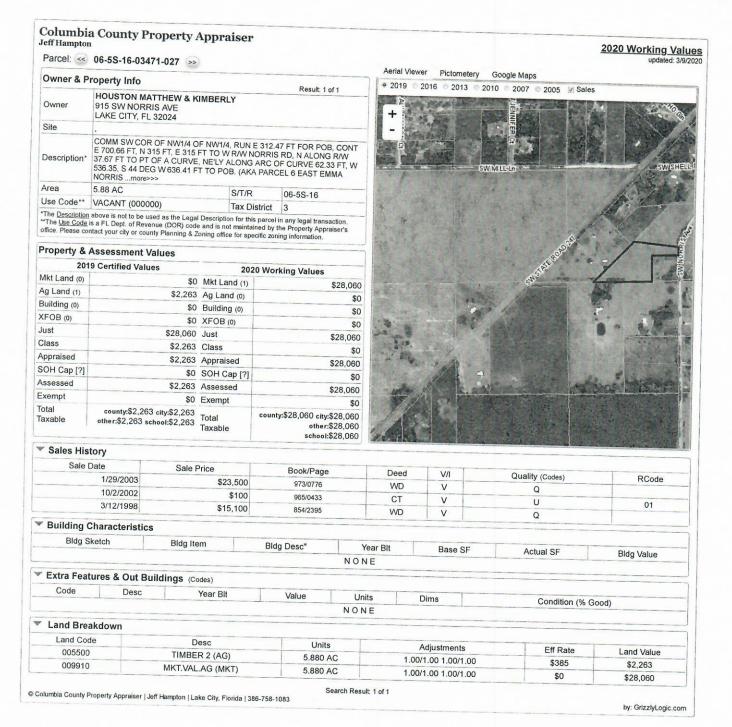
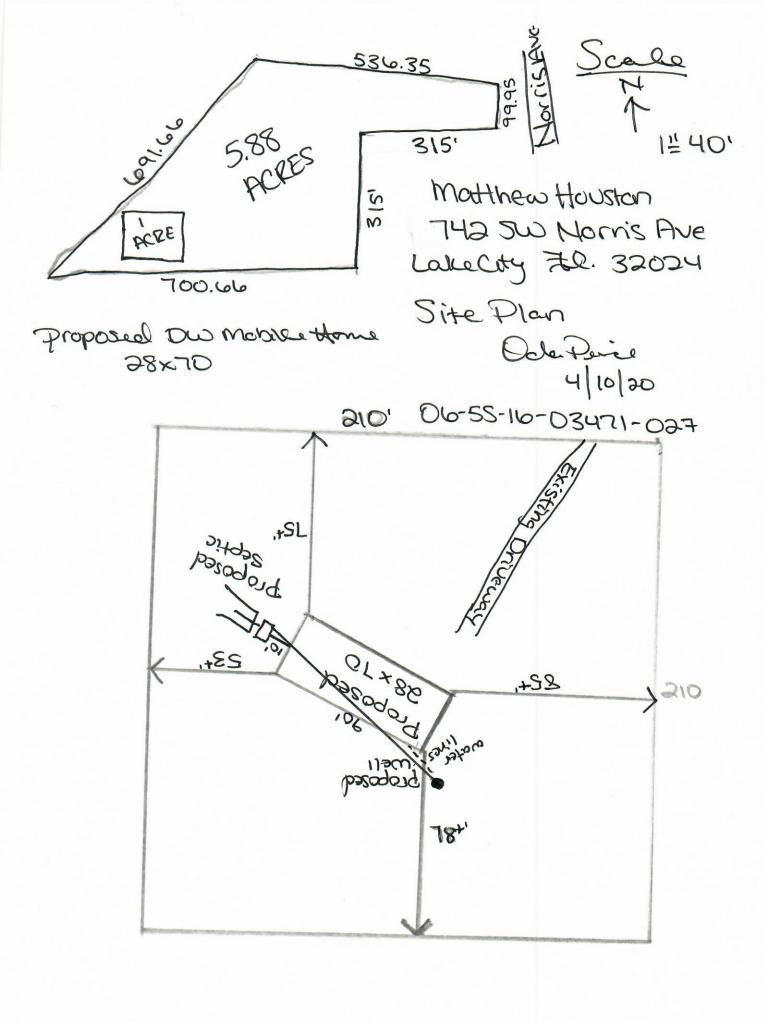
PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only	(Revised 7-1-15) Z	oning Official	Building Official
AP#	Date Received_	Ву	Permit #
	evelopment Permit		Land Use Plan Map Category
FEMA Map#	ElevationF	Finished Floor	_ River In Floodway
□ Recorded Deed or □	Property Appraiser PO	□ Site Plan □ EH#_	□ Well letter OR
□ Existing well □ La	nd Owner Affidavit 🗆 In	staller Authorization	□ FW Comp. letter □ App Fee Paid
□ DOT Approval □ Pa	rent Parcel #	STUP-M	H
□ Ellisville Water Sys	□ Assessment	Out County	□ In County □ Sub VF Form
			Emma Doekis Truchot#
New Mobile Home	Used M	obile Home/_	MH Size 10 X 2 8 Year 1995
Applicant Val	2. Price OrJ	estil Shepa	none # 386 963-4298
Address 3300	150th PL. [6	The Lety F	32024
Name of Property	Owner Matter	im Houston	Phone# 386 365 950
911 Address / /	2 sw Norris	Ave lake	City F1 32024
Circle the correct	power company -	FL Power & Ligh	t - Clay Electric
	(Circle One) - S	uwannee Valley Elec	ctric - <u>Duke Energy</u>
Name of Owner of Address 915 3u	Mobile Home Matt	EKim Houst	On Phone # 386 365 950 F1 32024
	operty Owner <u></u> <i>OWV</i>		
	f Dwellings on Propert	•	
Lot Size 5 -		Total Acreage	5.88
Do you : Have Exi	sting Drive of Private I	Orive or need Culver Sign) (Putting in	t Permit or Culvert Waiver (Circle of (Not existing but do not need a Culvert)
Is this Mobile Hon	ne Replacing an Existin	ng Mobile Home N	0
			do toward NE fustice &
7	s destination		D US 90 OFL 247-S
Name of Licensed	Dealer/Installer_Dal	e Houston	Phone # 384-752 - 7814
Installers Address	136 SW Barrs	Glen Lake	City F1 32024
License Number	IH 1025 14Z	Install	ation Decal # 288 36





CODE ENFORCEMENT DEPARTMENT COLUMBIA COUNTY, FLORIDA OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM COUNTY
OWNERS NAME MUTTHEW HON STON PHONE 384-345-9501 CELL 384-345-950
INSTALLER Dale HOUSTON PASKE 752-7814 CELL 384-752-7814
INSTALLERS ADDRESS 134 SW BOWS GLEN LOVE (M) FL 32024
MOBILE HOME INFORMATION
MAKE 10/200 . YEAR 1995 SIZE 28 x 70
COLOR White SERIAL NO. HILLOIL GLXR
WIND ZONE SMOKE DETECTOR
INTERIOR: J. Carpet
DOORS OL
WALLS OL
CABINETS <u>OL</u>
ELECTRICAL (FIXTURES/OUTLETS) MC
EXTERIOR: WALLS / SIDDING VINA
WINDOWS Off
DOORS 8
INSTALLER: APPROVED NOT APPROVED
INSTALLER OR INSPECTORS PRINTED NAME Dale Houston
Installer/Inspector Signature License No. 14-1025142 Date 311512
NOTES:
ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.
NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.
BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.
ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.
Code Enforcement Approval Signature

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	JMBER	CONTRACTOR	PHONE
	ТН	HIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A F	PERMIT
Ordinance 89-	6, a contractor sha	will cover all trades doing work at the permitted site. ho actually did the trade specific work under the permil require all subcontractors to provide evidence of warrance and a valid Certificate of Competency license in	mit. Per Florida Statute 440 and
Any changes, start of that so	the permitted cont ubcontractor begin	tractor is responsible f <mark>or</mark> the corrected form being sonning any work. Viola <mark>tion</mark> s will result in stop work o	ubmitted to this office prior to the rders and/or fines.
ELECTRICAL	Print Name License #:	Signature Phone #: 380 Qualifier Form Attached	
MECHANICAL/	Print Name	Signature Signature Phone #: 386	A feeter

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.



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 1. Oule Hentrer

Installers Name	, give this authori	ty and I do certify that the below
referenced person(s) listed on t	his form is/are under my direct	Supervision and control and
is/are authorized to purchase pe		
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Oda Price Jesne Shepard	Oda Riga	Price life Enterprise
Jesne Shepard	gille	Price Rive Enterprise
	0	
I, the license holder, realize that under my license and I am fully Local Ordinances.	l am responsible for all permit responsible for compliance wit	s purchased, and all work done h all Florida Statutes, Codes, and
I understand that the State Licer holder for violations committed be document and that I have full res	by him/her or by his/her authori	I authority to discipline a license zed person(s) through this nted by issuance of such permits.
Dule Hanton License Holders Signature (Nota	TH 10 License	025142 10-April 20 Number Date
NOTARY INFORMATION: STATE OF:Florida	COUNTY OF: Summum	
The above license holder, whose personally appeared before me a (type of I.D.)	e name is Nole Hough	duced identification



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, pale Houston Installer License Holder Nam	give this authority fo	r the job address show below
Installer License Holder Nam	Job Address	and I do certify that
only, 792 300 100(1)	Job Address	
	listed on this form is/are under my	
and is/are authorized to purchas	se permits, call for inspections and	I sign on my behalf.
Printed Name of Authorized	Signature of Authorized	Authorized Person is
Person	Person	(Check one) Agent Officer
Dda Price	Ca Price	Property Owner
Oda Price Jessie Shepard	SIII	Agent Officer Property Owner
Octobre .	0	Agent Officer Property Owner
I, the license holder, realize that	t I am responsible for all permits p	ourchased, and all work done
under my license and I am fully	responsible for compliance with a	all Florida Statutes, Codes, and
Local Ordinances.		
Lunderstand that the State Lice	ensing Board has the power and a	authority to discipline a license
traderstand that the State Lice	by him/her or by his/her authorize	ed person(s) through this
holder for violations committee	esponsibility for compliance grant	ed by issuance of such permits.
document and that i have full i	esponsibility for compliance grain.	
2 1 +	THI	25/42 3/15/20 Jumber Pate
Derle Howlow License Holders Signature (No	ntarized) License N	25/42 3/15/20 Number Date
	occi in a say	
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: SUWAN	nel
The shove license holder who	ose name is Palethustr	,
personally appeared before m		duced identification
(type of I.D.)	on this Vota day	y of <u>April</u> , 20 20.
904 (a	~	(65) 24/C+ Alotery Public State of Florida
NOTARY'S SIGNATURE	}	John Davis My Commission GG 299936
	}	Expires 02/10/2023

Typical pier spacing Manufacturer being installed Address of home Installer ń where the sidewall ties exceed 5 ft 4 in. I understand Lateral Arm Systems cannot be used on any home (new or used) NOTE: Cole 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 136 KYOS also HOURTO lateral longitudinal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) arriage wall piers within 2' of end of home Installer's initials Length x width License # 1/1 10 25 149 0 0 2XXZ 7 15C **Application Number:** Manufacturer Manufacturer Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms and their pier pad sizes below. capacity List all marriage wall openings greater than 4 foot Other pier pad sizes (required by the mfg.) Perimeter pier pad size bearing interpolated from Rule 15C-1 pier spacing table I-beam pier pad size Load Single wide Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C Double wide Triple/Quad 2500 psf 3000 psf New Home 2000 psf 1500 psf 000 psf Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS PIER PAD SIZES 16" x 16" PIER SPACING TABLE FOR USED HOMES (256)Serial # Installation Decal # Wind Zone II Used Home NX 2h Pier pad size 18 1/2" x 18 1/2" (342) 00 20" x 20" (400)Q

POPULAR PAD SIZES

00 00

Pad Size

16 x 16

Mobile Home Permit Worksheet

Wind Zone III

7

22" x 22"

24" X 24" (576)*

26" x 26" (676)

(484)* 0

Marriage wall

Sidewall

Shearwall

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

FRAME TIES

OTHER TIES

Number

47

5#1

13 1/4 x 26 20 x 20 7 3/16 x 25

446

ANCHORS

16 x 18 18.5 x 18.

16 x 22.5

17 x 22

Mobile Home Permit Worksheet

POCKET PENETROMETER TESTING METHOD	1. Test the perimeter of the home at 6 locations.	Take the reading at the depth of the footer.	 Using 500 lb. increments, take the lowest reading and round down to that increment. 	XHBO XHBO XHBO	TORQUE PROBE TEST
	POCKET PENETROMETER TESTING METHOD	Test the perimeter of the home at 6 locations.	Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer.	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.	It the perimeter of the home at 6 locates the perimeter of the home at 6 locates the reading at the depth of the footening 500 lb. increments, take the lowest ading and round down to that increments that increments the state of the state o
st the perimeter of the home at 6 locate the reading at the depth of the footeng 500 lb. increments, take the lowest ading and round down to that increment that increments are supplied to the control of the control o	te the reading at the depth of the footeing 500 lb. increments, take the lowest ading and round down to that increments where the statement of	ng 500 lb. increments, take the lowest ading and round down to that increments $\mathbf{X} \not\vdash \mathcal{H} \not\vdash \mathcal{D}$ TORQUE PROBE TEST	X 1000 C	TORQUE PROBE TEST	

CKOCK TROBE IEST

The results of the torque probe test is 2 % inch pour here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot anchors. inch pounds or check A test

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 requires anchors with 4000 lb holding capacity. reading is 275 or less and where the mobile home manufacturer may Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

11

Installer Name

Date Tested

0 TOUSTON

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.

Application Number:

والله المعتمدة
Debris and organic material removed 40% UeS Water drainage: Natural Swale Pad ** Other
Fastening multi wide units
Walls: Type Fastener: Length: Length: Spacing: S
Gasket (weatherproofing requirement)
I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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 COON 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 N/A Electrical crossovers protected. Yes Other:

Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

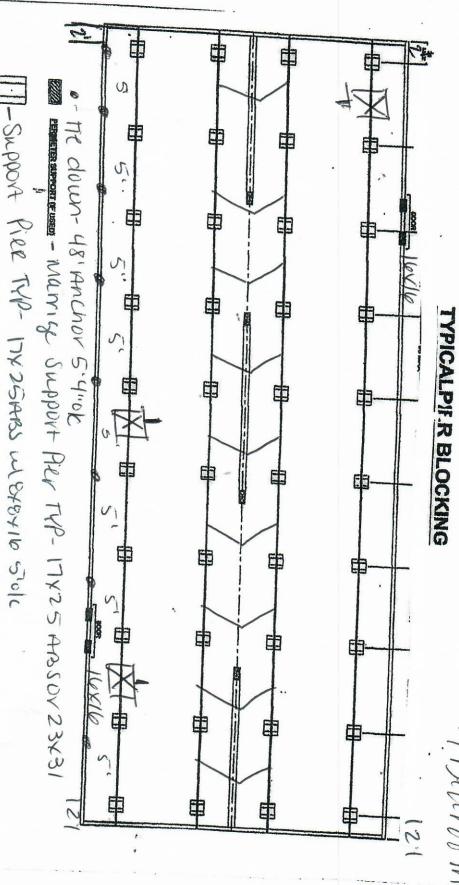
Installer Signature Date 3/

36 Maskynon muster bedioon ritures. Living Room E were page Bathnom Bedroom bedown

Mathew Houston
742 SW Nopelis Ave
Laid Und FL
Darcel # DB471-027

1995 Hoven Used Used Hbedroom

JUL 1975 FL HOUSEN AVE



* All Center Line Anchors - 60'

-Double Frame tie-48" Anchor sitom end then

1995 HOVEN Used 4 bedroom

Moutt 28x70

Order #: 1950 Label #: 28838	Manufacturer:	(Check Size of He
Homeowner: Matt Houst	Year Model:	Single
Address:	Length & Width:	Double
		Triple
City/State/Zip:	Type Longitudinal System:	HUD Label #:
Phone #:	Type Lateral Arm System:	Soil Bearing /
Date Installed:	New Home: Used Home:	Torque Probe
nstalled Wind Zone:	Data Plate Wind Zone:	Permit #:

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

28838

LABEL#

DATE OF INSTALLATION

DALE HOUSTON

NAME

IH / 1025142 / 1

1950

LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INS

INSTALLA
LABEL NE
USE PERM
OR MARK
COMPLET
ABOVE A
FOR A MI
YOU ARE
PROVIDE
REQUES