#2493

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	For Office Use Only (Revised 7-1-15) Zoning Official Building Official
A	AP# 44321 Date Received 1 10 20 By MG Permit # 39170
F	lood Zone Development Permit Zoning Land Use Plan Map Category
C	Comments
FI	EMA Map# Elevation Finished Floor River In Floodway
0	Recorded Deed or Property Appraiser PO Site Plan WEH#20-00 Well letter OR
	Existing well Land Owner Affidavit Linstaller Authorization DFW Comp. letter DApp Fee Paid
0	DOT Approval Parent Parcel #13437-000 STUP-MH
	Ellisville Water Sys Assessment an Property Out County In County Sub VF Form
D	02 55 16 02427 007
Pro	perty ID #
•	New Mobile Home MH Size 6 16 Year
•	Applicant Dale Burd Phone # 386-365-7674
•	Address 20619 CR 137, Lake City, FL, 32024
•	Name of Property Owner David & Kathleen Smith Phonet 386-623-1414
•	911 Address 1216 Ski KINLIED AVE LAKE CTG, FL 32024
•	Circle the correct power company - FL Power & Light - (Clay Electric)
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
	Name of Owner of Mobile Home Margaret Hirtz Phone # 386-623-9544
	Address 1214 SW Walter Ave, Lake City, FL, 32024
	Relationship to Property Owner Daughter in law's mother
	Current Number of Dwellings on Property 0
•	Lot Size 566 x 1249 Irregular Total Acreage 37.1
•	Do you : Have Existing Drive (Currently using) pr Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Walver (Circle one) (Not existing but do not need a Culvert)
4	Is this Mobile Home Replacing an Existing Mobile Home No
•	Driving Directions to the Property SR 47 South, TL on Walter Ave, 1.1 miles to access on right
	same as address 1214
•	Name of Licensed Dealer/Installer Bernie Thrift Phone # 386-623-0046
•	Installers Address 5557 NW Falling Creek Road, Lake City, FL, 32055
•	License Number IH-1025155 Installation Decal # 63491

Oliver System

WORKSHEET

page 1 of 2

COLUMBIA COUNTY PERMIT WORKSHEET

911 Address where home is being installed. These worksheets must be completed and signed by the installer. Submit the originals with the packet.

Installer Rennie Thrift License # 1 H i Typical pier specing Installer Sernie Manufacturer i understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. MOTE 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 Nwo! П -See Blacking diagrashe П Nones langibudenal Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) 21 П marriage wall piers within 2" of end of home per Rule 15C Installer's initials Length x width License # 1# 1025155la l'TRE of 676 П capacity Manufacturer Model-1101. Burnes interpolated from Rule 15C-1 pier spacing table Load List all marriage well openings greater than 4 foot and their pier pad sizes below. Other pier pad sizes (required by the mig.) Perimeter pier pad size Longitudinal Stabilizing Device (LSD) l-beam pier pad size Single wide Home is installed in accordance with Rule 15-C Home installed to the Manufacturer's Installation Manual Triple/Quad Double wide **New Home** 1500 psf 2000 psf 2500 psf 3000 psf 1000 cs Opening Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers. (SQ 15) Fooler 8 178 8 TIEDOWN COMPONENTS 16" × 16" MER PAD SIZES PIER SPACING TABLE FOR USED HOMES X Z (266) Serial # Wind Zone II **Used Home** Installation Decal # 18 1/2" x 18 Pier pad size 1/2" (342) 91491 7×25 20° x 20° (400) ත් ත් THLCT 162 16-3843 6349 Wind Zone III 22" x 22" Longitudinal
Marriage wall
Shearwall 4# Sidewall within 2' of end of home spaced at 5' 4" oc POPULAR PAD SIZES 18.5 x 18.5 16 x 22.5 17 x 22 13 1/4 x 26 1 20 x 20 17 3/16 x 25 ᅄ 16 x 16 16 x 18 1/2 x 25 1/2 OTHER TIES 24 × 24 26 × 26 Pad Size FRAME TIES 24" X 24" ANCHORS 예여 X 26" x 28" (876)

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg.

