

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

(34)

*For Office Use Only* (Revised 7-1-15) Zoning Official LW Building Official \_\_\_\_\_

AP# 49215 Date Received 5/4/21 By MG Permit # 41890

Flood Zone X Development Permit — Zoning A-3 Land Use Plan Map Category Ag

Comments \_\_\_\_\_

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FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_

☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 21-0427 ☐ 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 paid ☐ Out County ☒ In County ☐ Sub VF Form

Property ID # 26-45-17-08749-106 Subdivision Brandon Hgts. Lot# \_\_\_\_\_

▪ New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 28 Year 56

▪ Applicant James Durden Loei Durden Phone # 386-628-6736

▪ Address 235 SE Brandon Dr. Lake City FL 32025

▪ Name of Property Owner James Troy Durden Phone# 386-628-6736

▪ 911 Address 235 SE Brandon Dr., Lake City, FL 32025

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

▪ Name of Owner of Mobile Home James Durden Phone # 386-628-6736

▪ Address 235 SE Brandon Dr. Lake City, FL 32025

▪ Relationship to Property Owner Self

▪ Current Number of Dwellings on Property One

▪ Lot Size \_\_\_\_\_ Total Acreage 1.42 ac

▪ 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 South on 441 to left on 252 to rt. on  
Peacock terrace to rt. on brandon dr. property on rt @  
235 SE

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203

▪ Installers Address 6355 SE CR 245 Lake City FL 32025

▪ License Number IH1025386 Installation Decal # 77806



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
Anthony Smith		AK2 Mechanical LLC
Lori Darden	Lori Darden	

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.

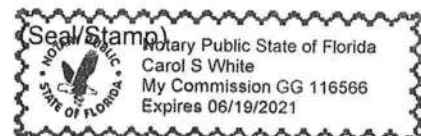
Robert Sheppard IH-1025386  
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

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 20th day of April, 2021.

Carol S White  
NOTARY'S SIGNATURE





# Mobile Home Permit Worksheet

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

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

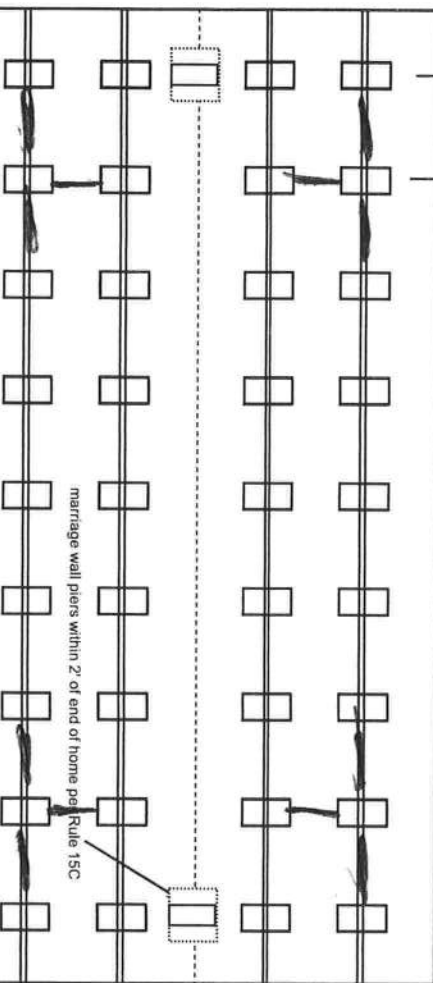
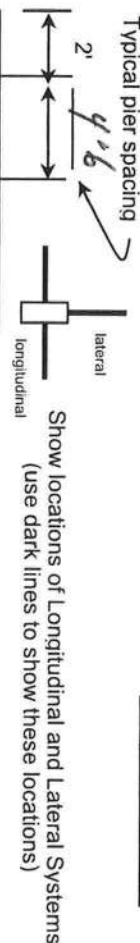
Installer: Robert Sheppard License # TH1025386

Address of home being installed \_\_\_\_\_

Manufacturer Clayton Length x width 28x56

**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 # 71806

Triple/Quad ☐ Serial # \_\_\_\_\_

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	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'	4'	5'	6'	7'	8'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	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 17x25  
Perimeter pier pad size 16x16  
Other pier pad sizes (required by the mfg.) 17x25

