PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

_	1.
	For Office Use Only (Revised 7-1-15) Zoning Official LW Building Official 44993
	AP# 54676 Date Received By Permit #
	Flood Zone Development Permit Zoning A-3 Land Use Plan Map Category Aq
	Comments
-	
F	FEMA Map# Elevation Finished Floor River In Floodway
	Recorded Deed or Deed or Property Appraiser PO Site Plan EH#DWell 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
Pr	operty ID # <u>24 - 28 - 15 - 000 79 - 008</u> Subdivision Lot#
	New Mobile Home Used Mobile Home MH Size 28 x 54 Year 2022
	Applicant Sonya North Phone # 863-517-5701
	Address 3311 Sw State Rd 247 Lake City FI 32024
	Name of Property Owner Robert + Krista 1 Demps Phone 386-623-2813
	911 Address 260 NW Don Hart Way White Springs Fl 30
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Duke Energy
	Name of Owner of Mobile Home Barbara, Harrell Krista Demoser 4166-7395
	Name of Owner of Mobile Home Bar David, Harriett Fers. Phone # 5802 400 1345
	Address 260 NW Don Hart Way White Springs F13=
	Relationship to Property Owner
	Current Number of Dwellings on Property this will be the only one
	Lot Size Total Acreage 8.4
	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)
н	Is this Mobile Home Replacing an Existing Mobile Home
w	Driving Directions to the Property R on 41 N Lon NW Suvannee
	Valley Ron Don Hart way, fourth lot on the L
	0'
	Name of Licensed Dealer/Installer Rusia L. Kwowles Phone # 386-367-0886
	Installers Address 5801 5w 5ku7 Laking 61. 32024
	License Number I 4:1038219 Installation Decal # 88 497
95	motanation betain # 00 47/



Jacobsen Homes of Lake City

PURCHASE AGREEMENT

Locally Owned and Operated

3973 W. U.S. Hwy. 90 Lake City, Florida 32055

Ph. 386-438-8458 · Fax: 386-438-8472

		- A(-o	(
SOLD TO Barbara Harrell	sishel 94	PHON	1E386-	466	73	95 DAT	TE 4-15-22	
ADDRESS Don Hart Wan Spri	My COL	JNTY	Colum	bia		SALESMA	re <i>4-15-22</i> An	
Subject to the Terms and Conditions Stated on Both Sides givinis Agreement Se	eller Agreement S	Seller Agrees	to Sell and the Pu	rchaser Agr	ees to Pu	rchase the Following I	Described Property:	
YEAR 2022 Sacobsen MODEL In	P-45	561	7R	B. ROO	MS	FLOOR SIZE	HITCH SIZE	
SERIAL NUMBER		NEW	COLOR		_	PROPOSED	FIL W	-
JacFL37982 AB		USED	0.000000			DELIVERY DATE		
OPTIONAL EQUIPMENT, LABOR AND ACCESS					PR	ICE OF UNIT	\$ 135,900	0
Standard Delivert worth	P		OPTIONAL E	QUIPME	NT		1337700	
Stanford Stef 25-ts A/c Heat fump 3/2	TUK		COST OF SE	T-UP PA	RTS			-
Stanter &KIVI'M VMY/	what					SUB-TOTAL		_
3,			SALES TAX				80-416	ō
		151	100-36-40-30-30-08-1	///		21	0 100	_
			17	110w	-NC	25	23,000 0-	_
				NON	-TAX	ABLE ITEMS		
			VARIOUS FE		_		45000	
				580	_		\$ 167,554	1 6
			TRADE-IN ALLOWANCE		\$			
			ON ABOVE		\$			
			CASH DOWN PAYMENT	NGE				
			2. LESS TOTA	U CDEDI	TO			
							\$ ~	
		-				H SALE PRICE	\$167,55	
							Seller until the agree	
							or by the execution of ement and its accepta	
			by a financi	ng agend	cy; the	reupon title to th	ne within described i	unit
							full cash payment or	
						ntil a later date.	ough the actual phys	cai
			IT IS MUTUA	LLY UNDE	RSTOO	D THAT THIS AGE	REEMENT IS SUBJECT	
							CONCERNING CHANG	
		_					roduct and found it su	
			able for his/	her partic	cular ne	eds, and that it	is of acceptable qual	ity
			and that pur making this			oon his/her judge	ment and inspection	in
Seller is not permitted to make plumbing or electrical connections, or connection	ng of certain na	atural gas					an remain level wh	en
or propane appliances where state or local ordinances require a licensed plum do. Special building ordinances or laws requiring plumbing, electrical or constr					-		acktop or concrete.	_
the responsibility of Seller or the manufacturer. Seller is not responsible for obtain	ning health or s	sanitation					he back hereof has be nt the same as though	
permits, nor for local, county or state permits involving restrictive zoning. Cost compliance must be borne by Buyer. It is solely the Buyers responsibility to assure							re of statutory age or old n described merchandi	
is acceptable for home placement without violation of any local, state, or federal		nome site	the optional e	quipment	and ac	cessories thereon	and, insurance if includ	ed,
Seller is not responsible or liable for any delays caused by the manufacturer, accid	dents, strikes, f	ires, Acts	encumbrance	s whatsoe	ver, exc	cept as noted above	ng traded in is free from ve. Purchaser agrees ea	ach
of God or any other cause beyond Seller's control.				ereof is inv			ont and back is severable shall, nevertheless, rem	
TRADE-IN DEBT TO BE PAID BY DEALER CUS	TOMER		in full force an	d ellect.		-		-
Jacobson Homos of Lake City								
Jacobsen Homes of Lake City Net Valid Unless Signed and Accepted by an officer of the Compar		I, OR WE	E. HEREBY AC	CKNOWL	EDGE	RECEIPT OF A	COPY OF THIS ORDI	ER
The rain of the organica and necepted by all officer of the company	""	100	2			. /		
		SIGN	ED X	alba	MA	Hame,	PURCHASE	R
By		I Company of the Comp	Va	1 ~	0.0			
Approved, Subject to acceptance of financing by bank or finance com	pany.	SIGN	ED X	UHU	X I	unpsi)PURCHASE	R



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

1, Rughy by languation No.		or the job address show below
only, 200 Niu I	Joh Hart Way a	the Springs F1 32096, and I do certify that
the below referenced person(s)	listed on this form is/are under my	y direct supervision and control
and is/are authorized to purchas	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)
Sorry North	Sonia North	Agent Officer Property Owner
Sorrea North Dylan Hinson	,	Agent Officer Property Owner
•		Agent Officer Property Owner
under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed	responsible for all permits presponsible for compliance with a nsing Board has the power and authorized by him/her or by his/her authorized sponsibility for compliance grante	Il Florida Statutes, Codes, and uthority to discipline a license d person(s) through this
License Holders Signature (Not		038249 <u>4-26-29</u> umber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: Columb	<u>}</u>
The above license holder, whos personally appeared before me (type of I.D.)	and is known by me or has produ	
NOTARY'S SIGNATURE	Jope 1	Seal/Stamp SANDRA ELIZABETH TOPE Notary Public · State of Florida Commission # HH 079583 My Comm. Expires Jan 18, 2025 Bonded through National Notary Assr.



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, Rush h wools	,give this authority	and I do certify that the below
referenced person(s) listed on t	his form is/are under my direct su	pervision and control and
is/are authorized to purchase pe	ermits, call for inspections and sig	ın on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Sonya North	Song worth	
Sonya North Dylan Hinson		
	t I am responsible for all permits presponsible for compliance with a	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
holder for violations committed	nsing Board has the power and a by him/her or by his/her authorize sponsibility for compliance grante	ed person(s) through this
License Holders Signature (Not	arized)	umber $\frac{\mathcal{G}(\mathcal{G})}{\mathcal{G}(\mathcal{G})}$
NOTARY INFORMATION: STATE OF: Florida The above license holder, whos personally appeared before me (type of I.D.) Authorized Signature	and is known by me or has produ on this Hamber day	

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	ABER		CONTRACTOR	Rusty Know	les	PHONE 386-397-0	884
		THIS FORM MUST	BE SUBMITTED PR	IOR TO THE ISSUANCE OF A	PERMIT		
records of the s	subcontract	ors who actually di or shall require all	id the trade spec subcontractors	ork at the permitted site cific work under the pe to provide evidence of of Competency license	ermit. Per Fl workers' c	orida Statute 440 and ompensation or	
Any changes, i start of that su	the permitte ubcontracto	ed contractor is res r beginning any w	ponsible for the ork. Violations	e corrected form being will result in stop work	submitted orders and	to this office prior to the i/or fines.	_
ELECTRICAL		EC 130030		and a final point	len W	hettrufm - 1761 (cell)	
MECHANICAL/	Print Name			Signature		ng dalah da saya sakangan aya saya saya saya sa kababa sa sa kababa sa sa sa da da ba sa sa	
A/C	License #:	(Qualifier Form Att				
Qualifier Form	ms cannot l	ne submitted for (any Specialty L	icense.			
Specialty L	icense	License Number	Sub-Contra	ctors Printed Name	Sub	-Contractors Signature	
MASON				*			
CONCRETE FIR	VISHER						

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

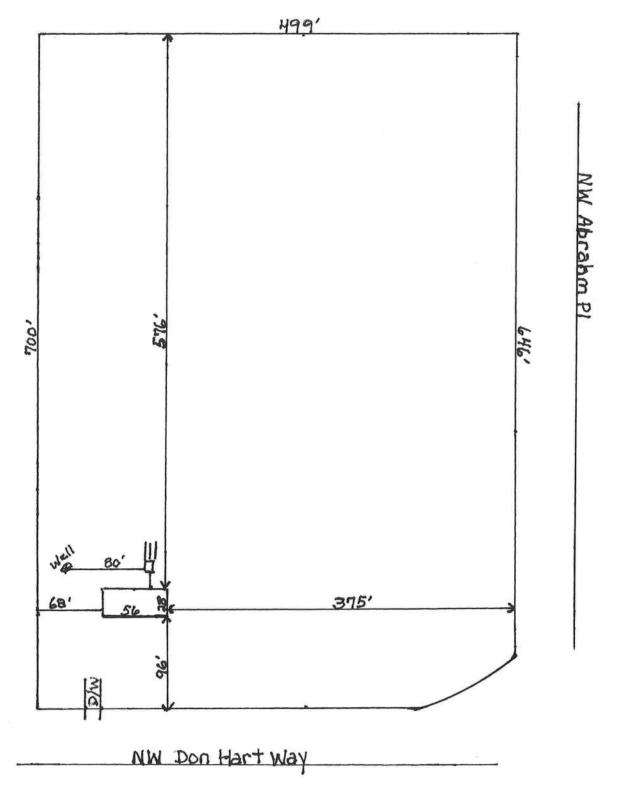
Revised 10/30/2015

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	IBERCONTRACTOR_\(\frac{1}{2}\)	USty Knowles	PHONE 386-397-088
	THIS FORM MUST BE SUBMITTED PRIOR TO	THE ISSUANCE OF A PERMIT	
Ordinance 89-6 exemption, gen Any changes, to	unty one permit will cover all trades doing work at to subcontractors who actually did the trade specific we is, a contractor shall require all subcontractors to pro- neral liability insurance and a valid Certificate of Com- the permitted contractor is responsible for the corre- subcontractor beginning any work. Violations will res	ork under the permit. Per Flo vide evidence of workers' co appetency license in Columbia acted form being submitted t	rida Statute 440 and mpensation or County. o this office prior to the
ELECTRICAL	Print Name	Signature	
	License #:Qualifier Form Attached	Phone #:	
MECHANICAL/	Print Name Milliag P. Boland License #: (AC 1817716 Qualifier Form Attached)	Phone #: (352) 274-	9.33%
	ns cannot be submitted for any Specialty License		
Specialty L	icense License Number Sub-Contractors P	Printed Name Sub-	Contractors Signature
CONCRETE FIR	NISHER		

F. S. 440.103 Building permits; identification of minimum premium policy. -- Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



HARRELL/DEMPSY

Columbia County Property Appraiser

Jeff Hampton

Parcel: << 24-2S-15-00079-008 (43850) >>>

2022 Working Values updated: 4/21/2022

Owner & Pr	roperty Info		
Owner	DEMPSEY ROBER DEMPSEY KRISTA 220 NW DON HAR WHITE SPRINGS,	AL L T WAY	
Site			
Description*	COMM NE COR OF 754.19 FT, S 43.51 F POB, CONT S 499.9 E 887.66 FT, N 679.2 FT TO POB. 784-205 949-2036, 951-97, W	T TO S R/W OF . 6 FT, W 173.91 F 24 FT, NW 93.47 I 5, 808-2153, 875-	A CO RD FOR T, S 246.71 FT, FT, W 646.89 2306, 880-611,
Area	8.4 AC	S/T/R	24-28-15
Use Code**	VACANT (0000)	Tax District	3
The second section of the second			

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

**The Use Code is a FI Dept. of Revenue (DOR) code and is not maintained by

**The <u>Use Code</u> 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 Va	alues			
2021 Certified Values	2022 Wor	king Values		
There are no 2021 Certified	Mkt Land	\$25,200		
Values for this parcel	Ag Land	\$0		
	Building	\$0		
	XFOB	\$0		
	Just	\$25,200		
	Class	\$0		
	Appraised	\$25,200		
	SOH Cap [?]	\$0		
	Assessed	\$25,200		
	Exempt	\$0		
	Total Taxable	county:\$25,200 city:\$0 other:\$0 school:\$25,200		

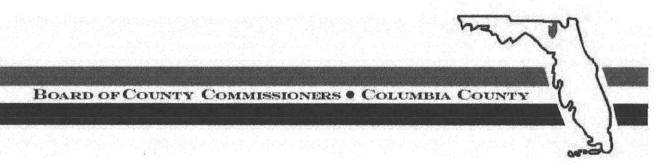
Aerial Viewer	Pictometery	Googl	e Maps		
	016 0 2013	O 2010	O 2007	O 2005	Sales
+					
	, rev	/ABRAHI	dia		
NWTEER DE	PAINIRA		Toke The	NWS	JWANNE

Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
4/6/2022	\$100	1464/0187	WD	V	U	11

Building Characteristics							
Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value		

Extra Feature	s & Out Buildings	(Codes)			
Code	Desc	Year Blt	Value	Units	Dims

Land	Breakdown				
Code	Desc	Units	Adjustments	Eff Rate	Land Value
0000	VAC RES (MKT)	8.400 AC	1.0000/1.0000 1.0000/ /	\$3,000 /AC	\$25,200



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:

4/29/2022 1:10:03 PM

Address:

260 NW DON HART Way

City:

WHITE SPRINGS

State:

FL

Zip Code

32096

Parcel ID

00079-008

REMARKS: New address for Habitable structure (family home, business, etc.) on the 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:

MOORE, DAVID R.

Columbia County Department of Information Technology 135 NE Hernando Ave. Lake City, FL 32055 Telephone 386-719-1456

	marriage wall piers within 2' of end of home pel Rule 15C			Typical pier spacing Typical pier spacing Installer's initials	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)	Length × width	License # TH:
Opening Pier pad size ### ### ############################	1/4 x 20 1/4 20 x 20 1/16 x 25 3/16 1/2 x 25 1/2 24 x 24 26 x 26 ANCHORS	I-beam pier pad size	8' 8' 8' 8' 8' 8' 8' 8' 8'	Load bearing bearing capacity Footer 16" x 16" (256) 18 1/2" x 18 (342) 20" x 20" (400) 22" x 22" (484)* 26" (576)* (676)* (676)* (676)* (777) (877) <td>PIÉR SPACING TABLE FOR USED HOMES</td> <td>Wind Zone II Installation De</td> <td>Application Number:Date:</td>	PIÉR SPACING TABLE FOR USED HOMES	Wind Zone II Installation De	Application Number:Date:

Mobile Home Permit Worksheet

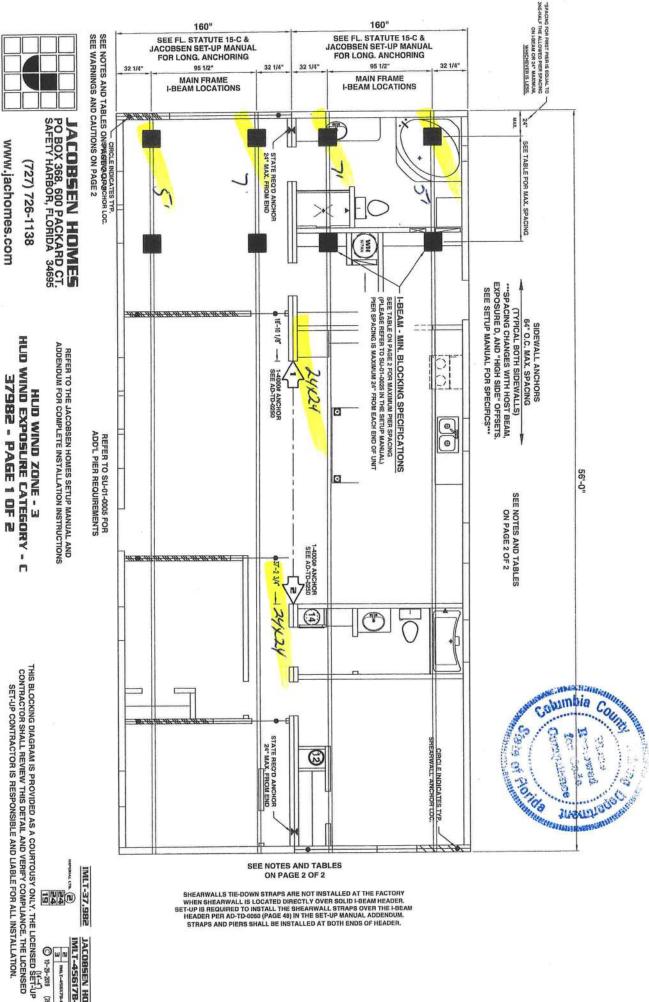
Mobile Home Permit Workshe

Source. This includes the bonding wire between mult-wide units. Pg. 1/2.1 Plumbing Connect all sewer drains to an existing sewer tap or septic tank. Pg. 1/2.1	Electrical	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 X X X X X X X X X X X X X X X X	The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing.	Mobile Home Permit Worksheet
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		Fastener: Type Fastener: Typ	nd organic material r ainage: Natural	Application Number:Date:

Installer Signature

Date 4.26.22

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 1,721



www.jachomes.com

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

37982 - PAGE 1 OF 2

| MLT-45617B-982 | MLT-45617B-67 | MLT-45617B-67 | 10-23-2019 (26'-8')

ACOBSEN HOMES

MLT-37,982

SHEARWALLS TIE-DOWN STRAPS ARE NOT INSTALLED AT THE FACTORY WHEN SHEARWALL IS LOCATED DIRECTLY OVER SOLID - FEAM HEADER. SET-UP IS REQUIRED TO INSTALL THE SHEARWALL STRAPS OVER THE FBEAM HEADER PER AD-TI-0056 (PAGE 46) IN THE SET-UP MANUAL ADDENDUM. STRAPS AND PIERS SHALL BE INSTALLED AT BOTH ENDS OF HEADER.

N10 = SEE NOTE 10. REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS. REFER TO AD-TD-0250 THROUGH AD-TD-0254 FOR COLUMN ANCHOR SIZES COL. NUM. (7) u m (1) W COLUMN INFO. SIZE (sq.in.) PIER PAD MINIMUM SPAN 18'-5" 18'-5" 132.875 sq. in. 342.25 sq. in. 2013, JACOBSEN HOMES, SAFETY HARBOR, FLORIDA, ALL RIGHTS RESERVED o Q Q. Q 676 sq. in. 576 sq. in. 256 sq. in. 400 sq. in. 396 sq. in. TABLE (IN POUNDS) PO BOX 368, 600 PACKARD CT. SAFETY HARBOR, FLORIDA 34695 **JACOBSEN HOMES** 87 1/2 49 1/2 psf SOIL www.jachomes.com par soil COLUMN PAD - MIN. SIZES (sq. in.) (727) 726-1138 77 1/2 66 1/2 78 1/2 48 1/2 psf SOIL psf SQL NIO N10 I-BEAM PIER SPACING 107 1/2* par SOIL 90 1/2 66 1/2 105 1/2* OLN OLN N N 116° NIO NIO pat SOIL NIO NTO N10 N10 NIO N N par SOIL NI O NIO NIO NIO N103* N10 NIO par SOIL N10 NIO N10 N10 NIO HUD WIND EXPOSURE CATEGORY - C 10. io io 14 INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN SERIOUS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY THAT ALL PERSONNEL, ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADEQUATELY TRAINED. MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT NOTES: IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT WARNING: CAUTION: MATING LINE PIER SPACING psf SOIL MAX, PIER SPACING ON 8" 1-BEAM IS 96", MAX, PRIER SPACING ON 10" OR 12" 1-BEAM IS 120" SEE NOTE 4 ON PAGES SU-01-0023 THROUGH SU-01-0026. REQUIRE CLOSER INSTALLATION, REFER TO THE JACOBSEN HOMES SETUP MANUAL FOR SPECIFICS (SEE SU-01-0005 AND SU-01-0009), WHEN THE ATTACHED STRUCTURE HAS FOURTH WALL PIERS AND ANCHORS ARE NOT REQUIRED AND ANCHORS SPACED NO FURTHER THAN 48" O.C. MAXIMUM, SOME WIND ZONE AREAS MAY ANY SIDEWALL AREA WITH A HOST BEAM OR A STRUCTURAL ATTACHMENT SHALL HAVE PIERS ALL 2x6 FLOOR SYSTEMS WIDER THAN 144" REQUIRE PERIMETER AND MATING LINE BLOCKING REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERS SHALL CONSTRUCTION OR IS DESIGNED AND CONSTRUCTED TO BE SELF SUPPORTING, THESE ADDITIONA ALL 184" WIDE FLOOR SYSTEMS REQUIRE PERIMETER AND MATING LINE BLOCKING ALONG THE MATING LINE, SEE THE SETUP MANUAL FOR SPECIFICS. REFER TO AD-TD-100 FOR SHEARWALL APPLICATIONS AND TIE-DOWNS REFER TO THE APPROVED FLOOR PLAN FOR SHEARWALL LOCATIONS AND LOADS REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS. REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS, PIERS CAN BE RELOCATED ANDIOR SPANS INCREASED PER THE SETUP MANUAL. REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION. BE LOCATED WITHIN 6" OF EITHER SIDE OF THE COLUMN, ADDITIONAL PIERS MAY BE REQUIRED pet SOIL pst SOIL per SOIL PERIMETER PIER SPACING pst SQL PAGE psf SOIL M =

> REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

pet SOIL

N

Order #: 5310 Label #: 88497	Manufacturer:	(Check Size of Home)	
Homeowner:	Year Model:	Single Double Triple HUD Label #:	
Address:	Length & Width:		
City/State/Zip:	Type Longitudinal System:		
Phone #:	Type Lateral Arm System:	Soil Bearing / PSF:	
Date Installed:	New Home: Used Home:	Torque Probe / in-lbs:	
Installed Wind Zone:	Data Plate Wind Zone:	Permit #:	

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

88497

LABEL#

DATE OF INSTALLATION

RUSTY L. KNOWLES

NAME

IH / 1038219 / 1

5310

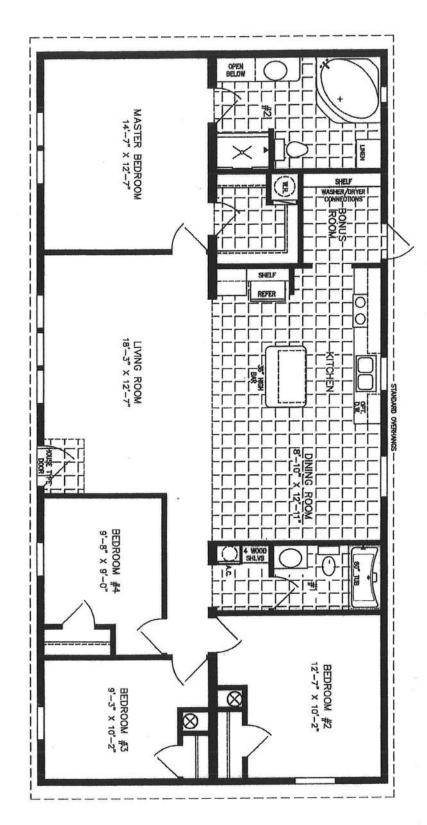
LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.



INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

The Imperial Limited





THAT WEE ON THE PENNE TO DESCRIPT OFFICIAL TRIBLES WITH YOUR SUESPESSION

600 Packard Court ■ Safety Harbor, Florida 34695 ■ Telephone (727) 726-1138

www.jachomes.com/Floor-Plans

28' X 56' 1,493 SQUARE FEET

Model IMLT-45617B

0%0%

D 01-20-11

DESIGNED FOR ZONES II & III (ALL SIZES ARE APPROX.)