

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official MS

Building Official MS

AP# 1907-15

Date Received 7/3/19

By MG

Permit # 38357

Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category Ag

Comments floor one foot above the road

FEMA Map# _____ Elevation _____ Finished Floor 1' above River _____ In Floodway _____

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0511 ☒ 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 owed ☐ Out County ☐ In County ☒ Sub VF Form

Did CAC Info top on file

Property ID # 00-00-00-01370-000 Subdivision 3 Rivers Est. Unit 21 Lot# 11L

▪ New Mobile Home X Used Mobile Home _____ MH Size 27x100 Year 2019

▪ Applicant Kelly Bishop Phone # 386-497-2311

▪ Address 5412 SW Dortch St. Ft. White FL 32038

▪ Name of Property Owner William & Judy Brim Phone# 802-483-5519

▪ 911 Address 644 SW Trenton Terr. Ft. White FL 32038

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home William Brim Phone # 802-483-5519

Address 644 SW Trenton Terr Ft. White FL 32038

▪ Relationship to Property Owner Property Owner

▪ Current Number of Dwellings on Property 0

▪ Lot Size 100'x400' Total Acreage .92

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit c Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not a driveway but a road)

▪ Is this Mobile Home Replacing an Existing Mobile Home NO

▪ Driving Directions to the Property 47 South to Wilson Spgs Rd.
R on Newark R on Copperhead R on Trenton Terr.
#644 on R.

▪ Name of Licensed Dealer/Installer Richard Rayborn Phone # 352-257-1282

▪ Installers Address PO Box 7122 Crystal River FL 34423

▪ License Number 102434-1 Installation Decal # 1207128

LH - Left a message for Brim 7-10-19

LH - Spoke to Kelly 7-10-19

38033 RV permit
12 months while building

Mobile Home Permit Worksheet

Installer
Address of home
being installed

Richards, Ray
141025436
let Su T. Weyman Ter
Fair White, TX

Manufacturer

Champion

Length x width

28x60

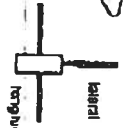
NOTE: If home is a single wide lot and one half of the spacing plan
if home is a triple or quad while sketch is remaining, please
understand Lateral Arm Systems cannot be used on any home (row or quad)
where the sidewall ties exceed 5 ft. A III.

Installer's initials

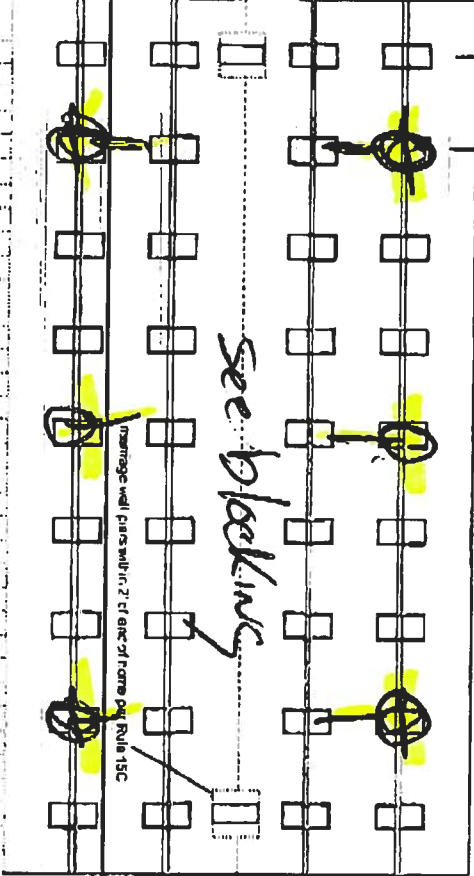
[Signature]

Typical pier spacing

2'



Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)



Marriage wall piers within 2' of end of home per Rule 15C

Application Number

Date

New Home

Used Home

Home installed in the State of Texas, and the mobile home is being installed in accordance with the rules and regulations of the Texas Department of Transportation.