Installer verifies all information given with this permit worksheet

is accurate and true based on the

Installer Signature 1 1644

_Date 12-21-19

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5

COLUMBIA COUNTY PERMIT WORKSHEET

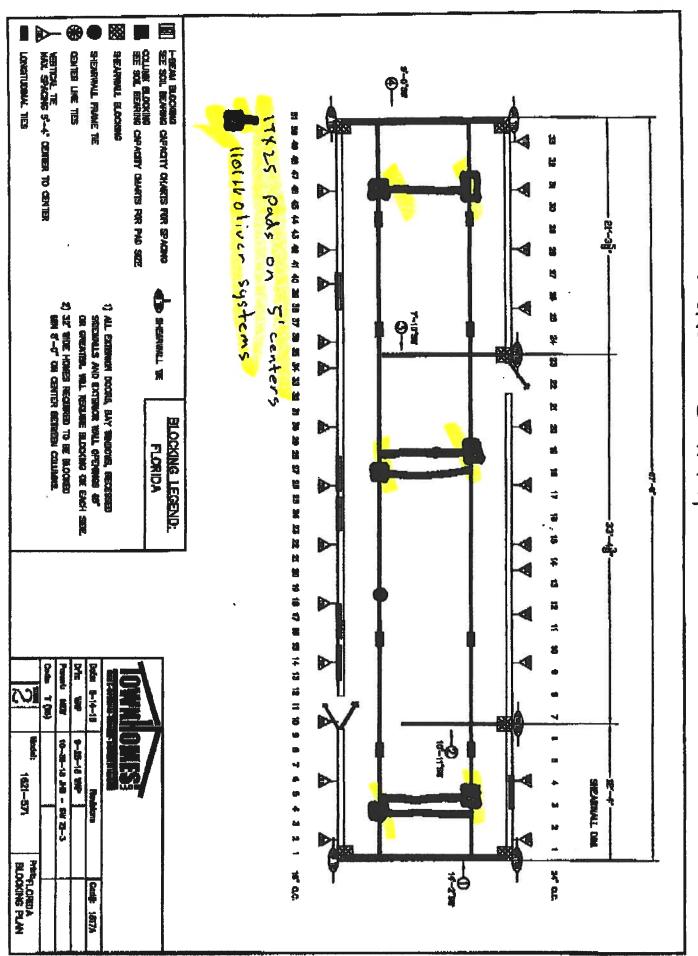
page 2 of 2

Site Preparation

- Other:	
Dectric	
Range	Date Tested 12-17-14
Skirting	Installer Name Bernie 1 hritt
	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER
The bot Siding of Fireplax	anchors are required at all centerline the 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
	Note: A state approved lateral arm system is being used and 4 ft.
Pg.	The results of the torque probe test is 240+ inch pounds or check here if you are declaring 5' anchors without testing
Type ga	TORQUE PROBE TEST
a resum of tape v	x 1500 x 1000 x 1500
homes a	Using 500 lb. increments, take the lowest reading and round down to that increment.
	2. Take the reading at the depth of the footer.
	 Test the perimeter of the home at 6 locations.
Roof:	POCKET PENETROMETER TESTING METHOD
Floor	x 1500 x 1500 x 1500
Water dr	The pocket penetrometer tests are rounded down topsf or check here to declare 1000 lb. soil without testing.
Debris a	POCKET PENETROMETER TEST
	A STATE OF THE PARTY OF THE PAR

Skirting to be installed. Yes No No Diver 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 N/A Electrical crossovers protected. Yes AA Other:	The bottomboard will be repaired and/or taped. Yes Pg. 1.2 Siding on units is installed to manufacturer's specifications. Yes 1/4 Fireplace chimney installed so as not to allow intrusion of rain water. Yes 1/4	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walts 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. Between Floors Between Walts Between Wa	Floor: Type Fastener: A A Length: Spacing: Walls: Type Fastener: A A Length: Spacing: Spacing: Length: Spacing: Spacing: Length: Spacing:	Debris and organic material removed Other Water drainage: Natural Swale Pad Other
--	---	--	---	--





STATE OF FLORIDA COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

	This is to certify that I, (We), David & Kathleen Smith				
	as the owner of the below described property:				
	Property tax Parcel ID number02-5S-16	-03437-007			
	Subdivision (Name, lot, Block, Phase) NA				
	Give my permission for Magaza	HIPTZ	to place a		
	Circle one Mobile Home Travel Trailer / Barn - Sned - Garage / Culvert		f		
	I (We) understand that the named person(s) permit on the property number I (we) have I assessment for solid waste and fire protection	isted above and this could result	in an		
×	aird L Smith	1/3/2020			
	Owner Signature	Date			
×	Lattleen Smith	1/3/2020			
•	Owner Signature	Date			
	Owner Signature	Date			
	Sworn to and subscribed before me this $3rd$ day of $3n$., 2020 . This $FL-DL\#5530-517-48-669$				
	(These) person(s) are personally known to me or produced ID \(\frac{\fr				
	Notary Stamp/ Angee Ford NOTARY PUE STATE OF FL	ORIDA			

