

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

✓ SERIAL #

For Office Use Only (Revised 7-1-15) Zoning Official MA Building Official MA  
 AP# 1908-56 Date Received 8/15 By W Permit # 38551  
 Flood Zone X Development Permit \_\_\_\_\_ Zoning A-3 Land Use Plan Map Category Ag  
 Comments floor one fast above the road  
Legal Decendants and lot of record from 1983  
 FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_  
 \* Recorded Deed or ☐ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0324 ☐ 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 owed ☐ Out County ☐ In County ☒ Sub VF Form

Property ID # 06-75-16-04146-003 Subdivision NA Lot# NA  
 • New Mobile Home ☒ Used Mobile Home NA MH Size 1460 Year 2019  
 • Applicant Tyler Keast Phone # 386.266.3372  
 • Address 570 NE LANTANA RD Branford FL 32008  
 • Name of Property Owner Tyler Keast Phone# 352 351-1999 (AGENT)  
 • 911 Address 225 SW NICE 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 Tyler Keast Phone# 352-351-999  
 Address 570 NE Lantana Rd Branford FL 32008  
 • Relationship to Property Owner NA  
 • Current Number of Dwellings on Property 0  
 • Lot Size 2 acres ± Total Acreage 2.13 ac  
 • 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 From Subway at Ft White take  
Wilson Springs Rd to Nice Ct - Right on Nice Ct  
then left to drive on right -  
we have crew  
 • Name of Licensed Dealer/Installer FL Mobile Martensdor Phone# (352) 351-6100  
 • Installers Address 4650 NE 35th St Ocala FL 34479  
 • License Number IH-1025316 Installation Decal # 576321

JW SENT email 8.16.19

# Mobile Home Permit Worksheet

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

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

Installer: Wendell Cross

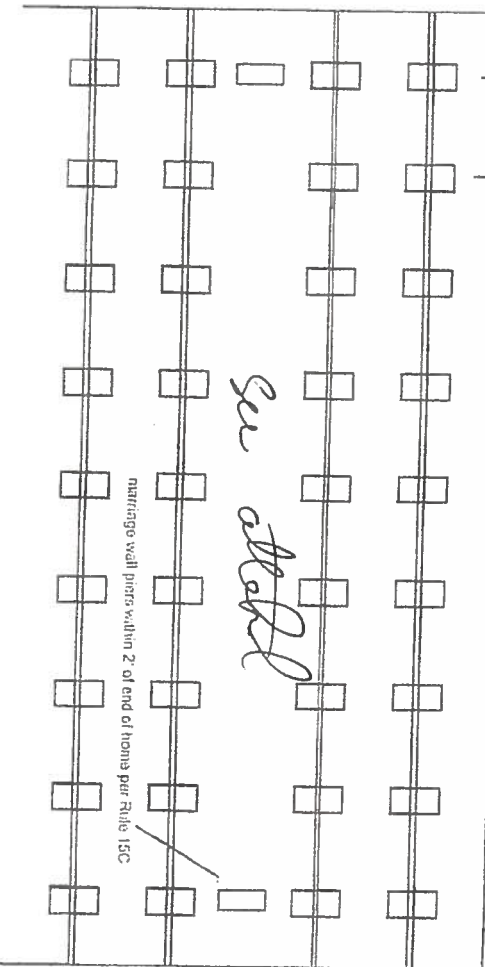
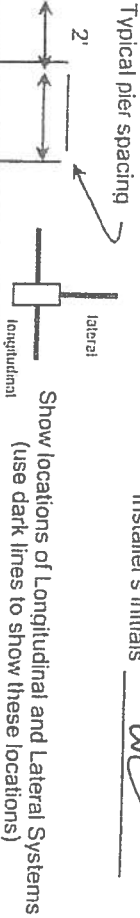
License # TH1025316

Address of home being installed Passive Hill CT SE White Et

Manufacturer Truhone Length x width 60 X 14

**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 WC



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 # 576321

Triple/Quad ☐

Serial # 5RB033385AL

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'	4'	5'	6'	7'	8'
1500 psf	4' 6"	6'	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	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 X 25

