PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only	(Revised 7-1-15)	Zoning Official	Build	ling Official
AP#	Date Rece	ived	By Perm	it #
Flood Zone D	evelopment Permit_	Zoning_	Land Use	e Plan Map Category
Comments				
FEMA Мар#	_ Elevation	Finished Floor	River	In Floodway
□ Recorded Deed or □	Property Appraise	r PO □ Site Plan □ El	H #	□ Well letter OR
□ Existing well □ Lar	nd Owner Affidavit	□ Installer Authorizat	ion 🗆 FW Comp	o. letter □ App Fee Paid
□ DOT Approval □ Pa	rent Parcel #	= STU	P-MH	🗆 911 App
□ Ellisville Water Sys	□ Assessment	□ Out Cou	nty 🗆 In County	□ Sub VF Form
roperty ID # <u>I3 -US</u>	-16-09696-6	37 Subdivision	Tustenugg	ec PlantationLot#3
				ze <u>] </u>
Applicant Son	1a North		Phone #_	3-517-5701
Address 3311	Sw State 1	2d 247 (a	Ke Coty:	F1 32024
Name of Property	Owner Giova	nni Barone	Phone#	786-246-6784
911 Address 12	led Sw ma	arigold Pl 1	Fort Who	1e FL 32038
Circle the correct	oower company -	FL Power &	<u>Light</u> -	Clay Electric
	(Circle One) -	Suwannee Valley	Electric -	Duke Energy
Name of Owner of	Mobile Home G	invanni Bar	n Phon	e# 784-246-47
				F1 32038
Relationship to Pro	operty Owner			
Current Number of	Dwellings on Pro	perty		
Lot Size 659	x lelez	Total Acre	age <i> </i>	
(Curi	ently using) (Blue	Road Sign) (Put	ting in a Culvert)	Culvert Waiver (Circle one (Not existing but do not need a Culvert
Is this Mobile Hom	e Replacing an Ex	xisting Mobile Home_	ND	
Driving Directions	to the Property_			
Email Address for A	Applicant: Prov	Sunpermitte	ma amou	il. Com
Name of Licensed		Rubert Sheps		ne # <u>386 - 623</u> - 22
Installers Address	4355 SE CA	zays lake i	Coty F1 32	DS
License Number	DH102531	<u>Re</u> lns	tallation Decal	# 93918



Columbia County Property Appraiser Jeff Hampton

2022 Working Values updated: 10/6/2022

Parcel: << 13-6S-16-09696-137 (35772)

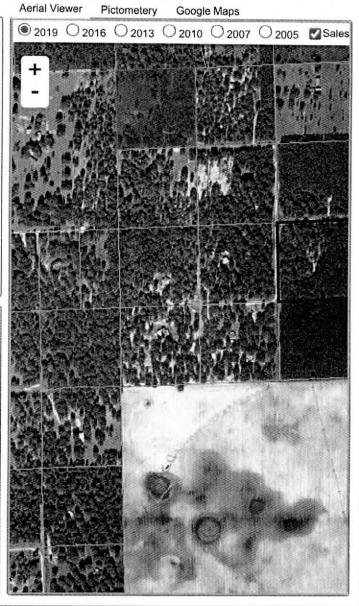
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£	-	~	>	•
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Owner & Pr	roperty Info	Result: 1 of 1		
Owner	BARONE GIOVANNI 2714 SHERIDAN ST HOLLYWOOD, FL 330	20		
Site	1260 SW MARIGOLD PI, FORT WHITE			
Description*	AKA LOT 37 TUSTENUC UNREC: COMM NE COF 1324.30 FT FOR POB, C FT, N 662.16 FT, E 659.6 2726, WD 1022-2326, W 1520, WD 1330-78,	R, RUN W 659.27 ONT S 662.15 F 6 FT TO POB. J	7 FT, S T, W 659.86 FWRS 976-	
Area	10 AC	S/T/R	13-6S-16	
Use Code**	MISC IMPROVED (0700)	Tax District	3	

^{*}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 & A	Assessment Va	lues		
2021 Cert	ified Values	2022 Working Values		
Mkt Land	\$48,250	Mkt Land	\$60,000	
Ag Land	\$0	Ag Land	\$0	
Building	\$0	Building	\$0	
XFOB	\$5,640	XFOB	\$8,890	
Just	\$53,890	Just	\$68,890	
Class	\$0	Class	\$0	
Appraised	\$53,890	Appraised	\$68,890	
SOH Cap [?]	\$0	SOH Cap [?]	\$3,683	
Assessed	\$53,890	Assessed	\$68,890	
Exempt	\$0	Exempt	\$0	
Total Taxable	county:\$53,890 city:\$0 other:\$0 school:\$53,890	Total Taxable	county:\$65,207 city:\$0 other:\$0 school:\$68,890	



Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
1/27/2017	\$42,500	1330/0078	WD	V	Q	01
4/24/2015	\$32,000	1293/1520	WD	V	U	30
6/13/2014	\$21,900	1281/2466	WD	V	U	30
7/28/2004	\$30,000	1022/2326	WD	V	Q	
3/1/2003	\$30,000	0976/2726	WD	V	Q	

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
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Code	Desc	Year Blt	Value	Units	Dims
0031	BARN,MT AE	2018	\$4,050.00	450.00	18 x 25
0251	LEAN TO W/FLOOR	2018	\$1,050.00	300.00	12 x 25

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

PPLICATION NUM	IBER CONTRACTOR (2010ext Sheppard PHONE
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
ecords of the s	ounty one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 5, a contractor shall require all subcontractors to provide evidence of workers' compensation or neeral liability insurance and a valid Certificate of Competency license in Columbia County.
start of that su	the permitted contractor is responsible for the corrected form being submitted to this office prior to to be abcontractor beginning any work. Violations will result in stop work orders and/or fines.
start of that su	Print Name Signature
start of that su	ubcontractor beginning any work. Violations will result in stop work orders and/or jines.
Any changes, to start of that su start of the star	Print Name Signature License #: Phone #:

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.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	ABERCONTRACTOR_LOBER_Shepparphone_
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
records of the solution of the	ounty one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 5, a contractor shall require all subcontractors to provide evidence of workers' compensation or neral liability insurance and a valid Certificate of Competency license in Columbia County. The permitted contractor is responsible for the corrected form being submitted to this office prior to the abcontractor beginning any work. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name Glen Whittington Signature Menn Whittington License #: C13002957 Phone #: Qualifier Form Attached
MECHANICAL/ A/C	Print Name Signature License #: Phone #: Qualifier Form Attached

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON		6	
CONCRETE FINISHER			4

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.

