

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP# _____

Date Received _____

By _____

Permit # _____

Flood Zone _____

Development Permit _____

Zoning _____

Land Use Plan Map Category _____

Comments _____

FEMA Map# _____

Elevation _____

Finished Floor _____

River _____

In Floodway _____

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ 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 _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 34-35-16-02514.000 Subdivision N/A Lot# 6

▪ New Mobile Home X Used Mobile Home _____ MH Size 16x76 Year 2022

▪ Applicant DAVID DOWNS Phone # 251-376-3070

▪ Address 466 SW DEPUTY J DAVIS LN LAKE CITY, FL 32024

▪ Name of Property Owner CHRISTINE PAUWELS Phone# 386-697-2172

▪ 911 Address 229 DIVIDER TER LAKE CITY, FL 32055

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home CHRISTINE PAUWELS Phone # 386-697-2172

Address 229 DIVIDER TER LAKE CITY, FL 32055

▪ Relationship to Property Owner OWNER

▪ Current Number of Dwellings on Property 0

▪ Lot Size 0.96 Total Acreage 0.96

▪ 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 NO

▪ Driving Directions to the Property HEAD NORTH ON NE HERNANDO AVE TOWARD NE JUSTICE ST.
TURN LEFT ONTO NE MADISON ST. TURN RIGHT ON U.S. 90 W/JW DUVAL ST. TURN RIGHT
ON LAKE CITY, NW AVE. TURN RIGHT ON APPLE LN TURN LEFT ON DIV TER.

Email Address for Applicant: _____

▪ Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-344-3645

▪ Installers Address 353 SW MAULON AVE LAKE CITY, FL 32024

▪ License Number 1H-1129420 Installation Decal # 90274

PAUWELS CHRISTINE MARIE
229 NW DIVIDER TER
LAKE CITY, FL 32055

2022

34-3S-16-02514-000

[illegible]

Prepared by and return to:

Rob Stewart
Lake City Title
426 Southwest Commerce Drive
#145
Lake City, FL 32025
(386) 758-1880
File No 2022-6097VB

Parcel Identification No 34-3S-16-02514-000

[Space Above This Line For Recording Data]

WARRANTY DEED

(STATUTORY FORM – SECTION 689.02, F.S.)

This indenture made the 14 day of July, 2022 between **James Pauwels and Jennifer Pauwels, Husband and Wife**, whose post office address is **259 NW Divider Terrace, Lake City, FL 32055**, of the County of Columbia, State of Florida, Grantors, to **Christine Marie Pauwels, a Single Woman**, whose post office address is **229 NW Divider Terrace, Lake City, FL 32055**, of the County of Columbia, State of Florida, Grantee:

Witnesseth, that said Grantors, for and in consideration of the sum of TEN DOLLARS (U.S.\$10.00) and other good and valuable considerations to said Grantors in hand paid by said Grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said Grantee, and Grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia, Florida, to-wit:

Lot 6, Block B, West Lake City Hills, according to the map or plat thereof, as recorded in Plat Book 3, Page(s) 89, of the Public Records of Columbia County, Florida.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

Subject to taxes for 2022 and subsequent years, not yet due and payable; covenants, restrictions, easements, reservations and limitations of record, if any.

TO HAVE AND TO HOLD the same in fee simple forever.

And Grantors hereby covenant with the Grantee that the Grantors are lawfully seized of said land in fee simple, that Grantors have good right and lawful authority to sell and convey said land and that the Grantors hereby fully warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever.

In Witness Whereof, Grantors have hereunto set Grantors' hand and seal the day and year first above written.

