

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11)		Zoning Official <u>RLK</u> <u>11 Sept. 2012</u>	Building Official <u>J.C. 9-19-12</u>
AP# <u>1209-38</u>	Date Received <u>5/14</u>	By <u>JW</u>	Permit # <u>30480</u>
Flood Zone <u>X</u>	Development Permit <u>N/A</u>	Zoning <u>RSF/MH-2</u>	Land Use Plan Map Category <u>RES Low DEN.</u>
Comments <u>Replacing existing MH, meets density requirements</u>			
FEMA Map# <u>N/A</u>	Elevation <u>N/A</u>	Finished Floor <u>1' above</u>	River <u>N/A</u> In Floodway <u>N/A</u>
☒ Site Plan with Setbacks Shown	☒ EH # <u>11-0004E</u>	☐ EH Release	☒ Well letter ☐ Existing well
☒ Recorded Deed or <u>Affidavit from land owner</u>	☒ Installer Authorization <u>one time</u>	☐ State Rd Access	☒ 911 Sheet
☐ Parent Parcel #	☐ STUP-MH	☐ F W Comp. letter	☐ App Fee Pd ☒ VF Form
IMPACT FEES: EMS		Fire	Corr
		☐ Out County	☒ In County <u>pt</u>
Road/Code	School	= TOTAL <u>Suspended March 2009</u> ☐ Ellisville Water Sys	

Property ID # 20-35-17-05172-000 Subdivision NA

- New Mobile Home _____ Used Mobile Home ☒ MH Size 16x66 Year 1998
- Applicant Wendy Grennell Phone # 386-288-2428
- Address 3104 SW Old Wire Rd Ft White FL 32038
- Name of Property Owner Michael S. Davis Phone# 386-466-2711
- ☒ 911 Address 1008 NE Double Run Rd Lake City FL 32055
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Gregory Davis Phone # 386-755-6193
 Address 1008 NE Double Run Rd Lake City FL
- Relationship to Property Owner Brother
- Current Number of Dwellings on Property 2
- Lot Size _____ Total Acreage 2.060
- 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 - owes NO assessments ON this MH.
- Driving Directions to the Property 441 North TR on Gum Swamp immediate (L) on Double Run to 1008 on (L) where pavement ends
- ☒ Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terr Lake City FL 32004
 - License Number IH1025145 Installation Decal # 12547

↓ advised Wendy 7.19.12

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the Installer.
Submit the originals with the packet.

Installer Ronnie Noffs License # TH10214K11

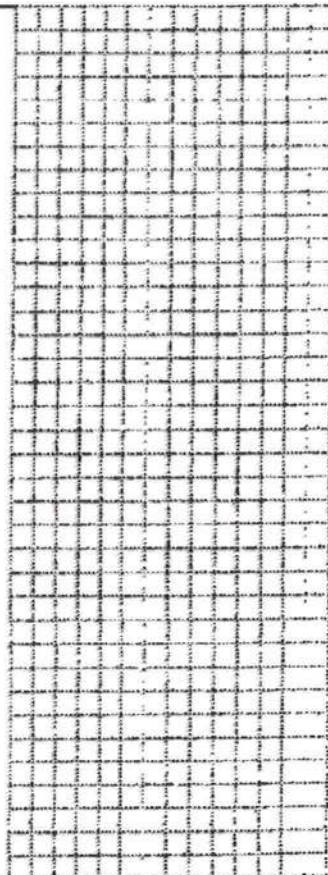
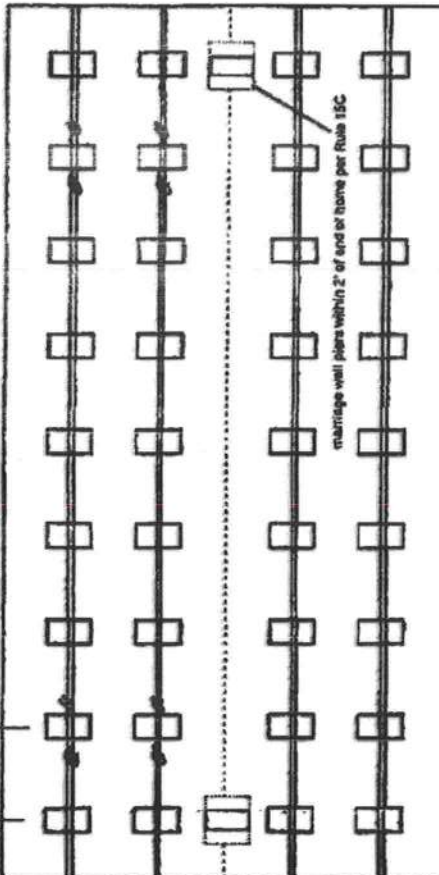
911 Address where home is being installed. 1008 NE Double Run Rd

