PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	or Office Use Only (Revised 7-1-15) Zoning Official Building Official
A	128/20 By MG Permit # 39236
F	lood Zone X Development Permit Zoning A-3 Land Use Plan Map Category Ag
0	comments lef: SPLP 14.9
FI	EMA Map# Flevation Finished Floor River In Floodway
0	Recorded Deed or Property Appraiser PO No Site Plan Fig. 20-000 Well-letter OR
	Existing well Land Owner Affidavit Dinstaller Authorization FW Comp. letter App Fee Paid
	DOT Approval Parent Parcel # STUP-MH
	Ellisville Water Sys & Assessment Paid on Property - Out County - In County - Sub VF Form
Pro	perty ID# 11-7S-17-09983-040 Subdivision Bicentennial Acres Unit 2 Lot# 37
•	New Mobile Home MH Size 32 x 76 Year 2019
	Applicant Dale Burd Phone # 386-365-7674
•	Address 20619 County Road 137, Lake City, FL, 32024
	Name of Property Owner Mystic Rountree Phone# 352-283-3010
	911 Address 412 SE Jefferson Glen, High Springs, FL, 32643
	Circle the correct power company - FL Power & Light - (Clay Electric)
	(Circle One) - Suwannee Valley Electric - Duke Energy
	Name of Owner of Mobile Home Same Phone # Same
	Address 412 SE Jefferson Glen, High Springs, FL, 32643
	Relationship to Property Owner Same
•	Current Number of Dwellings on Property 1 (1 to be removed)
•	Lot Size 208' x 208' Total Acreage 1
•	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) or (Blue Road Sign) or need (Putting in a Culvert) or Culvert Walver (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 US 441 South, TL Adams St, TL Brawley Terr, TL Jefferson
	Glen, 2nd from last 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 # 65810

Parcel:

11-75-17-09983-040

Owner & Pr	roperty Info						
Owner 412 SE JEFFERSON GLN HIGH SPRINGS, FL 32643							
Site	412 JEFFERSON GLN, HIGH SPRINGS						
Description*	COMM AT SE CO FT, W 48.39 FT FC SOUTH 208.72 FT FT TO POB PART ACRES UNIT 2 W WD 1354-2646,	OR POB, CONT T, E 208.91 FT, N OF LOT 37 BIC	W 208.91 FT, IORTH 208.72 ENTENNIAL				
Area	1 AC S/T/R 11-75						
Use Code**	MOBILE HOM (000200)	Tax District	3				

*The Description above is not to be used as the Legal Description for this

parcel in any legal transaction.

"The <u>Use Code</u> 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 V	/alues			
2019 Cert	ified Values	2020 Working Values			
Mkt Land (2)	\$14,883	Mkt Land (2)	\$14,883		
Ag Land (0)	\$0	Ag Land (0)	\$0		
Building (1)	\$28,105	Building (1)	\$30,616		
XFOB (2)	\$1,300	XFOB (2)	\$1,300		
Just	\$44,288	Just	\$46,799		
Class	\$0	Class	\$0		
Appraised	\$44,288	Appraised	\$46,799		
SOH Cap [?]	\$0	SOH Cap [?]	\$0		
Assessed	\$44,288	Assessed	\$46,799		
Exempt	\$0	Exempt	\$0		
Total Taxable	county:\$44,288 city:\$44,288 other:\$44,288 school:\$44,288		county:\$46,799 city:\$46,799 other:\$46,799 school:\$46,799		

☑ (zoem ☑ ☑ 2019 2016 2013 2010 2007 2005 Sales parcel) click hover

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

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

Mystic Rountree

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	Glenn Whittington	Signature
101	License #:	EC 13002957	Phone #: 386-972-1700
1074	/	Qualifier Form Att	ached
MECHANICAL/	Print Name_	Ronald Bonds Sr.	Signature
NC 1669	License #:	CAC1817658	Phone #: 800-259-3470
V		Qualifier Form Att	ached X

