qualifier Form Attached ☐
MECHANICAL/ A/C _____	Print Name _____ Signature _____ License #: _____ Phone #: _____ 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

Hall's Pump and Well Services, Inc.
904 NW Main Blvd
Lake City, FL 32055
hallspumpandwell@bellsouth.net

8/8/2018

Well Letter of Compliance

Contractor: Property Owners: Tracy Kress

Columbia County

Parcel ID 09-6S-16-03804-120

Please be advised that due to the building codes our minimum well size will be 4" in diameter

- Pump size 1 1/2 hp, 230 volt, single ph, pump and motor
- Drop pipe size, 1-1/4" inch
- 4 Inch black steel well casing, 235mm wall thickness
- Tank sized, PC 244, 81 gallon, will supply a 23.9 gal. draw down at 40/60 pressure setting.
- All wells will have a pump and tank combination that will be sufficient enough for each situation.

If you have any questions please call our office @ 386-752-1854

Thanks,

Benjamin Dicks,
Office Coordinator
Hall's Pump and Well Services, Inc.
904 NW Main Blvd.
Lake City, FL 32055
(F): (386)752-1854

SSA 233807273

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO: 18-0775
DATE PAID: 8/21/18
FEE PAID: 425.00
RECEIPT #: 1320894

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: Raymond Tracy Kress
AGENT: Sonya Crews / Linda Craft TELEPHONE: 386-628-6481
MAILING ADDRESS: 335 SW Tina Glen Lake City FL 32024

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 20 BLOCK: _____ SUBDIVISION: Doe Run PLATTED: _____

PROPERTY ID #: 09-6S-16-03801-120 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 10 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 718 SW Lauman Gln Fort White, FL 32038

DIRECTIONS TO PROPERTY: 90 to I-75 get off on 47 exit and turn ⓡ on hwy 47 (when coming off ramp) go 47S about 10 miles. Turn ⓛ on Herlong Rd follow and turn ⓡ on Centerville then ⓛ on Lauman which is a private rd it will be the last lot just past house # 630 on ⓡ

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Mobile Home	3	2024	
2				
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify) _____

SIGNATURE: Sonya Crews DATE: 8/20/18

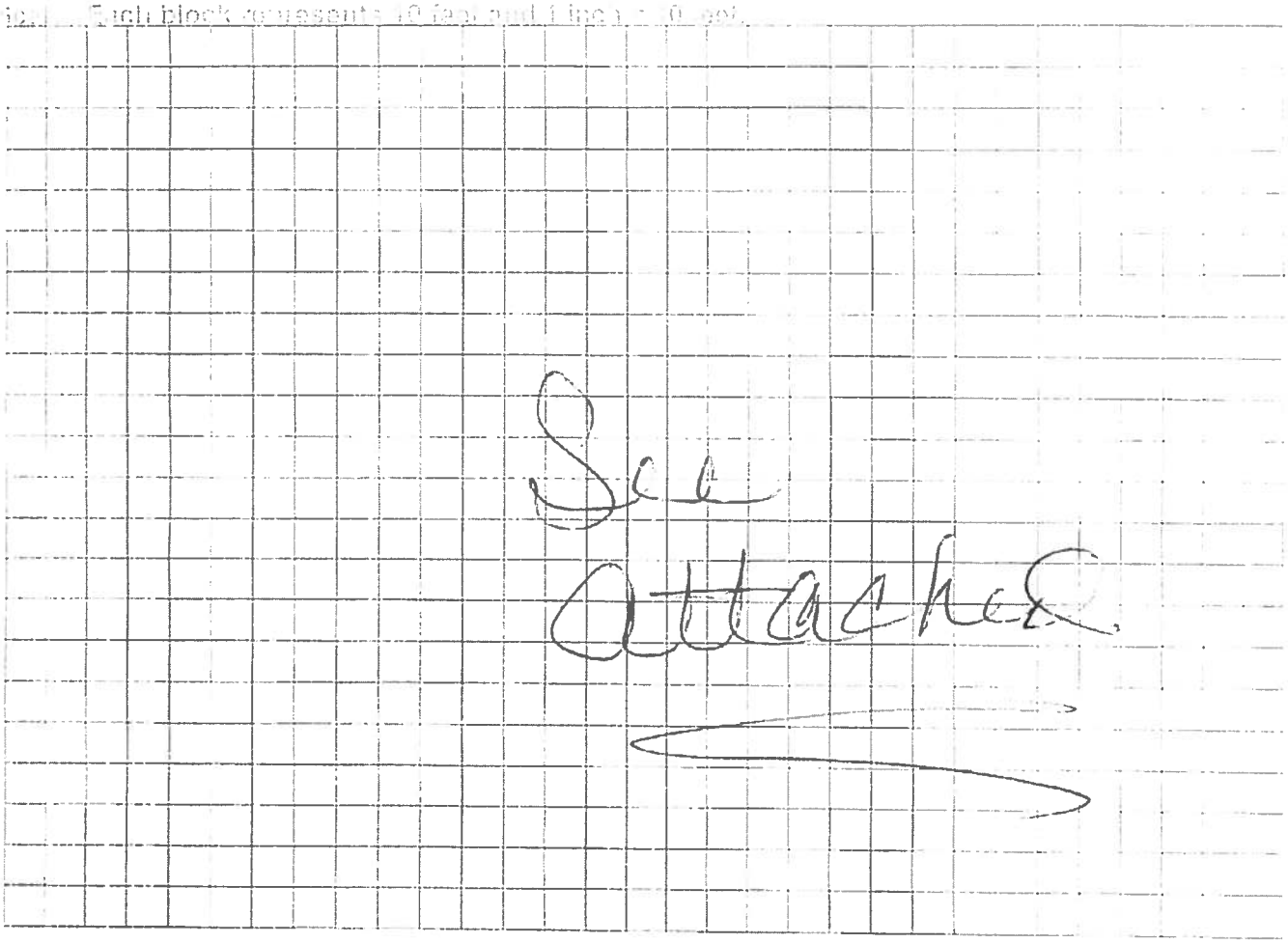
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 18-0735