Perimeter pier pad size NA

Other pier pad sizes (required by the mfg.) 16 X 16 DOORS

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 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

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

OTHER TIES

Number of ties 5 Sidewall Longitudinal Marriage wall Shearwall Oliver

# 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 280 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.

WC Installer's initials

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

Installer Name

Wendell Crews

Date Tested

6-20-19

## 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. N/A

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. N/A

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

## Site Preparation

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

### Fastening multi wide units

Floor: Type Fastener: N/A Length: ✓ Spacing: ✓  
Walls: Type Fastener: N/A Length: ✓ Spacing: ✓  
Roof: Type Fastener: N/A 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 WC

Type gasket N/A

Pg. ✓

### Installed:

Between Floors Yes N/A  
Between Walls Yes N/A  
Bottom of ridgebeam Yes N/A

### Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 13  
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 ☒

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

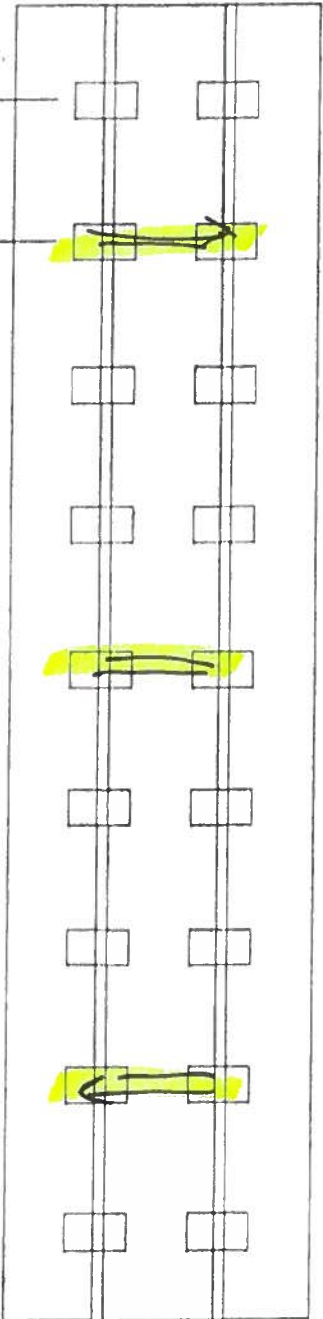
Wendell Crews

Date 6-20-19

# BLOCKING PLAN

Manufacturer  
Length x Width

Truehome  
14x60



2' 1" 7' 1" 2' 1"  
Spaces at  
Typical oc

Soil Bearing Capacity

1500

Probe test / anchor length

N/A / 4+5 ft on loads over 3150 #

I-beam Pier Pad size

17x25

Perimeter Pier Pad size

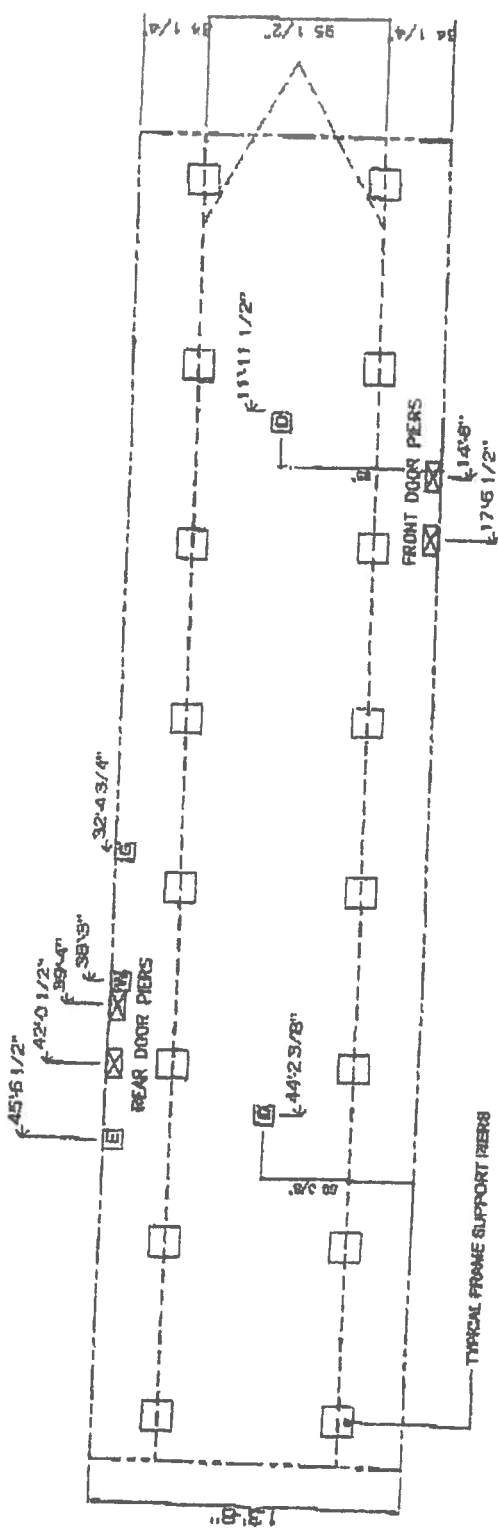
16x16  
DOOR

