

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP# 47461

Date Received 10/7/20

By MG

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 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 _____ ☐ Out County ☐ In County ☐ Sub VF Form

20-0784

Property ID # 20-35-17-05253-000 Subdivision Pine Needles Estates Lot# 9

▪ New Mobile Home ☒ Used Mobile Home _____ MH Size 26x56 Year 2021

▪ Applicant Steven L Burnette Phone # 386-867-3143

▪ Address 263 Ne Windall Ln Lake city FL 32055

▪ Name of Property Owner Steven Burnette Phone# 386-867-3143

▪ 911 Address 263 Ne Windall Ln Lake city FL 32055

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

▪ Name of Owner of Mobile Home Steven Burnette Phone # 386-867-3143

Address 263 Ne Windall Ln Lake city FL 32055

▪ Relationship to Property Owner _____

▪ Current Number of Dwellings on Property 0

▪ Lot Size 1.024 Total Acreage 1

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

▪ Is this Mobile Home Replacing an Existing Mobile Home yes

▪ Driving Directions to the Property 441 Ne Windall Ln then the 4th Place on the left from Down Town

▪ Name of Licensed Dealer/Installer Ernest Johnson Phone # 352-494-8099

▪ Installers Address 22204 SE Hwy 301 Hawthorne, FL 32640

▪ License Number 1W1025249 Installation Decal # 74429

2020-10-05 10:23

C&G Mfg. Homes 3867552386 >> 3524814807

P 2/6



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

I, Ernest S. Johnson, give this authority for the job address show below
Installer License Holder Name

only. 263 Ne Windell Ln Lakecity FL 32055 and I do certify that
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)
<u>Steven Burnette</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

Ernest S. Johnson TH1025249 10/7/20
License Holders Signature (Notarized) License Number Date

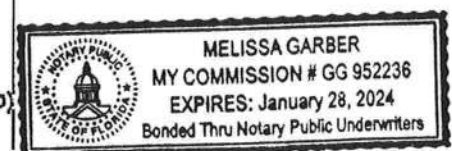
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ernest Johnson,
personally appeared before me and is known by me or has produced identification
(type of I.D.): FLDL on this 7th day of October, 2020.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



PERMIT NUMBER

PERMIT WORKSHEET

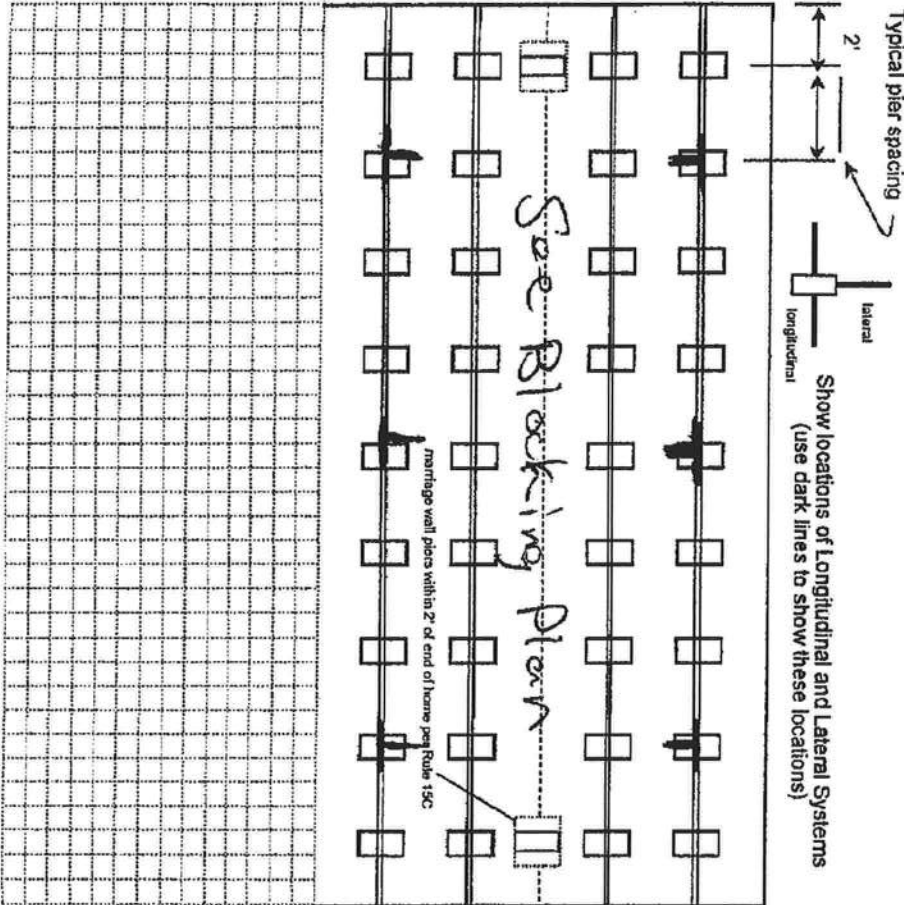
Installer Ernest Scott Johnson License # IH-1025249
Installer Mobile Phone # 352-494-8099
Address of home being installed _____

Manufacturer ScotBilt Length x width 56x28

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 ties exceed 5 ft 4 in.

