

APPLICANTGWEN WALKERPHONE386 362-4948

ADDRESS10314US HIHAY 90 ELIVE OAKFL32060

OWNERRONALD KEAST/MONICA JACKSONPHONE605 645-8940

ADDRESS849SW DAISY RDLAKE CITYFL32024

CONTRACTORJERRY CORBETTPHONE386 362-4948

LOCATION OF PROPERTY90W, TL 247S, TL CR 240, TR ICHETUCKNEE AVE, TR FORD,
TR DAISY, 3RD LOT ON RIGHT

TYPE DEVELOPMENTMH,UTILITYESTIMATED COST OF CONSTRUCTION0.00

HEATED FLOOR AREATOTAL AREAHEIGHTSTORIES

FOUNDATIONWALLSROOF PITCHFLOOR

LAND USE & ZONINGA-3MAX. HEIGHT

Minimum Set Back Requirments:STREET-FRONT30.00REAR25.00SIDE25.00

NO. EX.D.U.0FLOOD ZONEXDEVELOPMENT PERMIT NO.

PARCEL ID24-5S-15-00473-000SUBDIVISION

LOTBLOCKPHASEUNITTOTAL ACRES7.00

IH0000790

Culvert Permit No.Culvert WaiverContractor's License NumberApplicant/Owner/Contractor

EXISTING09-515BKWRN

Driveway ConnectionSeptic Tank NumberLU & Zoning checked byApproved for IssuanceNew Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

REPLACING EXISTING MH

Check # or Cash3122

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Powerdate/app. byFoundationdate/app. byMonolithicdate/app. by

Under slab rough-in plumbingdate/app. bySlabdate/app. bySheathing/Nailingdate/app. by

Framingdate/app. byInsulationdate/app. by

Rough-in plumbing above slab and below wood floordate/app. byElectrical rough-indate/app. by

Heat & Air Ductdate/app. byPeri. beam (Lintel)date/app. byPooldate/app. by

Permanent powerdate/app. byC.O. Finaldate/app. byCulvertdate/app. by

Pump poledate/app. byUtility Poledate/app. byM/H tie downs, blocking, electricity and plumbingdate/app. by

Reconnectiondate/app. byRVdate/app. byRe-roofdate/app. by

BUILDING PERMIT FEE \$0.00CERTIFICATION FEE \$0.00SURCHARGE FEE \$0.00

MISC. FEES \$300.00ZONING CERT. FEE \$50.00FIRE FEE \$0.00WASTE FEE \$

FLOOD DEVELOPMENT FEE \$FLOOD ZONE FEE \$25.00CULVERT FEE \$TOTAL FEE375.00

INSPECTORS OFFICEZ. JodaCLERKS OFFICECN

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.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 1-10-08)

Zoning Official

Building Official

AP#

0910-43

Date Received

10/16/09

By

Permit #

28155

Flood Zone

X

Development Permit

N/A

Zoning

A-3

Land Use Plan Map Category

A-3

Comments

Replacing Existing mlt

FEMA Map#

N/A

Elevation

N/A

Finished Floor

1st Floor River

N/A

In Floodway

N/A

Site Plan with Setbacks Shown

EH#

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

F W Comp. letter

IMPACT FEES: EMS

Fire

Corr

Road/Code

School

= TOTAL

N/A replacing existing mlt

Pre-Inspection
911 sheet

Property ID #

24-53-15-00473-000 Subdivision

New Mobile Home

Used Mobile Home

X

MH Size

28x56 Year

01

Applicant

GWEN WALKER - JCMH

Phone #

386-362-4948

Address

1304 US Hwy 90 E, Live Oak, FL 32060

Name of Property Owner

Ronald & Sandy Keist

Phone#

352-258-1662

911 Address

305 SW Daisy Cook, Ft. White, FL 32038

Circle the correct power company -

FL Power & Light

Clay Electric

(Circle One) -

Suwannee Valley Electric

Progress Energy

Name of Owner of Mobile Home

Monica Jackson

Phone #

405-645-8940

Address

849 SW Daisy Rd, Lake City, FL 32024

Relationship to Property Owner

Buying Land - Owner Finance

Current Number of Dwellings on Property

1 (old mlt moving off property)