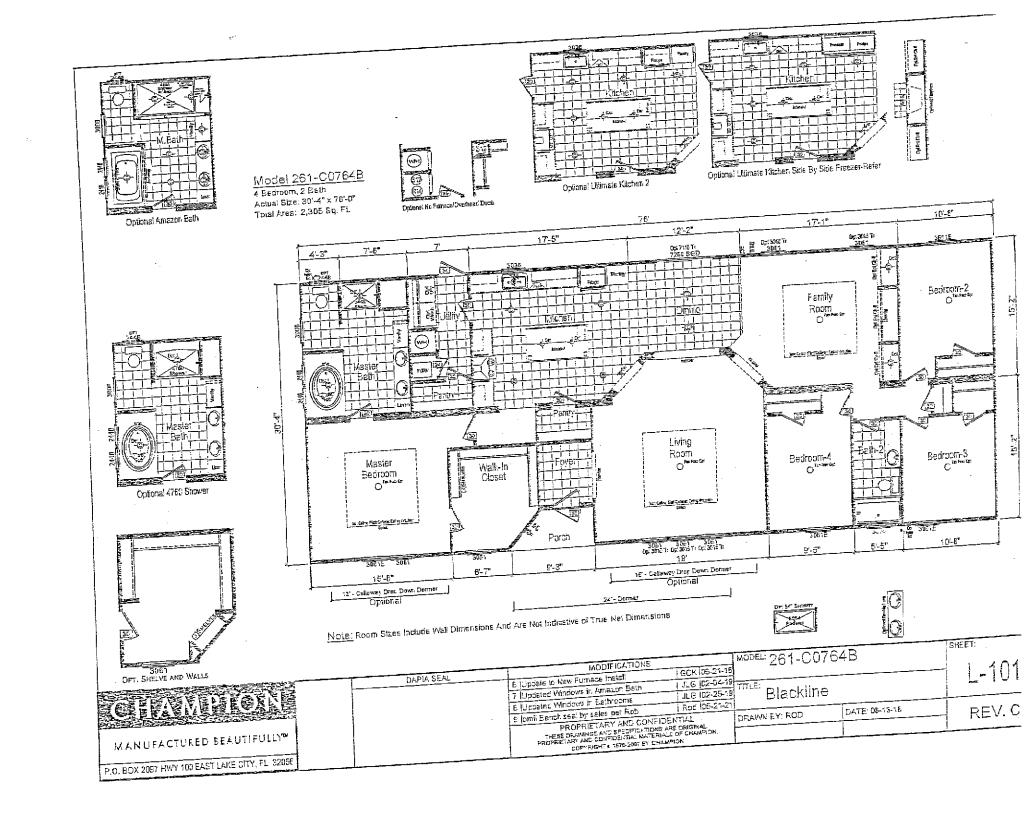
Revised 10/30/2015

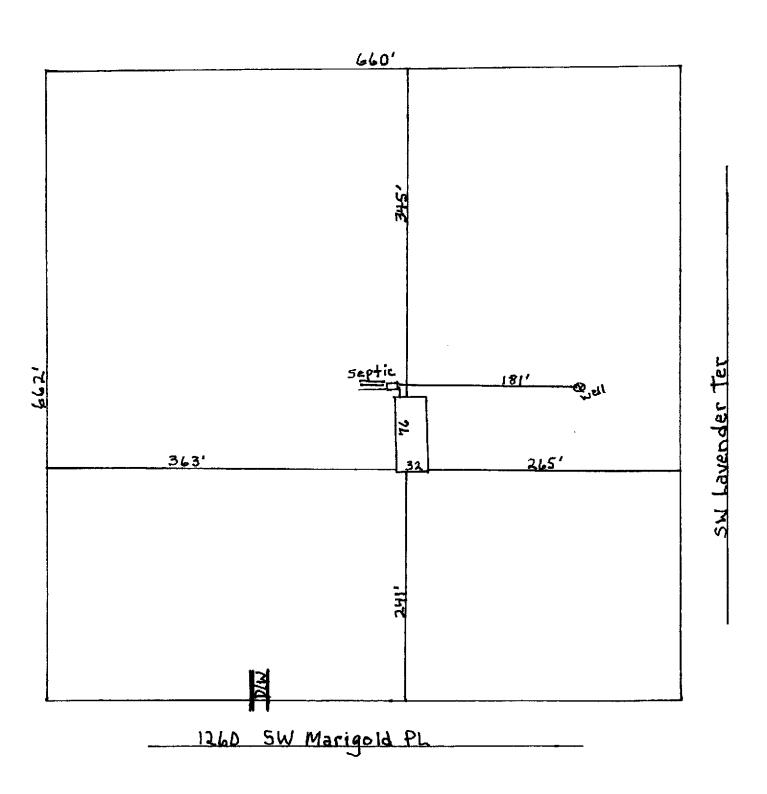
Home only or Land & Home Financed By 1/28/1965 Southern Insurance? 6/19/1982

