

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

48901

For Office Use Only

(Revised 7-1-15)

Zoning Official \_\_\_\_\_

Building Official \_\_\_\_\_

AP# \_\_\_\_\_

Date Received \_\_\_\_\_

By \_\_\_\_\_

Permit # \_\_\_\_\_

Flood Zone \_\_\_\_\_

Development Permit \_\_\_\_\_

Zoning \_\_\_\_\_

Land Use Plan Map Category \_\_\_\_\_

Comments \_\_\_\_\_

FEMA Map# \_\_\_\_\_

Elevation \_\_\_\_\_

Finished Floor \_\_\_\_\_

River \_\_\_\_\_

In Floodway \_\_\_\_\_

- ☐ Recorded Deed or ☒ Property Appraiser PO ☐ Site Plan ☐ EH # \_\_\_\_\_ ☐ 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 Paid on Property ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 24-5S-16-03707-003

Subdivision \_\_\_\_\_

Great South Timber Unrec

Tract  
Lot# 3

- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 32 x 68 Year 2020
- Applicant Dale Burd Phone # 386-365-7674
- Address 20619 County Road 137, Lake City, FL, 32024
- Name of Property Owner Sidney Williamson Phone# 813-860-3073
- 911 Address 687 SW SHEPPARD WAY LAKE CITY, FL, 32024
- Circle the correct power company - FL Power & Light - ( Clay Electric )  
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Teresa Alderman Phone # 813-860-3073  
Address 19225 Leland Ave, Springhill, FL, 34610
- Relationship to Property Owner Sister
- Current Number of Dwellings on Property 1
- Lot Size 371 x 1286 Total Acreage 11
- 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
- Driving Directions to the Property 441 South, TR Tustenuggee Ave, Approx 7 Miles TR on Nautilus, TL on Sheppard, 6/10ths mile on left
- 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 # 65499

Parcel: **24-5S-16-03707-003****Owner & Property Info**

Result: 1 of 1

Owner	WILLIAMSON SIDNEY 699 SW SHEPPARD LAKE CITY, FL 32024		
Site	699 SHEPPARD WAY, LAKE CITY		
Description*	COMM SE COR OF SEC, RUN W 1305.14 FT TO E R/W SHEPHERD RD, N ALONG R/W 736.80 FT FOR POB, CONT N 371.35 FT, E 1286.03 FT, S 371.20 FT, W 1295.68 FT TO E R/W SHEPHERD RD & POB. (AKA TRACT 3 GREAT SOUTH TOMBER S/D UNREC) 1/2 872-831, DC 1404-718,		
Area	11 AC	S/T/R	24-5S-16
Use Code**	IMPROVED A (005000)	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**

2019 Certified Values		2020 Working Values	
Mkt Land (3)	\$10,105	Mkt Land (3)	\$10,105
Ag Land (1)	\$3,850	Ag Land (1)	\$3,850
Building (2)	\$4,886	Building (1)	\$3,092
XFOB (2)	\$400	XFOB (2)	\$400
Just	\$51,447	Just	\$49,653
Class	\$19,241	Class	\$17,447
Appraised	\$19,241	Appraised	\$17,447
SOH Cap [?]	\$3,154	SOH Cap [?]	\$0
Assessed	\$16,087	Assessed	\$17,447
Exempt	OTHER H3 \$16,087	Exempt	HX H3 \$14,197
Total Taxable	county:\$0 city:\$0 other:\$0 school:\$0	Total Taxable	county:\$3,250 city:\$3,250 other:\$3,250 school:\$3,250

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Robert Sheppard PHONE 386-623-2203

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Teresa Alderman

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>Glenn Whittington</u>	Signature 
	License #: <u>EC 13002957</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Ronald Bonds Sr.</u>	Signature 
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

*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





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, Ronald E Bond Sr (license holder name), licensed qualifier for Style Crest Enterprises, Inc (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. Dale Bird	1.
2. Rocky Ford	2.
3. Kelly Bishop	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If 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 to obtain permits.

Licensed Qualifiers Signature (Notarized)

License Number

Date

## NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Bay

The above license holder, whose name is Ronald Edward Bonds Sr personally appeared before me and is known by me or has produced identification (type of I.D.) \_\_\_\_\_ on this 16<sup>th</sup> day of FEB, 20 16.

NOTARY'S SIGNATURE

(Seal/Stamp)





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, Glen Whittington (license holder name), licensed qualifier  
for Whittington Electric Inc (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. <u>Walter Ford</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done  
under my license and fully responsible for compliance with all Florida Statutes, Codes, and  
Local Ordinances. I understand that the State and County Licensing Boards have the power and  
authority to discipline a license holder for violations committed by him/her, his/her agents,  
officers, or employees and that I have full responsibility for compliance with all statutes, codes  
and ordinances inherent in the privilege granted by issuance of such permits.