Lot Size

0 Acres (17 Acres) 1 Acre

Total Acreage

7

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

Yes

(Pd)

Driving Directions to the Property

90W, TL 2475, TL CR 240, TR

Ichetucknee Ave, TR FORD, TR DAISY, 3rd lot on right

Name of Licensed Dealer/Installer

Jerry Corbett

Phone #

386-362-4948

Installers Address

10314 US Hwy 90 E, Live Oak, FL 32060

License Number

TH-0000790

Installation Decal #

303832

Spoke to
10/20/09

PERMIT WORKSHEET

page 1 of 2

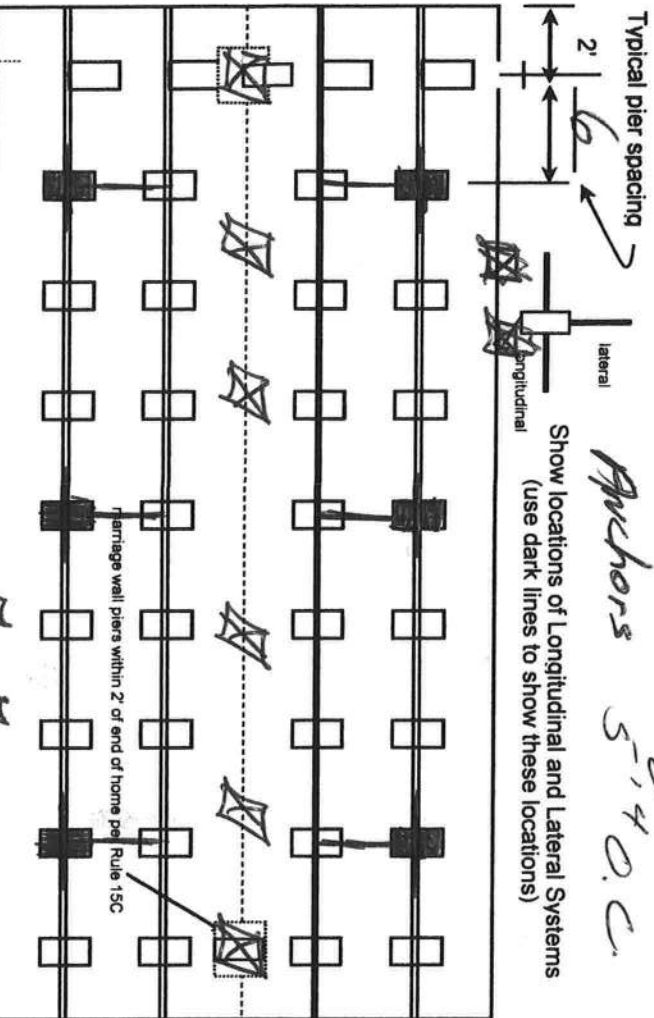
Installer Terry Corbett License # IH-0000796
 Manufacturer Homes of Meait Length x Width 56x28
 Name of Owner of this Mobile Home Monica Jackson
 Phone 605-645-8940
 Address 849 SW Daisy Rd Lake City, OK 73001

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

5-14-06



New Home ☐ Used Home ☒ Year 2001
 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 # 303832
 Triple/Quad ☐ Serial # 24166

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (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 17 1/2 x 25 3/4 x 1
 Perimeter pier pad size 6 x 16 x 1

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 14 ft Pier pad size 17 1/2 x 25 3/4 x 1
14 ft

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

FRAME TIES

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)
 Manufacturer
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer

Sidewall
 Longitudinal
 Marriage wall
 Shearwall

Number

25

POCKET PENETROMETER TEST

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

X 1500 X 1100 X 1700

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 1100 X 1700

TORQUE PROBE TEST

The results of the torque probe test is _____ inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 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