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

0 1100 1							
1. Louald R Sond SE	(license holder name), licensed qualifier						
for STIPE CHEST ENTERPRISE	The (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 BURD	1.						
2. Rock, Ford	2 (6237) 7						
3. Kylly Bishas	3 Kelly Bishof						
4.	4.						
5.	5.						
under my license and fully responsible for compliances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted if at any time the person(s) you have authorized	nd County Licensing Boards have the power and ins committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits.						
officer(s), you must notify this department in write authorization form, which will supersede all previous upauthorized persons to use your name and/or in	ng of the changes and submit a new letter of ous lists. Failure to do so may allow						
wildlendbad &	CRC 1817658 2-16-16 License Number Date						
Licensed Qualifiers Signature (Notarized)	License Number Date						
NOTARY INFORMATION: STATE OF:COUNTY OF:	Bay						
The above license holder, whose name is Royal personally appeared before me and is known by	gla Edward Bonds SR						
personally appeared before me and is known by (type of I.D.) on t	his 16th day of FEB 20 (6						
State & Gan lduptins	(Seal/Stamp)						

Notary Public State of Florida Stacey Arm Hopkins My Commission FF 168407 Expires 11/08/2018



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

Charles to the	Warran Andrews and Manager Annual Con-
1. GHANDLUTTINGTON ELREKK	(license holder name), licensed qualifier
for Whithraten RABLACK	(company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DASSUR	1
2. Lexily TORA	2. 1 1 1 1
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for comp Local Ordinances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted lif at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all prevunauthorized persons to use your name and/or light the control of the cont	liance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, assibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
NOTARY INFORMATION: STATE OF:COUNTY OF:	Capinhin
The above license holder, whose name is	me or has produced identification this day of

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer. Submit the originals with the packet. home is being installed. 9"1 Address where instaker Manufacturer Typical pier spacing NOTE: lunderstand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in Robert Shappard 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 自 1 Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) installer's initials Length x width License # west pivers widthin 2" of what of ho AR FITEROIN 口 I H1025-386 6×22 自 SEN 5 capacity Bullena Home is installed in accordance with Rule 15-C Home installed to the Manufacturer's Installation Manual Double wide New Home List all marriage well openings greater then 4 foot and their pier pad sizes below Manufacturer Officer | 101 Manufacturer Stabilizing Device (LSD) Other pler pad sizes (required by the mig.) Perimeter pier pad sizz interpolated Triple/Quad -beam pler pad size 1500 pg 1500 pg 2000 pg 2500 pg 3500 pg Operana Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (ec, in) B120 from Rule 15C-1 per spacing table THEDOWN COMPONENTS 16" x 16" PIER SPACING TABLE FOR USED HOMES Q PIER PAD SIZES Q (258) Used Home Wind Zone II Seriai # Installation Decal# 18 1/2" x 18 1/2" (342) Pier pad size 162/6 32KL1 YOHLA 118199 18407 20" x 20" Q 3 Wind Zone III (484)° Longitudinal Mernage wall Shearwall 4 # within 2' of end of home spaced at 5' 4" oc POPULAR PAD SIZES ~ ~ ~ 24" X 24" 7 5A FRAME TIES ANCHORS (576)* Q 26" x 28"