Expires 3/18/2023

Parcel:	02-5\$-16-03437-007				
Owner & Pi	roperty Info				
Owner	SMITH DAVID L 1018 SW WALTE LAKE CITY, FL 32	R AVE	3		
Site	, LAKE CITY				
Description*	COMM AT SE COF W 74.46 FT TO W AVE FOR POB, CO W 666.77 FT, S 652 999.50 FT, EAST 2 SOUTH ALONG R/ 1233-1843, QC 130	RD RW OF SW 1 DNT W 1249.22 F 2.97 FT, WEST 6 582.74 FT TO W W 566.97 FT TO	WALTER T, N 229 FT, 84.47 FT, N RD R/W,		
Area	37.1 AC	S/T/R	02-58-16		
Use Code**	PASTURELAN (006200)	Tax District	3		



parcel in any legal transaction.

**The <u>Use Code</u> 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 \	/alues	
2019 Certified Values	2020 Worl	king Values
There are no 2019 Certified	Mkt Land (0)	\$0
Values for this parcel	Ag Land (1)	\$8,904
	Building (0)	\$0
	XFOB (0)	\$0
	Just	\$105,319
	Class	\$8,904
	Appraised	\$8,904
	SOH Cap [?]	\$0
	Assessed	\$8,904
	Exempt	\$0
		county:\$8,904
	Total	city:\$8,904
	Taxable	other:\$8,904 school:\$8,904



Legend

Columbia County, FLA - Building & Zoning Property Map

Printed: Mon Jan 13 2020 14:56:40 GMT-0500 (Eastern Standard Time)

2018 Flood Zones

- 0.2 PCT ANNUAL CHANCE
- A A
- O AE
- AH

Roads

- Roads
- others
- Dirt
- Interstate
- Main
- Other
- Paved
- Private

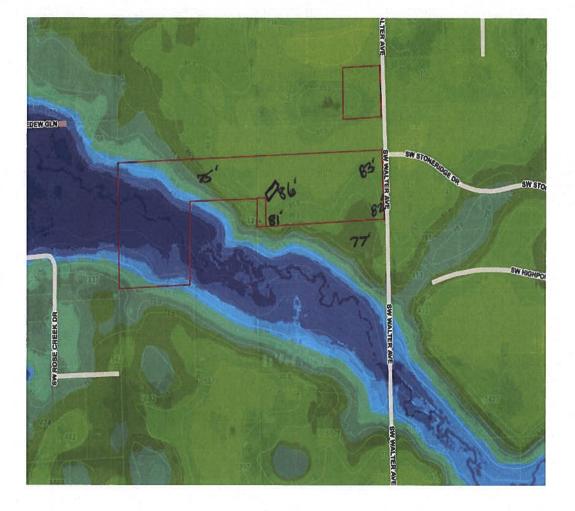
Water Lines

- / Others
- / CANAL/DITCH
- / CREEK
- / STREAM / RIVER

SRWMD Wetlands

D

LidarElevations



Parcel Information

Parcel No: 02-5S-16-03437-000

Owner: SMITH DAVID L & KATHLEEN S

Subdivision:

Lot:

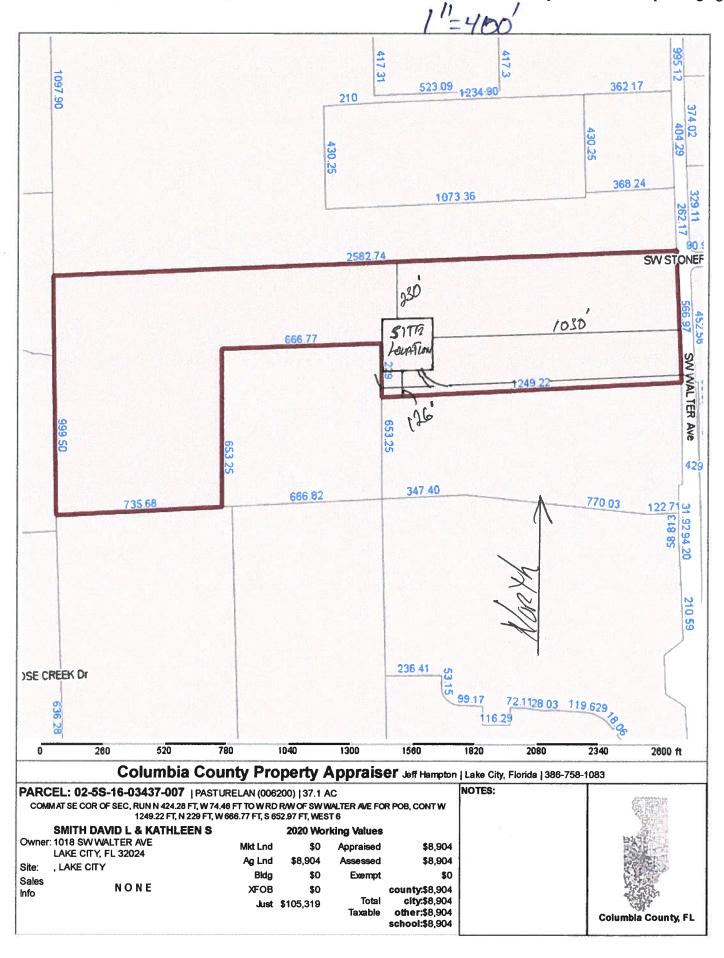
Acres: 40.18428 Deed Acres: 40.51 Ac

District: District 5 Tim Murphy

Future Land Uses: Agriculture - 3, Environmentally Sensitive Areas -1 Flood Zones: AE, 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 implies 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.



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	Permit Application Number		
Smith	PART II - SITEPLAN 2-10		
Scale: 1 inch = 40 feet.			
we 200 210	188 LAU	84	
	65	The Mark The	
Notes: 1 of 3	7.11Acres SEE AttAchEd		
Site Plan submitted by:	Null and it	CONTRACTOR	
Plan Approved	Not Approved	Date	
By		County Health Department	

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER		CONTRACTOR	Bernie Thrift	PHONE	386-623-0046
	and the second s		The Control of the Co		

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

Margaret Hirtz

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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 Glen Whittington	Signature
	License #EC 13002957	Phone #: 386-972-1700
1074	Qualifier Form At	tached X
MECHANICAL/	Print Name Clinton G Wilson	Signature Christian & Wikan
A/C 802	License #: CAC057886	Phone #: 386-496-9000
V	Qualifier Form At	tached

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

LICENSED QUALIFIER AUTHORIZATION

1. Charl Whitington	(license holder name), licensed qualifier			
	Two(company name), do certify that			
the below referenced person(s) listed on this form holder, or is/are employed by me directly or throu officer of the corporation; or, partner as defined in person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcon-	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and			
Printed Name of Person Authorized	Signature of Authorized Person			
1. UNESUR	1			
2. Rocky Fond	2. Joseph)			
3.	3.			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible under my license and fully responsible for compl Local Ordinances. I understand that the State are authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all previous unauthorized persons to use your name and/or licensed Qualifiers Signature (Notarized)	iance with all Florida Statutes, Codes, and ad County Licensing Boards have the power and one committed by him/her, his/her agents, asibility for compliance with all statutes, codes by issuance of such permits. is/are no longer agents, employee(s), or ing of the changes and submit a new letter of lous lists. Failure to do so may allow			
NOTARY INFORMATION: STATE OF: Country OF: Columbia				
The above license holder, whose name is	assissation of the state of the			
NOTARY'S SIGNATURE	Notary Public - State of Florida Commission # FF 243986			

My Comm. Expires Jun 24, 2019



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

LICENSED QUALIFIER AUTHORIZATION

I. Bernie Thrift	(license holder name), licensed qualifier
for Thrift Mobile Hime Services	(company name), do certify that
the below referenced person(a) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(a) is/are under my direct supervision and sign permits; call for inspections and sign subco	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said and control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1, Dale Burd	1.
2.	2.
3.	3.
4.	4.
5 .	5.
I, the license holder, realize that I am responsible under my license and fully responsible for comp Local Ordinances. I understand that the State as authority to discipline a license holder for violatic officers, or employees and that I have full responsed ordinances inherent in the privilege granted	liance with all Florida Statutes, Codes, and nd County Licensing Boards have the power and one committed by him/her, his/her agents, neibility for compliance with all statutes, codes
if at any time the person(s) you have authorized officer(s), you must notify this department in writ authorization form, which will supersede all prevunauthorized persons to use your name and/or	ino of the changes and submit a new letter of lous lists. Failure to do so may allow
Bernard D. J. Licensed Qualifier's Signature (Notsifized)	H 1025155 12/23/2019 License Number Date
NOTARY INFORMATION: STATE OF: Florida COUNTY OF	: Columbia
The above license holder, whose name is Berni personally appeared before me and is known by (type of I.D.) Personally Known on	
NOTARY'S SIGNATURE	PATRICIA II. WILDERS Complicated State (1927) Equino April 21, 2021 Equino April 21, 2021 Equino April 21, 2021

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



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:

1/13/2020 9:27:00 PM

Address:

1210 SW WALTER Ave

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

03437-007

REMARKS: Address for proposed structure on parcel.