Joseph Corbett
9/2/09

Electrical

Plumbing

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

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: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: _____ Length: _____ Spacing: _____
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
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: _____

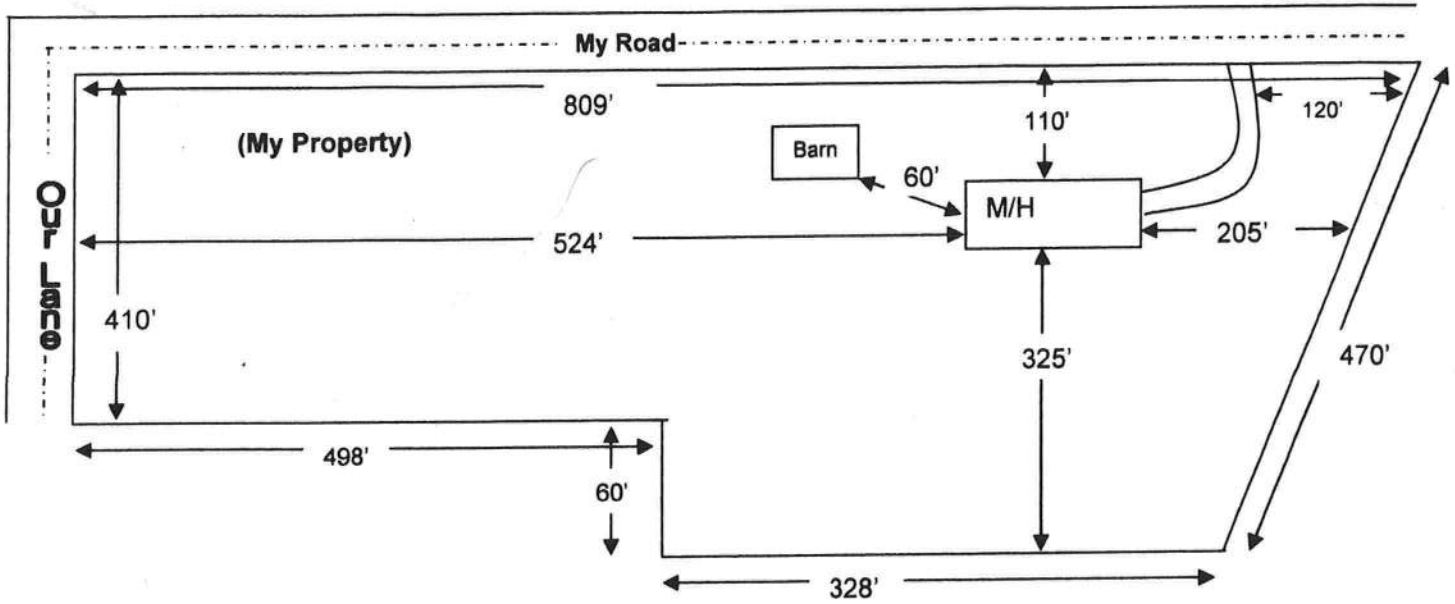
Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

