

\* TYPE WIDE \*

441

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

SERIAL

For Office Use Only (Revised 7-1-15) Zoning Official JNA Building Official JNA  
AP# 1901-112 Date Received 1/31 By JNA Permit # 37765  
Flood Zone XPS Development Permit                      Zoning A-2 Land Use Plan Map Category 18  
Comments Per site plan - M/H is being placed outside the flood zone, any changes in location on property must be reviewed.  
FEMA Map#                      Elevation                      Finished Floor 2nd River                      In Floodway                       
☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0111                      R  
☒ 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 owed ☐ Out County ☐ In County ☒ Sub VF Form

Property ID # 35-7S-16-04348-005 Subdivision 60v46+2 Sec 35 Lot#                     

▪ New Mobile Home ☒ Used Mobile Home                      MH Size 42x50 Year 2019

▪ Applicant Linda Craft Phone # 863-517-5701

▪ Address 3311 SW State Road 247 Lake City FL 32024

▪ Name of Property Owner Victoria Monfort Phone# 239-823-4674

▪ 911 Address 227 Serene Ct Ft White FL 32038

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

▪ Name of Owner of Mobile Home Victoria Monfort Phone # 239-823-4674

Address 227 Serene Ct Ft White FL 32038

▪ Relationship to Property Owner Gate code 2278

\* ▪ Current Number of Dwellings on Property 0 - Burn

▪ Lot Size                      Total Acreage 10

▪ 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 US 90 to I75 South to SR 47 follow 47 follow through Ft White to CR 138 turning left follow until "S" turn turn on Truluck Rd follow to Serene Ct 1/10 mile property on left 2nd gate

▪ Name of Licensed Dealer/Installer Ronnie Norris Phone # 623-7716

▪ Installers Address 1004 SW Charles Terr Lake City FL 32024

▪ License Number IH10251451 Installation Decal # 58500

LA - Emailed Sonya 2-11-19

\$ 740.83

SCANNED

# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

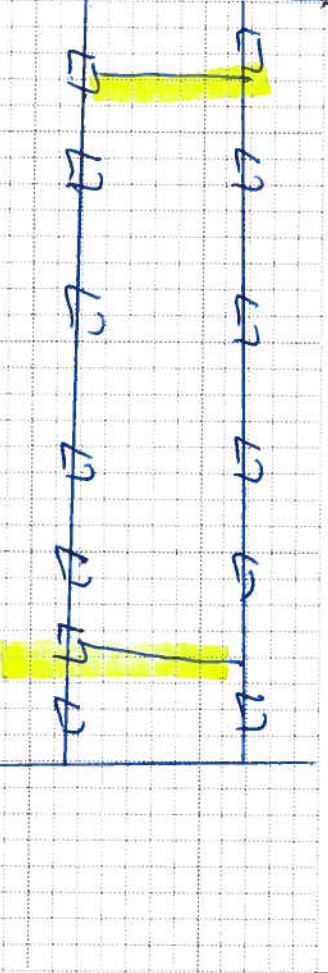
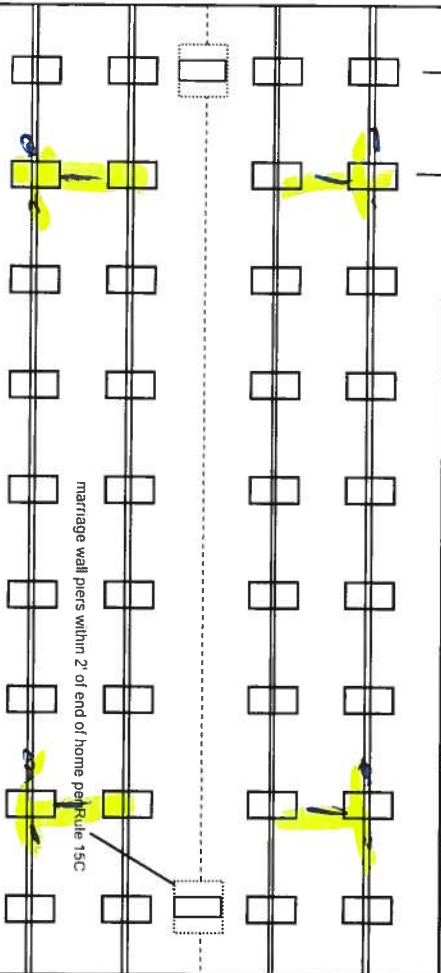
Installer: Forvie Norkis License # TH0021451

Address of home being installed: 227 SW 3rd St Ft White FL 32038

Manufacturer: Saco SSV Length x width: 42x50

**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: AR



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 # 58500

Triple/Quad ☒ Serial # 5ACR 0057644C

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (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: 17x25

Perimeter pier pad size: 16x16

Other pier pad sizes (required by the mfg.): 16x16

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	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
47 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

## ANCHORS

## FRAME TIES

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer: \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer: \_\_\_\_\_

## OTHER TIES

Number \_\_\_\_\_

Longitudinal Marriage wall \_\_\_\_\_

Shearwall \_\_\_\_\_



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

### 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 1500 X 1500 X 1500

## 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 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 require anchors with 4000 lb. holding capacity.

Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

1-23-018

## 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 independent water supply systems. Pg. \_\_\_\_\_

## Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☒

### Fastening multi wide units

Floor: Type Fastener: Ln Length: 6 Spacing: 24  
Walls: Type Fastener: Ln Length: 6 Spacing: 16  
Roof: Type Fastener: Ln 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, 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. \_\_\_\_\_  
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

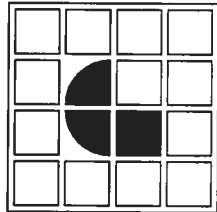
Installer Signature

Date

2

80.

[illegible]21. WORLDWIDE DISTRIBUTION



**JACOBSEN HOMES**  
**PO BOX 368, 600 PACKARD CT.**  
**SAFETY HARBOR, FLORIDA 34695**

**(727) 726-1138**

**www.jacobshomes.com**

## WARNING:

INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN SERIOUS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT.

## CAUTION:

MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT THAT ALL PERSONNEL, ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADDEQUATELY TRAINED. A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED.

## NOTES:

1. REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
2. REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERES CAN BE REDUCED AND/OR SPANS INCREASED FOR THE SETUP MANUAL.
3. REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.
4. REFER TO THE APPROVED FLOOR PLAN FOR BEARING WALL LOCATIONS AND LOADS.
5. REFER TO AD-TD-0250 FOR BEARING WALL APPLICATIONS AND TIE-DOWNS.
6. REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERES SHALL BE LOCATED WITHIN 8" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERES MAY BE REQUIRED ALONG THE MATING LINE. SEE THE SETUP MANUAL FOR SPECIFIC.
7. ALL 164" WIDE FLOOR SYSTEMS REQUIRING PERIMETER AND MATING LINE BLOCKING.
8. ANY SKEWED AREA WITH A HOIST BEAM ON A STRUCTURAL ATTACHMENT SHALL HAVE PIERES AND ANCHORS SPACED NO FURTHER THAN 48" O.C. MAXIMUM. SOME WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION. REFER TO THE JACOBSEN HOMES SETUP MANUAL FOR SPECIFIC LINE SU-01-0005 AND SU-01-0006. WHEN THE ATTACHED STRUCTURE HAS PERIMETER WALL CONSTRUCTION ON IS DESIGNED AND CONSTRUCTED TO BE SELF SUPPORTING, THERE ADDITIONAL PIERES AND ANCHORS ARE NOT REQUIRED.
10. MAX. PIER SPACING ON 8" I-BEAM IS 80". MAX. PIER SPACING ON 10" OR 12" I-BEAM IS 100". SEE NOTE 4 ON PAGES SU-01-0005 THROUGH SU-01-0006.

REFER TO AD-TD-0250 THROUGH  
AD-TD-0254 FOR COLUMN ANCHOR SIZES.

N10 = SEE NOTE 10.  
REFER TO SU-01-0005 FOR  
ADDITIONAL PIER REQUIREMENTS.

COLUMN INFO. TABLE				COLUMN PAD - MIN. SIZES (sq. in.)										
COL. NUM.	SPAN	LOAD (#ft POUNDS)	1000 psi SOIL	1500 psi SOIL	2000 psi SOIL	2500 psi SOIL	3000 psi SOIL	3500 psi SOIL	1000 psi SOIL	1500 psi SOIL	2000 psi SOIL	2500 psi SOIL	3000 psi SOIL	3500 psi SOIL
1	10'-0"	2975	428	286	214	171	171	171						
2	29'-4"	6975	1004	670	502	402	402	402						
3	18'-10"	4575	659	439	329	264	264	264						
4	10'-0"	2975	428	286	214	171	171	171						
5	10'-1"	2975	428	286	214	171	171	171						
6	5'-3"	2975	428	286	214	171	171	171						
7	5'-3"	2975	428	286	214	171	171	171						
8	0"	0	0	0	0	0	0	0						
9	0"	0	0	0	0	0	0	0						
10	0"	0	0	0	0	0	0	0						

