PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only Zoning Official JK Building Official JK

AP# 0605-32 Date Received 5/16/06 By JW Permit # 24500

Flood Zone X Development Permit N/A Zoning A3 Land Use Plan Map Category A3

Comments: ~~PRE-FAB IS NEEDED~~

NO Charge

FEMA Map #_____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☑ Site Plan with Setbacks shown ☑ Environmental Health Signed Site Plan ☑ Env. Health Release

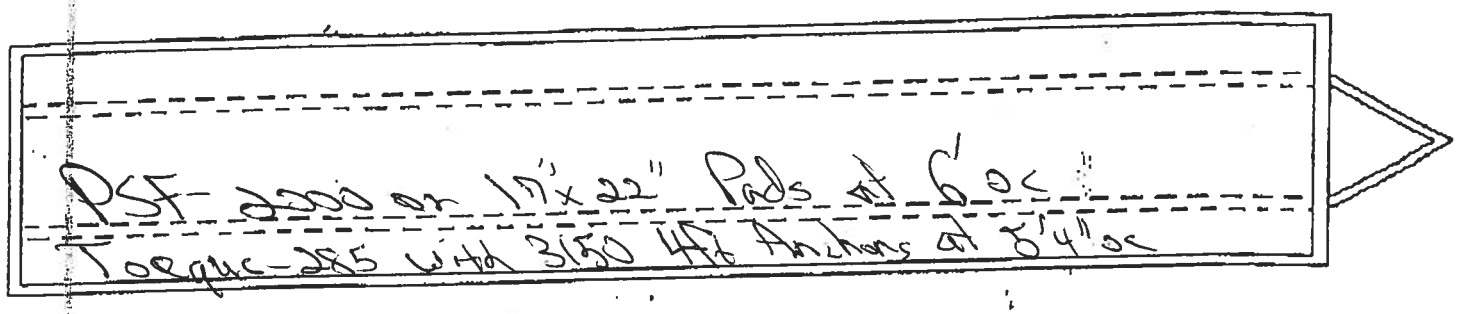
☑ Well letter provided ☑ Existing Well

Revised 9-23-04

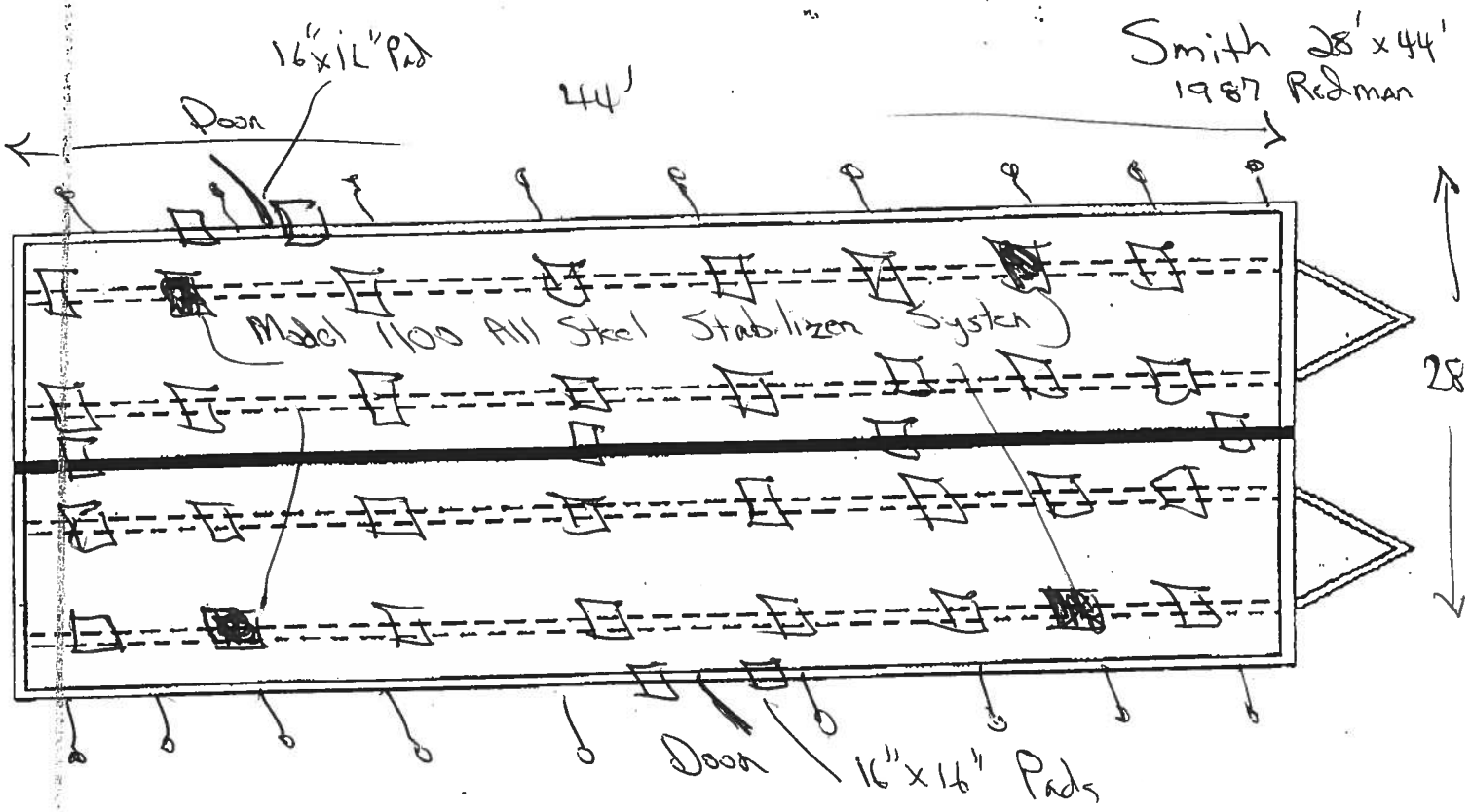
- Property ID 02 5S 16 03437 000 HX13 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home ✓ Year 1987
- Subdivision Information Replacing Mobile Home That Burned
- Applicant Rickey Smith Phone # 752-7109
- Address 982 SW Walter Ave Lc Fl 32024
- Name of Property Owner Gladys Smith Phone# 752-0475
- 911 Address 1018 SW Walter Ave Lc Fl 32024
- Circle the correct power company – (Circle One) FL Power & Light – **Clay Electric** – Suwannee Valley Electric – Progressive Energy
- Name of Owner of Mobile Home Amie Smith Phone # 752-7109
- Address 338 SW Tiny Glen
- Relationship to Property Owner Granddaughter
- Current Number of Dwellings on Property 0
- Lot Size 1 Acre Total Acreage 1.40
- Do you : Have an **Existing Drive** or need a **Culvert Permit** or a **Culvert Waiver Permit**
- Driving Directions Yes 47 South to Walter Ave (TL) Go 3/4 mile to Tiny Glen (TR) Private Rd.
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Name of Licensed Dealer/Installer Terry L. Thrift Phone # (386) 623-0115
- Installers Address 448 NW Nye Hunter DR. Lake City Fla. 32055
- License Number IH-0000036 Installation Decal # 265920

Applicant shall provide layout from manufacturer specific to the model installed. This form may be used if the layout from the manufacturer is not available.

SINGLE WIDE MOBILE HOME



DOUBLE WIDE MOBILE HOME



ANCHOR

PIER

Show each pier and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.

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, TERRY L. THRIFT, license number IH0000036
Please Print

do hereby state that the installation of the manufactured home for Ricky Smith
Applicant

at 338 SW TINY GLEN L.C., FL.
911 Address

will be done under my supervision.

Terry L. Thrift
Signature

Sworn to and subscribed before me this 2nd day of May, 2006.

