

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 # 36-65-16-04095-04-21318 Subdivision N/A Lot#

New Mobile Home ☒ Used Mobile Home ☐ MH Size 38x76 Year 2024

Applicant Jessie Shepard Phone # 386-963-4298

Address 3360 15th Place Lake City FL 32024

Name of Property Owner Cory Atkins + Candi Legee Phone # 352-727-2270

911 Address 211 SW Spearmin Ct Fort 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 Cory Atkins + Candi Legee Phone # 352-727-2270

Address 3500 SW Old Bellamy Rd. Fort White FL

Relationship to Property Owner OWNER

Current Number of Dwellings on Property 0

Lot Size 220.55 x 510.05 Total Acreage 2.16

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 On to NE Hernando Rd 1st cross & onto E Duval St

0441 0 US-441 - US Hwy 415 0 SW Tusculum Ave 0 SW Fellowship Ct

0 SW Legree Terrace 0 SW Old Bellamy Rd.

Email Address for Applicant: William Price

Name of Licensed Dealer/Installer William Price Phone # 386-963-4298

Installers Address 3360 15th Place Lake City FL 32024

License Number 1H-1041936 Installation Decal # 101941

**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: 6/14/2021 3:03:12 PM

Address: 211 SW SPEARMINT CT

City: FORT WHITE

State: FL

Zip Code: 32038

Parcel ID: 36-6S-16-04098-004

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

Verification ID: bfcad724-3372-431e-b619-735eda2004e8

Address was reassigned from old address: NEW SW SPEARMINT CT

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
Department of Information Technology
135 NE Hernando Ave. Lake City, FL 32055
Telephone 386-719-1456

77▲551244

Columbia County Property Appraiser

2023 Working Values
updated 8/17/2023

Parcel: 36-65-16-04998-004 (21318)

Owner & Property Info

Owner: LEOREE CANDI S
ATKINS COREY D SR
3000 SW OLD BELLAMY RD
FORT WHITE, FL 32038

Site: 211 SW SPEARMINT CT, FORT WHITE

Description: COMM INCOR OF SE 1/4 OF SE 1/4 RUN E 440.73 FT, S 681.67 FT, E 230.51 FT FOR
POB. CONT E 220.55 FT, S 427.96 FT, W 220.67 FT, N 427.58 FT TO POB. 741-1389-
1394, 963-816, 1007-303, 9872-681, 08105-248, WD 1254-2747, 1279-391, 1279-488.

Area: 2.16 AC

Use Code: VACANT (0000)

STR: 36-65-16

Tax District: 3

The description above is to be used as the legal description for this parcel in any legal transaction.
The accuracy of the legal description (LDS) code and a full explanation for the Property Appraiser's Office. Please contact
the Appraiser's Office for a complete list of codes and a full explanation for the Property Appraiser's Office. Please contact
the Appraiser's Office for a complete list of codes and a full explanation for the Property Appraiser's Office. Please contact

Property & Assessment Values

2022 Certified Values		2023 Working Values	
Mkt Land	\$21,600	Mkt Land	\$21,600
Ag Land	\$0	Ag Land	\$0
Building	\$0	Building	\$0
XFOB	\$0	XFOB	\$0
Just	\$21,600	Just	\$21,600
Class	\$0	Class	\$0
Appraised	\$21,600	Appraised	\$21,600
SOH Cap (%)	\$091	SOH Cap (%)	\$0
Assessed	\$21,600	Assessed	\$21,600
Exempt	\$0	Exempt	\$0
Total	county \$20,908 city \$0	Total	county \$21,600 city \$0
Taxable	other \$0 school \$21,600	Taxable	other \$0 school \$21,600

Sales History

Sale Date	Sale Price	Book/Page	Deed	V/S	Qualification (Code)	RCode
7/16/2014	\$100	12750466	OC	V	U	11
4/15/2013	\$100	12542147	WD	V	U	11
11/15/2005	\$100	10950335	OC	V	U	01
7/9/1998	\$0	0830816	WD	V	U	01
1/20/1991	\$0	07417289	WD	V	U	01