PART II - SITEPLAN

Each block represents 10 feet and 1 inch = 10 feet.



Notes:

Site Plan submitted by: Sonya Cruse

Plan Approved X

By

Not Approved

ESII Columbia

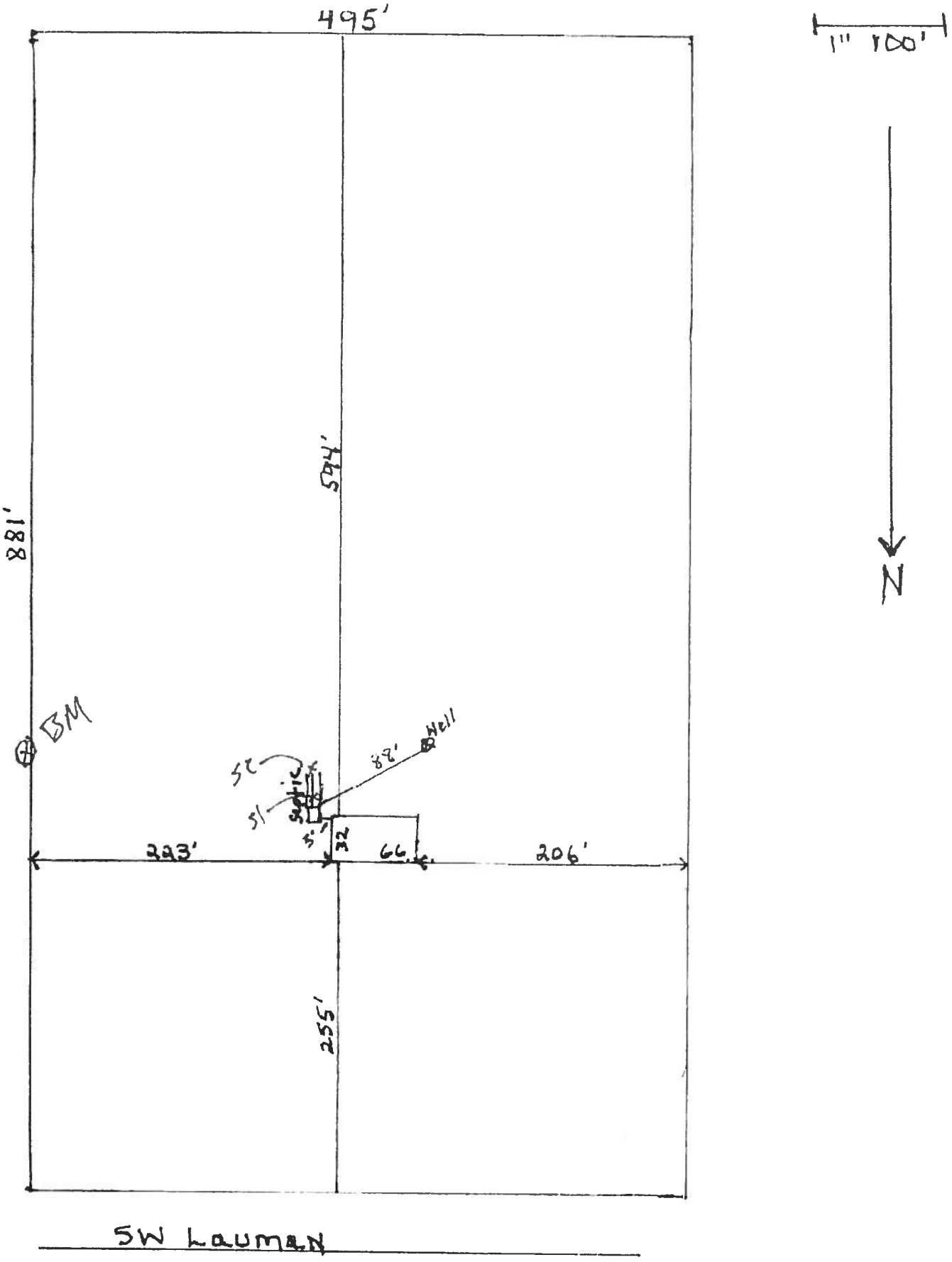
Date 8/25/08

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001 FAC
(Stock Number: 57-44-002-4015 6)

18-0735



KRESS