

cash  
PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

1/5 SEVEN #

**For Office Use Only**

(Revised 7-1-15)

Zoning Official 2MA

Building Official 2MA

AP# 1902-42-A Date Received 2-18-19 By LH Permit # 37839

Flood Zone X Development Permit \_\_\_\_\_ Zoning A-3 Land Use Plan Map Category Ag

Comments SFLP 1904 Approved 2-7-19

FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor 1 above the road River \_\_\_\_\_ In Floodway \_\_\_\_\_

☒ Recorded Deed or ☐ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0154 ☐ Well letter OR

☒ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☐ DOT Approval ☒ Parent Parcel # 04310-000 ☐ STUP-MH ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment owed ☐ Out County ☒ In County ☒ Sub VF Form

2-20-19

Property ID # 24-75-16-04310-013 Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_

▪ New Mobile Home \_\_\_\_\_ Used Mobile Home ☒ MH Size 28x46 Year 2000

▪ Applicant Summer McKee Phone # 352-538-4728

▪ Address 28113 NW 182nd Ave High Springs FL 32643

▪ Name of Property Owner Summer McKee Phone# 352-538-4722

▪ 911 Address 133 SW Autumn Glen, 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 Summer McKee Phone # 352-219-2600

Address 28113 NW 182nd Ave High Springs FL 32643

▪ Relationship to Property Owner Same

▪ Current Number of Dwellings on Property 0

▪ Lot Size 330' x 330' 1.98 acres Total Acreage 1.98

▪ 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 : 475, (C) 27', (R) Shiloh, (L) Spirit, (L) Autumn Glen, 1st on (L)

▪ Name of Licensed Dealer/Installer Fernon Jones Phone # 352-318-4734

▪ Installers Address 2795 SW 71st Ave Lake Butler, FL 32057

▪ License Number TH1025410 Installation Deca. # 49328

Sent 911 to Mutt 2-19-19

(49328)

LH-Spoke to Summer 3-7-19

\$615.90

# Mobile Home Permit Worksheet

Installer: Forman Jones License # IL110259146

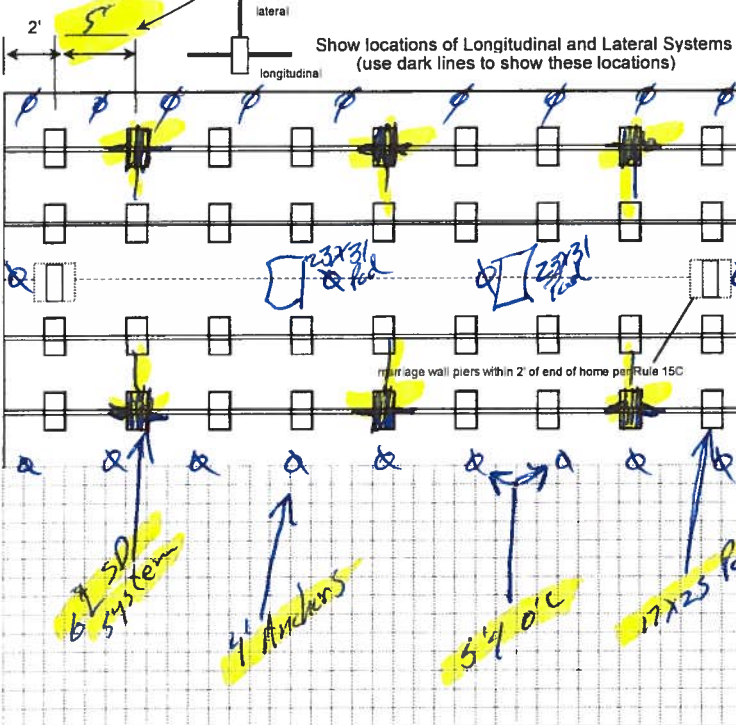
Address of home being installed \_\_\_\_\_

Manufacturer skyline Length x width 28' x 66'