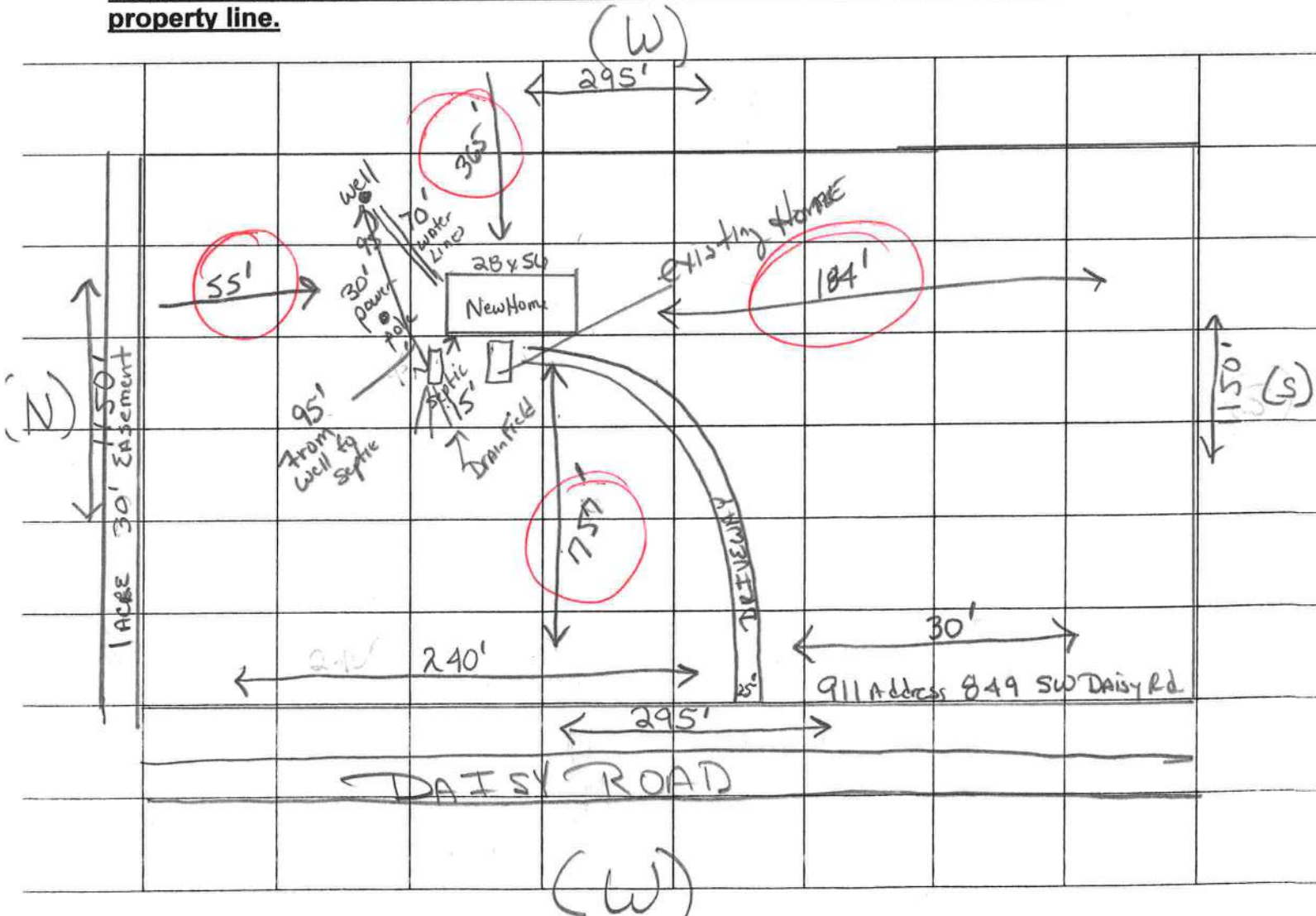
Date

Joseph Corbett
9/2/09

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.



CONSENT

This is to certify that I, (We) Ronald C. Keast as
owner(s) of the below described property:

Sec. 24 Twp. 5S Rge. 15 Tax Parcel No. 00473-000
Lot: _____ Block: _____ Subdivision: _____

give permission for Monica Jackson to place a
mobile home on my property in Swain County.
(Mobile Home/Travel Trailer/SFD) Columbia

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

Dated this 10th day of October, 2009.

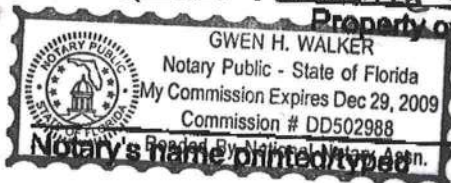
[Signature]
Witness

X Ronald C Keast
Owner

[Signature]
Witness

X Sandy Keast
Owner

Sworn to and subscribed before me this 10th day of October
2009 by Ronald C & Sandy Keast
Property owner(s) name(s)



[Signature]
Notary Public, State of Florida
Commission No. _____
Personally known _____
Produced ID (type) X012

" go to appraisers office "

Joe & Carol Elwell
to
Ronald C Keast

Book 1175 pg 850

This Instrument Prepared by & return to:

Name: **TRISH LANG, an employee of
NORTH CENTRAL FLORIDA TITLE,
LLC**
Address: **343 NW COLE TERRACE, SUITE 101
LAKE CITY, FLORIDA 32055**
File No. 09Y-06019TL

Parcel I.D. #: 00473-000

SPACE ABOVE THIS LINE FOR PROCESSING DATA

Inst:200912010001 Date:6/16/2009 Time:2:29 PM
Doc Stamp-Deed:175.00

24 DC,P.DeWitt Cason,Columbia County Page 1 of 2 B:1175 P:850

THIS WARRANTY DEED Made the 15th day of June, A.D. 2009, by **JOSEPH H. ELWELL** and **CAROL S. ELWELL, HIS WIFE**, hereinafter called the grantors, to **RONALD CHARLES KEAST**, whose post office address is **305 SW DON COOK WAY, FT. WHITE, FL 32038**, hereinafter called the grantee:

(Wherever used herein the terms "grantors" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in **Columbia County, State of Florida**, viz:

SECTION 24, TOWNSHIP 5 SOUTH, RANGE 15 EAST:

THE SOUTH 4 ACRES OF THE NW ¼ OF SW ¼ AND THE NORTH 5 ACRES OF THE SW ¼ OF SW ¼ OF SECTION 24, TOWNSHIP 5 SOUTH, RANGE 15 EAST, COLUMBIA COUNTY, FLORIDA.
LESS AND EXCEPT: A PART OF THE NW ¼ OF SW ¼ AND A PART OF THE SW ¼ OF SW ¼ OF SAID SECTION 24, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: BEGIN AT THE NORTHEAST CORNER OF THE SW ¼ OF SW ¼ AND RUN THENCE S 0°05'06" W, ALONG THE EAST LINE OF SAID SW ¼ OF SW ¼ A DISTANCE OF 163.97 FEET; THENCE RUN S 89°58'14" W, A DISTANCE OF 147.59 FEET; THENCE RUN N 0°05'06" E AND PARALLEL TO SAID EAST LINE, A DISTANCE OF 163.97 FEET; THENCE CONTINUE N 0°05'06" E AND PARALLEL TO THE EAST LINE OF THE NW ¼ OF THE SW ¼, A DISTANCE OF 131.18 FEET; THENCE RUN N 89°58'14" E AND PARALLEL TO THE SOUTH LINE OF SAID NW ¼ OF SW ¼, A DISTANCE OF 147.59 FEET TO A POINT ON THE EAST LINE OF SAID NW ¼ OF SW ¼; THENCE RUN S 0°05'06" W, ALONG SAID EAST LINE A DISTANCE OF 131.18 FEET TO THE SOUTHEAST CORNER OF SAID NW ¼ OF SW ¼ AND THE POINT OF BEGINNING.


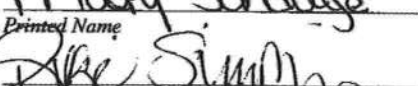
Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.



To Have and to Hold the same in fee simple forever.

And the grantors hereby covenant with said grantee that they are lawfully seized of said land in fee simple; that they have good right and lawful authority to sell and convey said land, and hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2008

In Witness Whereof, the said grantors have signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:


Witness Signature
Printed Name **Mary Sandage**

Witness Signature
Printed Name **Regine Simkins**


JOSEPH H. ELWELL L.S.
Address:
289 NW CASEY GLN, LAKE CITY, FL 32025

CAROL S. ELWELL L.S.
Address:
289 NW CASEY GLN, LAKE CITY, FL 32025

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 15th day of June, 2009, by JOSEPH H. ELWELL and CAROL S. ELWELL, who are known to me or who have produced Driver's License as identification.



Notary Public
My commission expires

Columbia County Property Appraiser

DB Last Updated: 10/9/2009

Parcel: 24-5S-15-00473-000

2009 Preliminary Values[Tax Record](#)[Property Card](#)[Interactive GIS Map](#)[Print](#)**Owner & Property Info**

Search Result: 1 of 1

Owner's Name	ELWELL JOSEPH H & CAROL S		
Site Address	DAISY		
Mailing Address	289 NW CASEY GLEN LAKE CITY, FL 32055		
Use Desc. (code)	MOBILE HOM (000200)		
Neighborhood	024515.00	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	8.000 ACRES		
Description	THE S 4 AC OF NW1/4 OF SW1/4 & THE S 4 AC OF NW1/4 OF SW1/4 & THE N 5 AC OF SW1/4 OF SW1/4. THE N 5 AC OF SW1/4 OF SW1/4. ORB 749-1245 & EX 1 AC DESC IN ORB 749-1245 & EX 1 AC DESC IN ORB 778-112. ORB 778-109, ORB 778-112. ORB 778-109, 809-920, 816-802, CT 1172-1678 809-920, 816-802, CT 1172-1678 WD 1175-850, AMEND CT 1176-643		

GIS Aerial**Property & Assessment Values**

Mkt Land Value	cnt: (2)	\$48,170.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$3,552.00
XFOB Value	cnt: (1)	\$500.00
Total Appraised Value		\$52,222.00

Just Value	\$52,222.00
Class Value	\$0.00
Assessed Value	\$52,222.00
Exemptions	\$0.00
Total Taxable Value	County: \$52,222.00 City: \$52,222.00 Other: \$52,222.00 School: \$52,222.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
6/15/2009	1175/850	WD	I	Q	01	\$25,000.00
4/22/2009	1172/1678	CT	I	U	18	\$1,000.00
4/22/2009	1176/643	CT	I	U	18	\$0.00
1/12/1996	816/802	WD	I	U	11	\$19,000.00
8/4/1995	809/920	CT	I	U	11	\$0.00
8/3/1993	778/109	WD	V	U	35	\$15,000.00
8/15/1991	749/1245	WD	V	U	11	\$4,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1970	Alum Siding (26)	840	840	\$3,552.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0285	SALVAGE	2005	\$500.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

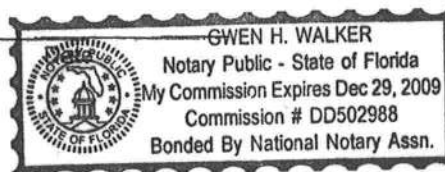
I, Jerrey Corbett, license number IH 0000790
Please Print
do hereby state that the installation of the manufactured home for Monica
Jackson-Dunham at 510 SW. 1st St. High Springs, FL.
Applicant
911 Address 32643
will be done under my supervision.

Jerrey Corbett
Signature

Sworn to and subscribed before me this 8th day of September,
2009.

Notary Public: Gwen H. Walker
Signature

My Commission Expires: _____



AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

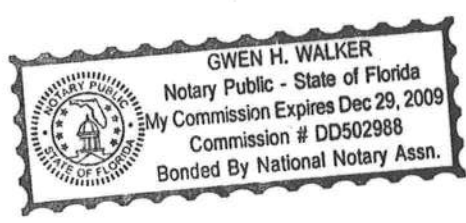
Customer's Name: Monica Jackson Dunham
Property ID: Sec: _____ Twp: _____ Rge: _____ Tax Parcel No: _____
Lot: _____ Block: _____ Subdivision: _____
Mobile Home Year/Make: 2001- Homes of Merit Size: 29 x 60

[Signature]
Signature of Mobile Home Installer

Sworn to and subscribed before me this 8th day of September, 2009
by _____

Notary's name printed/typed _____

[Signature]
Notary Public, State of Florida
Commission No. _____
Personally Known: X
Produced ID (type) _____





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, Terry Corbett, give this authority for the job address show below
Installer License Holder Name

only, 849 SW Daisy Rd Lake City, FL 32028, 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)
GWEN WALKER		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

License Holders Signature (Notarized)

IH-0000790
License Number

9/8/09
Date

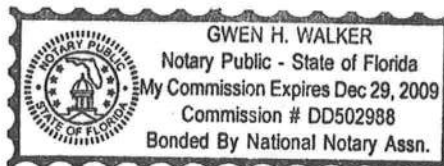
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Terry Corbett, personally appeared before me and is known by me or has produced identification (type of I.D.) known personally on this 8 day of Sept, 2009.

NOTARY'S SIGNATURE

(Seal/Stamp)



10/11/2009 14:43 13853641979

JERRY CORBETTS M H S

PAGE 03

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

*No APP.
Submitted*

COUNTY THE MOBILE HOME IS BEING MOVED FROM SLANDERS
OWNERS NAME Monica Jackson-Dubois PHONE 405-645-8940 CELL
INSTALLER Jerry Corbett PHONE 362-362-4940 CELL 362-590-4470
INSTALLERS ADDRESS 10314 US Hwy 90 E. Live Oak FL 32060

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2001 SIZE 28 x 60
COLOR light green SERIAL NO. FLHMLCF163724166 P/B
WIND ZONE II SMOKE DETECTOR yes

INTERIOR:
FLOORS good

DOORS good

WALLS good

CABINETS good

ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:
WALLS / SIDING good

WINDOWS good

DOORS good

INSTALLER:
APPROVED _____ NOT APPROVED _____

NOTES: _____

INSTALLER OR INSPECTOR'S PRINTED NAME Jerry Corbett

Installer/Inspector Signature Jerry Corbett License No. 2H-000026 Date _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-719-2838 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature John R. Paul Date 10-8-09

**CO DE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED 10/16/09 BY G IS THE MH IN THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Monica Jackson PHONE 605 645-8940 CELL _____

ADDRESS 849 SW Daisy Rd, Lake City, FL

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 90W, TL 2475, TL ON CR 240,
TR Ichetucknee Ave, TR Ford, TR Daisy, 3rd lot
on right

MOBILE HOME INSTALLER Jerry Collett PHONE 362-4948 CELL _____

MOBILE HOME INFORMATION

MAKE Homes of Merit YEAR 2011 SIZE 28 x 56 COLOR light Green

SERIAL No. FL HmL CF637240; A+B

WIND ZONE II Must be wind zone I or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

- ☒ SMOKE DETECTOR () OPERATIONAL () MISSING
- ☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
- ☒ DOORS () OPERABLE () DAMAGED
- ☒ WALLS () SOLID () STRUCTURALLY UNSOUND
- ☒ WINDOWS () OPERABLE () INOPERABLE
- ☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
- ☒ CEILING () SOLID () HOLES () LEAKS APPARENT
- ☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

- ☒ WALLS/SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
- ☒ WINDOWS () CRACKED/BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
- ☒ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE Atty A. Powell ID NUMBER 402 DATE 10-19-09