COLUMBIA COUNTY PERMIT WORKSHEET

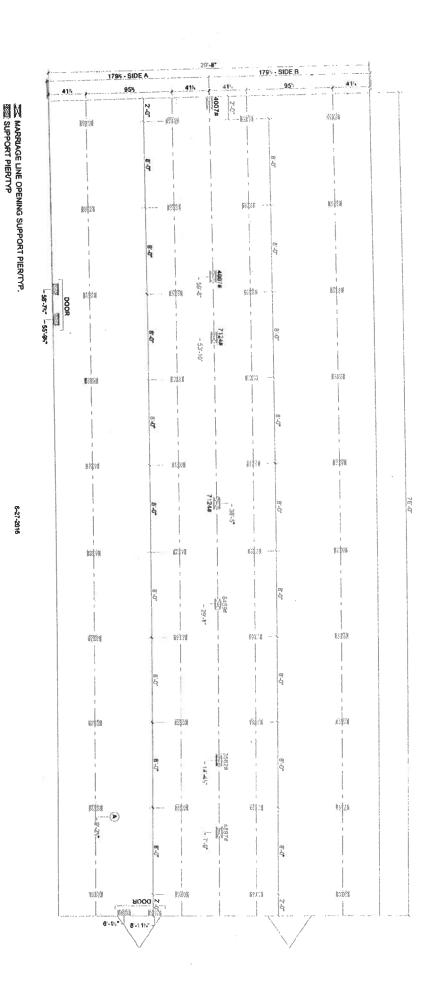
page 2 of 2

Plumbing	"Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. PgZ \$	Electrical			Installer Name Kobert Shalled	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER	reaching is 275 or leas and where the mobile home manufacturer may requires enchors with 4000 lb holding capacity. Installer's initials	Note: A state approved lateral arm system is being used and 4 ft andrors are allowed at the side-wall locations. I understand 5 ft	TORQUE PROBE TEST The results of the torque probe test is 290 Inch pounds or check here if you are declaring 5 enchors without testing A test showing 275 inch pounds or less will require 5 foot anchors.	X X X	Using 500 lb. Increments, take the lowest reading and round down to that increment.	2. Take the reading at the depth of the looter.		×	cr'check here to declare 1000 lb. soil without tesuing.	TROM	
is accounted the passed on the	in the line of the control with the part the workshoot		Other	Pryer vent installed outside of skirting. Yes NA Range downflow vent installed outside of skirting. Yes NA Drain lines supported at 4 foot intervals. Yes Lectrical crossovers protected. Yes		Miscellaneous	The bottomboard will be repaired and/or laped. Yes Pg. Siding on units is installed to manufacturer's specifications. Yes Freplace chimner installed so as not to allow intrustorr of rain water. Yes	Weatherproding	Type gesket Form installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	of tape will not serve as a gasket Installer's initials	l understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriaga walls are not that property installed or no paster being installed. I understand a strip of a property installed or no paster being installed.	Gasket (washershooding requirem)	Length: Length	Type Fastener:	Fastening muti wide units	Debris and organic material removed Pad Other Other	Sita Preparation

Installer Signature

Data //26/20

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



Live Oak Homes MODEL: P-3764Q - 32 X 80 4-BEDROOM / 2-BATH

FOUNDATION NOTES:
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FROM THAS A REPOWN FOR EXAMPLE ONLY CUMPITTY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

(A) MAIN ELECTRICAL
(B) ELECTRICAL CROSSOVER (F
(C) WATER (INLET
(D) WATER CROSSOVER (F ANY)
(E) GAS INLET (F ANY)
(F) GAS CROSSOVER (F ANY)

(G) DUCT CROSSOVER
(H) SEWER DROPS
(I) RETURN AIR (WIDPT, HEAT PUMP OH DUCT)
(J) SUPPLY AIR (WIDPT, HEAT PUMP OH DUCT)

P-3764Q

Legend

Roads

Roads

others

Dirt 💚

Interstate

Main

Other

Paved

Private

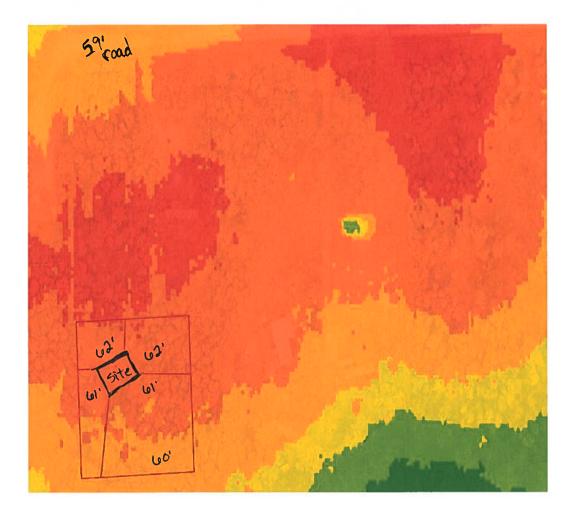
Lake City Limits

Parcels

LidarElevations

Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Jan 30 2020 09:07:50 GMT-0500 (Eastern Standard Time)