Single wide

☐

Wind Zone II

☒

Wind Zone III

☐

Double wide

☒

Installation Location

160768

Triple/Quad

☐

Series #

734

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	18' 1/2' x 18' (324)	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'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

* Interpolated from Rule 15C-1 pier spacing table

PIER PAD SIZES

t-beam pier pad size

Perimeter pier pad size

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.

POPULAR PAD SIZES

Pad Size	Sq ft
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

4 ft 5 ft

FRAME TIES

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

TENSION CROW PIPES

OTHER TIES

Longitudinal Stabilizing Device and Lateral Arms Manufacturer

OLIVERA

Marriage wall Shearwall

[Signature]

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

The pocket penetrometer test is used to determine the strength of the soil. The pocket penetrometer test is used to determine the strength of the soil. The pocket penetrometer test is used to determine the strength of the soil.

X 1500 X 1500 X 1500

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the house at 8 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 1500

TORQUE PROBE TEST

The results of the torque probe test is used to determine the strength of the soil. The torque probe test is used to determine the strength of the soil. The torque probe test is used to determine the strength of the soil.

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 corners. The points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Richard H. H. H.

Date Tested

6-26-19

Electrical

Connect electrical conductors between multi-wire units, but not to the main power source. This includes the bonding wire between multi-wire units. Pg. 3

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 3

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply. Pg. 3

Details and required materials provided by owner. Pg. 3

Yes

Other

Floor Type Fastener Type Fastener Length Spacing
Walls Type Fastener Length Spacing
Roof Type Fastener Length Spacing

For used homes, the peak of the roof and fastener with gable roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand properly installed gasket is a requirement of new and used homes and that condensation, mold, mildew and pecked rafters 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 Pg. 3

Install

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Pg. 3
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes

Miscellaneous

Siding to be installed. Yes

No

Dryer vent installed outside of siding. Yes
Range downflow vent installed outside of siding. Yes
Drain lines supported at 4 foot intervals. Yes
Electrical crossovers protected. Yes