Building Characteristics

Bldg Grade	Description	Year Bt	Base SF	Actual SF	Bldg Value
NONE					

Extra Features & Out Buildings (Code)

Code	Desc	Year Bt	Value	Units	Desc
NONE					

Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0000	VAC RES (MKT)	2.160 AC	1.0000/1.0000/1	\$10,000 (AC)	\$21,600

Aerial Viewer Pictometry Google Maps

2023 2022 2019 2016 2013 Save

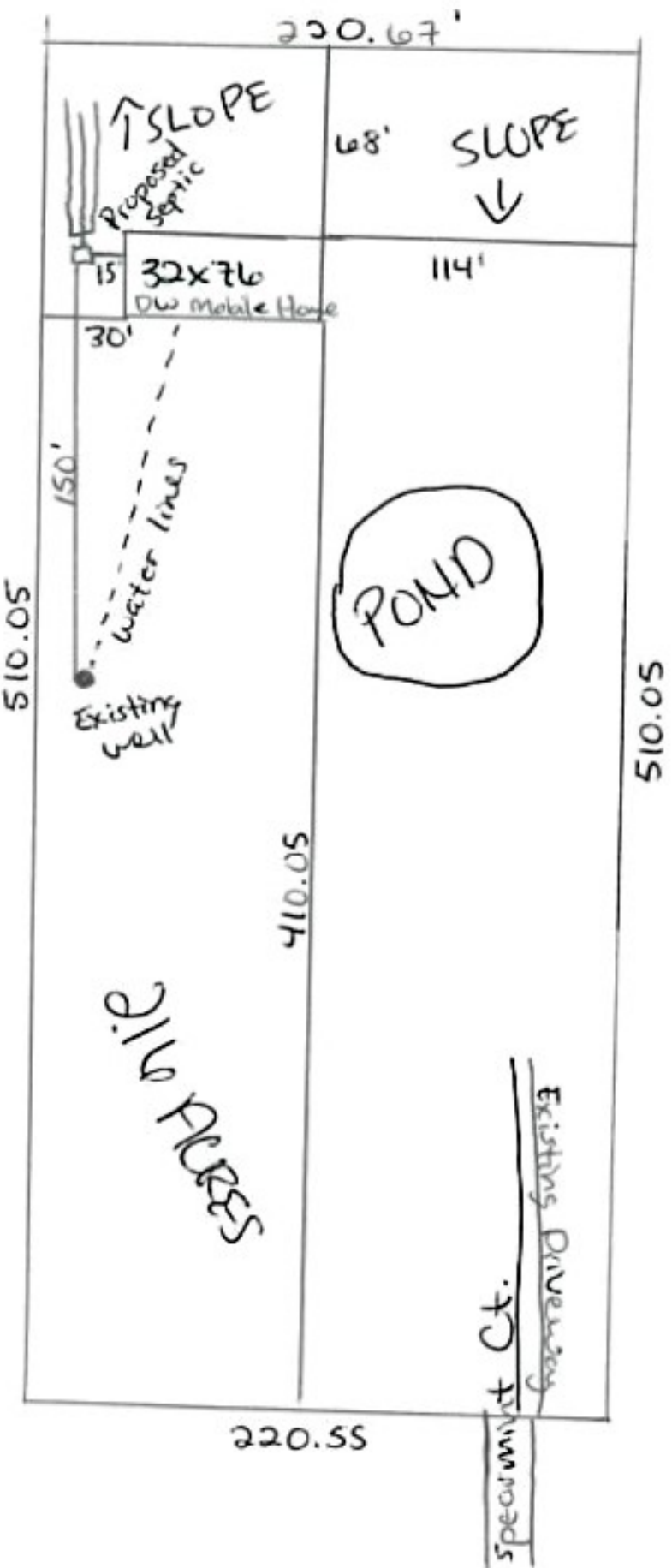


Old Point Site Plan

36-65-14-04098-004 (21318)

all SW Spearmint Ct
Ft White FL 32038

11' 6" =
N





March 4, 2021

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.