If 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 to obtain permits.

[Signature] License Qualifiers Signature (Notarized) FL13002957 License Number 3/7/16 Date

#### NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.): FL DL on this 7 day of MARCH, 20 16.

[Signature]  
NOTARY'S SIGNATURE





Mobile Home Permit Worksheet

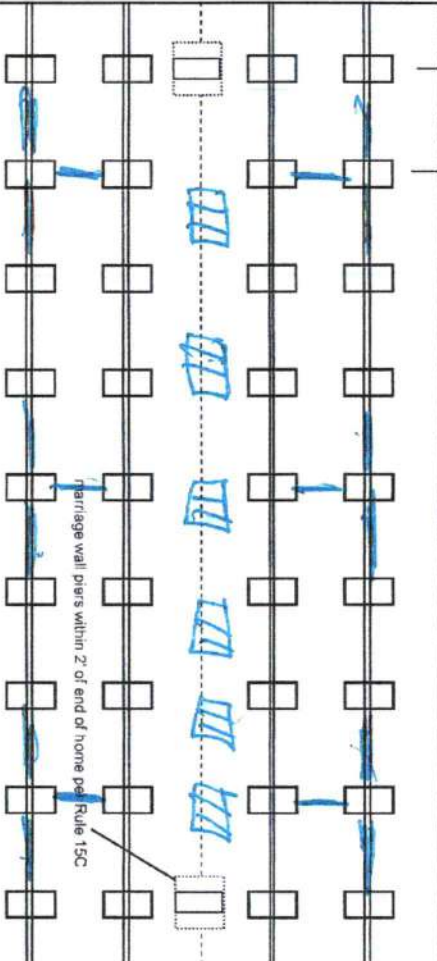
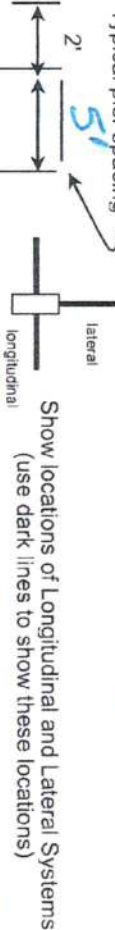
Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

Installer: Robert Sheppard License # TH 1025386  
Address of home being installed: 503 Sheppard Way Lake City, TN 37004

Manufacturer: Live Oak Length x width: 64x32

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.

Typical pier spacing: 5'  
Installer's initials: R.S.



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 # 61823  
Triple/Quad ☐ Serial # 20164220354720 AR

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'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	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: 16x16  
Other pier pad sizes (required by the mfg.): 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

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: \_\_\_\_\_

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 DIAMON \_\_\_\_\_  
Sidewall \_\_\_\_\_  
Longitudinal \_\_\_\_\_  
Marriage wall \_\_\_\_\_  
Shearwall \_\_\_\_\_

OTHER TIES

Number 28



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil \_\_\_\_\_ without testing.

X 1500 X 1600 X 1600

### 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 1500 X 1600

### TORQUE PROBE TEST

The results of the torque probe test is 295 inch pounds or check here if you are declaring 5' anchors without testing \_\_\_\_\_. A test showing 275 inch pounds or less will require 5 foot anchors.

**Note:** A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewalk 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.

B.S. Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

3-30-2028

### Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 29

### Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

### Site Preparation

Debris and organic material removed ☒ Swale ☐ Pad ☒ Other ☐

### Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16"  
Walls: Type Fastener: self-drilling Length: 4 Spacing: 16"  
Roof: Type Fastener: lags Length: 6 Spacing: 16"  
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 B.S.

