### PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official 311 Building Official AP# 1902-82 Date Received 2/27/19 By (15) Permit # 378.63
Flood Zone X Development Permit Zoning A-3 Land Use Plan Map Category Ag
Comments
FEMA Map# Elevation Finished Floor River In Floodway
□ Recorded Deed or Property Appraiser PO Site Plan EH# 19-0/9/ Well letter OR
□ Existing well □ Land Owner Affidavit □ Installer Authorization □ FW Comp. letter ☑ App Fee Paid
□ DOT Approval □ Parent Parcel # □ STUP-MH □ 11 App
□ Ellisville Water Sys □ Assessment Pood on Property □ Qut County □ In County □ Sub VF Form
0 w-u
Property ID # 07-6S-17-03816-418 Subdivision Tustenuggee Trace Unrec Lot# 18
New Mobile Home
■ Applicant Dale Burd Phone # 386-365-7674
<ul> <li>Address 20619 County Road 137, Lake City, FL, 32024</li> </ul>
Name of Property Owner_James Reddy
• 911 Address 231 SW Tanagur Ct. Fortwhite fe 32038
■ Circle the correct power company - <u>FL Power &amp; Light</u> - ( <u>Clay Electric</u> )
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home Same Phone # 207-468-0004
Address 1 Longview Terr, Kennebunk, ME, 04043
Relationship to Property Owner Same
Current Number of Dwellings on Property 0
Lot Size 650 x 671 Total Acreage 10.02
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
- 15 this mobile nonie Replacing an Existing mobile nonie
<ul> <li>Driving Directions to the Property 441 South, TR Tustenuggee Ave, TR Jasmine St, TR Tanage</li> </ul>
to end on right, follow drive back to sight
Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
Installers Address 6355 SE CR 245, Lake City, FL, 32025
License Number <u>IH-1025386</u> Installation Decal # 50767

# COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer. Submit the originals with the packet 911 Address where home is being installed. Manufacturer Typical pier spacing Ŋ I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in NOTE: Kobert 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 Sheppard **Funda** langhuderal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Length x width emago wail piess within 2" of end of horne Installer's initials 0 1/1/K License # 日 IH1025386 52 98x8 38 Of Tule LSC bearing capacity Peod Home is installed in accordance with Rule 15-C Home installed to the Manufacturer's Installation Manual New Home interpolated from Rule 15C-1 prer Double wide Single wide Perimeter pier pad size Triple/Quad List all marriage wall openings greater than 4 foot and their pier pad sizes below Other pler pad sizes (required by the mig.) I-beam pier pad size Manufacturer - Oliver 1101 V Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Longitudinal Stabilizing Device (LSD) 1500 psi 2000 psi 2500 psi 3000 psi Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (84 m) Fooler size TIEDOWN COMPONENTS 16" x 16" PIER SPACING TABLE FOR USED HOMES Ę Q PIER PAD SIZES Used Home Wind Zone II Serial # Installation Decal # 18 1/2" x 18 1/2" (342) Pier pad size spacing table. 16.4/6 52861 20" x 20" त (400) Wind Zone III 22" x 22" -M-1190-(484)\* Longitudinal
Marriage wall
Shearwall 4# within 2' of end of home spaced at 5' 4" oc Sidewall POPULAR PAD SIZES 13 1/4 x 26 20 x 20 8.5 x 18 Pad Size OTHER TIES 24" X 24" FRAME TIES (576)\* ANCHORS 5# प् 26" x 26" (676)676

