



Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Change of General Contractor Request

Property Owners Name: John Kent & Ashley Kent
Job Site Address: 2658 SW Ichsehnsee Ave, LC, FL, 32024

Permit Information

• Permit #: 000054041
• Original General Contractor Name: John Nettles
• License #: 1H/1143556
• New General Contractor Name: Robert Sheppard
• License #: 1H/1025386

FOR OFFICE USE	
DATE RECEIVED:	
APPROVED	DENIED
COMPLETED CHANGE:	YES
DATE PROCESSED:	
PROCESSED BY:	
NOTES:	

*Note: If the property owner will now be acting as Owner-Builder, please check below and attach an Owner Disclosure Statement.

The Owner will now be acting as Owner-Builder.

Reason for Change:

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Important Information & Requirements

- This form must be fully completed and notarized by all parties as indicated below.
- A new building permit application must be submitted with the new contractor's notarized signature.
- Updated plans may be required depending on the scope of work and current permit status.
- Licensing and insurance documentation for the new contractor is required.
- If the original contractor's signature cannot be obtained, the property owner must submit a notarized letter affirming that the contractor has been terminated.
- Depending on the circumstances, a new permit may be required.

Hold Harmless Acknowledgement

The undersigned agree to indemnify and hold harmless the Columbia County Building Department, its officers, agents, and employees from any claim, action, or liability arising out of or related to this Change of Contractor.

Signatures (All must be notarized)

• Property Owner

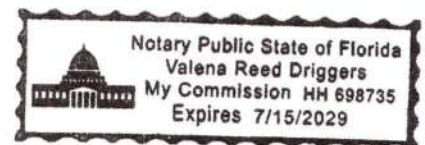
Printed Name: John Kent
Signature: [Signature]
State: Florida County: Columbia

Date: 10/30/2025

The foregoing instrument was acknowledged before me, by means of () physical presence or () online notarization, this 30th day of October, 2025, by John Kent, who is () personally known to me or (X) has provided the following identification: Florida Driver's License

Notary Printed Name: Valena Reed Driggers Notary Seal:

Notary Signature: Valena Reed Driggers



• Original Contractor

Printed Name: John Nettles
Signature: [Signature]
State: FL County: Columbia

Date: 10/30/25

The foregoing instrument was acknowledged before me, by means of (X) physical presence or () online notarization, this 30th day of October, 2025, by John Nettles, who is (X) personally known to me or () has provided the following identification:

Notary Printed Name: Rebekah Nettles Notary Seal:

Notary Signature: Rebekah Nettles



Rebekah Nettles
Comm.: HH 471198
Expires: Feb. 27, 2028
Notary Public - State of Florida

• New Contractor

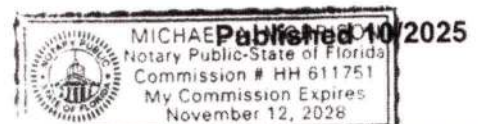
Printed Name: Robert Sheppard
Signature: [Signature]
State: FL County: Columbia

Date: 10/30/25

The foregoing instrument was acknowledged before me, by means of (X) physical presence or () online notarization, this 30th day of October, 2025, by Robert Sheppard, who is (X) personally known to me or () has provided the following identification:

Notary Printed Name: Michael Morrison Notary Seal:

Notary Signature: [Signature]

