PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only (Revised 7-1-15) Zoning Official Date Received 10/15  By JW Permit # 38849
Flood Zone X Development Permit Zoning A - J Land Use Plan Map Category 4s
Comments Need S'TUP to leave existing WH for Son
FEMA Map# Elevation Finished Floor River In Floodway
Existing well Land Owner Affidavit Linstaller Authorization - FW Comp. letter App Fee Paid
□ DOT Approval □ Parent Parcel # □ STUP-MH □ 1910 - (0) □ 11 App
□ Ellisville Water Sys Assessment twed for □ Out County □ In County of Sub VF Form
2nd unit
Property ID # 3555-16-03755-111 Subdivision Columbia South Lot# 1
New Mobile Home WH Size 6x60 Year 2020
Applicant TENNITER WILLIAM Phone # 904. 219-2032
Address 108 SET TANNER GIN FT WHILE SI 32038
Name of Property Owner Jennifer Wison Phone# 904-219 2032
911 Address 106 SW Tanner Om FL White FL 32038
Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
Name of Owner of Mobile Home Loan Wilson Phone # 904.871, 0649  Address 18203 NW 15014 RT APTA 0373 ALACITUA, FL 324 S
Relationship to Property Owner Son
Current Number of Dwellings on Property
Lot Size Total Acreage
Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) or (Blue Road Sign) (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
Driving Directions to the Property 41 to CL 349 to Old Wire Rd to
SW Tanner Con on corner
Name of Licensed Dealer Installer 2 RAMU Phone # 350 595-8339
Installers Address 10 150x 32/5 Lowell, Fl. 35/6/3
License Number LH 12 11005 Installation Decal # 107470

LH-Recieved New Site plan 10/22/19 & Emailed Frita the Stup APPE Affiderit
LH-Spoke to Erika 10/28/19

Mobile Home Permit Worksheet	Application Number: Date
Installer: Broady fall License TH120663  Address of home being installed The White TC 32438	New Home
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	Triple/Quad Serlal # 20050
I understand Lateral Arm Systems cannot be used on any home Thew or psend where the sidewall ties exceed 5 ft 4 in.  Typical pier spacing  Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	Load bearing   52°C   16" x 16"   18 1/2" x 18   20" x 20"   22" x 22"   24" x 24"   26" x 26"   (526)   1/2" (342)   (400)   (484)   (576)   (676)   (676)   (676)   (1500 psf   4"6"   6"   7"   8"   8"   8"   8"   8"   8"   8
merriage wrist piers within 2 of end of homes par Rater Str.	3000 psf   8
	List all marriage wall openings greater than 4 foot and their pier pad sizes below.  Opening Pier pad size
	TIEDOWN COMPONENTS  TIEDOWN COMPONENTS  OTHER TIES  Number  Longitudinal Stabilizing Device (LSD)  Manufacturer  Longitudinal Stabilizing Device w Lateral Arms  Manufacturer  Marriage wall  Shearwall

#### **Mobile Home Permit Worksheet**

Mobile Home Permit Worksheet	Application Number: Date:
	Site Preparation
POCKET PENETROMETER TEST	
The pocket penetrometer tests are rounded down to psf or check here to declare 1000 th soil without testing.	Debris and organic material removed Water drainage: Natural Swale Pad Other
	Fastening multi wide units
POCKET PENETROMETER TESTING METHOD  1. Test the perimeter of the hope at 6 locations.  2. Take the roading at the depth of the footer.	Floor: Type Fastener: Length: Spacing:
l autorian di	Gasket (weatherproofing requirement)
3. Using 500 lb. Increment, take the lowest repdiring and round down to that increment.  X	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
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.	Type gasket
Note: A state approved lateral arm system is being used and 4 ft.	Weatherproofing
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 200 til holding capacity.  Installer's initials	The bottomboard will be repaired and/or taped. Yes Pq 199 Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes
installer's initials	Miscellaneous
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name  Date Tested	Skirting to be installed. Yes
Electrical	
Connect electrical conductors between multi-wide units, but not to the majorower source. This includes the bonding wire between multi-wide units. Pq.	Installer verifies all information given with this permit worksheet
Plumbing	is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2
Connect all sewer drains to an existing sewer tap or septic tank. Pg	manuracturer's installation instructions and or Rule 15C-1 & 2
Connect all potable water supply piping to anyexisting water meter, water tap, or other independent water supply systems. Pq.	Installer Signature Date Date
	2 of 3

2'-0" 8'-0" 8.0 DOOR 9 60'-0" 8'-0" 26'-0" PATIO DOOR 20'-0" B'-0 B-0" 2.0

178

951;

41'4

414

SUPPORT PIER/TYP

45'-7" - 42'-7"

FOUNDATION NOTES:

08/16/19

FOUNDATION NOTES:

FOUNDATION NOTES:

FIRST 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.

SIZE OF CONTINUES ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

LIVE Oak Homes

MODEL: U-5602B - 16 X 64

2-BEDROOM / 2-BATH

X-ISUSEMS

X-ISUSEMS

U-5602B

Prepared by and return to: Brent E. Baris, P.A. 18731 NW US Highway 441 High Springs, FL 32643 386-454-0688 File Number: 19-097

Parcel Identification No. 35-5S-16-03755-111

[Space Above This Line For Recording Data]

### Warranty Deed (STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 24th day of April, 2019 between Edward A. Hons and Jeanette C. Diekmann-Hons, husband and wife whose post office address is 28730 NW CR 1491, Alachua, FL 32615 of the County of Alachua, State of Florida, grantor\*, and Roger Wilson and Jennifer Wilson, husband and wife whose post office address is 108 Tanner Glen, Fort White, FL 32038 of the County of Columbia, State of Florida, grantee\*,

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10,00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Lot 11, Columbia South, according to the Plat thereof, recorded in Plat Book 5, Page 55, of the Public Records of Columbia County, Florida.

Together with 1990 Schnure Ho' mobile home with VIN # M245534

Subject to taxes for 2019 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

" "Grantor" and "Grantee" are used for singular or plural, as context requires

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Witness Name:

Witness Name:

State of Florida County of Alachua

The foregoing instrument was acknowledged before me this 24th day of April, 2019 by Edward A. Hons and Jeanette C. Diekmann-Hons, who [ ] are personally known or [X] have produced drivers' licenses as identification.

[Notary Seal]

Notary Public

Printed Name:

My Commission Expires:

BRENT EDWARD BARIS Y COMMISSION # GG 127380 EXPIRES: August 3, 2021 ed Thru Notary Public Unders

#### STATE OF FLORIDA COUNTY OF COLUMBIA

#### LAND OWNER AFFIDAVIT

This is to certify that I, (We), _	JENN1-	Fir W	ILSON	
as the owner of the below descr	ibed property:		. 1 )	
Property tax Parcel ID number	35.58.11	6.0375	55.111	
Property tax Parcel ID number Subdivision (Name, lot, Block, Pha	se)Colum	bia S	South	LOT 11
Give my permission for	LOGAN 1	Vilson		_ to place a
Circle one Mobile Home/ Tra Barn – Shed – Gara			ly / Single Fam	ily Home
This is to allow a 2 <sup>nd</sup> Mobile Home on the above listed property for a family member through Columbia County's Special Temporary Use provision.				
Family Members Name				
Relationship to Lessee				
I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.				
Owner Signature		· [D] 15	19	
Owner Signature		Pate		
Sworn to and subscribed before me this 15 day of OCTOBER, 2019. This (The person(s) are personally known to me or produced ID				
Laurie Hoolses	<i>L</i>	AURIC H		ype)
Notary Public Signature	Nota	ary Printed N	ame	_

Notary Stamp/



#### MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 438S3	CONTRACTOR Brancy HA	
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#### THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

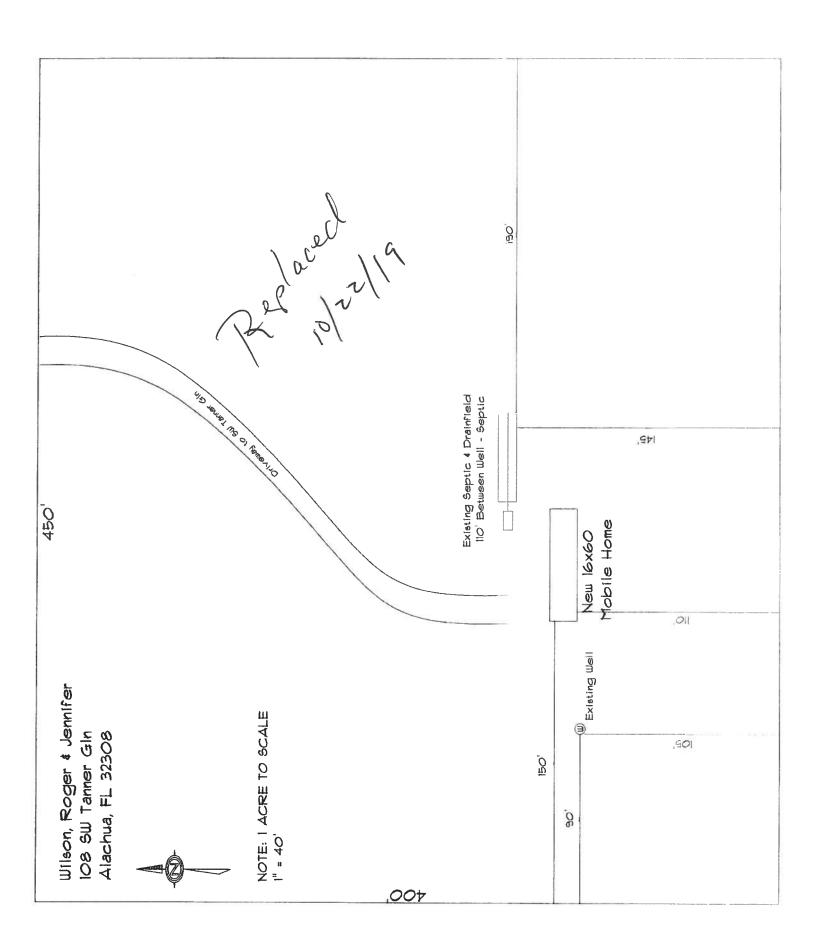
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to 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.

ELECTRICAL	Print Name Glenn Whittington Signature Sem Wastington
/	License #: <u>EC13072957</u> Phone #: <u>381, 972-1708</u>
1074	Qualifier Form Attached
, ,	
MECHANICAL/	Print Name West Signature Signature
A/C 1766	License #: <u>CAC 18 18 176</u> Phone #: <u>352-317-0176</u>
	Qualifier Form Attached

**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.







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

PERMIT NO.	9-2777
DATE PAID:	Tolletia
RECEIPT #:	14/59/5

Page 1 of 4

APPLICATION FOR:				
[ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Repair [ ] Abandonment [ ] Temporary [ ]				
APPLICANT: Jennier Wilson				
AGENT: Enla Ashley TELEPHONE: 380-418-040				
MAILING ADDRESS: 12426 NWUS Huly 441 Alachua FL 32615				
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: 1 BLOCK: SUBDIVISION: Columbia South PLATTED: Yes				
PROPERTY ID #: 35-58-16 03755-111 ZONING: AG LO I/M OR EQUIVALENT: [Y/N]				
PROPERTY SIZE: ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD				
IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y N] DISTANCE TO SEWER: N/A FT				
PROPERTY ADDRESS: 108 SW Tanner G/n 71 White FL 32138				
DIRECTIONS TO PROPERTY: 441 to Mani to Cl349 to Corner of				
Old Wire Roto Tamper Gla				
BUILDING INFORMATION '[ \( \sum \) RESIDENTIAL [ ] COMMERCIAL				
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC				
1 realoco new Swmh 2 960				
2010 SW Mh 2 980 INEGEIVEN				
3 OCT 1 6 2019				
4 EH Company				
[ ] Floor/Equipment Dyains   [ ] Other (Specify)				
BIGNATURE: DATE: 10/10/19				
DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC Page 1 of 4				

# STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0727 ------PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet. 0 ICIXEUMI lacre of 4 tota -pasiement Site Plan submitted by Plan Approved Not Approved Date\_1319 County Health Department IANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

District No. 1 - Ronald Williams District No. 2 - Rocky Ford District No. 3 - Bucky Nash 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

Date/Time Issued:

10/28/2019 7:11:21 PM

Address:

106 SW TANNER Gln

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

03755-111

REMARKS: Address for proposed structure on parcel. 2nd address for this parcel.

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

#### **FAMILY RELATIONSHIP AFFIDAVIT**

STATE OF FLORIDA COUNTY OF COLUMBIA Inst: 201912024743 Date: 10/24/2019 Time: 2:08PM Page 1 of 2 B: 1397 P: 482, P.DeWitt Cason. Clerk of Court Colu County. By: PT Deputy Clerk

	BEFORE ME the undersigned Notary Public personally appeared, Jennifer Wilson
1 1	, the Owner of the parent parcel which has been subdivided for
Logan \	, ·····, ····· ······ ······ ···
	led for the Immediate Family Members primary residence use. The Immediate Family
Memb	per is related to the Owner as Son Both individuals being
first d	uly sworn according to law, depose and say:
1.	Affiant acknowledges Immediate Family Member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2.	Both the Owner and the Immediate Family Member have personal knowledge of all matters set forth in this Affidavit.
3.	The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Parent Tract Tax Parcel No. 35-58-16-03755-111
4.	The Immediate Family Member holds fee simple title to certain real property divided from the Owners' parent parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No. 35-58-16-03755-111

- 5. No person or entity other than the Owner and Immediate Family Member to whom permit is being issued, including persons residing with the family member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the property.
- 6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for an Immediate Family Member being in compliance with the density requirements of the Columbia County's Comprehensive Plan and Land Development Regulations (LDR's).
- 7. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

AWILSON	do No
Owner	Immediate Family Member
Jennifer Wilson	Logan Wilson
Typed or Printed Name	Typed or Printed Name
by Jennifer Wilson (Ow	med) before me this 22 day of October , 20_, ner) who is personally known to me or has produced identification.  ERIKA B. ASHLEY  MY COMMISSION # GG015615  EXPIRES July 26, 2020
by Logan Wilson (Fam	APPROVED: COLUMBIA COUNTY, FLORIDA  By Liza Williams  Name: Liza Williams  Title: Planning Technician

#### Laurie Hodson

From: Erika Ashley <erika.liveoakhomes@gmail.com>

Sent: Tuesday, October 22, 2019 2:14 PM
To: Laurie Hodson; Janice Williams
Subject: Fwd: 13th Street Home Sales LLC

Attachments: copier13street@gmail.com\_20191022\_124523.pdf

Please see updated site plan for customer Wilson. They are leaving the existing home and doing a STUP as we discussed Laurie.

----- Forwarded message -----

From: copier13street@gmail.com < copier13street@gmail.com>

Date: Tue, Oct 22, 2019 at 2:06 PM Subject: 13th Street Home Sales LLC To: <erika.liveoakhomes@gmail.com>

Reply to: <a href="mailto:copier13street@gmail.com">copier13street@gmail.com</a>

Device Name: 13th Street Mobile Home Sales

Device Model: MX-M264N

Location: Gainesville

File Format: PDF (Medium) Resolution: 200dpi x 200dpi

Attached file is scanned image in PDF format.

Use Acrobat(R)Reader(R) or Adobe(R)Reader(R) of Adobe Systems Incorporated to view the document.

Adobe(R)Reader(R) can be downloaded from the following URL:

Adobe, the Adobe logo, Acrobat, the Adobe PDF logo, and Reader are registered trademarks of Adobe Systems Incorporated in the United States and other countries.

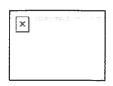
http://www.adobe.com/

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Erika Ashley 13th Street Home Sales

Facebook: https://www.facebook.com/13thstreethomes/

Phone: 386-418-0424 Fax: 386-418-0423 Cell: 352-214-6778







## COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

TOP		
MOBILE HOMI	E INSTALLERS LETTER OF AU	JTHORIZATION
I. Standy W. Installer License Holder Na	give this authority	for the job address show below
only, 108 3W T	Job Address	, and I do certify that
the below referenced person(s)	listed on this form is/are under m	y direct supervision and control
and is/are authorized to purcha	se permits, call for inspections an	nd sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
ERIKA AShley	Sha All	Agent Officer Property Owner
Jennifer Wilson	Quel WA	Agent Officer Property Owner
	0	Agent Officer Property Owner
	t I am responsible for all permits presponsible for compliance with a	
Local Ordinances.		
I understand that the State Lice	nsing Board has the power and a	uthority to discipline a license
holder for violations committed I	by him/her or by his/her authorize	d person(s) through this
document and that I have full re	sponsibility for compliance grante	d by issuance of such permits.
License Holders Signature (Nota	THI License No.	16663 9 19 14 Umber Date
NOTARY INFORMATION: STATE OF: Florida	_county of: Alachuc	<u>a</u>
The above license holder, whos personally appeared before me (type of I.D.)	and is known by me or has produ	tall ced identification of September, 20 19.
NOTARY'S SIGNATURE	legt (5	Geal/Stamp)
	WHITE I	SON BRENT WAINWRIGHT

MY COMMISSION # GG015834 EXPIRES July 26, 2020



#### COLUMBIA COUNTY BUILDING DEPARTMENT

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

Pho	ne: 386-758-1008 Fax: 386-758-	2160
MOBILE HOMI	g INSTALLERS LETTER OF AU	THORIZATION or the job address show below
only, 106, Sid T	anner GIN S	, and I do certify that
the below referenced person(s)	listed on this form is/are under m	y direct supervision and control
and is/are authorized to purcha	se permits, call for inspections and	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Ali Wainwright .	Alla my	<u>刈</u> Agent Officer Property Owner
	J	Agent Officer Property Owner
		AgentOfficer Property Owner
under my license and I am fully ocal Ordinances.  understand that the State Licent older for violations committed to	I am responsible for all permits processors and automorphisms are sponsibility for compliance granted	thority to discipline a license person(s) through this
icense Holders Signature (Nota	arized) License Nu	126663 9/1/19 mber Date
IOTARY INFORMATION: TATE OF: Florida	_county of: Alachu	a
he above license holder, whose ersonally appeared before me appeared b	and is known by me or has produc	red identification  f
OTARY'S SIGNATURE	(\$	eal/Stamp)

ERIKA B. ASHLEY

MY COMMISSION # GG015615

EXPIRES July 26, 2020