Manufacturer Eketwood Length x width 16x80

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. R

Installer's initials



page 1 of 2

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 # 12547

Triple/Quad ☐ Serial # 41503

PIER SPACING TABLE FOR USED HOMES

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

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

PIER PAD SIZES

I-beam pier pad size 12x12

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 16x16

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
SW	SW
SW	SW
SW	SW

ANCHORS 4R 5R

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer _____

OTHER TIES

Sidewall Number 21

Longitudinal Marriage wall Number 4

Shearwall _____

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 600 psi or check here to declare 1000 lb. soil without testing.

x 600 x 600 x 600

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 600 x 600 x 600

TORQUE PROBE TEST

The results of the torque probe test is 255 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5' anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the adjacent locations. I 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

Date Tested

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: _____
Walls: _____
Roof: _____
Type Fastener: SU Length: SU Spacing: SU
Type Fastener: SU Length: SU Spacing: SU
Type Fastener: SU Length: SU Spacing: SU
For used homes a min. 30 gauge, 4" 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.

General Requirements for Installation

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 SU

Type gasket _____
Pg. _____

Install at:

Between Floors Yes _____
Between Walls Yes _____
Bottom of Ridgebeam Yes _____

Weathering

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

Skirting

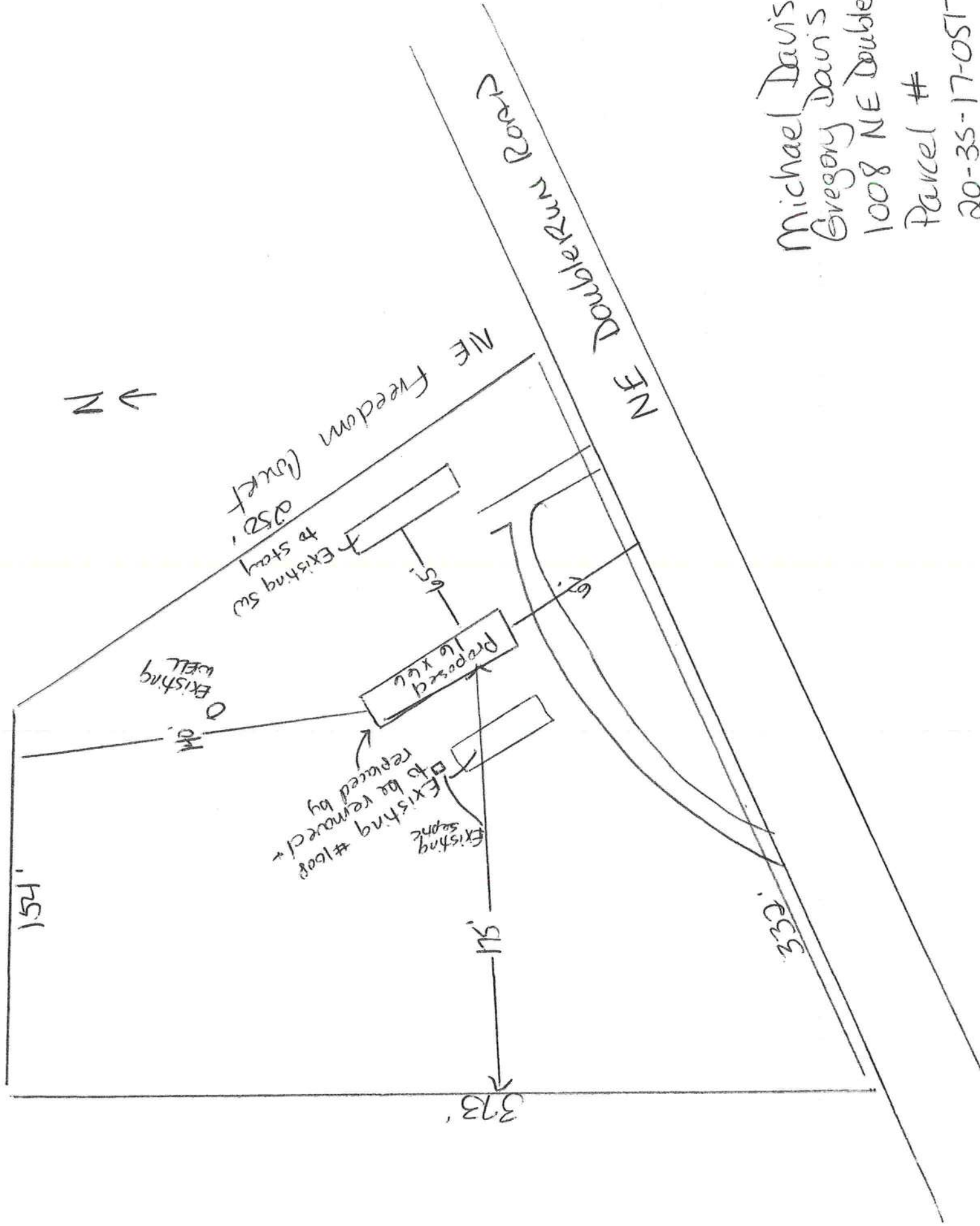
Skirting to be installed. Yes _____ No _____
Dryer vent installed outside of skirting. Yes _____ No _____
Range downflow vent installed outside of skirting. Yes _____ No _____
Drain lines supported at 4 foot intervals. Yes _____ No _____
Electrical crossovers protected. Yes _____ No _____
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature Thane

