

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 12/2023)

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 # _____

☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid ☐ 911 App

☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____

☐ Ellisville Water Sys ☐ Assessment _____ ☐ In County ☐ Sub VF Form

***This page not required if Online Submission**

Property ID # 18-3S-18-10296-001 Subdivision _____ Lot# _____

▪ New Mobile Home YES Used Mobile Home _____ MH Size 16X76 Year 2026

▪ Applicant MYLENE WATTS Phone # 386-249-2041

▪ Address _____

▪ Name of Property Owner YOUNGBLOOD LAURIEHAYES PA Phone# _____

▪ 911 Address 664 NE HARRINGTON CT LAKE CITY, FL 32055

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

▪ Name of Owner of Mobile Home JENNA YOUNGBLOOD/JESSEE YOUNGBLOOD Phone # 561-324-8363

Address 664 NE HARRINGTON CT, LAKE CITY

▪ Relationship to Property Owner SON

▪ Current Number of Dwellings on Property 1

▪ Lot Size _____ Total Acreage 1.14

▪ 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 Yes/No

▪ Name of Licensed Dealer/Installer TOBY JOHNSON Phone # _____

▪ Installers Address _____

▪ License Number: IH1085437 Installation Decal # 122560

Is the mobile home currently located in Columbia County? Yes No (Only required for used homes)

Applicant Email Address: BMYLES1920@ICLOUD.COM

(This is where application updates will be sent)