	PERMIT APPLICATI	ON / MANUFACT	TURED HOME	INSTALLATION A		in Short
For Office Use	Only (Revised 7-1	-15) Zonii	ng Official	Build	ling Official	1)
AP#	808-62 Da	teReceived	120	By <u>J W</u> Perm	it # <u> うしと</u> () う	
Flood ZoneX	Development	Permit	Zoning_	H3 Land Use	Plan Map Catego	ry
Comments						
EEMA Man#	Elevation	Finis	shed Floor	abore	In Floodway	
	ed or □ Property A					
AD . 0 6	□ Land Owner A					
□ DOT Approva	ıl 🗆 Parent Parcei	#	stu	JP-MH		1 App
□ Ellisville Wat	er Sys 🗆 Assessi	nent	Out Cou	nty <mark>In County</mark>	Sub VF Form	
	21 16 12	00019 010)			
roperty ID # _	31-65-17-	09818-019	Subdivision			_Lot#
New Mobile	Home	Used Mobil	e Home	<u>/</u> мн si	ze <u>24×48</u> Year	1982
Applicant _	WALLACE (CABLE		Phone # 42	3-306-14	4/
Address	2992 SW	OLD BL	ELLAMY	RO. FORT	WHITE, FL.	32038
Name of Pr	operty Owner	same	1	Phone#_	5ame	
911 Addres	s 650 SI	U LEGATE	Tien s	H White,	JL 3102	8
Circle the c	orrect power com	pany -	FL Power &	<u>Light</u> - (Clay Electric	
	(Circle (One) - <u>Suwa</u>	annee Valley	Electric -	Duke Energy	
Name of Ov	vner of Mobile Ho	me Wall	ACK C	₩€ Phon	e# 2 2008	
	299 L SW					
Relationshi	p to Property Ow	ner <u>5</u>			,	
Current Nu	mber of Dwellings	on Property_	9			
Lot Size			_ Total Acre	eage 25.	G0	
-	(Currently using)	(Blue Road Sign) (Pu	tting in a Culvert)	Culvert Waiver (C	Circle one) need a Culvert)
Is this Mob	le Home Replacin	g an Existing N	Mobile Home	700	4/2	
Driving Dire	ections to the Pro	perty Turn	South	OFF CR	18,00	Lagree
Terr,	go past	intersection	M DA	old Bella	my & lagre	L .
propy	-ty starts	on Le	ft		-	
Name of Lie	censed Dealer/Ins	taller Fermo	n Jone	ـــــــــــــــــــــــــــــــــــــ	ne # <u>352-318</u>	4734_
	ddress <u>6795</u> S				2-24	
License Nu	mber IHIDO	5418	Ins	stallation Decal	# 53175	
The Sale	KEWY WAllace	07318	CRE mi	pps worky his	se - che spo	in by Cibra
100 D po	in a second	8. 2 - 10	-(11	1 10'(-0. (n septie!	7.16
		X, 31, 1V	TO HAVE NO	OF APPICA +	n raphie !	1

Address of home being installed Installer: Typical pier spacing Manufacturer 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 termon Mobile Home Permit Worksheet ateral longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) marriage wall piers within 2' of end of home per Rule 150 Length x width Installer's initials License # HIODSYIF A **Application Number:** capacity bearing Load List all marriage wall openings greater than 4 foot and their pier pad sizes below. Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Other pier pad sizes (required by the mfg.) interpolated from Rule 15C-1 pier spacing table. Perimeter pier pad size Double wide Manufacturer Longitudinal Stabilizing Device (LSD) Manufacturer O NEVEL CHAPTER Longitudinal Stabilizing Device w/ Lateral Arms l-beam pier pad size Triple/Quad New Home 2500 Opening DS O Draw the approximate locations of marriage wall openings 4 foot or greater. Use this bs. symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS 16" x 16" PIER PAD SIZES PIER SPACING TABLE FOR USED HOMES P (256)<u>ء</u> م <u>ත</u> Wind Zone II Used Home Serial # Installation Decal # 23-3 Pier pad size 18 1/2" x 18 1/2" (342) യ്യയ്യത്വ 01630417 20" x 20" Q 7 (400) Wind Zone III 22" x 22" 4 ft (484)*within 2' of end of home spaced at 5' 4" oc Marriage wal Shearwall Longitudinal Sidewall POPULAR PAD SIZES Date: 7 3/16 x 25 3/16 17 1/2 x 25 1/2 13 1/4 × 26 Pad Size 16 x 16 18.5 x 18.5 20 x 20 OTHER TIES 26 x 26 16 x 18 P 24" X 24" FRAME TIES **ANCHORS** (576)*5# Number 26" x 26"

676

(676)

ထူထူထူထူ

ᅇ

Mobile Home Permit Worksheet

Application Number:

Date:

Installer	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 15
11	Electrical
Drain lines s Electrical cro	Date Tested
Skirting to be Dryer vent ir Range down	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
The bottomb Siding on un Fireplace ch	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
Type gasket Pg. 17	TORQUE PROBE TEST The results of the torque probe test is 276 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.
a result of a of tape will n	×1000 ×1000 ×1000
I understand	Using 500 lb. increments, take the lowest reading and round down to that increment.
roo wii	 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer.
	POCKET PENETROMETER TESTING METHOD
Floor: Ty	1000
Water draina	The pocket penetrometer tests are rounded down topsf or check here to declare 1000 lb. soilwithout testing.
	POCKET PENETROMETER TEST

Range downflow vent installed outside of skirting. Yes Common N/A Prain lines supported at 4 foot intervals. Yes Very Common N/A Electrical crossovers protected. Yes
Miscellaneous
he bottomboard will be repaired and/or taped. Yes www. Pg. 17 siding on units is installed to manufacturer's specifications. Yes wireplace chimney installed so as not to allow intrusion of rain water. Yes
Weatherproofing
Installer's initials ype gasket folled foam Installed: Between Floors (Yes) Between Walls (Yes) Bottom of ridgebeam (Yes)
understand a properly installed gasket is a requirement of all new and used omes and that condensation, mold, meldew and buckled marriage walls are result of a poorly installed or no gasket being installed. I understand a strip if tape will not serve as a gasket.
Gasket (weatherproofing requirement)
Is: Type Fastener: 1955 Curve Length: 6 "Spacing: 2 4" Valls: Type Fastener: 1955 Curve Length: 6 "Spacing: 2 4" Voof: Type Fastener: 1955 Length: 6 "Spacing: 2 4" 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.
ebris and organic material removed Vater drainage: Natural Swale Pad Other
Site Preparation

Installer Signature

Date 8-10-18

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15

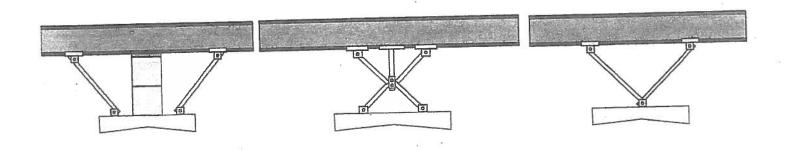
Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15

Plumbing

ANCHORS AND TIE-DOWNS

Longitudinal protection, continued

Other approved longitudinal stabilization are these types of steel mechanical systems called longitudinal stabilizing devices.

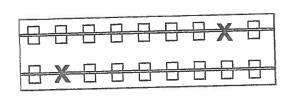


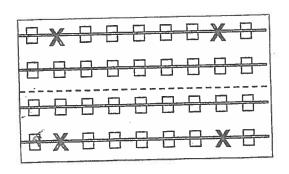
Longitudinal Protection using approved Longitudinal Stabilizing Devices (LSDs)

LSD systems may be used in place of the required longitudinal straps, anchors and stabilizer plates. Two systems are required per section of home. A single wide will get two LSDs and a double wide will require four and a triple wide will require six. For the correct placement of these systems see the diagram below.