Notary Public: Sharon Y. Blackmon
Signature

My Commission Expires:

SHARON Y. BLACKMON
MY COMMISSION # DD 196611
EXPIRES: May 31, 2007
Bonded Thru Notary Public Underwriters

PERMIT WORKSHEET

PERMIT NUMBER

Installer Jerry L. Thrift License # IH-0033036

Address of home being installed

Manufacturer Redman Length x width 44' x 28'

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) where the sidewall ties exceed 5 ft 4 in.

Installer's initials JLT

New Home ☐ Used Home ☑

Home installed to the Manufacturer's Installation Manual ☐

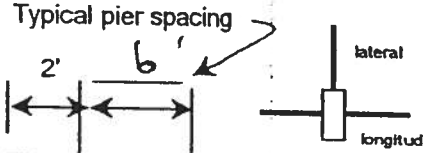
Home is installed in accordance with Rule 15-C ☑

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

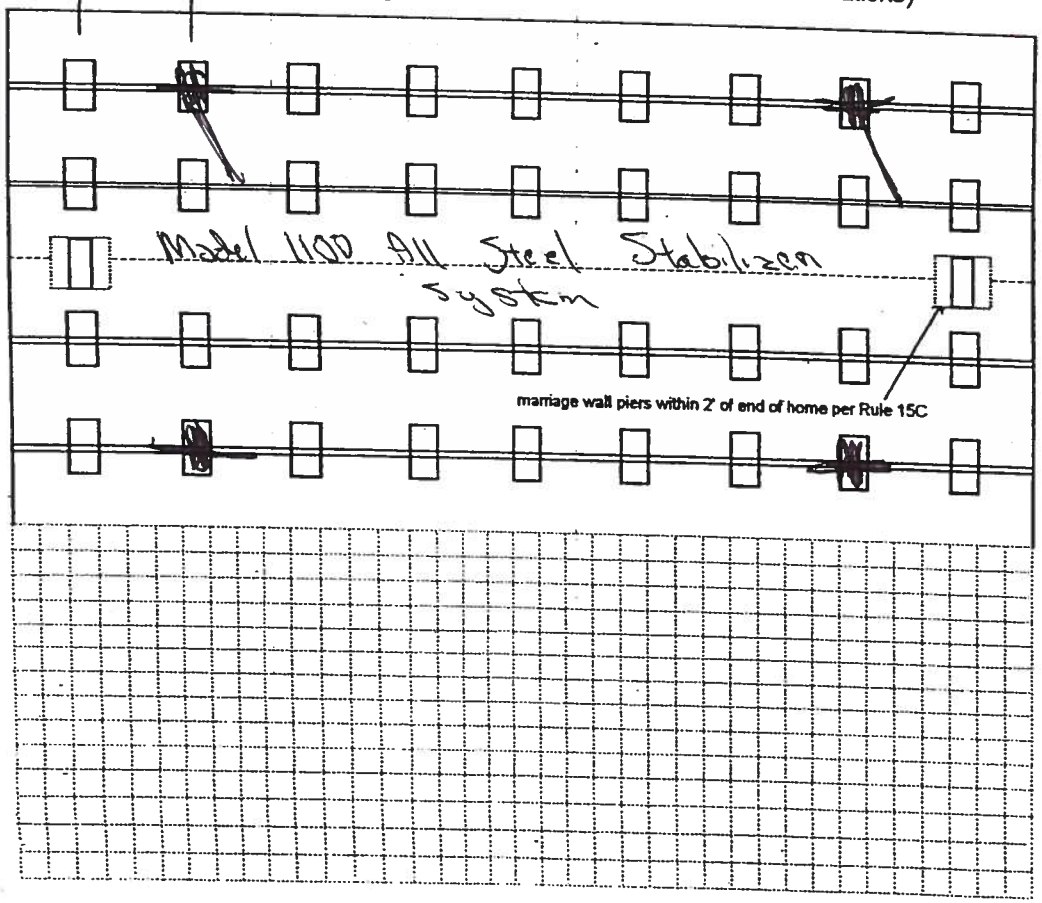
Double wide ☑ Installation Decal # 265920

Triple/Quad ☐ Serial # 146026 08A 146026 8AM3

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



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 17" x 22"

Perimeter pier pad size

Other pier pad sizes (required by the mfg.)

