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	PERMIT APPLICATIO	V / MANUFACTURED HOME INSTALL	ATION APPLICATION
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For Office Use Only (Revised 7-1-15) Zoning OfficialBuilding Official	
AP#_(0) (0) Date ReceivedBy 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	
Existing well Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Pa	aid
DOT Approval Parent Parcel # STUP-MH 911 A	App
Ellisville Water Sys Assessment Out County In County Sub VF Form	
Property ID # 19-25-17-114736-003 Subdivision	
New Mobile Home Used Mobile Home MH Size 24147 Fear	1023
Applicant Song North Phone # Sle3-517-5	701
Address 3311 Sw State Rd 247 Lake City FI 3202	24
Name of Property Owner Matthew + Melanie Rusall 904-059-	
911 Address NW Falling Creek Rd Lake City	FI 32
Circle the correct power company - FL Power & Light - Clay Electric	
(Circle One) - <u>Suwannee Valley Electric</u> <u>Duke Energy</u>	02010
Name of Owner of Mobile Home TACK RUSSII Phone # 585-943.	2-10-
Address 3186 NW Falling (very Rd 585.26	17-2-
Name of Owner of Mobile Home <u>Jack RUSSell</u> Phone # <u>585-34</u> Address <u>3184 NW Falling Cruk Rol</u> <u>585-24</u> Lake City FI 32	2200
Relationship to Property Owner dad	
Current Number of Dwellings on Property 1 - this will be # 2	
Lot Size Total Acreage 13.23	
Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circ	a Culvert)
Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circ (Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need	a Culvert)
Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) (Blue Road Sign) (Putting in a Culvert) or Culvert Waiver (Circle (Not existing but do not need (Not existing but do not need Is this Mobile Home Replacing an Existing Mobile Home NO	a Culvert)
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HOME

Jacobsen Homes of Lake City

PURCHASE AGREEMENT

Locally Owned and Operated

3973 W. U.S. Hwy. 90 Lake City, Florida 32055 Ph. 386-438-8458 • Fax: 386-438-8472

Subject to the Terms and Conditions Stated on Both Sides of this Agreement S EAR MAKE SEC. S.C. MODEL MODEL The Call Manual Deco Scient Temp	-2421A	B. RO	press to Pure	FLOOR SIZE	HITCH SIZE
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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 AGENT AUTHORIZATION

, _____ Rusty C. Knowlow_____, give this authority and I do certify that 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	Agents Company Name
Sonya North	Sonya North	
Dy lan Hinsun		
1		

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.

4-27.23 Date License Holders Signature (Notarized) NOTARY INFORMATION: COUNTY OF: STATE OF: Florida The above license holder, whose name is personally appeared before me and is known by me or has produced identification on this day of (type of I.D.) (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
	MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION
1,	Rush L. Knales , give this authority for the job address show below
only,	NW Falling Creek ed Lake City FI 32055
	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)
Songa North	Songo North	AgentOfficer Property Owner
Dylan thinson		AgentOfficer
		AgentOfficer 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.

COUNTY OF:

License Holders Signature (Notarized)

NOTARY INFORMATION: STATE OF: Florida

<u>FH-1038218</u> <u>H-27.23</u> License Number Date

20 0

dav

Jalun

The above license holder, whose name ispersonally appeared before me and is known by me ophas produced identification (type of I.D.)

on this

NOTARY 'S SIGN/ (Seal/Stamp)



APPLICATION NUMBER

CONTRACTOR MUSTY KNOWLES PHONE 386-397-0884

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 Un Whittington	Signature Man Whethington Phone #: 386-972-1201
	Qualifier Form Attached	
Mechanical/ A/c	Print Name License #: Qualifier Form Attached [Signature Phone #:

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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

CONTRACTOR KUSty Knowles PHONE 386-397-0886 APPLICATION NUMBER

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 <u>REQUIRED</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.

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Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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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



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1104																							

(THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

Order #: 5586 Label #: 94494	Manufacturer:	(Check Size of Home)		
Homeowner:	Year Model:	Single		
Address:	Length & Width:	Double Triple		
City/State/Zip:	Type Longitudinal System:	HUD Label #:		
Phone #:	Type Lateral Arm System:	Soil Bearing / PSF:		
Date Installed:	New Home: Used Home:	Torque Probe / in-lbs:		
Installed Wind Zone:	Data Plate Wind Zone:	Permit #:		

LABEL#	DATE OF INSTALLATION
USTY L. KNOWLES	
NAME	
H / 1038219 / 1	5586
N ACCORDANCE WITH F	ORDER # TALLATION OF THIS MOBILE HOME IS LORIDA STATUTES 320.8249, 320.8325 WAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

Columbia County Property Appraiser Jeff Hampton

2023 Working Values

Parcel: 🕙 19-2S-17-04736-003 (45468) 👀

Owner & Pr	operty Info		Result: 1 of 1
Owner	RUSSELL MATTHEW MARK RUSSELL MELANIE ANNE 3786 NW FALLING CREEK RD LAKE CITY, FL 32055		
Site	3786 NW FALLING CREEK RD, L	AKE CITY	
Description*	BEG NW COR OF SW1/4 OF SW1/4 R/W OF NW FALLING CREEK RD, S CURVE 300.17 FT, S 67 DEG W 592 1085-310, WD 1118-1027, WD 1128-1	11 DEG E 772.10 FT TO C 89 FT, N 1037.68 FT TO PC	JRVE, NW ALONG
Area	13.23 AC	S/T/R	19-25-17
Use Code**	IMPROVED AG (5000)	Tax District	3

*The <u>Description</u> 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 Values

a construction of the second			
2022 (Certified Values		2023 Working Values
Mkt Land	\$3,400	Mkt Land	\$7,380
Ag Land	\$5,528	Ag Land	\$3,364
Building	\$12,627	Building	\$81,355
XFOB	\$5,798	XFOB	\$12,050
Just	\$62,233	Just	\$172,785
Class	\$27,353	Class	\$104,149
Appraised	\$27,353	Appraised	\$104,149
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$27,353	Assessed	\$69,257
Exempt	\$0	Exempt	HX HB \$44,257
Total Taxable	county:\$27,353 city:\$0 other:\$0 school:\$27,353		county:\$25,000 city:\$0 other:\$0 school:\$44,257



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
10/6/2022	\$260,000	1477/0160	WD	1	Q	01
5/3/2007	\$20,000	1118/1027	WD	V	U	03
11/28/2005	\$161,000	1066/0999	WD	V	U	03

The Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bidg Value
Sketch	MODULAR 1 (0210)	1985	976	1800	\$81,355

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
0294	SHED WOOD/VINYL	2010	\$5,000.00	1.00	0 × 0
0166	CONC, PAVMT	2010	\$50.00	1.00	0 × 0
9945	Well/Sept		\$7,000,00	1.00	0 x 0

				and the second	and the second second
0200	MBL HM (MKT)	1.230 AC	1.0000/1.0000 1.0000/ /	\$6,000 /AC	\$7,380
5500	TIMBER 2 (AG)	7.000 AC	1.0000/1.0000 1.0000/ /	\$452 /AC	\$3,164
5910	SWAMP/CYPRESS (AG)	5.000 AC	1.0000/1.0000 1.0000/ /	\$40 /AC	\$200
9910	MKT.VAL.AG (MKT)	12.000 AC	1.0000/1.0000 1.0000/ /	\$6,000 /AC	\$72,000

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Search Result: 1 of 1

by: GrizzlyLogic.com



2023-04-25 15:21



Pa					if home is a triple or quad wide sketch in remainder of home Lunderstand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. Typical pier spacing 2' 7/ 2' 1' 1' 1' 1' 1' 1' 1' 1' 1' 1' 1' 1' 1'	Installer: Restry L. Kurpelles License # I 4-10 3829 Address of home	Mobile Home Permit Worksheet
Page 1 of 2	Image: The Down components within 2' of end of home spaced at 5' 4" oc Longitudinal Stabilizing Device (LSD) Imanufacturer Longitudinal Stabilizing Device w/ Lateral Arms Sidewall Longitudinal Marriage wall Manufacturer ()	openings greater than 4 foot res below. Pier pad size 2.4724	16	$\begin{array}{c c c c c c c c c c c c c c c c c c c $	PIER SPACING TABLE FOR USED H oter 16" x 16" 18 1/2" x 18 20" x 20" 22" ize (256) 1/2" (342) (400) (4 j.inj 3' 4' 5' (400) (4 3' 4' 5' 7' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5' 4' 5'	Used Home Used Home Hanufacturer's Installation Manua I in accordance with Rule 15-C Wind Zone II Wind IS-C Wind I Wind Serial # 944	Application Number: Date:

Page 2 of 2	D
Installer Signature Date Y- 17, 19	Connect all polable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 45.4
	Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15(21)
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacture installation instructions and or Rule 15C-1 & 2	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 1524.
	Electrical
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 :	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name Rusity L: Lower Date Tested 4.27.23
Miscellaneous	Installer's initials
The bottomboard will be repaired and/or taped. Yes Pg. 1444 Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Note: A state approved lateral arm system is being used and 4 r. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerfine the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.
Weatherproofing	
Type gasket the the strength of installed: Pg. 1 C Between Floors Yes	TORQUE PROBE TEST The results of the torque probe test is UNX NOV inch pounds or check here if you are declaring 5' anchors without testing A test showing 275 inch pounds or less will require 5 loot anchors.
a result of a poorty installed or no gasket being installed. I understand a strip of tape vill not serve as a gasket. Installer's initials	xx
I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are	3. Using 500 lb. increments, take the lowest reading and round down to that increment
Gasket meabhaproofing requirement	2. Taxe the reacting at the reput of the towner.
Type Fastener: <u>Spacing</u> : <u>Type Fastener</u> : <u>Length</u> : <u>C</u> Spacing: <u>For used homes a min. 30 gauge</u> , 8" wide, galvanized me will be centered over the peak of the roof and fastened wit moofing naits at 2" on center on both sides of the centerline	POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations.
Floor. Type Fastener: (An Length: 6" Spacing: 18"	xx
Water drainage: Natural Swale Pad Other .	The pocket penetrometer tests are rounded down to 1,-200 psf or check here to declare 1000 lb. soil without testing.
Debris and organic malerial removed	POCKET PENETROMETER TEST
Site Precaration	

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