IRONWOOD HOMES OF LAKE CITY LLC

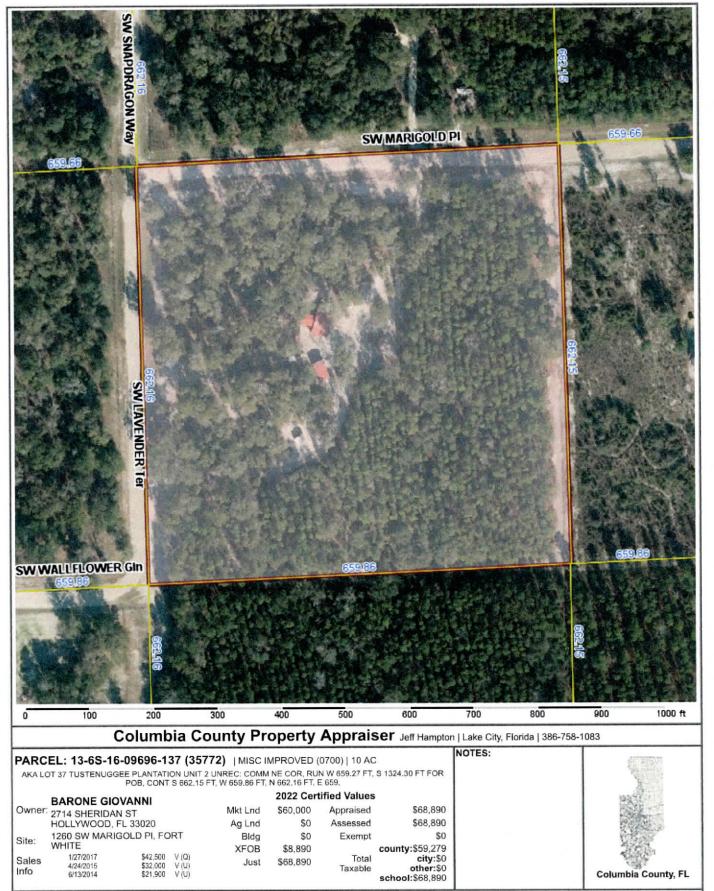
4109 WEST US HWY 90

	1/28/1965				Lake C	ity. FL 3205	S
Southern Insurance?	6/19/1982				(386) 754-8844	•	
GIOVANNI F	BARONE & ELEON	IOR BARONE			561PHNE		DATE
	2 WONE & ELEON	ORBANONE			954-404-3987 786	-246-6784	8/25/2022
ADDRESS 2714 SHER	IDAN ST HOLLYW	/OOD EL 3302	n	-			SALES PERSON
DELIVERY ADDRES	S				 		MIKE COX
	ARIGOLD PL FOR		2038	COL	LUMBIA COUNTY		I WIIKE COX
MAKE & MODEL		YEAR	BEDROOMS	FLOORSIZE	HITCHSIZE		
CYPRESS C	0764B	2023	4X2	32X76	32X80	ĺ	
SERIAL NUMBE	LA 40E400AD	C. Aug	Duces	COLOR	ROPOSED DELIVERY D	ATE	KEY NUMBERS
	I-A-105103AB	✓ NE					
CEILING	K-VALUE	THICKNESS	TYPE OF INSULAT	ION	BASE PRICE O		\$232,000.00
EXTERIOR					TAXABLE ALLOWAN	ICE ITEMS	\$22,900.00
FLOORS					Other (taxable)		
	rmation was furnished by the	26 manufactures and i	- diaglaced		CALECTAY	SUB-TOTAL	\$254,900.00
Trae mediation was	mation was turnished by te	e manuraciurer and i	s disclosed		SALES TAX	3%	\$7,647.00
ın compliance with	the Federal trade Commiss	nion Dulo 100ED Ca	- 400.40		If Base Price<5,000	1%	\$0.00
in compliance with	uie i euclai liaue Commis	SION RUIE TOUFR, SE	3. 460.16.		County Surtax (Sales price	over \$5,000)	\$50.00
NON TAY	ABLE ITEMS	TAVAD	EITENO		Tag & Title Fees		•
. NON-IAA	MBLETTENS	IAXAB	LE ITEMS		NON TAXABLE ALLO	WANCE	\$9,872.85
					ITEMS	 -	
					Points		
ì					Security Interest 1.CASH PURCHASE	DDICEC	\$0.00 \$272,469.85
a a						1	\$212,469.65
					TRADE IN ALLOWANCE	\$ 0.00	
/					LESS BAL. DUE ON ABOVE	\$ 0.00	
					NET ALLOWANCE	Ø 66 000 00	
					CASH DOWN PAYMENT	\$166,000.00 \$ 0.00	
÷					PRE PAIDS	4 0:00	466 666 66
					2. LESS TOTAL CF		\$ 166,000.00 \$ \$106,460.05
					SALES TAX(not included ab		\$ \$106,469.85 \$0.00
					3. UNPAID BAL OF CASH SAL	· .	\$\$106,469.85
					REMARKS:	LFMCE	₩100;+00:00
					NO VERBAL AGREEMENT	SWILL BEHON	OPED
					Initial:	O MILE DE MON	OKED.
						-	
					Connect water & sewer within	n 20 ft. to existin	g facilities
						·	
					Customer responsible for an	y gas or electrica	il hookups
	NOTE: WARRANTY, EXCLUS	IONS AND LIMITATIONS OF	DAMAGES ON THE REVERSE SIDE		Wheels & Axiles deleted fron	n sale price of ho	me. Will lend for
ESCRIPTION OF TR	ADE-IN	YEA		SIZE	a local move		
AKE		MODE		BEOROOMS	Customer responsible for rel	eveling of home	after intial setup.
ITLE NO.		SERIA		COLOR	Cannot be responsible for se	ettling of land.	
MOUNT OWING TO	WHOM	NO.			PRICE INCLUDES SET-UP A/C STE	PS AND STANDARD	WHITE SKIRTING
	VES ON THE TRADE-IN IS TO		DEALER	BUYER			
ONTAINED IN THIS igi atures.Buyer is pu la [:] ns whatspever, ex	CONTRACT, Dealer and Buye rchasing the above described cept as noted.	r certify that the addition trailer, manufactured hor	al terms and conditions printed on the or vehicle: the optional equip	on the other side of this cont oment and acessories, the in	OR INDUCEMENT, VERBAL OR WRIT tract are agreed to as a part of this agre surance as described has been volunta BUYER AC	emant the came ac i	f printed above the in is free from all
IT ITIS ORDER AN	ID INALOUIER HAS REAL	A UNDERSTANDS II	HE BACK OF THIS AGREEME	ENI.			
					SIGNED X_	EED 07 07 / 1	BUYER
Not Valid Unie	ss Signed and Accepted by an	Officer of the Company of	c an Authorized Anget	DEALER	SOCIAL SECURITY NO	550-67-2741	
3y			- with residence of Agenti	Ī	SIGNED X		BUYER
- /		APPROVED			SOCIAL SECURITY NO	772-76-8653	





