PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only (Revised 7-1-15) Zoning Official MA Building Official Just
$\frac{POPOPPICE Use Only}{AP# 1909-64}$ $\frac{POPOPPICE Use Only}{Date Received 9/19/19}$ $\frac{POPOPPICE Use Only}{Building Official}$
Flood Zone Development Permit Zoning_ <u>A-3</u> Land Use Plan Map Category_ <u>A8</u>
comments ok to replace existing with Permit from prior 14.9 family lot permits, floor one fot above the road
FEMA Map# Elevation Finished Floor River In Floodway
Recorded Deed or V Property Appraiser PO V Site Plan, FEH # 19-0708 D-Weil letter OR
TExisting well 🛛 Land Owner Affidavit 🕼 Installer Authorization 🖓 FW Comp. letter 😢 App Fee Paid
DOT Approval Derent Parcel #D STUP-MH 911 App
□ Ellisville Water Sys i Assessment Paid on Property □ Out County □ In County □ Sub VF Form
for a
Property ID # 01-4S-15-00314-012 Subdivision NA Lot# NA
New Mobile Home X Used Mobile Home MH Size <u>16 x 60</u> Year 2020
Applicant Dale Burd Phone # 386-365-7674
<ul> <li>Address20619 CR 137, Lake City, FL, 32024</li> </ul>
<ul> <li>Name of Property Owner_Roger - Diann Cochran Phone# 386-288-1322</li> </ul>
· 911 Address 515 Sw Diamond Ct Lake City for 32024
Circle the correct power company - ( <u>FL Power &amp; Light</u> ) - <u>Clay Electric</u>
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Daughter • Name of Owner of Mobile Home Daniel Bakker / Rhonda Andrews Phone # 872-600-1700
Address 467 Diamond Court, Lake City, FL, 32024
Relationship to Property Owner Rhonda is daughter
Current Number of Dwellings on Property1
Lot Size 613 x 1028 Irregular Total Acreage 10.02
Do you : Have Existing Drive (Currently using)     Dr Private Drive (Blue Road Sign)     Dr need Culvert Permit (Putting in a Culvert)     or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home Yes
<ul> <li>Driving Directions to the Property_US 90 West, TL CR 252, TR Mayo Road, TR Diamond to end</li> </ul>
on right
Name of Licensed Dealer/Installer <u>William Price</u> Phone # <u>386-963-4298</u>
Installers Address <u>3360 150th PI, LC, FL, 32024</u> License Number III 4044036
<ul> <li>License Number <u>IH-1041936</u> Installation Decal # <u>63780</u></li> </ul>

LH Sent Dale on email 9/25/19



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.         Plumbing         Connect all sewer drains to an existing sewer tap or septic tank. Pg.         Connect all sewer drains to an existing sewer tap or septic tank. Pg.         Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	POCKET PENETROMETER TEST         The product penetronmeter tests are nounded down to $\underline{WW}$ psf or check here to declare 1000 fb. soilwithout testing.         Note: the penetronmeter tests are nounded down to $\underline{WW}$ psf or check here to declare 1000 fb. soilwithout testing.         NOCKET PENETROMETER TESTING AMETHOD         1. Test the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the perimeter of the home at 6 locations.         2. Take the torque probe test is $\underline{MT}$ includes the towest needs in cound down to that increment.         XWW         XW         XW         XWW         XWW         XWW         XWW <th>Mobile Home Permit Worksheet</th>	Mobile Home Permit Worksheet
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	Site Prevention         Debris and organic material removed       GU/U       Waler         Water drainage: Natural       Swale       Pad       Other         Water drainage: Natural       Factorning multi write units       Factorning multi write units       Pad       Other         Floor.       Type Fastener:       Length:       Spacing:       Spacing:       Pad       Other         For used homes a min. 30 gauge s' wide gatvanized metal strip       Spacing:       Length:       Spacing:       Spacing:       Spacing:       For used homes a min. 30 gauge s' wide gatvanized metal strip         Noting nalls at 2' on center on both-sides of the centerline.       Cesket revelue and buckled marinage wells are a result or a poonty installed gasket is a requirement of all new and used homes and that condensation, mold, metdew and buckled marinage wells are a result or a poonty installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.       Installer s hitigs         Type gasket       Installer s hitigs       No         Type gasket vert installed to markfacturer's specifications.       Pg.         Stiding on units is installed to markfacturer's specifications.       Pg.         Stiding on units is installed so as not to allow intrusion of rain water. Yes, Freplace dimension of rain water. Yes, Freplace disting, Yes, Nu       Nu         Dryet vent installed outside of skithing. Yes, Nu       Nu <td>Application Number: 1909-64 Date: 9/19</td>	Application Number: 1909-64 Date: 9/19