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



STATE OF FLORIDA DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL

SYSTEM SYSTEM	DATE PAID:
APPLICATION FOR CONSTRUCTION PERMIT	RECEIPT #: 17405
[] New System [] Existing System [] Holding Tanl [] Abandonment [] Temporary	
AGENT: Robert W Ford ale NEET	30,
AGENT: Robert W Ford JR NFST INC. THE MAILING ADDRESS: 741 SE STATE Rd 100 LC FI	ELEPHONE: 755-6372
TO DE COMPTEMBO DE	
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSBY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFY PROPERTY INFORMATION	TEMS MUST BE CONSTRUCTED STATUTES. IT IS THE E LOT WAS CREATED OR ATHER PROVISIONS.
LOT: BLOCK: SUBDIVISION:	PLATTED.
PROPERTY ID #: 02-55-10-08437-007 ZONING: I/M OI PROPERTY SIZE: 1 ACRES WARRED TO ACRES	D. ROWN
WATER SHIDDLY, 11/2	R EQUIVALENT: [Y/N]
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y/X] PROPERTY ADDRESS OF THE PRIVATE PUBLIC []<=2000GPD []>2000GPD
PROPERTY ADDRESS: 018 SM MOTHER ALL	ICE TO SEWER:
TO PROPERTY: 415, 5, 95 miles (TL) Walter	Ave (TR)
BUILDING INFORMATION	
Unit Type of [] RESIDENTIAL [] COMMERCIA	
No. of Building Commercial/Institute Bedrooms Area Sqft Table 1, Chapter	utional System Design
· M Homo	64E-6, FAC
2 / 10116 / 1088	
3	4
4	
[] Floor/Equipment Drains [] Other (Specific)	
SIGNATURE: Rolent W Jaco L	10 1031
	TE: 1/1/30/19

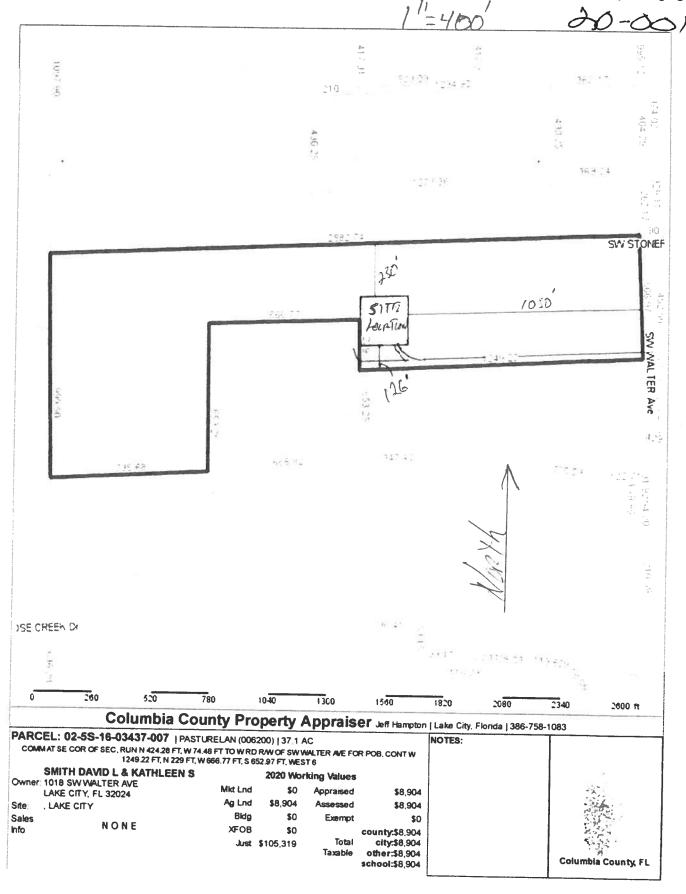
Incorporated 64E-6.001, FAC

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 30-00 6

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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	Permit Application Number 20-00/6
Smith	PART II - SITEPLAN 210
Scale: 1 inch = 40 feet.	·
	477
W 300 910	84
WL	68 BYPOST PET WITH THE PET TO THE
Notes:	1 Acins San Attached
	- PATER II) AORDA INTENTIO
Site Plan submitted by:	CONTRACTOR
Plan Approved_	Not Approved Date \(\begin{align*} \omega & \omeg
Ву	Caulus County Health Department
ALL CHANGES I	IUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)