Pier Spacing based on set-up manual for 1500 PSF Soil.  
Model 1100 All Steel Foundation system by Oliver Technologies  
4 ft ground anchors except were loads exceed 3150 lbs then 5 ft. anchors

14602A

20 lb ROOF LOAD		GENERAL OPENINGS (FT)				
SCHEDULED OPENINGS PER LOAD		REQUIRED PER JOIST (FEET)				
14' BOX WIDTH		3	4	5	6	8
		1175	1330	1485	1640	1950
						2250

FOR 20 lb & 40 lb ROOF LOAD REFER TO TABLES 7 & 7a OF THE INSTALLATION MANUAL



- NOTES:
1. REFER TO TABLES 5 AND 6 IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT DO NOT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 7 AND 7a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS. REFER TO TABLE 9 FOR PIER CONFIGURATION AND MAXIMUM ALLOWABLE HEIGHTS. ALWAYS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 10, 10a AND 20).
  2. THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 6" I-BEAMS IS 8 FEET, 10" & 12" I-BEAMS IS 10 FEET.
  3. SERVICE DROP LOCATIONS IDENTIFIED ARE APPROXIMATE.
  4. FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY. CONTACT THE MFG FACILITY FOR SPECIFICATIONS OF OPTIONS ORDERED.

This home does not require plans before the final roof exterior doors per 2008.5.11(p)(2)(B). This home has been designed with additional floor joists for support of the exterior door transfers per detail SLD-444 (or SLD-449).

820 SQ. FT. (STD PLAN "CONDITIONED")  
SQ. FT. (W/OPT. PORCH/RECESS "CONDITIONED")

<b>TRU</b>		Model # TRU14602A		Drawn #
Product Designer: H. J. J.		Date: 1/15		TRU-146
14' x 60' Per				

SERVICE DROP LEGEND		PIER LEGEND	
[S] - ELECTRICAL DROP		[ ] - ELECTRICAL DROP	
[W] - WATER PIET		[ ] - WATER PIET	
[D] - DRYER VENT/DROP		[ ] - DRYER VENT/DROP	
[G] - GAS PIET		[ ] - GAS PIET	