### 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

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 Stabilizing Device w/ Lateral Arms  
Manufacturer Danner 1101

### OTHER TIES

Sidewall \_\_\_\_\_  
Longitudinal \_\_\_\_\_  
Marriage wall \_\_\_\_\_  
Shearwall \_\_\_\_\_  
Number 26  
4  
4

# Mobile Home Permit Worksheet

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

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

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

x 1700 x 1600 x 1600

### 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 1700 x 1600 x 1700

## 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 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.

RS Installer's initials

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

Installer Name

Robert Shyngard

Date Tested

4-20-21

## 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 ☒ Swale ☒ Pad ☒ Other ☒

### Fastening multi wide units

Floor: Type Fastener: 1095 Length: 5" Spacing: 16"  
Walls: Type Fastener: Scrows Length: 4" Spacing: 16"  
Roof: Type Fastener: 1095 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 RS

Type gasket Pg. 22

Fourm

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

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 22  
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 Shyngard

Date

4-20-21

**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**

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>James Troy Durden</u> License #: _____ Qualifier Form Attached <input checked="" type="checkbox"/> <u>NA</u>	Signature <u>James T Durden</u> Phone #: <u>386-628-6736</u>
<b>MECHANICAL/ A/C _____</b>	Print Name <u>AK2 Mechanical LLC Anthony Smith</u> License #: <u>CMC1249830</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Anthony Smith</u> Phone #: <u>352-672-7145</u>

**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**  
**PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? \_\_\_\_\_

OWNERS NAME James Darden PHONE 386-628-6736 CELL Same

ADDRESS 235 SE Brandon Drive Lakecity, FL 32025

MOBILE HOME PARK \_\_\_\_\_ SUBDIVISION Brandon HGTS

DRIVING DIRECTIONS TO MOBILE HOME South 41 - left on 252 - rt on Peacock ter.  
left on brandon dr. - rt on 235 brandon

MOBILE HOME INSTALLER Robert Sheppard PHONE 386-623-2203 CELL \_\_\_\_\_

**MOBILE HOME INFORMATION**

MAKE Clayton YEAR 1996 SIZE 28 x 56 COLOR Tan with Red Roof

SERIAL No. GAFLT05A25589CW21

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

**INSPECTION STANDARDS**

**INTERIOR:**

(P or F) - P= PASS F= FAILED

\_\_\_\_\_ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

\_\_\_\_\_ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION \_\_\_\_\_

\_\_\_\_\_ DOORS ( ) OPERABLE ( ) DAMAGED

\_\_\_\_\_ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

\_\_\_\_\_ WINDOWS ( ) OPERABLE ( ) INOPERABLE

\_\_\_\_\_ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

\_\_\_\_\_ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

\_\_\_\_\_ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT  
FIXTURES MISSING

**EXTERIOR:**

\_\_\_\_\_ WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

\_\_\_\_\_ WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

\_\_\_\_\_ ROOF ( ) APPEARS SOLID ( ) DAMAGED

**STATUS**

APPROVED \_\_\_\_\_ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE \_\_\_\_\_ ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

