

04/30/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021818

APPLICANT RODNEY DOUGLAS PHONE 386-984-0502
ADDRESS 510 SW BRODERICK LAKE CITY FL 32055
OWNER AMANDA & ANDREW STALVEY PHONE 623-1690
ADDRESS 157 NW BLUE DRIVE WHITE SPRINGS FL 32096
CONTRACTOR RONNIE NORRIS PHONE 961-6419
LOCATION OF PROPERTY 41 N, L SUWANNEE VALLEY RD, R BLUE DR., 2ND LOT ON R

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION .00
HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING ESA-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. FLOOD ZONE AE DEVELOPMENT PERMIT NO. 04-034

PARCEL ID 19-2S-16-01655-206 SUBDIVISION JOT ESTATES
LOT 6 BLOCK PHASE UNIT TOTAL ACRES 2.55

IH0000049
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor Rodney Douglas
EXISTING 04-0447-E BK RK N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOD ELEVATION IS 88' FLOOR MUST BE SET AT 89'
1 FOOT RISE LETTER RECIEVED

REPLACEMENT MH Check # or Cash 1066

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
 date/app. by date/app. by date/app. by
Under slab rough-in plumbing Slab Sheathing/Nailing
 date/app. by date/app. by date/app. by
Framing Rough-in plumbing above slab and below wood floor
 date/app. by date/app. by
Electrical rough-in Heat & Air Duct Peri. beam (Lintel)
 date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
 date/app. by date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing Pool
 date/app. by date/app. by
Reconnection Pump pole Utility Pole
 date/app. by date/app. by date/app. by
M/H Pole Travel Trailer Re-roof
 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ 50.00 CULVERT FEE \$ TOTAL FEE 300.00

INSPECTORS OFFICE L.H. Nelson CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Columbia County Building Department
Flood Development Permit

Development Permit
F 023- 04-034

DATE 04/30/2004 BUILDING PERMIT NUMBER 000021818
APPLICANT RODNEY DOUGLAS PHONE 386-984-0502
ADDRESS 510 SW BRODERICK LAKE CITY FL 32055
OWNER AMANDA & ANDREW STALVEY PHONE 623-1690
ADDRESS 157 NW BLUE DRIVE WHITE SPRINGS FL 32096
CONTRACTOR RONNIE NORRIS PHONE 961-6419
ADDRESS _____ FL _____
SUBDIVISION JOT ESTATES Lot 6 Block _____ Unit _____ Phase _____
TYPE OF DEVELOPMENT MH, UTILITY PARCEL ID NO. 19-2S-16-01655-206

FLOOD ZONE AE BY BK 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 105 B
FIRM 100 YEAR ELEVATION 88' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 89'
IN THE REGULATORY FLOODWAY YES or NO RIVER N/A
SURVEYOR / ENGINEER NAME Dale Johns LICENSE NUMBER 45263

☒ ONE FOOT RISE CERTIFICATION INCLUDED

☒ N/A ZERO RISE CERTIFICATION INCLUDED

SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

INSPECTED DATE _____ BY _____

COMMENTS _____

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



PERMIT EXPIRES ONE YEAR FROM THE DATE OF ISSUANCE

ONE FOOT RISE CERTIFICATION

PROPERTY DESCRIPTION: LOT 6 Joy Estates

OWNER: Stalvey

BASE FLOOD ELEVATION: 88.0

PROJECT: Min. Finished Floor 89.0
Up to 30 X 64 mobile home located on piers in accordance with
current building code.

I hereby certify that construction of the proposed will cause less than one foot increase in flood
elevations of the Suwannee River floodplain.



Dale C. Johns, P.E.

Date: Apr 30, 2004

BASE FLOOD ELEVATION =88.0

BASIN AREA AT 87' BASE FLOOD >2000 ACRES

PROPOSED BUILDING TYPE = MANUFACTURED HOME

PROPOSED BUILDING ENCROACHMENT =
80 PIERS AT 12"X16"EA= 107 SQ. FT.

GROUND ELEVATION AT BUILDING = 85.0' AVE.

This project is in the staging area of the river and no step backwater calculations are necessary. This area would "back up" from the River without experiencing any horizontal movement of water. The calculations are based on the on the removal of floodplain volume due to construction of the foundation system.

PERCENT FLOODPLAIN AREA REMOVED = $\frac{107/43560}{2000} = 0.00012\%$

FLOODPLAIN LEVEL INCREASE= $\frac{107 \times 3.0}{2000 \times 43560} = 0.0000036 \text{ FT.}$

04/30/2004

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Framing Rough-in plumbing above slab and below wood floor
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Electrical rough-in Heat & Air Duct Peri. beam (Lintel)
 date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
 date/app. by date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing Pool
 date/app. by date/app. by
Reconnection Pump pole Utility Pole
 date/app. by date/app. by date/app. by
M/H Pole Travel Trailer Re-roof
 date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
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left message 2/22/04

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only		Zoning Official <u>BLK 20.04.04</u>		Building Official <u>RK 4-22-04</u>	
AP# <u>0404-59</u>	Date Received <u>4-15-04</u>	By <u>G</u>	Permit # <u>21818</u>		
Flood Zone <u>AE</u>	Development Permit <u>YES</u>	Zoning <u>ESA-2</u>	Land Use Plan Map Category <u>ESA</u>		
Comments <u>Flood elevation is 88' 1st Floor to be at 89'</u>					
<u>F023-04-034</u>					
<input checked="" type="checkbox"/> Site Plan with Setbacks shown <input checked="" type="checkbox"/> Environmental Health Signed Site Plan <input type="checkbox"/> Env. Health Release <input checked="" type="checkbox"/> Need a Culvert Permit <input checked="" type="checkbox"/> Need a Waiver Permit <input checked="" type="checkbox"/> Well letter provided <input checked="" type="checkbox"/> Existing Well					

- ID 01655-206
- Property ID See 19 Trp 2 South Pgs 16 Must have a copy of the property deed
 - New Mobile Home New Used Mobile Home _____ Year 04
 - Subdivision Information Joy Estates Lot 6
 - Applicant ~~Phyllis~~ & Chuck Douglass Phone # 386-984-0502
 - Address 510 SW Broderick Lake City 32055
 - Name of Property Owner Amanda & Andrew Stalvey Phone# 386-623-1690
 - 911 Address 157 NW Blue Dr White Springs, FL 32096
 - Name of Owner of Mobile Home Same Phone # _____
 - Address _____
 - Relationship to Property Owner _____
 - Current Number of Dwellings on Property 1
 - Lot Size 333 X 332 Total Acreage 2.55
 - Explain the current driveway Existing - Replacement House
 - Driving Directions 41 N. To Sawannre Valley Rd Turn (L) go past sub station To Blue Dr. turn (R) second lot on (R)
 - Is this Mobile Home Replacing an Existing Mobile Home Yes
 - Name of Licensed Dealer/Installer Ronnie Norris Phone # 961-6419
 - Installers Address Rt 11 Box 507 Lake City FL 32055
 - License Number IH-0000049 Installation Decal # 216378

PERMIT NUMBER

Installer Fernand Amel License # T H000044

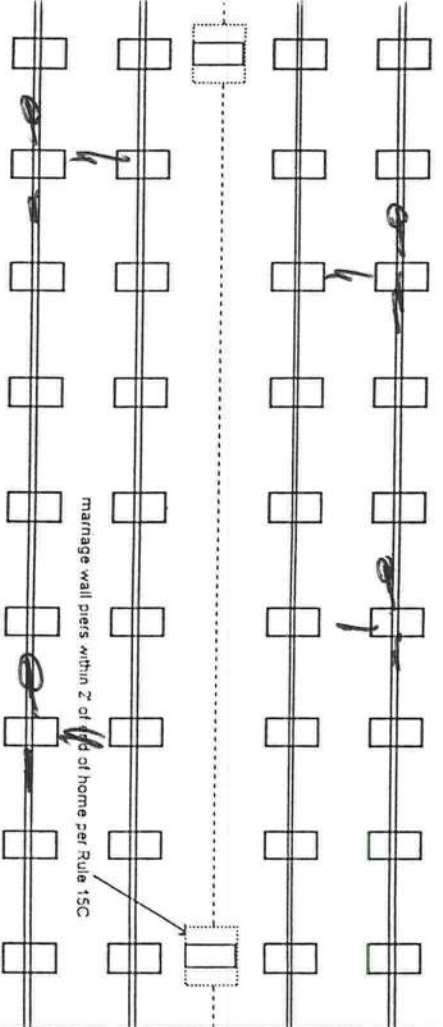
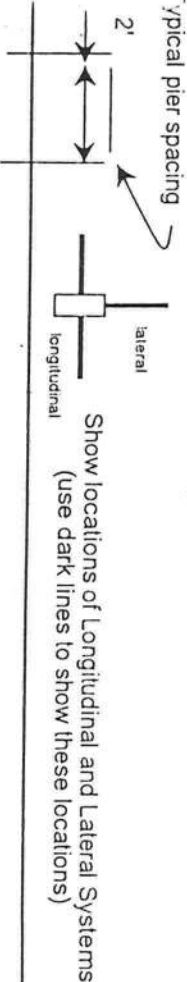
Address of home being installed 4111 Beck St
Lake City PA

Manufacturer Feetway Length x width 32 X 52

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

Understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials AD



Grid area for sketching the remainder of the home for triple or quad wide installations.

New Home ☒ Used Home ☐
Home installed to the Manufacturer's Installation Manual ☒
Home is installed in accordance with Rule 15-C ☐
Single wide ☐ Wind Zone II ☒ Wind Zone III ☐
Double wide ☒ Installation Decal # 216378
Triple/Quad ☐ Serial # 69741

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 psf	3'		4'	5'	6'	7'	8'
1500 psf	4'6"		6'	7'	8'	8'	8'
2000 psf	6'		8'	8'	8'	8'	8'
2500 psf	7'6"		8'	8'	8'	8'	8'
3000 psf	8'		8'	8'	8'	8'	8'
3500 psf	8'		8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17X22
Perimeter pier pad size 20x2
Other pier pad sizes (required by the mfg.) active

POPULAR PAD SIZES

Pad Size	Sq in
16 x 16	256
16 x 18	288
18 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening Pier pad size

16 20x2

15 20x2

4 16X16

FRAME TIES

within 2' of end of home spaced at 5'4" oc 54

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)
Manufacturer AD

Sidewall Longitudinal AD
Number 6

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf
or check here to declare 1000 lb. soil _____ without testing.

X 200

X 200

X 200

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 200

X 200

X 200

TORQUE PROBE TEST

The results of the torque probe test is _____ inch pounds or check here if you are declaring 5' anchors without testing 4. A test showing 275 inch pounds or less will require 4 foot anchors.

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

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Donna Davis

Date Tested

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

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: LP Length: 6 Spacing: 24
Walls: Type Fastener: LP Length: 6 Spacing: 16
Roof: Type Fastener: 5+9 Length: 1 Spacing: 16
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.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew 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

JD

Installed:

Type gasket ✓
Pg. _____
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 _____
Electrical crossovers protected. Yes _____
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

Donna Davis

Date

11/15/2014

Consents for Permit Application

I Andrew Stalvey, authorize **Rodney or Chuck Douglass** to act on my behalf while applying for the permits required to move a Mobile Home on the property described below. I further grant permission to **Ronnie Norris** Mobile Home Installer license # **IH 0000049** to place the described Mobile Home on the property located in Columbia County, Florida.

Property Owner Amanda Stalvey

Sec. 19 Twp. 2S Rge. 16 Tax Parcel # 01655-206

Lot: _____ Block _____ Subdivision Joy Estates

Model Carriage Manor Year 04 Manufacturer Fleetwood

GAFL475A1B 75588-CD21

Length 52 Width 32 Sn# _____ Model # _____

I understand that this could result in an assessment for solid waste, and fire protection services levied on this property.

Dated this 15th day of April, 20 04

Witness _____

Owner 


Witness _____

Owner _____

Sworn to and described before me this 15th day of April, 20 04

by Amanda Stalvey
Property Owners Name

Amanda B. Stratton
Notary's name printed or typed

 Amanda B Stratton
My Commission DD042089
Expires July 15, 2006

Mobile Home Installer Affidavit

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I, Ronnie Norris, license number IH # 0000049 do hereby state that the installation of the manufactured home for Amanda & Andrew Stalvey (applicant)

at 157 N.W. Blue Dr. White Springs, FL 32096 will be done under my (911 Address)

supervision.

Ronnie Norris

(Signature of Installer)

Sworn to and subscribed before me this 15th day of April, 2004.

Notary Public:

Amanda B. Stratton

(Signature)

My Commission Expires:

July 15, 2006



Amanda B Stratton
My Commission DD042089
Expires July 15, 2006

LIMITED POWER OF ATTORNEY

I, Ronnie Norris, license # IH0000049 hereby authorize

Rodney or Chuck Douglass to be my representative and

act on my behalf in all aspects of applying for a mobile

home permit to be placed on the following described

property located in Hamilton County, Florida.

Property owner: Amanda Stalvey

911 Address : 157 N.W. Blue Dr. White Springs 32096

Parcel ID #: 01655-206

Sect: 19 Twp: 25 Rge: 16

[Signature]

Mobile Home Installer Signature

4/2/04

Date

Sworn to and subscribed before me this 15th day of April,
2004.

Amanda B Stratton

Notary Public



Amanda B Stratton
Commission DD042089
Expires July 15, 2005

My Commission expires: July 15, 2005

Commission Number: DD042089

Personally known: X

Produced ID (type): _____



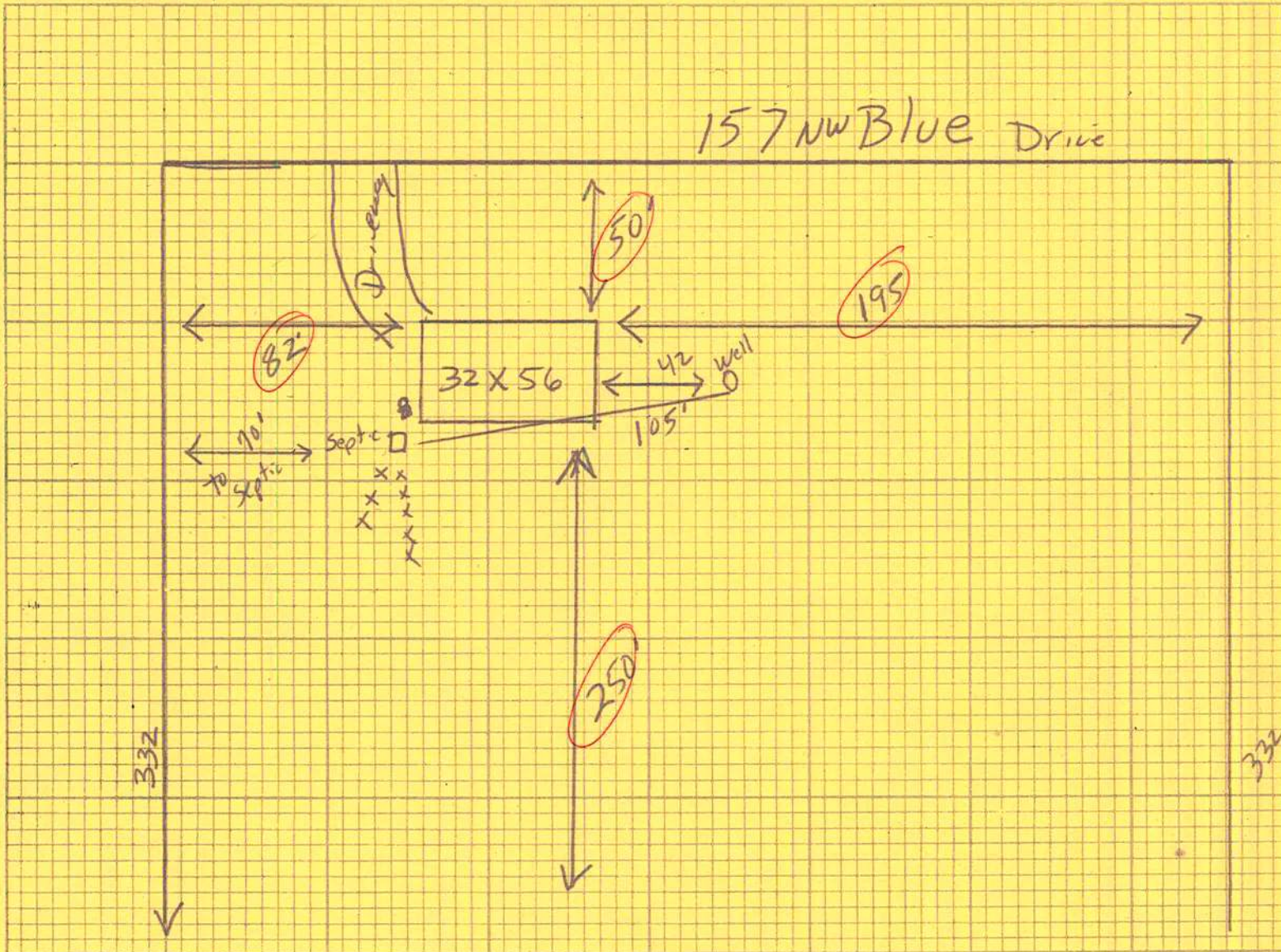
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: TAX ID 19-25-16-01655-206

Septic to house 8' Septic to nearest Lot Line 70'
Well to house 42' Well to Septic 105' to Lot Line 70'
2.55 Acres

Site Plan submitted by: Rodney Douglas Signature Agent Title

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

0404-57



APPROXIMATE SCALE IN FEET



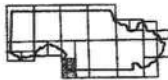
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 105 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0105 B
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nifm/fis.

Print Date: 4/20/2004 (printed at scale and type A)





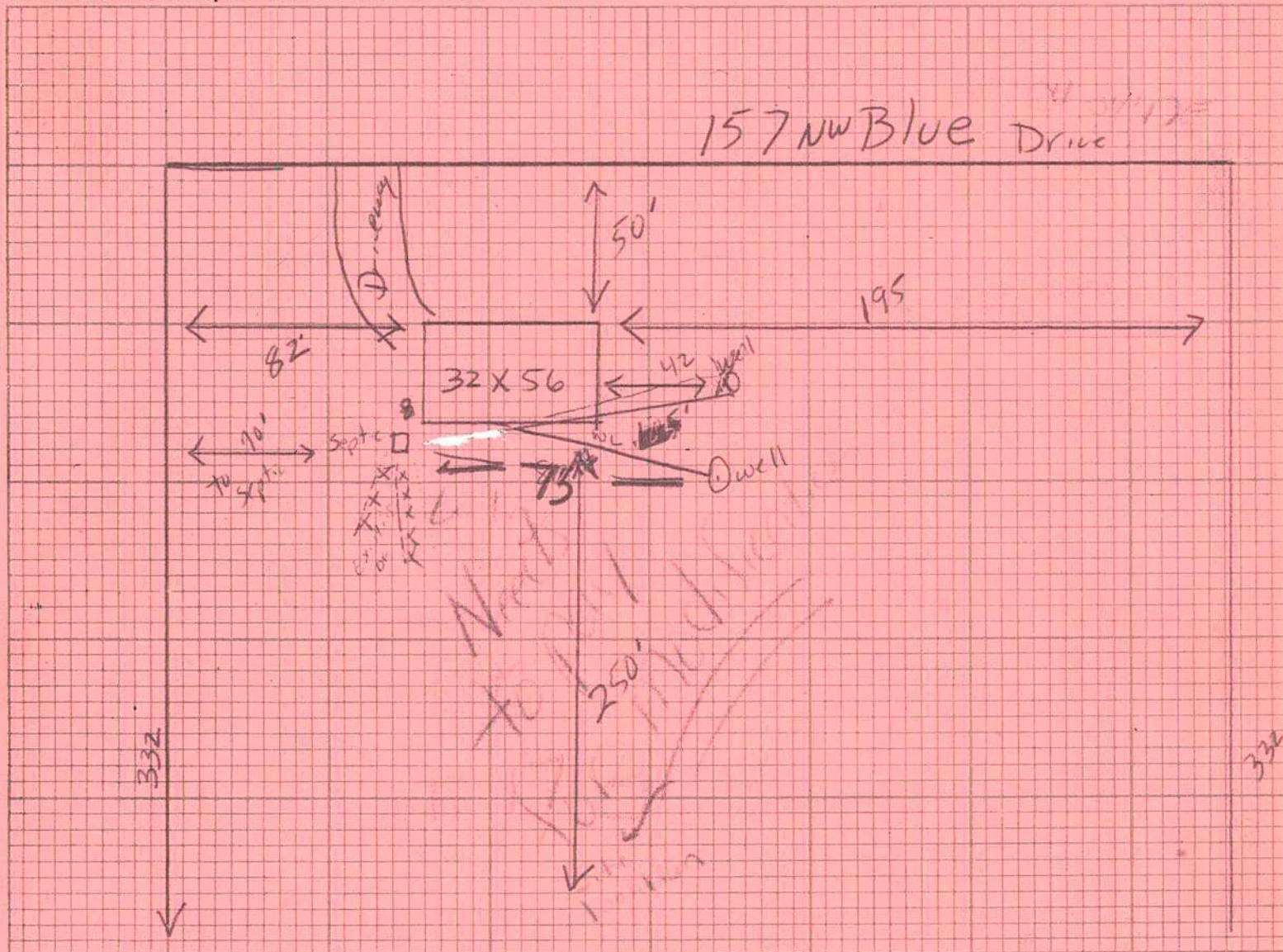
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-0447E

PART II - SITE PLAN

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Septic to house 8' Septic to nearest Lot Line 70'
Well to house 42' Well to Septic 105' to Lot Line 70'
2.55 Acres

Site Plan submitted by: Rodney Douglas Signature

Agent Title

Plan Approved ✓ Not Approved

Date 4-16-04

By L. K. H. Smith Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

154-0140
GALLERY
OF
STALVEY

PAID
\$324.47
GF

M/H OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 19-2S-16-01655-206

Building permit No. 000021818

Permit Holder RONNIE NORRIS

Owner of Building AMANDA & ANDREW STALVEY

Location: JOY ESTATES, LOT 6 (157 NW BLUE DRIVE)

Date: 05/26/2004



[Signature]

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)