	To Secial H
	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
<u> </u>	For Office Use Only (Revised 7-1-15) Zoning Official And Building Official And Building Official And
9	EMA Map# Elevation Finished Floor / River In Floodway Recorded Deed or Property Appraiser PO Site Plan EH # 18 08 4 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 Assessmen Parcel Out County In County Sub VF Form
Pro	perty ID # 14- US-16-03818-210 Subdivision Dudley EStates Lot# 10
•	New Mobile Home Used Mobile Home MH Size 32 X Lele Year 2019
•	Applicant Sony Crews/Linda Craft Phone # 843-517-5701
•	Address 3311 Sw State Rd 247 Lake Mity FI 32024
•	Name of Property Owner <u>(Arry GUSS</u> Phone <u># 561-374-053</u> 2 911 Address <u>6997 Sub Old Wire Rd Ft White Fl 320</u> 38
•	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u> 374-0532 Name of Owner of Mobile Home <u>Dri Anderson / Larry</u> CYSS <u>541-754-7525</u> Address <u>6997 SW Did Wire Rd Ft White F1 32038</u>
•	Relationship to Property Owner
•	Current Number of Dwellings on Property
•	Lot Size Total Acreage7. <u>98</u>
•	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Blue Road Sign) (Blue
•	Is this Mobile Home Replacing an Existing Mobile Home
•	Driving Directions to the Property SR 475 to Herling turn (U) to DIdwire Rd turn (P) I mile on (D) hand side 10997 SW oldwire Rd
•	Name of Licensed Dealer/Installer Runnie Norris Phone #423-7214
•	Installers Address 1004 Sw Charles Fer Lake Lity FI 32024
•	License Number_ <u>IHID15145/1</u> Installation Decal # <u>55140</u>
Em	uiled Sonja 12-4-18 & 12-18-18

muiled Sonja 12-4-18 & 12-18-	nuiled	Sonja	12-4-18	ξ	15-18-
-------------------------------	--------	-------	---------	---	--------

			If nome 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. Typical pier spacing ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Mobile Home Permit Worksheet Installer : Rowing North North Address of home (2997) License # T H/2 ds/ys/, Address of home (2997) Sco Old Wire Rd Being installed (2997) Sco Old Wire Rd Manufacturer SAR db Sex Length x width 32 038 NOTE: If home is a single wide fill out one half of the blocking plan
TIEDOWN COM Stabilizing D	mfq.) 17 x 22 approximate locations of marriage 13 1/4 x 26 1/4 show the piers. 28 x 25 3/16 show the piers. 17 1/2 x 25 1/2 wall openings greater than 4 foot 24 x 24 b sizes below. 26 x 26 Pier pad size Anchors	ing lable.	PIER SPACING TABLE FOR USED HOMES voter 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" X 24" 28" ize (256) 1/2" (342) (400) (464)* (576)* (10) (464)* (576)* (10) (464)* 5 6 7' 8 8' </td <td>Application Number: Date: New Home ID Used Home Date: Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C ID Single wide ID Wind Zone II ID ID Double wide ID Installation Decal # ID ID Triple/Quad Serial # IAC R2 36/21 R2 5/21</td>	Application Number: Date: New Home ID Used Home Date: Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C ID Single wide ID Wind Zone II ID ID Double wide ID Installation Decal # ID ID Triple/Quad Serial # IAC R2 36/21 R2 5/21

Page 1 of 2

1

Page	Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Pg.	POCKET PENETROMETER TEST 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. YEW XW YEW	Mohile Home Permit Worksheet
Page 2 of 2	Installer Signature	Instailer 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	Application Number: Site Preparitient Debris and organic material removed Water drainage: Natural Swale Pad Other Floor: Type Fastener://Ling Fastener:/Ling Fastener:/	