MINIMUM PIER PAD SIZE (sq.in.)		I-BEAM PIER SPACING										MATING LINE PIER SPACING						PERIMETER PIER SPACING					
		1000 psi SOIL	1500 psi SOIL	2000 psi SOIL	2500 psi SOIL	3000 psi SOIL	3500 psi SOIL	1000 psi SOIL	1500 psi SOIL	2000 psi SOIL	2500 psi SOIL	3000 psi SOIL	3500 psi SOIL	1000 psi SOIL	1500 psi SOIL	2000 psi SOIL	2500 psi SOIL	3000 psi SOIL	3500 psi SOIL				
A	256 sq. in.	30	48 1/2	66 1/2	85	103*	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
B	342.25 sq. in.	42	66 1/2	90 1/2	115*	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
C	396 sq. in.	49	77 1/2	105 1/2*	N10	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
D	400 sq. in.	49 1/2	78 1/2	107 1/2*	N10	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
E	432.875 sq. in.	54	85	116*	N10	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
F	576 sq. in.	74	115*	N10	N10	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
G	676 sq. in.	87 1/2	N10	N10	N10	N10	N10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				

NOTES:

- REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
- REFER TO THE JACKSON HOBBS SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERES CAN BE RELOCATED AND/OR SPACES INCREASED FOR THE SETUP MANUAL.
- REFER TO SL-01-0003 FOR ADDITIONAL PIER REQUIREMENTS.
- REFER TO THE APPROVED FLOOR PLAN FOR SHEARWALL LOCATIONS AND LOADS.
- REFER TO ADD-01-00 FOR SHEARWALL APPLICATIONS AND TIE-DOWNS.
- REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERES SHALL BE LOCATED WITHIN 6" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERES MAY BE REQUIRED ALONG THE MATING LINE. SEE THE SETUP MANUAL FOR SPECIFIC.
- ALL 18" WIDE FLOOR SYSTEMS REQUIRE PERIMETER AND MATING LINE BLOCKING.
- ALL 24" FLOOR SYSTEMS UNDER THAN 164" REQUIRE PERIMETER AND MATING LINE BLOCKING.
- ANY SHEARWALL AREA WITH A HOIST BEAM ON A STRUCTURAL ATTACHMENT SHALL HAVE PIERES AND ANCHORS SPACED NO FLATTER THAN 48" O.C. MAXIMUM. SOME WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION. REFER TO THE JACKSON HOBBS SETUP MANUAL FOR SPECIFIC USE SL-01-0003 AND SL-01-0004. WHEN THE ATTACHED STRUCTURE HAS PERMIT WALL CONSTRUCTION ON IS DESIGNED AND CONSTRUCTED TO BE SELF SUPPORTING, THESE ADDITIONAL PIERES AND ANCHORS ARE NOT REQUIRED.
- MAX. PIER SPACING ON 1P I-BEAM IS 96". MAX. PIER SPACING ON 1P OR 1P I-BEAM IS 180". SEE NOTE 4 ON PAGES SL-01-0003 THROUGH SL-01-0008.

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HUD WIND ZONE - 3  
HUD WIND EXPOSURE CATEGORY - C

34333 - PAGE 2 OF 2

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)

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP  
CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED  
SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

SPACING FOR FIRST PIER IS EQUAL TO ON-THE-SPACING. THE ALLOWED PIER SPACING ON THE MAIN WALL IS 16'-0" MAXIMUM.

