PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	Tor Office Use Only (Revised 7-1-15) Zoning Official 74 6-28-18 Building Official 74 6-28-18 AP# 1806-74 Date Received 6-22-18 By 14 Permit # 36913
	Flood Zone \times Development Permit \times Zoning $A = 3$ Land Use Plan Map Category A_8
	Comments Relacing existing the
	Topicing Crisivity (1
F	EMA Map# Elevation Finished Floor / '66 suc In Floodway In Floodway
	Recorded Deed or Property Appraiser PO Site Plan FH# 18-0508 Uvell letter OR
400	Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
	DOT Approval Parent Parcel # STUP-MH 9911 App
	Ellisville Water Sys Assessment Paid on Property Quit County Sub VF Form
	# Ward the trice
Pro	operty ID# 24-4S-15-00384-002 Subdivision Buie's Tract Unrec Lot# 2
•	New Mobile Home Used Mobile Home MH Size 28 x 56 Year 2018
	Applicant Dale Burd or Rocky Ford Phone # 386-497-2311
	Address 546 SW Dortch Street, Fort White, FL, 32038
•	1 Vices
•	Name of Property Owner <u>Eric McDaniel</u> Phone# 808-298-6546
•	911 Address 7065 SW County Rd 242 Lala Coty fl 32024
•	Circle the correct power company - FL Power & Light - (Clay Electric)
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
	Name of Owner of Mobile Home Same Phone # Same
-	Address 255 Sunset Hill Court, Lake City, FL, 32055
•	Relationship to Property Owner Same
•	Current Number of Dwellings on Property 0 Previous already removed
	Lot Size 265 X 1314 Total Acreage 8.08
•	Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
•	Is this Mobile Home Replacing an Existing Mobile Home Yes
•	Driving Directions to the Property SR 247 South, TR CR 242, 2.6 miles to address on right
•	Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
•	Installers Address 6355 SE CR 245, Lake City, FL, 32025
•	License Number IH-1025386 Installation Decal # 48967

being installed Address of home Typical pier spacing Installer: Manufacturer 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. ρ Ŋ D Robert Scatbilt **Mobile Home Permit Worksheet** AD. lateral long!tudinal R Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) 2 hrriage wall piers within 2' of end of home per Rule 16C Installer's initials Length x width License # 242 巴 22024 H1025386 28.45.6 Application Number: capacity bearing Load Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Other pier pad sizes (required by the mfg.) Perimeter pier pad size interpolated from Rule 15C-1 pier spacing table. Double wide Longitudinal Stabilizing Device (LSD) Manufacturer and their pier pad sizes below. List all marriage wall openings greater than 4 fool Triple/Quad New Home Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer I-beam pier pad size 2000 psf 2500 psf 3500 psf 3500 psf OUU psi Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS Oliver 1/01V 16" x 16" PIER SPACING TABLE FOR USED HOMES 5 PIER PAD SIZES 딮 ر و Used Home Installation Decal # Wind Zone II Serial # 18 1/2" x 18 Pier pad size 1/2" (342) 16216 17425 2246 とからにはかけるの 20" x 20" 回 (400) ထ္ 18961 Wind Zone III 22" x 22" (484)* Marriage wall Shearwall 4 ft within 2' of end of home spaced at 5' 4" oc Sidewall ထ္ ထ္ခ œ POPULAR PAD SIZES Date: 13 1/4 x 26 1/4 20 x 20 7 3/16 x 25 3/16 18.5 x 18.5 16 x 22.5 Pad Size 16 x 18 /2 x 25 OTHER TIES 16 x 16 24" X 24" FRAME TIES ANCHORS (576)* œ 5ft 1 26" x 26" Number (676) ထ 엄디 676 348 36C 56

Mobile Home Permit Worksheet

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	Application Number:
Date:	

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	- 1111111111111111111111111111111111111	TOCKET TENET ROWETER TEN

The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil withou without testing. 15cc psf

1600

x 1500

x /600

POCKET PENETROMETER TESTING METHOD

- Test the perimeter of the home at 6 locations.
- Ņ Take the reading at the depth of the footer.
- Using 500 lb. increments, take the lowest reading and round down to that increment.

x 16co

X 1500

× 1500

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or there if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors. 296 inch pounds or check

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft requires anchors with 4000 lb holding capacity reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Vi hert 6-11-18