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
12'	17" x 22"

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 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

ANCHORS

4 ft ↘ 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver Tech

OTHER TIES

	Number
Sidewall	16
Longitudinal	
Marriage wall	2
Shearwall	0

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil _____ without testing.

X 2000 / 285 X 2000 / 285 X 2000 / 285

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 2000 / 285 X 2000 / 285 X 2000 / 285

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing _____. 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.

YLT Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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 independent water supply systems. Pg _____

Site Preparation

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

Fastening multi wide units

Floor:	Type Fastener: Lags	Length: 6"	Spacing: 24" oc
Walls:	Type Fastener: Straps	Length: 30"	Spacing: 32" oc
Roof:	Type Fastener: Lags	Length: 6"	Spacing: 24"

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, 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.

Installer's initials YLT

Type gasket Foam Tape
Pg. _____

Installed:
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 Tracy L. Thrift **Date** 5/2/06

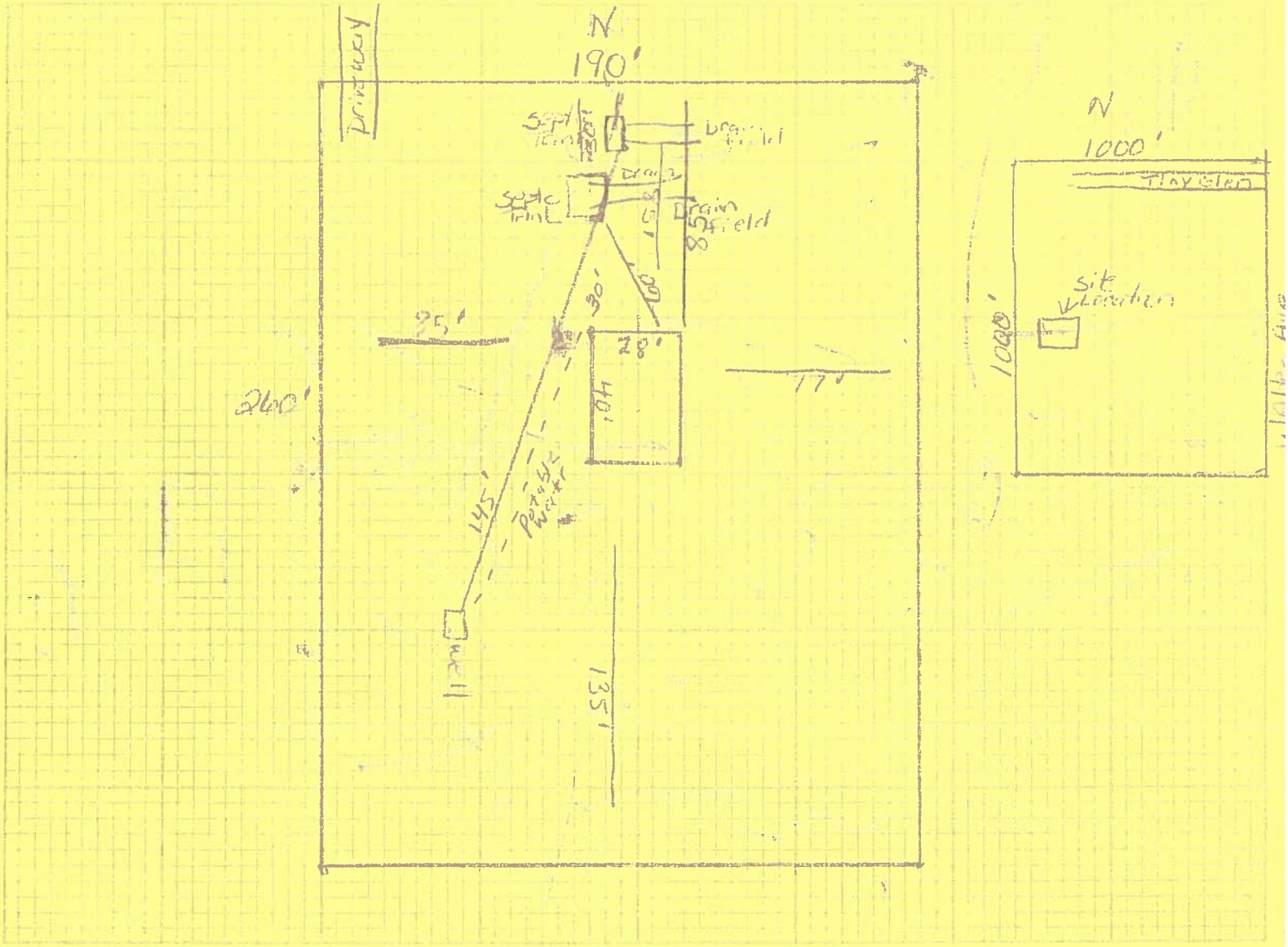
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-0462E

PART II - SITE PLAN

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



Notes: _____

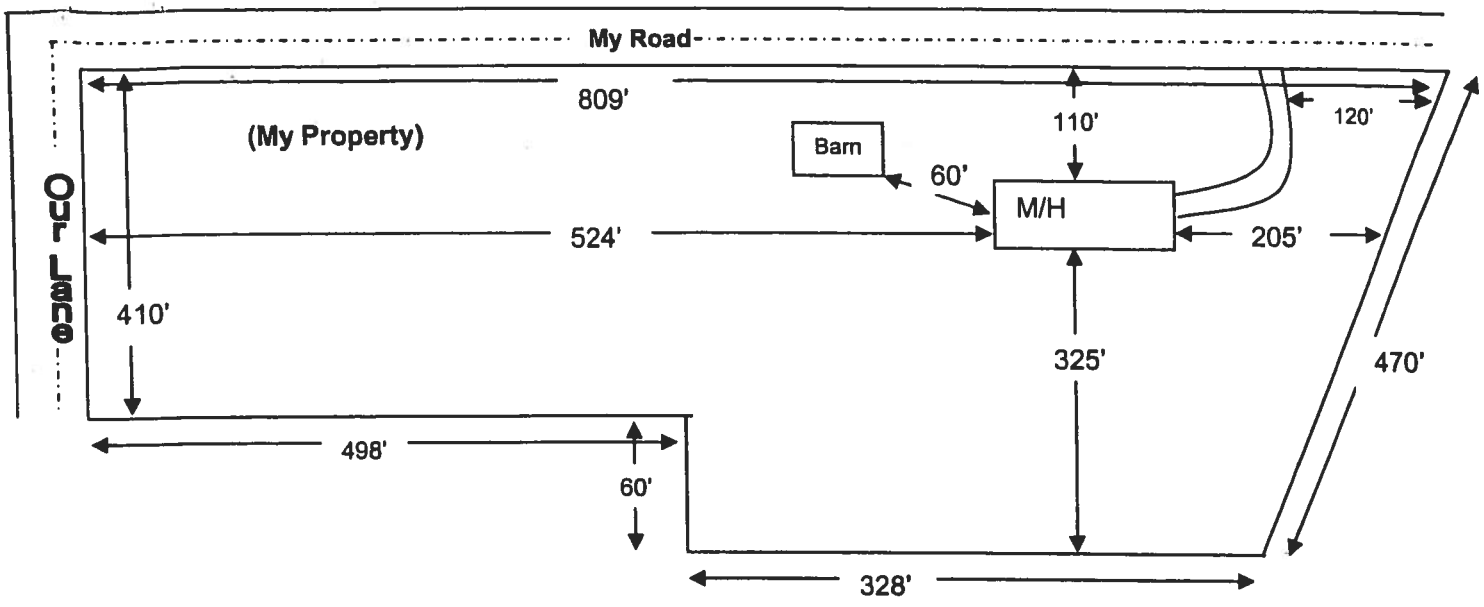
Site Plan submitted by: X _____ _____
Signature Title

Plan Approved ✓ Not Approved _____ Date 5/1/06

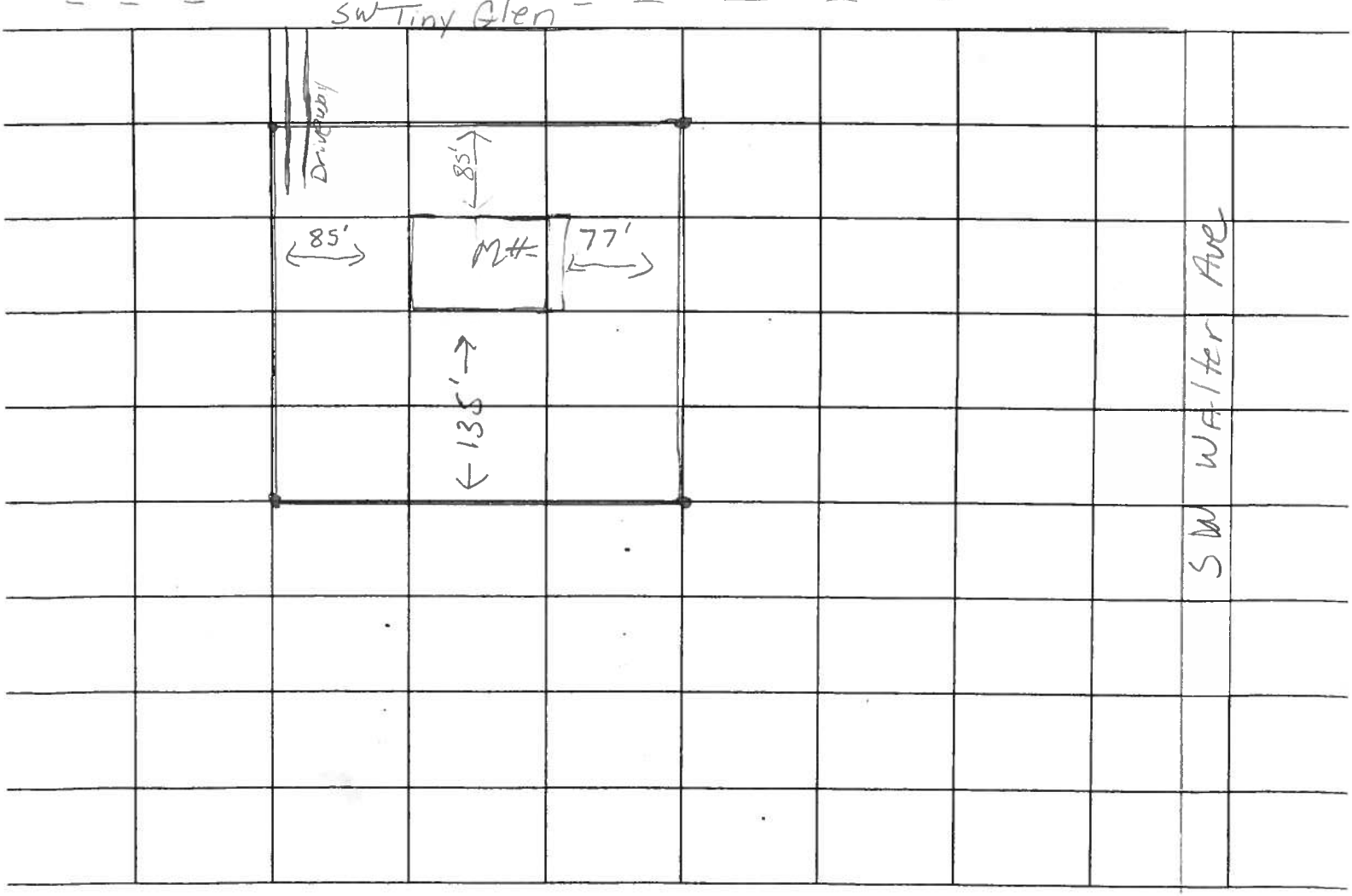
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. <u>This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.</u>



5-8-06

I give Amie Smith permission to move a mobile home on my property.
Parcel # 02-55-16-03437-000 HX 13

AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Rickey Smith

Property ID: Sec: 2 Twp: 55 Rge: 16E Tax Parcel No: 02551603437000 HX13

Lot: _____ Block: _____ Subdivision: _____

Mobile Home Year/Make: 1987 Redman Size: 28 x 44'

Signature of Mobile Home Installer

Sworn to and subscribed before me this 2nd day of May, 2006

by _____.

SHARON Y. BLACKMON
Notary's name printed/typed

Sharon Y. Blackmon
Notary Public, State of Florida
Commission No. _____
Personally Known: ✓
Produced ID (type) _____

SHARON Y. BLACKMON
MY COMMISSION # DD 196611
EXPIRES: May 31, 2007
Bonded Thru Notary Public Underwriters

LIMITED POWER OF ATTORNEY

I, Terry L. Thrift, license # IH-0055536 hereby

authorize Ricky Smith 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 ~~Suwannee County, Florida~~ Columbia County Florida.

Property owner: Gladys Smith

Sec 2 Twp. 5S S Rge 16 E

Tax Parcel No. 02 5S 16 03437 000 HX 13

Terry L. Thrift
Mobile Home Installer

5/2/06
(Date)

Sworn to and subscribed before me this 2nd day of May, 2006.

Sharon Y. Blackmon
Notary Public

My Commission expires:
Commission No.
Personally known: ✓
Produced ID (Type)

SHARON Y. BLACKMON
MY COMMISSION # DD 196611
EXPIRES: May 31, 2007
Bonded Thru Notary Public Underwriters

@ CAM112M01 CamaUSA Appraisal System Columbia County
5/10/2006 11:19 **Legal Description Maintenance** **535871 Land 002**
Year T Property Sel **AG 000**
2006 R 02-5S-16-03437-000 . . . . . **75011 Bldg 001**
1018 WALTER AVE SW **500 Xfea 001**
HX SMITH GLADYS L **611382 TOTAL B***

1	W1/2 OF SE1/4 & NE1/4 OF SE1/4	& SE1/4 OF NE1/4 EX S 424.16FT	2
3	& EX 10.24 ACRES. ORB 371-517,,	661-675,, 676,, 829-1380.	4
5	829-1383,, 829-1389,, 999-939,, . .	DC REMA SMITH 1000-2528.	6
7	. . . . .	. . . . .	8
9	. . . . .	. . . . .	10
11	. . . . .	. . . . .	12
13	. . . . .	. . . . .	14
15	. . . . .	. . . . .	16
17	. . . . .	. . . . .	18
19	. . . . .	. . . . .	20
21	. . . . .	. . . . .	22
23	. . . . .	. . . . .	24
25	. . . . .	. . . . .	26
27	. . . . .	. . . . .	28

Mnt **12/05/2003 KYLIE**

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More


02-5S-16-03437-000
SMITH GLADYS L
02-5S-16-03437-000
SMITH GLADYS L
SW WALTER AVE
SW COVEWOOD CT
SW STONERIDGE DR
ROSE CREEK DR
SW HIGHPO

CODE ENFORCEMENT

PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 5.5.06 BY G IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? no.

OWNERS NAME Amy Smith PHONE _____ CELL 386-303-1383

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 441 N, TL on Mershon Rd, ½ mile on left Falling Creek / 246 left / second on right past 246

MOBILE HOME INSTALLER Terry Thrift PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Redmon YEAR 1987 SIZE 28 X 44 COLOR Grey

SERIAL No. _____

WIND ZONE II **Must be wind zone II or higher NO WIND ZONE I ALLOWED**

INTERIOR: **INSPECTION STANDARDS**

(P or F) - P= PASS F= FAILED

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

P FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION _____

P DOORS ( ) OPERABLE ( ) DAMAGED

P WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS ( ) OPERABLE ( ) INOPERABLE

P PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

P CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

P ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

P ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS:

APPROVED ✓ WITH CONDITIONS: None

NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER 307 DATE 5-10-06