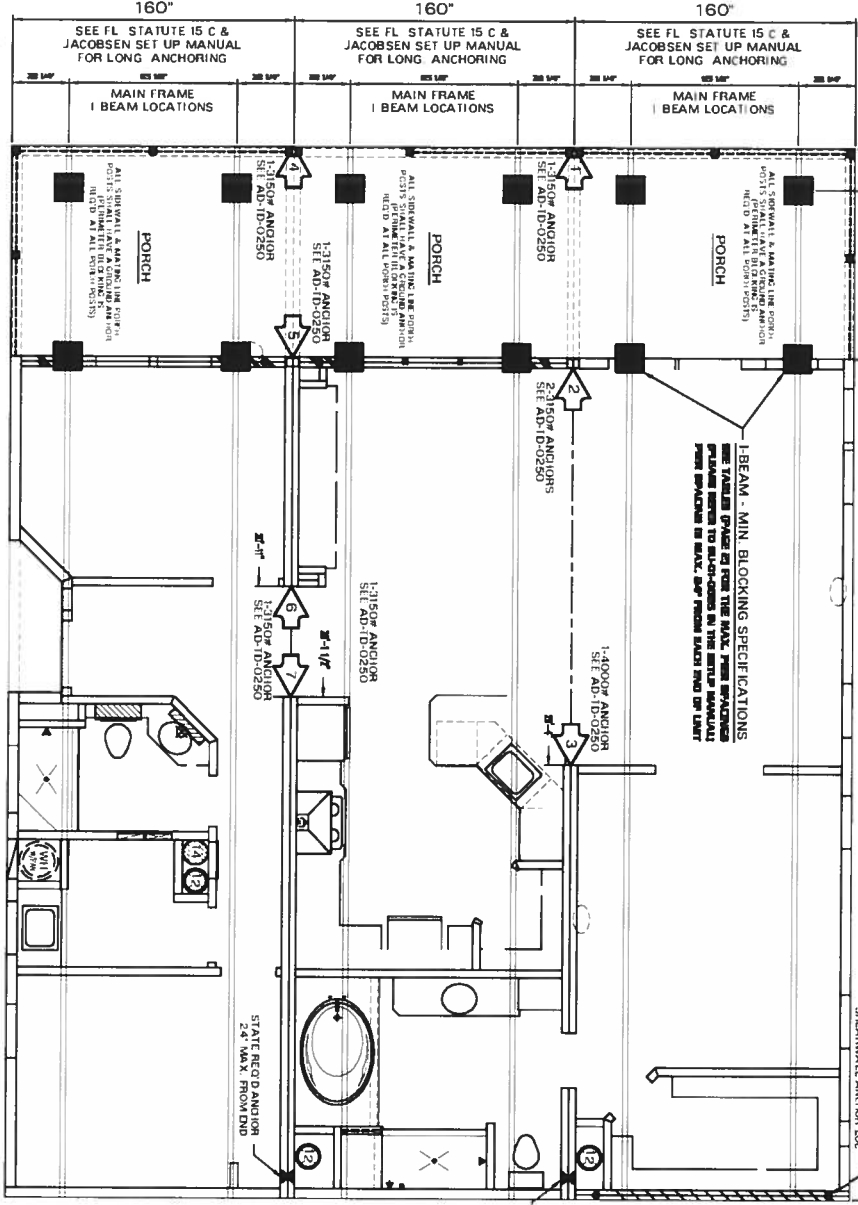
50'-0"

SIDEWALL ANCHORS  
(TYPICAL BOTH SIDEWALLS)  
64" O.C. MAX. SPACING

SEE TABLES FOR SPACING  
...SPACING OF BOTH SIDEWALL BEAM EXPOSURE D, AND HIGH SIDE OFFSETS SEE SET-UP MANUAL FOR SPECIFICS...

SEE NOTES AND TABLES ON PAGE 2 OF 2

CIRCLE INDICATES TYP. SHEARWALL ANCHOR LOC.



SEE NOTES AND TABLES ON PAGE 2 OF 2

SEE NOTES AND TABLES ON PAGE 2 OF 2

SHEARWALLS TIE-DOWN STRAPS ARE NOT INSTALLED AT THE FACTORY WHEN SHEARWALL IS LOCATED DIRECTLY OVER SOLID I-BEAM HEADER SET-UP IS REQUIRED TO INSTALL THE SHEARWALL STRAPS OVER THE I-BEAM HEADER PER AD-TO-0050 (PAGE 48) IN THE SET-UP MANUAL ADDENDUM STRAPS AND PIERS SHALL BE INSTALLED AT BOTH ENDS OF HEADER

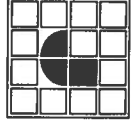
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REFER TO SU-01-0005 FOR ADD'L PIER REQUIREMENTS

REFER TO THE JACOBSEN HOMES SET-UP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS

HUD WIND EXPOSURE CATEGORY - C  
34333 - PAGE 1 OF 2

JACOBSEN HOMES  
PO BOX 3881, 600 PARKWAY CT.  
SAFETY HARBOR, FLORIDA 34622  
(727) 726-1133  
www.jacobsonhomes.com



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 STILL FOUNDATION)