3



	AD	REFE	OT R	SEE N SU-Di YER R	-000	5 FOI					AD-1				-025						
G	Ē	Ē	D	C	B)	À	S			\bigcirc	♪	Ą	⊘	♪	♪	♪	♪	Ą	COL. NUM.	COLU	
676 s	576 s	432.875	400 \$	396 s	342.25	256 \$	SIZE (sq.in.)		q	o,	Q	Q	Q	Q	15'-7"	15'-7"	17'-10"	17'-10"	SPAN	COLUMN INFO.	
sq. in.	sq. in.	5 sq. in.	sq. in.	sq. in.	sq. in.	sq. in.	5		0	0	0	0	ο	0	5215	5215	5215	5215	LOAD	TABLE	
87 V2	74	¥	49 14	\$	ħ	ä	1000 psf SOL	\square	•	0	ο	ο	ο	0	751	751	751	751	1000 psr soil	COLI	JACODJEN IONEJ Po Box 368, 600 PACKARD ct. SAFETY HARBOR, FLORIDA 34695 (727) 726-1138 www.jachomes.com
OIN OIN	01N	B	78 V.2	77 V2	86 VE	48 1/2	1500 psr sol	I-BE/	0	0	0	0	ο	0	501	501	501	501	1500 psr soil	COLUMN PAD	368, ARBO (727)
OIN DIN	OIN	N10	NIO	N105 1/2•	90 V2	66 12	2000 psr s0%	I-BEAM PIER	0	0	0	0	0	0	375	375	375	375	2000 pst 50L	AD - MIN.	(VDJCIV MVVV 0X 368, 600 PACKARI 17 HARBOR, FLORIDA 3 (727) 726-1138 WWW.jachomes.com
NIO	NIO	OIN	OIN OIN	01N	01N	8	2500 #ST SOIL	R SPACING	0	0	0	0	0	0	300	300	300	300	2500	N. SIZES	ni∩i∩ic⊃ Packard ct. Orida 34695 -1138 nes.com
NNO	OIN	NIO	NID OIN	NIO	OIN	NIO.	3000 pst SOIL	ING	0	0	0	0	0	0	300	300	300	300	3000 psr soil	(sq.	ARD CT. 34695
	OIN	NIO	N NO	NIO	OIN	NIN OIN	3500 psf soit		°	0	0	ο	ο	0	300	300	300	300	3500 psr soil	in.)	
96	96	96	96	96	96	96	1000 psr SOIL	7	Ē				I ¦	P P :	e P	р г	N	Ş	ANI		
96	96	96	96	96	96	96	1500 psr soll	MATING LINE	MAX. P			ALL IN	ALONE 1				NOTES:	CONTRACTOR SHALL	VOR AN	TATE L	NUTACTIER A MANUFACTU NUALIFIED PERSONNEL SHO MPROFER PROCEDURES AN N ADOITION TO THE DANG N EXTENSIVE/COSTLY DAM N EXTENSIVE/COSTLY DAM N EXTENSIVE/COSTLY DAM N EXTENSIVE/COSTLY DAM
96	96	96	96	96	96	96	2000 pst SOIL	LINE		THE SU-ON-DODS AND SUCCESSION OF US DESCRIPTION OF US DESCRIPTIONO	D ANCHORN SP	T DOW	LOCATED WITHIN OF OP					RSHALL	PROGR	CENSED	A MANU
96	96	96	96	96	96	96	2500 pst solt	PIER SPACING	MX. POR SPACING ON 8° 1-864 DE NOTE 4 ON PASSE BL-01-000	ee Sl-on-oddy and Sl-ox-oddy Instruction of US Designad A INS And Anchord Alif: Not Vol	ACED NO		va Live,			COMMENT HOM			LOCAL,	LUINGB/S IL, ON TH	TACTURE PES AND PES AN
96	96	96	96	96	96	96	3000 pst solt	ACING		일감구	NAY SEEMALL AREA WITH A HOST BEAM AND ANCHORE SPACED NO FURTHER THAN REQUIRE CLOSER INSTALLATION, REFER TO	all and floor systems wher than 14		2972R TO AD-TD-100 FOR EXEAUVALL AN	ARTIN TO BU-DI-DOOD FOR AUDITIONAL P	REFER TO THE MODEL APPROVAL FUR PLA REFER TO THE JACOUREN MONES STUP M		INSURE/REQUIRE	INITIATIVES, PROGRAMS, POLICIES, AND/OR AND/OR ANY OTHER LOCAL, STATE, AND/C	MANUFACIURED BUILDINGS/SIRUCIORES CAI THAT ALL PERSONNEL, ON THE JOB SITE, BU A STATE LICENSED SETUP CONTRACTOR IS	INSTALLING A MANUFACTURED STRUCTURE OUALIFIED PERSONNEL SHOULD ATTEMPT T IMPROPER PROCEDURES AND/OR TECHNIQU IN ADDITION TO THE DANGER TO FERSONN IN EXTENSIVE/COSTLY DAMAGE TO THE BU IF YOU ARE NOT QUALIFIED AND/OR DO N CAUTION: MANUFACTURED AND/OR DO NOT
96	96	96	96	96	96	96	3500			ĮĮ	215	43	2 A 4					THAT	U		TURE/DU
96	96	96	96	96	96	96	1000 psf SOIL		WX. Prime	THE ATTACH		SQUEE PER		ATRONE /		ATAT VID		SAFE AN	ROCEDUR	DUALIFIE	ILDING C INSTALL COULD I IMPROPI IMPROPI ING/STRU HAVE T
96	96	96	96	96	96	96	1500 pst soil	PERIM			F O.C. MAXONLAL ATTA 6" O.C. MAXONLAL SIX 182 JACONSON HONES		HE COLLINN, ADDITION	LICATIONS AND TUS-DOWNE.				D PROPE	ES THAT	AN WEIGH SEVERAL TONS, Se qualified and proper A required to be reado	A N DE L A NANUE RESULT : GTURE. HE PROP
96	96	96	96	96	96	96	2000 pst Solt	ETER P	0V 10 ⁻ 0	יזאפ אזזאכאפס פזאנגכונונא אאנו אסנו זאנגנרופט דם אני אבוף פעוףסמוזאנג, דא		sociae powerd; and matine law		JEATIONS AND TUB-DOWNE.				RTECH	MAY BE	ROPERLY	EXTREME ACTURED NACTURED NUSERIO ER TOOL
96	96	96	96	96	96	96	2500 psr soit	PERIMETER PIER SPACING	OR SIF FORAM 28 1807	ŧ,	r a structural attachent mall have prov 57 o.C. Maxorijal wore wind zone areas may 198 Jacober Hones setup manlal for specific	ating line blockne. Etti and mating line blocknik	HE COLLARY, ADDITIONAL PERS MAY BE REQUIRED ANUAL FOR SPECIFICS.		AVELANG BEANG BELEVILANGS PER THE BETLE NAVALAL. De Rechlementer. Ber Rechlementer.	IN OPECIAL ORDOMATION, IANUAL AND ADDRIDUM FOR COMPLETE INSTALLATION		SAFE AND PROPER TECHNIQUES ARE UTILIZED	INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED SYNCHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE	AN WEIGH SEVERAL TONS, IT IS VERT IMPORTANT Se qualified and properlyadequately trained S required to be responsive for all safety	INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS ONLY OUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN <u>SERIOUS INJURY OR DEATH</u> IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT. CAUTION:
		96	96	96	96	96	3000 pst soit	ACING		THE ADDITIONAL								RE UTI	MENTS.	TELY TRAINED	LROUS, URE/BU Y OR NOULD I INSTAL
96	96	6	<u> </u>	<u> </u>			0 3500 pst solt	-		- 5 - 1		2			5	1 E -				2 5 7	ONLY DEATH RESULT PMENT.

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.





467 Swan Ave 🔹 Hohenwald, TN 38462 🔹 (800) 284-7437 🔹 www.olivertechnologies.com 🔹 Fax (931) 796-8811

OLIVER TECHNOLOGIES, INC. FLORIDA INSTALLATION INSTRUCTIONS FOR THE MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM

MODEL 1101"V" (Steps 1-14) LONGITUDINAL ONLY: Follow Steps 1-9 LATERAL ONLY: Follow Steps 1-3 and Steps 10-14 FOR CONCRETE APPLICATIONS: Follow Steps 15-18

ENGINEERS STAMP

1. SPECIAL CIRCUMSTANCES: If the following conditions occur - STOP! Contact Oliver Technologies at 1-800-284-7437:

a) Pier height exceeds 48" b) length of home exceeds 76'

ENGINEERS STAMP

c) Roof eaves exceed 16"

d) Sidewall height exceed 96"

INSTALLATION OF GROUND PAN

e) Location is within 1500 feet of coast

- 2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C) .
- 3. Place ground pan (C) directly below chassis I-beam. Press or drive pan firmly into soil until flush or below soil then install pier per manufacturer's instructions or per Florida Regs.

SPECIAL NOTE: The longitudinal "V" brace system may also serve as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM (Model 1101 L "V")

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED. IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4". VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.).

4. Choose one of the approved longitudinal tube installations; either Diagram A or B. Then select the correct square tube (E) length from the diagram for appropriate pier height at support location or cut and drill 1.5" square tube to achieve appropriate length.

PIER HEIGHT (40° Min 45° Max.)	1.25" Tube Length	1.50" Tube Length	9/16" Dia. (.562") hole –7	PIER HEIGHT (40° Min 60° Max.)	1.50" Tube Length
7 3/4" to 25"	22"	18"		14" to 18"	20"
24 3/4" to 32 1 /4"	32"	18"		18" to 25"	28"
33" to 41"	44"	18"		24" to 35"	39"
40" to 48"	54"	18"	Part E	30" to 40"	44"
Diagram A			- <u>0.75</u>	36" to 48"	54″

Diagram B

- 5. Install (2) of the 1.50" square tubes (E) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
- 6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
- 7. (For Diagram A installation) Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut. (For Diagram B installation) Attach the selected 1.5" tubes (E) to the I-beam connectors (F) and fasten loosely with bolts and nuts.
- 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place.
- 9. Using standard hand tools tighten all nuts and bolts. (For Diagram A installation only, secure 1.25" and 1.50" tubes using four(4) 1 /4"-14 x 3/4" self-tapping screws in pre-drilled holes.)

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM (Model 1101 T "V")

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR STABILIZER PLATES & FRAMETIES. NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

- 10. Install remaining vertical tie-down straps and 4[°] ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5[°] anchor per Florida Code.
- 11. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
- 12. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
- 13. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (1) with bolt and nut.
- 14. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1 /4" 14 x 3/4" self-tapping screws in pre-drilled holes.



467 Swan Ave • Hohenwald, TN 38462 • (800) 284-7437 • www.olivertechnologies.com • Fax (931) 796-8811

INSTALLATION USING CONCRETE RUNNER/ FOOTER

- 15. A concrete runner, footer or slab may be used in place of the steel ground pan.
 - a) The concrete shall be minimum 2500 psi mix
 - b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 c) Footers must have minimum surface area of 441 sq. in. (I.e. 21" square), and must be a minimum of 8" deep.
 - c) Footers must have minimum surface area of 441 sq, in. (i.e. 21" square), and must be a minimum of 8" deep.
 d) If a full slab is used, the denth must be a 4" minimum. Special increasing of the system bracket installation is not re-
 - d) If a full slab is used, the depth must be a 4" minimum . Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

16. When using Part# 1101-W-CPCA (wetset) simply install the bracket in runner/footer **OR** When installing in cured concrete use Part# 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

LATERAL: (Model 1101 TC "V")

17. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit. drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
18. When using part# 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes:

- 1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- 2. []=== LOCATION OF TRANSVERSE BRACING ONLY
- 3 🖾 🛛 = LOCATION OF LONGITUDINAL BRACING ONLY
- 4. E TRANSVERSE AND LONGITUDINAL LOCATIONS





Model # 1101 T "V"

Model # 1101 TC "V"

Florida approved 4' ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5' anchor. Per Florida code.

C = GROUND PAN / CONCRETE FOOTER OR RUNNER

D = GROUND PAN / CONCRETE U BRACKETS TRANSVERSE CONNECTOR (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)

E = TELESCOPING V BRACE TUBE ASSEMBLY (1.5" TUBE BOTTOM AND 1.25" TUBE INSERT) OR 1.5" TUBE

F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY

H = TELESCOPING TRANSVERSE ARM ASSEMBLY

I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)

 $J \approx V$ PAN BRACKET (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)



Page 3 Revision 08/23/18

eff Hampton		-	y Appraiser				<u>2018</u>	Tax Roll Ye updated: 11/1/2
Parcel: << 1	4-6S-16-038	18-210	>>	Aerial Vie	wer	Pictometer	y Google Ma	ps
Owner & Pro	perty info		Result: 1 of 1	16 20	ai de	148 , 2007	2005 2004	1900
Owner 8	GOSS LARRY 53 SW 10TH / BOCA RATON	VE	6	SM.3K	YLINE	11, 1	11:0.31	
Site 6	3997 OLD WI	RE RD, FO	ORT WHITE		124	N.N.	peres!	10 . 18.
Description*	OT 10 DUDLE COR, RUN W 8 RUN W 859.91 FT, W FOR PO 1306.87 FT TO	EY ESTATE 59.91 FT (FT FOR P B, RUN S E R/W OL	TATES UNR: AKA IS UNR: COMM NE COMM NE COR, OB, RUN S 334.32 334.32 FT, W D WIRE 1306.87 FT N ALONG R/W 335	CE CE CE	24			
Area §	9.98 AC	S/T/R	14-6S-16	17128	1	Contraction of the	2 Burn 100	SUR
	MOBILE HOM 000200)	Tax Di	strict 3				1202 1	Provide and
county Planning & Property & A	Zoning office for s	values						
2018 Certif			Working Values	- mag	-			
Mkt Land (2)		Mkt Lan		- Statistics - and				
Ag Land (0)) Ag Land		50			WW MOMESTE	DICIR
Building (1)		Building		Constant of the local division of the	1 dese		Sinter I	
XFOB (4)	\$17,095	S XFOB (4		- Charles and a second second	SUB	No.		23.
Just	\$86,203	Just	\$85,79	95		-		
Class		Class		50 2				- Kinen
Appraised	\$86,203	Appraise	ed \$85,79	5	Real			15,49 2
SOH Cap [?]	\$0) SOH Ca	p [?]		4.1		1 11 5	11: 14
Assessed	\$86,203	Assesse	d \$85,79	5		A. Part	Constant	in Rit
Exempt	\$0	Exempt	\$	50				
Total Taxable	county:\$86,203 city:\$86,203 other:\$86,203 school:\$86,203	3 Total 3 Taxable	county:\$85,79 city:\$85,79 other:\$85,79 school:\$85,79					
▼ Sales His	tory							
Sale Date Sale F		Price	Book/Page	Deed	V/I	Qua	ality (Codes)	RCode
9/9/2009		\$100	1187/2473	QC	I		U	11
5/6/2	005	\$75,000	1046/0762	WD	1		U	08
8/3/2	004	\$100	1022/2713	DWD DWD	V		U	04
7/30/2		\$72,000	2,000 1022/2715		1	Q		
5/24/1	999	\$29,000	893/0200	AG	V		Q	
Building	Characteris	tics						
Bldg Sketch	Bldg Item		Bldg Desc*	Year B	t B	lase SF	Actual SF	Bidg Value
			*					



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



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

State: F Zip Code 3	
State: F	L
-	
City: F	
	ORT WHITE
Address: 6	997 SW OLD WIRE Rd
Date/Time Issued: 1	1/6/2018 10:35:48 AM

REMARKS: Address Verification.

<u>NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION</u> <u>RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR</u> <u>ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS</u> <u>SUBJECT TO CHANGE.</u>

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125 Email: gis@columbiacountyfla.com

O	COLUMBIA COUNTY BUILD 135 NE Hernando Ave, Suite B-2 Phone: 386-758-1008 Fa	1 Lake City TT 20044
1. LONNIE	AOBILE HOME INSTALLERS LET	8 Authority for the ich address to the
only, 6997	SW Old Wire Rd Job Address	Ft White FL 32038 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.

	Signature of Authorized Person	Authorized Person is (Check one)		
	Sonp Crews	AgentOfficer Property Owner		
Linda Craft	Sinda Crept	AgentOfficer Property Owner		
	U	Agent Officer 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.

License Holders Signature (Notarized)

25/45/1 10 30018

NOTARY INFORMATION: STATE OF: __ Florida

COUNTY OF The above license holder, whose name is on orn personally appeared before me and is known by me or has produced identification on this 2 p day of (2015 etob

NOTARY'S SIGNATURE

(Seal/Stamp)



APPLICATION NUMBER 1811-17 CONTRACTOR RUDNie Norris PHONE 10:	123-1716

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

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 <u>REQUIRED</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 Gilen Whitting ton Signature Men Whitting ton License #: EC 1300 2957 Phone #: 386 - 972 - 1701 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			
CONCRETE FINISHER			
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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1811-17

CONTRACTOR RUNNIE NOTIS PHONE 033-

1716

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 <u>REQUIRED</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	Signature				
	License #:	Phone #:				
	Qualifier Form Attached					
MECHANICAL	Print Name MUMOU A. Boland	Signature MIL HAR				
A/C	License #: [AC 1817714	Phone #: $(352) 274 - 9.32$				
	Qualifier Form Attached					

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

Inst. Number: 201012000968 Book: 1187 Page: 2473 Date: 1/22/2010 Time: 2:31:45 PM Page 1 of 3

Inst 201012000908 Date 1/22/2010 Time 2 31 PM Duc Stamp Deed 0 TC Duc P DeWitt Cason Columbia County Page 1 of 3 B 1187 P 2473

LF298-04 R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 9th day of September , 2009, by first party, Grantor, Barbara Gross whose post office address is 6997 SW Oblive Rd, FtWhite FL 32038 to second party, Grantee, Larry R Goss whose post office address is 430 SE 3ilth Ave, Boynton Beach, FL 33435

WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$).⁶⁰

paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of , State of to wit:

> Lot 10, Dudley Estates, an unrecorded subdivision in sector 14, Township 6 South, Range 16 East, Columbia County, Florida, said lot being more particularly described as follows: See attached

)

Inst. Number: 201012000968 Book: 1187 Page: 2475 Date: 1/22/2010 Time: 2:31:45 PM Page 3 of 3

LOT 10, DUDLEY ESTATES, AN UNRECORDED SUBDIVISION IN SECTION 14, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, SAID LOT BIENG MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCE AT THE NORTHEAST CORNER OF SECTION 14, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND RUN SOUTH 89 DEG. 15 MIN. 49 SEC. WEST ALONG THE NORTH LINE OF SAID SECTION 14, A DISTANCE OF 859.91 FEET TO THE POINT OF BEGINNING; THENCE SOUTH 05 DEG. 57 MIN. 08 SEC. EAST, 334.32 FEET; THENCE SOUTH 89 DEG. 15 MIN. 49 SEC. WEST, 1306.87 FEET TO THE EAST MAINTAINED RIGHT OF WAY LINE OF OLD WIRE ROAD; THENCE RUN NORTHERLY ALONG SAID EAST RIGHT OF WAY LINE, 335 FEET, MORE OR LESS, TO THE NORTH LINE OF SAID SECTION 14; THENCE NORTH 89 DEG. 15 MIN. 49 SEC. EAST ALONG SAID NORTH LINE 1310.43 FEET TO THE POINT OF BEGINNING.

TOGETHER WITH: 2001 GEN DOUBLEWIDE MOBILE HOME, SERIAL NOS. GMHGA6010401639A AND GMHGA6010401639B.

3867582187 15:17:00 1/3 12-04-2018 ~ unjour (pi Stomer STATE OF FLORIDA PERMIT NO DEPARTMENT OF HEALTH DATE PAID: ONSITE SEWAGE TREATMENT AND DISPOSAL FEE PAID: SYSTEM RECEIPT # APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: New System [] Existing System 1] Holding Tank [1 ſ Innovative [] Repair [] Abandonment] Temporary E 1 1 GOSS APPLICANT: AGENT TELEPHONE MAILING ADDRESS: TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS. PROPERTY INFORMATION SUBDIVISION: Dudley Estates LOT: BLOCK: PLATTED: N. 14-03818-21020NING: _____ I/M OR EQUIVALENT: [Y PROPERTY ID #: ACRES WATER SUPPLY: [X PRIVATE PUBLIC []<=2000GPD []>2000GPD PROPERTY SIZE: IS SEWER AVAILABLE AS PER 381.0065, FS? [Y DISTANCE TO SEWER: FT KO PROPERTY ADDRESS: 150 DIRECTIONS TO PROPERTY: rinna n Wice BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC 1 3 2,000 2 3 4 [] Floor/Equipment Drains [] Other (Specify) SIGNATURE: uffe DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC Page 1 of 4

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT Permit Application Number 18-0894 ----- PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet. Notes: attached Ο Not Approved_____ Crews Find Site Plan submitted by: 20000 Plan Approved Date By_ **County Health Department** ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH 4015, 08/09 (Obsoletes previous editions which may not be used) incorporated: 64E-6.001, FAC Page 2 of 4 (Stock Number: 5744-002-4015-6)



3/3