# COLUMBIA COUNTY PERMIT WORKSHEET

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N

Installer verifies all	D1, 144 PM
	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg
	Electrical
Other	
Drain lines supported at 4 Electrical crossovers prote	Calcinoton
Range downflow vent insti	6/6
Skirting to be installed. Yo	installer Name Kobert Shanged
	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
Siding on units is installed Fireplace chimney installed	reading is 275 or less and where the mobile notine manufacturer may requires enchors with 4000 lb holding capacity.  Installer's initials
The hattamhasid will be it	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the side-wall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test
P9	The results of the torque probe test is
Type pasket Form	TORQUE PROBE TEST
a result of a poorly installe of tape will not serve as a	×
l understand a properly inchange and that condense	<ol> <li>Using 500 lb. Increments, take the lowest reading and round down to that increment.</li> </ol>
	<ol><li>Take the reading at the depth of the footer.</li></ol>
will be centered roofing nails at 2	1 Test the perimeter of the home at 6 locations.
Roof. Type Fastener. For used homes	POCKET PENETROMETER TESTING METHOD
	×
	It testing.
Water drainage: Natural_	The pocket penetromater tests are rounded down topst
Table and owned materia	POCKET PENETROMETER TEST

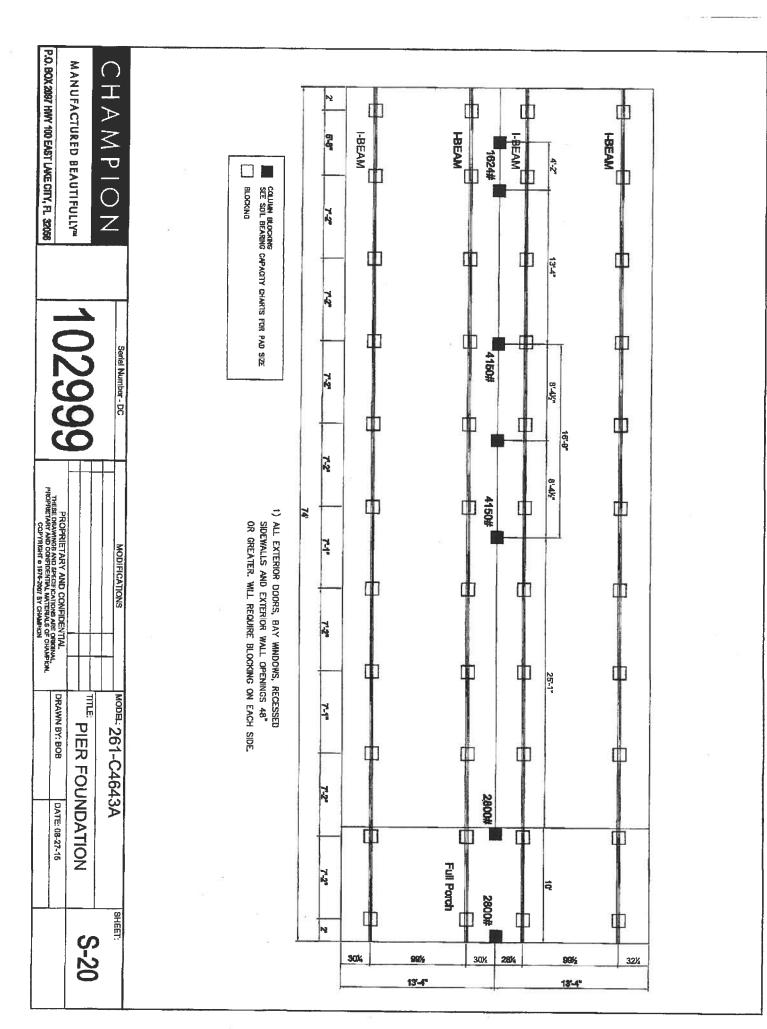
Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes Drain ilnes supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:	Wootherproofing  The bottomboard will be repaired and/or taped. Yes Pg. Pg. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	of tape will not serve as a gasket benig installed. Installed:  Type gasket  Type gasket  Type gasket  Between Floors Yes  Between Walls Yes  Bottom of ridgebeam Yes  Bottom of ridgebeam Yes	roofing nails at 2" on center on both sides of the centerline  Gasket (weatherprofine requirement)  Lunderstand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are noted. Independent a string that the condensation is a string to the condensation of the condensation of the condensation.	Floor Type Fastener: 14.55 Walls: Type Fastener: 14.55 Roof: Type Fastener: 14.55 For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the root and fastened with galv.	Debris and organic material removed Vater drainage: Natural Swale Pad Other
--	--	--	--	--	---

is all Information given with this permit worksheet is accurate and true based on the Date 0/25/19