Page 2 of 2



Briddong FRTHRENK

Parcel:	01-4S-15-00314-	012	
Owner & P	roperty Info	Resul	t: 1 of 1
Owner	COCHRAN ROGI P O BOX 324 LAKE BUTLER, F		J
Site	467 DIAMOND C	T, LAKE CITY	
Description*	BEG NW COR OF RUN E 197.79 FT T PRCL OF LAND, R TO A PT ON A LINI PARALLEL TO E LI 613.31 FT, N 1028.1 ESMT OVER THE	TO NW COR OF UN S 466.69 FT E LYING 51.59 F NE OF SEC, S D6 FT TO POB.	A 5-AC , E 415.10 FT FT W OF & 561.17 FT, W
Area	10.02 AC	S/T/R	01-4S-15
Use Code**	SINGLE FAM (000100)	Tax District	3
*The <u>Description</u> parcel in any leg	above is not to be used al transaction.	as the Legal Desc	cription for this

1909-104 APPLICATION NUMBER

CONTRACTOR William Price

PHONE 386-963-4298

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

Daniel Bakker / Rhonda Andrews

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.

	Print NameLeo Jackson	Signature.		
$\checkmark$	License #: ES 12001176	Phone #: 386-688-3821		
1503	Qualifier Form Attached			
MECHANICAL/	Print Name Ronald Bonds Sr.	Signature		
A/C 1649	License #: CAC 1817658	Phone #: 800-259-3470		
	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

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160				
LICENSED QUALIFO	er authorization			
1 100 G Freton	(license holder name), licensed qualifier			
for Cainthy ELACTRIC	LLC (company name), do certify that			
the below referenced person(s) listed on this form is/are contracted/hired by me, the license notder, or ta/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, pertner as defined in Florida Statutos Chapter 488, 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. DA/13 Burd	1. Alter of			
2. Koing Toxel	2. Roch 1) +			
3. Les JACKSON JA	3 Autob Ga			
4.	4.			
5.	5.			
	and the second second and all second shares			

COLUMPIA COUNTY BUILDING DEPARTMENT

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 agenta, 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(a) you have authorized in/are no longer eponts, employee(a), or officer(a), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all cravious lists. Failure to do so may allow unsutherized persons to use your name and/or lipense number to obtain permits.

Jeh

Woenaed Obsittiens Signature (Noterized)

License Number

(Seal/Stamp)

STATE OF COUNTY OF:

G 40 8m LEO The above license holder, whose name is, personally appaared before majend is known by me or has produced identification 20/6 on this day of MI. (type of I.D.)

"8 8**|G**|





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 upauthorized persons to use your name and/or license number to obtain permits.

<u>AC 1817658</u> <u>2-16-16</u> ense Number Date License Number Licensed Qualifiers Signature (Notarized) NOTARY INFORMATION COUNTY OF BAN STATE OF TL Edward The above license holder. whose name is fongld personally appeared before me and is known by me or has produced identification £В (type of I.D.) on this 14 day of

V GAM LOOPE'AS

(Seal/Stamp)





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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

give this authority and I do certify that the below

referenced person(s) listed on this form is/are under my direct supervision and control and Is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Dale Burd	All	DAMBRIGH LLC
	*	

L 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)

<u>1H-1041936</u> <u>9-16-19</u> License Number Date

515 S.W

NOTARY INFORMATION:

STATE OF: Florida

Dilliton The above license holder, whose name is personally appeared before me and is known by me or has produced identification (type of I.D.) on this day of EPKMber 201

COUNTY OF: Suuchne

NOTARY'S SIGNATURE

(Seal/Stamp)



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

	Permit Applicati	on Number
Cechrau]	BAKER ALARS PART II - SITEPLAN	
Scale: 1 inch = 40 feet.		
	66' 66' 60' 590 590 50 50 50 50 50 50 50 50 50 50 50 50 50	7 67' 43' 128' 128' 120' 120' 120' 120' 120' 120'
Notes: $\frac{1}{5} \frac{1}{5} \frac{1}{$		9/18/19
	<i>A</i>	
Site Plan submitted by:		
Plan Approved	Not Approved	Date
Ву		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 (Stock Number: 5744-002-4015-6)



1=150



SYSTEM			PERMIT NO. 9 2708 DATE PAID: 4/19/19 FEE PAID: 60000 RECEIPT #: 14 34479
APPLICATION FOR:         [] New System       [√] E:         [] Repair       [] Al	xisting System [ bandonment [	} Holding Tank ] Temporary	[ ] Innovative
APPLICANT: Roger Cochran			
AGENT: Dale Burd / Dale Burd LLC		T	ELEPHONE : 386-365-7674
MAILING ADDRESS: 20619 County R	Road 137, Lake City, FL, 32024		
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUES	T TO 489.105(3)(m) OR D PROVIDE DOCUMENTATIO	489.552, FLORIDA ON OF THE DATE TH	A STATUTES. IT IS THE HE LOT WAS CREATED OR
PROPERTY INFORMATION			
LOT: 7 BLOCK: na	SUBDIVISION: Murry Trac	t Unrec	PLATTED: na
PROPERTY ID #: 01-4S-15-00314-01	2 ZONIN	IG: <b>Pes.</b> I/M	OR EQUIVALENT: [ No ]
PROPERTY SIZE: 10.02 ACRES	WATER SUPPLY: [ / ] PH	RIVATE PUBLIC [	]<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 38	1.0065, FS? [ No ]	DIST	ANCE TO SEWER: DA FT
PROPERTY ADDRESS: 515 Diamond (			
DIRECTIONS TO PROPERTY: US 90	) West, TR CR 252, TR Mayo R	oad, TR Diamond Cour	t, To end on right
BUILDING INFORMATION	[√] RESIDENTIAL	[] COMMERC	IAL
Unit Type of No Establishment	No. of Building <u>Bedrooms</u> <u>Area Sqft</u>		itutional System Design er 64E-6, FAC
1 SF Residential	2 890	2 BR to 2 BR Like for	r Like
2		93-610 attached	
3			
4			
[ ] Floor/Equipment Drains	[ ] Other (Specif	y)	
SIGNATURE :	0		DATE : 9/14/2019
DH 4015, 08/09 (Obsoletes pre Incorporated 64E-6.001, FAC	vious editions which	may not be used)	



DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Legend

Water Lines Others CANAL / DITCH CREEK STREAM / RIVER SRWMD Wetlands 2018Aerials 1 Parcels Addresses Roads Roads

#### others Dirt Interstate 🧼 Main Other Paved

Private

# Columbia County, FLA - Building & Zoning Property Map

Printed: Wed Sep 25 2019 10:00:42 GMT-0400 (Eastern Daylight Time)



## Parcel Information

Parcel No: 01-4S-15-00314-012 **Owner: THOMPSON KEITH** Subdivision: Lot: Acres: 10.0150347 Deed Acres: 10.02 Ac District: District 2 Rocky Ford Future Land Uses: Agriculture - 3 Flood Zones: Official Zoning Atlas: A-3

ole to use for 911 Address. Dete

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