Date 9-12-01

Michael Davis
Gregory Davis
1008 NE Double Run
Parcel #
20-35-17-05172-



Return to: (enclose self-addressed stamped envelope)

Name: Robert Y. Davis

Address: 178 Box 227
Lake City FL 32055

This instrument Prepared by:

Name:

Address: 0808 PG0599

Property Appraiser's Parcel Identification

Folio Number(s):

Grantee(s) S.S. # (s)

QUIT CLAIM DEED

RAMCO FORM 8

95-09121

FILED IN PUBLIC
RECORDS OF COLUMBIA COUNTY, FL

1995 JUL 21 AM 11:13

CLERK OF COURTS
COLUMBIA COUNTY, FLORIDA
BY [Signature]

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed, Executed the 19th day of July, 1995, by
ROBERT Y. DAVIS, ROUTE 8, BOX 227, LAKE CITY, FL. 32055,
first party, to MICHAEL J. DAVIS,
whose post office address is ROUTE 8, BOX 227, LAKE CITY, FL. 32055,
second party.

(Wherever used herein the terms "first party" and "second party" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the first party, for and in consideration of the sum of \$ CIF,
in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release,
and quit claim unto the second party forever, all the right, title, interest, claim and demand which the said first
party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of
COLUMBIA, State of FLORIDA, to-wit:

Commence at the NW corner of the NE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 20,
Township 3 South, Range 17 East and run South, along the West
line of said NE $\frac{1}{4}$ of NE $\frac{1}{4}$, 161.5 feet; thence East, parallel to
the North line of said NE $\frac{1}{4}$ of NE $\frac{1}{4}$, 80 feet for a POINT OF
BEGINNING and run thence East, parallel to the North line of said
NE $\frac{1}{4}$ of NE $\frac{1}{4}$, 154.5 feet to a point on the West line of Driveway;
250 feet to the North line of Double-Run Road; thence South 57' 08"
West, along said road 333.3 feet to a point 80 feet East of the East
line of said NE $\frac{1}{4}$ of NE $\frac{1}{4}$; thence Northerly 373.2 feet to POINT OF
BEGINNING. Containing 2.06 acres, more or less.

To Have and to Hold The same together with all and singular the appurtenances thereunto belonging
or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said
first party, either in law or equity to the only proper use, benefit and behoof of the said second party forever.

In Witness Whereof, the said first party has signed and sealed these presents the day and year first
above written.