Installer Signature

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

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

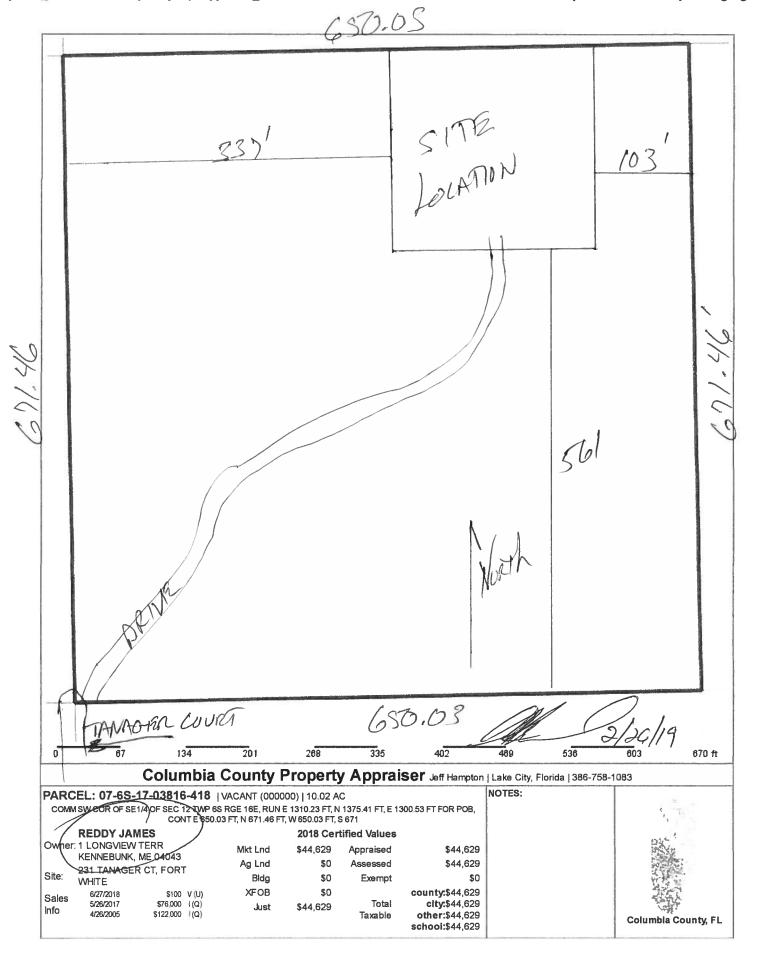


### STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	A 1	Permit	Application Number	
L E	ddy	PART II - SITEPLAN	0.10	
Scale: 1 inch = 40 feet.			210	
Coale. Tillatt 440 foot.	29'	53' 3BR 17685	136'	
Notes:	CY CY	SA CO DEL	VENTY WELL	
Notes:				-
Site Plan submitted by:_		2/24/19	MASTER CONTRACTOR	_
Plan Approved		Not Approved	Date	
Ву			County Health Departmer	ıt

### ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky 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:
 6/26/2018 10:34:09 AM

 Address:
 231 SW TANAGER Ct

 City:
 FORT WHITE

 State:
 FL

 Zip Code
 32038

 Parcel ID
 03816-418

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



07-6S-17-03816-418 Parcel:

Owner & Property Info Result: 1 of 0			
Owner	REDDY JAMES 1 LONGVIEW TERR KENNEBUNK, ME 04043		
Site	231 TANAGER	CT, FORT WH	ITE
Description*	COMM SW COR OF SE1/4 OF SEC 12 TWP 6S RGE 16E, RUN E 1310.23 FT, N 1375.41 FT, E 1300.53 FT FOR POB, CONT E 650.03 FT, N 671.46 FT, W 650.03 FT, S 671.46 FT TO POB. (AKA LOT 18 TUSTENUGGEE TRACE S/D UNREC). 917-1113, WD 1337-1839, WD 1364-180,		
Area	10.02 AC	S/T/R	07-6S-17E
Use Code**	VACANT (000000)	Tax District	3

<sup>\*</sup>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 V	/alues	
2018 Cert	ified Values	2019 Wor	king Values
Mkt Land (1)	\$44,629	Mkt Land (1)	\$44,629
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$44,629	Just	\$44,629
Class	\$0	Class	\$0
Appraised	\$44,629	Appraised	\$44,629
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$44,629	Assessed	\$44,629
Exempt	\$0	Exempt	\$0
	county:\$44,629		county:\$44,629
Total	city:\$44,629	Total	city:\$44,629
Taxable	other:\$44,629	Taxable	other:\$44,629
	school:\$44,629		school:\$44,629

▼ Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
6/27/2018	\$100	1364/0180	WD	V	U	11
5/26/2017	\$76,000	1337/1839	WD	1	Q	05 (Multi-Parcel Sale) - show
4/26/2005	\$122,000	1044/1981	WD	1	Q	
12/13/2000	\$55,000	917/1113	WD	V	Q	

### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	1902-82	CONTRACTOR_	Robert Sheppard	PHONE 386-623-2203

### THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Reddy

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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.

ELECTRICAL	Print Name	Glenn Whittington EC13002957	Signature 200 700 4700
	License #:	Qualifier Form Attached	Phone #: 386-792-1700
MECHANICAL/	Print Name	Ronald Bonds Sr.	Signature
A/C	License #:	CAC1817658	Phone #: 800-259-3470
		Qualifier Form Attached	$\overline{\mathbf{x}}$

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



### COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

The state of the s				
LICENSED QUALIFII	ER AUTHORIZATION			
1. Chand Whittington's for Whittington ELECTIC	(license holder name), licensed qualifier			
for WhitThroten ELKEKK S	(company name), do certify that			
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and			
Printed Name of Person Authorized	Signature of Authorized Person			
2 Rex RI TORD	2. 0 27 12			
3.	3.			
4.	4.			
5.	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.				
Licensed Qualifiers Signature (Notafized)	EC 1300 2957 3/7/16, License Number Date			
NOTARY INFORMATION: STATE OF: COUNTY OF: Columbia				
The above license holder, whose name is	Seal/Stargely R BISHOP  Notary Public - State of Florida  Commission of FF 243986			
STATE OF:COUNTY OF The above license holder, whose name is	me or has produced identification this day of ABLA 20			



### COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, Ft. 32055 Phone: 386-758-1008 Fax: 386-758-2160

### LICENSED QUALIFIER AUTHORIZATION

	1. LONALOR Done SE	(license holder name). licensed qualifier
	for STILE CHEST ENTERNESSES	The (company name), do certify that
	the below referenced person(s) listed on this for	m is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
	Printed Name of Person Authorized	Signature of Authorized Person
	1. DALE BURD	1.
	2. Rocky Ford	2 (be/3) 7-1
	3. Kally Bishap	3. Kelly Brishof
	4.	4.
	5.	5.
	under my license and fully responsible for compl Local Ordinances. I understand that the State an authority to discipline a license holder for violatio officers, or employees and that I have full responsand ordinances inherent in the privilege granted <a href="If at any time the person(s">If at any time the person(s)</a> you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous authorization form.	nd County Licensing Boards have the power and one committed by him/her, his/her agents, esibility for compliance with all statutes, codes by issuance of such permits.  is/are no longer agents, employee(s), or no of the changes and submit a new letter of
_	unauthorized persons to use your name and/or li	cense number to obtain permits.
4	Licensed Qualifiers Signature (Notarized)	CRC 1817458 2-14-14  License Number Date
	NOTARY INFORMATION: STATE OF:COUNTY OF:	Bay
5	The above license holder, whose name is <u>Royn</u> personally appeared before me and is known by (type of I.D.) on t	me or has produced identification his 14th day of FEB 20 (16.
	Stacy Gna lduptins	(Seal/Stamp)
		Public State of Florida



