

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

**For Office Use Only**

(Revised 7-1-15)

Zoning Official \_\_\_\_\_

Building Official \_\_\_\_\_

AP# \_\_\_\_\_

Date Received \_\_\_\_\_

By \_\_\_\_\_

Permit # \_\_\_\_\_

Flood Zone \_\_\_\_\_

Development Permit \_\_\_\_\_

Zoning \_\_\_\_\_

Land Use Plan Map Category \_\_\_\_\_

Comments \_\_\_\_\_

FEMA Map# \_\_\_\_\_

Elevation \_\_\_\_\_

Finished Floor \_\_\_\_\_

River \_\_\_\_\_

In Floodway \_\_\_\_\_

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # \_\_\_\_\_ ☐ 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 ☐ Assessment \_\_\_\_\_ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 20-35-17-05234-000 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

▪ New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size \_\_\_\_\_ Year 88

▪ Applicant Permitting Services / Lamanda Mote Phone # 386 288-9673

▪ Address 301 SW Fawl CT Lake city FL 32024

▪ Name of Property Owner Robert Ford Phone# 386 867-5175

▪ 911 Address 1862 N. US Highway 441 Lake city FL

▪ Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Robert Ford Phone # 386 867-5175

Address 1862 N. US Highway 441 Lake city FL

▪ Relationship to Property Owner Self

▪ Current Number of Dwellings on Property replacing home

▪ Lot Size 0.229 Total Acreage 0.229

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)  
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home yes

▪ Driving Directions to the Property (1) onto SE Nassau St (2) onto Marion Ave destination on (1)

Email Address for Applicant: Lamanda.Mote@gmail.com

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # 386 292-3836

▪ Installers Address 6355 SE CR 245 Lake city FL 32025

▪ License Number 1H/1025386 Installation Decal # 42452



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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Robert Sheppard, give this authority and I do certify that the below  
Installers Name

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 |
|-----------------------------------|--------------------------------|---------------------|
| Lamanda Mote                      | <i>Lamanda Mote</i>            | Permitting Services |
|                                   |                                |                     |
|                                   |                                |                     |

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.

Robert Sheppard 141025386 11/1/2023  
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 1 day of November, 2023.

*Connie L. Bivins*  
NOTARY'S SIGNATURE

(Seal/Stamp)







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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Sheppard, give this authority for the job address show below  
Installer License Holder Name

only, 1862 N. US Hwy 441 Lake City FL, and I do certify that  
Job Address

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 | Authorized Person is... (Check one)                                                                                   |
|-----------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| Lamanda Mote                      | <i>Lamanda Mote</i>            | <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner            |
|                                   |                                | <input type="checkbox"/> Agent <input type="checkbox"/> Officer<br><input type="checkbox"/> Property Owner            |

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Robert Sheppard  
License Holders Signature (Notarized)

14/1025386  
License Number

11/1/2023  
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 1 day of November, 20 23.

Connie L Bivins  
NOTARY'S SIGNATURE

(Seal/Stamp)





STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM

PERMIT #: 12-SC-2789460  
APPLICATION #: AP2002554  
DATE PAID: 9.28.23  
FEE PAID: 1P. 0.  
RECEIPT #:  
DOCUMENT #: PR2002021

CONSTRUCTION PERMIT FOR: OSTDS Repair

APPLICANT: ROBERT\*\*23-0688 FORD

PROPERTY ADDRESS: 1862 N US HWY 441 Lake City, FL 32055

LOT: BLOCK: SUBDIVISION:

PROPERTY ID #: 05234-000 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]  
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [ 900 ] GALLONS / GPD New Septic Tank CAPACITY  
A [ 0 ] GALLONS / GPD CAPACITY  
N [ 0 ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]  
K [ ] GALLONS DOSING TANK CAPACITY [ ] GALLONS @ [ ] DOSES PER 24 HRS #Pumps [ ]

D [ 250 ] SQUARE FEET Drainfield SYSTEM  
R [ 0 ] SQUARE FEET SYSTEM

A TYPE SYSTEM: [ ] STANDARD [ ] FILLED [x] MOUND [ ]  
I CONFIGURATION: [x] TRENCH [ ] BED [ ]  
N

F LOCATION OF BENCHMARK: pecan tree NW of site.

I ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES ] FT [ ] ABOVE / BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 12.00 ] [ INCHES ] FT [ ] ABOVE / BELOW BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [ 24.00 ] INCHES EXCAVATION REQUIRED: [ 20.00 ] INCHES

O The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 200 gpd. Required drainfield area based on Rule 62-6.015(6)(c)2., F.A.C.  
T Install a new drainfield to achieve Drainfield size requirement.  
H \*\*Remove all SPODIC material from DF site prior to construction of the Mound. Material is to NOT be used in or on system including shoulder/slopes.  
E (Comments Continued on Page 2.)  
R

SPECIFICATIONS BY: Robert W Ford TITLE: Master Contractor

APPROVED BY: Dustin W Jones TITLE: Environmental Specialist II Columbia CHD

DATE ISSUED: 10/04/2023 EXPIRATION DATE: 01/02/2024

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)  
Incorporated 62-6.004, FAC



STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

1" = 20'

Permit Application Number

23-0688

PART II - SITEPLAN

See ATT

Notes:

Site Plan submitted by: Robert Ford 999 Date: 9-28-2023

Plan Approved [Signature] Not Approved \_\_\_\_\_

By [Signature] Date 10/2/23  
[Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

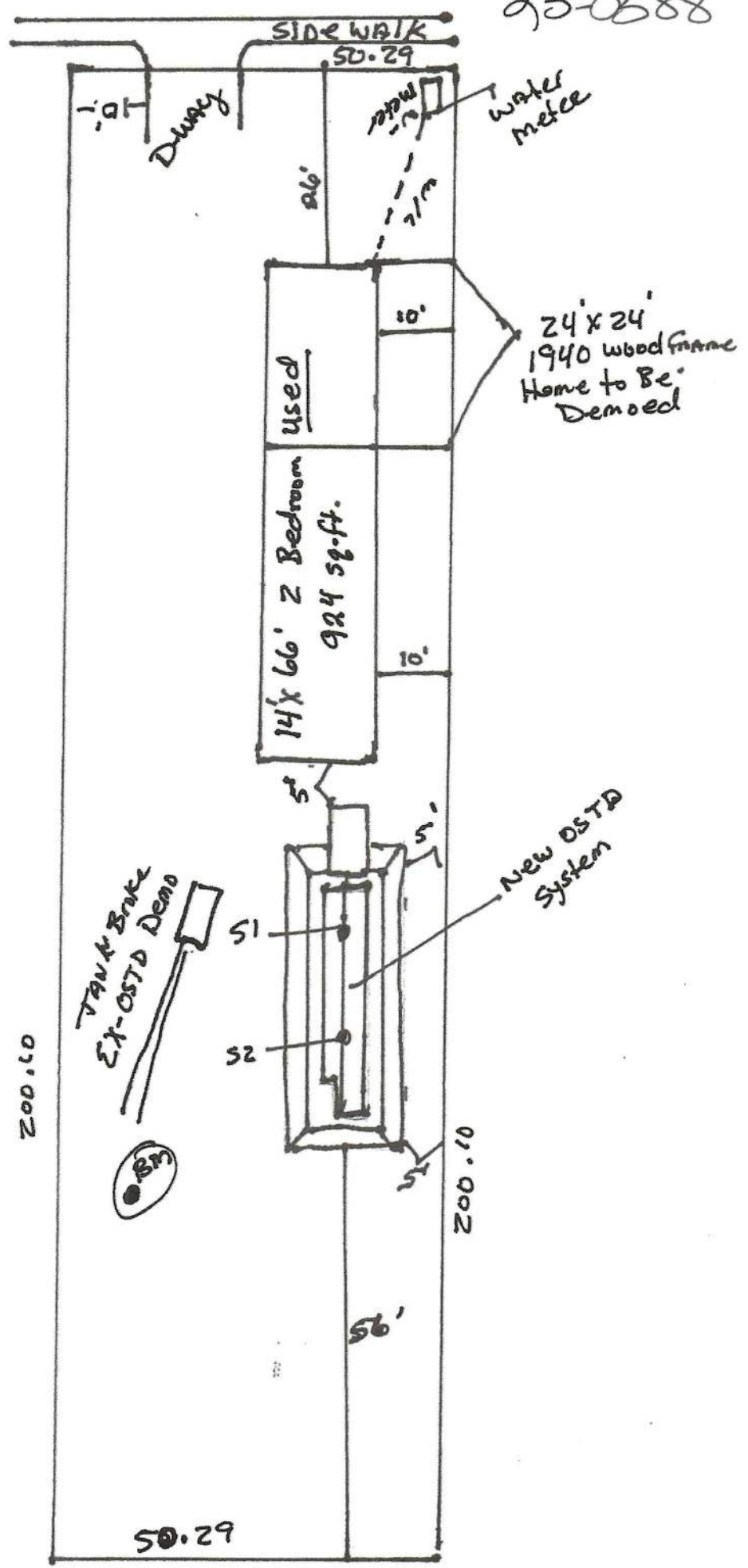
Incorporated: 62-6.004, F.A.C.