ODA PRICE
JESSIE SHEPARD

211 SW Spearman Ct
Fort White FL 32038

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

Contractor's Signature

Sworn to and subscribed to before me this 4th day of March, 2021
By RONALD E BONDS, SR who is personally known to me or has produced _____
as identification and who did/did not take an oath.

Notary Public

My commission expires: 7-7-21



Style Crest, Inc. • 2901 E. 15th St. • Panama City, FL 32405 • 800-259-3470 Fax: 850-784-0745

HOUSEHOLD INSTALLATION SUBCONTRACTOR VERIFICATION FORM

CONTRACTOR William Price PHONE 407-448-8953

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

Permitting Agency and permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have a list of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 440.38, a contractor shall require all subcontractors to provide evidence of workers' compensation or liability insurance and a valid Certificate of Competency license in Columbia County.

The permit holder is responsible for the completed form being submitted to this office prior to the start of any work. Violations will result in stop work orders and/or fines.

Permit Holder	Signature
License #	Phone #
Qualifier Form Attached ☐	
Permit Holder <u>Ronald E. Bonds SR</u>	Signature <u>Ronald E. Bonds SR</u>
License # <u>CAC 1817658</u>	Phone # <u>850-768-1853</u>
Qualifier Form Attached ☐	

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 the required workers' compensation or liability insurance 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.

LIMITED POWER OF ATTORNEY

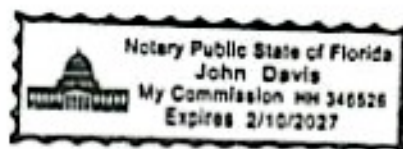
I, Silvana L. Robinson DO HEREBY AUTHORIZE Bob Price or Eve Shepard
TO FULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF
APPLYING FOR A MOBILE HOME PERMIT.

Silvana L. Robinson
SIGNATURE
8-78-23
DATE

211 SW Spearman Ct
Fort White FL 32038

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 21st DAY OF August 2023

John Davis
NOTARY PUBLIC



MY COMMISSION EXPIRES: 02/10/2027
COMMISSION NO. 144 346526
PERSONALLY KNOWN: SC
PRODUCED ID. (TYPE): _____

Atkins/Legree

DOUBLE PITCH INSTALLATION SUBCONTRACTOR VERIFICATION FORM

CONTRACTOR NAME

CONTRACTOR

William Price

PHONE

407-448-0952

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

Columbia County own 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 440.10, a contractor shall require all subcontractors to provide evidence of workers' compensation or compensation, general liability insurance and a valid Certificate of Competency license in Columbia County.

By signing this form, the subcontractor is responsible for the corrected form being submitted to this office prior to the issuance of a permit. Violations will result in stop work orders and/or fines.

PRINCIPAL	Print Name <u>William W. Kirkling</u> License #: <u>EC-13022957</u>	Signature <u>William W. Kirkling</u> Phone #: <u>386 972 1700</u>
Qualifier Form Attached ☐		
ADDITIONAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
Qualifier Form Attached ☐		

Building permit; 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.

Atkins/Legree



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, William M. Price, give this authority for the job address show below
Installer License Holder Name

only, 211 SW Spearman Ct Fort 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)
<u>Oda Price</u>	<u>[Signature]</u>	☒ Agent ☐ Officer ☐ Property Owner
<u>Jessie Sheperd</u>	<u>[Signature]</u>	☒ 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.

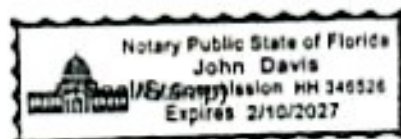
[Signature] License Holders Signature (Notarized) 14-1041936 License Number 8/28/23 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: St. Johns

The above license holder, whose name is William M. Price, personally appeared before me and is known by me or has produced identification (type of I.D.) 28 on this 28 day of August, 2023.

[Signature]
NOTARY'S SIGNATURE





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

I, William Price, give this authority and I do certify that 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	Agents Company Name
<u>Ada Price</u>	<u>[Signature]</u>	<u>Price Rite Enterprise Inc</u>
<u>Jesse Shepard</u>	<u>Jesse Shepard</u>	<u>Price Rite Enterprise Inc</u>

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)

1H-1041936
License Number

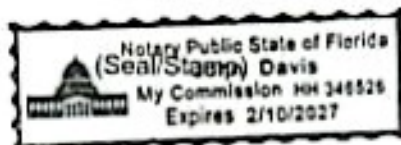
8-28-23
Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Sumner

The above license holder, whose name is William Price,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 28 day of August, 2023.

[Signature]
NOTARY'S SIGNATURE



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psi 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.

ETP Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

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.

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: 1/4" Length: 18" Spacing: 18"
Walls: _____ Type Fastener: 1/4" Length: 18" Spacing: 18"
Roof: _____ Type Fastener: 1/4" Length: 18" Spacing: 18"
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 (see other permitting requirements)

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 ETP

Type gasket ETP

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 6/21/23

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: William Pica License # 11-1041934

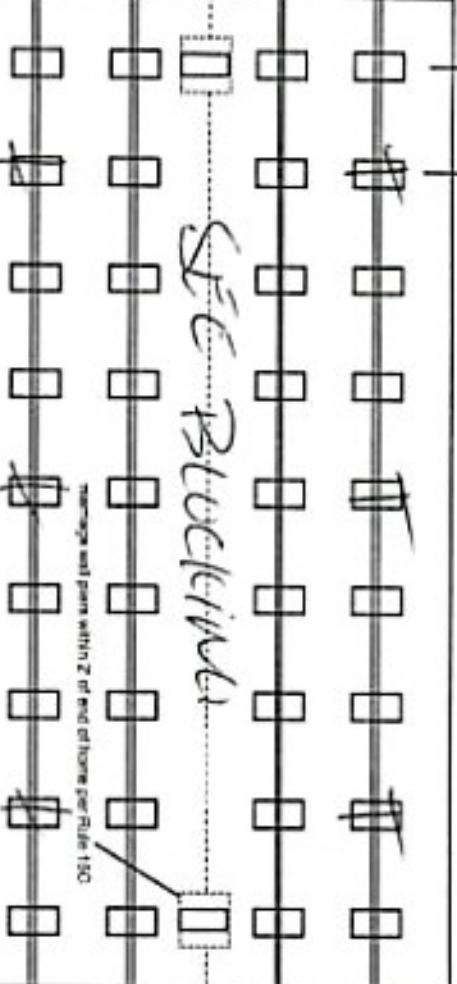
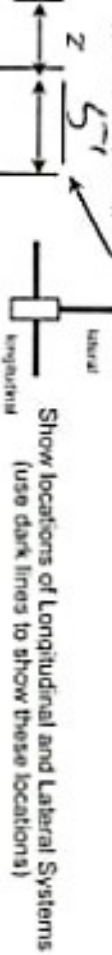
Address of home being installed: All Six Apartments

Manufacturer: OH Length x width: 76' x 33'

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. 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: WHP

Typical pier spacing



VEHICLE DRIVER SYSTEM

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 # 101941

Triple/Quad ☐ Serial # LOHGA1002309413

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (236)	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 5/8"	6"	7"	8"	8"	8"
2000 psf	6"	6"	8"	8"	8"	8"
2500 psf	7 5/8"	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.) _____

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.

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 24 5 ft 5 ft

FRAME TIES

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

OTHER TIES

Longitudinal Stabilizing Device (LSD) _____
Manufacturer _____
Longitudinal Stabilizing Device w/ Lateral Arms _____
Manufacturer _____

