Good afternoon Troy,

I am submitting two mobile home packets for used homes. One is for Leslie Earl Peeler and one is for Hunter Peeler. When I met with Mr Peeler, he said you two have spoken, you are aware of the situation and that he is doing his own inspection that I don't need to submit the documents for that or pay for the pre-inspections.

He said you can give him a call if there was any issues. 386-623-4914

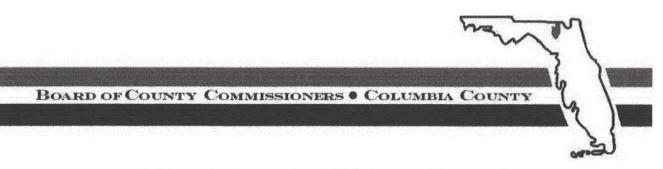
Thank you

Sonya North

863-517-5701

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

Fo	r Office Use Only (Revised 7-1-15) Zoning Official Building Official
<u>AP</u>	# <u>62194</u> Date ReceivedByPermit #
Flo	ood Zone Development Permit Zoning Land Use Plan Map Category
Co	mments
FEN	//A Map# Elevation Finished Floor River In Floodway
□ R	ecorded Deed or Property Appraiser PO Site Plan EH # Well letter OR
o E	xisting well 🗆 Land Owner Affidavit 🗆 Installer Authorization 🗆 FW Comp. letter 🗀 App Fee Paid
□ D	OT Approval Parent Parcel # STUP-MH 911 App
□ E	Illisville Water Sys Assessment Out County In County Sub VF Form
rop	erty ID# 11-LeS-16-03815-201/subdivision Cardinal Farms Lot#4
	New Mobile Home Used Mobile Home MH Size Year
A	Applicant Songa North Phone # 863-517-5701
A	Address 3311 Sw State Rd 247 Lake City F1 32024
N	Name of Property Owner Hunter Pealer Phone#
9	211 Address Le446 Sw old Wire Rd Fort White Fl
C	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
N	Name of Owner of Mobile Home Hunter Peeler Phone #386-623-40
1	Address PO BOX 3414 Lake City Fl 32056
F	Relationship to Property Owner
C	Current Number of Dwellings on Property 1- Day This one
L	_ot Size Total Acreage
	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
ŀ	s this Mobile Home Replacing an Existing Mobile Home NO
0	Driving Directions to the Property
-	
Ī	Email Address for Applicant: Drovision permitting @amail. com
N	Name of Licensed Dealer/Installer Rusty Knowles Phone # 386-391-088
	nstallers Address 5801 SW SR 47 lake Coty FT 32024
L	icense Number <u>THID38ZIQ</u> Installation Decal # <u>ID3LQD</u>



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 2:47:47 PM

Address:

6440 SW OLD WIRE RD

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

11-6S-16-03815-206

REMARKS:

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

Verification ID: 64ae5c19-565d-46a8-aabf-60a09c3c1214

Address was reassigned from old address: NEW SW OLD WIRE RD

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.

Issuance of a 9-1-1 address for your property should not be construed by you or anyone else to mean that your property is buildable pursuant to the Columbia County Land Development Regulations. To determine whether your property is eligible for a building permit please contact the Building and Zoning Department.

Address Issued By:

GIS Specialist

Columbia County GIS/911 Addressing Coordinator



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

NOTES:

PARCEL: 11-6S-16-03815-206 (46250) | VACANT (0000) | 5 AC

PART OF OT 6 CARDINAL FARMS UNREC: COMM SE COR OF SEC, W 3266.86 FT, N 22 DEG E 510.42 FT, N 915.56 FT, N 22 DEG E 1397.36 FT, N 25 DEG E 2.82 FT TO N

PEELER HUNTER Owner: PO BOX 3414 LAKE CITY, FL 32056 2023 Working Values Mkt Lnd \$42,500 Appraised \$42,500 Ag Lnd \$0 Assessed \$42,500 6440 SW OLD WIRE RD, FORT Site: Bldg \$0 Exempt \$0 WHITE **XFOB** \$0 county:\$27,225 Sales 7/24/2023 \$100 V (U) Total city:\$0 Just \$42,500 Info Taxable other:\$0 school:\$42,500



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.

GrizzlyLogic.com

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER CONTRACTOR RUSty Knowle Short 386-397-0886

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</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 Marcus Matthews License #: EC 1300 5459	Signature 10 10 10 10 10 10 10 10 10 10 10 10 10
	Qualifier Form Attached	
MECHANICAL/	Print Name	Signature
Vc	License #:	Phone #:
	Qualifier Form Attached]

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 4/27/2017

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR CUSTY	Knowles PHONE 386-397-
		0884
THIS FO	DRM MUST BE SUBMITTED PRIOR TO THE ISSUANCE	OF A PERMIT

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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	Signature
	License #:	Phone #:
	Qualifier Form Attached	
MECHANICAL/	Print Name Harry Moseley	Signature Having Marches Phone #: 386-2889300
A/C	License #: BA 0030316	Phone #: 386-2889300
	Qualifier Form Attached	7

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.



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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Rusty Kno	give this authority f	or the job address show below
only, 6440 SW 01	d Wire Rol Fort	white, and I do certify that
the below referenced person(s)	listed on this form is/are under m	y direct supervision and control
and is/are authorized to purcha	se permits, call for inspections and	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Sonia North	Soora North	Agent Officer Property Owner
		Agent Officer Property Owner
		Agent Officer Property Owner
under my license and I am fully Local Ordinances.	t I am responsible for all permits presponsible for compliance with a	Il Florida Statutes, Codes, and
	by him/her or by his/her authorize	
License Holders Signature (Not	arized)	38249 <u>8-7-23</u> umber Date
NOTARY INFORMATION: STATE OF:Florida	COUNTY OF: Columbi	A
The above license holder, whos personally appeared before me (type of I.D.)	e name is Rusty L. Kar and is known by me or has produ on this 111 day	ced identification of August, 2023.
Linda Ruth C	raft 1	Seal/Stamn)





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

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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

1, Rusty Know	give this authority a	and I do certify that the below
referenced person(s) listed on t	his form is/are under my direct su	pervision and control and
is/are authorized to purchase po	ermits, call for inspections and sig	n on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Sonya North	Sonia Worth	
•	3.	
I the license holder realize that	I am responsible for all permits p	urchased and all work done
	responsible for compliance with a	
Local Ordinances.	responsible for compliance with a	iir i fonda otatutes, oodes, and
<u>Loddi Ordinanocs.</u>		
I understand that the State Lice	nsing Board has the power and a	uthority to discipline a license
holder for violations committed I	by him/her or by his/her authorized	d person(s) through this
document and that I have full re	sponsibility for compliance grante	d by issuance of such permits.
1		
License Holders Signature (Nota	I H-1	03 8 2 19
	dized) License No	imber Date
NOTARY INFORMATION: STATE OF:Florida	COUNTY OF: Columbia	
	2 2	- 100 s - 100
The above license holder, whos	e name is Rusty L. Kno	wie ,
(type of I.D.)	and is known by me of has produ on this <u>TYL</u> day o	
		7,23
List Rith r	DO	
NOTARY'S SIGNATURE	raff	Seal/Stamp)
	50	Notary Public State of Florida
	}	Linda Ruth Craft My Commission HH 041629 Expires 09/13/2024

Mobile Home Permit Worksheet

	Suiding will piers within 2' of end of home per Rule 15C		where the sidewall ties exceed 5 ft 4 in. Installer's initials	Installer: Rusty Undwells License # It 1038219 Address of home being installed Address of home Coxt White Fl Manufacturer JA cobsed 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 light and lateral Am Systems cannot be used on any home free or used.
TIEDOWN CON Stabilizing D Stabilizing D	oximate locations of marriage 4 foot or greater. Use this w the piers. w the piers. 13 1/4 × 26 1/4 20 × 20 17 3/16 × 25 3/16 17 1/2 × 25 1/2 24 × 24 29 penings greater than 4 foot 26 × 26 Pier pad size ANCHORS	from Rule 15C-1 pier spacing table. PIER PAD SIZES r pad size pier pad size pier pad size pad sizes pad sizes	oter 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" (342) (400) (484)* (5 6) (7' 6" 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8'	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 W Wind Zone III Double wide Installation Decal # 1031 90 Triple/Quad PIER SPACING TABLE FOR USED HOMES

Mobile Home Permit Worksheet

Electrical	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 Staller Name ACH L. FLANGED B 17. 23 TESTE MUST BE PERFORMED BY A LICENSED INSTALLER D D D D D D D D D D D D D D D D D D D	TORQUE PROBE TEST The results of the torque probe test is fight (1000) inch pounds or check here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 5 foot anchors.	The pocket penetrometer tests are rounded down to receive there to declare 1000 lb. soil without testing.
	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 Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:	Type gasket fall fall installed: Pg. 13 1 Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Water drainage: Natural Swale Pad Other Fastening multi wide units Fastening multi wide units Fastener: Length: Spacing: Natural Spacing: N

Installer Signature

Date 8-7-23

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. f(x)

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15-1

Plumbing

Order #: 5930 Label #: 103190	Manufacturer:	(Check Size of Home)
Homeowner:	Year Model:	Single
Address:	Length & Width:	Double
City/State/Zip:	Type Longitudinal System:	HUD Label #:
Phone #:	Type Lateral Arm System:	Soil Bearing / PSF:
Date Installed:	New Home: Used Home:	Torque Probe / in-lbs:
Installed Wind Zone:	Data Plate Wind Zone:	Permit #:
Note:		

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

103190

LABEL#

DATE OF INSTALLATION

Compliance

RUSTY L. KNOWLES

NAME

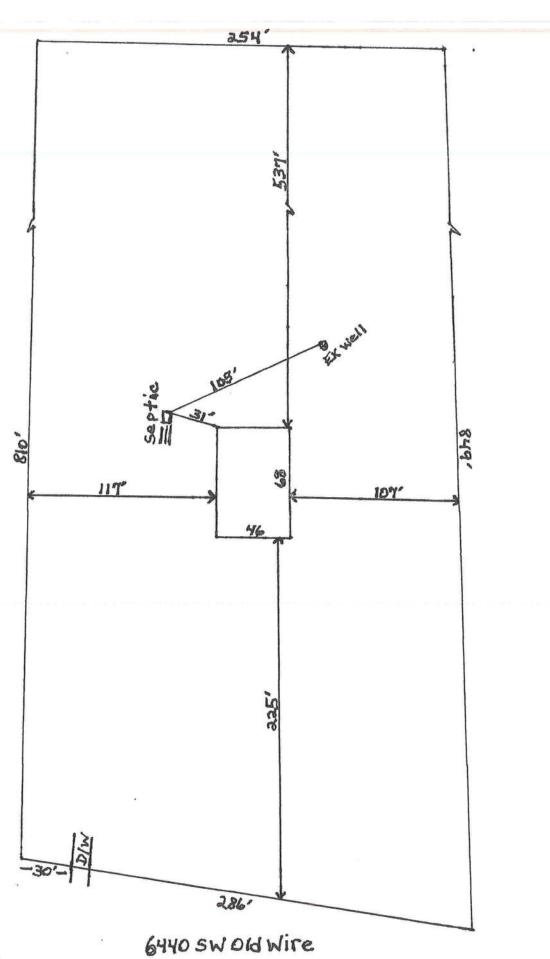
IH / 1038219 / 1

LICENSE# ORDER# CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

5930

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.



Peeler