Parcel:

36-28-15-00118-001 (301)

**Owner & Property Info** 

SHEFFIELD MICHAEL LEE

SHEFFIELD LESLIE S

Owner 1214 S KYLE WAY

ST JOHNS, FL 32259

Site 134 NW LUCY Gln, LAKE CITY

972 NW LOWER SPRINGS Rd

BEG SE COR OF SW1/4 OF SW1/4, RUN W 437.94 FT, N 203.10 FT, NE 48 DEG 450.47 FT TO SW

Description\* R/W LOWER SPRINGS RD, SE'LY ALONG R/W 634 FT MOL TO S SEC LINE, W ALONG SEC

LINE 309.31 FT TO POB, EX 1.40 AC DESC IN ORB 1060-1358. 1060-1358, 891-2238, WD 969-1740,

WD ...more>>>

Area 3.69 AC S/T/R 36-2S-15E

Use Code\*\* SINGLE FAMILY (0100)

Tax District 3

#### 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

#### Sheffield

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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
	License #:	EC 13002957	Phone #: 386-972-1700
		Qualifier Form A	Attached X
MECHANICAL/	Print Name	Timothy Shatto	Signature 200 9224
A/C	License #:	CAC 057875	Phone #: 386-496-8224
		Qualifier Form A	Attached X

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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



### COLUMBIA COUNTY BUILDING DEPARTMENT

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

LICENSED QUALIFIE	ER AUTHORIZATION
1. Chand Whitington	(license holder name), licensed qualifier
for Whittington ELREKK ?	(company name), do certify that
the below referenced person(s) listed on this form holder, or is/are employed by me directly or through officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DARSUR	1
2. Kecky Ford	2. Souls 1) }
3.	3.
4.	4.
5.	5.
I, the license holder, realize that I am responsible under my license and fully responsible for compl Local Ordinances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all prevunauthorized persons to use your name and/or I	iance with all Florida Statutes, Codes, and and County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits.  is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow
Licensed Qualifiers Signature (Notarized)	EC 1300 2957 3/7/16 License Number Date
NOTARY INFORMATION:	Colombia
The above license holder, whose name is	me or has produced identification this day of, 20
HILL ROSHOP NOTARY'S SIGNATURE	Seal/Stance) Y R BISHOP  Notary Public - State of Florida  Commission # FF 243986  My Comm. Expires Jun 24, 2019



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

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

#### LICENSED QUALIFIER AUTHORIZATION

, Timothy Shatto	(license holder name), licensed qualifier
for Shatto Heat & Air	(company name), do certify that
person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	rm is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said
Printed Name of Person Authorized	Signature of Authorized Person
1. Bo Royals	1. 80 FM
2. Dale Burd	2.
3.	3.
4.	4.
5.	5.
under my license and fully responsible for complete Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted life at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous unauthorized persons to use your name and/or life.	nd County Licensing Boards have the power and one committed by him/her, his/her agents, his/his/for compliance with all statutes, codes by issuance of such permits.  is/are no longer agents, employee(s), or and of the changes and submit a new letter of our lists. Failure to do so may allow.
Licensed Qualifiers Signature (Notarized)	CAC 057875 2/22/18 License Number Date
NOTARY INFORMATION: STATE OF: FOLIAG COUNTY OF:	Union
personally appeared before me and is known by (type of I.D.)on t	me or has produced identification his 22 day of February, 2018.
NOTARY'S SIGNATURE	(Seal/Stamp) VICTORIA K. PA

VICTORIA K. PALMER
Notary Public - State of Florida
Commission # FF 207489
My Comm. Expires Mar 9, 2019
Bonded through National Not My Asso

	narriage wall piers within 2' of end of home per Rule 15C		Typical pier spacing  lateral  Show locations of Longitudinal and Lateral Systems  (use dark lines to show these locations)	Installer Robert Sheppard License # IH 1025386 Installer Mobile Phone # 386-623-2203  Address of home being installed  Manufacturer Thome 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  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
within 2' of end of home spaced at 5' 4" oc Longitudinal Stabilizing Device (LSD)  Manufacturer  Longitudinal Stabilizing Device w/ Lateral Arms  Marnage wall  Shearwall	C 222322	8' 8' 8'   8'   1   1   1   1   1   1   1   1   1	q in)	New Home    Used Home

# PERMIT NUMBER

#### Date Tested Installer Name The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing. Note: A state approved lateral arm system is being used and 4 ft. showing 275 inch pounds or less will require 5 foot anchors. here if you are declaring 5' anchors without testing The results of the torque probe test is ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft requires anchors with 4000 lb holding capacity. reading is 275 or less and where the mobile home manufacturer may × 1000 2. Take the reading at the depth of the footer. 3. Using 500 lb. increments, take the lowest 1. Test the perimeter of the home at 6 locations POCKET PENETROMETER TESTING METHOD reading and round down to that increment POCKET PENETROMETER TEST TORQUE PROBE TEST × 1000 × 1000 Installer's initials inch pounds or check pst

source.	Connect	
source. This includes the bonding wire between mult-wide units. Pg.	Connect electrical conductors between multi-wide units, but not to the main power	Electrical
		1

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. 200

irting. Y
Skirting to be installed. Yes No N/A
Miscellaneous
The bottomboard will be repaired and/or taped. Yes Pg. Pg. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes
Weatherproofing
Type gasket Faxw Installed:  Between Floors Yes  Between Walls Yes  Bottom of ridgebeam Yes
Installer's initials (2.5)
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.
Gasket (weatherproofing requirement)
Floor. Type Fastener: 1445 Walls: Type Fastener: 1445 Roof: Type Fastener: 1445 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.
Fastening multi wide units
Debris and organic material removed  Water drainage: Natural Swale Pad 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 & Best Aberrand Date 5/1/2

D-3663A

5202019 21701 PM

#### STATE OF FLORIDA

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION

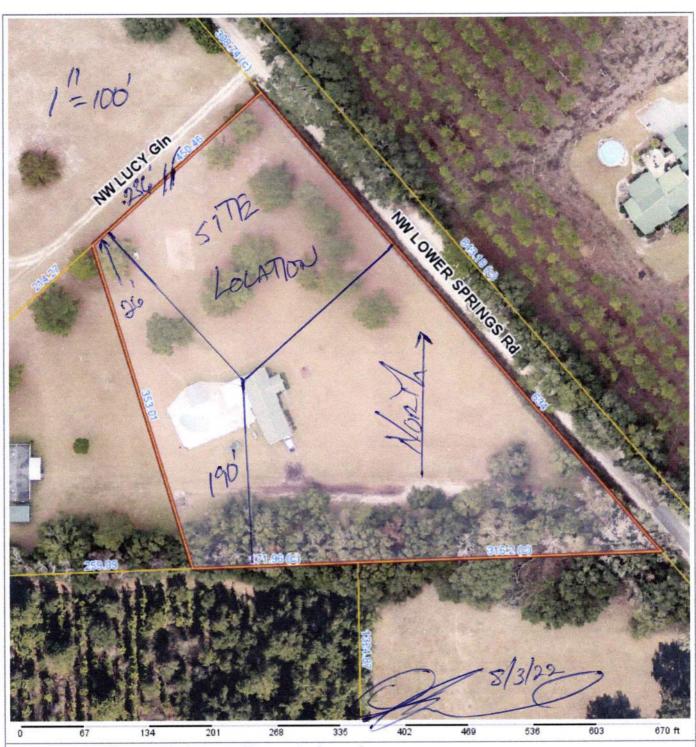
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number\_\_\_\_\_

Sheffield	PART II - SITEPLAN		1
Scale: Each block represents		LUCY GIEN 210	-
Notes:	13 Jane 18  31 1958  31 1958  248  258  31 1958	Month 75°	Lower Spanes Renad
Site Plan submitted by:		Contractor	
Plan Approved	Not Approved	Date	
Ву		County Health [	Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Columbia County, FL



#### Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

NOTES:

PARCEL: 36-2S-15-00118-001 (301) | SINGLE FAMILY (0100) | 3.69 AC

BEG SE COR OF SW1/4 OF SW1/4, RUN W 437.94 FT, N 203.10 FT, NE 48 DEG 450.47 FT TO SW R.W.LOWER

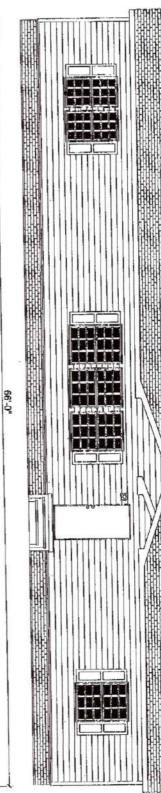
SPRINGS RD, SELY ALONG R.W 634 FT MOL TO S SEC LINE,

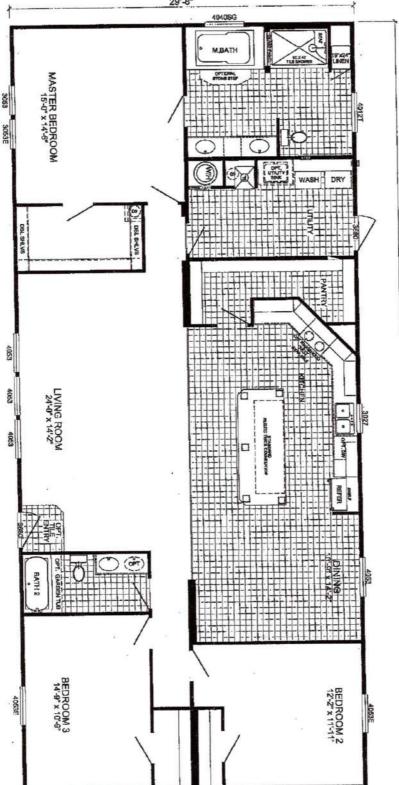
	SHEFFIELD	MICHAEL	LEE		2022 Wo	king Values	
Owner	SHEFFIELD		\$	Mkt Lnd	\$26,568	Appraised	\$119,024
	1214 S KYLE I ST JOHNS, FL			Ag Lnd	\$0	Assessed	\$73,206
Site:	134 NW LUCY		CITY	Bldg	\$58,294	Exempt	\$49,956
	6/21/2022	\$291,000		XFOB	\$34,162		county:\$22,928
Sales Info	12/11/2002 11/12/1999	\$17,000 \$15,000	A Company of the Comp	Just	\$119,024	Total Taxable	city:\$0 other:\$0 school:\$43,206

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

GrizziyLogic.com

1 of 1





# D-3663A

3-BEDROOM / 2-BATH 32 X 70 - Approx. 1958 Sq. Ft.

Date: 04/30/19

All room square footage figures are approximate.
 Transom windows are available on optional 9°-0° sidewall houses only.
 Live Colk Homes reserves the right to modify product offering at any time.
 Skirting shown is optional.



#### 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:

6/22/2020 2:31:29 PM

Address:

134 NW LUCY GLN

City:

LAKE CITY

State:

FL

Zip Code

32055

Parcel ID

36-2S-15-00118-001

REMARKS:

This address is a verified address in the county's addressing system.

Verification ID: df3cef3e-d3ab-4ab0-9ed4-96dd6cc89fe6

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:

**GIS Specialist** 

Columbia County GIS/911 Addressing Coordinator

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