Veels / rise ICATION / MANUFACTURED HOME INSTALLATION APPLICATION

PERMIT APPLICATION / MIANUFACTURED HOME INSTALLATION APPLICATION
For Office Use Only (Revised 7-1-15) Zoning Official Building Official
AP# 1811-18 Date Received 11-6-18 By 14 Permit # 37632
Flood Zone AE Development Permit 18-013 Zoning ESAS Land Use Plan Map Category ESA
Comments Colacing existing mh, Need elevation Pertitiate including HC
devotion before foral/former
FEMA Map# 101865 Elevation BFE 87' Finished Floor 80 River Successful In Floodway NO
□ Recorded Deed or Property Appraiser PO Site Plan □ EH # 18-0993 □ Well 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 And □ Out County □ In County ✓ Sub VF Form
Unct
Property ID # 20 - 2S - 14 - DILST-010Subdivision Davis Lot# 11)
New Mobile Home Used Mobile Home MH Size X Le 8 Year 2019
- Applicant Sonya Crews / Linda Craft Phone # 843-517-5701
- Address 3311 Sw State Road 247 Lake City, FT 32024
Name of Property Owner John / Kathy Adams Phone# 772 - 201 - 7549
· 911 Address 1065 NW Everett Ter White Springs F1 32024
 Circle the correct power company - <u>FL Power & Light</u> - <u>Clay Electric</u>
(Circle One) - Suwannee Valley Electric - Duke Energy
Name of Owner of Mobile Home John / Kathy Adams Phone # 772 - 201-7549
Address 1045 NW Everth Ter White Springs F1 32024
Relationship to Property Owner
Current Number of Dwellings on Property
• Lot Size Total Acreage 13, 75
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)
Is this Mobile Home Replacing an Existing Mobile Home
• Driving Directions to the Property Huy 40 to 41 and two W go to NW
Sunannee Valley Rd and turn (1) go to NIW Garpond Ct
turn () and go around the Sharp turn to the () and Garpon
Do the Cand the land will be in the gove pass Nu Belly Ct
Name of Licensed Dealer/Installer Norris Phone # 423-7714
Installers Address 1004 Sw Charles Fee Lake City F1 32024
License Number 141025745 Installation Decal # 55134
Emarted Songa 11-15-18 about l'Rise & 12-4-18 & 12-18-18 \$ 425.00

		itentiage wall piers within 2' of end of home per Rule 15C			Typical pier spacing lateral 2' Show locations of Longitudinal and Lateral Systems longitudinal (use dark lines to show these locations)	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 l understand Lateral Arm Systems cannot be used on any home (new or used)	White Spring	Nobile nome Permit Worksneet
Congitudinal Stabilizing Device w/ Lateral Arms Within 2' of end of home spaced at 5' 4" oc	Pier pad size 17 125	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.	Pad Size 16 x 16 16 x 18 18.5 x 18.5 16 x 22.5 17 x 22	8' 8' 8' 8' from Rule 15C-1 pier spacing table.	24" 26"	Triple/Quad ☐ Serial # JACR 00920 A& S PIER SPACING TABLE FOR USED HOMES	Home installed to the Manufacturer's Installation Manuer Home is installed in accordance with Rule 15-C Single wide	Application Number: Date: Date:

Mobile Home Permit Worksheet

- Test the perimeter of the home at 6 locations.
- Ņ Take the reading at the depth of the footer.
- Using 500 lb. increments, take the lowest reading and round down to that increment



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

/A test

Note: A state approved lateral arm system is being used and 4 ft. reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 holding capacity. anchors are required at all centerline tie points where the torque test anchors are allowed at the sidewall locations. I understand 5 ft

Installer's initials

ALL TESTS MUST BE PÉRFORMED BY A LICENSED INSTALLER

ž

Installer Name

Date Tested

Electrical

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

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 independent water supply systems. Pg.

Application Number:	
Date:	

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Debris and organic material removed Water drainage: Natural Swal Swale

Pad Other

Fastening multi wide units

Floor: Walls: Type Fastener: Type Fastener: レタ

Roof:

Length: 6 Length: 6

Spacing: 2

roofing nails at 2" on center on both sides of the centerline Type Fastener: Length: Spacing: 2 will be centered over the peak of the roof and fastened with galv

Gasket (weatherproofing requirement)

of tape will not serve as a gasket. a result of a poorly installed or no gasket being installed. homes and that condensation, mold, meldew and buckled marriage walls are understand a properly installed gasket is a requirement of all new and used I understand a strip

Installer's initials,

Type gasket/ Pg.