Parcel Information

Parcel No: 11-7S-17-09983-040 Owner: ROUNTREE MYSTIC R

Subdivision: BICENTENNIAL ACRES UNIT 2

Lot: 37

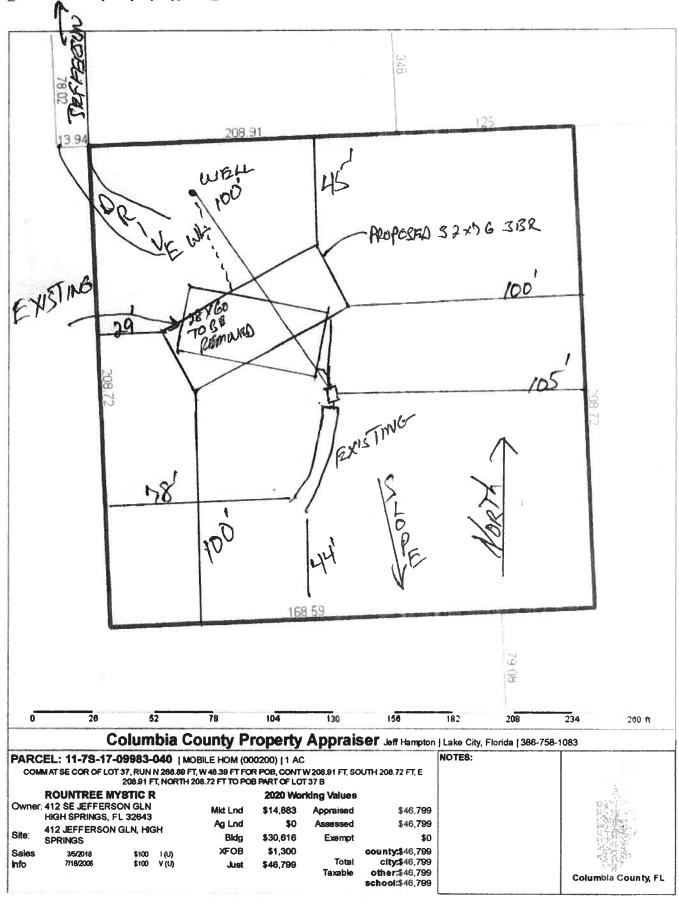
Acres: 1.0002054 **Deed Acres:**

District: District 4 Toby Witt Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

All data, information, and maps are provided"as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implies warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.





STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO. DATE PAID: FEE PAID:	172730
RECEIPT #:	146458

APPLICATION	FOR CONSTRUCTI	ON PERMIT	
APPLICATION FOR: [] New System [/] E [] Repair [] A			
APPLICANT: Mystic Rountree			
AGENT: Dale Burd / Dale Burd LLC			TELEPHONE: 386-365-7674
MAILING ADDRESS: 20619 County F	Road 137, Lake City, FL,	, 32024	
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY T PLATTED (MM/DD/YY) IF REQUES	T TO 489.105(3)(I O PROVIDE DOCUMENTING CONSIDERATION	m) OR 489.552, FLORI NTATION OF THE DATE	DA STATUTES. IT IS THE THE LOT WAS CREATED OR DFATHER PROVISIONS.
PROPERTY INFORMATION			
LOT: 37 BLOCK: na	SUBDIVISION: Bica	entennial Acres Unit 2	PLATTED: NA
PROPERTY ID #: 11-7S-17-09983-04	40	ZONING:I/N	4 OR EQUIVALENT: [No]
PROPERTY SIZE: 1 ACRES	WATER SUPPLY: [✓] PRIVATE FUBLIC	[]<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 38	1.0065, FS? [No] DIS	STANCE TO SEWER: na FT
PROPERTY ADDRESS: 412 SE Jeffers	on Glen, High Springs, I	FL, 32643	
DIRECTIONS TO PROPERTY: US 4	41 South, TL Adams St,	TL Brawley Terr, TL Jefferso	on Glen, 2nd to end on left
			