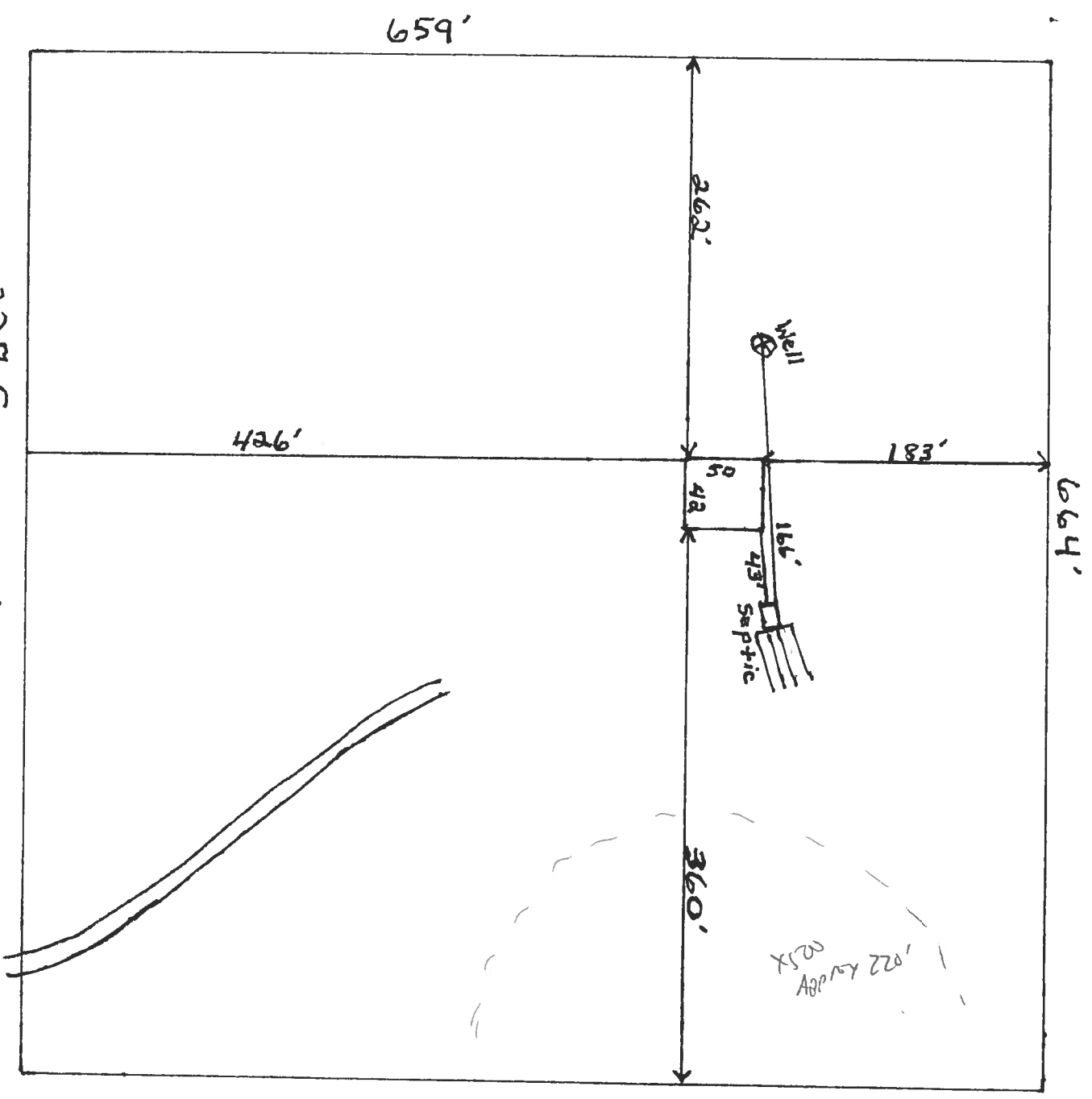
MODEL # CP-2674-333

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTESY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

INR-34.333 - 3  
JACOBSEN HOMES

MONFORT

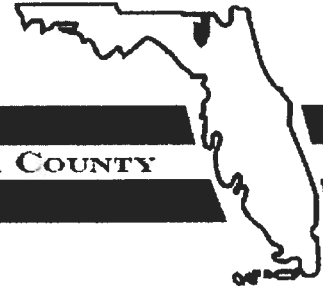
227 Serene Ct



1" = 100'



District No. 1 - Ronald Williams  
District No. 2 - Rocky Ford  
District No. 3 - Bucky Nash  
District No. 4 - Toby Witt  
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: **1/31/2019 4:35:13 PM**  
Address: **227 SW SERENE Ct**  
City: **FORT WHITE**  
State: **FL**  
Zip Code **32038**

---

Parcel ID **04348-005**

---

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](mailto:gis@columbiacountyfla.com)



Gate code  
2278



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

PERMIT NO. 19-0111  
DATE PAID: 2/1/19  
FEE PAID: 260.00  
RECEIPT #: 1395815

## APPLICATION FOR:

☐ New System ☐ Existing System ☐ Holding Tank ☐ Innovative  
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Victoria MontfortAGENT: Sony Crews / Linda Craft TELEPHONE: 239-823-4671MAILING ADDRESS: 227 Serene Ct Ft White, FL 32038

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: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 35-7816-04348-005 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: 10 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☐ N DISTANCE TO SEWER: \_\_\_\_\_ FTPROPERTY ADDRESS: 227 Serene Ct Ft White, FL 32038

DIRECTIONS TO PROPERTY: US 90 to I75 South to SR 47 follow 47 follow through Ft White to CR 138 turning left follow until "S" turn turn on Truluck Rd follow to Serene Ct  
1/2 mile property on left 2nd gate

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	mobile Home	2	2100	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_SIGNATURE: Sony Crews Linda Craft DATE: 1/31/19

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0111

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.

