Permit Application / Manufactured Home Installation Application

| For Office Use | Only (Revised 6/24) Zoning Official_ | | Building Of | ficial |
|---|---|-----------------|----------------------|--------------------------------|
| AP# | Date Received | | By | Permit # |
| Flood Zone | Development Permit | Zoning | Land Use Plan | Map Category |
| FEMA Map#_ | Elevation Fini | shed Floor | River | In Floodway |
| Recorded D | Deed or 🗌 Property Appraiser PO 🔲 S | ite Plan 🔲 EH # | | |
| Land Owne | er Affidavit Installer Authorization | ☐ FW Comp. lett | er 🗀 App Fee I MH | ² aid □ 911 App |
| ☐ Ellisville W | oval Parent Parcel # ater Sys Assessment | In County 🗆 Sul | VF For | |
| *This page not required if Online Submission Property ID # 33-US-16-03265- Subdivision Donovan woodlar Fot# 8 | | | | |
| - KI Novy I | Mobile Home □Used Mobil | le Home MH | Size 28xL | 10 Year 2025 |
| - Applicant | SOOK NOUTH | Phor | 1e# 843- | 517-5701 |
| • Address 2 | 3311 SW State 12 | d 247 | Lake (| Vidy F1 32004 |
| ■ Applicant Song North Phone# 843-517-5701 ■ Address 3311 Sw State Rd 247 Lake City F1 32024 ■ Name of Property Owner OSar 4 Kattering Phone# ■ 911Address Sw Donovan Gin Lake City F1 32024 | | | | |
| 911Addres | ss Sw Doc | youan cil | n lake | City TI Sough |
| ■ Circle the correct power company - □FL Power & Light - □Clay Electric | | | | |
| (Circle One) □- Suwannee Valley Electric - □Duke Energy | | | | |
| Name of Owner of Mobile Home Karissa Carriso + Jose Argel Rodiguez Phone # 407-310- Address 337 Sw Dorovan Glalake City Fl | | | | |
| ■ Relationship to Property Owner day obter 32004 | | | | |
| ■ Current # of Dwellings on Property # of Bed/bath 4 2 ■ Lot Size Total Acreage 5.01 | | | | |
| ■ Lot Size_ | T | otal Acreage_ | 5.01 | |
| ■ Do you:(Circle one) ☐ Have Existing Drive ☐ Private Drive ☐ Need a Driveway Permit (Currently using) (Blue Road Sign) | | | | |
| **Please be advi | sed all MH applications may promp | | | f existing/private driveway*** |
| ■ Is this Mobile Home Replacing an Existing Mobile Home ☐Yes 🖄 No | | | | |
| • Name of Licensed Dealer/Installer Kisty Knowlls | | | | |
| ■ Installers Phone # 384 - 397 - 0886 | | | | |
| Installers Address 5801 SW SR 47 WW Civy, FT 320211 License Number: TH1038219 | | | | |
| | | | | |
| ■ Installation Decal # | | | | |
| Is the mobile home currently located in Columbia County? ☐Yes ☐No (Only required for used mobile homes) | | | | |
| Applicant Email Address: Provision Permitting @ grail. Com | | | | |
| · · | | | | |
| | (This is where applic | ration undates | will be sent |) |