

Parcel:
19-6S-17-09698-019 (35825)

Owner & Property Info

Result: 2 of 7

	WAY PAMELA R		
Owner	750 SW CUMORAH HILLS ST FT WHITE, FL 32038		
Site	750 SW CUMORAH HILLS ST, FT WHITE		
Description*	COMM NE COR OF SW1/4, RUN S 30 FT TO S R/W OF CUMORAH HILL RD, RUN W 634.89 FT FOR POB, CONT W 344.08 FT, S 633.07 FT, E 344.07 FT, N 632.88 FT TO POB. ORB 660-552, 809- 1413, 840-1185, 865-2688, 875-8432, 809-1413, 912-1576, 921-431, AFD 1141-1559		
Area	5 AC	S/T/R	19-6S-17
Use Code**	MOBILE HOME (0200)	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

Way - Beaver

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.

ELECTRICAL	Print Name <u>Glenn Whittington</u> License #: <u>EC 13002957</u>	Signature  Phone #: <u>386-972-1700</u> Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/ A/C _____	Print Name <u>Michael Boland</u> License #: <u>CAC 1817716</u>	Signature  Phone #: <u>352-274-9326</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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE 386-623-2203

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

Ray Kneppar

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.

ELECTRICAL	Print Name <u>Glenn Whittington</u>	Signature 
	License #: <u>EC 13002957</u>	Phone #: <u>386-972-1700</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Ronald Bonds Sr.</u>	Signature 
	License #: <u>CAC1817658</u>	Phone #: <u>800-259-3470</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 & 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>Rocky Ford</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)

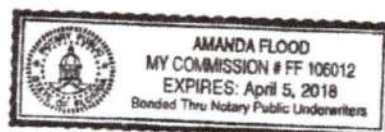
CAC1817716 License Number
ES200926 Date 11/17/15

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.) TM on this 17th day of November, 20 15

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



PERMIT NUMBER

Installer Brent Strickland License # IH 1104218

Installer Mobile Phone # 386-365-7043

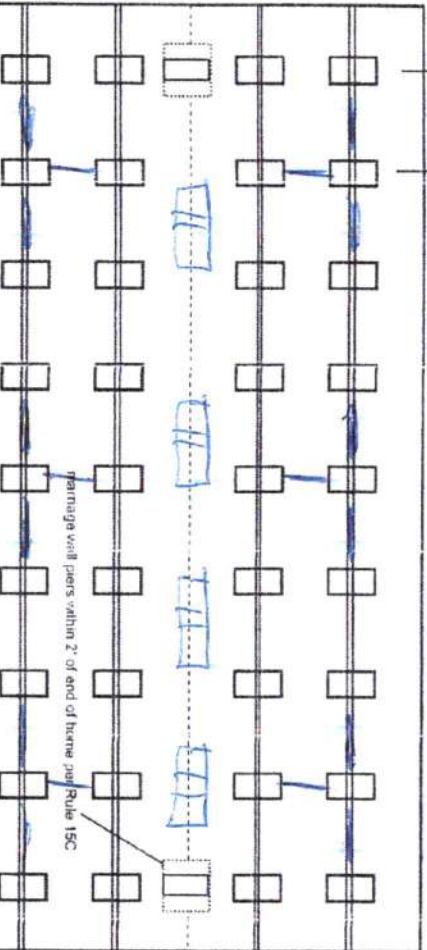
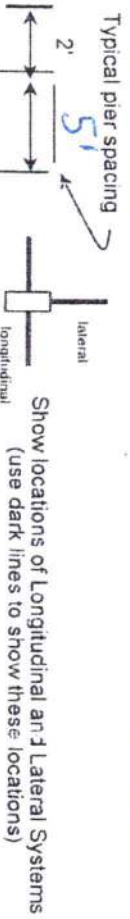
Address of home being installed

Manufacturer LIVE Oak Length x width 48x28

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

Home is installed in accordance with Rule 15-C

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 65812

Triple/Quad ☐ Serial #

Roof System: Typical ☐ Hinged ☐

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	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'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7.5"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

* interpolates from Rule 15C-1 pier spacing table

PIER PAD SIZES

I-beam pier pad size

Perimeter pier pad size

Other pier pad sizes (required by the mfg.)

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

POPULAR PAD SIZES

Pad Size	Sq in
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

ANCHORS

4 ft 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Number

24

10

8

4

PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1000 psf or check here to declare 1000 lb. soil ✓ without testing

X 1000 X 1000 X 1000

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 1000 X 1000 X 1000

TORQUE PROBE TEST

The results of the torque probe test is 2400 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. 1 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 require anchors with 4000 lb holding capacity.