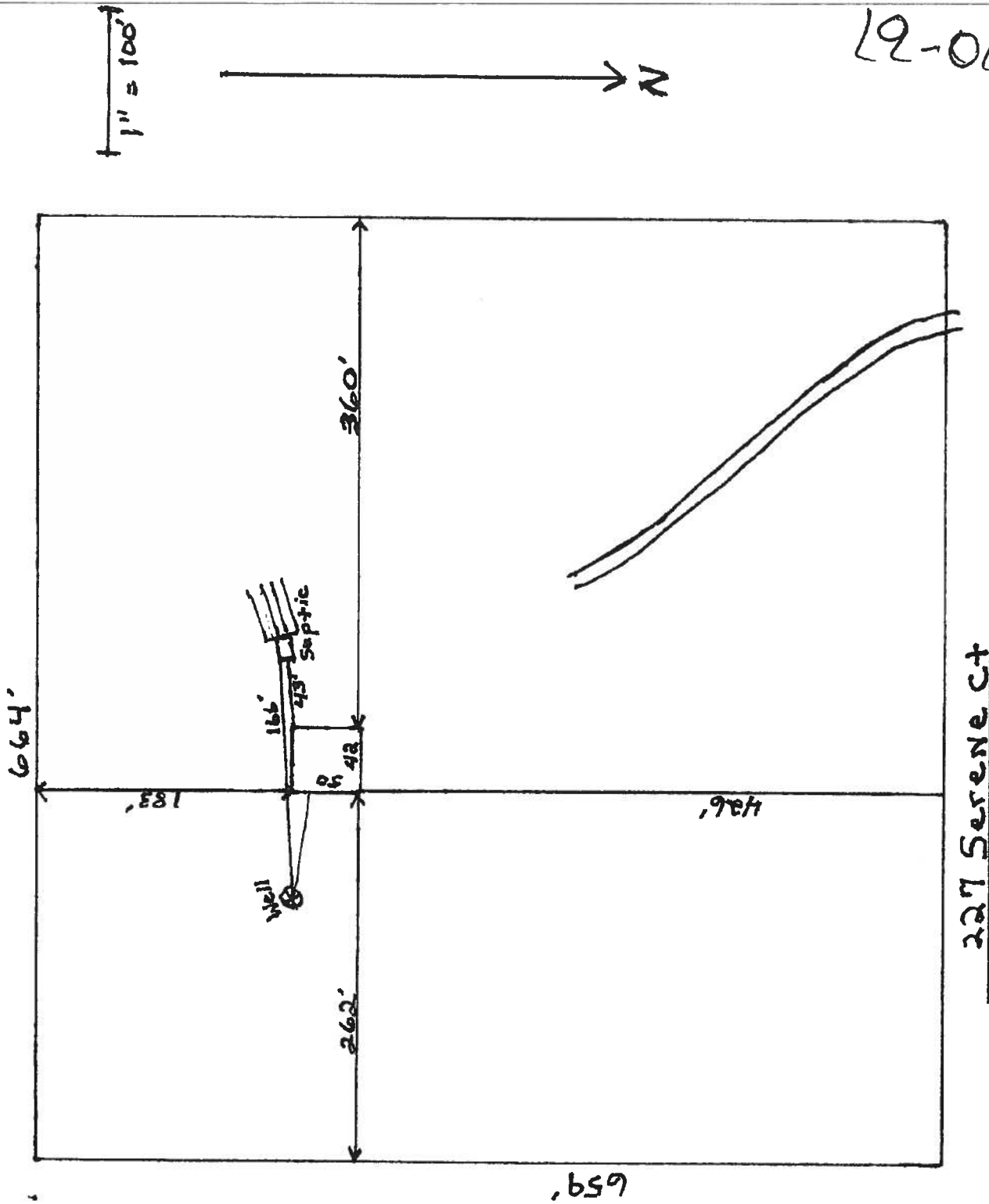


Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: Sonja Crews Linda Craft  
Plan Approved ☒ [Signature] Not Approved ☐ ES1 Date 2/4/19  
By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

19-0111



# MonFort

# MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1901-112 CONTRACTOR Ronnie Norris PHONE 623-7714

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.*

<b>ELECTRICAL</b>	Print Name _____	Signature _____
	License #: _____	Phone #: _____
	Qualifier Form Attached <input type="checkbox"/>	
<b>MECHANICAL/ A/C 950</b>	Print Name <u>Michael A. Boland</u>	Signature <u>[Signature]</u>
	License #: <u>CAC1817716</u>	Phone #: <u>(352) 274-9326</u>
	Qualifier Form Attached <input type="checkbox"/>	

*Qualifier Forms cannot be submitted for any Specialty License.*

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

**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 NUMBER 1901-112 CONTRACTOR Ronnie Norris PHONE 623-7714

**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.***

✓ 1094 <b>ELECTRICAL</b>	Print Name <u>Glen Whittington</u>	Signature <u>Glen Whittington</u>
	License #: <u>EC 13002957</u>	Phone #: <u>386-972-1701</u>
Qualifier Form Attached <input type="checkbox"/>		
<b>MECHANICAL/ A/C</b>	Print Name _____	Signature _____
	License #: _____	Phone #: _____
Qualifier Form Attached <input type="checkbox"/>		

***Qualifier Forms cannot be submitted for any Specialty License.***

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

**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 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, Ronnie Norris, give this authority for the job address show below  
Installer License Holder Name

only, 227 SW Serene Ct Ft White, FL 32038, 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)
Sonya Crews	Sonya Crews	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
Linda Craft	Linda Craft	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> 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.

[Signature]

License Holders Signature (Notarized)

IH102514511 1-23-019

License Number

Date

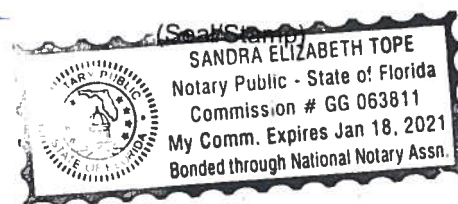
## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronnie Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) 23 day of January, 2019.

[Signature]

NOTARY'S SIGNATURE



## Legend

Parcels

Addresses

2016Aerials

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

AH

DevZones1

others

A-1

A-2

A-3

CG

CHI

CI

CN

CSV

ESA-2

I

ILW

MUD-I

PRD

PRRD

RMF-1

RMF-2

RO

RR

RSF-1

RSF-2

RSF-3

RSF/MH-1

RSF/MH-2

RSF/MH-3

DEFAULT

Roads

Roads

others

Dirt

Interstate

Main

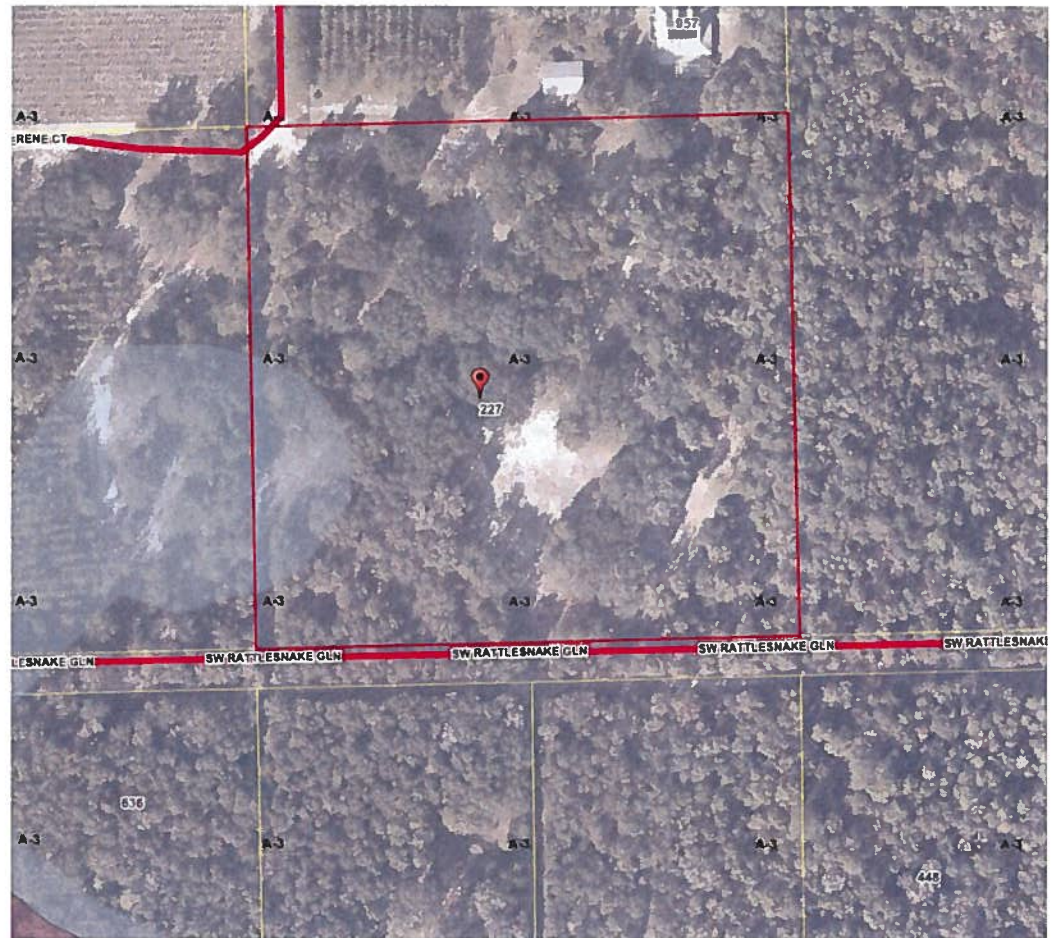
Other

Paved

Private

# Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Feb 07 2019 17:22:48 GMT-0500 (Eastern Standard Time)



## Parcel Information

Parcel No: 35-7S-16-04348-005

Owner: MONFORT VICTORIA L

Subdivision:

Lot: GOV'T LOT 3 SEC 35

Acres: 10.1668787

Deed Acres: 10 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones: 0.2 PCT ANNUAL CHANCE FLOOD HAZARD,

Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

**Columbia County Property Appraiser**

Jeff Hampton

**2018 Tax Roll Year**

updated 2/8/2019

Parcel: &lt;&lt; 35-7S-16-04348-005 &gt;&gt;

Aerial Viewer Pictometry Google Maps

**Owner & Property Info**

Result: 1 of 1

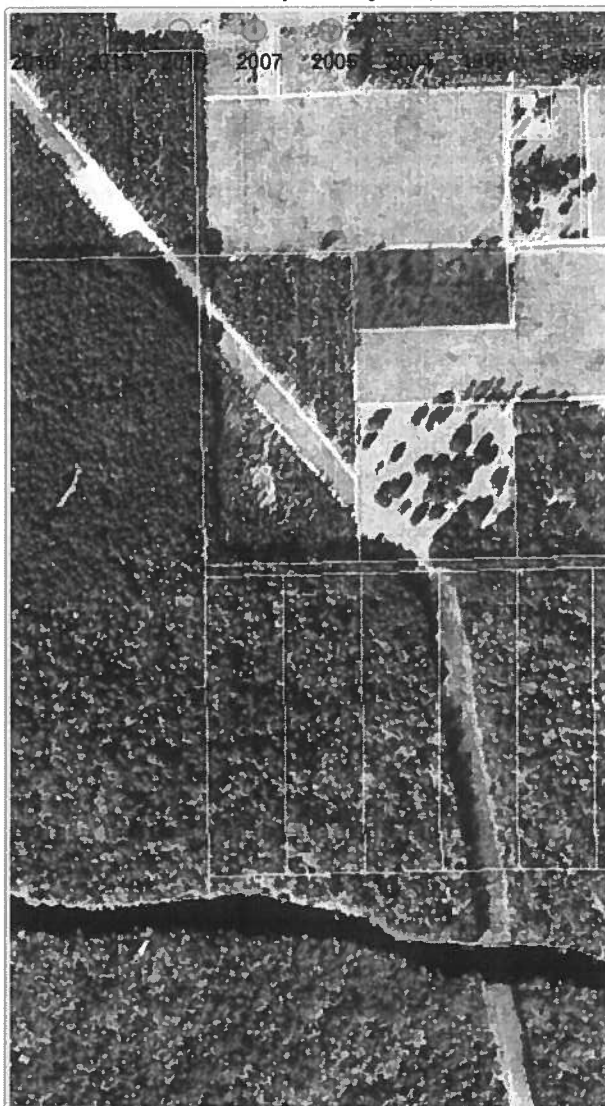
Owner	MONFORT VICTORIA L 9225 BELLEZA WAY #203 FORT MYERS, FL 33908		
Site	227 SERENE CT, FORT WHITE		
Description*	SE1/4 OF NE1/4 OF NW1/4. 700-443, 934-2250, 955-1666, QC 1090-1447(CORR), WD 1096- 1504, WD 1333-1858,		
Area	10 AC	S/T/R	35-7S-16E
Use Code**	AC/XFOB (009901)	Tax District	3

\*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**

2018 Certified Values		2019 Working Values	
Mkt Land (2)	\$46,540	Mkt Land (2)	\$46,540
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (0)	\$0
XFOB (1)	\$32,400	XFOB (1)	\$32,400
Just	\$78,940	Just	\$78,940
Class	\$0	Class	\$0
Appraised	\$78,940	Appraised	\$78,940
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$78,940	Assessed	\$78,940
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$78,940 city:\$78,940 other:\$78,940 school:\$78,940	Total Taxable	county:\$78,940 city:\$78,940 other:\$78,940 school:\$78,940

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
3/23/2017	\$95,000	1333/1858	WD	I	Q	01
9/15/2006	\$200,000	1096/1504	WD	I	Q	
6/4/2002	\$37,000	955/1666	WD	V	Q	

**▼ Building Characteristics**

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

**▼ Extra Features & Out Buildings (Codes)**

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0030	BARN,MT	2007	\$32,400.00	1800.000	30 x 60 x 0	(000.00)

**▼ Land Breakdown**