Commonly found violations when using the lateral arm systems:

- The required self tapping screws were not installed or another type of screw was used.
- The LSD arms were not properly connected to the I-beam or galvanized pan.
- Five foot anchors were required by the home manufacturer and 4 foot anchors were installed.
- The LSD arms are installed at too steep an angle.
- The galvanized pan is not fully embedded into the soil.





Longitudinal Stabilizing Devices shown on typical blocking plans,

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

MODEL 1101"V" (STEPS 1-15)

LONGITUDINAL ONLY: FOLLOW STEPS 1-9

FOR ADDING LATERAL ARM: Follow Steps 10-15

FOR CONCRETE APPLICATIONS: Follow Steps 16-19

ENGINEERS STAMP

DIED 1151011T

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' c) Roof eaves exceed 16" d) Sidewall height exceed 96"
 - e) Location is within 1500 feet of coast

INSTALLATION OF GROUND PAN

- 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 with or below soil. **SPECIAL NOTE:** The longitudinal "V" brace system serves 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

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. Select the correct square tube brace (E) length for set - up (pier) height at support location. (The 18" tube is always used as the bottom part of the longitudinal arm). Note: Either tube can be used by itself, cut and drilled to length as long as a 40 to 45 degree angle is maintained.

(Approx. 45 degrees Max.)	1.25" ADJUSTABLE Tube Length	1.50" ADJUSTABLE Tube Length	
7 3/4" to 25"	22"	18"	
24 3/4" to 32 1/4"	32"	18"	
33" to 41"	44"	18"	
40" to 48"	54"	18"	

- 5. Install (2) of the 1.50" square tubes (E {18" tube}) 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. 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.
- 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place. The angle is not to exceed 45 degree and not below 40 degrees.
- 9. After all bolts are tightened, 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

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR MOST STABILIZER PLATES & FRAME TIES.

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. NOTE: Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. This frame tie & stabilizer plate needs to be located within 18" from of center ground pan.
- 12. 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.)
- 13. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
- 14. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
- 15. 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.



INSTALLATION USING CONCRETE RUNNER / FOOTER

- 16. 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
 - d) If a full slab is used, the depth must be a 4" minimum at system bracket location, all other specifications must be per local jurisdiction. 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")

17. 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.

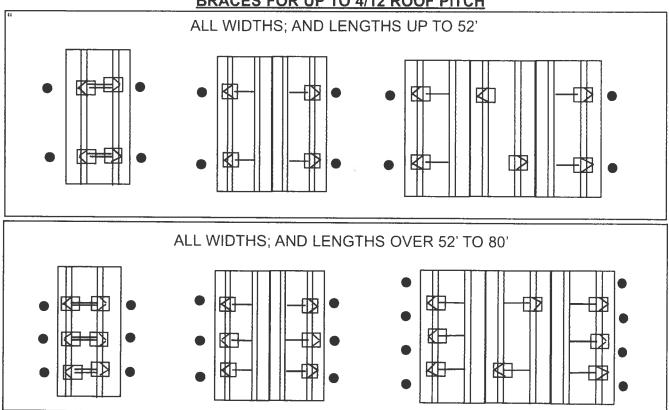
LATERAL: (Model 1101 TC "V")

- 18. 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.
- 19. When using part # 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

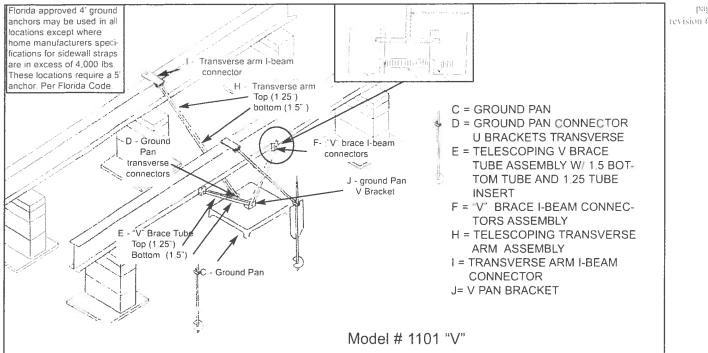
Notes:

- 1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- 2. = STABILIZER PLATE AND FRAME TIE LOCATION (needs to be located within 18 inches of center of ground pan or concrete)
- 3. E LOCATION OF LONGITUDINAL BRACING ONLY
- 4. X=+=TRANSVERSE & LONGITUDINAL LOCATIONS

REQUIRED NUMBER AND LOCATION OF MODEL 1101 "V" OR 1101 C "V" BRACES FOR UP TO 4/12 ROOF PITCH



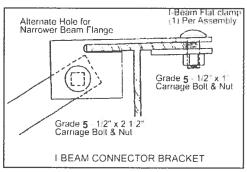
HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS 6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'. One stabilizer plate and frame tie required at each lateral bracing system.

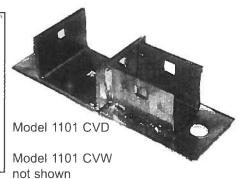


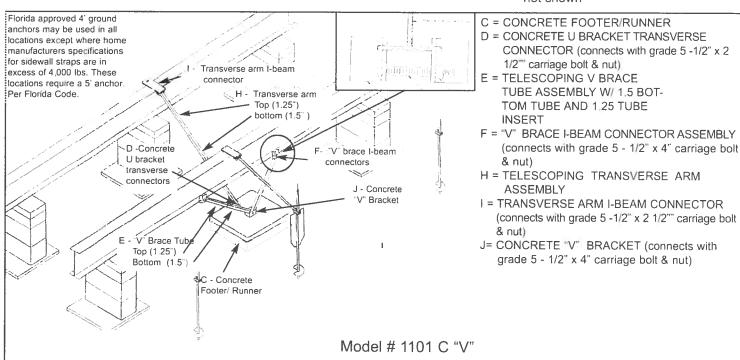
Longitude dry concrete bracket part # 1101 D-CPCA

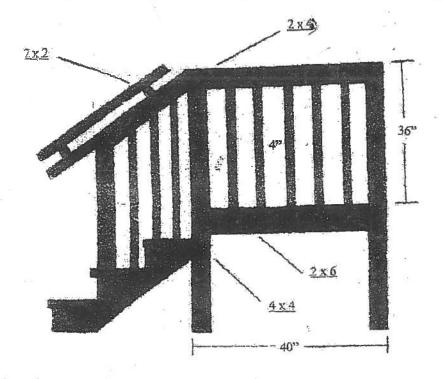
Wet bracket part # 1101 W-CPCA not shown











SUBMITTED BY HALL SERVICES, INC.

ALL STEPS ARE CONSTRUCTED FROM PRESSURE TREATED PINE. STEP PLATFORM IS 40" X 40". PICKETTS ARE NO MORE THAN 4" APART. THE SUM OF 1 TREAD AND 2 RISERS ARE BETWEEN 24" AND 25".

FASTENERS USED:

#3X3" GAL, DECK SCREWS #10X4" GAL, DECK SCREWS #8 GAL, RING SHANK NAILS

Homeowner: Mallace Cable Year Model: 1982	Single	
Address: Length & Width:	Double	
	Triple	
City/State/Zip: Type Longitudinal System:	HUD Label #:	
Phone #: 433-306-1441 Type Lateral Arm System:	Soil Bearing / PSF: /600	
Date Installed: - New Home: Used Home:	Torque Probe / in-lbs: 276	
Installed Wind Zone: Data Plate Wind Zone:	Permit #:	

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

53175

LABEL#

DATE OF INSTALLATION

FERMON JONES

NAME

IH/1025418/1

3412

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.