Other

Installer verifies all information is correct. Pg. 3

Installer Signature

Date

6-26-19

Legend

2018Aerials



2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

Addresses

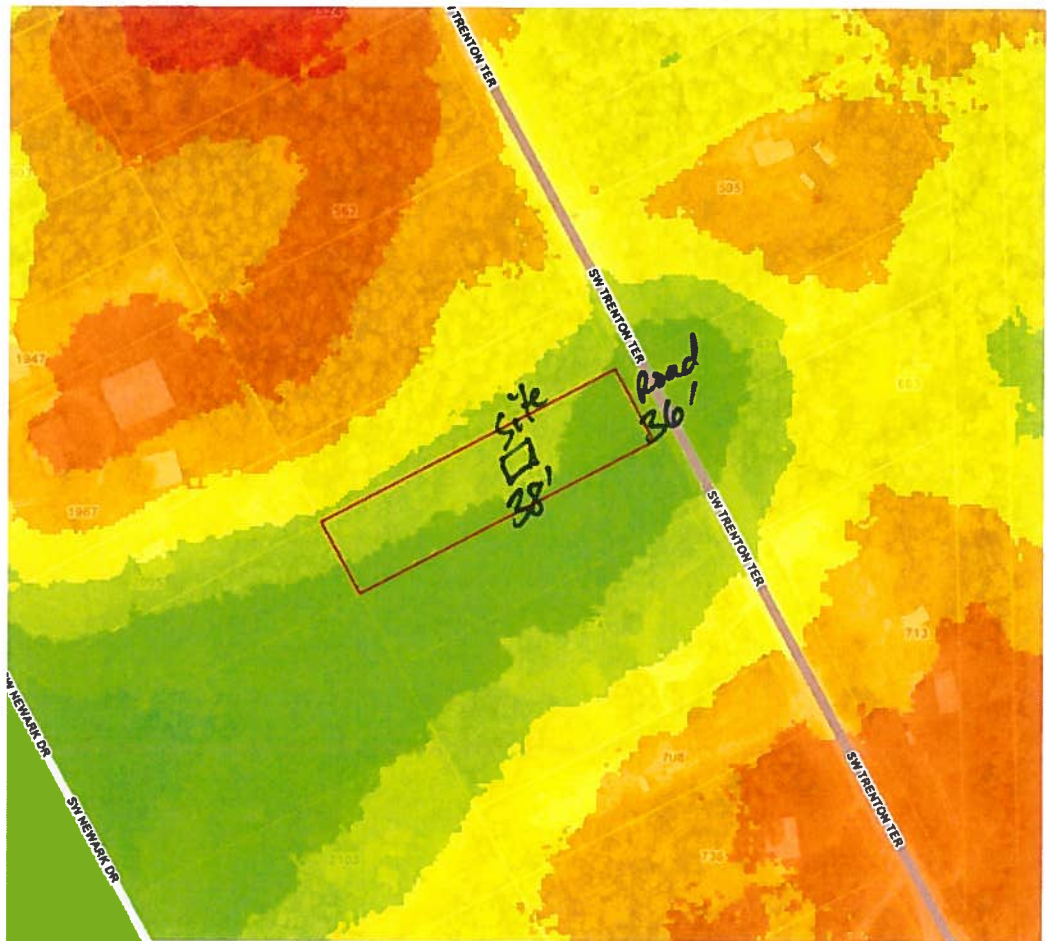
Parcels

LidarElevations



Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Jul 10 2019 11:21:28 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 00-00-00-01370-000

Owner: BRIM WILLIAM D & JUDY

Subdivision: THREE RIVERS ESTATES UNIT 21

Lot:

Acres: 0.919490933

Deed Acres:

District: District 2 Rocky Ford

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 implied 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.

Columbia County Property Appraiser

Jeff Hampton

2018 Tax Roll Year

updated: 5/9/2019

Parcel: << 00-00-00-01370-000 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Owner	BRIM WILLIAM D & JUDY P O BOX 478 LAKE PLACID, FL 33862		
Site			
Description*	LOT 116 UNIT 21 THREE RIVERS ESTATES. ORB 517-744,		
Area	0.918 AC	S/T/R	36-6S-15
Use Code**	VACANT (000000)	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

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$6,000	Mkt Land (1)	\$6,000
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$6,000	Just	\$6,000
Class	\$0	Class	\$0
Appraised	\$6,000	Appraised	\$6,000
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$6,000	Assessed	\$6,000
Exempt	\$0	Exempt	\$0
Total	county:\$6,000	Total	county:\$6,000
Taxable	city:\$6,000	Taxable	city:\$6,000
	other:\$6,000		other:\$6,000
	school:\$6,000		school:\$6,000

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
8/1/1983	\$2,000	517/0744	WD	V	U	01

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
N O N E						

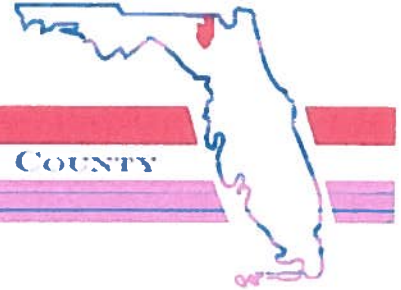
▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
N O N E						

▼ Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000000	VAC RES (MKT)	1.000 LT - (0.918 AC)	1.00/1.00 1.00/1.00	\$6,000	\$6,000

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Buckv 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: **2/22/2018 2:51:49 PM**
Address: **644 SW TRENTON Ter**
City: **FORT WHITE**
State: **FL**
Zip Code **32038**

Parcel ID **01370-000**

REMARKS: Address for proposed structure on 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: **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