Signed, sealed and delivered in the presence of:

Sonia A. Markham

Witness Signature (as to first Grantor)

Sonia A. Markham

Printed Name

Carolyn Baker

Witness Signature (as to first Grantor)

CAROLYN BAKER

Printed Name

Witness Signature (as to Co-Grantor, if any)

Printed Name

Witness Signature (as to Co-Grantor, if any)

Printed Name

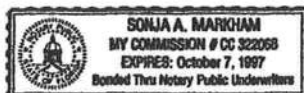
STATE OF FLORIDA

COUNTY OF COLUMBIA

ROBERT Y. DAVIS

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that HE
executed the same, and an oath was not taken. (Check one:) ☐ Said person(s) is/are personally known to me. ☐ Said person(s) provided the following
type of identification: FL. DRIVER LICENSE

NOTARY RUBBER STAMP SEAL



Robert Y. Davis

Grantor Signature

ROBERT Y. DAVIS

Printed Name

Box 227

Post Office Address

Co-Grantor Signature, (if any)

Printed Name

Post Office Address

INSTRUMENT STAMP

INTANGIBLE TAX

P. DEWITT CASON, CLERK OF

COURTS, COLUMBIA COUNTY

BY [Signature]

I hereby Certify that on this day, before me, an officer duly authorized
to administer oaths and take acknowledgments, personally appeared

Witness my hand and official seal in the County and State last aforesaid

this 21 day of July, A.D. 1995

Sonia A. Markham

Sonia A. Markham

Printed Name

IN THE CIRCUIT COURT FOR COLUMBIA COUNTY, FLORIDA

ESTATE OF

JOBIE DAVIS

PROBATE DIVISION

File Number

Division

Deceased.

ORDER OF SUMMARY ADMINISTRATION
(testate)

On the petition of Robert Yancy Davis
for summary administration of the estate of JOBIE DAVIS
deceased, the court finding that the decedent died on March 19, 19 95;
that all interested persons have been served proper notice of hearing or have waived notice thereof;
that the material allegations of the petition are true; that the will dated January 28, 19 76
has been admitted to probate by order of this court as and for the last will of the decedent; and that the
decedent's estate qualifies for summary administration and an Order of Summary Administration should
be entered, it is

ADJUDGED that:

1. There be immediate distribution of the assets of the decedent as follows:

Name	Address	Asset, Share or Amount
Robert Yancy Davis	Rt. 8, Box 227 Lake City, FL 32055	Entire Estate

95-08224

1995 JUN 23 PM 2 15

0807 PG 1122

OFFICIAL RECORDS

COLLECTED BY *[Signature]*

Bar Form No. P-2.0300-1 of 2

Florida Lawyers Support Services, Inc.
Revised August 1991

THIS ORIGINAL IS
OF POOR LEGIBILITY



I hereby certify this to be a true
and correct copy of the document

Witness my hand and seal this

day of

P. DAVIS PASON, Clerk

By

Columbia County Property Appraiser

CAMA updated: 8/2/2012

2011 Tax Year

Parcel: 20-3S-17-05172-000

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Search Result: 1 of 1

Owner & Property Info

Owner's Name	DAVIS MICHAEL J		
Mailing Address	1274 N SUNAPEE AVE ATLANTIC BEACH, FL 32233		
Site Address	1008 NE DOUBLE RUN RD		
Use Desc. (code)	MOBILE HOM (000202)		
Tax District	2 (County)	Neighborhood	20317
Land Area	2.060 ACRES	Market Area	06
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM NW COR OF NE1/4 OF NE1/4, RUN S 161.5 FT, E 80 FT FOR POB, RUN E 154.5 FT, SE 250 FT TO N R/W DOUBLE RUN RD, RUN SW ALONG R/W APPROX 332 FT MOL, BEING 80 FT E OF W LINE OF NE1/4 OF NE1/4, RUN N'RLY 373.2 FT TO POB. PROB ORB 808-600,		



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$13,555.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$3,820.00
XFOB Value	cnt: (1)	\$450.00
Total Appraised Value		\$17,825.00
Just Value		\$17,825.00
Class Value		\$0.00
Assessed Value		\$17,825.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$17,825 Other: \$17,825 Schl: \$17,825	

2012 Working Values

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
7/19/1995	808/599	QC	I	U	01	\$0.00
7/1/1980	450/524	03	V	Q		\$7,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1961	BELOW AVG. (03)	1056	1232	\$3,247.00
2	MOBILE HME (000800)	1975	MINIMUM (01)	672	672	\$1,159.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2011	\$300.00	0000001.000	0 x 0 x 0	(000.00)
0285	SALVAGE	2011	\$100.00	0000001.000	0 x 0 x 0	(000.00)
0296	SHED METAL	2011	\$300.00	0000001.000	0 x 0 x 0	(000.00)
0255	MBL HOME S	2011	\$800.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