Sidewall _____
Longitudinal Marriage wall _____
Shearwall _____

Atkins
No Ser # yet

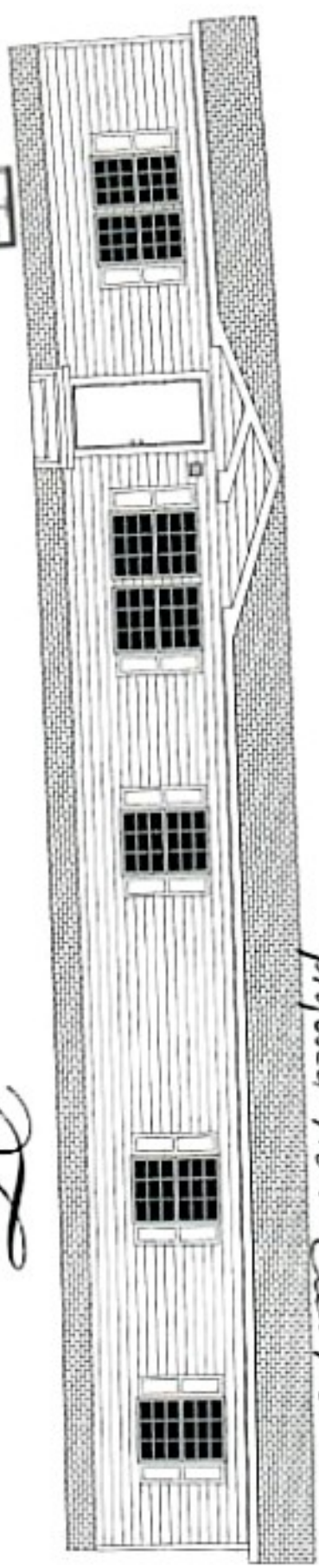


• TIE DOWN LOCATION FOR CONCRETE SLAB SET - tie downs - 4" ANCHOR 5'4" o/c
 • WALLS - 8" CMU - 17'25" ANCHORS OR 23X31 ANCHORS OR 17'25" TIE STACKED.
 • SUPPORT PIER TYPE - 17'25" ANCHORS OR 23X31 ANCHORS OR 17'25" TIE STACKED.
 • FOUNDATION TYPE - 17'25" ANCHORS OR 23X31 ANCHORS OR 17'25" TIE STACKED.
 • THE DRAWING IS FOR THE PROPOSED CONSTRUCTION AND NOT FOR THE EXISTING CONSTRUCTION.
 • THE DRAWING IS FOR THE PROPOSED CONSTRUCTION AND NOT FOR THE EXISTING CONSTRUCTION.
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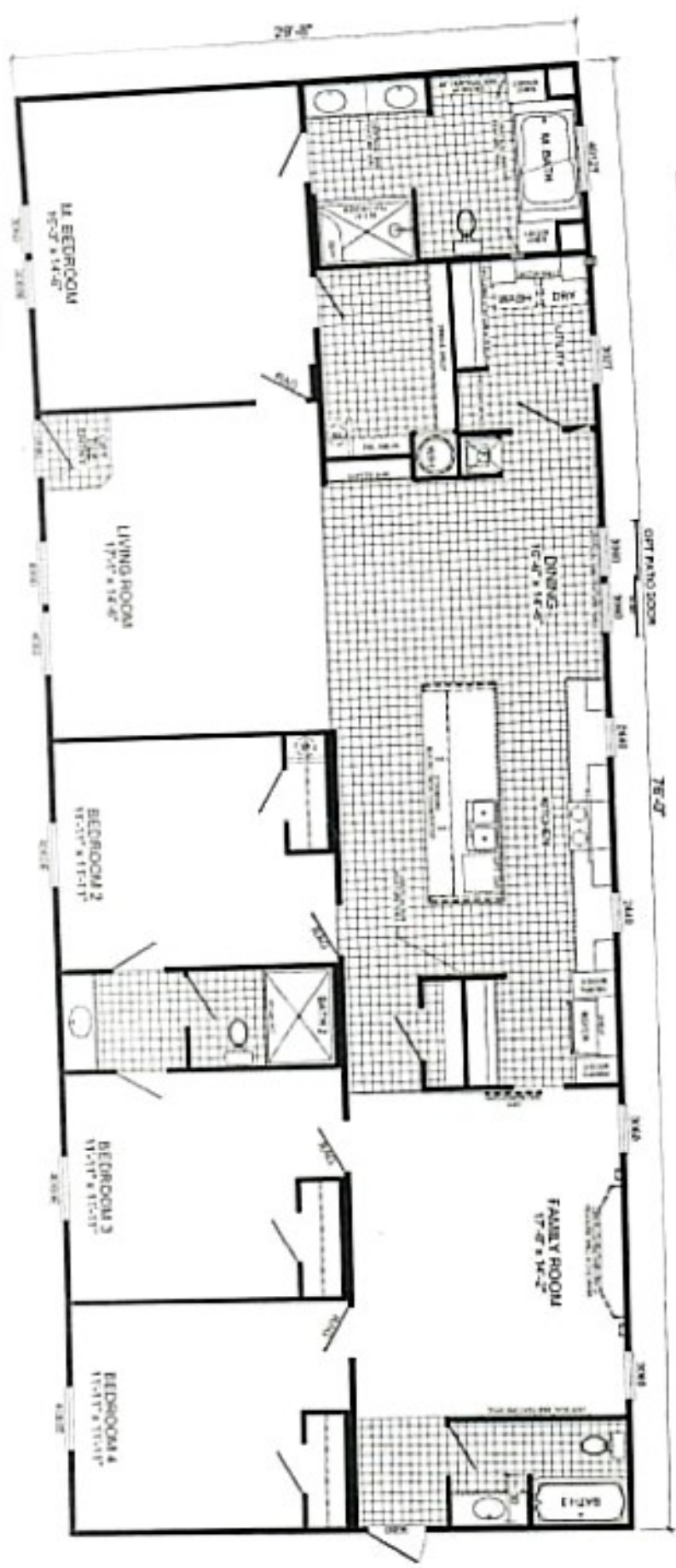
Live Oak Homes
 MODEL: L-3764V - 32 X 80
 4-BEDROOM / 2-BATH
 * All perimeter deck levels
 * All concrete / shear walls 12'0" o/c