Installer's initials ES



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 # 74429

Triple/Quad ☐ Serial # _____

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16' x 16' (256)	18 1/2' x 18 (342)	20' x 20' (400)	22' x 22' (484)	24' x 24' (576)	26' x 26' (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 23x31 70c
Perimeter pier pad size 11x22 16x18

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

- ① 17.5x25.5 ④ 17.5x25.5
- ② 11.1x17.5x25.5
- ③ 17.5x25.5

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver 1601

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

ANCHORS

4 ft _____
5 ft _____

FRAME TIES

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

PERMIT NUMBER

PERMIT WORKSHEET

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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 sidewall locations. 1 understand 5 ft anchors are required at all centerline tie 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 Ernest Scott Johnson

Date Tested Assumed Oliver 11/01 v uses

485 foot Anchors Both

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: lag Length: 7 Spacing: 24
Walls: Type Fastener: lag Length: 4 Spacing: 12
Roof: Type Fastener: lag Length: 7 Spacing: 24
For used homes 4 min. 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 requirement)

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 ES

Type gasket

Pg. 211

Installed:

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 _____

HITCH-END

ScotBilt
HOMES, INC.

DRAWING/MODEL NUMBER:
2856256GSM

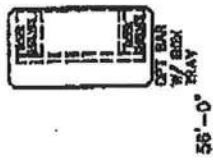
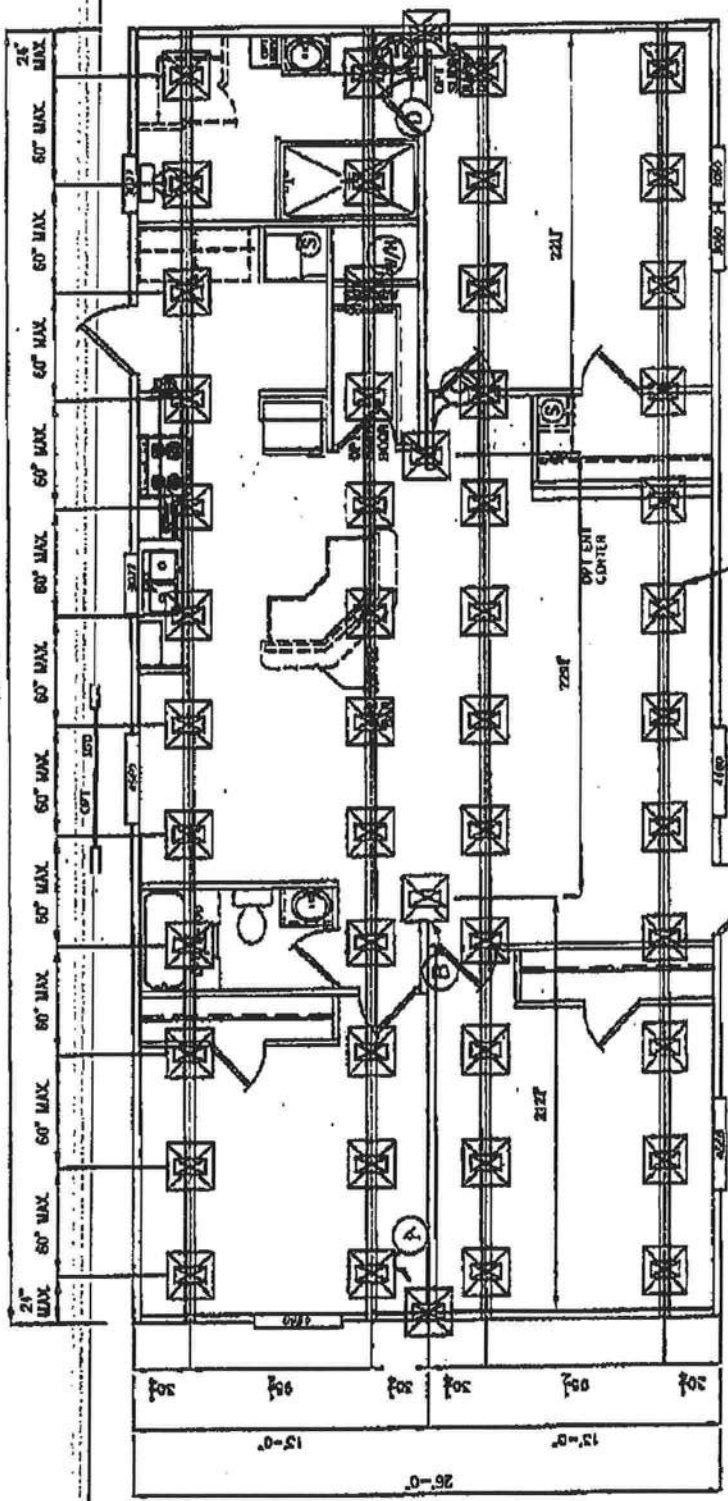
UNIT SPECIFICATIONS:
GRAND SLAM
28' X 90'
3 BEDROOM / 2 BATH

