

Parcel:

**30-7S-17-10069-121**

**Owner & Property Info**

Result: 1 of 1

	<b>HILTON RICHARD C</b>	
Owner	40 MEDALIST LN ROTONDA WEST, FL 33947	
Site	841 CHALET TER, FORT WHITE	
Description*	COMM NW COR SEC 19, RUN E 1111.14 FT TO SW R/W ABANDONED SCL RR, SE ALONG R/W TO ITS INTERS WITH W R/W BOB-CAT LANE, RUN S 4874.16 FT TO S LINE SEC 19, SAID PT BEING ON C/L RACoon RUN RD, RUN S 564.50 FT FOR POB, CONT S 284.64 FT, W 1532.33 FT, N 284.71 FT, E 1529.58 FT TO POB (AKA TRACT 21 LYN-DEE DAIRY S/D UNREC). 771-289, 787-2191 875-439, 877-1857, CT 1298-816 WD 1312-1187, WD 1334-2295, <<<less	
Area	10.01 AC	S/T/R 30-7S-17E
Use Code**	AC/XFOB (009901)	Tax District 3

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM


APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR Brent Strickland PHONE 386-365-7043

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

Richard Hilton

IN Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED 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.*

<b>ELECTRICAL</b>	Print Name <u>Richard Hilton</u>	Signature _____
	License #: <u>Owner</u>	Phone #: <u>954-523-1312</u>
	Qualifier Form Attached <input type="checkbox"/>	
<b>MECHANICAL/ A/C _____</b>	Print Name <u>Michael Boland</u>	Signature 
	License #: <u>CAC 1817716</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	

*Qualifier Forms cannot be submitted for any Specialty License.*

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

**F. S. 440.103 Building permits; identification of minimum premium policy.**--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



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

# LICENSED QUALIFIER AUTHORIZATION

I, Michael A Boland (license holder name), licensed qualifier  
for ACE A/C of Ocala, LLC (company name), do certify that  
the below referenced person(s) listed on this form is/are contracted/hired by me, the license  
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an  
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said  
person(s) is/are under my direct supervision and control and is/are authorized to purchase and  
sign permits, call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>DAVE BIRD</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Rocky Ford</u>	3. <u>[Signature]</u>
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done  
under my license and fully responsible for compliance with all Florida Statutes, Codes, and  
Local Ordinances. I understand that the State and County Licensing Boards have the power and  
authority to discipline a license holder for violations committed by him/her, his/her agents,  
officers, or employees and that I have full responsibility for compliance with all statutes, codes  
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or  
officer(s), you must notify this department in writing of the changes and submit a new letter of  
authorization form, which will supersede all previous lists. Failure to do so may allow  
unauthorized persons to use your name and/or license number to obtain permits.

[Signature]  
Licensed Qualifiers Signature (Notarized)

CAC1817716 License Number ES200926 Date 11/17/15

NOTARY INFORMATION:  
STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) DM on this 17th day of November, 20 15

[Signature]  
NOTARY'S SIGNATURE

(Seal/Stamp)





# PERMIT NUMBER

# PERMIT WORKSHEET

Installer Brent Strickland License # IH 1104218

Installer Mobile Phone # 386-365-7043

Address of home being installed

Manufacturer

LIVE OAK

Length x width

76x28

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.

Installer's initials

B.S.

New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual

Single wide

☐

Wind Zone II

☒

Double wide

☒

Installation Decal #

65739

Triple/Quad

☐

Serial #

20H6A 2203584AB

Roof System:

☒ Typical

☐ Hinged

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16" x 16" (256)	18 1/2" x 18 1/2" (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'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

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

## PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 17x25

## POPULAR PAD SIZES

Pad Size	Sq ft
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	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

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

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

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

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Number

Manufacturer

Longitudinal

Number

Manufacturer

Longitudinal

Number



# PERMIT NUMBER

## PERMIT WORKSHEET

page 2 of 2

### 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 295 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

B.S. Installer's Initials

#### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Brett Strickland

Date Tested

7-17-2020

### 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. 28

### Site Preparation

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

### Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16"  
Walls: Type Fastener: lags Length: 4 Spacing: 16"  
Roof: Type Fastener: lags Length: 6 Spacing: 16"  
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 B.S.