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. ~ 28

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

independent water supply systems. Pg. Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pn. 29

plication Number:	Number: Date:
	Site Preparation
Debrls and Water drai	Debris and organic material removed L/Water drainage: Natural Swale Pad //Other
	Fastening multi wide units
••	Type Fastener: 1435 Length: 5 Spacing: 16
Roof:	Type Fastener: 164 Seatth: 6 Spacing: 167 Seatth Spacing: 167 Seatth Spacing: 168 Seatth Spacing: 168 Spacing: 168 Seatth Spacing: 168 Seatth Spacing: 169 Seatth Spac

a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket homes and that condensation, mold, meldew and buckled marriage walls are understand a properly installed gasket is a requirement of all new and used

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

Gasket (weatherproofing requirement)

Installer's initials

Type gasket From Pg. Feb 22

Between Walls Yes Between Floors

Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Fiding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes

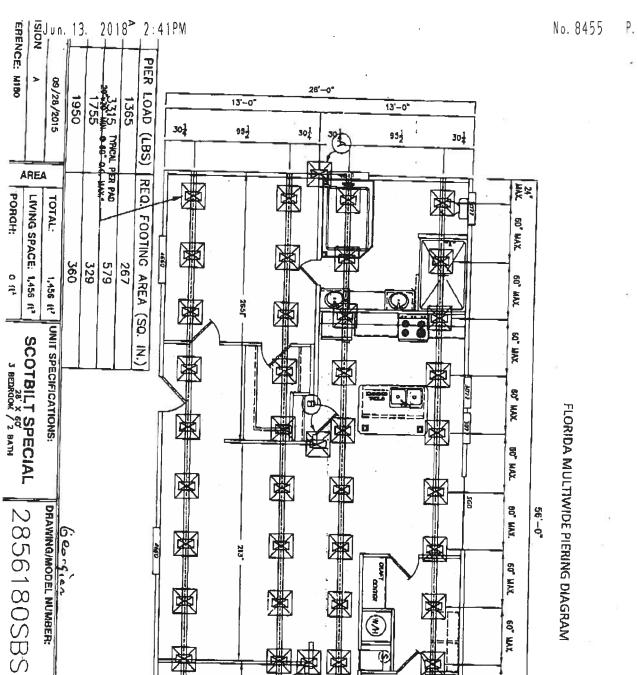
Miscellaneous

Range downflow vent installed outside of skirting. Dryer vent installed outside of skirting. Yes Skirting to be installed. Other: Electrical crossovers protected. Drain lines supported at 4 foot intervals. Yes S X X

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

Date 6. 11-18

Installer Signature



\\$

SCOTBIT

FLORIDA MULTIWIDE PIERING DIAGRAM

EO" HAX

WAT 09

20 MAX

MAK 'DB

BO" HAX

£2.

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HITCH-END

OLIVER TECHNOLOGIES, INC. FLORIDA INSTALLATION INSTRUCTIONS FOR THE MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM MODEL 1101"V" (STEPS 1-15)

LONGITUDINAL ONLY: FOLLOW STEPS 1-9 FOR ADDING LATERAL ARM: Follow Steps 10-15 FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

PIER HEIGHT

ENGINEERS STAMP

- 1. SPECIAL CIRCUMSTANCES: If the following conditions occur STOP! Contact Oliver Technologies at 1-800-284-7437:
 - b) Length of home exceeds 76' c) Roof eaves exceed 16" d) Sidewall height exceed 96" a) Pier height exceeds 48"
 - e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

- 2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C).
- 3. Place ground pan (C) directly below chassis I-beam . Press or drive pan firmly into soil until flush with or below soil. SPECIAL NOTE: The longitudinal "V" brace system serves as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4". VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.) :

1.50" ADJUSTABLE

4. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

(Approx. 45 degrees Max.)		Tube Length	Tube Length
	7 3/4" to 25"	22"	18"
	24 3/4" to 32 1/4"	32"	18"
	33" to 41"	44"	18"
	40" to 48"	54"	18"

1.25" ADJUSTABLE

- 5. Install (2) of the 1.50" square tubes (E {18" tube}) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
- 6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
- 7. Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut.
- 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
- 9. After all bolts are tightened, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES. NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

- 10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
- 11. NOTE: Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
- 12. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
- 13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
- 14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
- 15. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1/4" 14 x 3/4" self-tapping screws in pre-drilled holes.