Type gasket Foam

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

### Weatherproofing

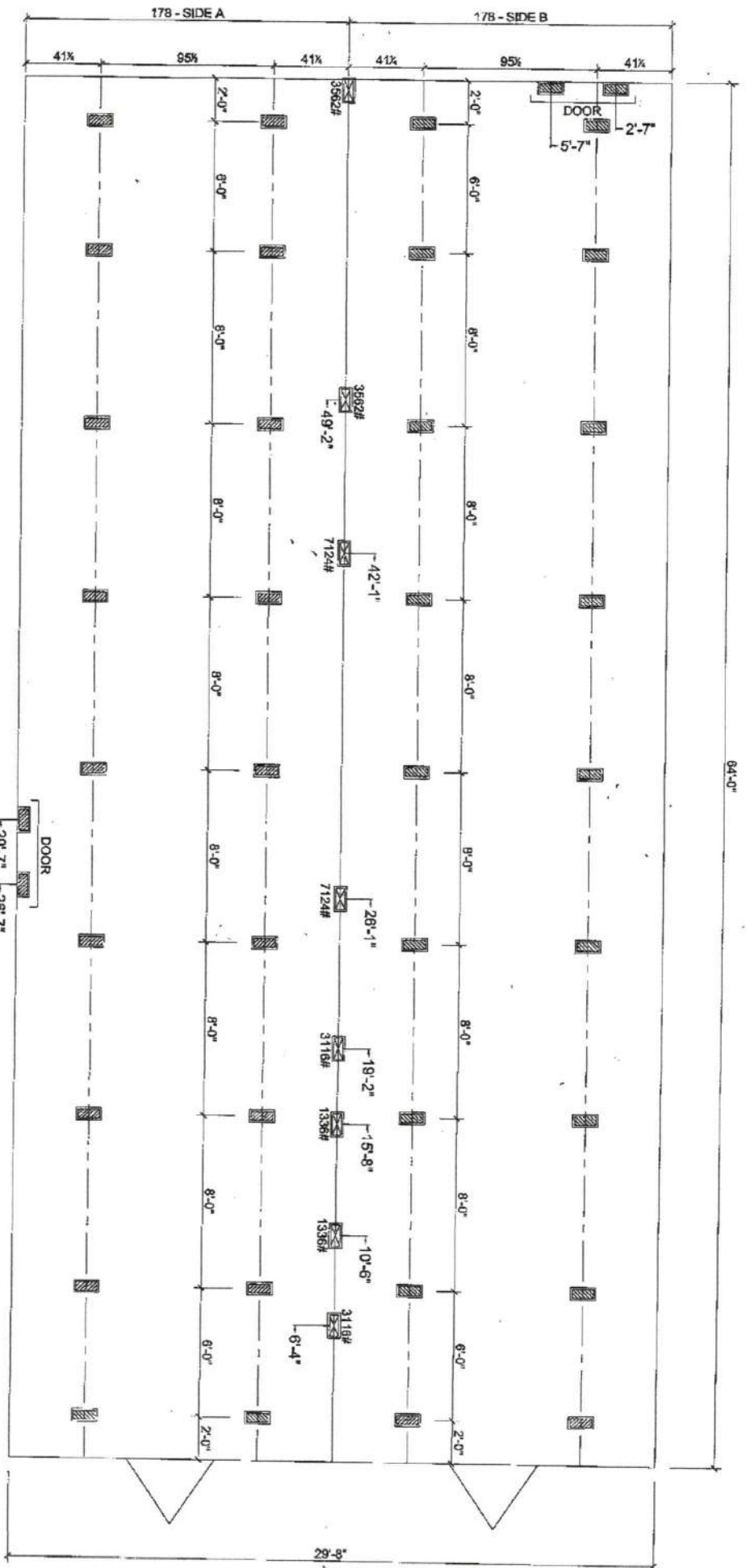
The bottomboard will be repaired and/or taped. Yes ☒ Pg. \_\_\_\_  
Siding on units is installed to manufacturer's specifications. Yes ☒  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

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

Installer Signature \_\_\_\_\_ Date \_\_\_\_\_



MARRIAGE LINE OPENING SUPPORT PIER/TYP.  
SUPPORT PIER/TYP.

05/23/19

**Live Oak Homes**  
**MODEL: V-3645A - 32 X 68**  
**5-BEDROOM / 3-BATH**



This architectural drawing shows a side elevation of a building. The facade is characterized by vertical siding. It features four sets of double windows, each with a dark interior and a light-colored frame. A central entrance door is partially obscured by a large, light-colored rectangular panel. The roof is gabled and has a dense, textured pattern. The drawing is oriented vertically on the page.