		· · · · · · · · · · · · · · · · · · ·	-1.
BUILDING INFORMATION	[/] RESIDENTIA	AL [] COMME	RCIAL
Unit Type of No Establishment		ding Commercial/In	stitutional System Design ter 64E-6, FAC
1 SF Residential	3 2273	3 BR for 3BR like i	for like
2		06-0598-N	
3			
4			
[] Floor/Equipment Drains	[] Other (S	pecify)	
OXONA SEEDS.			
SIGNATURE:			DATE: 1/28/2020

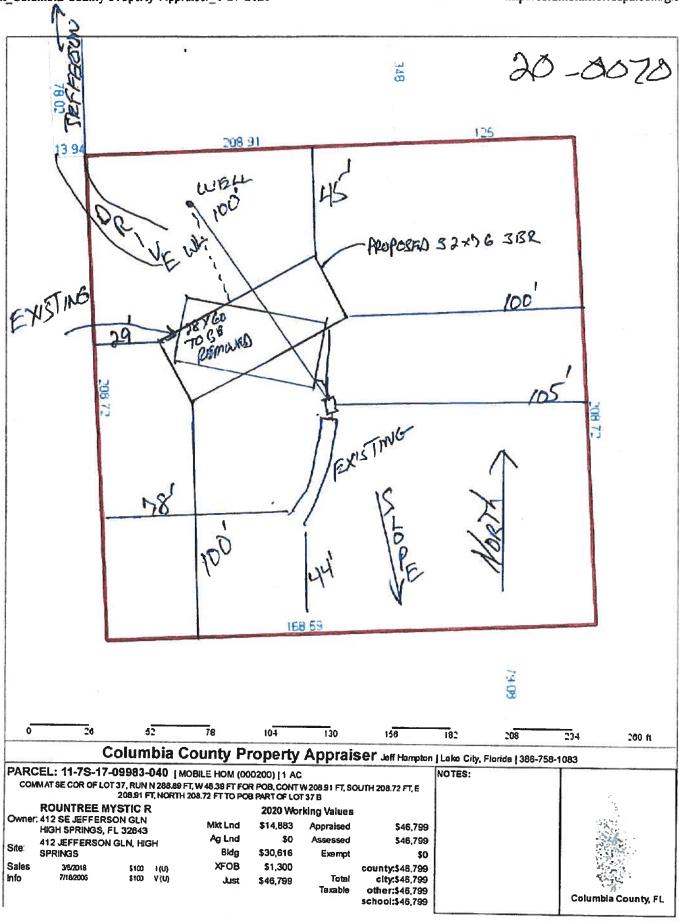
DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	Permit Application Number	20-0070
Reintrier	PART II - SITEPLAN	
	PARTII-SHEPLAN	***
Scale: 1 inch = 40 feet.		
PLRASE A	E- HED -	
Alata.		
Notes:		
	<i>J.</i> ,	
Site Plan submitted by: Plan Approved	1/02/20	CONTRACTOR
By C		Date 1/30/20
		unty Health Department
ALL CHANGES MUST BE APPI	ROVED BY THE COUNTY HEALTH DEPAR	TMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)



District No. 1 - Ronald Williams District No. 2 - Rocky Ford District No. 3 - Bucky Nash District No. 4 · Toby Witt



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:

1/30/2020 2:25:06 PM

Address:

412 SE JEFFERSON Gln

City:

HIGH SPRINGS

State:

FL

Zip Code

32643

Parcel ID

09983-040

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