Barone



This information,, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

GrizzlyLogic.com

Mobile Home Permit Worksheet	Application Number:Date:
	New Home Used Home
Installer: Robert Shepard License # TH1025386	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C
Address of home being installed Fort White FL 3 2038 Address of home being installed Fort White FL 3 2038 Length x width 74 x 32	Single wide Wind Zone II Wind Zone III Double wide Installation Decal #
Manufacturer	Triple/Quad Serial # FLd(01-00P - 14-10-576
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)	PIER SPACING TABLE FOR USED HOMES Load Footer 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" X 24" 26" x 26"
where the sidewall ties exceed 5 ft 4 in. Typical pier spacing lateral	bearing size (256) 1/2" (342) (400) (484)* (576)* (676) (676) 1000 psf 3' 4' 5' 6' 7' 8' 8' 8'
Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	1500 psf 4 6 9 8' 8' 8' 8' 8' 8' 2000 psf 6' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'
	* interpolated from Rule 15C-1 pier spacing table. PIER PAD SIZES Popular PAD SIZES Popular PAD SIZES
	1-beam pier pad size
	Other pier pad sizes 17 x 22 374 (required by the mfg.) 13 1/4 x 26 1/4 348
narriage wall piers within 2' of end of home per Rule 15C	Draw the approximate locations of manage 17 3/16 x 25 3/16 441 17 1/2 x 25 1/2 446
	and their pier pad sizes below. ANCHORS
	Opening Pier pad size 4 ft 5 ft
	FRAME TIES within 2' of end of home
	spaced at 5' 4" oc OTHER TIES Number
	Longitudinal Stabilizing Device (LSD) Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Manufacturer Manufacturer

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 1000 x 000 x 000
POCKET PENETROMETER TESTING METHOD
Test the perimeter of the home at 6 locations.
Take the reading at the depth of the footer.
 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 290 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. 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 requires anchors with 4000 lb holding capacity. Installer's initials
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
Date Tested 10-17-22
Figure
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. 24

plication Number:		Date:
-		
	Site Preparation	
Debris and organic m Water drainage: Nati	naterial removed ural Swale Pad	Other .
	Fastening multi wide units	
Walls: Type Faste Roof: Type Faste For used h	ener: Lags Length: 5 thener: Surus Length: 4 thener: Length: 6 thener: Length: L	galvanized metal strip nd fastened with galv.
	Gasket (weatherproofing requirem	ent)
barren and that cons	Installer's initials Installed: Between Floor Between Walls	Red marriage wans are ed. I understand a strip
	Weatherproofing	
Cidina an unito io inc	Il be repaired and/or taped. Yes stalled to manufacturer's specifica nstalled so as not to allow intrusio	ations, yes
	Miscellaneous	
Range downflow ver	outside of skirting. Yes not installed outside of skirting. Yes at 4 foot intervals. Yes	N/A N/A
	es all information given with is accurate and true based r's installation instructions	on the
Installer Signature	Robert Chepparol	Date 10-17-22



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, Robert Shep Manual Installer License Holder Nam	give this authority fo	or the job address show below
only, 1260 Sw ma	Job Address	n. ۖ ✦ℓ, and I do certify that
	listed on this form is/are under my	
and is/are authorized to purchas	se permits, call for inspections and	sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Songa North	Sonia Renth	Agent Officer Property Owner
Dullo Hiven		Agent Officer Property Owner
		Agent Officer Property Owner
	t I am responsible for all permits p responsible for compliance with a	
I understand that the State Lice	ensing Board has the power and a	uthority to discipline a license
	by him/her or by his/her authorize esponsibility for compliance grante	
document and that I have full to	esponsibility for compilative grante	o by localise of dash political
Robert Shappard License Holders Signature (No	tarized) THIO	25384 10/17/22 umber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: JUWANNE	<u>e_</u>
The above license holder, who personally appeared before me (type of I.D.)	se name is cobert Shippe and is known by me or has produced on this 17th day	uced identification
NOTARY'S SIGNATURE	<u> </u>	(Seal/Stamp)
	m .	LISA L PAUL Notary Public - State of Florida Commission # GG 344051 My Comm. Expires Jun 11, 2023 ded through National Notary Assn.