B.S. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

PAUL STOCKARD

Date Tested

8-6-2021

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. 24

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 25

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 26

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: lag Length: 5" Spacing: 16"
Walls: Type Fastener: scabs 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
Pg. 27

Installed:

Between Floors Yes ✓
Between Walls Yes ✓
Bottom of ridgebeam Yes ✓

Weatherproofing

The bottomboard will be repaired and/or laped. 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

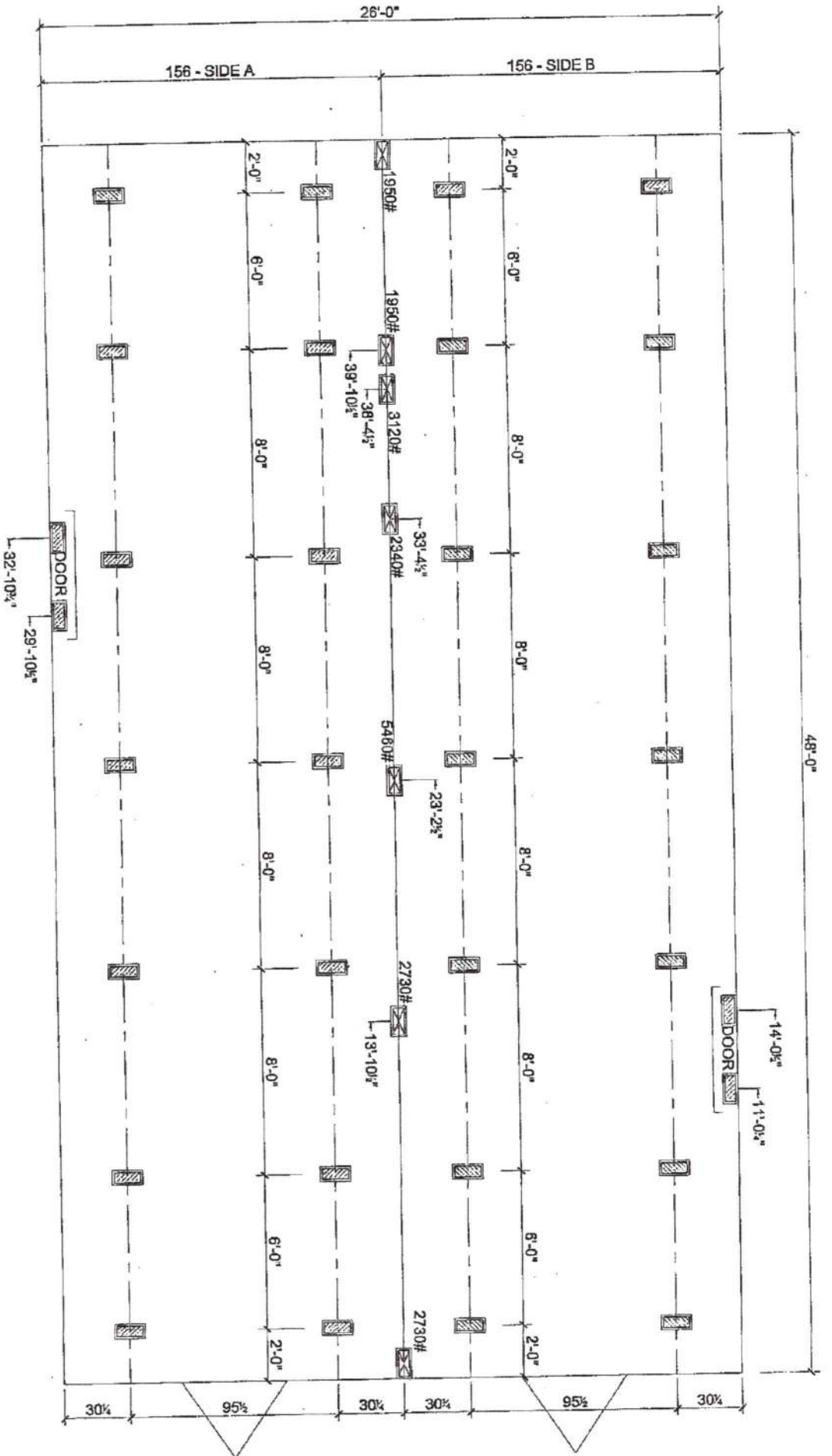
Installer Signature [Signature] Date 8-6-2021

Live Oak Homes **MODEL: L-24831 - 28 X 52** **3-BEDROOM / 2-BATH**

7-21-2016

FOUNDATION NOTES:
 - THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
 - FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
 - FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