INSTALLATION USING CONCRETE RUNNER / FOOTER

- 16. A concrete runner, footer or slab may be used in place of the steel ground pan.
 - a) The concrete shall be minimum 2500 psi mix
 - b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - c) Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
 - d) If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

17. When using Part # 1101-W-CPCA (wetset), simply install the bracket in runner/footer OR When installing in cured concrete use Part # 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

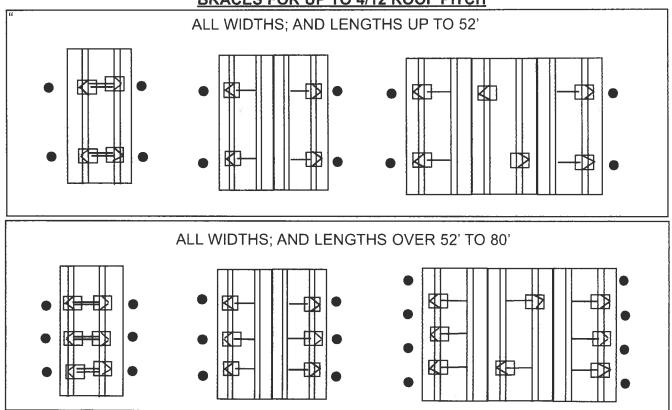
LATERAL: (Model 1101 TC "V")

- 18. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
- 19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

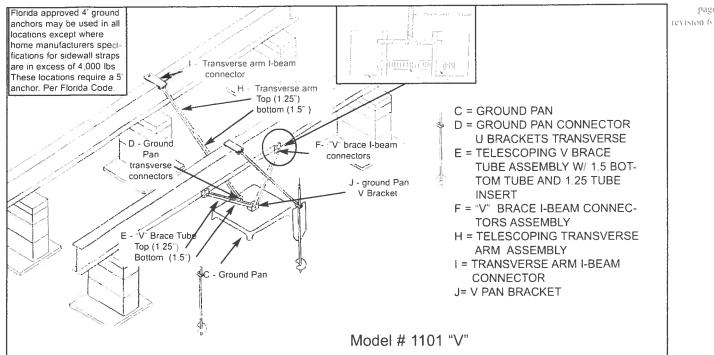
Notes:

- 1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- 2. = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- 3. E LOCATION OF LONGITUDINAL BRACING ONLY
- 4. The Transverse & Longitudinal Locations

REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



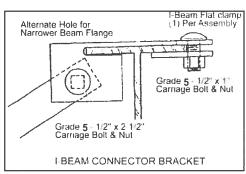
HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS 6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'. One stabilizer plate and frame tie required at each lateral bracing system.

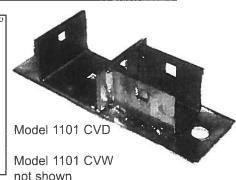


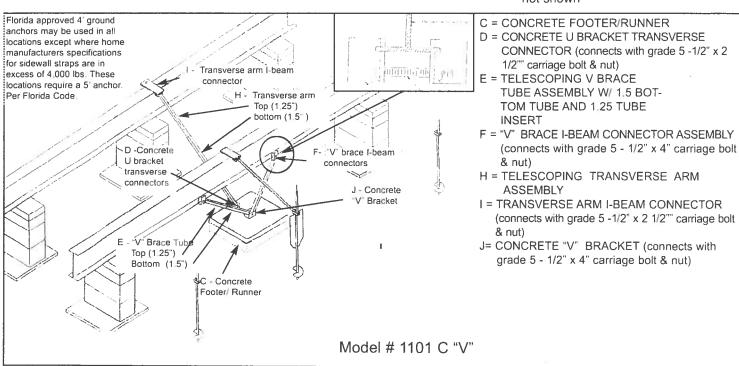
Longitude dry concrete bracket part # 1101 D-CPCA