(99-1/2" I-BEAM SPACING)
 L-3764V

proposed new lease rates



THANXY



L-3764Z-CLASSIC
4-BEDROOM / 3-BATH
32 X 80 - Approx. 2254 Sq. Ft.

Drawn: 03/08/23
 All room square footage figures are approximate.
 * Listed data is based on information provided by the seller and is not to be relied upon as a basis for any transaction.

COHMA
LEMAC

Atkins

32450

License Number: IH / 1041936 / 1 Name: WILLIAM R PRICE

Order #: 5884	Label #: 101941	Manufacturer:	(Check Size of Home)
Homeowner:		Year Model:	Single _____
Address:		Length & Width:	Double _____
City/State/Zip:		Type Longitudinal System:	Triple _____
Phone #:		Type Lateral Arm System:	HUD Label #:
Date Installed:		New Home: _____ Used Home: _____	Soil Bearing / PSF:
Installed Wind Zone:		Data Plate Wind Zone:	Torque Probe / in-lbs:
Note:			Permit #:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

101941	
LABEL #	DATE OF INSTALLATION
WILLIAM R PRICE	
NAME	
IH / 1041936 / 1	5884
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.

Price Rite Enterprise Inc.
"Where Quality Meets Value"
386-963-4298

Authorized Agent Form

ATKINS

1. Candi Legree
Corey Atkins DO HERBY AUTHORIZE:
ODA PRICE
JESSIE SHEPARD

TO PULL MY PERMITS AND ACT ON MY BEHALF AS MY AUTHORIZED
AGENT, IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME PERMIT.

Candi Legree
Corey Atkins
SIGNATURE

8-24-2023
DATE

parcel # 36-65-16-04098-004
21318

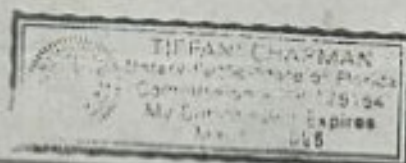
211 SW Spearmint Ct
Ft. White FL 32038

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 24 DAY OF Aug 2023

Tiffani Chapman
NOTARY PUBLIC

(STAMP)

Tiffani Chapman
NOTARY PUBLIC PRINT



MY COMMISSION EXPIRES: _____

COMMISSION NO: _____

PERSONALLY KNOWN: ☒

PRODUCED ID. (TYPE): _____