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.

Inst. Number: 201812016930 Book: 1366 Page: 1848 Page 1 of 2 Date: 8/15/2018 Time: 1:04 PM

P.DeWitt Cason Clerk of Courts, Columbia County, Florida Doc Deed: 0.70

This instrument was prepared by Darby F. Hertz, Hertz & Kearns, 618 NE 1st Street, Gainesville, FL 32601. Title to the lands described herein has not been examined and no opinion (either express or implied) is given as to the marketability or condition of the title to the subject property, the quantity of lands included therein, the location of the boundaries thereof or the existence of liens, unpaid taxes or encumbrances.

Inst: 201812016930 Date: 08/15/2018 Time: 1:04PM Page 1 of 2 B: 1366 P: 1848, P.DeWitt Cason, Clerk of Court Columbia, County, By: LK Denuty ClerkDac Stamn-Deed: 0.70

THIS DEED IS EXEMPT FROM THE IMPOSITION OF DOCUMENTARY STAMP TAX UNDER RULE 12B-4.013(28) FAC AS A CONVEYANCE OF PROPERTY BY THE WIFE TO THE HUSBAND IN ACCORDANCE WITH A FINAL JUDGMENT OF DISSOLUTION OF MARRIAGE ENTERED BY THE COURT OF THE THIRD JUDICIAL CIRCUIT IN AND FOR COLUMBIA COUNTY FLORIDA, IN CASE NUMBER 12-2017-DR-380.

QUITCLAIM DEED

THIS QUITCLAIM DEED was made on June _____ 2018 by Cherie Cable (Grantor), a single person, whose mailing address is 14896 SW Tustenuggee Avenue, Fort White, Florida, 32038 and Wallace H. Cable, III, (Grantee), a single person, whose mailing address is 2992 SW Old Bellamy Road, Fort White, Florida 32038.

WITNESSETH that: Cherie Cable, for and in consideration of the sum of one hundred dollars (\$100.00) and other valuable consideration, the receipt whereof is hereby acknowledged, does hereby remise, release, convey and confirm unto the Grantee all of that certain land situated in Columbia County, Florida, to wit:

COMM SW COR OF SEC, RUN E 26 FT TO E R/W OF SW LEGREE TERR FOR POB. THENCE RUN NORTH ALONG R/W 1298.16 FT, NE 50 DEG 84.66 TO S R/W OF SW OLD BELLAMY RD, E ALONG R/W 731.62 FT, CONT E ALONG R/W 28.83 FT, S 1293.51 FT, W 822.33 FT TO POB. TD 1161-933, WD 1291-341, CORR WD 1294-1960, of the Public Records of Columbia County.

Parcel Identification Number 31-6S-17-09818-019

THIS INSTRUMENT WAS PREPARED by Darby F. Hertz of Hertz & Kearns. Attorney did not examine title to the lands described herein and absolutely no representation, express or implied, is made as to the status of title to said lands. Attorney did not examine the subject mortgages for any due on sale covenants. Grantor and Grantee release and hold Attorney harmless from any and all harm, costs, damages, or liability Grantor and Grantee may suffer under said restrictions arising out of this conveyance.

TOGETHER with all of the tenements, hereditaments and appurtenances therefore belonging or in anywise appertaining.

TO HAVE AND TO HOLD the same in fee simple forever

AND the Grantor hereby covenants with said Grantee that Grantor has good right and lawful authority to sell and convey said land; that Grantor hereby quitclaims all right and title to said land to the Grantor.

IN WITNESS WHEREOF, the Grantor has si June 2018.	
IN WITNESS WHEREOF, the parties have so	Witness Quilter to Add and an analysis of the date of acknowledgement.
Cherie Cabic	Witness Drittany M. Lopen Witness Printed Name 15a A. Shitelds
STATE OF FLORIDA) COUNTY OF COLUMBIA) Sworn to and subscribed before me Cherie Cable, who is personally know as identification.	on the day of 2018, by wn to me or produced
Notary Public State of Florida Lisa Schitizikus My Commission GG 014849 Expires 06/30/2020	Notary Public State of

APPLICATION NUMBER 1808-62 CONTRACTOR JONES, FERMON PHONE 352318 4734

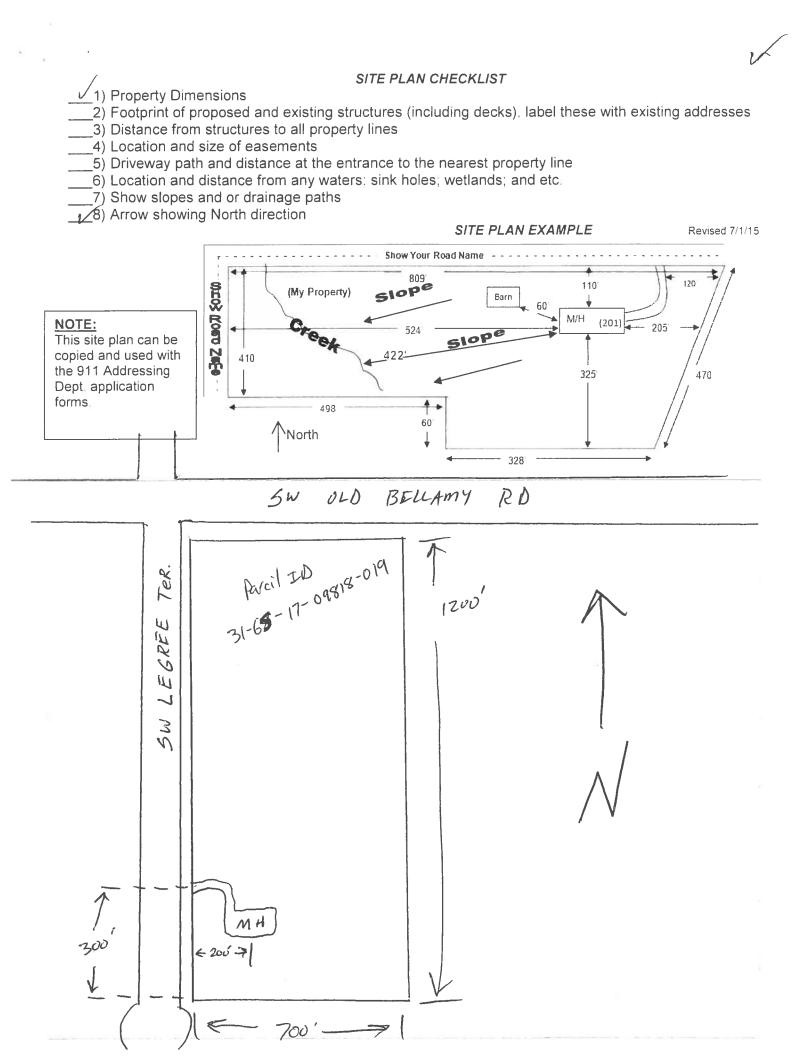
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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 Walle Capel Signature License #: Phone # 23. 306, 144)			
/		Qualifier Form Attached			
<u></u>	MECHANICAL/	Print Name WALLALE CARLE Signature Phone #: 423. 306. 1441			
86		Qualifier Form Attached			

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 DEPARTMENT COLUMBIA COUNTY, FLORIDA OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM
OWNERS NAME WALLACE CABLE PHONE
INSTALLER Fermon Joses PHONE 352-318-473 PELL 352-318-471
INSTALLERS ADDRESS 6795 SW 715+ Ave. Lake Butler, Fl. 32054
MOBILE HOME INFORMATION
MAKE <u>SK Y UNIC</u> YEAR <u>1982</u> SIZE <u>24 x 98</u>
COLOR OFF White SERIAL No. 0/6304/7AR
WIND ZONE I SMOKE DETECTOR WILL IN Stall
INTERIOR:
FLOORS good
DOORS good
WALLS GOOD
CABINETS 9000
ELECTRICAL (FIXTURES/OUTLETS)
EXTERIOR: WALLS / SIDDING
WINDOWS
INSTALLER: APPROVED NOT APPROVED
INSTALLER OR INSPECTORS PRINTED NAME Fermone Jones
Installer/Inspector SignatureLicense NoLicense No
NOTES:
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.
NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.
BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.
ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.
Code Enforcement Approval Signature Date 8-22-18