Bottom of ridgebeam Between Walls Yes Between Floors Yes Installed

Weatherproofing

Fireplace chimney installed so as not to allow intrusion of rain water. Siding on units is installed to manufacturer's specifications. Yes The bottomboard will be repaired and/or taped. Yes Yes

Miscellaneous

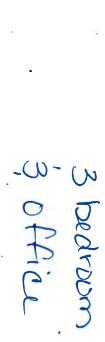
Other: Range downflow vent installed outside of skirting. Skirting to be installed. Yes Electrical crossovers protected. Yes Drain lines supported at 4 foot intervals. Yes Dryer vent installed outside of skirting. Yes S

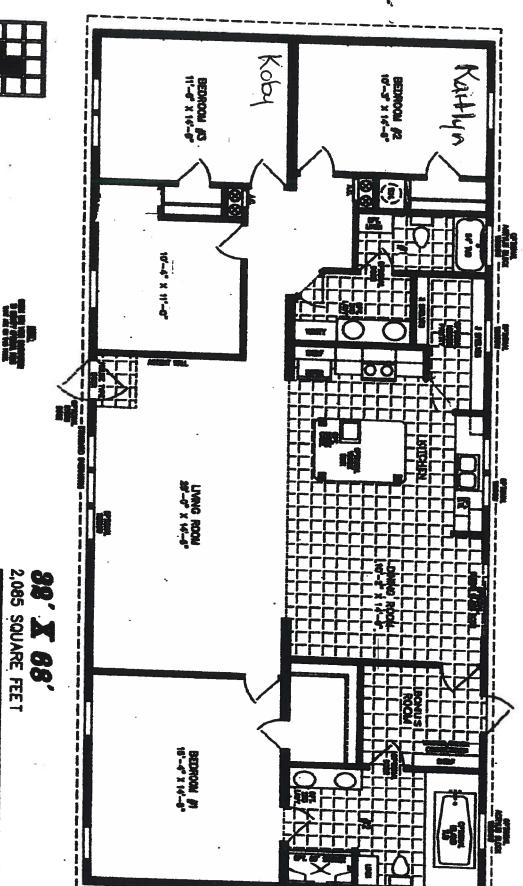
Installer verifies all information given with this permit worksheet manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

Installer Signature

Page 2 of 2

The Imperial





600 Padkard Court = Safety Harbor, Florida 34695 = Talephone (727) 726-1138 www.jachomes.com/Floor-Plans

(ALL SIZES ANT APPROX.)
DESIGNED FOR ZONES I & III

Model IMP-46820W-33074 Haams © 21-1-15

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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)

OLIVER TECHNOLOGIES, INC. FLORIDA INSTALLATION INSTRUCTIONS FOR THE MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM

MODEL 1101"V" (Steps 1-14)
LONGITUDINAL ONLY: Follow Steps 1-9
LATERAL ONLY: Follow Steps 1-3 and Steps 10-14
FOR CONCRETE APPLICATIONS: Follow Steps 15-18

ENGINEERS STAMP

ENGINEERS STAMP

1.50"

- 1. SPECIAL CIRCUMSTANCES: If the following conditions occur STOP! Contact Oliver Technologies at 1-800-284-7437:
 - a) Pier height exceeds 48"
- c) Roof eaves exceed 16"
- e) Location is within 1500 feet of coast

b) length of home exceeds 76'

PIER HEIGHT

d) Sidewall height exceed 96"

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C)

1.50"

3. Place ground pan (C) directly below chassis I-beam. Press or drive pan firmly into soil until flush or below soil then install pier per manufacturer's instructions or per Florida Regs.

SPECIAL NOTE: The longitudinal "V" brace system may also serve as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove jacks.

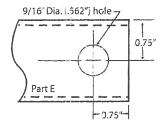
INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM (Model 1101 L "V")

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED, IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4". VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.).

4. Choose one of the approved longitudinal tube installations; either Diagram A or B. Then select the correct square tube (E) length from the diagram for appropriate pier height at support location or cut and drill 1.5" square tube to achieve appropriate length.

(40° Min 45° Max.)	Tube Length	Tube Length
7 3/4" to 25"	22"	18"
24 3/4" to 32 1 /4"	32"	18"
33" to 41"	44"	18"
40" to 48"	54"	18"

Diagram A



(40° Min 60° Max.)	Tube Length
14" to 18"	20"
18" to 25"	28"
24" to 35"	39"
30" to 40"	44"
36" to 48"	54"

PIER HEIGHT

Diagram B

- 5. Install (2) of the 1.50" square tubes (E) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
- 6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
- 7. (For Diagram A installation) Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut. (For Diagram B installation) Attach the selected 1.5" tubes (E) to the I-beam connectors (F) and fasten loosely with bolts and nuts.
- 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place.
- 9. Using standard hand tools tighten all nuts and bolts. (For Diagram A installation only, secure 1.25" and 1.50" tubes using four(4) 1/4"-14 x 3/4" self-tapping screws in pre-drilled holes.)

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM (Model 1101 T "V")

THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR STABILIZER PLATES & FRAMETIES.

NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

- 10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs.
- require a 5' anchor per Florida Code.

 11. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
- 12. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
- 13. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent I-beam connector (I) with bolt and nut.
- 14. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1 /4" 14 x 3/4" self-tapping screws in pre-drilled holes.

Page I

467 Swan Ave • Hohenwald, TN 38462 • (800) 284-7437 • www.olivertechnologies.com • Fax (931) 796-8811

INSTALLATION USING CONCRETE RUNNER/ FOOTER

- 15. A concrete runner, footer or slab may be used in place of the steel ground pan.
 - a) The concrete shall be minimum 2500 psi mix
 - b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
 - c) Footers must have minimum surface area of 441 sq. in. (I.e. 21" square), and must be a minimum of 8" deep.
 - d) If a full slab is used, the depth must be a 4" minimum. Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

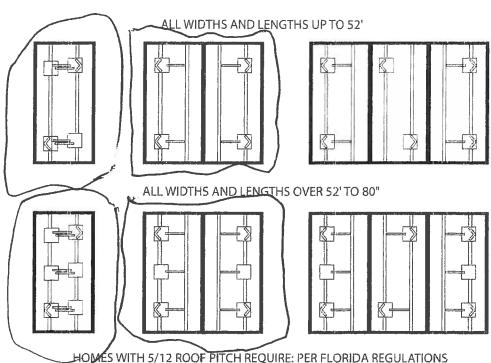
16. When using Part# 1101-W-CPCA (wetset) simply install the bracket in runner/footer **OR** When installing in cured concrete use Part# 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # S162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled holes, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

LATERAL: (Model 1101 TC "V")

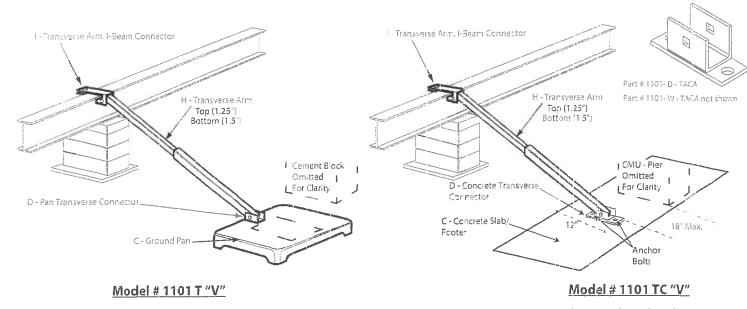
- 17. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit. drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #S162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
- 18. When using part# 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

Notes

- 1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- 2. [== LOCATION OF TRANSVERSE BRACING ONLY
- 3 🖺 = LOCATION OF LONGITUDINAL BRACING ONLY
- 4. F- = TRANSVERSE AND LONGITUDINAL LOCATIONS



6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'.



Florida approved 4' ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5' anchor. Per Florida code.

C = GROUND PAN / CONCRETE FOOTER OR RUNNER

D = GROUND PAN / CONCRETE U BRACKETS TRANSVERSE CONNECTOR (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)

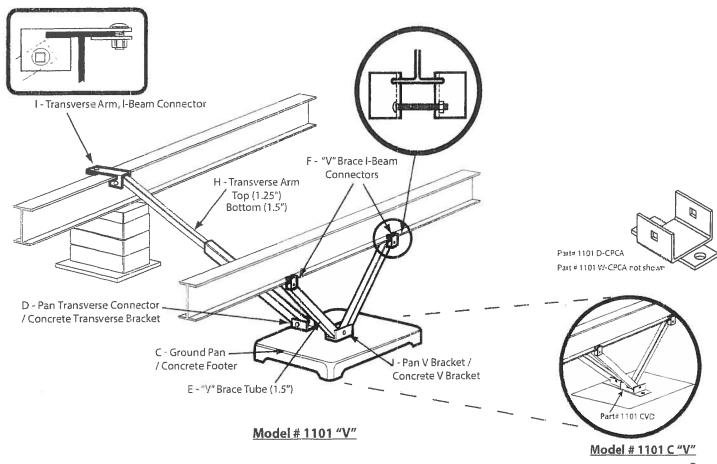
E = TELESCOPING V BRACE TUBE ASSEMBLY (1.5" TUBE BOTTOM AND 1.25" TUBE INSERT) OR 1.5" TUBE

F = "V" BRACE I-BEAM CONNECTOR ASSEMBLY

H = TELESCOPING TRANSVERSE ARM ASSEMBLY

I = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)

J = V PAN BRACKET (connects with grade 5 - 1/2" x 2" 1/2" carriage bolt and nut)





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

MOBILE HOM	E INSTALLERS LETTER OF AU	JTHORIZATION
I, John L. Dorge Holder No.	A	for the job address show below
only, 1045 NW EVE	Job Address White S	51 32024
and is/are authorized to purch	listed on this form is/are under m	y direct supervision and control
	se permits, call for inspections an	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Sonya Crews Linda Craft	Song Crews	Agent Officer Property Owner
Linda Craft	Lind Creft	Agent Officer Property Owner
	V	Agent Officer Property Owner
I understand that the State Licer holder for violations committed it	It.	thority to discipline a license diperson(s) through this diby issuance of such permits.
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF:	mber Date
The above license holder, whose personally appeared before me a (type of I.D.)	name in	ped identification f. 20 18.
NOTARY'S SIGNATURE	(S	SANDRA ELIZABETH TOPE Notary Public - State of Florida Commission # GG 063811 My Comm. Expires Jan 18, 2021 Bonded through National Notary Assn.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

		WOOLE HOME	MAINENIION SOBCE	WINACION VERIFICATION	JA FORM
APPLICATION NU	MBER	11-18	CONTRACTOR	Ronnie	NOTES PHONE 1023-771
		THIS FORM MUS	ST BE SUBMITTED PRIC	OR TO THE ISSUANCE OF	A PERMIT
records of the Ordinance 89-	subcontrac 6, a contrac	tors who actually of tor shall require a	did the trade speci Il subcontractors to	fic work under the p provide evidence o	te. It is <u>REQUIRED</u> that we have ermit. Per Florida Statute 440 and of workers' compensation or e in Columbia County.
Any changes, start of that si	the permitt ubcontracto	ed contractor is re or beginning any w	esponsible for the d vork. Violations wi	corrected form being ill result in stop word	g submitted to this office prior to the k orders and/or fines.
ELECTRICAL	Print Name	Glen Whi EC 1300	Hing Forn 2959 Qualifier Form Attac	Signature Signat	
MECHANICAL/	Print Nam	e		Signature	
A/C	License #:			Phone #:	9
			Qualifier Form Attac	The state of the s	
		ne submitted for	any Specialty Lice	ense.	
Specialty L	Cense	License Number	Sub-Contracto	ors Printed Name	Sub-Contractors Signature
MASON					
CONCRETE FIN	IISHER				

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

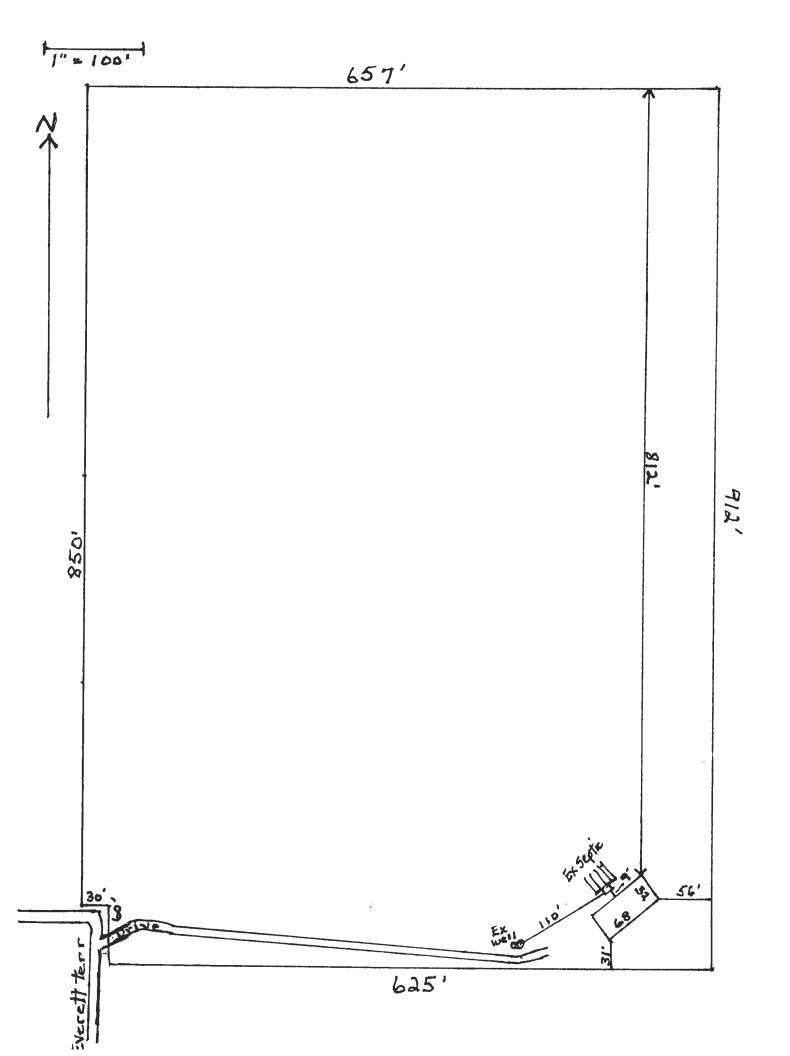
APPLICATION NUM	1811-19	CONTRACTOR	Ronnie	Norris	PHONE 423-7714
	THIS FORM	M MUST BE SUBMITTED PRI	OR TO THE ISSUANC	CE OF A PERMIT	
records of the solution ordinance 89-6 exemption, general and changes, to	unty one permit will covous who actuments who actuments of a contractor shall required liability insurance at the permitted contractor beginning of the contractor beginni	ually did the trade specuire all subcontractors to and a valid Certificate contractors to responsible for the	ific work under to provide evider of Competency lies corrected form	the permit. Per Fl nce of workers' co cense in Columbia being submitted	orida Statute 440 and ompensation or a County. to this office prior to the
ELECTRICAL	Print Name	Tir	Signature_		
	License #:		Phone #: _		
		Qualifier Form Atta	ched		
MECHANICAL/	Print Name MUNOS License #: (1AC 1817)	1 <i>f. Baland</i> 71 <i>4</i> Qualifier Form Atta	Phone #:	M114000 (352) 274	9.32/2

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			2.20.

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 Property Appraiser

Jeff Hampton

Parcel: << 20-2\$-16-01657-010 >>

2018 Tax Roll Year updated: 11/1/2018

Owner & Pi	operty Info	Res	ult: 2 of 5
Owner	ADAMS JOHN 12142 US HIGH SUITE C LAKE CITY, FL	HWAY 441	3
Site	1065 EVERETT	TER, WHITE	SPRINGS
Description*	LOT 10 DAVIS S S/D. 846-1812, C WD CT 1210-161 864, 1364-864,	T 1210-1615, \	ND 1216-1030
Area	13.75 AC	S/T/R	20-2S-16E
Use Code**	MOBILE HOM (000200)	Tax District	3

[&]quot;The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.
"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	Values

2018 Cert	ified Values	2019 Wor	king Values
Mkt Land (2)	\$32,674	Mkt Land (2)	\$32,674
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$21,199	Building (1)	\$20,100
XFOB (2)	\$1,400	XFOB (2)	\$1,400
Just	\$55,273	Just	\$54,174
Class	\$0	Class	\$0
Appraised	\$55,273	Appraised	\$54,174
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$55,273	Assessed	\$54,174
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$55,273 city:\$55,273 other:\$55,273		county:\$54,174 city:\$54,174 other:\$54,174
I axable	school:\$55,273	I avanie	school:\$54,174



Sales I	History
w Calan I	Jioto
- Sales I	HISTORY

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/9/2018	\$36,500	1364/0864	WD	1	Q	01
6/9/2011	\$29,900	1216/1030	WD	1	U	12
3/1/2011	\$100	1210/1615	CT	1	U	18
9/30/1997	\$25,000	846/1812	WD	V	Q	

\blacksquare	Building	Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1998	1440	1440	\$20,100

^{*}Bidg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

▼ Extra Features & Out Buildings (Codes)

District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips 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:

11/6/2018 10:39:01 AM

Address:

1065 NW EVERETT Ter

City:

WHITE SPRINGS

State:

FL

Zip Code

32096

Parcel ID

01657-010

REMARKS: Address Verification.

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

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125 Email: gis@columbiacountyfla.com



Incorporated 64E-6.001, FAC

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

PERMIT NO. DATE PAID: FEE PAID: RECEIPT #:	(8.0593
RECEIPT #:	13724.11

APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: JOHN KOTTY FRAMS AGENT: SONY (VELOS) LINGA (VAFF TELEPHONE: 772-201-75)
MAILING ADDRESS: 1065 NW EVEREH TO White Spring F1
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: 10 BLOCK: SUBDIVISION: Davis PLATTED:
PROPERTY ID #: $20 - 2S - 110 - 01057 - 0100$ ZONING: I/M OR EQUIVALENT: [Y/60]
PROPERTY SIZE: 3.75 ACRES WATER SUPPLY: [X PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER:FT
DIRECTIONS TO PROPERTY: SCI CHACKED
BUILDING INFORMATION [X RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 mobile Home 3 2,085
3
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: SCOLD CILLOS dinda Crapt DATE: 11-18
DH 4015, 08/09 (Obsoletes previous editions which may not be used)

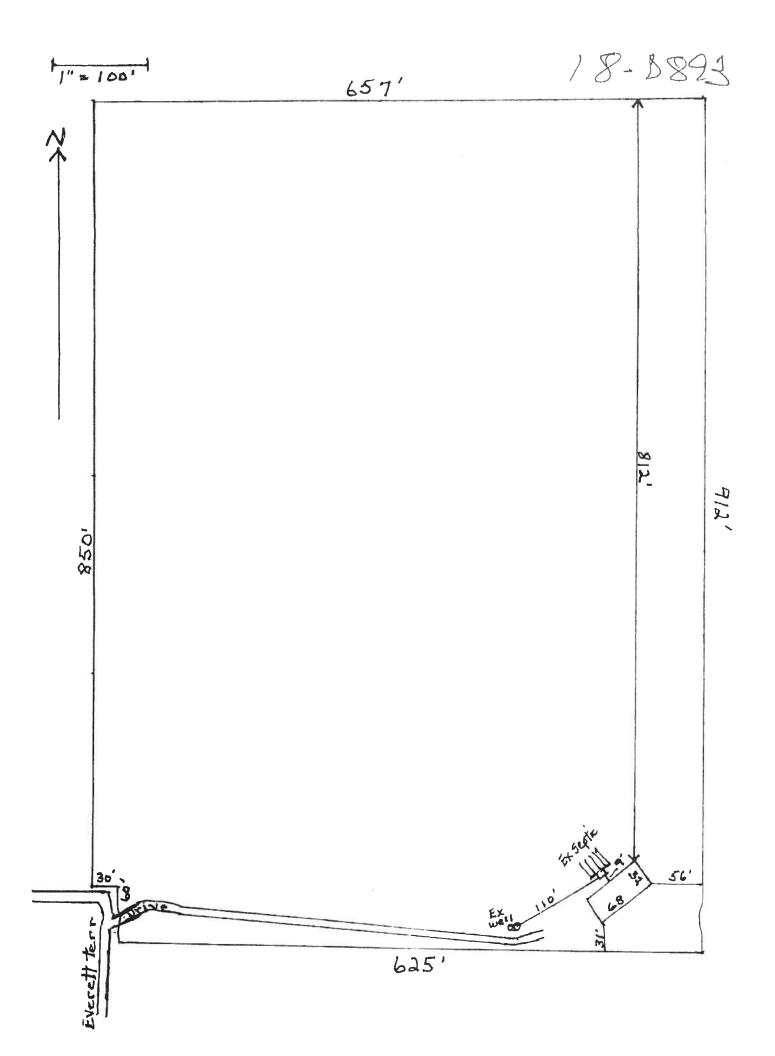
STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number / 8 - 3 9 9 3

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT





Adam Collins Engineering, Inc. c/o Adam Collins, P.E. 12558 Bass Road Live Oak, FL 32060 850-888-2326 C of A # 31728

1 FT RISE CERTIFICATION

Client/Owner:

John and Kathy Adams

Property Description:

13.75 acres in Columbia County, FL

Parcel # 20-2S-16-01657-010

Structures in SFHA Zone AE:

A 32 ft by 68 ft manufactured home with lowest

existing ground elevation adjacent to structure at 83 ft

Elevation of 100yr flood:

87 ft NAVD88

Community Panel:

12023C0186D

Width of flood plain:

~ 12,000 ft

Area of Proposed Obstruction:

 $68 \times (87 - 83) = 68 \times 4 = 272 \text{ sf}$

100 yr Flood level increase:

272 sf / 12000 ft = **0.023 ft**

I hereby certify that construction of the proposed structure listed above will increase the 100yr flood elevation less than 1 ft. Ground elevations and building dimensions were obtained from a survey supplied by the client. The 100 yr flood elevation and the floodplain width were obtained from the Suwannee River Water Management District Flood Report.

lo. 75584

STATE OF

Digitally signed by Adam Collins DN: c=US, st=Florida, l=Live Oak, o=Adam

Collins Engineering, Inc., cn=Adam Collins, email=adam@collinseng.com Date: 2019.01.15 12:00:19 -05'00'

Adobe Acrobat version: 2019.010.20069

Adam T. Collins, P.E. License No. 75584

Columbia County Building Department Flood Development Permit

Development Permit F 023- 18-013

DATE 01/15/2019 BUILDING PERMIT NUMBER 000037632
APPLICANT LINDA CRAFT PHONE 863-517-5701
ADDRESS 3311 SW STAE ROAD 247 LAKE CITY FL 32024
OWNER JOHN & KATHY ADAMS PHONE 772-201-7549
ADDRESS 1065 NW EVERETT TERR WHITE SPRINGS FL 32024
CONTRACTOR RONNIE NORRIS PHONE 623-7716
ADDRESS 1004 SW CHARLES TERR LAKE CITY FL 32024
SUBDIVISION DAVIS S/D Lot 10 Block Unit Phase
TYPE OF DEVELOPMENT MH, UTYILITY PARCEL ID NO. 20-2S-16-01657-010
FLOOD ZONE <u>AE</u> BY <u>LN</u> 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # <u>0 186 - D</u>
FIRM 100 YEAR ELEVATION 87' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 88'
IN THE REGULATORY FLOODWAY YES Or (NO) RIVER Suwannee
IN THE REGULATORT FLOODWATE TES OF NO.
SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584
SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584
SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584 ONE FOOT RISE CERTIFICATION INCLUDED
SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584 ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER
SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584 ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED
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SURVEYOR / ENGINEER NAME Adam Collins LICENSE NUMBER 75584 ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER (INCLUDING THE ONE FOOT RISE CERTIFICATION)
SURVEYOR / ENGINEER NAME Adam Collins License number 75584 ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER (INCLUDING THE ONE FOOT RISE CERTIFICATION) DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED

135 NE Hernando Ave., Suite B-21 Lake City, Florida 32055

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