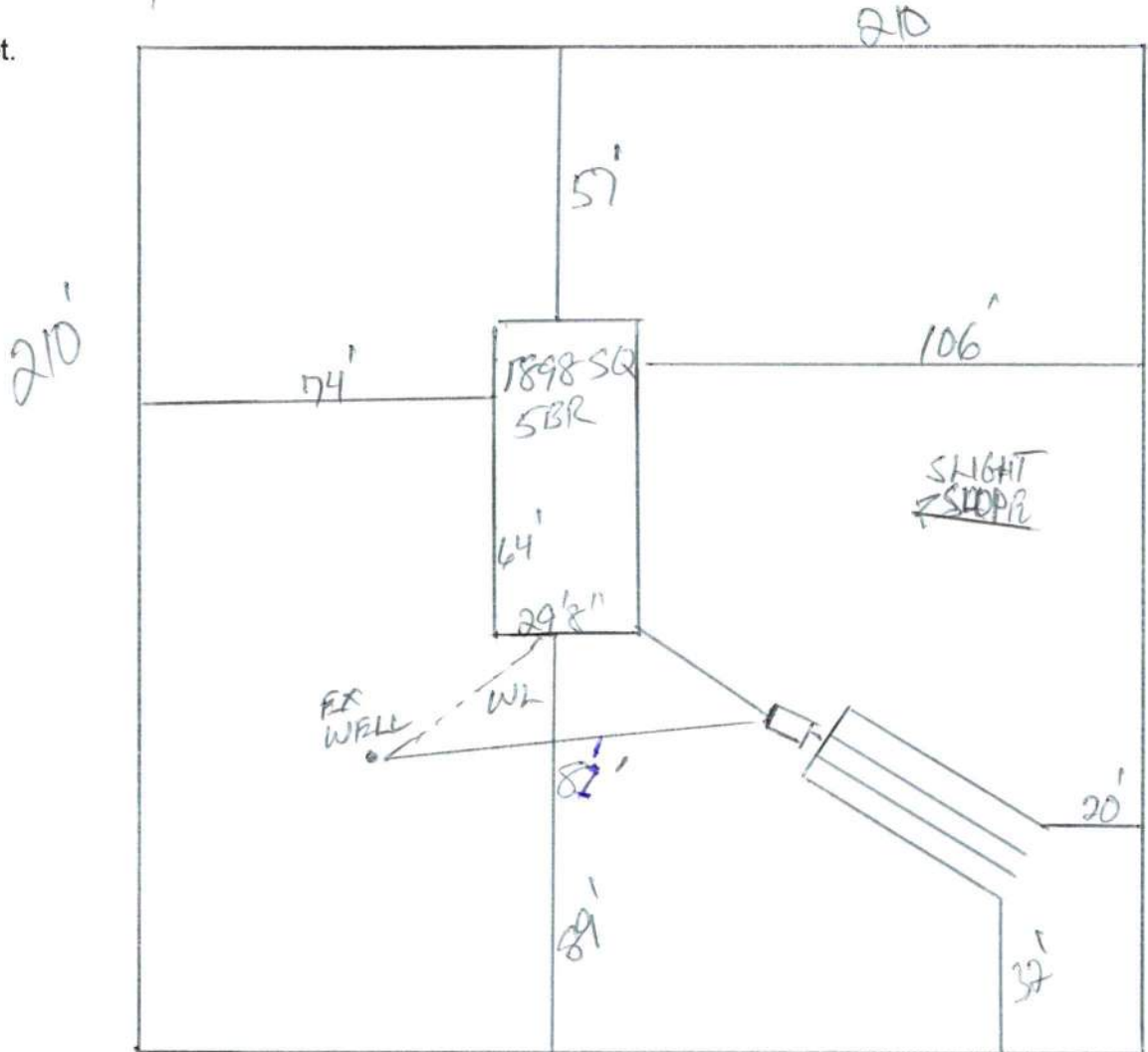
Transom windows are available on optional 9'-0" sidewall houses only.

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

Permit Application Number \_\_\_\_\_

----- Williamson / Abraham PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Notes: \_\_\_\_\_