1" = 20'  
Rob Swartz III  
9-26-2023  
20-35-17-05234-000  
0.23 AC.  
1862 N. US Highway 441

US 441

23-0588

North  
←





STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM (OSTDS)

23.0688  
PERMIT NO. \_\_\_\_\_  
DATE PAID: 9.28.23  
FEE PAID: 185.00  
RECEIPT #: \_\_\_\_\_

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ x ] like 4 like

APPLICANT: ROBERT FORD III

EMAIL: NFLSEPTICTANK@COMCAST.NET

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE STATE ROAD 100, LAKE CITY FL 32025

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

OSTDS REMEDIATION PLAN? [ Y / N ]

LOT: --- BLOCK: --- SUBDIVISION: --- PLATTED: 1940

PROPERTY ID #: 05234-000 ZONING: FS I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 0.229 ACRES WATER SUPPLY: [ x ] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: --- FT

PROPERTY ADDRESS: 1862 n us hwy 441, LAKE CITY

DIRECTIONS TO PROPERTY: N 441 on (U)

BUILDING INFORMATION

[ x ] RESIDENTIAL

[ ] COMMERCIAL

| Unit No. | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table I, Chapter 62-6, FAC |
|----------|-----------------------|-----------------|--------------------|-------------------------------------------------------------------|
| 1        | <u>USED MH</u>        | <u>2</u>        | <u>924</u>         | <u>NO ORG</u>                                                     |
| 2        | <u>14X600</u>         |                 |                    |                                                                   |
| 3        |                       |                 |                    |                                                                   |
| 4        |                       |                 |                    |                                                                   |