-  MARRIAGE LINE OPENING SUPPORT PIER TYP.
-  SUPPORT PIER TYP



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

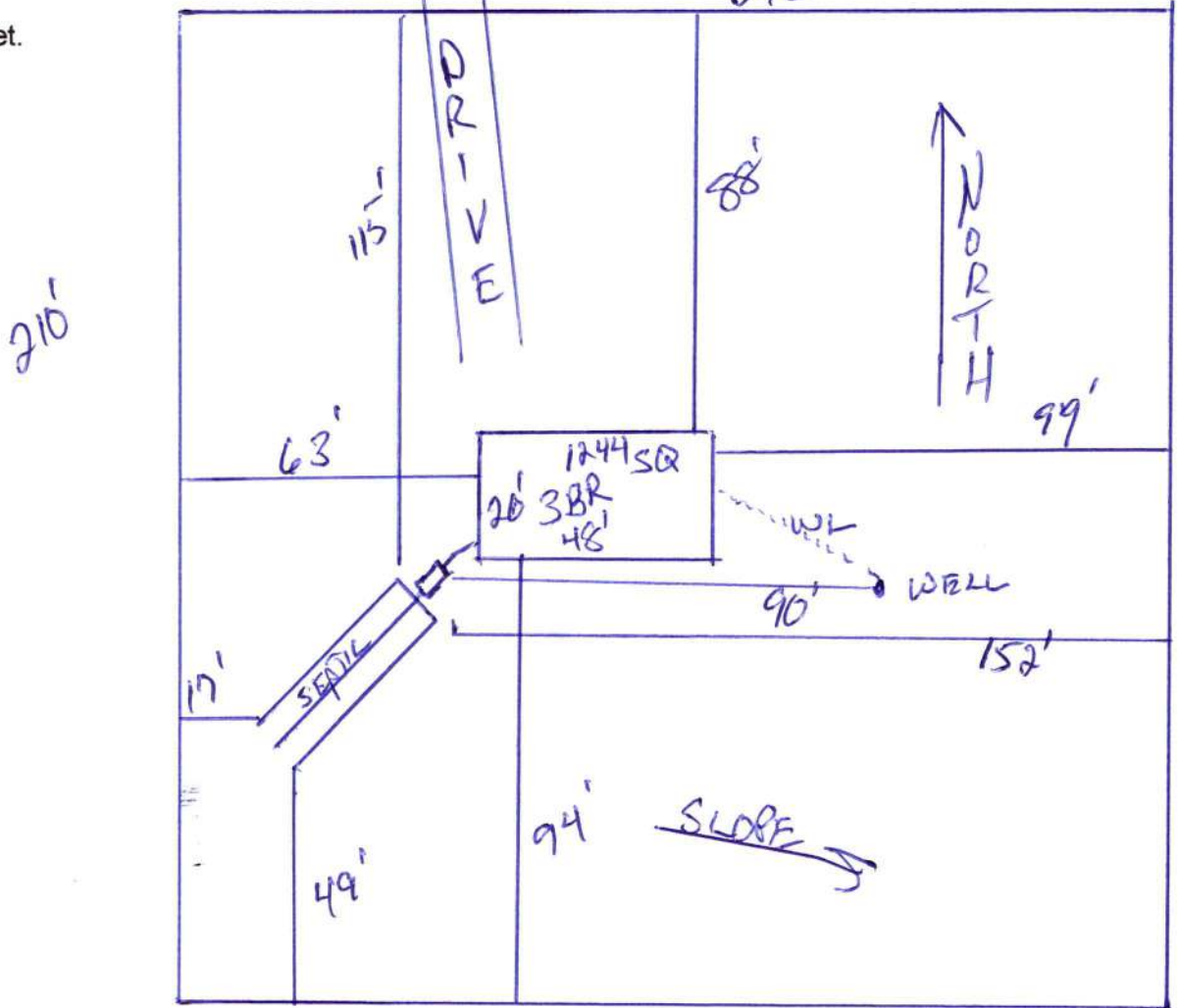
L-24831

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

Permit Application Number _____

----- WAY - BEAVER ----- PART II - SITEPLAN ----- 210' -----

Scale: 1 inch = 40 feet.



Notes: _____
_____ 1 of 5 Acres PLEASE SEE ATTACHED _____

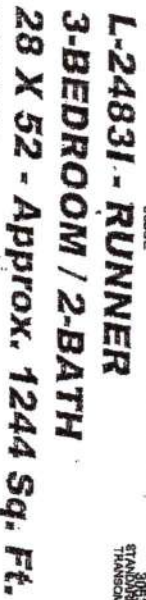
Site Plan submitted by: _____ CONTRACTOR _____
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Columbia County Property Appraiser Jeff Hampton Lake City, Florida 386-758-1083					
PARCEL: 19-6S-17-09698-019 (35825) MOBILE HOME (0200) 5 AC					
COMM NE COR OF SW1/4, RUN S 30 FT TO S RAW OF CUMORAH HILL RD, RUN W 634.89 FT FOR POB, CONT W 344.08 FT, S 633.07 FT, E 344.07 FT, N 632.88 FT TO POB					
WAY PAMELA R		2021 Working Values			
Owner:	750 SW CUMORAH HILLS ST FT WHITE, FL 32038	Mkt Lnd	\$33,250	Appraised	\$42,418
Site:	750 SW CUMORAH HILLS ST, FT WHITE	Ag Lnd	\$0	Assessed	\$37,893
		Bldg	\$9,168	Exempt	\$25,000
Sales	5/18/2001 \$33,000 V (U)	XFOB	\$0	county:	\$12,893
Info	5/8/1997 \$22,000 V (U)	Just	\$42,418	Total	city:\$0
	8/22/1995 \$100 V (U)			Taxable	other:\$0
				school:	\$12,893
NOTES:					
Columbia County, FL					

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



* All room dimensions include closets and square footage figures are approximate.
* Transoms windows are available on optional 8'-0" sidewall houses only.