## Legend

LidarElevations



Parcels

2018Aerials



Addresses

SRWMD Wetlands



2018 Flood Zones

0.2 PCT ANNUAL CHANCE



A



DevZones1



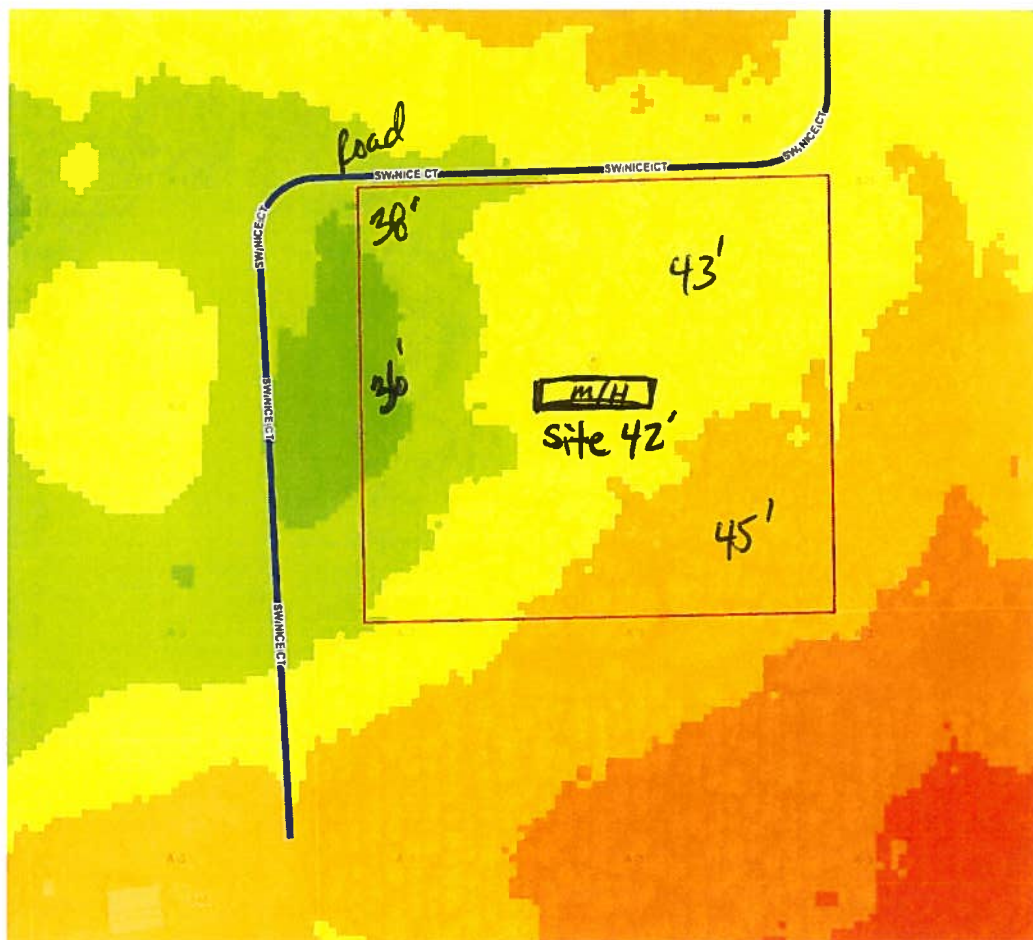
others



A-1

# Columbia County, FLA - Building & Zoning Property Map

Printed: Thu Aug 29 2019 08:00:33 GMT-0400 (Eastern Daylight Time)



## Parcel Information

Parcel No: 06-7S-16-04146-003

Owner: NORTHERN ALACHUA HOLDINGS LL

Subdivision:

Lot:

Acres: 2.12220478

Deed Acres: 2.13 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones:

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.



# AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF COLUMBIA

This is to certify that I, (We), NORTHERN ALACHUA HOLDINGS, LLC as the owner of the below described property:

TAX PARCEL # 06-7S-16-04146-003

SUBDIVISION (Name, lot, block, phase): THE E 313.86 FT OF THE W 538.86 FT OF S 295 FT OF N 800 FT OF NW1/4 OF NE1/4. ORB 524-755, 596-340, DC ORB 753-480, 840-598, 855-671. TD 1134-614, QT 1163-1517

Give my permission to Mr. Tyler Keast to place a mobile home travel trailer/single family home (circle one) on the above-mentioned property and to pull all permits necessary for well and septic as they are leasing the subject property from me.