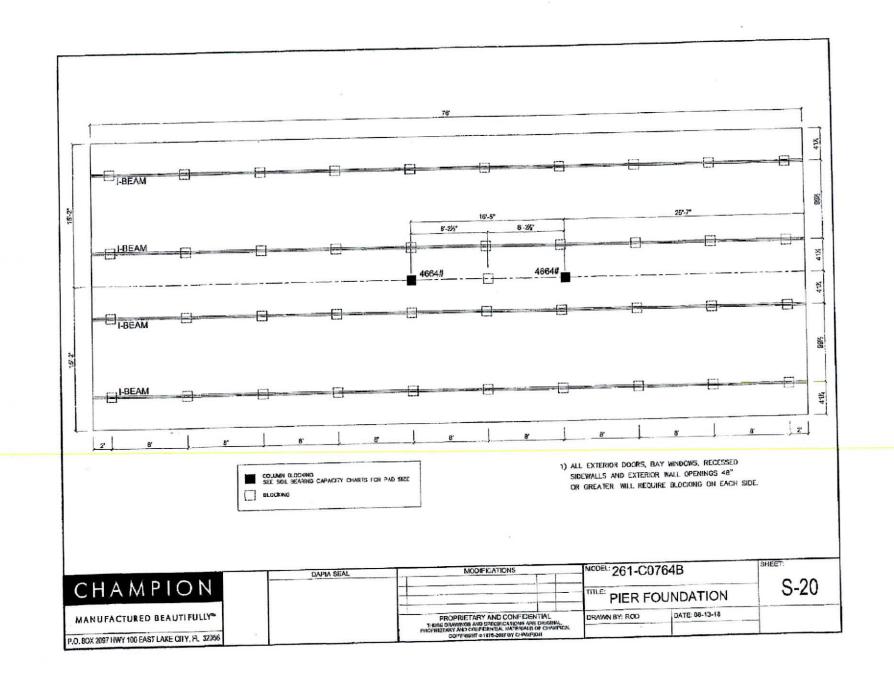


COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

Ribert Shear	give this authority a	nd I do certify that the below
Installers Name	give this authority at	Id 1 do certify that the bolow
	nis form is/are under my direct sup	
is/are authorized to purchase pe	ermits, call for inspections and sign	on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Survia North	Sona north	
Dylan thisin		
	t Lam reconcible for all permits r	urchased, and all work done
	t I am responsible for all permits presponsible for compliance with a	
Local Ordinances.	Teaportable for sampliance man	
	Beard has the power and a	uthority to discipline a license
	ensing Board has the power and a	
	by him/her or by his/her authorize	
document and that I have full re	esponsibility for compliance grante	a by issuance of each permiter
Colect Chappard License Holders Signature (No	tarized) THIDS	253870 Jol17/22 umber Date
NOTARY INFORMATION:	0	0 0
STATE OF: Florida	COUNTY OF: JUMMY	
The above license holder, who	ose name is Kobert Sheppy	used identification
(type of I.D.)	e and is known by me or has prod on this day	of Actober, 2022.
0 10		
La Libral		
NOTARY'S SIGNATURE		(Seal/Stamp)
	Youth a state and the	and the second s
		LISA L PAUL Notary Public - State of Florida Commission # GG 344051 My Comm. Expires Jun 11, 2023 ded through National Notary Assn.
	Brown and an artist of the second	A CONTRACTOR OF THE PARTY OF TH



rder #: 5563 Label #: 93918	Manufactureripion	(Check Size of Home)
omeowner: Baronc	Year Model 23/ 607646	Single
		Double X
1260 SWMarigolaPl.	Type Longitudinal System:	Triple HUD Label #.
hone #:	Type Lateral Arm System:	Soil Bearing / PSF: 1000
Date Installed:	New Home: Used Home:	Torque Probe / in-lbs: 290
Installed Wind Zone.	Data Plate Wind Zone:	Permit #:

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

93918

LABEL#

DATE OF INSTALLATION

ROBERT D. SHEPPARD

NAME

IH / 1025386 / 1

5563

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.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