AREA
TOTAL: 1,455 sq ft
LIVING SPACE: 1,455 sq ft
PORCH: 0 sq ft

DATE: 02/02/2017
VERSION: C
REFERENCE: N256

PIER	PIER LOAD (LBS)	REQ. FOOTING AREA (SQ. IN.)
A	1365	267
B	3315	579
C	1755	329
D	1950	360

FLORIDA MULTIWIDE PIERING DIAGRAM
TYPICAL PER P-20
20' X 20' MAX @ 60" O.C. MAX.



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ 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.

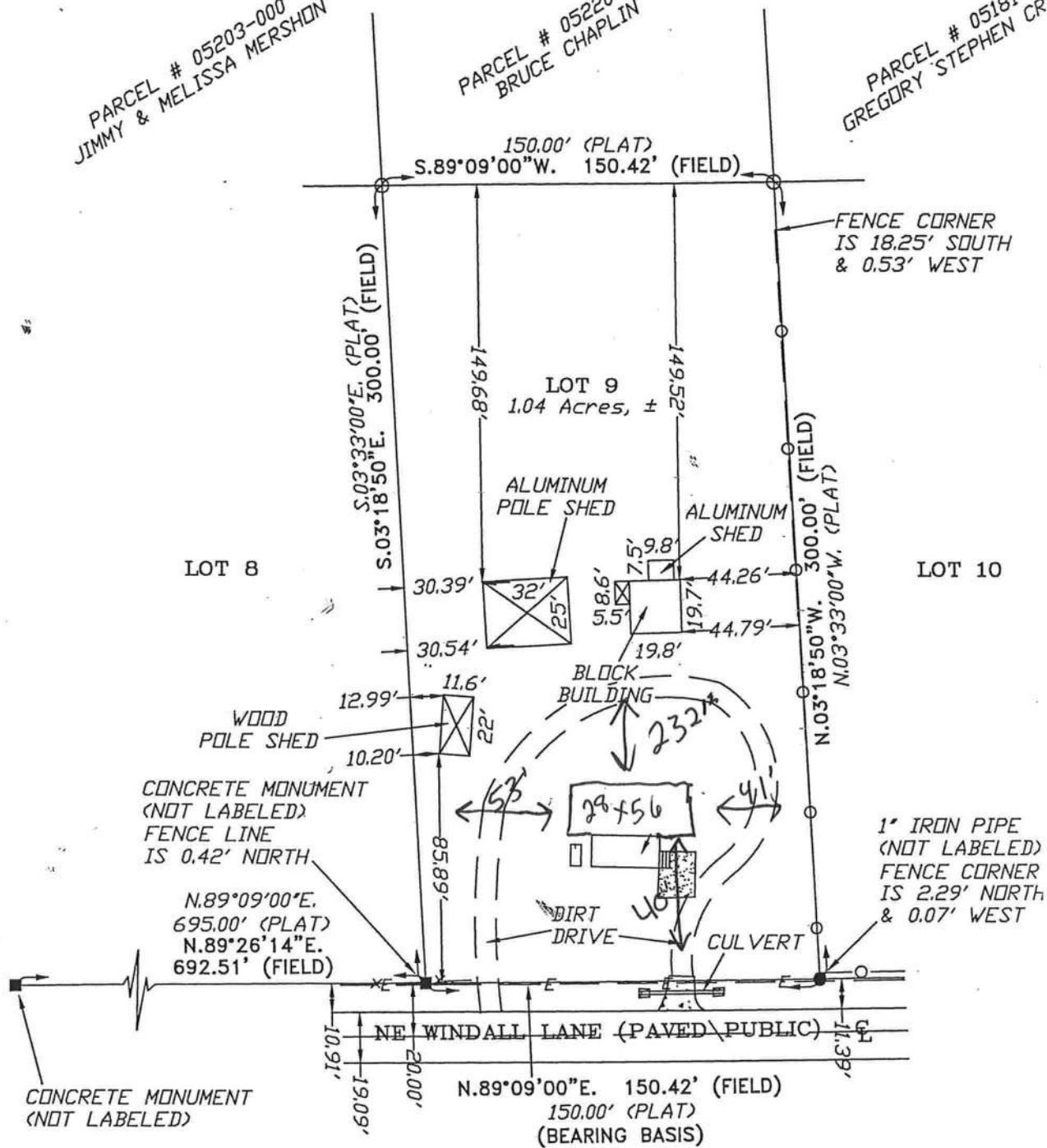
ELECTRICAL	Print Name <u>Steven Bernette</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386-867-3143</u>
MECHANICAL/ A/C _____	Print Name <u>Steven Bernette</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386-867-3143</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.