STATE OF FLORIDA
DEPARTMENT OF HEALTH

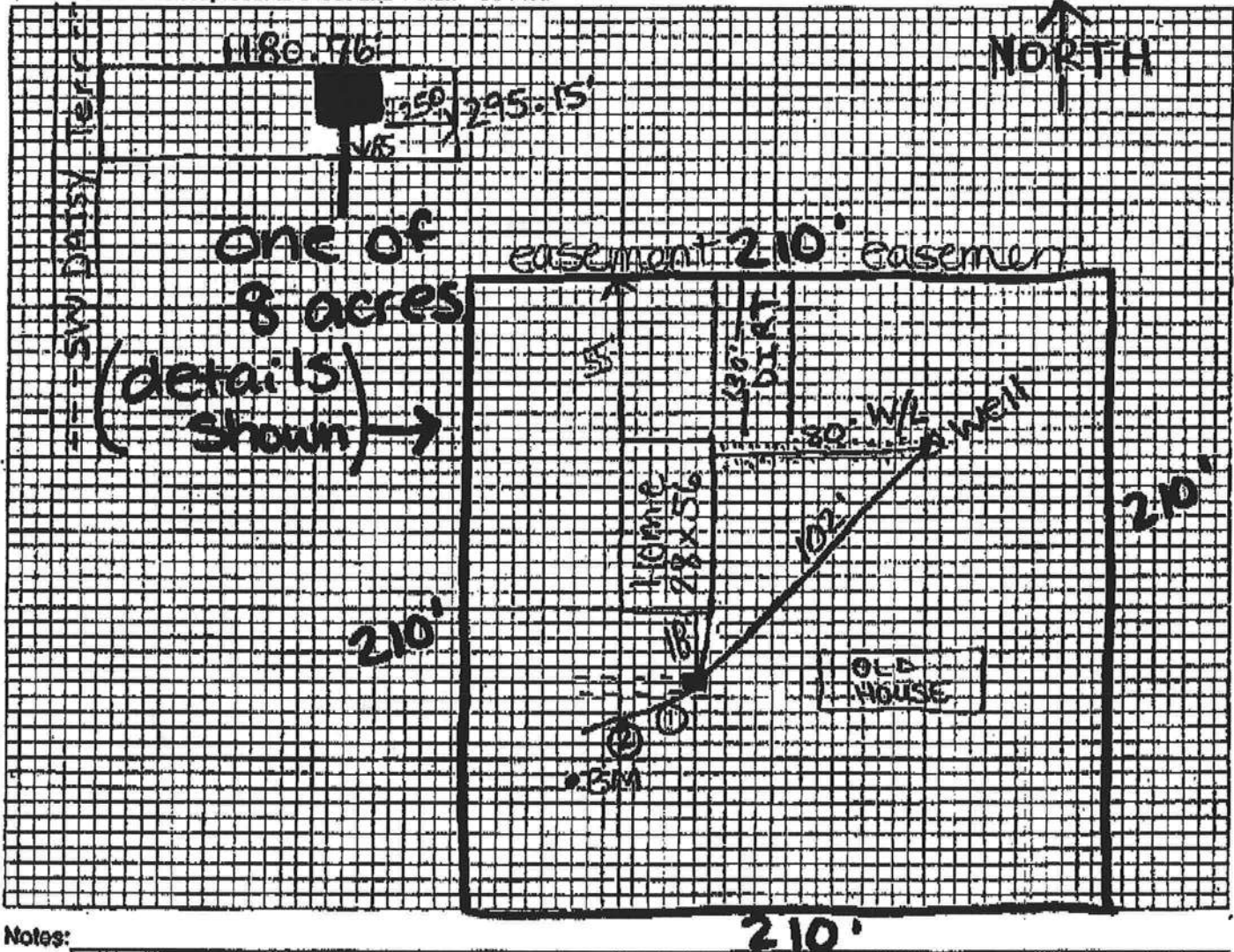
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

09-0515.M

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes:

septic to nearest property line = 130 feet

Site Plan submitted by: Eric Ford

Signature

Eric Ford

Plan Approved ☒

Not Approved ☐

Date

10/20/09

By Salhi Ford, EH Director, Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 28155 CONTRACTOR _____ PHONE _____

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>Kevin Dunham</u> License #:	Signature <u>[Signature]</u> Phone #: <u>605 645 6926</u>
MECHANICAL/ A/C	Print Name _____ License #:	Signature _____ Phone #:
PLUMBING/ GAS	Print Name <u>Kevin Dunham</u> License #:	Signature <u>[Signature]</u> Phone #: <u>605 645 6926</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-Contractors Printed Name	Sub-Contractors 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.

COLUMBIA COUNTY
FLORIDA

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 24-5S-15-00473-000

Building permit No. 000028155

Permit Holder JERRY CORBETT

Owner of Building RONALD KEAST/MONICA JACKSON

Location: 849 SW DAISY RD., LAKE CITY, FL

Date: 11/13/2009



[Signature]

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)