*Signed, sealed and delivered
in our presence:*

Amber H Suhl
WITNESS
PRINT NAME: Amber H Suhl

James Pauwels
James Pauwels

Karlit Hancock
WITNESS
PRINT NAME: Karlit Hancock

Valarie
WITNESS
PRINT NAME: Valarie

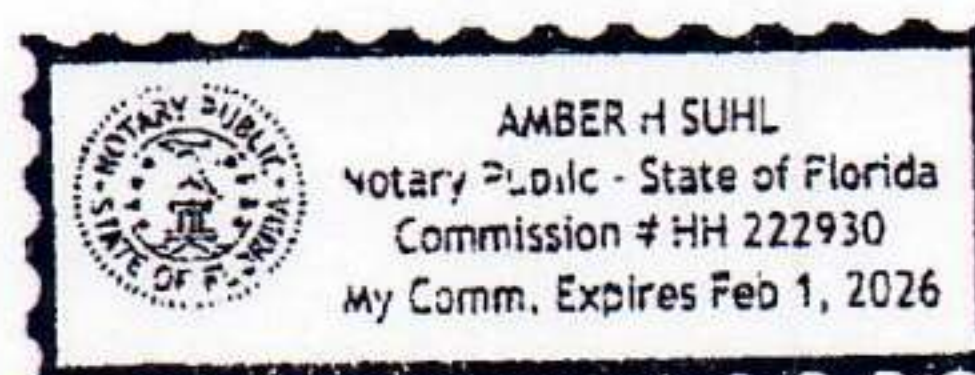
Jennifer Pauwels
Jennifer Pauwels

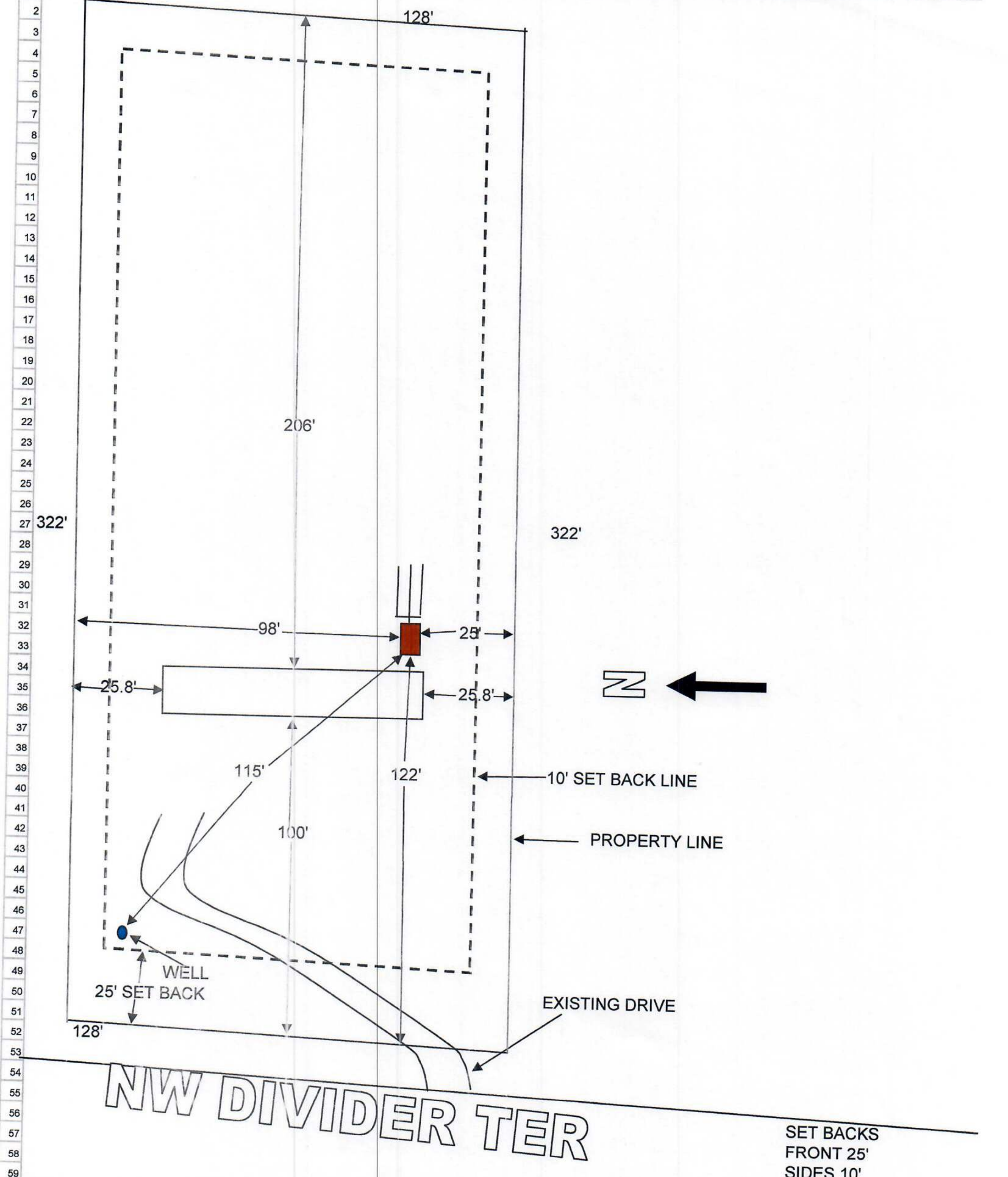
Amber H Suhl
WITNESS
PRINT NAME: Amber H Suhl

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me by means of ☒ physical presence or () online notarization this 14 day of July, 2022, James Pauwels and Jennifer Pauwels, who is/are personally known to me or has/have produced DL as identification.

Amber H Suhl
Signature of Notary Public





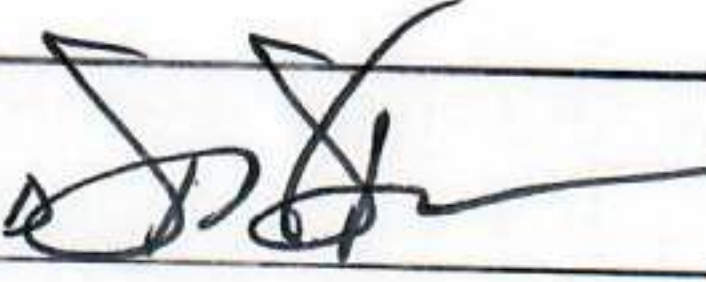
MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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 REQUIRED 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 <u>GLENN WHITTINGTON</u> License #: <u>EC 13002957</u>	Signature <u>POA INCLUDED</u>  Phone #: <u>386-684-4601</u>
Qualifier Form Attached ☒		
MECHANICAL/ A/C _____	Print Name <u>STYLECREST</u> License #: <u>CAC-1817658</u>	Signature <u>POA INCLUDED</u>  Phone #: <u>850-630-8877</u>
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.

Whittington Electric Inc.

EC13002957
164 Queens Country Rd
Interlachen, Fl. 32148
386-684-4601
Whitt1954@gmail.com

To whom it may concern,

I Glenn Whittington, am writing on behalf of Whittington Electric Inc., as the Owner, to give David Downs, Power of Attorney, to pull permits, pick up permits, and anything related to permitting.

Thank You,

Glenn Whittington

Glenn Whittington

The Forgoing instrument was acknowledged before me on this 18th day of August, 2022 by a Glenn Whittington who is personally known to me or has produced _____ as identification and who did not take an oath.

Jacqueline Larsen

Notary Public Signature

03/28/25

My Commission Expires





August 18, 2022

STATE OF FLORIDA

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding HVAC wiring permit (if necessary) for ANY install in the STATE OF FLORIDA, on behalf of Style Crest, Inc.

David Downs

This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

A handwritten signature in black ink, appearing to read "Ronald E Bonds", written over a horizontal line.

Contractor's Signature

Sworn to and subscribed before me this 18 day of August, 2022
By RONALD E BONDS, SR who is personally known to me or has produced himself
as identification and who did/did not take an oath.

A handwritten signature in blue ink, appearing to read "Stephanie Heidelberg", written over a horizontal line.
Notary Public

My commission expires: 3-29-2025



STEPHANIE HEIDELBURG
Notary Public, State of Ohio
My Commission Expires:
03/29/2025

Columbia County Property Appraiser
Jeff Hampton

Parcel: << 34-3S-16-02514-000 (10453) >>

2022 Working Values
updated: 5/26/2022

Owner & Property Info

Result: 1 of 1

Owner	PAUWELS JAMES PAUWELS JENNIFER 259 NW DIVIDER TERR LAKE CITY, FL 32055		
Site	229 NW DIVIDER Ter, LAKE CITY		
Description*	LOT 6 BLK B WEST LAKE CITY HILLS S/D. 318-539, 347-509, 381-457, WD 982-125, WD 1012-2057, WD 1158-2152, DC 1345-2294, WD 1394-1100,		
Area	0.96 AC	S/T/R	34-3S-16
Use Code**	VACANT (0000)	Tax District	2

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.
**The Use Code 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

2021 Certified Values		2022 Working Values	
Mkt Land	\$10,800	Mkt Land	\$15,000
Ag Land	\$0	Ag Land	\$0
Building	\$0	Building	\$0
XFOB	\$0	XFOB	\$0
Just	\$10,800	Just	\$15,000
Class	\$0	Class	\$0
Appraised	\$10,800	Appraised	\$15,000
SOH Cap [?]	\$0	SOH Cap [?]	\$3,120
Assessed	\$10,800	Assessed	\$15,000
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$10,800 city:\$0 other:\$0 school:\$10,800	Total Taxable	county:\$11,880 city:\$0 other:\$0 school:\$15,000

Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
9/11/2019	\$65,000	1394/1100	WD	V	Q	01
9/18/2008	\$205,000	1158/2152	WD	I	Q	
4/8/2004	\$111,000	1012/2060	WD	I	U	01
4/8/2004	\$53,000	1012/2057	WD	I	U	01
4/7/2003	\$30,100	0982/0125	WD	I	U	01

Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
			NONE		

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
			NONE		

Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0000	VAC RES (MKT)	1.000 LT (0.960 AC)	1.0000/1.0000 1.0000/ /	\$15,000 /LT	\$15,000

Aerial Viewer Pictometry Google Maps

2019 2016 2013 2010 2007 2005 Sales





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, DAVID ALBRIGHT, give this authority for the job address show below
Installer License Holder Name

only, 229 DIVIDER TER LAKE CITY, FL 32055, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
DAVID DOWNS		☒ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

License Holders Signature (Notarized)

1H-1129420
License Number

8/19/2022
Date

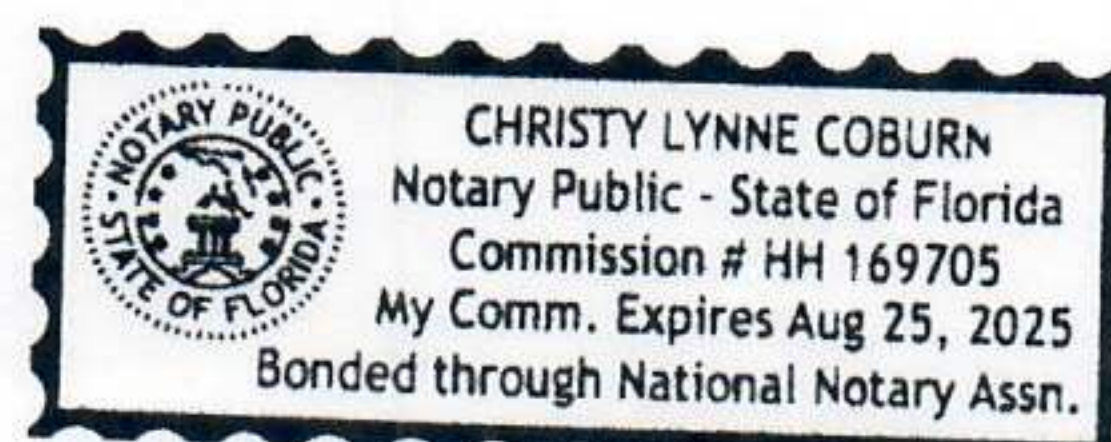
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is DAVID ALBRIGHT, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 19th day of AUGUST, 20 22.

NOTARY'S SIGNATURE

(Seal/Stamp)



License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 5393	Label #: 90274	Manufacturer: <u>LIVE OAK</u>	(Check Size of Home)
Homeowner: <u>PAUWELS</u>	Year Model: <u>2022</u>		Single <u>X</u>
Address: <u>229 DIVIDER TERRACE</u>	Length & Width: <u>76/80 x 16</u>		Double _____
City/State/Zip: <u>LAKE CITY FL 32055</u>	Type Longitudinal System: <u>OTI (6)</u>		Triple _____
Phone #:	Type Lateral Arm System: <u>OTI (6)</u>		HUD Label #:
Date Installed:	New Home: <u>X</u> Used Home: _____		Soil Bearing / PSF:
Installed Wind Zone: <u>II</u>	Data Plate Wind Zone: <u>II</u>		Torque Probe / in-lbs:
Note:			Permit #:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

90274

LABEL #

DATE OF INSTALLATION

DAVID E ALBRIGHT

NAME

IH / 1129420 / 1

5393

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.

INSTRUCTIONS

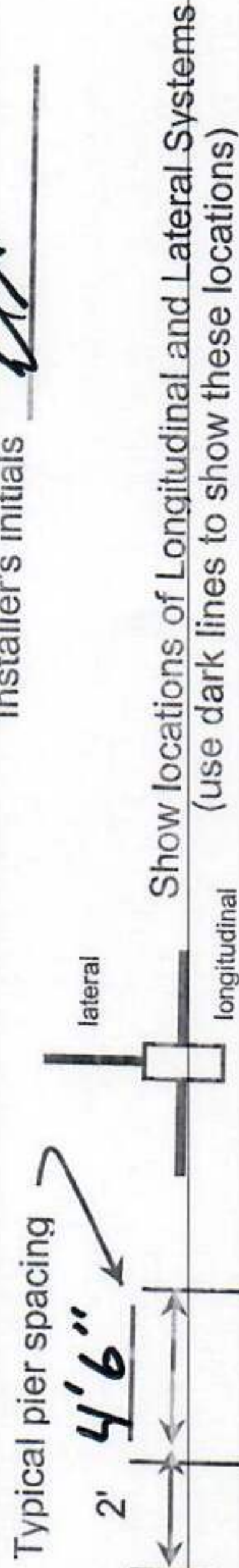
PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

Mobile Home Permit Worksheet

Installer: DAVID ALBRIGHT License # 1H-1129420
Address of home being installed: 229 DIVIDER TER. LAKE CITY, FL 32055
Manufacturer LIVE OAK HOMES Length x width 16x76/80

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 DA



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

Application Number:

Date:

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 # 90274
Triple/Quad ☐ Serial # _____

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'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17 1/2 x 25 1/2

Perimeter pier pad size 16 x 16

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 _____

ANCHORS

4 ft 32 5 ft 7

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 _____

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

PAVLWELS

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 260 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.

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 DAVID ALDRIGHT MOBILE HOME SVC
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. 70

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 107

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: _____ Length: _____ Spacing: _____
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

Type gasket Pg. _____

Installed:
Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 119
Siding on units is installed to manufacturer's specifications. Yes _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

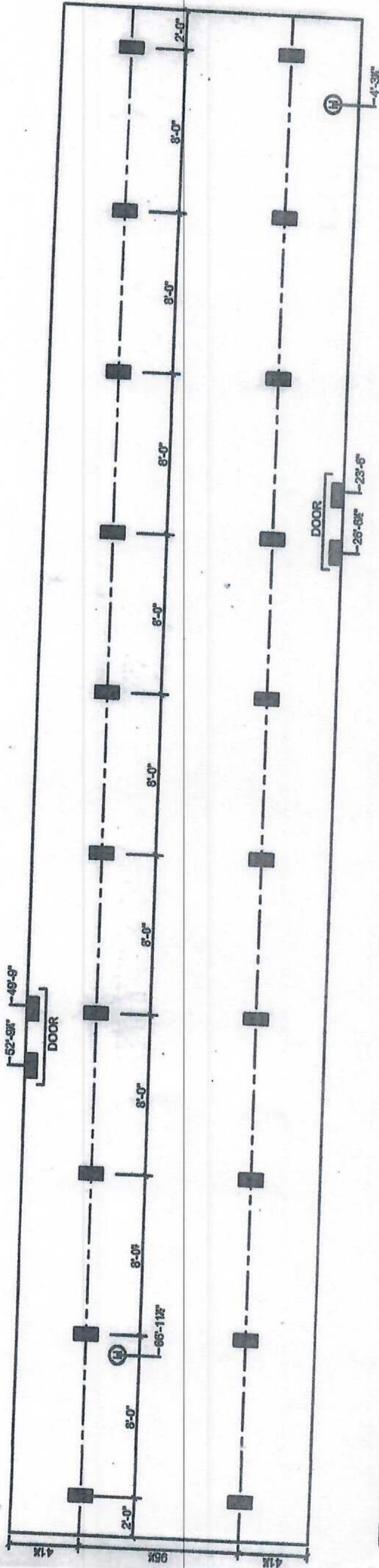
Miscellaneous

Skirting to be installed. Yes _____ No ☒
Dryer vent installed outside of skirting. Yes _____ N/A ☒
Range downflow vent installed outside of skirting. Yes _____
Drain lines supported at 4 foot intervals. Yes ☒ N/A ☒
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 David Aldright Date _____

BOLT



SUPPORT PIER/TYP

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

11-25-2013

Live Oak Homes
MODEL: L-57631 - 16 X 80
3-BEDROOM / 2-BATH

- | | |
|------------------------------|--|
| (A) MAIN ELECTRICAL | (G) DUCT CROSSOVER |
| (B) ELECTRICAL CROSSOVER | (H) SEWER DROPS |
| (C) WATER INLET | (I) RETURN AIR (WOPT. HEAT PUMP OH DUCT) |
| (D) WATER CROSSOVER (IF ANY) | (J) SUPPLY AIR (WOPT. HEAT PUMP OH DUCT) |
| (E) GAS INLET (IF ANY) | |
| (F) GAS CROSSOVER (IF ANY) | |

L-57631

An architectural drawing of a building facade, oriented vertically. The central portion of the facade is clad in vertical siding. This central section is flanked by two vertical bands of a different material, possibly stone or brick, which extend the full height of the drawing. The facade features several windows: at the top, a small square window with a six-pane grid; below it, a larger rectangular window with a plain white interior; further down, another square window with a six-pane grid; and at the bottom, two more square windows, each with a six-pane grid. A small, dark square detail is visible on the siding between the middle rectangular window and the window below it. The drawing is a black and white line illustration.



Date: 8-8-2013

* All room dimensions include closets and square footage figures are approximate.
 ** Transom windows are available on optional 9'-0" sidewalk houses only.
 *** Available with Lineals or Shutters around windows.