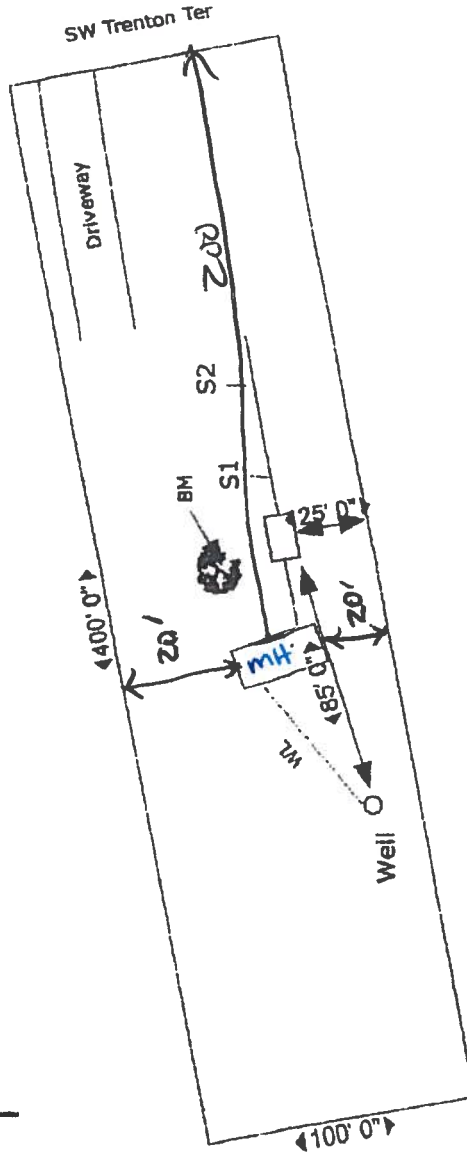
State of Florida Department of Health
Application for Construction Permit
Part I Site Plan

Permit Application Number _____

Applicant: William and Judy
Brim

N
↑

1"=64'



Notes:

Site Plan Submitted BY: Elliott Bronson / Elliott Bronson 4/30/19

Plan Approved _____

Elliott Bronson 17-1789

Not Approved _____

Date _____

By _____

County Health Department

RV Permit #
19-D264

per Sal
MH is 19-0511

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1907-15 CONTRACTOR Richard Rayborn 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 1528 ✓	Print Name <u>Melvin Lopez</u> License #: <u>EC13005725</u> Liability ☒ w/c Qualifier Form Attached ☒	Signature <u>Billy R Bishop</u> Phone #: <u>382-497-2311</u>
MECHANICAL/ A/C <u>6</u> 2133 ✓	Print Name <u>Trevor Iverson</u> License #: <u>CAC1815770</u> Qualifier Form Attached ☒	Signature <u>Billy R Bishop</u> Phone #: <u>382-497-2311</u>

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 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, Hever Twerson (license holder name), licensed qualifier

for Advanced Electric (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>Kenny Bishop</u>	1. <u>Kenny R Bishop</u>
2.	2.
3. <u>For Brian Job @</u>	3.
4. <u>6414 San Antonio Terr</u>	4.
5. <u>Calleg.</u>	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.

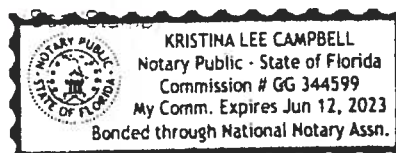
Hever Twerson License Number 03101815770 Date 7/7/19
Licensed Qualifiers Signature (Notarized)

NOTARY INFORMATION

STATE OF Fla. COUNTY OF Columbia

The above license holder, whose name is melvin lopez, personally appeared before me and is known by me or has produced identification (type of I.D.) FLDL on this 2 day of July, 2019.

Kristina Campbell
NOTARY'S SIGNATURE





COLOMBIA 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

Melvin Lopez (license holder name) licensed qualifier
for Advanced Electric (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. Kelly Bishop	1. Kelly R. Bishop
2.	2.
3. For Brian job @	3.
4. 6415 SW Trilken Terr	4.
5. Caley	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.

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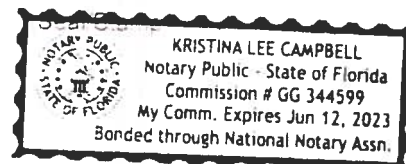
[Signature] License Number EC12005775 Date 7/7/19
Licensed Qualifiers Signature (Notarized)

NOTARY INFORMATION

STATE OF Fla. COUNTY OF Columbia

The above license holder, whose name is Melvin Lopez
personally appeared before me and is known by me or has produced identification
(type of I.D.) FLDL on this 2 day of July 20 19

Kristina Campbell
NOTARY'S SIGNATURE



LIMITED POWER OF ATTORNEY

I, Richard Lee Rayborn, of Sam's Mobile Home Setup, license # IH-1025436 hereby authorize: Kelly Bishop to be my representative and act on my behalf in all aspects of applying for an Mobile Home Transport Permit in Alachua, Baker, Bradford, Clay, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Madison, Suwannee, Taylor and Union County Florida.