--	--	--	--	--	--	--

>> Print as PDF <<

COMM NW COR OF NE1/4 OF NE1/4, DAVIS MICHAEL J 20-3S-17-05172-000 Columbia County 2012 R										CARD 001 of 002									
RUN S 161.5 FT, E 80 FT FOR 1274 N SUNAPEE AVE										BY JEFF									
POB, RUN E 154.5 FT, SE 250 FT ATLANTIC BEACH, FL 32233										PRINTED 8/02/2012 11:51									
TO N R/W DOUBLE RUN RD, RUN SW										APPR 6/24/2011 DFRP									

BUSE 000800 MOBILE HME AE? Y 1056 HTD AREA 64.184 INDEX 20317.00 DIST 2 PUSE 000202 MOBILE HOME/M H																			
MOD 2 MOBILE HME BATH 2.00 1100 EFF AREA 14.762 E-RATE 100.000 INDX STR 20- 3S- 17																			
EXW 03 BELOW AVG FIXT 16,238 RCN 1961 AYB MKT AREA 06										4,406 BLDG									
% N/A BDRM 2 20.00 %GOOD 3,247 B BLDG VAL 1961 EYB (PUD1										1,500 XFOB									
RSTR 03 GABLE/HIP RMS AC 2.060										12,400 LAND									
RCVR 01 MINIMUM UNTS 3 FIELD CK: 3										0 CLAS									
% N/A C-W% 3 LOC: 1008 DOUBLE RUN RD NE 3										0 MKTUSE									
INTW 04 PLYWOOD HGHT 3 +----12--+-10--+										18,306 JUST									
% N/A PMTR 3										18,306 APPR									
FLOR 14 CARPET STYS 1.0 3 IBAS1993 IBAS1993 3										BLK									
10% 08 SHT VINYL ECON 3 I I I 3										LOT									
HTTP 02 CONVECTION FUNC 3 I I I 3										MAP#									
A/C 02 WINDOW SPCD 3 I I I 3										0 EXPT									
QUAL 02 02 DEPR 09 3 I I I 3										TXDT 002 0 COTXBL									
FNDN N/A UD-1 N/A 3 I I I 3																			
SIZE N/A UD-2 N/A 3 I I I 3																			
CEIL N/A UD-3 N/A 3 4 4 4 3										BAS1993=W12 S48 UOP1993=S8 E22N8 W22\$ E12									
ARCH N/A UD-4 N/A 3 8 8 8 3										N48\$ BAS1993=S48 E10 N48 W10\$.									
FRME 01 NONE UD-5 N/A 3 I I I 3																			
KTCH 01 01 UD-6 N/A 3 I I I 3																			
WINDO N/A UD-7 N/A 3 I I I 3																			
CLAS N/A UD-8 N/A 3 I I I 3																			
OCC N/A UD-9 N/A 3 I I I 3																			
COND 02 02 % N/A 3 I I I 3																			
SUB A-AREA % E-AREA SUB VALUE 3 I I I 3										PERMITS									
BAS93 1056 100 1056 3117 3 +-----22-----+ 3										NUMBER DESC AMT ISSUED									
UOP93 176 25 44 130 3 8UOP1993 8 3																			
3 I I 3																			
3 +-----22-----+ 3										SALE									
3										BOOK PAGE DATE PRICE									
3										808 599 7/19/1995 U I									
3										GRANTOR ROBERT Y DAVIS									
3										GRANTEE MICHAEL J DAVIS									
3										450 524 7/01/1980 Q V 7000									
3										GRANTOR									
3										GRANTEE									

TOTAL 1232 1100 3247																			
-----EXTRA FEATURES-----										FIELD CK:									
AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ										UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE									
Y 0296 SHED METAL 1 2011 1.00										1.000 UT 300.000 300.000 100.00 300									
Y 0285 SALVAGE 1 2011 1.00										1.000 UT 100.000 100.000 100.00 100									
Y 0296 SHED METAL 1 2011 1.00										1.000 UT 300.000 300.000 100.00 300									
Y 0255 MBL HOME STO 1 2011 1.00										1.000 UT 800.000 800.000 100.00 800									

LAND DESC ZONE ROAD {UD1 {UD3 FRONT DEPTH										FIELD CK:									
AE CODE TOPO UTIL {UD2 {UD4 BACK DT										ADJUSTMENTS									
Y 000102 SFR/MH										1.00 1.00 1.00 .90 2.060 AC 5609.660 5048.54 10,400									
Y 009945 WELL/SEPT 00										1.00 1.00 1.00 1.00 1.000 UT 2000.000 2000.00 2,000									

