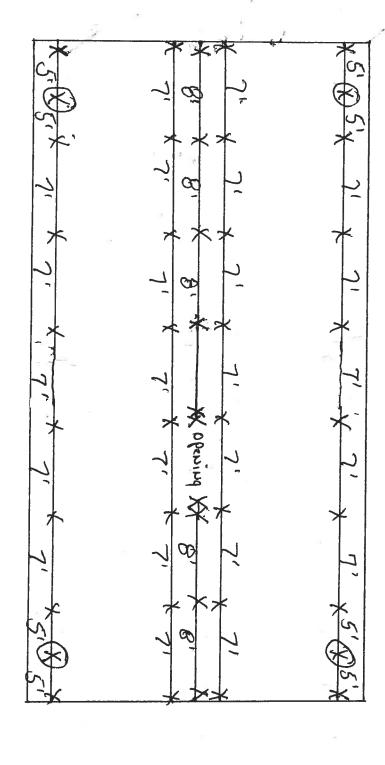
PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only (Revised 9-22-06) Zoning Official 18 928 Building Official 19 9-270  AP# 0709-61 Date Received 9/21 By HOTW Permit # 20287  Flood Zone
FEMA Map# Elevation Finished Floor River In Floodway
Site Plan with Setbacks Shown EH Signed Site Plan 1/10 EH Release 1/10 Well letter Existing well
Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer
State Road Access   Parent Parcel #   STUP-MH
Property ID #
New Mobile Home Used Mobile Home/ Year_/598
• Applicant LEONARY JICKS Phone # 386. 752. 526.3
- Address POB 1947 LAKE GILL 7) 3056
Name of Property Owner LEONAMO WILLS Nex/ty, Phone# 752-5763  911 Address //4 SW VIOCA No. 51-4/46 ct / 32038
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Progress Energy</u>
Name of Owner of Mobile Home LEONING LICK Phone # 752. 5763
Address Fob 1947, LAKE C.5 G. 2/3:056  Relationship to Property Owner Off
Current Number of Dwellings on Property
Lot Size Total Acreage50
Do you : Have Existing Drive or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home NO
Driving Directions to the Property PR 47-5 TO 2 WES Vouth of Columbia
Name of Licensed Dealer/Installer JESSIE Charles Knowks Phone # 381. 755.684/ Installers Address 580/ Sw Se 47, LAKE City 41. 32024 License Number TH 0000 509 Installation Decal # 289.093
License Number <u>TH 0000 50 9</u> Installation Decal # <u>A89 093</u>

PERMIT NUMBER

4	1	

PERMIT WORKSHEET

ined electrical conductors between must-wide units, but not to the main power res. This includes the bonding wire between must-wide units. Pp. 152 — Planating ined all sewer drains to an existing sewer top or septic tank. Pp. 150 — pendent water supply piping to an existing water meter, water tap, or other pendent water supply systems. Pg. 150—	Inditine anctions with 4000 in Phyting capacity.  ALL TIESTS MUST BE PERPORMED BY A LICENSED INSTALLER Installer Name Jessie 1, Chester Kuszilles  Perportation of the	TORQUE PROBE TEST  The results of the jorque probe test is MA LLAW find to builds to the showing 275 inch pounds or less will require 5 foot anchors.  Note: A state approved lateral arm system is being used and 4 ft. services are allowed at the eldewisi locations. Fundershind 5 ft received at all centering to make a fundershind 5 ft.	The pocket peristromater tests are rounded down to or check here to declare 1000 ib. soil X/LO X/LO X/LO X/LO X/LO X/LO X/LO X/LO
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 150-1 & 2 installation and Charles (Manufacture).	Meethesprod  spaired and/or taped to manufacturer's sp d so; as not to allow  Miscollates  No. The of skirting. Yes alled outside of skirting most tribervals. Yes oded. Yes:	Type gasket Hill buy Follow Installed:  Type gasket Hill Duy Follow Installed:  Between Floors yes  Between Floors yes  Bottom of ridgebeam yes  Fig. 150.  The gasket Hill buy Follow Installed:  Between Floors yes  Bottom of ridgebeam yes  Fig. 150.  The gasket Hill buy Follow Installed:  Between Floors yes  Bottom of ridgebeam yes  Fig. 150.	Dabyts and organic material required  Wither chairage: Natural Servete  Pad Other  Floor: Type Fasterner: 1492 Wells: Type Fasterner: 1244 Type Fasterner: 1244 For used homes a triff, 30 gauge, 8 wide, galvarized material strip routing natis at 2" on center on both sides of the centerfline.  Servete  Pad Other  Pad Other  Pad Other  Pad Other  Pad Other  Floor: Type Fasterner: 1244 Wells: Specing: 20" Spe



X indicates I beam peers 7' QC. using 234X314"ABS PADS assuming boots 5,1, 4x indicates I-piers ON each side of Marriage wall opening at Ridge beam supports. (8) indicates 4-11010 ALL STEER FOUNDATIONS used as longitudual devices only

# LIMITED POWER OF ATTORNEY

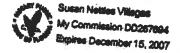
I, Jessie Chester Knowles license # IH0000509 hereby authorize
Leonard Dicks to be my representative and act on my
behalf in all aspects of applying for a mobile home permit to be
placed on the following described property located in
Columbia County, Florida.
Property Owner: Leonard Dicks
911 Address:
Parcel ID#:
Sect: Twp: Rge:
Jesse J Chester Knowles 9-13-07
Mobile Home Installer Signature  Date
Sworn to and subscribed before me this
Notary Public  LAURIE HODSON MY COMMISSION # DD 333503 EXPIRES: June 28, 2008 Bonded Thru Notary Public Underwriters
My Commission expires: June 28, 200 8
Commission Number: \DD 333503
Personally known: Produced ID (type):

## MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

1. Tessie LiChester Kalawles , license number 1H 0000509	
Please Print do hereby state that the installation of the manufactured home for Leonard Dick Applicant	3
at	_
911 Address	
will be done under my supervision.	
Jesse Thister Moulles Signature	
Sworn to and subscribed before me this 19th day of September.	
Notary Public: Supar A. S. Olegoo Signature 12 15 07  My Commission Expires: Date	



9. 13. 1 BALD 0 - Didna For M. (196-798-1160 850 21 200 00 0047 4

#### PRELIMINARY MORRE HOME HISPECTION REPORT

eccepted 9/	IS THE MIN ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUEDT
ESS HAME	OMACH BUILCES PHONE CHI 36E - ZYYE
1855	SR 47.5
	SUDDIVISION
ING BIRECTION	IS TO MODINE HOME 47-5 JUST PAST BEICH BOFFIST CAKING U.
	115 The MEIL MOVE ON THE R - White MG12EEN SHOTTERS
	THE CALL BE FOR HORE TOS (WH) : WILL UP) 365- ETT.
DELL HOME	SATE OOD YEAR 1998 SIZE 518 460 COLOR (SIZEN ANTICE)
AKE	GIP. FLW54881698-1721 A-B
	Must be wind zone if or higher NO WIND ZONE I ALLOWED
ATERIOR:	HERETION STANDARDS
	ASS F= FAILES
/	SMGRE DETECTOR ( ) GPERATIONAL ( ) MISSING
- kaza	FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION
	20045 () OPERABLE () DAMAGED
<u>/</u>	WALLS ( ) SOLID ( ) STRUCTURALLY UNISOUND
	WINDOWS () OPERABLE () MOPERABLE
	PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING
. <u>L</u>	CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT
	ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLEY COVERS MISSING ( ) LIGHT FIXTURES MISSING
EXTERIOR	WALLS / SIDDING ( ) LODSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING
. /	WINDOWS SECRECKED DROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
	ROOF () APPEARS SOLID () DAMAGED
	WITH CONDITIONS Repair Broken Window Next to Front Door
HVORTER TOP	NEED REINSPECTION FOR FOLLOWING CONDITIONS
. ) distribution	The state of the s
	1 2. 12 SI ID NUMBER 402 DATE 9-24.07
GHAEIRE	ID NUMBER FOZ DATE 9-29.07

LAKE CITY Leonard Dicks 28×60 Fleetwood S# 169B A-B Note: 30' Set back front 25' Setback Fuds 25' Setback including Pipe live lasement on back, /SR47 CR240 Columbia

### STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

APT Elo/(TIO		Permit Applic	cation Number
Scale: 1 inch = 50 feet.  Notes:	Me ma	33' 145 SQ 41  33' 15' 20' 41  Whit SQ 15' 20' 41	
Site Plan submitted by: Plan Approved By	Roch D	Not Approved	MASTER CONTRACTOR  Date County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

#### **COLUMBIA COUNTY 9-1-1 ADDRESSING**

P. O. Box 1787, Lake City, FL 32056-1787 PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: run\_cruft@columbiocountylla.com

#### **Addressing Maintenance**

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED:

9/21/2007

DATE ISSUED:

9/25/2007

**ENHANCED 9-1-1 ADDRESS:** 

114

SW VIOLA

DR

**FORT WHITE** 

FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

22-55-16-03693-111

Remarks:

**LOT 11 COLUMBIA CITY HOMESITES UNIT 2** 

Address Issued By:

Columbia County 9-1-1 Addressing / GIS Department

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

970

57-0759-12

## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application	n Number
Scale: 1 inch = 50 feet.	
100 H MINE  100 H	
Site Plan submitted by:  Plan Approved  Not Approved  July	MASTER CONTRACTOR  Date 역/ファ/のつ  County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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