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Robert Ford III

DATE: 10/10/23



**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

**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 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.

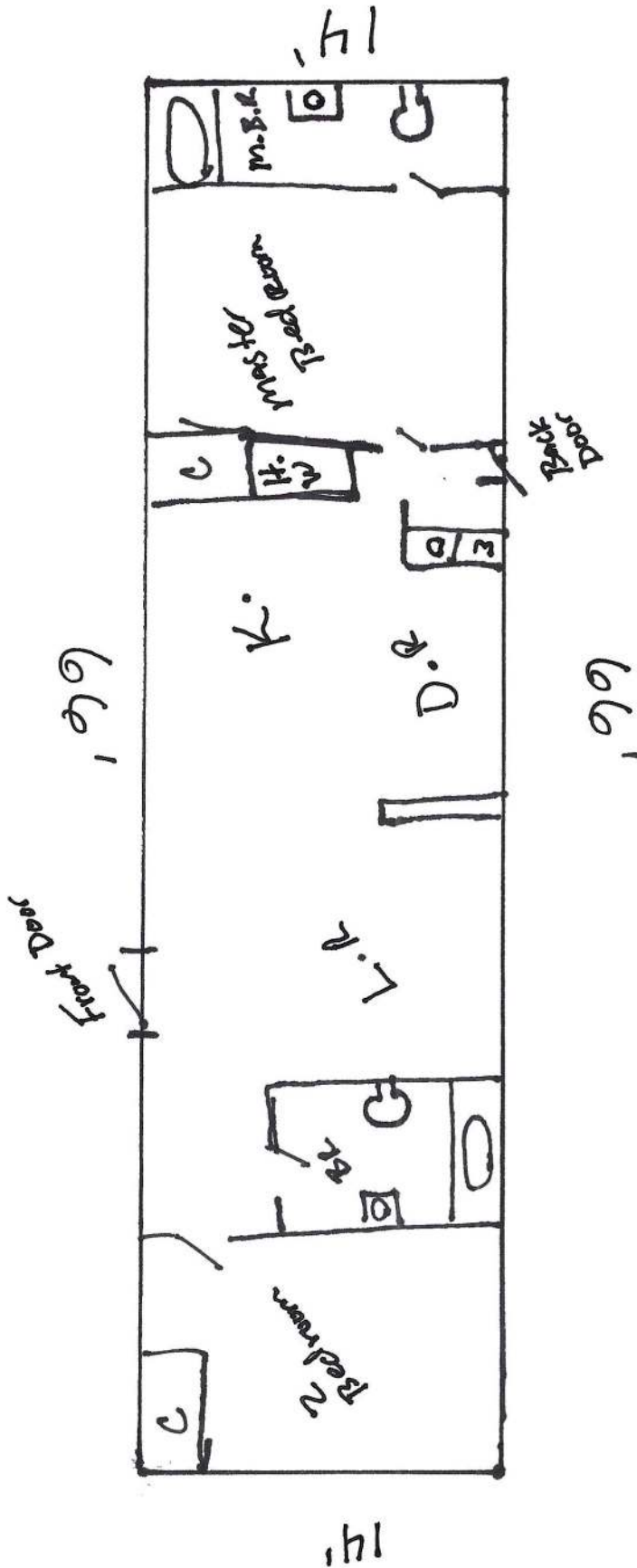
***Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.***

|                                  |                                                                                                                                                                                          |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>ELECTRICAL</b>                | Print Name <u>Robert Ford / Homeowner</u> Signature <u>Robert Ford</u><br>License #: _____      Phone #: _____<br><p align="center">Qualifier Form Attached <input type="checkbox"/></p> |
| <b>MECHANICAL/<br/>A/C _____</b> | Print Name <u>A/C Window Units</u> Signature _____<br>License #: _____      Phone #: _____<br><p align="center">Qualifier Form Attached <input type="checkbox"/></p>                     |

**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.



14x66' used mobile Home  
Robert W Zde  
9-26-2023  
20



# Mobile Home Permit Worksheet

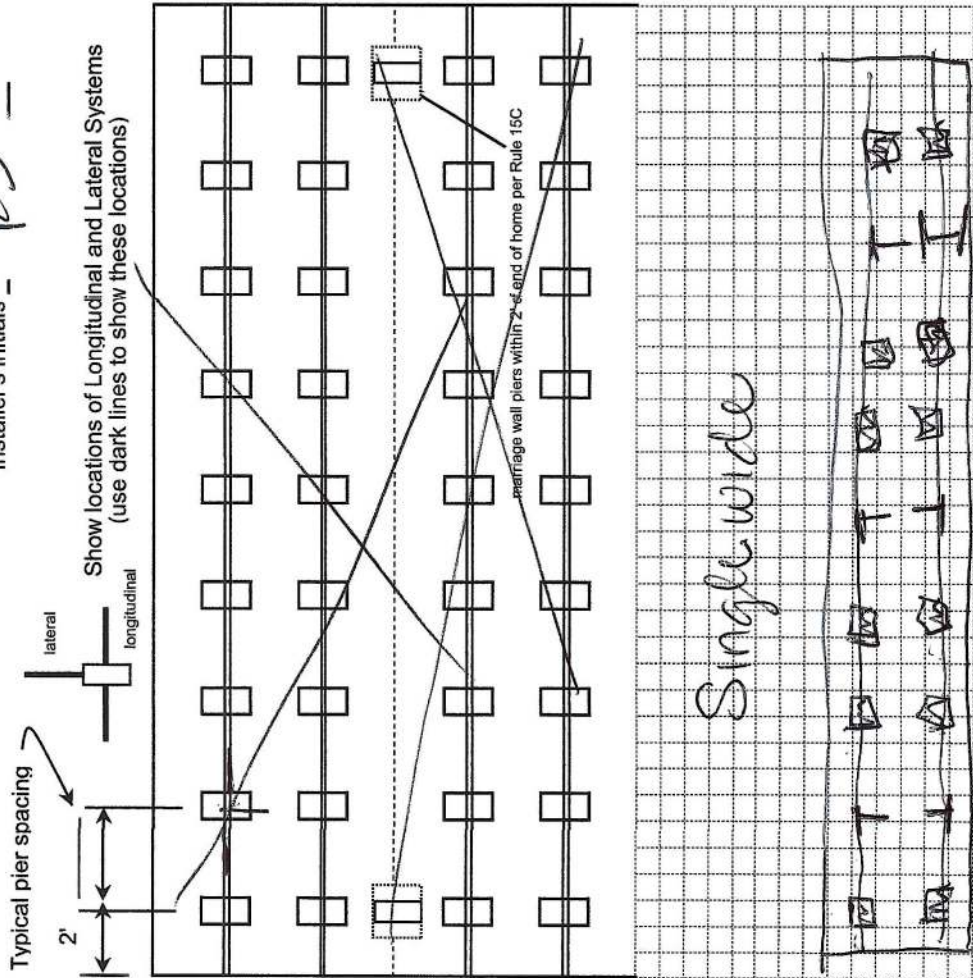
Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