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

Mark R. Keast

Owner Signature

4/15/19

Date

Sworn to and subscribed before me this day of 15 day of APRIL, 2019. This person is (☒) personally know to me or ( ) produced ID \_\_\_\_\_.  
(Type)

Charles L. Brooker

Notary Public Signature

FAITH M. BROOKER

Notary Printed Name

Notary Stamp



FAITH M BROOKER  
Commission # GG 204583  
Expires April 28, 2022  
Bonded Thru Budget Notary Services



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

### Detail by Entity Name

Florida Limited Liability Company  
NORTHERN ALACHUA HOLDINGS, LLC

### Filing Information

<b>Document Number</b>	L07000019665
<b>FEI/EIN Number</b>	20-8538880
<b>Date Filed</b>	02/21/2007
<b>State</b>	FL
<b>Status</b>	ACTIVE

### Principal Address

20638 NW 78TH AVENUE  
ALACHUA, FL 32615

**Mailing Address**

20638 NW 78TH AVENUE  
ALACHUA, FL 32615

**Registered Agent Name & Address**

SULLIVAN, MARK P  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

### Authorized Person(s) Detail

### Name & Address

Title MGRM

SULLIVAN, MARK P  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

Title MGRM

SULLIVAN, NANCY J  
20638 NW 78TH AVENUE  
ALACHUA, FL 32615

## Annual Reports

Report Year	Filed Date
2017	01/20/2017

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: **4/18/2019 1:39:27 PM**

Address: **225 SW NICE Ct**

City: **FORT WHITE**

State: **FL**

Zip Code **32038**

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Parcel ID **04146-003**

---

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](mailto:gis@columbiacountyfla.com)

SSO 109905743



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

PERMIT NO. 19-0324  
DATE PAID: 4/18/19  
FEE PAID: 425.80  
RECEIPT #: 1489616

## APPLICATION FOR:

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

APPLICANT: Tyler Wayne Keast

AGENT:

TELEPHONE: 386-266-3371

MAILING ADDRESS: 570 NE Centara Rd Brandon FL 32008

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 #: 06-75-16-04146-003 ZONING: I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 2.13 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [ ] ☐ ≤2000GPD [ ] ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 225 SW Nice Ct Fort White FL 32038

DIRECTIONS TO PROPERTY:

## 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	3	1,248	
2				
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify)

SIGNATURE:

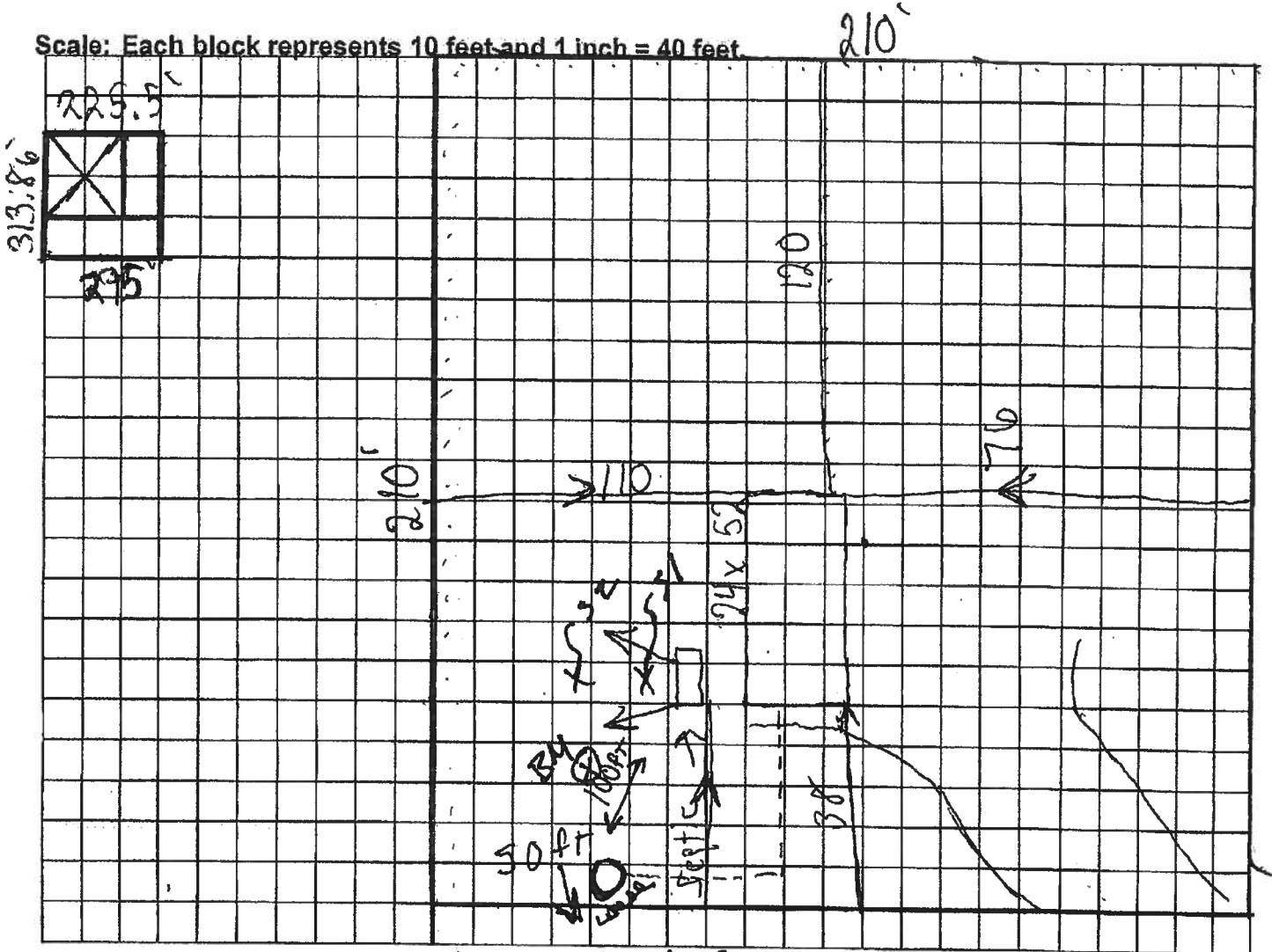
DATE:

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 19-0324

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

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



Notes: 1 acre of 2

Site Plan submitted by: [Signature] Dwney 4/18/19  
Plan Approved X Not Approved \_\_\_\_\_ Date 4/25/19  
By [Signature] ES II Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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, Wendell Crews, give this authority for the job address show below  
Installer License Holder Name

only, 225 SW 790 NICK CT FT WHITE FL, 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>Tyler Kerst</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
<u>SOUTHERN COMFORT MOBILE HOME CENTER INC. DAVID SHACKLE, President</u>	<u>SOUTHERN COMFORT MOBILE HOME CENTER INC. [Signature] President</u>	<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.

Wendell Crews License Holders Signature (Notarized) IH1025316 License Number 6-20-19 Date

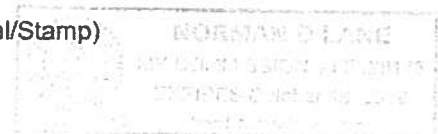
## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: MARION

The above license holder, whose name is WENDELL CREWS, personally appeared before me and is known by me or has produced identification (type of I.D.) 2022 on this 20 day of JUNE, 2019.

[Signature]  
NOTARY'S SIGNATURE

(Seal/Stamp)



**Andrews Site Prep, Inc.  
8230 SW State Road 121  
Lake Butler, FL 32054  
386-867-0572  
Well Lic # 2699**

May 1, 2019

To: Columbia County Building Department

We will be drilling a 4" well for Tyler Keast located at 225 Sw Nice Ct. Fort White Fl. 32038. Parcel # 06-7S-16-04146-003. The well should go approximately 100 feet with a casing depth of 80 feet. We will install a 1hp aermotor submersible pump and a 32 gallon challenger bladder tank.

Thank you,



Barton Andrews Jr.





## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1908-56 CONTRACTOR Wendell Cnews PHONE 352.351.195

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 <u>TYLER KEAST</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature  Phone #: <u>386-266-3372</u>
<b>MECHANICAL/</b> <b>A/C</b> 	Print Name <u>Tyler KEAST</u> License #: <u>Owner</u> Qualifier Form Attached <input type="checkbox"/>	Signature  Phone #: <u>386-266-3372</u>

**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.