This document is valid until rescinded by Richard Rayborn.

[Signature]
Signed

7-5-16
(Date)

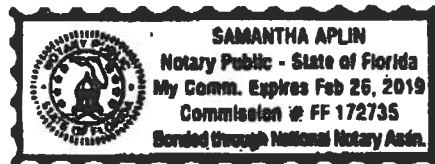
The foregoing instrument was acknowledged before me this 5th day of July 2016.

Personally Known: [Signature]

Produced ID (Type): [Signature]

[Signature]
Notary Public

STATE OF FLORIDA
COUNTY OF CITRUS
Stamp





STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 19-4576
DATE PAID: 7/27/19
FEE PAID: 118.00
RECEIPT #: 1423419

APPLICATION FOR:

☒ New System ☒ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☒ Abandonment ☐ Temporary ☐

APPLICANT: William and Judy Brim

AGENT: Howard Septic Service Inc.

TELEPHONE: 386-935-1518

MAILING ADDRESS: PO Box 180 Branford FL 32008

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 116 BLOCK: 21 SUBDIVISION: Three Rivers Estates PLATTED: _____

PROPERTY ID #: 00-00-00-01370-000 ZONING: _____ I/M OR EQUIVALENT: ☐ No ☐

PROPERTY SIZE: 0.918 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ $\leq 2000\text{GPD}$ ☐ $> 2000\text{GPD}$

IS SEWER AVAILABLE AS PER 381.0065, FAS? ☐ No ☐ DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 644 SW Trenton Terrace

DIRECTIONS TO PROPERTY: Fort White Take US 27 West. Turn left on SW Riverside Dr. Turn left on SW Utah. Turn right on SW Newark Drive. Turn left on SW Copperhead. Turn right on SW Trenton Terrace. Continue to property on right.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>SFR</u>	<u>3</u>	<u>1680</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Fulton Howard

DATE: 7/3/19

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

Page 1 of 4

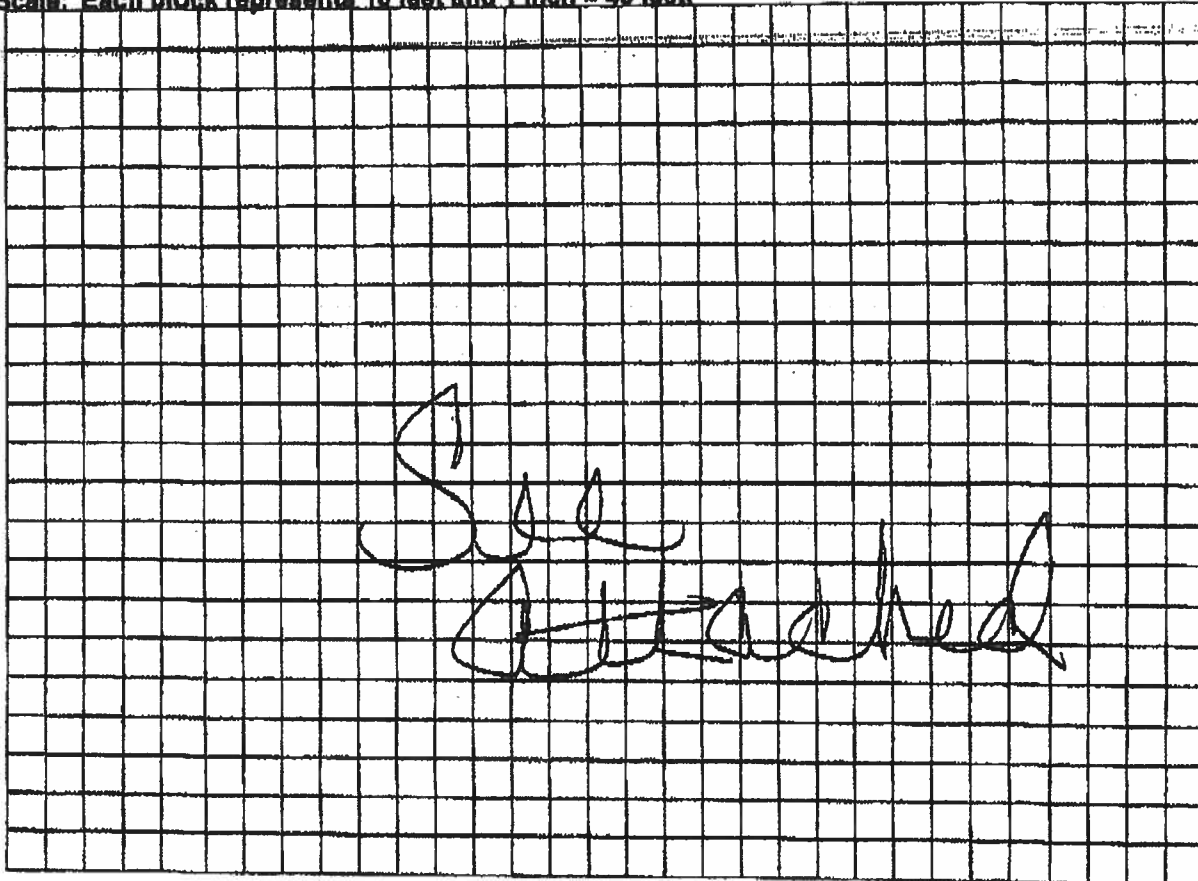
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

19-0511

..... PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

* Site Plan submitted by: Felix C. HernandezPlan Approved [Signature]

Not Approved _____

By [Signature]

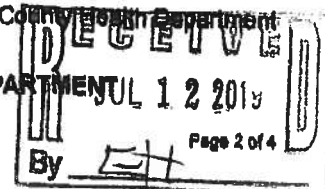
EST

Columbia

Date 7/12/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4046, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 6744-0 02-4015-6)

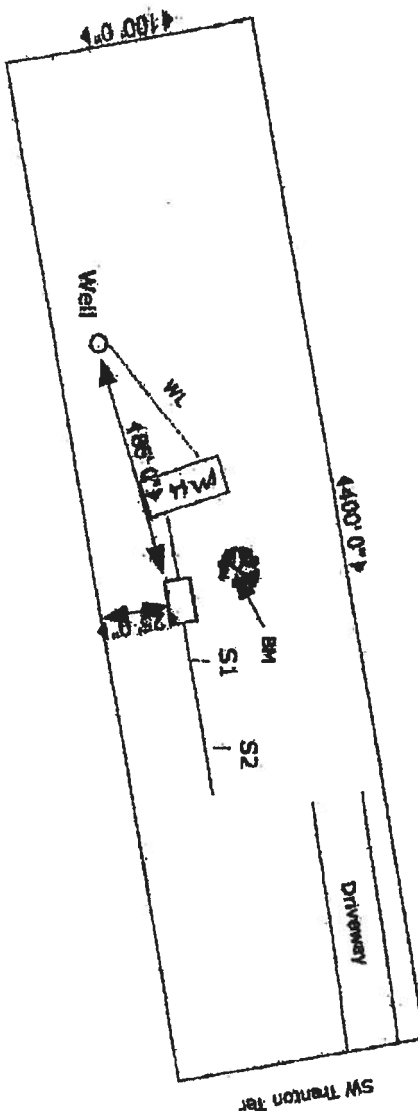
State of Florida Department of Health
Application for Construction Permit
Partial Site Plan

Permit Application Number

Applicant: William and Judy
Brim

N
↑

1"=64'



Notes:

Site Plan Submitted By:

Elliot Bronson / *Stella Howard* 7/3/19

Plan Approved

Elliot Bronson 17-1789

Date

By

County Health Department

19-05-11