SIGHVHIVTORO d12 UNDERWRITERS LABORATORIES Skyline Housing Corp. 60062 DISTRICT ATRO ESD ESTAD DENTRAL F1. 32678 State 333 PFINGSTRN ROAD The supply air distribution system installad in this home is size P.O. Box 443 NORTHBROOK, ILL ty / State NAMURACTURER SHALL PROVIDE THE MINIMUM BTU REQUIREMENTS FOR HEAVING AND COOLING OR THE "U" PACTORS AS DESIGNATED DELOY." The hearing equipment has the capacity to halled an overage $70^\circ\mathrm{F}$ comparature in this hom at entition-temperature, of 95° or to invariant furnace equating expansy, and to conserve energy, it is recommended that this temperature (974), is not lighter than N/R or. with the requirements of the BeGeral Mobile Home Construction 39 Callings & Hoofs of Light Color.
Cuilings & Hoofs of Dark Color. The above information has torn calculated ascending a maximum wind velocity of 15 kPH at standard atmospheric pressure. () Not Designed For $N\!\!/\!\!\!\!/ C$ (X) A/C Ready () $N\!\!/\!\!\!/ C$ Installed Flours.
Air Ducts in Plour
Air Ducts in Colling.
Air Ducts Installed Obuside the Home.
Heat Transfer Area to Outside of Home from Air Ducte
Located: Inside Home. Sg.Ft. 1050utside Home. 1982 Type or Print Name This mobile hame has been themsally insulated to conform Zone Ocala, and Safety Standards for all locations within climatic ZONE III City Zone DEALFR'S Paul A. Kidder City DESIGN WINTER CLEARIE ZONE ADDRESS NAME Zone III DAPIA NAME ADDRESS ZONE II ROOM 167, NEIL KIRKMAN HLBG., 2900 APALACHEE PKWY SAMETY AND MOTOR VEHICLES Zone II () EMCLUDING HITCH (X) INJUDING HITCH UNIT C TALLAHASSEE, FLORIDA 32301 DIVISION OF MOTOR VEHICLES ASK24 () TRIPLE REPORT X ZONE I Authorized Representativo Note: Hawaii and Canal Zone a Zone I-The Puerto Rico and Virgin Islands = Zone il FLA OF PLOREDA of Manufacturer MANIFACTURER DATA UNIT B DESTINATION (STATE) DEPAPEMENT OF HICHMAY (Hurricane)-25 Psf Horizontal () SINGEE (X) STRUCTURAL DESIGN BASIS CERTIFICATE SIRE: UNIT A Zone DESIGNATION 32-1002-23 THE TYSHER 15 Paf Horizontal & 9 Paf SCI302HS 7655-856 Zone 5-76-82 DATE 206 206 & 15 Psf Uplift Zone SIGNED; 1982 WIND LOAD MANUFACTURER COLEMAN Uplift TAPPAN North GE STATE YEAR: SKYLINE CORP. / CAMERON DIV WITH THE FEDERAL MOBILE HOME CONSTRUCTION AND SAFETY STANDARDS IN FORCE AT THE TIME OF MANUFACTIONS Zone III Other M.H. ID OR SERLAL # 0163-0417-RAB Note: Hawell, Canal Zone, Puerto Rico and Virgin Islands are South Zone Middle BTU/hr.).. NA Dishwasher...... THIS MOBILE HOME IS DESIGNED TO COMPLY Food Waste......... OCALA, FLORIDA 32678 5-26-82 BTU/hr.).. Cooking Range, Counter-Top Cooking Unit...... 9 X Zone II prof 7803 Zone 185247 P.O. BOX 2168 South, 图 DATE ASSIGNED OR MERD Smoke Detector..... FLA Middle 30 PSP North 40 PSF South 20 PSF Built-in Oven.... Air Conditioning(MAKE OF MODEL Comfort Meating (HUD LABEL # (1-81) ROOF LOAD MANUFACTURER. MER. NALIE Other ADDRESS EQUIPMENT XX

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

Date/Time Issued:

8/22/2018 1:30:38 PM

Address:

650 SW LEGREE Ter

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

09818-019

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

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

Mobile Home

Applicant: () Application Date: 8/29/2018

Action ▼

1. JOB LOCATION

Completed Inspections

2. CONTRACTOR

Schedule Inspection (ScheduleInspection.aspx?Id=39425)

Inspection

Date

By

Notes

3. MOBILE HOME

DETAILS

Passed: Mobile Home - In County Pre-Mobile Home

before set-up

8/30/2018 TOMMY

MATTHEWS

4. APPLICANT

5. REVIEW

The completion date must be set To release Certifications to

the public.

6. FEES/PAYMENT

Permit Completion Date

(Releases Occupancy and Completion Forms)

7.

DOCUMENTS/REPORTS

(1)

Incomplete Requested Inspections

8.

Inspection

Date

Ву

Notes

9. INSPECTIONS (1)

NOTES/DIRECTIONS

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number 18-0765 ------ PART II - SITEPLAN ------81D. Scale: 1 inch = 40 feet. 83, .WL 143 1210 211/X1/81 20' 93' 臘 102 Notes: 137.1 Site Plan submitted by: MASTER CONTRACTOR Plan Approved Not Approved_ County Health Department CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Accoletes previous editions which may not be used) Incorporated: 64E-5.001, FAC (Stock Number: 6744-002-4015-8)

Page 2 of 4



STATE OF FLOTING
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. DATE PAID:	18-0765
FEE PAID: RECEIPT #:	312.20

<pre>LPPLICATION FOR: [V] New System [] Exi [] Repair [] Abs</pre>	sting System	[] Holding Tank [] Temporary	[] Innovative
IDPLICANT: WALLACE CA	ble	·····	
GENT: ROCKY FORD, A & B CONST	RUCTION	TE	LEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dorton	*		
TO BE COMPLETED BY APPLICANT (BY A PERSON LICENSED PURSUANT APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUESTS	DR APPLICANT'S AUTH TO 489.105(3)(m) O PROVIDE DOCUMENTAT ING CONSIDERATION O	ORIZED AGENT. SYS R 489.552, FLORIDA ION OF THE DATE TH F STATUTORY GRANDF	TEMS MUST BE CONSTRUCTED STATUTES. IT IS THE E LOT WAS CREATED OR ATHER PROVISIONS.
PROPERTY INFORMATION			
LOT: NA BLOCK: NA B	UB: NA		PLATTED:
PROPERTY ID #: 31-68-17-0981	8-019 zon	ING: I/M (OR EQUIVALENT: [Y/N]
PROPERTY SIZE: 25 ACRES V	VATER SUPPLY: [X]	PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.			
PROPERTY ADDRESS: 650 SW Lag			
DIRECTIONS TO PROPERTY: 47 So			
of Legree Terr and Old Bell	amy Rd		
BUILDING INFORMATION	[] RESIDENTIAL	[] COMMERC	IAL
Jnit Type of % Establishment			citutional System Design or 64E-6, FAC
SF Residential	31152		Edge Colonia (Colonia
3			
[] Floor/Equipment Drains	/)		DATE: 9/6/2018
OH 4015, 08/09 (Obsoletes pre- Incorporated 64E -6.001, FAC	•		