Wet bracket part # 1101 W-CPCA not shown







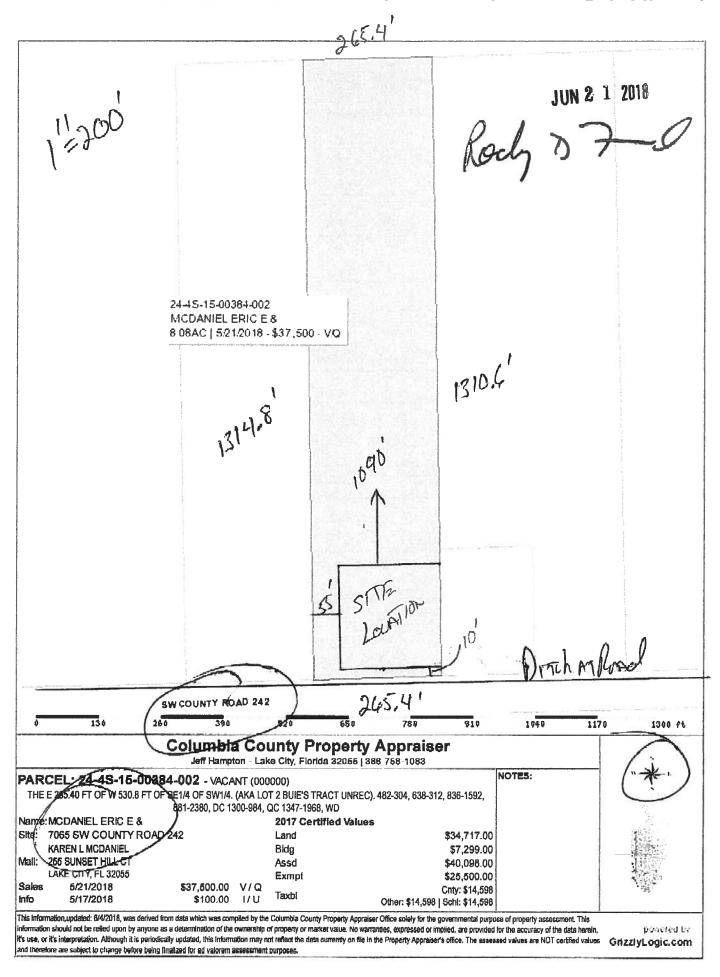


STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number_____

M'Davel	PART II - SITEPLAN	2tÓ
Scale: 1 inch = 40 feet.	10 0 246 20 W/W 200 200 200 200 200 200 200 200 200 20	130)
Notes:	CRES SAR Atached	
Site Plan submitted by: Plan Approved By	Not Approved	MASTER CONTRACTOR Date County Health Department



Columbia County Property Appraiser

updated: 6/4/2018

Parcel: 24-4S-15-00384-002

Owner & Property Info

20	1	7	Tax	Y	ear

Search Result: 1 of 1

Owner's Name	MCDANIEL ERIC E &				
Mailing Address	KAREN L MCDANIEL 255 SUNSET HILL CT LAKE CITY, FL 32055				
Site Address	Desc. (code) VACANT (000000) District 3 (County) Neighborhood 24415 d Area 8.080 ACRES Market Area 02				
Use Desc. (code)					
Tax District					
Land Area					
Description					

THE E 265.40 FT OF W 530.8 FT OF SE1/4 OF SW1/4. (AKA LOT 2 BUIE'S TRACT UNREC). 482-304, 638-312, 836-1592, 881-2380, DC 1300-984, QC 1347-1968, WD 1360-1780,1781,1782,1783,

Property & Assessment Values

2017 Certified Values		
Mkt Land Value	cnt: (0)	\$34,717.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$7,299.00
XFOB Value	cnt: (2)	\$300.00
Total Appraised Value		\$42,316.00
Just Value		\$42,316.00
Class Value		\$0.00
Assessed Value		\$40,098.00
Exempt Value	(code: HX H3 WX)	\$25,500.00
Total Taxable Value	0	Cnty: \$14,598
	Otner: \$14,598	Schl: \$14,598

2018 Working Values		(Hide Values)
Mkt Land Value	cnt: (0)	\$37,988.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value	Ì	\$37,988.00
Just Value		\$37,988.00
Class Value		\$0.00
Assessed Value		\$37,988.00
Exempt Value		\$0.00
Total Taxable Value		Cnty: \$37,988
Total Tanasis Tanas	Other: \$37	7,988 Schl: \$37,988

NOTE: 2018 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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:

6/26/2018 2:30:23 PM

Address:

7065 SW COUNTY ROAD 242

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

00384-002

REMARKS: Address Verification.

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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	IBER POG-74 CONTRACTOR R	obert Stems 1	PHONE 386-623-2223			
	THIS FORM MUST BE SUBMITTED PRIOR TO	THE ISSUANCE OF A PERMIT				
records of the ordinance 89-6	In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</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 Matthews Electric License #: EC 13005459	Signature 7/12 Phone #: 386-34	14-2029			
	Qualifier Form Attached					

Print Name Signature Signature

Phone #: _____

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.

Qualifier Form Attached

License #: _____

MECHANICAL/

A/C __

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER	1806-74	CONTRACTOR _	Robert Sheppar	⁻ d	PHONE 386-623-2203
		THIS FORM MUS	ST BE SUBMITTED PRIO	R TO THE ISSUANCE OF A		
					McDani	el
records of the Ordinance 89- exemption, ge	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			Signature		
	_		Qualifier Form Attacl			
MECHANICAL/	Print Name	Tomothy Shat	tto	Signature	E	
A/C	License #:	CAC057875		Phone #:386	6-496-822	4
			Qualifier Form Attacl	ned X		
Qualifier Forms cannot be submitted for any Specialty License.						
Specialty L	icense	License Number	Sub-Contracto	ors Printed Name	Sub-	Contractors Signature
MASON					10.0	
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



I. ___Timothy Shatto

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

I, Ilmothy Shatto	(license holder name), licensed qualifier			
for Shatto Heat & Air	(company name), do certify that			
the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.				
Printed Name of Person Authorized	Signature of Authorized Person			
1. Bo Royals	1. 80/1			
2. Dale Burd	2.			
3.	3.			
4.	4.			
5.	5.			
It at any time the person(s) you have authorized is/are no longer agents. employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number. CAC 057875 Licensed Quelifiers Signature (Notarized) COUNTY OF: COUNTY OF: County Licensing Boards have the power and all work done under my license day of rebruscy. And all work done under my license number of adapting and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits. CAC 057875 License Number CAC 057875 Date NOTARY INFORMATION: STATE OF: License holder, whose name is limited and your produced identification type of LD.) on this day of rebruscy, 20 18				
Victoria / Palmer				
NOTARY'S SIGNATURE	(Seal/Stamp)			

VICTORIA K. PALMER Notary Public - State of Florida Commission # FF 207489 My Comm. Expires Mar 9, 2019 Bondod through National Net by Alice



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

PERMIT NO.	8-	0508
DATE PAID:	م	177118
FEE PAID:	317	5.00
RECEIPT #:	135	CEOST

APPLICATION FOR: [] New System [] [] Repair []	Existing System Abandonment	[] Holding	Tank [] Innovative)
APPLICANT: Eric McDaniel				
AGENT: ROCKY FORD, A & B C	ONSTRUCTION		TELEPHONE: 386-497-23	311
MATLING ADDRESS: 546 SW Do	ortoh Street, FT. WH	ITE, FL, 32038		-
TO BE COMPLETED BY APPLICABLE APPLICABLE OF THE PURSUAPPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUIRED	NT OR APPLICANT'S A VANT TO 489.105(3)(m TO PROVIDE DOCUMEN ESTING CONSIDERATIO	UTHORIZED AGENT.) OR 489.552, FL TATION OF THE DA N OF STATUTORY G	SYSTEMS MUST BE CONSTRUCTION STATUTES. IT IS TO THE LOT WAS CREATED OF RANDFATHER PROVISIONS	he R
PROPERTY INFORMATION		<u> </u>	8 0 2 2 3 8 10 2 8 10 3 10 10 10 10 10 10 10 10 10 10 10 10 10	
LOT: 2 BLOCK: na	SUB: Buie"s Trac	t Unrec	PLATTED:	
PROPERTY ID #: 24-48-15-0	0384-002	ZONING:	T/M OR EQUIVALENT: [Y /	N
PROPERTY SIZE: 8.08 ACRE	s water supply: ()	PRIVATE PUBL	CC []<=2000GPD []>200	OOGPD
IS SEWER AVAILABLE AS PER	381.0065, FS7 [Y /	N	DISTANCE TO SEWER:	— _{ГТ}
PROPERTY ADDRESS: 7065 SW	· ·	_		
DIRECTIONS TO PROPERTY: SR	247 South, TR CR	242, 2.6 miles	to address on right	
BUILDING INFORMATION	(X) RESIDENTIA	L [] CON	MERCIAL	
Unit Type of No Establishment	No. of Build Bedrooms Area	ing Commercial, Sqft Table 1, Ct	Institutional System Des	ign
1				
SF Residential	31490			¥
3				
[] Floor/Equipment Drain	ns (N Other (Sp	ecify)	-	
SIGNATURE: Rock D	7-0		DATE: 6/21/2018	_
DH 4015, 08/09 (Obsoletes p	revious editions wh	പ്രീസ് ക്യാന വര്യ	and)	

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number_ Mc Churel ---- PART II - SITEPLAN -----Scale: 1 inch = 40 feet. 3 'VC #5M 210 40 382 14905Q LIC 1266 130 Notes: Site Plan submitted by MASTER CONTRACTOR

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Not Approved ES/

County Health Department