Installer: Robert Sheppard License # 14/1025386  
 Address of home being installed: 1862 N. US. Hwy 441  
Lakecity FL  
 Manufacturer: Fletwood Length x width: 14 x 66

**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: RS



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 # 42452

Triple/Quad ☐ Serial # Attached

## PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity | Footer size (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'                  | 3'              | 4'                      | 5'              | 6'               | 7'               | 8'              |
| 1500 psf              | 4' 6"               | 4' 6"           | 6'                      | 7'              | 8'               | 8'               | 8'              |
| 2000 psf              | 6'                  | 6'              | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 2500 psf              | 7' 6"               | 7' 6"           | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 3000 psf              | 8'                  | 8'              | 8'                      | 8'              | 8'               | 8'               | 8'              |
| 3500 psf              | 8'                  | 8'              | 8'                      | 8'              | 8'               | 8'               | 8'              |

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

## PIER PAD SIZES

I-beam pier pad size 22x31  
 Perimeter pier pad size oliver 1055-11  
 Other pier pad sizes (required by the mfg.) Adjustable outrigger  
bars anchors

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.

## 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

## OTHER TIES

| Number        | Number    |
|---------------|-----------|
| Sidewall      | <u>20</u> |
| Longitudinal  | <u>0</u>  |
| Marriage wall | <u>0</u>  |
| Shearwall     | <u>2</u>  |

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
 Manufacturer \_\_\_\_\_  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer \_\_\_\_\_

oliver 1011



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

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

x 1000 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 1000

## TORQUE PROBE TEST

The results of the torque probe test is \_\_\_\_\_ 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 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.

\_\_\_\_\_  
Installer's initials

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

Installer Name

Robert Sheppard

Date Tested

10/1/2003

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 potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. \_\_\_\_\_

## Site Preparation

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

### Fastening multi wide units

Floor: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Walls: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Roof: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
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 \_\_\_\_\_

Type gasket \_\_\_\_\_  
Pg. \_\_\_\_\_

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

Robert Sheppard

Date

11/1/2003



## COMPLIANCE CERTIFICATE

Manufacturer Address

FLATWOOD HOMES OF FLORIDA, INC.  
 1000 SOUTH BARTOW AVENUE  
 BARTOW, FLORIDA 33823

Plant Number 70

Date of Manufacture HUD No.

12-22-81

Manufacturer's Serial Number and Model Unit Designation

2457CA/6604 SP/3600H

Design Approval by (D.A.P.A.)

Bader

This manufactured home is designed to comply with the federal manufactured home construction and safety standards in force at time of manufacture.  
 (For additional information, consult owner's manual.)

The factory installed equipment includes:

| Equipment        | Manufacturer | Model Designation |
|------------------|--------------|-------------------|
| For heating      | CalorMan     | 3200-21           |
| For air cooling  | Trane        | 32-1              |
| For cooking      | Whirlpool    | ET18XESN          |
| Refrigerator     | Whirlpool    | 3618ES1A          |
| Water heater     | Mike Lee     |                   |
| Washer           |              |                   |
| Clothes Dryer    |              |                   |
| Dishwasher       |              |                   |
| Garbage Disposal |              |                   |
| Fireplace        | Stacy        | 41014             |

## IGN BASIS CERTIFICATE

DESIGN WIND ZONE MAP

☐ Zone I  
 Standard Wind  
 15 PSF Horizontal  
 9 PSF Uplift

☒ Zone II  
 Hurricane Resistant  
 25 PSF Horizontal  
 15 PSF Uplift



DESIGN ROOF LOAD ZONE MAP

North 40 PSF

South 20 PSF

Middle 20 PSF

Over 20 PSF

## COMFORT HE

This manufactured home has been thermally tested of the federal manufactured home construction within climatic zone 1.

Heating equipment manufacturer and model used The above heating equipment has the capacity to this home at outdoor temperatures of 39 To maximize furnace operating economy, and to this home be installed where the outdoor winter design temperature is 39 (degrees Fahrenheit)

The above information has been calculated assuming standard atmospheric pressure.

## COMFORT CO

☐ Air conditioner provided at factory (After)

Air conditioner manufacturer and model (see

Certified capacity — B.T.U. air conditioning and refrigeration institute etc. The central air conditioning system provided orientation of the front (pitch end) of the home system is designed to maintain an indoor

temperatures are f dry bulb and

The temperature in which this home can be amount of exposure of the windows of this home's heat gains will vary dependent upon its shading provided. Information concerning its location, window exposures and shades are of the ASHRAE Handbook of Fundamentals.

Information necessary to calculate cooling load provided in the special comfort cooling information

☒ Air conditioner not provided at factory (After)

The air distribution system of this home is a conditioning.

The supply air distribution system installed in the central air conditioning system of up to 3000 certified in accordance with the appropriate air standards, when the air circulators of such air column static pressure or greater for the cooling supply air duct system.

Information necessary to calculate cooling load provided in the special comfort cooling information

☐ Air conditioning not recommended (After)

The air distribution system of this home has no with a central air conditioning system.

INFORMATION PROVIDED BY THE NECESSARY TO CALCULATE SE

Walls (without windows and doors)

Ceilings and roofs of light color

Ceilings and roofs of dark color

Floors

Air ducts in floor

Air ducts in ceiling

Air ducts installed outside the home

The following are the duct areas in this home:

Air ducts in floor

Air ducts in ceiling

Air ducts outside the home

To determine the required capacity of equipment used a cooling load (heat gain) calculation is required. This is based on location and the structure of the home. Climate and provide the greatest values when their respective cooling load. Each home's air conditioner should be a the American Society of Heating, Refrigerating and Air Conditioning Engineers, Inc. (ASHRAE) Handbook of Fundamentals, while the location and

OUTDOOR WINTER DESIGN TEMPERATURE



## Columbia County Property Appraiser

Jeff Hampton

2024 Working Values

updated: 10/26/2023

Parcel: &lt;&lt; 20-3S-17-05234-000 (25221) &gt;&gt;

Aerial Viewer Pictometry Google Maps

© 2023 © 2022 © 2019 © 2016 © 2013 Sales

## Owner &amp; Property Info

Result: 1 of 1

|              |                                                                                                                                                                                                                                                                                     |              |          |
|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------|
| Owner        | FORD ROBERT WENDELL III<br>FORD MEKAYLA MICHELLE<br>171 SW GRANDKIDS GLN<br>LAKE CITY, FL 32024                                                                                                                                                                                     |              |          |
| Site         | 1862 N US HIGHWAY 441, LAKE CITY                                                                                                                                                                                                                                                    |              |          |
| Description* | COMM AT PT OF INTERS OF S LINE OF SW1/4 OF NW1/4 & W R/W LINE OF SR-47<br>(AKA US HWY 441), RUN N 200 FT FOR POB, RUN W 200 FT N 50 FT, E 200 FT, S 50 FT<br>TO POB. (AKA LOTS 5 & 14, BLOCK 1 GLEN ECHO S/D OF THE ORIGINAL SURVEY IN<br>PLAT BK 1, PG 6). 438-134, 699 ...more>>> |              |          |
| Area         | 0.229 AC                                                                                                                                                                                                                                                                            | S/T/R        | 20-3S-17 |
| Use Code**   | SINGLE FAMILY (0100)                                                                                                                                                                                                                                                                | Tax District | 2        |

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning &amp; Zoning office for specific zoning information.

## Property &amp; Assessment Values

| 2023 Certified Values |                           | 2024 Working Values |                           |
|-----------------------|---------------------------|---------------------|---------------------------|
| Mkt Land              | \$7,500                   | Mkt Land            | \$7,500                   |
| Ag Land               | \$0                       | Ag Land             | \$0                       |
| Building              | \$39,790                  | Building            | \$39,790                  |
| XFOB                  | \$0                       | XFOB                | \$0                       |
| Just                  | \$47,290                  | Just                | \$47,290                  |
| Class                 | \$0                       | Class               | \$0                       |
| Appraised             | \$47,290                  | Appraised           | \$47,290                  |
| SOH Cap [?]           | \$1,196                   | SOH Cap [?]         | \$0                       |
| Assessed              | \$47,290                  | Assessed            | \$47,290                  |
| Exempt                | \$0                       | Exempt              | \$0                       |
| Total                 | county:\$46,094 city:\$0  | Total               | county:\$47,290 city:\$0  |
| Taxable               | other:\$0 school:\$47,290 | Taxable             | other:\$0 school:\$47,290 |



## Sales History

| Sale Date  | Sale Price | Book/Page | Deed | V/I | Qualification (Codes) | RCode |
|------------|------------|-----------|------|-----|-----------------------|-------|
| 10/27/2021 | \$100      | 1451/0135 | WD   | I   | U                     | 11    |
| 11/21/2008 | \$100      | 1167/2408 | QC   | I   | U                     | 01    |

## Building Characteristics

| Bldg Sketch | Description*      | Year Blt | Base SF | Actual SF | Bldg Value |
|-------------|-------------------|----------|---------|-----------|------------|
| Sketch      | SINGLE FAM (0100) | 1940     | 987     | 1169      | \$39,790   |

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

## Extra Features &amp; Out Buildings (Codes)

| Code | Desc | Year Blt | Value | Units | Dims |
|------|------|----------|-------|-------|------|
| NONE |      |          |       |       |      |

## Land Breakdown

| Code | Desc      | Units                    | Adjustments                      | Eff Rate | Land Value |
|------|-----------|--------------------------|----------------------------------|----------|------------|
| 0100 | SFR (MKT) | 10,000,000 SF (0.229 AC) | 1.0000/1.0000 1.0000/1.5000000 / | \$1 /SF  | \$7,500    |





# **Columbia County Property Appraiser** Jeff Hampton | Lake City, Florida | 386-758-1083

**PARCEL: 20-3S-17-05234-000 (25221) | SINGLE FAMILY (0100) | 0.229 AC**

COMM AT PT OF INTERS OF S LINE OF SW1/4 OF NW1/4 & W R/W LINE OF SR-47 (AKA US HWY 441), RUN N 200 FT FOR POB, RUN W 200 FT N 50 FT, E 200 FT, S 50 FT

**Owner:** FORD ROBERT WENDELL III  
**FORD MEKAYLA MICHELLE**  
 171 SW GRANDKIDS GLN  
 LAKE CITY, FL 32024  
**Site:** 1862 N US HIGHWAY 441, LAKE CITY

**Sales Info** 10/27/2021 \$100 I (U)  
 11/21/2008 \$100 I (U)

## **2024 Working Values**

|         |          |           |                 |
|---------|----------|-----------|-----------------|
| Mkt Lnd | \$7,500  | Appraised | \$47,290        |
| Ag Lnd  | \$0      | Assessed  | \$47,290        |
| Bldg    | \$39,790 | Exempt    | \$0             |
| XFOB    | \$0      | county:   | \$47,290        |
| Just    | \$47,290 | Total     | city:\$0        |
|         |          | Taxable   | other:\$0       |
|         |          |           | school:\$47,290 |

## **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.

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