Type Gasket FOAM

Installed:  
Between Floors Yes ☒  
Between Walls Yes ☒  
Bottom of ridgebeam Yes ☒

### Weatherproofing

The bottomboard 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 ☒

### Miscellaneous

Skirting to be installed. Yes ☒ No ☒  
Dryer vent installed outside of skirting. Yes ☒ N/A ☒  
Range downflow vent installed outside of skirting. Yes ☒ N/A ☒  
Drain lines supported at 4 foot intervals. Yes ☒  
Electrical crossovers protected. Yes ☒  
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 Signature Brett Strickland Date 7-17-2020

7-11-2018

**Live Oak Homes**  
**MODEL: L-2764D - 28 X 80**  
**3-BEDROOM / 2-BATH**

- |   |                          |   |                                       |
|---|--------------------------|---|---------------------------------------|
| A | MAIN ELECTRICAL          | G | DUCT CROSSOVER                        |
| B | ELECTRICAL CROSSOVER     | H | SEWER DROPS                           |
| C | WATER INLET              | I | RETURN AIR (W/OPT. HEAT PUMP ON DUCT) |
| D | WATER CROSSOVER (IF ANY) | J | SUPPLY AIR (W/OPT. HEAT PUMP ON DUCT) |
| E | GAS INLET (IF ANY)       |   |                                       |
| F | GAS CROSSOVER (IF ANY)   |   |                                       |

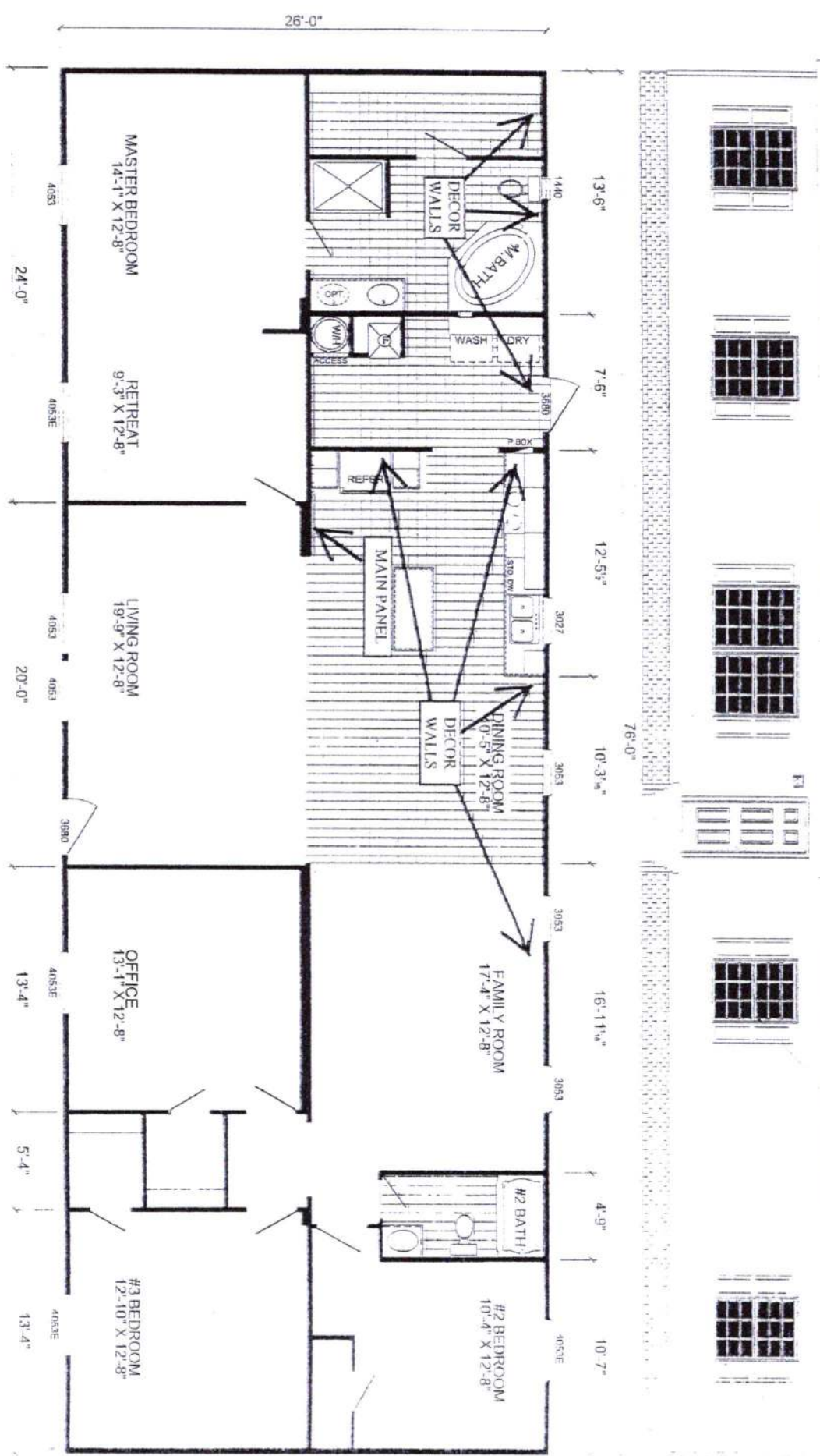
L-2764D



11/1/20

# SPARTAN

Proposed



**L-2764D**

**3-BEDROOM / 2-BATH**

**28 X 80 - Approx. 1976 Sq. Ft.**

- 6-3-2013
- \* All room dimensions include closets and square footage figures are approximate.
- \* Windows are available on optional 9'-0" sidewalk houses only.
- \* Upgrading shown is optional.

*[Signature]*  
7/16/20

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

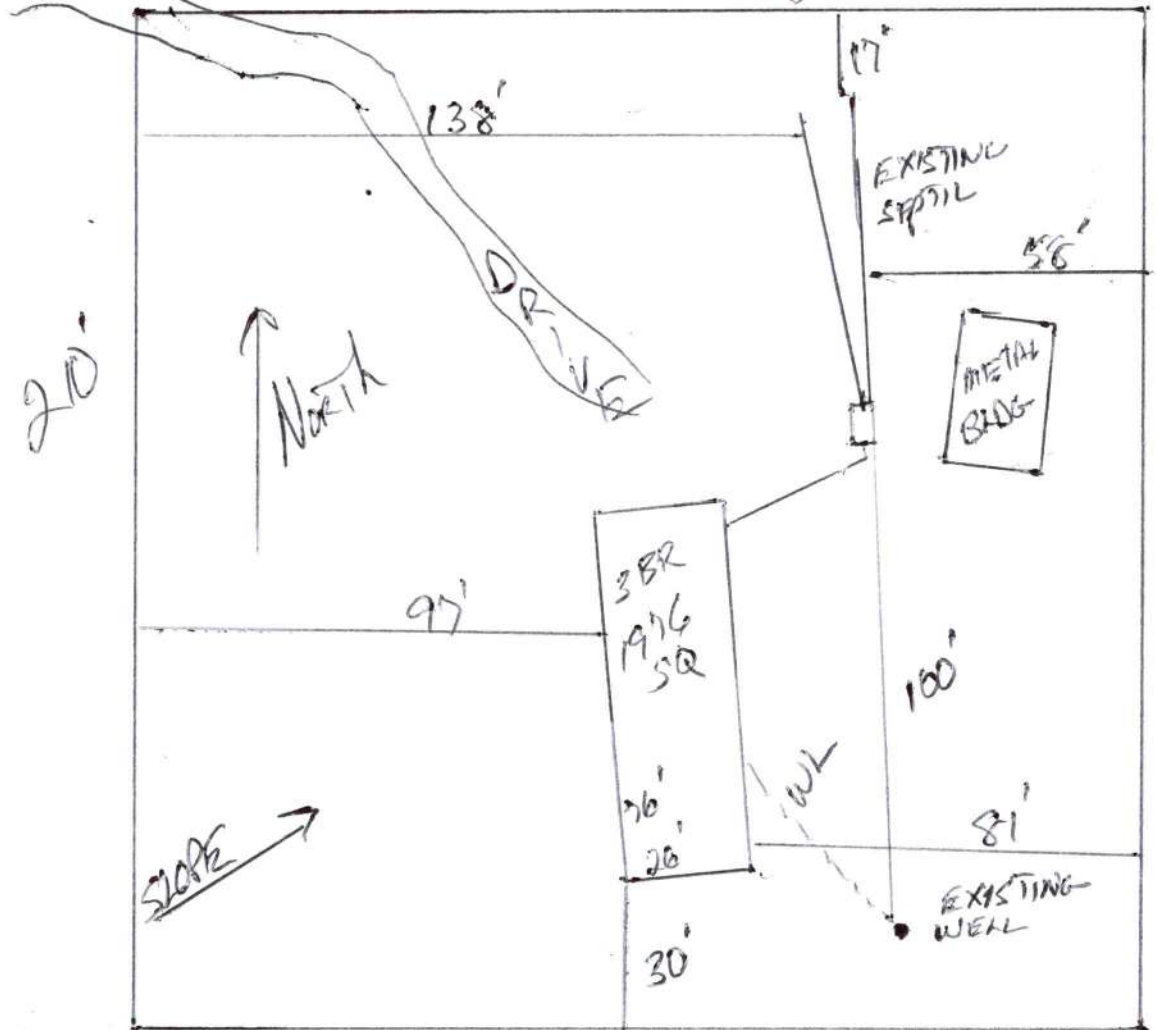
Permit Application Number \_\_\_\_\_

*Alton*

PART II - SITEPLAN

*210'*

Scale: 1 inch = 40 feet.