6355 SE CR 245 Lake City FL  
Call Robert 623-2203



# **SITE PLAN CHECKLIST**

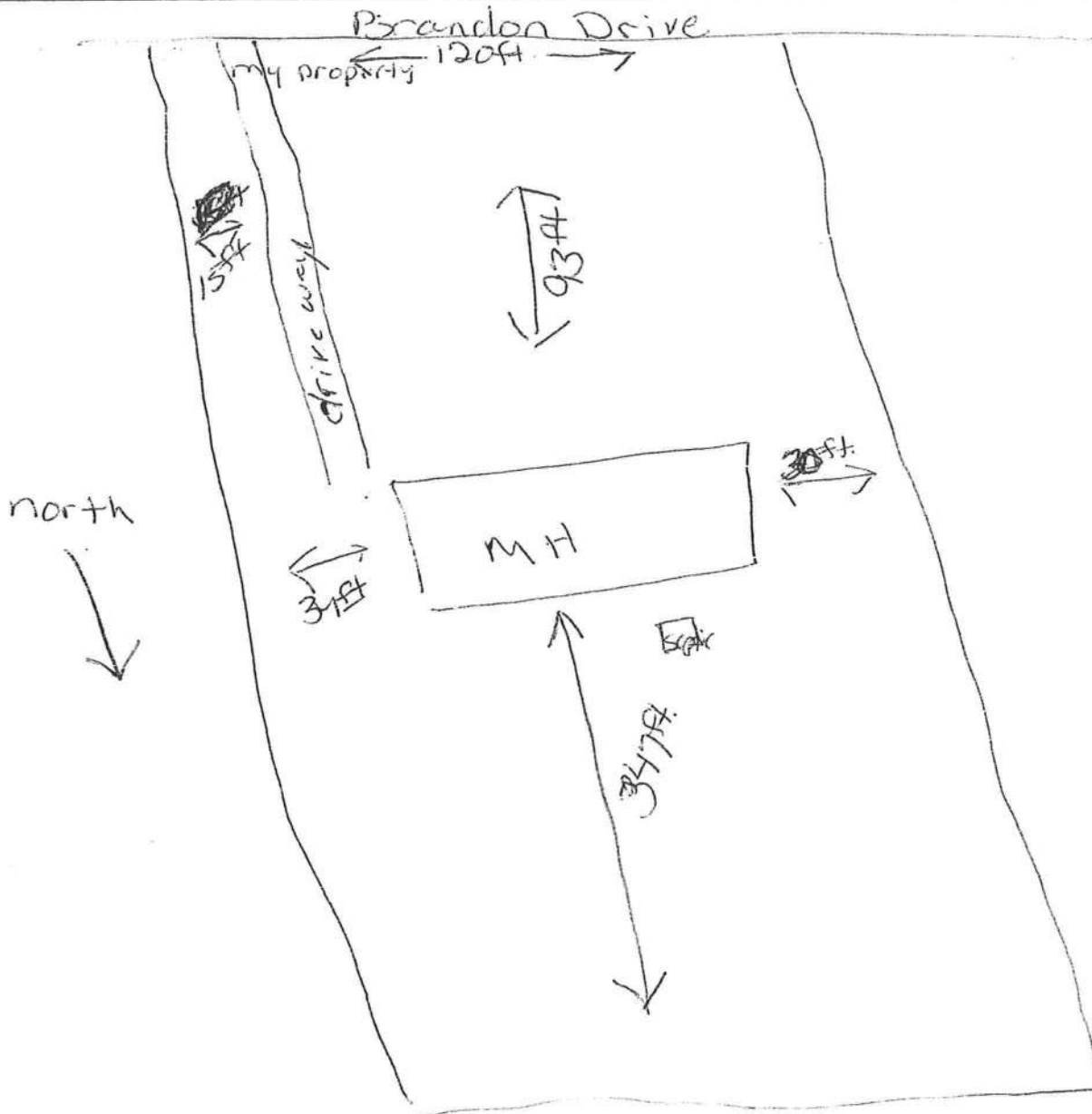
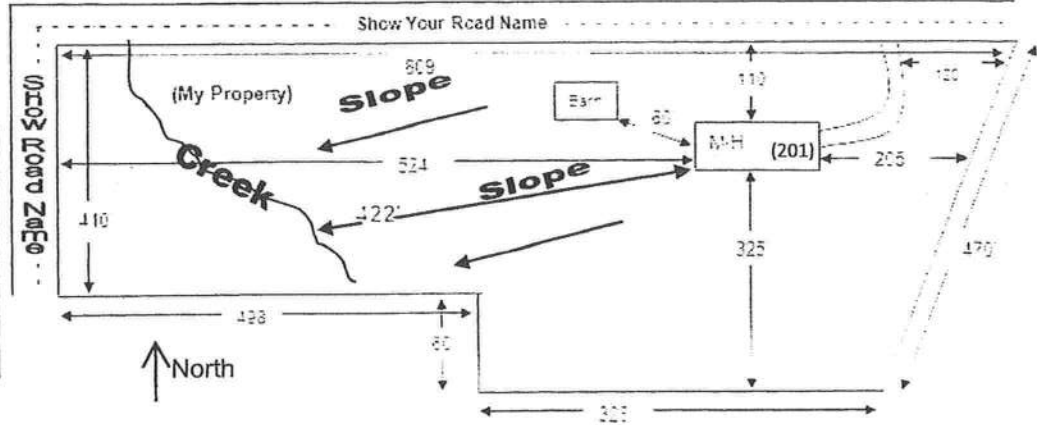
- \_\_\_ 1) Property Dimensions
- \_\_\_ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- \_\_\_ 3) Distance from structures to all property lines
- \_\_\_ 4) Location and size of easements
- \_\_\_ 5) Driveway path and distance at the entrance to the nearest property line
- \_\_\_ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- \_\_\_ 7) Show slopes and or drainage paths
- \_\_\_ 8) Arrow showing North direction