1 of 11 ACRES SBR ATTACHED

Site Plan submitted by: \_\_\_\_\_

CONTRACTOR

Plan Approved \_\_\_\_\_

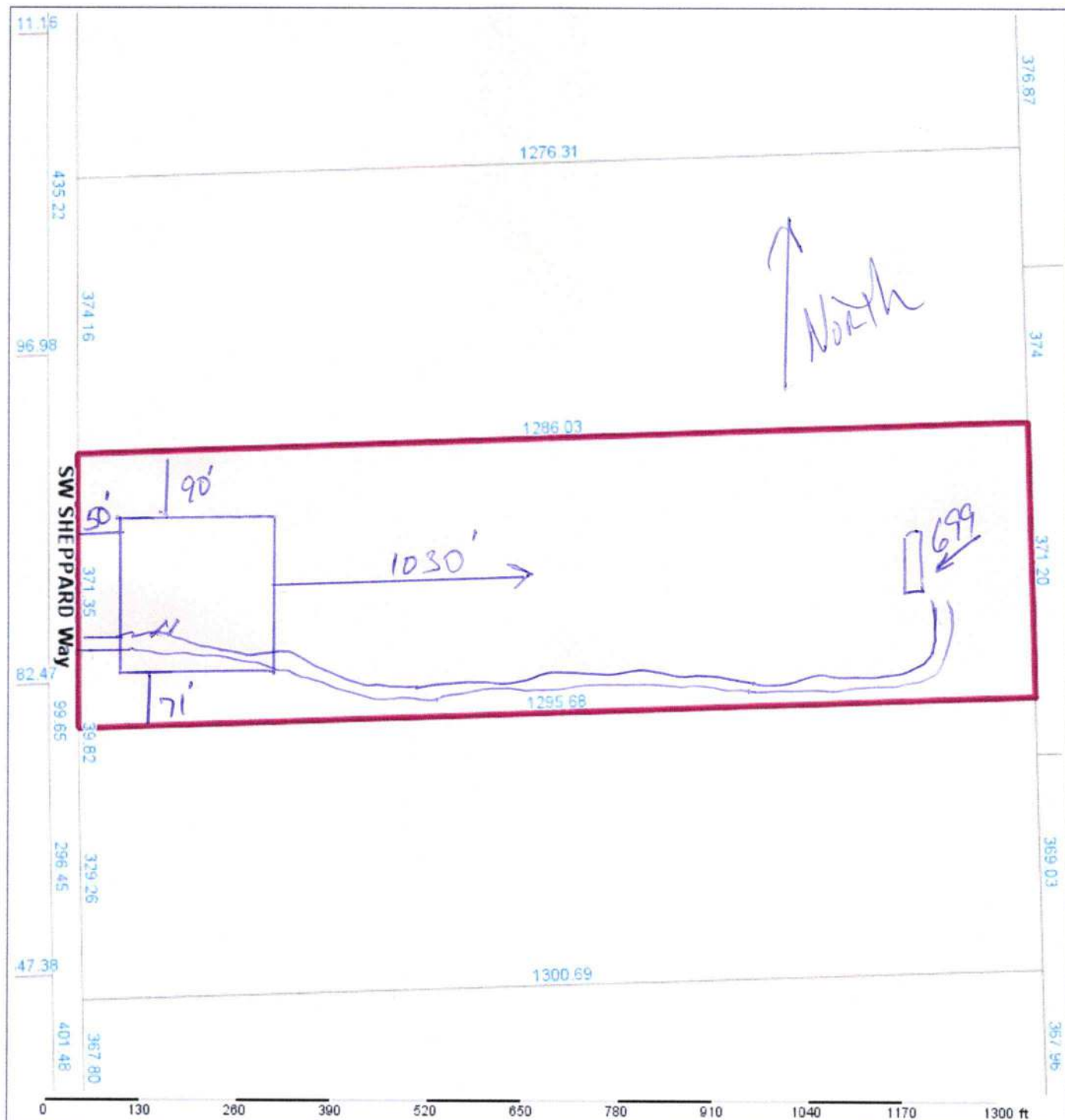
Not Approved \_\_\_\_\_

Date \_\_\_\_\_

By \_\_\_\_\_ County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**





**Columbia County Property Appraiser** Jeff Hampton | Lake City, Florida | 386-758-1083

**PARCEL: 24-5S-16-03707-003 HX H3** | IMPROVED A (005000) | 11 AC  
COMM SE COR OF SEC, RUN W 1305.14 FT TO E R/W SHEPHERD RD, N ALONG R/W 736.80 FT FOR POB, CONT N  
371.35 FT, E 1286.03 FT, S 371.20 FT, W 1295.68 FT TO

**WILLIAMSON SIDNEY**

Owner: 699 SW SHEPPARD  
LAKE CITY, FL 32024  
Site: 699 SHEPPARD WAY, LAKE  
CITY

Sales Info 12/15/1998 \$28,000 V(Q)

**2020 Working Values**

Mkt Lnd	\$10,105	Appraised	\$17,447
Ag Lnd	\$3,850	Assessed	\$17,447
Bldg	\$3,092	Exempt	\$14,197
XFOB	\$400		
Just	\$49,653	Total Taxable	county:\$3,250 city:\$3,250 other:\$3,250 school:\$3,250

**NOTES:**



Columbia County, FL

District No. 1 - Ronald Williams  
District No. 2 - Rocky Ford  
District No. 3 - Bucky Nash  
District No. 4 - Toby Witt  
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: **4/2/2020 6:24:14 PM**  
Address: **687 SW SHEPPARD Way**  
City: **LAKE CITY**  
State: **FL**  
Zip Code **32024**

---

Parcel ID **03707-003**

---

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](mailto:gis@columbiacountyfla.com)