Notes: *1 of 10.01 ACRES*  
*PLEASE SEE ATTACHED*

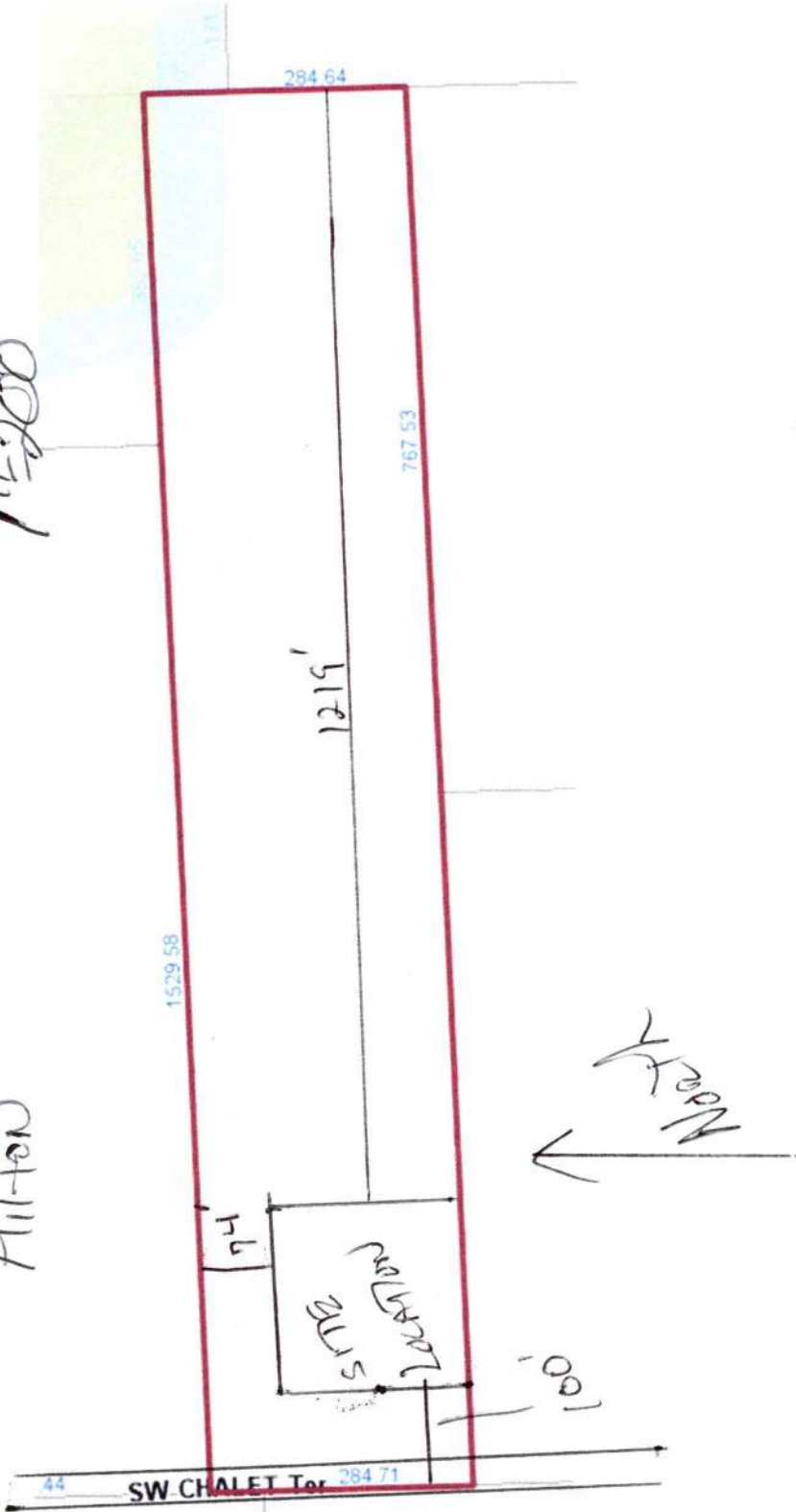
Site Plan submitted by: *[Signature]* *7/16/20* CONTRACTOR  
Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_  
By \_\_\_\_\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Hilton

11,200'



7/16/20

District No. 1 - Ronald Williams  
District No. 2 - Rusty DePratter  
District No. 3 - Bucky Nash  
District No. 4 - Everett Phillips  
District No. 5 - Tim Murphy



**BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY**

**Address Assignment and Maintenance Document**

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **12/11/2018 11:05:09 AM**

Address: **841 SW CHALET Ter**

City: **FORT WHITE**

State: **FL**

Zip Code **32038**

Parcel ID **10069-121**

REMARKS: Address Verification.

**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](mailto:gis@columbiacountyfla.com)