ARCH N/A UD-4 N/A 3
 FRME 01 NONE UD-5 N/A 3
 KTCH N/A UD-6 N/A 3
 WND0 N/A UD-7 N/A 3
 CLAS N/A UD-8 N/A 3
 OCC N/A UD-9 N/A 3
 COND N/A 3
 SUB A-AREA % E-AREA SUB VALUE 3
 BAS11 672 100 672 1159 3

----- PERMITS -----

NUMBER DESC AMT ISSUED

----- SALE -----

BOOK PAGE DATE PRICE

GRANTOR

GRANTEE

GRANTOR

GRANTEE

TOTAL 672 672 1159

-----EXTRA FEATURES----- FIELD CK:

AE BN CODE DESC LEN WID HGHT QTY QL YR ADJ UNITS UT PRICE ADJ UT PR SPCD % %GOOD XFOB VALUE

LAND DESC ZONE ROAD {UD1 {UD3 FRONT DEPTH FIELD CK:
AE CODE TOPO UTIL {UD2 {UD4 BACK DT ADJUSTMENTS UNITS UT PRICE ADJ UT PR LAND VALUE

B

Fax to Michael

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

This is to certify that I, (We), MICHAEL J. DAVIS
owner of the below described property:

Tax Parcel No. 2035-17-05172-000

Subdivision (name, lot, block, phase) _____

Give my permission to Gregory N. Davis to place a
mobile home/travel trailer/single family home (circle one) on the above mentioned
property.

I (We) understand that this could result in an assessment for solid waste and fire
protection services levied on this property.

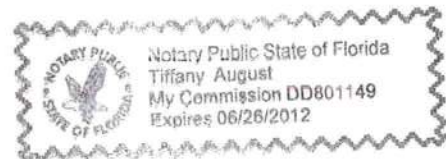
[Signature]
Owner 10/3/2010

Owner

SWORN AND SUBSCRIBED before me this 28 day of DECEMBER,
20 10. This (these) person(s) are personally known to me or produced
ID FL. D. LICENSE

#D120-550-55-170-0

Tiffany August
Notary Signature



Michael / County Appraiser /

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1209-38 CONTRACTOR Bonnie Noris PHONE 386-623-7716

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>Greg Davis</u> License #: <u>owner</u>	Signature: <u>Greg Davis</u> Phone #: <u>755-6193</u>
☒ MECHANICAL/ A/C	Print Name: <u>Greg Davis</u> License #: <u>owner</u>	Signature: <u>Greg Davis</u> Phone #: <u>755-6193</u>
☒ PLUMBING/ GAS 679	Print Name: <u>Roxanne Smith</u> License #: <u>I/H/02514511</u>	Signature: <u>Roxanne Smith</u> Phone #: <u>252-3871</u>

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.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 9-17-12 BY LH ¹²⁰⁹⁻³⁸ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Michael Davis PHONE _____ CELL 466-2711

ADDRESS 1008 NE Double Run Rd Lake City FL 32055

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 N, (R) Gum Swamp, (L) Double Run, where the pavement ends on (L) to 1008

MOBILE HOME INSTALLER Ronnie Norris PHONE _____ CELL 623-7716

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 98 SIZE 16 X 66 COLOR _____

SERIAL No. 12547

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

\$50.00

Date of Payment: 9-14-12

Paid By: Wendy Brunell

Notes: 288-2428

- P SMOKE DETECTOR () OPERATIONAL () MISSING
- P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
- P DOORS () OPERABLE () DAMAGED
- P WALLS () SOLID () STRUCTURALLY UNSOUND
- P WINDOWS () OPERABLE () INOPERABLE
- P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
- P CEILING () SOLID () HOLES () LEAKS APPARENT
- P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

- P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
- P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
- P ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS:

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE

ID NUMBER

DATE

304 9-17-12

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.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: 9/14/2012 DATE ISSUED: 9/13/2012

ENHANCED 9-1-1 ADDRESS:

1008 NE DOUBLE RUN RD
LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

20-3S-47-05172-000

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE ON
PARCEL. OLD STRUCTURE TO BE REMOVED.

Address Issued By: SIGNED: / RONAL N. CROFT
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.**



APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-0004E

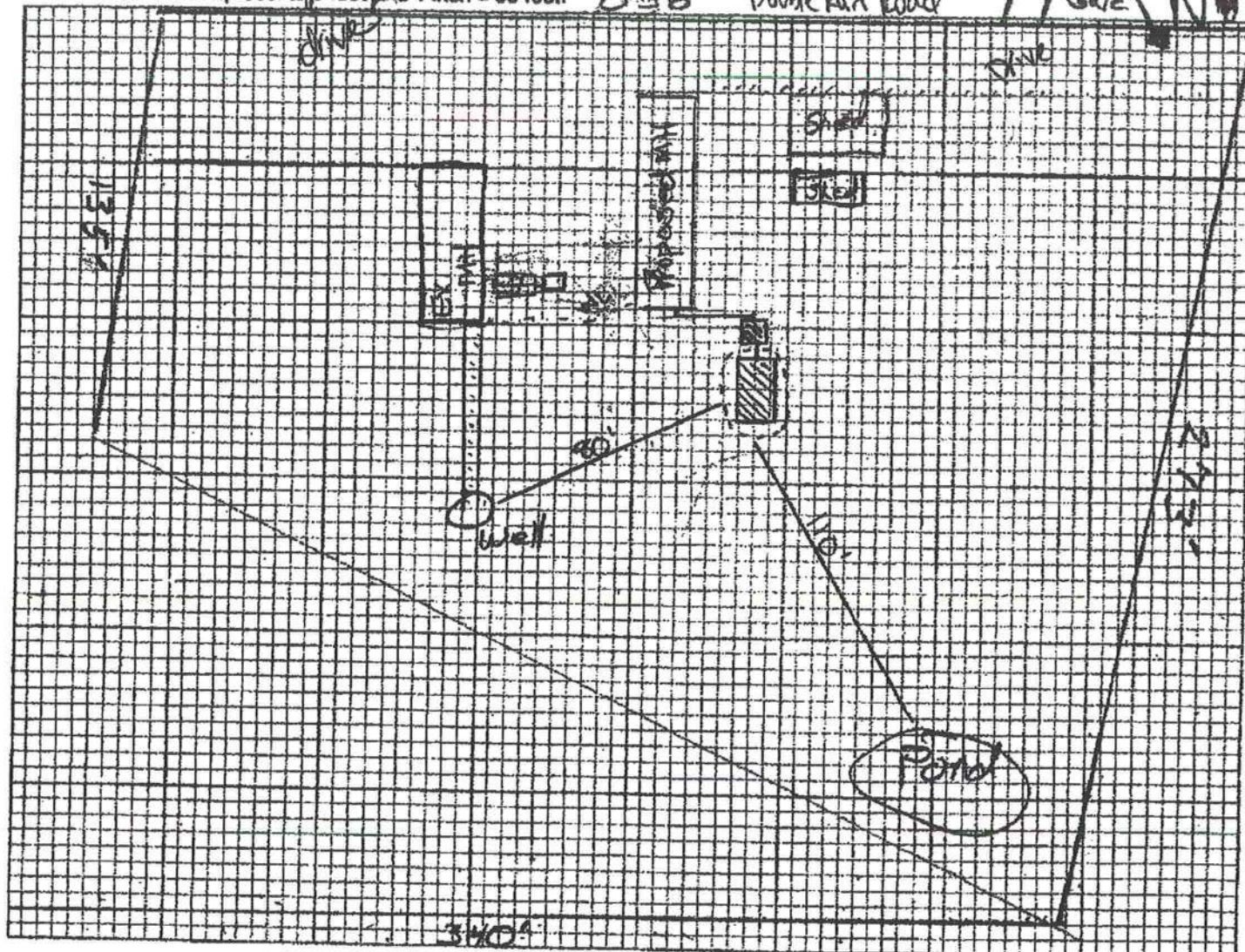
PART II - SITE PLAN-

Scale: Each block represents $\frac{1}{2}$ foot and 1 inch = 50 feet.

356

Double Run Road

1 / Gate



Notes:

Site Plan submitted by:

Gregory M. Davis
Signature

Signature

Plan Approved X

Not Approved

By

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



CHERRYBROOK CALVINY
OF

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 20-3S-17-05172-000

Building permit No. 000030480

Permit Holder RONNIE NORRIS

Owner of Building MICHAEL J. DAVIS(GREG DAVIS M/H)

Location: 1008 NE DOUBLE RUN ROAD, LAKE CITY, FL 32055



Date: 09/26/2012

Greg Davis

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)