PARCEL # 05203-000
JIMMY & MELISSA MERSHON

PARCEL # 05220-000
BRUCE CHAPLIN

PARCEL # 05181-000
GREGORY STEPHEN CR



CERTIFIED TO:
STEVEN BURNETTE

Columbia County Property Appraiser

Jeff Hampton

2020 Preliminary Certified

updated: 8/12/2020

Parcel: << 20-3S-17-05253-000 >>

Owner & Property Info

Result: 1 of 1

Owner	BURNETTE STEVEN 263 NE WINDALL LN LAKE CITY, FL 32055		
Site	263 WINDALL LN, LAKE CITY		
Description*	LOT 9 PINE NEEDLES ESTATES S/D DC 1006-1822, PB 1014-2734, 1073-573, WD 1191-974, WD 1216-1858, WD 1408-776,777		
Area	1.028 AC	S/T/R	20-3S-17
Use Code**	MOBILE HOM (000200)	Tax District	2

*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

2019 Certified Values		2020 Preliminary Certified	
Mkt Land (1)	\$15,000	Mkt Land (2)	\$22,389
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$42,534	Building (1)	\$48,651
XFOB (3)	\$2,300	XFOB (3)	\$2,300
Just	\$59,834	Just	\$73,340
Class	\$0	Class	\$0
Appraised	\$59,834	Appraised	\$73,340
SOH Cap [?]	\$3,324	SOH Cap [?]	\$8,125
Assessed	\$56,510	Assessed	\$65,215
Exempt	HX H3 \$31,510	Exempt	HX H3 \$40,215
Total Taxable	county:\$25,000 city:\$25,000 other:\$25,000 school:\$31,510	Total Taxable	county:\$25,000 city:\$25,000 other:\$25,000 school:\$40,215

Aerial Viewer Pictometry Google Maps

☒ 2019 ☐ 2016 ☐ 2013 ☐ 2010 ☐ 2007 ☐ 2005 ☒ Sales
**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
3/18/2020	\$100	1408/0777	WD	I	U	11
3/17/2020	\$100	1408/0776	WD	I	U	11
6/21/2011	\$100	1216/1858	WD	I	U	11
3/15/2010	\$100	1191/0974	WD	I	U	11

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MANUF 1 (000200)	1999	2052	2052	\$48,651

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

▼ Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	0	\$100.00	1.000	8 x 20 x 0	(000.00)
0011	BARN,BLK A	0	\$1,000.00	1.000	20 x 20 x 0	(000.00)
0190	FPLC PF	2011	\$1,200.00	1.000	0 x 0 x 0	(000.00)

▼ Land Breakdown

A FDID 29091 State FL Incident Date MM 02 DD 07 YYYY 2020 Station 051 Incident Number 0000783 Exposure 000 ☐ Delete ☐ Change ☐ No Activity **NFIRS-1 Basic**

B Location Type ☒ Street address ☐ Intersection ☐ In front of ☐ Rear of ☐ Adjacent to ☐ Directions ☐ U.S. National Grid ☐ Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B, "Alternative Location Specification." Use only for wildland fires. Census Tract 263 NE WINDALL LN LAKE CITY FL 32055 ☐ Cross Street, Directions or National Grid, as applicable