## A & B Well Drilling, Inc.

5673 NW Lake Jeffery Road Lake City, FL, 32055

(O) 386-758-3409

(F) 386-758-3410

(C) 386-623-3151

2/26/2019

To: Calumbia	County Building Department
Description of wel	to be installed for Customer:
Located at Addres	: SW TANAGER COURT, Fly FL 32038
_	nersible Pump, 1 ¼" drop pipe, 86 gallon captive tank and back ith SRWMD permit.
Berch	eL
Sincerely	
Bruce Park	

President



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL

PERMIT NO. DATE PAID:

V 65 40 46 /	SYSTEM				:	FEE PAID:	
ADDATES	APPLICATION	FOR CON	STRUCTION	PERMIT	1	RECEIPT #:	170160
APPLICATION FO [V] New Syst [ ] Repair APPLICANT:	em []	Existing S	Vstem	[ ] Hold	ing Tank	[ ] In:	novative
AGENT: Rober	+ W Ford	alr A	JEET -	- 11011/	VUCI)	366	Principal Control of C
MAILING ADDRESS	s: 741 5	E STA	TR. Pd	100 L	TEI	EPHONE: 15	5-6372
TO DE COMPTE						<u>. 520</u>	5
TO BE COMPLETED BY A PERSON LIC APPLICANT'S RES PLATTED (MM/DD/	YY) IF REQUES	F OR APPLIC NT TO 489.1 FO PROVIDE STING CONSI	CANT'S AUTHO O5(3)(m) OF DOCUMENTATION OF	ORIZED AGEN R 489.552, ON OF THE F STATUTORY	T. SYSTE FLORIDA S DATE THE	EMS MUST BE STATUTES. LOT WAS CR	CONSTRUCTED IT IS THE EATED OR
	ETTON.						
LOT: BL	OCK:	SUBDIVISIO	n: 1) (	F-15	1/2/10	1	
PROPERTY ID #:(	1-10-11-	(128110-	ZONII	NG: 2.1.6	= //		
PROPERTY SIZE:	0.02 ACRES	WATER SUD	TV. 1		,	□ OOT ANTENA	: [ E \ M ]
IS SEWER AVAILAR	BLE AS PER 38	0065 506		RIVATE PUE	BLIC [ ]	<=2000GPD	]>2000GPD
PROPERTY ADDRESS	231	10065, FS			DISTANC	E TO SEWER	:
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chamure end on	RIGHT	IW	to Ta	rge	IK to	Holo	10 10
BUILDING INFORMA	PION	. /					
Unit Type of			ENTIAL		OMMERCIAL		
No Establishme	ent	No. of Bedrooms	Building Area Sqft	Commercial Table 1, C	l/Institu	tional Syst	iem Design
1 home		3	1768		***************************************	4F-0, E.Y.C	
3							
4							
[ ] Floor/Equipm	ment Drains	[ ] Othe	r (Specific				
SIGNATURE:	of wti	erel h				12/1	1/21
DH 4015, 08/09 (Ob	soletes previ	ous editio	Ds which -		DAT	E: (11)	114

# STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

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## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

, , , <u>_</u>		Permit Application Number_	19-0191
Redd	PART II - SITEF	PLAN	
Scale: 1 inch = 40 feet.		210	<del></del>
Scale: 1 Inch = 40 feet.	3 BR-	- cuz	Next Next
Notes:Site Plan submitted by:	2/26/19	DRIVEWAY	ER CONTRACTOR
Plan Approved	Not Approved_		Pate
Ву			nty Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT