DATE 03/25/2004

# Columbia County Building Permit

**This Permit Expires One Year From the Date of Issue**

**PERMIT**
**000021655**

APPLICANT JOHN BURKI PHONE 386 935-4604

ADDRESS 3368 256TH STREET O'BRIEN FL 32071

OWNER EUGENE COOK PHONE 454-8880

ADDRESS 149 SW AZTEC GLEN FT. WHITE FL 32038

CONTRACTOR JOE CHATMAN PHONE

LOCATION OF PROPERTY 41S, TR ON 778, TR ON SW ROCK WAY, TR ON AZTEC GLEN, 2ND ON LEFT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION .00

HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 07-7S-17-09929-000 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 6.00

| | | | | |
|---|---|---|---|---|
| Culvert Permit No. | Culvert Waiver | Contractor's License Number | John N Burke | |
| | | IH0000240 | Applicant/Owner/Contractor | |
| EXISTING | 04-0309-E | BK | RK | N |
| Driveway Connection | Septic Tank Number | LU & Zoning checked by | Approved for Issuance | New Resident |

COMMENTS ONE FOOT ABOVE THE ROAD,
NO CHARGE, BURN OUT UNIT

Check # or Cash

## FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by

Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by

Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by

Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by

Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by

M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by

Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by

M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE $ .00 CERTIFICATION FEE $ .00 SURCHARGE FEE $ .00

MISC. FEES $ .00 ZONING CERT. FEE $ FIRE FEE $ WASTE FEE $

FLOOD ZONE DEVELOPMENT FEE $ CULVERT FEE $ **TOTAL FEE** .00

INSPECTORS OFFICE Gale Tedder CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

**"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."**

## This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

*** The well affidavit, from the well driller, is required before the permit can be issued.***

***This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted.***

Pre-Insp.

For Office Use Only  Zoning Official BLK  Building Official RK 3-26-04

AP# 0403-35  Date Received 3/10/04  By LH  Permit # 21655

Flood Zone X  Development Permit N/A  Zoning A-3  Land Use Plan Map Category A-3

Comments

- Property ID # 07-7S-17-09929-000  *(Must have a copy of the property deed
- New Mobile Home ____  Used Mobile Home ✓  Year 1975
- Applicant JOHN BURKI  Phone # 386-935-4604
- Address 3368 256th Street O'BRIEN, FL 32071
- Name of Property Owner EUGENE COOK  Phone# 386-454-8880
- Address 149 SW AZTEC GLN FORT WHITE, FL 32038
- Name of Owner of Mobile Home EUGENE COOK  Phone # ____
- Address 149 SW AZTEC Glen FORT White, FL 32038
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property 4
- Lot Size ____  Total Acreage 6 acres
- Current Driveway connection is existing
- Is this Mobile Home Replacing an Existing Mobile Home YES (Burnt MH)
- Name of Licensed Dealer/Installer Joseph A Chatman  Phone # 386-497-2277
- Installers Address 9241 Hwy 27 Fort White
- License Number IH0000240  Installation Decal # 216033

***The Permit Worksheet (2 pages) must be submitted with this application.***

***Installers Affidavit and Letter of Authorization must be notarized when submitted.***

# PERMIT WORKSHEET



**PERMIT NUMBER** _____

Installer JOSEPH A. CHAPMAN License # IH-0000240

Address of home being installed _____

Manufacturer FLEETWOOD Length x width 12X48

***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 JAC

New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

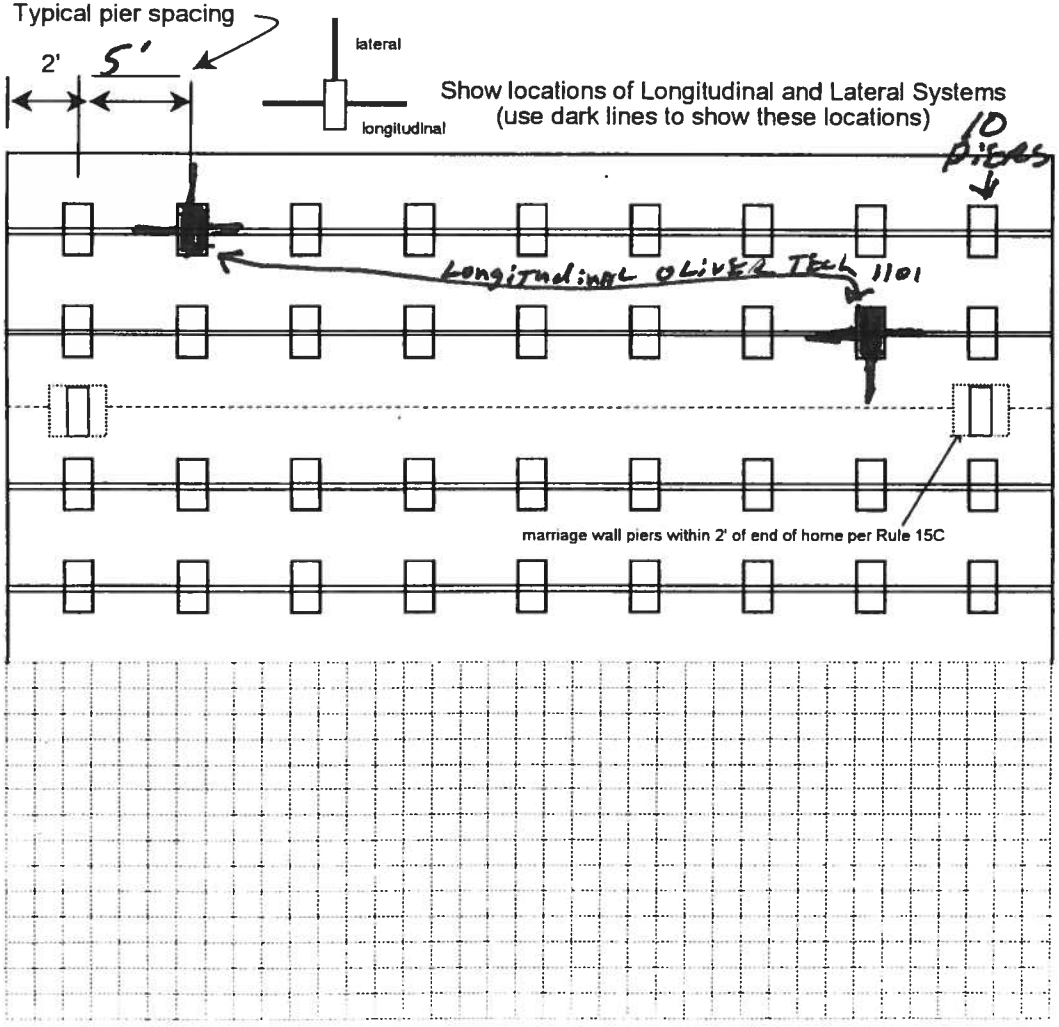
Home is installed in accordance with Rule 15-C ☒

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 216033

Triple/Quad ☐ Serial # 1248

Typical pier spacing




**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 20X20

Perimeter pier pad size 20X20

Other pier pad sizes (required by the mfg.) 20X20 (DOOR PIERS)

☐ 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 |
|---|---|
| N/A | N/A |
| N/A | N/A |
| N/A | N/A |

**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 _____

OLIVER TECH 1101 LV

**FRAME TIES**

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

**OTHER TIES**

OVER HEAD

| | Number |
|---|---|
| Sidewall | 3 PER SIDE |
| Longitudinal | |
| Marriage wall | |
| Shearwall | |

**TIEDOWN COMPONENTS**

***Longitudinal Stabilizing Device (LSD)***
Manufacturer OLIVER TECH 1101 LV

***Longitudinal Stabilizing Device w/ Lateral Arms***
Manufacturer _____

# PERMIT WORKSHEET



**PERMIT NUMBER** _____

## 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 275 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.

JM Installer's initials

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

Installer Name Joshua Cutt

Date Tested 1-8-04 Assumed (Loose Sand)

## 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: N/A | Length: N/A | Spacing: N/A |
| Walls: | Type Fastener: N/A | Length: N/A | Spacing: N/A |
| 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, 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 _____

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 N/A
Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

## 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** Joshua Cutt **Date** 1-8-04

# LIMITED POWER OF ATTORNEY

I, Joseph D. Chastain, license # FH-0000240 hereby authorize JOHN N. BURKI 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 County, Florida.

Property owner: Eugene Cook

Sec 07 Twp. 7S S Rge 17 E

Tax Parcel No. _____

Mobile Home Installer

3-8-04
(Date)

Sworn to and subscribed before me this 8th day of March, 2004.

Notary Public

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

MILDRED J. KING
MY COMMISSION # DD 181682
EXPIRES: April 16, 2007
Bonded Thru Notary Public Underwriters

# 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, JOSEPH A. CHATMAN, license number IH 0000240
Please Print

do hereby state that the installation of the manufactured home for JOHN BURKI
Applicant

at 149 SW AZTEC Glen Ft. White 32038
911 Address

will be done under my supervision.

Signature

Sworn to and subscribed before me this 8th day of March, 20 04.

Notary Public: Mildred J. King
Signature

My Commission Expires: _____
Date

MILDRED J. KING
MY COMMISSION # DD 181682
EXPIRES: April 16, 2007
Bonded Thru Notary Public Underwriters

MORTGAGE DEED

DREW'S FORM R. E. 6½

Manufactured by The H. & W. B. Drew Company
Jacksonville, Florida.

# This Indenture,

145 PAGE 533
OFFICIAL RECORDS

*Made this* 16 *day of* April *, A. D. 19* 63

**Between**

Eugene Cook & Leste Cook ( His .ife
Rt 1. Box 52 , Fort White, Florida

*called the Mortgagor s , and* Frontier Homes, Inc.
5070 Normandy Blvd
Jacksonville, Florida *called the Mortgagee ,*

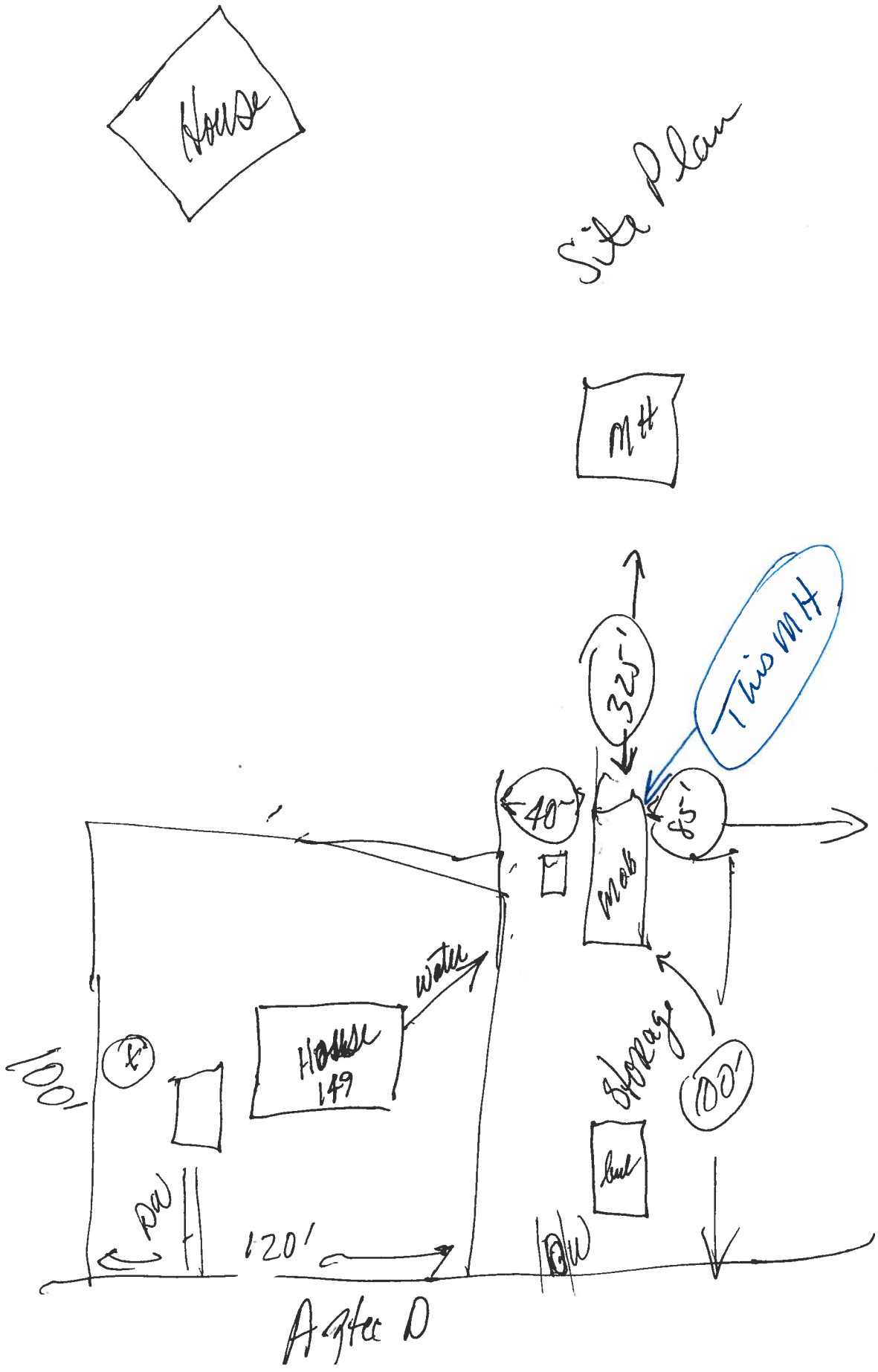
**Witnesseth;** *That the said Mortgagor s , for and in consideration of the sum of*

Ten Dollars and other valuable consiterations - - - - - - - - - - *Dollars,*

*to* them *in hand paid by the said Mortgagees , the receipt whereof is hereby acknowledged,* have *granted, bargained and sold to the said Mortgagee s, Their heirs and assigns forever, the following described land, situate, lying and being in the County of*

Columbia *, State of* Florida *, to-wit:*

A parcel of land situated in the NE¼ of the NW¼ of Section 7, Township 7 South , Range 17 East, Columbia County , Florida More particularly described as follows:
Commencing at the Southwest corner of said NE¼ of NW¼ of Section 7; thence East a distance of 78 feet along the South line of said NE¼ of NW¼ to a point of Beginning; thence East along the said South [illegible]


House
Site Plan
MH
325'
This MH
40'
85'
mob
water
House
149
storage
100'
shed
RW
120'
RW
After D

DATE 3-8-04 INSPECTION TAKEN BY LH

BUILDING PERMIT # _____ CULVERT / WAIVER PERMIT # _____

WAIVER APPROVED _____ WAIVER NOT APPROVED _____

PARCEL ID # _____ ZONING _____

SETBACKS: FRONT _____ REAR _____ SIDE _____ HEIGHT _____

FLOOD ZONE _____ SEPTIC _____ NO. EXISTING D.U. _____

TYPE OF DEVELOPMENT Pre-MH. Insp.

SUBDIVISION (Lot/Block/Unit/Phase) _____

OWNER Eugene Cook PHONE _____

ADDRESS 149 Aztec Glenn Ft. White FL 32038

CONTRACTOR _____ PHONE _____

LOCATION 41 south (R) 778 (R) Rock Rd to end (R) Aztec 1st on the (L)

COMMENTS: MH moved from out of County. This is where it is going

INSPECTION(S) REQUESTED: **INSPECTION DATE:** Tues. or Wed.

_____ Temp Power _____ Foundation _____ Set backs _____ Monolithic Slab

_____ Under slab rough-in plumbing _____ Slab _____ Framing

_____ Rough-in plumbing above slab and below wood floor _____ Other _____

_____ Elecrtical Rough-in _____ Heat and Air duct _____ Perimeter Beam (Lintel)

_____ Permanent Power _____ CO Final _____ Culvert _____ Pool _____ Reconnection

_____ M/H tie downs, blocking, electricity and plumbing _____ Utility pole

_____ Travel Trailer _____ Re-roof _____ Service Change _____ Spot check/Re-check

INSPECTORS:

APPROVED \ NOT APPROVED _____ BY Doug POWER CO. _____

INSPECTORS COMMENTS: wiring of m/H and Kitchen sink must be completed before final inspection.

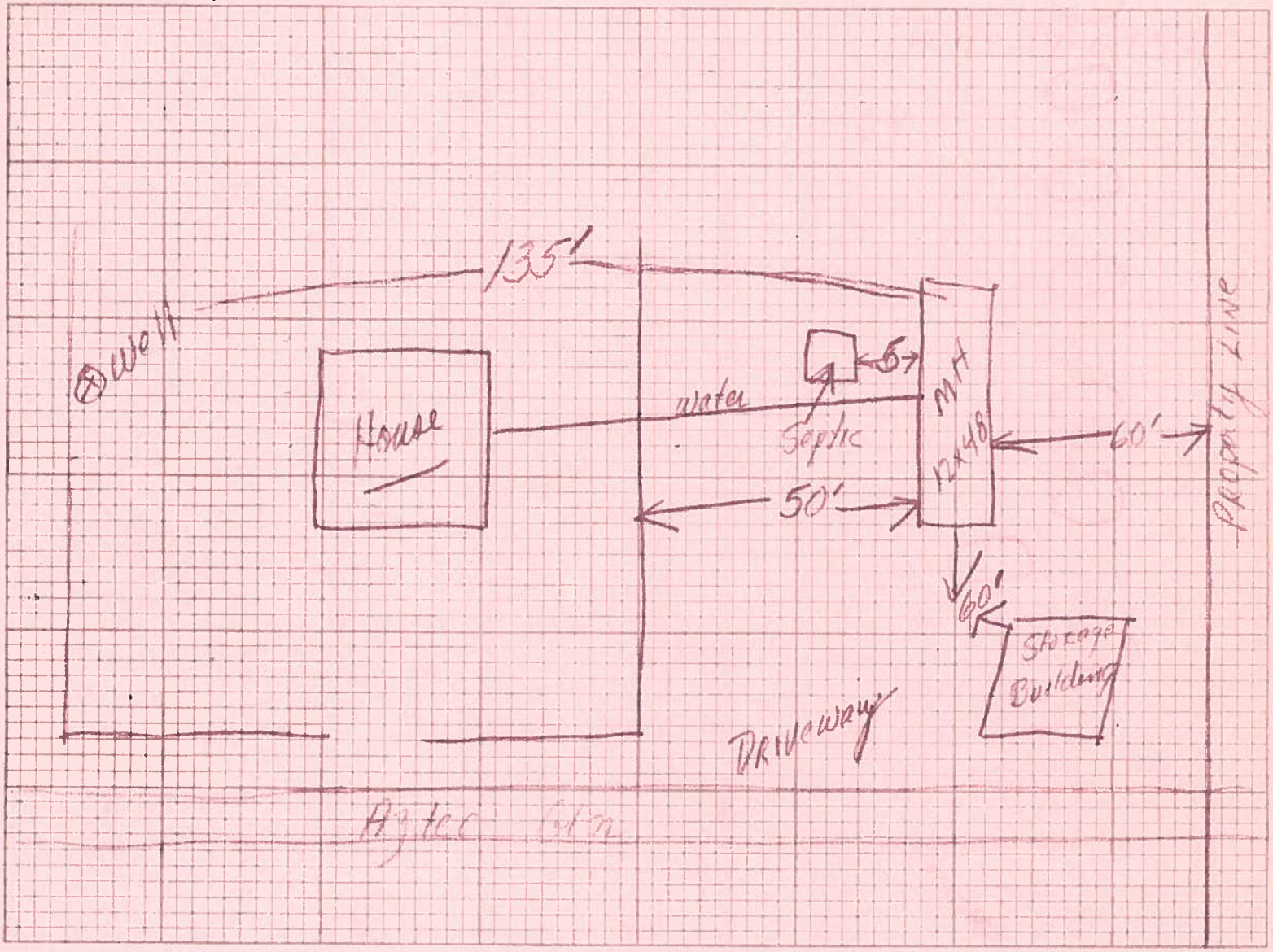
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 14-0379E

PART II - SITE PLAN

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




Notes: (not signed)

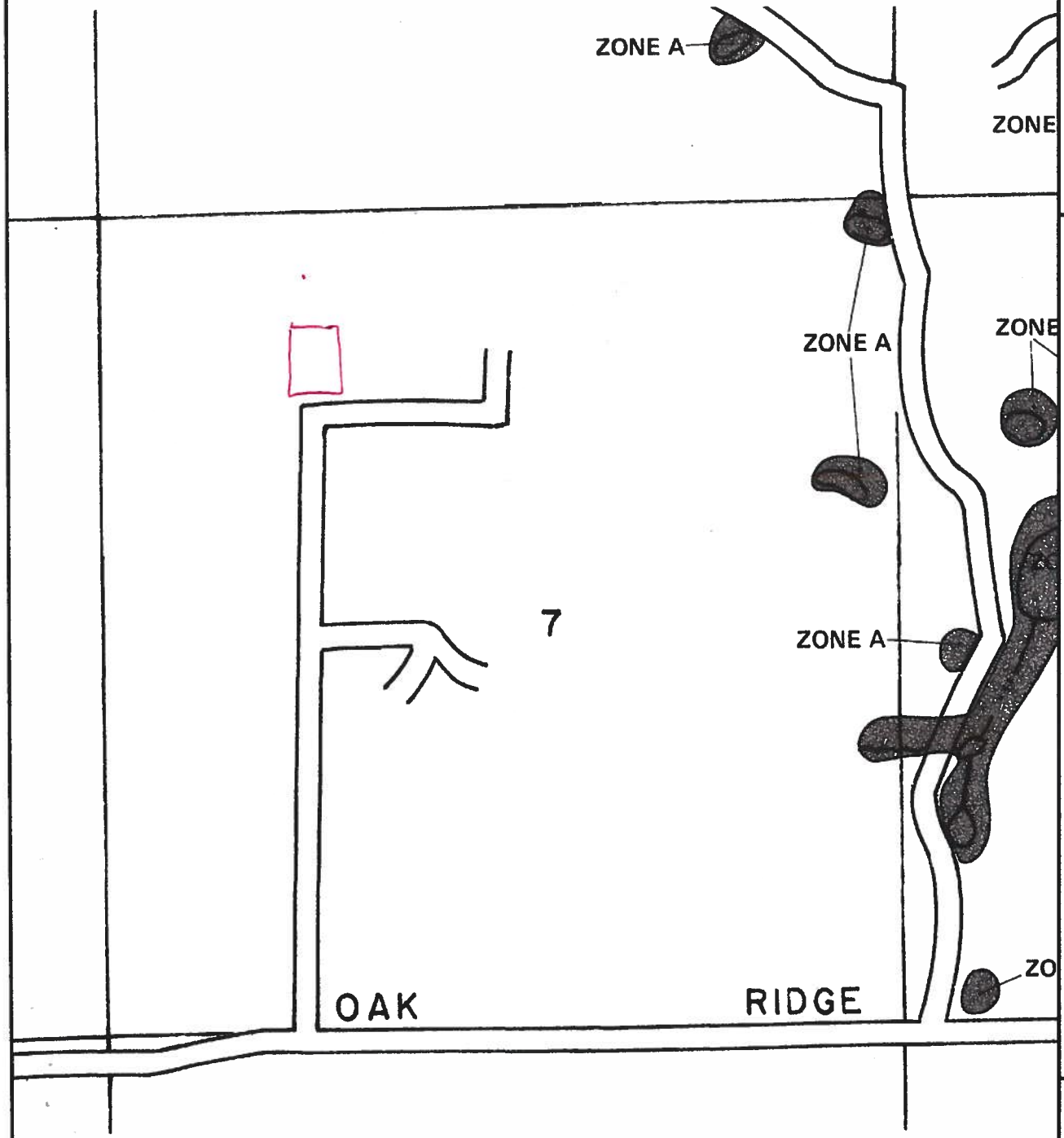
Site Plan submitted by: E [illegible] Signature — property owner Title

Plan Approved _____ Not Approved _____ Date _____

By _____ County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**

0403-35




N

APPROXIMATE SCALE IN FEET

1000 0 1000

NATIONAL FLOOD INSURANCE PROGRAM

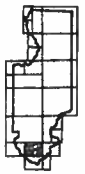
# FIRM

## FLOOD INSURANCE RATE MAP

COLUMBIA COUNTY, FLORIDA
(UNINCORPORATED AREAS)

PANEL 260 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0260 B

EFFECTIVE DATE:
JANUARY 6, 1988

Federal Emergency Management Agency



Print Date 3/25/2004 (printed at scale and type A)