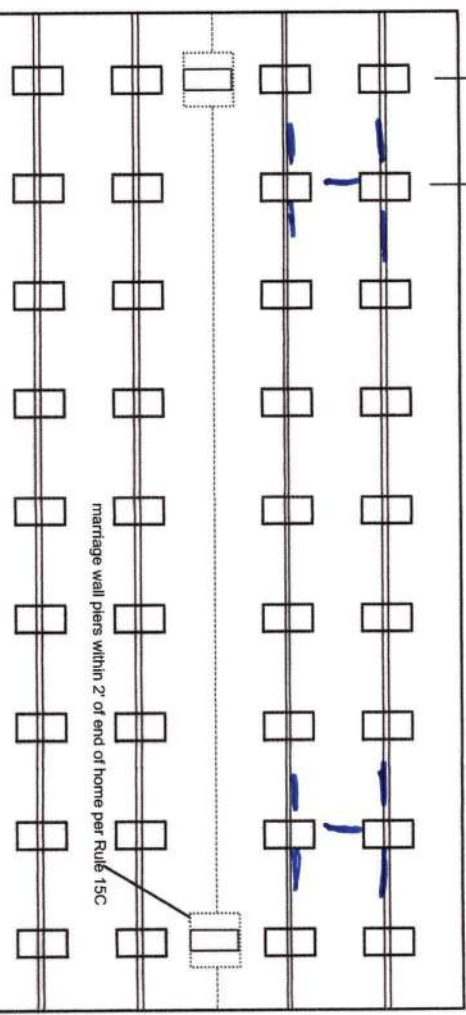
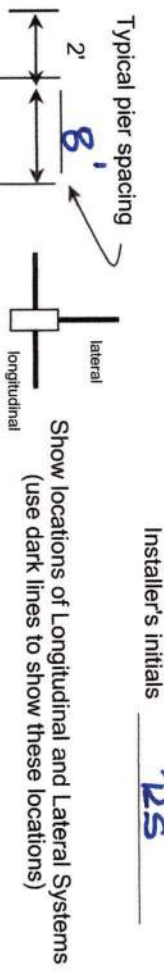




Mobile Home Permit Worksheet

Installer: Robert Sheppard License # JH1025386
Address of home 2658 SW Ichetucknee Ave
being installed Lake City, FL, 32024
Manufacturer Town Homes Length x width 60 x 15

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.



Permit Number: _____ Date: _____

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 # 103391
Triple/Quad ☐ Serial # FLHLETT6246

PIER SPACING TABLE FOR USED HOMES

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

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

PIER PAD SIZES

I-beam pier pad size 24 x 31
Perimeter pier pad size 16 x 14
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 _____

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/2 x 26 1/2	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

4 ft ☒ 5 ft _____

ANCHORS

FRAME TIES

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

OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms _____
Manufacturer Other

Number

Sidewall _____
Longitudinal Marriage Wall _____
Shear Wall _____



Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil ☒ without testing.

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 285 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 sidewall locations. I understand 5' 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 RS

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Robert Sheppard

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. 29

PLUMBING

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 26

Permit Number: _____ Date: _____

Site Preparation

Debris and organic material removed ☒.
Water drainage: Natural _____ Swale ☒ Pad ☒ Other _____

Fastening multi wide units

Floor- Type Fastener: N/A Length: N/A Spacing: N/A
Walls- Type Fastener: _____ Length: _____ Spacing: _____
Roof- Type Fastener: _____ Length: _____ Spacing: _____

For used homes a 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 (weatherproofing 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 RS

Type gasket Factory
Pg. 22

Installed:
Between Floors _____ Yes _____
Between Walls _____ Yes _____
Bottom of ridge beam _____ Yes _____

Weatherproofing

The bottom board 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 _____ N/A

Miscellaneous

Skirting to be installed. _____ Yes _____ No _____ N/A _____
Dryer vent installed outside of skirting. _____ Yes _____ No _____ N/A _____
Range downflow vent installed outside of skirting. _____ Yes _____ No _____ N/A _____
Drain lines supported at 4' intervals. _____ Yes _____ No _____ N/A _____
Electrical crossovers protected. _____ Yes _____ No _____ N/A _____
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's Signature Robert Sheppard Date 10/20/25

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

107791

LABEL #

DATE OF INSTALLATION

ROBERT D. SHEPPARD

NAME

IH / 1025386 / 1

6119

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

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 INSTALLER AGENT AUTHORIZATION

(BLANKET)

Use if authorized to pull all permits on your behalf

I, Robert Sheppard, 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 Person Authorized	Signature of Person Authorized
1. <u>Heide Morrison</u>	1. <u>Heide Morrison</u>
2.	2.
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. I understand that 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.

Robert Sheppard
License Holders Signature (Notarized)

JH/1025386
License Number

10/20/25
Date

NOTARY INFORMATION:

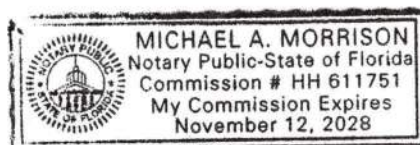
STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard personally appeared before me and is ☒ known by me or
☐ has produced identification (type of I.D.) _____ on this 20th day of October, 20 25.

(Seal/Stamp)

Notary's Signature

Michael Morrison
Notary's Printed Name



Published 10/2025