C Incident Type ☒ 111 Building fire Incident Type

D Aid Given or Received ☒ None ☐ Mutual aid received ☐ Auto. aid received ☐ Mutual aid given ☐ Auto. aid given ☐ Other aid given ☐ Their FDID ☐ Their State ☐ Their Incident Number

E1 Dates and Times Month 02 Day 07 Year 2020 Hour 01 Min 16 Alarm ☒ Arrival ☒ Controlled ☐ Last Unit Cleared ☒ 0525 ☐ Check boxes if dates are the same as Alarm Date. ☐ ARRIVAL required, unless canceled or did not arrive ☐ CONTROLLED optional, except for wildland fires ☐ LAST UNIT CLEARED, required except for wildland fires

E2 Shifts and Alarms Local Option ☐ Shift or Platoon A 0 D51 Alarms District

E3 Special Studies Local Option ☐ Special Study ID# ☐ Special Study Value

F Actions Taken ☒ 11 Extinguishment by fire service personnel ☐ 12 Salvage & overhaul ☐ ☐ ☐ Primary Action Taken (1) Additional Action Taken (2) Additional Action Taken (3)

G1 Resources ☒ Check this box and skip this block if an Apparatus or Personnel Module is used. Apparatus ☐ Personnel ☐ Suppression ☐ EMS ☐ Other ☐ Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses and Values **LOSSES:** Required for all fires if known. Optional for non-fires. Property \$ 000 058 205 Contents \$ 000 010 000 **PRE-INCIDENT VALUE:** Optional Property \$ Contents \$

Completed Modules ☒ Fire-2 ☒ Structure Fire-3 ☐ Civilian Fire Cas.-4 ☐ Fire Service Cas.-5 ☐ EMS-6 ☐ HazMat-7 ☐ Wildland Fire-8 ☒ Apparatus-9 ☒ Personnel-10 ☐ Arson-11

H1 Casualties ☒ None ☐ Deaths ☐ Injuries ☐ Fire Service ☐ Civilian ☐ **H2 Detector** Required for confined fires. ☐ Detector alerted occupants ☐ Detector did not alert them ☐ Unknown

H3 Hazardous Materials Release ☐ None ☐ Natural gas: slow leak, no evacuation or HazMat actions ☐ Propane gas: <21-lb tank (as in home BBQ grill) ☐ Gasoline: vehicle fuel tank or portable container ☐ Kerosene: fuel burning equipment or portable storage ☐ Diesel fuel/fuel oil: vehicle fuel tank or portable storage ☐ Household solvents: home/office spill, cleanup only ☐ Motor oil: from engine or portable container ☐ Paint: from paint cans totaling <55 gallons ☐ Other: special HazMat actions required or spill > 55 gal (Please complete the HazMat form.)

Mixed Use Property ☐ Not mixed ☐ Assembly use ☐ Education use ☐ Medical use ☐ Residential use ☐ Row of stores ☐ Enclosed mall ☐ Business & residential ☐ Office use ☐ Industrial use ☐ Military use ☐ Farm use ☐ Other mixed use

J Property Use ☒ Structures ☐ None ☐ Church, place of worship ☐ Restaurant or cafeteria ☐ Bar/Tavern or nightclub ☐ Elementary school, kindergarten ☐ High school, junior high ☐ College, adult education ☐ Nursing home ☐ Hospital ☐ Playground or park ☐ Crops or orchard ☐ Forest (timberland) ☐ Outdoor storage area ☐ Dump or sanitary landfill ☐ Open land or field

☐ Clinic, clinic-type infirmary ☐ Doctor/Dentist office ☐ Prison or jail, not juvenile ☒ 1- or 2-family dwelling ☐ Multifamily dwelling ☐ Rooming/Boarding house ☐ Commercial hotel or motel ☐ Residential, board and care ☐ Dormitory/Barracks ☐ Food and beverage sales ☐ Vacant lot ☐ Graded/Cared for plot of land ☐ Lake, river, stream ☐ Railroad right-of-way ☐ Other street ☐ Highway/Divided highway ☐ Residential street/driveway

☐ Household goods, sales, repairs ☐ Gas or service station ☐ Motor vehicle/boat sales/repairs ☐ Business office ☐ Electric-generating plant ☐ Laboratory/Science laboratory ☐ Manufacturing plant ☐ Livestock/Poultry storage (barn) ☐ Non-residential parking garage ☐ Warehouse ☐ Construction site ☐ Industrial plant yard

Look up and enter a Property Use code and description only if you have NOT checked a Property Use box. ☐ Property Use ☐ Code ☐ Property Use Description