## **SITE PLAN EXAMPLE**

Revised 7/1/15

### **NOTE:**

This site plan can be copied and used with the 911 Addressing Dept. application forms.



District No. 1 - Ronald Williams  
District No. 2 - Rocky Ford  
District No. 3 - Robby Hollingsworth  
District No. 4 - Toby Witt  
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

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Date/Time Issued:	5/4/2021 4:27:54 PM
Address:	235 SE BRANDON Dr
City:	LAKE CITY
State:	FL
Zip Code	32025

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Parcel ID	08749-106
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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)



# Columbia County Property Appraiser

Jeff Hampton

**2021 Working Values**

updated: 4/29/2021

Parcel: << 26-4S-17-08749-106 (32484) >>

## Owner & Property Info

Result: 1 of 1

Owner	DURDEN JAMES TROY 235 SE BRANDON DR LAKE CITY, FL 32025		
Site	235 BRANDON DR		
Description*	LOT 6 BLOCK A BRANDON HGTS S/D ORB 746-1446, 778-052, 821-1306 (DC JAMES H DURDEN 1289-2647), QCD 1289-2648		
Area	1.42 AC	S/T/R	26-4S-17E
Use Code**	MOBILE HOME (0200)	Tax District	3

\*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 & Zoning office for specific zoning information.

## Property & Assessment Values

2020 Certified Values		2021 Working Values	
Mkt Land	\$14,350	Mkt Land	\$14,350
Ag Land	\$0	Ag Land	\$0
Building	\$6,587	Building	\$6,794
XFOB	\$400	XFOB	\$400
Just	\$21,337	Just	\$21,544
Class	\$0	Class	\$0
Appraised	\$21,337	Appraised	\$21,544
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$21,337	Assessed	\$21,544
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$21,337 city:\$21,337 other:\$21,337 school:\$21,337	Total Taxable	county:\$21,544 city:\$0 other:\$0 school:\$21,544

Aerial Viewer Pictometry Google Maps

2019 2016 2013 2010 2007 2005 Sales



## Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
2/26/2015	\$100	1289/2658	QC	I	U	11
3/1/1996	\$12,200	0821/1306	WD	V	Q	

## Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	MOBILE HME (0800)	1985	792	872	\$6,794

\*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 & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
0120	CLFENCE 4	2005	\$200.00	1.00	0 x 0
0169	FENCE/WOOD	2011	\$200.00	1.00	0 x 0

## Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0200	MBL HM (MKT)	1.000 LT (1.420 AC)	1.0000/1.0000 1.0000/ /	\$13,100 /LT	\$13,100
9947	SEPTIC (MKT)	1.000 UT (0.000 AC)	1.0000/1.0000 1.0000/ /	\$1,250 /UT	\$1,250

Search Result: 1 of 1

# Mobile Home Permit Worksheet

APPROVED BLOCKING

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

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

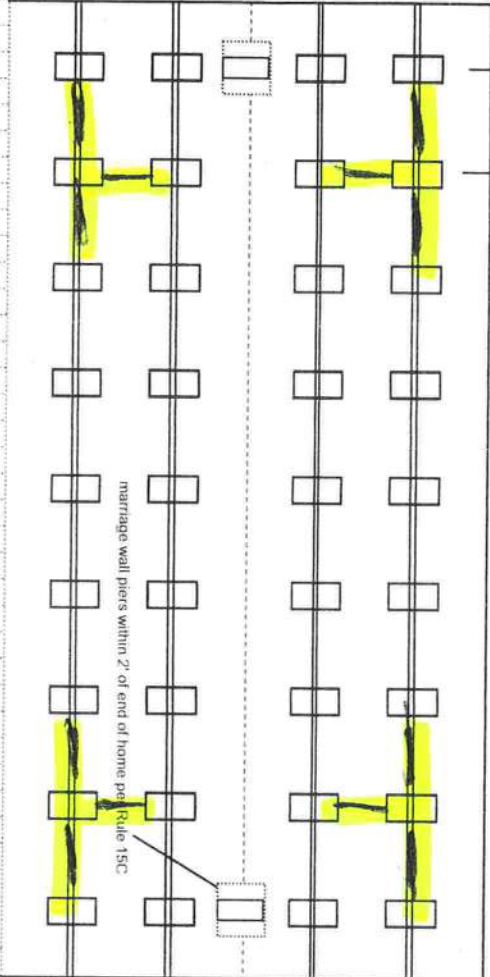
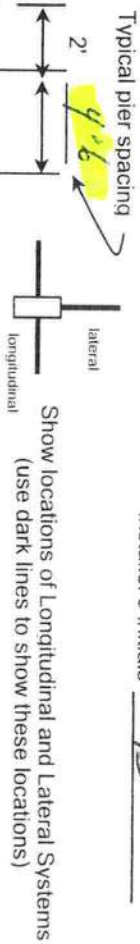
Installer: Robert Sheppard License # TH1025336

Address of home being installed \_\_\_\_\_

Manufacturer Clayton Length x width 28 x 56

**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



Anthony Ben  
5/6/2021

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 # 71806

Triple/Quad ☐ Serial # \_\_\_\_\_

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (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' 6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

\* 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

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

## OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Clayton 1101V

Number

Sidewall 26

Longitudinal Marriage wall 4

Shearwall 4



# Mobile Home Permit Worksheet

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

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

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psi or check here to declare 1000 lb. soil without testing.

x 1700 x 1600 x 1600

### 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 1700 x 1600 x 1700

## TORQUE PROBE TEST

The results of the torque probe test is 245 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 requires anchors with 4000 lb holding capacity.

RS Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

4-20-21

## 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: lag 5 Length: 5" Spacing: 16"  
Walls: \_\_\_\_\_ Type Fastener: screws Length: 4" Spacing: 16"  
Roof: \_\_\_\_\_ Type Fastener: lag 5 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 RS

Type gasket foam  
Pg. 22

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

4-20-21





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, 235 SE Brandon Dr, Lake City, FL 32025 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)
James Troy Durdan	<i>James T. Durdan</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
Anthony Smith	<i>Anthony Smith</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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.

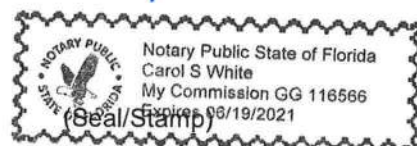
Robert Sheppard License Holders Signature (Notarized)  
141025386 License Number  
4-20-21 Date

## 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.) 2021 on this April day of 21.

Carol S White  
NOTARY'S SIGNATURE





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

PERMIT NO. 21-0427  
DATE PAID: 5/4/21  
FEE PAID: 65.00  
RECEIPT #: 1661080

APPLICATION FOR:

[ ] New System [ ☒ ] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ]

APPLICANT: James Duden

AGENT: Lor. Duden

TELEPHONE: 386-365-1049

MAILING ADDRESS: 235 SE Brandon Dr. 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

LOT: 6 BLOCK: A SUBDIVISION: Brandon Hgts. PLATTED: \_\_\_\_\_

PROPERTY ID #: 26-43-17-08749-106 ZONING: Res I/M OR EQUIVALENT: [ Y / ☒ N ]

PROPERTY SIZE: 1.42 ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ☒ ] ≤2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: 10 FT

PROPERTY ADDRESS: 235 SE Brandon Dr. Lake City, FL 32025

DIRECTIONS TO PROPERTY: South 41 to Left on 252 to Rt. on Peacock Ter  
to rt on Brandon Dr. to rt at 235 Brandon Dr.

BUILDING INFORMATION

[ ☒ ] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
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1	<u>Mobile Home</u>	<u>3</u>	<u>1560</u>	<u>ORIGINAL ATTACHED</u>
---	--------------------	----------	-------------	--------------------------

2				
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3				
---	--	--	--	--

4				
---	--	--	--	--

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

SIGNATURE: Lor. Duden

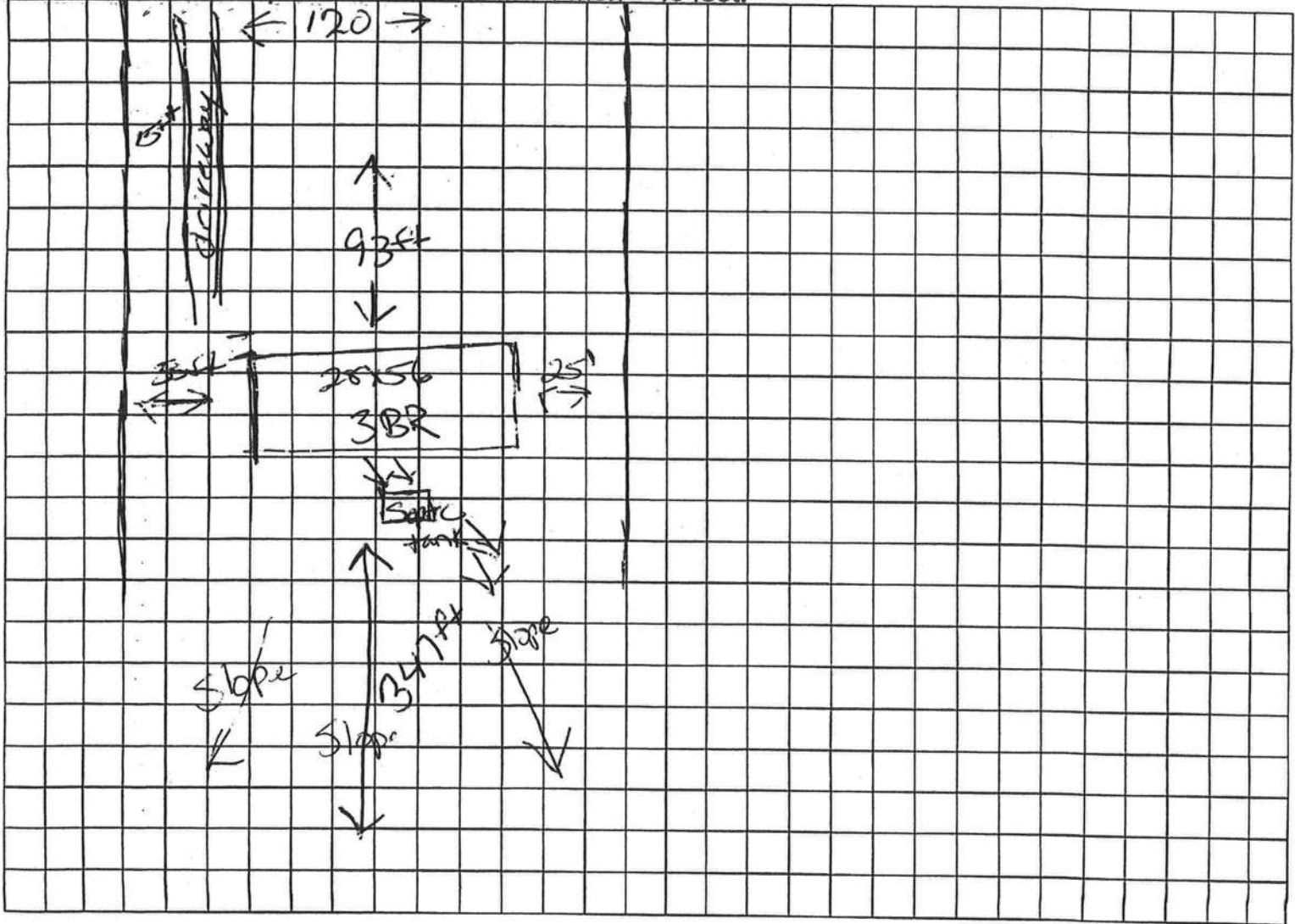
DATE: 5-3-21

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-0407

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: \_\_\_\_\_

Site Plan submitted by: Lee Darden TITLE \_\_\_\_\_ DATE: 5-3-21  
Plan Approved ☒ Not Approved \_\_\_\_\_ Date 5/4/21  
By Kelly By Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT