

Parcel:  
21-3S-16-02242-000 (7658)

Owner & Property Info

Result: 1 of 1

Owner	M & J SAMPSON, LLC 830 W DUVAL ST LAKE CITY, FL 32055		
Site	1668 NW TURNER Ave, LAKE CITY		
Description*	S 350 FT OF E1/2 OF E1/2 OF SE1/4 OF SE1/4 AS LIES N OF RAILROAD, (AKA PART OF LOT 1 BLOCK A RANCHETTES S/D UNREC). 305-605, 375-93, FJ 1242-1595, QC 1244-808, QC 1244-810, QC 1245-2102,2104, PB 1277-884, FJ 1284-2357, WD 1286-1910, DC 1399-1474, DC 1411-1640, WD 1455-1257 <<<less		
Area	2.48 AC	S/T/R	21-3S-16
Use Code**	SFRES/MOBILE HOME (0102)	Tax District	2

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Ernest "Scott" Johnson PHONE: 352-494-8099

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>Christopher "Todd" Sampson</u>	Signature 
	License #: <u>Owner</u>	Phone #: <u>386-365-8575</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Christopher "Todd" Sampson</u>	Signature 
	License #: <u>Owner</u>	Phone #: <u>386-365-8575</u>
	Qualifier Form Attached <input 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

# PERMIT NUMBER

Installer Ernest Scott Johnson License # IH-1025249

Installer Mobile Phone # 352-494-8099

Address of home 120 NW FLORENCE AVE  
Fort Lauderdale, FL 33305

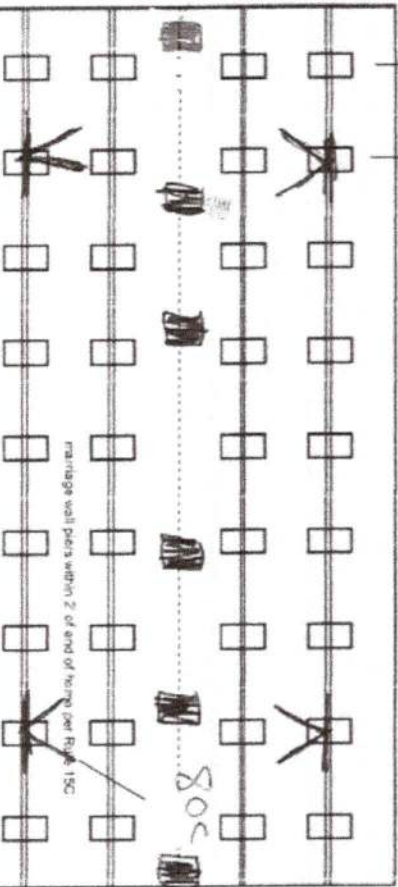
Manufacturer Furmanco Length x width 62' x 28'

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 has exceed 5 ft 4 in

Installer's initials

*[Signature]*



# PERMIT WORKSHEET

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 # 85903

Triple/Quad ☐ Serial # GAFLK 354 08650-THAB

Roof System: ☒ Typical ☐ Hinged

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	18 1/2' x 18 1/2' (342)	20' x 20' (400)	22' x 22' (484)	24' x 24' (576)	26' x 26' (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4.6"	6"	7"	8"	9"	10"
2000 psf	6"	8"	9"	10"	11"	12"
2500 psf	7.6"	9"	10"	11"	12"	13"
3000 psf	8"	9"	10"	11"	12"	13"
3500 psf	8"	9"	10"	11"	12"	13"

\* Interpolated from Rule 15C-1 pier spacing table.

## PIER PAD SIZES

I-beam pier pad size 23X317 oc  
Perimeter pier pad size Oliver 1105-11 CP PARS  
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 Pier pad size

17.5X25.5  
17.5X25.5  
17.5X25.5

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
Manufacturer \_\_\_\_\_  
Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer Oliver 1101

## OTHER TIES

Number \_\_\_\_\_  
Sidewall \_\_\_\_\_  
Longitudinal \_\_\_\_\_  
Marriage wall \_\_\_\_\_  
Shearwall \_\_\_\_\_

## FRAME TIES

within 2' of end of home  
spaced at 5 4" oc

## ANCHORS

4 ft \_\_\_\_\_  
5 ft \_\_\_\_\_

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

# PERMIT NUMBER

## PERMIT WORKSHEET

page 2 of 2

### POCKET PENETROMETER TEST

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

x 1000 x 1000 x 1000

#### 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 1000 x 1000 x 1000

#### 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 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft.

anchors are allowed at the sidewalk locations. 1 under stand 5 ft anchors are required at all centerline the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 holding capacity.

Installer's initials

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

Installer Name

Ernest Scott Johnson

Date Tested

Assumed

#### 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. \_\_\_\_\_

#### Plumbing

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

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

#### Site Preparation

Debris and organic material removed \_\_\_\_\_

Water drainage: Natural \_\_\_\_\_

Swale \_\_\_\_\_

Pad \_\_\_\_\_

Other \_\_\_\_\_

#### Fastening multi wide units

Floor: Type Fastener: 1/4 x 5 Length: 7 Spacing: 20  
Walls: Type Fastener: 1/4 x 5 Length: 7 Spacing: 10  
Roof: Type Fastener: 1/4 x 5 Length: 7 Spacing: 20

For used homes a thin, 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 (weatherstripping) required

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

Installed:

Type gasket Pg. 11

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

Ernest Scott Johnson Date 2/15/22



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

**PARCEL: 21-3S-16-02242-000 (7658) | SFRES/MOBILE HOME (0102) | 2.48 AC**

S 350 FT OF E1/2 OF E1/2 OF SE1/4 OF SE1/4 AS LIES N OF RAILROAD, (AKA PART OF LOT 1 BLOCK A RANCHETTES S/D UNREC). 305-605, 375-93, FJ 1242-1595, QC

<b>M &amp; J SAMPSON, LLC</b>		<b>2022 Working Values</b>			
Owner:	830 W DUVAL ST	Mkt Lnd	\$19,840	Appraised	\$102,184
	LAKE CITY, FL 32055	Ag Lnd	\$0	Assessed	\$102,184
Site:	1668 NW TURNER Ave, LAKE CITY	Bldg	\$66,644	Exempt	\$0
		XFOB	\$15,700		county:\$102,184
Sales	12/3/2021 \$82,100 I (Q)			Total	city:\$0
Info	3/20/2020 \$100 I (U)	Just	\$102,184		other:\$0
	12/15/2014 \$43,000 I (U)			Taxable	school:\$102,184

NOTES:



Columbia County, FL

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. [GrizzlyLogic.com](http://GrizzlyLogic.com)

Proposed

B U I L D I N G  
*The American Dream*



**MODEL 4624B**  
4 BEDROOMS, 2 BATHS  
APPROX. 1,632 SQ. FT.

1632 SQ

**HICKORY HILL**  
BY FLEETWOOD

**FLEETWOOD**

### 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: **2/16/2022 1:04:05 PM**

Address: **120 NW FLORICE Gln**

City: **LAKE CITY**

State: **FL**

Zip Code **32055**

Parcel ID **02242-000**

REMARKS: **New address for Habitable structure (family home, business, etc.) on the parcel.**

**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.**

Address Issued By: **MOORE, DAVID R.**

Manufacturer Address  
 Fleetwood Homes of GA, Inc.  
 Post Office Box 810/Ambrose Hwy.  
 Braxton, Georgia 31519

Date of Manufacture 6-16-94 Plant Number #35  
 HUD No. GEO 795243/795244

Manufacturer's Serial Number and Model Unit Designation  
GAFLR35A08650-HH/GAFLR35B08650-HH 46248

Design Approval by (D.A.P.A.)  
Radio

This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture.  
 (For additional information, consult owner's manual.)

The factory installed equipment includes:

Equipment	Manufacturer	Model Designation
For heating	<u>Coleman</u>	<u>CG-ATC70BDC</u>
For air cooling		
For cooking	<u>Magic Chef</u>	<u>3110 PRW</u>
Refrigerator	<u>Magic Chef</u>	<u>RB121TV</u>
Water heater	<u>Rheem</u>	<u>71-30S</u>
Washer		
Clothes Dryer		
Dishwasher		
Garbage Disposal		
Fireplace		

COMPLIANCE CERTIFICATE

STRUCTURAL DESIGN BASIS CERTIFICATE

DESIGN WIND  
 ZONE MAP



DESIGN ROOF LOAD  
 ZONE MAP



HEATING AND COOLING DESIGN BASIS CERTIFICATE

#### COMFORT HEATING

This manufactured home has been thermally insulated to conform with the requirements of the federal manufacturing home construction and safety standards for all locations within climate zone 1.  
 Heating equipment manufacturer and model (see list at left).  
 The above heating equipment has the capacity to maintain an average 70° F temperature in this home at outdoor temperatures of 8° F.  
 To maximize furnace operating economy, and to conserve energy, it is recommended that this home be installed where the outdoor winter design temperature (37° F) is not higher than 28 degrees Fahrenheit.  
 The above information has been calculated assuming a maximum wind velocity of 15 mph at standard atmospheric pressure.

#### COMFORT COOLING

☐ Air conditioner provided at factory (Alternate I)  
 Air conditioner manufacturer and model (see list at left).  
 Certified capacity 8 B.T.U. per hour in accordance with the appropriate air conditioning and refrigeration institute standards.  
 The central air conditioning system provided in this home has been sized ensuring an orientation of the front (hitch end) of the home facing                     . On this basis the system is designed to maintain an indoor temperature of 75° F when outdoor temperatures are                     ° F dry bulb and                     ° F wet bulb.  
 The temperature to which this home can be cooled will change depending upon the amount of exposure of the windows of this home to the sun's radiant heat. Therefore, the home's heat gains will vary dependent upon its orientation to the sun and any permanent shading provided. Information concerning the calculation of cooling loads at various locations, window exposures and shadings are provided in Chapter 22 of the ASHRAE Handbook of Fundamentals.  
 Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this home.

☐ Air conditioner not provided at factory (Alternate II)  
 The air distribution system of this home is suitable for the installation of central air conditioning.  
 The supply air distribution system installed in this home is sized for a manufactured home central air conditioning system of up to 56,400 B.T.U. per hour rated capacity which are certified in accordance with the appropriate air conditioning and refrigeration institute standards, when the air capacities of such air conditioners are rated at 0.3 inch water column static pressure or greater for the cooling air delivered to the manufactured home supply air duct system.  
 Information necessary to calculate cooling loads at various locations and orientations is provided in the special comfort cooling information provided with this manufactured home.  
☐ Air conditioning not recommended (Alternate III)  
 The air distribution system of this home has not been designed in anticipation of its use with a central air conditioning system.

#### INFORMATION PROVIDED BY THE MANUFACTURER NECESSARY TO CALCULATE SENSIBLE HEAT GAIN

Walls (without windows and doors)	sq. ft.	.12
Ceilings and roofs of light color	sq. ft.	.08
Ceilings and roofs of dark color	sq. ft.	.08
Floors	sq. ft.	.14
Air ducts in floor	sq. ft.	.13
Air ducts in ceiling	sq. ft.	N/A
Air ducts installed outside the home	sq. ft.	.25

The following are the duct areas in this home:	sq. ft.	100.0
Air ducts in floor	sq. ft.	N/A
Air ducts in ceiling	sq. ft.	47.0
Air ducts outside the home	sq. ft.	

To determine the required capacity of equipment to cool a home efficiently and economically, a cooling load (heat gain) calculation is required. The cooling load is dependent on the orientation, location and the structure of the home. Central air conditioners operate most efficiently and provide the greatest comfort when their capacity closely approximates the calculated cooling load. Each home's air conditioner should be sized in accordance with Chapter 22 of the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) Handbook of Fundamentals, once the location and orientation are known.

#### OUTDOOR WINTER DESIGN TEMP. ZONES



EO-69  
 REV 5/89

1	Motor Vehicle, Mobile Home, Off-Highway or Vessel Description			
Year	Make/Manufacturer	Body Type	Model	Color
1995	HICK	HS		
Certificate of Title Number		Current Title Issue Date	Vehicle/Vessel Identification Number	
67342342		12/05/09	GAFLR35A(&B)O8650HH	
I/we do hereby sell or have sold and delivered the above described motor vehicle, mobile home, off-highway vehicle or vessel to:				
Print Name(s) of Purchaser(s)				
M&J Sampson LLC				
Address	City	State	Zip Code	
830 W Duval St	Lake City	FL	32055	
Date of Sale	Selling price			
12/05/2011	\$ 8,000.00			

## Affidavit (When applicable):

Seller's Signature 		Seller's Printed Name <b>Nibia R Diaz</b>		Date <b>10/05/21</b>	
Seller's Address <b>183 SW Lamboy Circle</b>		City <b>Lake City</b>		State <b>FL</b>	
Co-Seller's Signature (when applicable)		Co-Seller's Printed Name (when applicable)		Zip Code <b>32024</b>	
Co-Seller's Address (when applicable)		City		State	
Co-Seller's Signature (when applicable)		Co-Seller's Printed Name (when applicable)		Zip Code	
Purchaser's Signature 		Purchaser's Printed Name <b>Christopher T Sampson</b>		Date <b>10/05/21</b>	
Co-Purchaser's Signature (when applicable)		Co-Purchaser's Printed Name (when applicable)		Date	

Check your email (change your email address) or visit the following website for current trading addresses: <http://www.fishbase.org/offices/>



**COLUMBIA COUNTY BUILDING DEPARTMENT**  
**PRELIMINARY MOBILE HOME INSPECTION REPORT**

Application # \_\_\_\_\_

\$50.00 Fee Paid \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? No

OWNERS NAME M & J Sampson LLC PHONE \_\_\_\_\_ CELL 386-365-8575

ADDRESS 120 NW Florence Glen, Lake City, FL, 32055

MOBILE HOME PARK Yes SUBDIVISION Ranchettes, Lo1, Blk A

DRIVING DIRECTIONS TO MOBILE HOME Back of C & G MH Lot.

MOBILE HOME INSTALLER Ernest "Scott" Johnson PHONE \_\_\_\_\_ CELL 352-494-8099

**MOBILE HOME INFORMATION**

MAKE Fleetwood YEAR 1995 SIZE 28 x 62 COLOR White with Blue Shutters

SERIAL No. GAFLR35A08650-HH AB

WIND ZONE II Must be wind zone II 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 \_\_\_\_\_

BUILDING INSPECTOR'S SIGNATURE \_\_\_\_\_ ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_