**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 FJS

Typical pier spacing



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

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 # 59604

Triple/Quad ☐ Serial # 9D630126 M B

## 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'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	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 17x25

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 23x31

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 12' greater Pier pad size 23x31

## 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 ☒

## FRAME TIES

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

## OTHER TIES

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer \_\_\_\_\_

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer OLiver Tech

Number \_\_\_\_\_  
 Sidewall \_\_\_\_\_  
 Longitudinal \_\_\_\_\_  
 Marriage wall \_\_\_\_\_  
 Shearwall \_\_\_\_\_

## Mobile Home Permit Worksheet

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

### POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to \_\_\_\_\_ psf or check here to declare 1000 lb. soil \_\_\_\_\_ without testing.

X 1000

X 1000

X 1000

### 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 1000

X 1000

X 1000

### TORQUE PROBE TEST

The results of the torque probe test is 276 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.

IP 276 Installer's initials

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

Installer Name Fernan Jones  
Date Tested 2/4/19

### 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. 15

### Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15

### Site Preparation

Debris and organic material removed ☒  
Water drainage: Natural \_\_\_\_\_ Swale \_\_\_\_\_ Pad ☒ Other \_\_\_\_\_

### Fastening multi wide units

Floor: Type Fastener: 6/16 Length: 6" Spacing: 24  
Walls: Type Fastener: 6/16 Length: 6" Spacing: 24  
Roof: Type Fastener: 6/16 Length: 6" Spacing: 24  
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 \_\_\_\_\_

Type gasket rolled Foam Installed: \_\_\_\_\_  
Pg. \_\_\_\_\_ 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 ☒ No \_\_\_\_\_  
Electrical crossovers protected. Yes ☒  
Other: \_\_\_\_\_

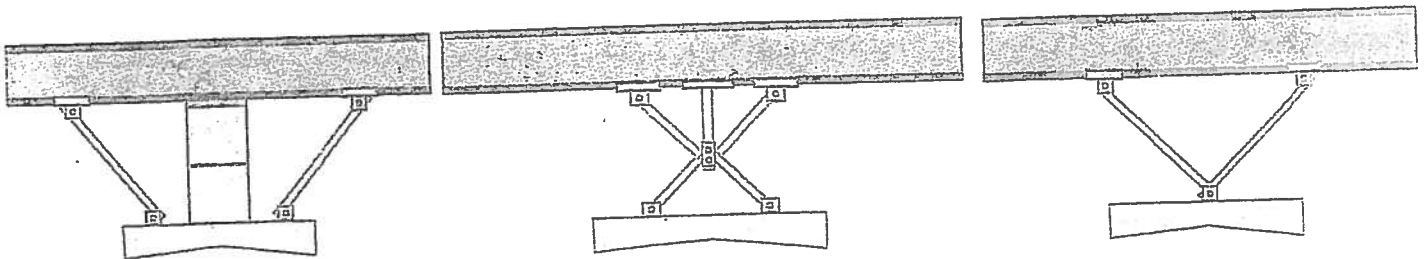
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Fernan Jones Date 2/4/19

## ANCHORS AND TIE-DOWNS

### *Longitudinal protection, continued*

Other approved longitudinal stabilization are these types of steel mechanical systems called longitudinal stabilizing devices.

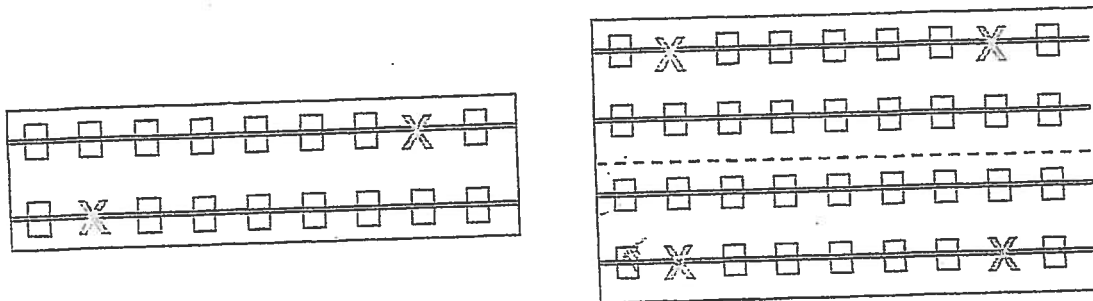


Longitudinal Protection using approved  
Longitudinal Stabilizing Devices  
(LSDs)

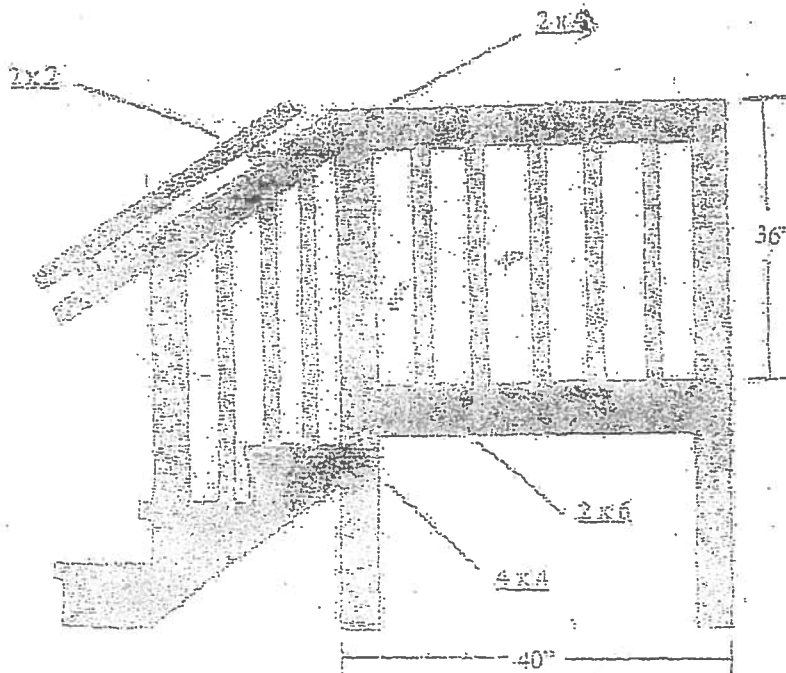
LSD systems may be used in place of the required longitudinal straps, anchors and stabilizer plates. Two systems are required per section of home. A single wide will get two LSDs and a double wide will require four and a triple wide will require six. For the correct placement of these systems see the diagram below.

Commonly found violations when using the lateral arm systems:

- The required self tapping screws were not installed or another type of screw was used.
- The LSD arms were not properly connected to the I-beam or galvanized pan.
- Five foot anchors were required by the home manufacturer and 4 foot anchors were installed.
- The LSD arms are installed at too steep an angle.
- The galvanized pan is not fully embedded into the soil.



Longitudinal Stabilizing Devices shown on typical blocking plans.



SUBMITTED BY HALL SERVICES, INC.

ALL STEPS ARE CONSTRUCTED FROM PRESSURE TREATED PINE.  
 STEP PLATFORM IS 40" X 40".  
 PICKETS ARE NO MORE THAN 4" APART.  
 THE SUM OF 1 TREAD AND 2 RISERS ARE BETWEEN 24" AND 25".

FASTENERS USED:

#3x3" GAL. DECK SCREWS  
 #10x4" GAL. DECK SCREWS  
 #6 GAL. RING SHANK NAILS



LANDS OF  
WANDA T. HENNINGSON  
TAX PARCEL NO  
24-75-16-04200-00  
10RB 1150 PAGE 453  
10" x 12"

ON DRIVER OF NW 1/4  
1/4 OF NE 1/4  
4" CM 15 4727

617

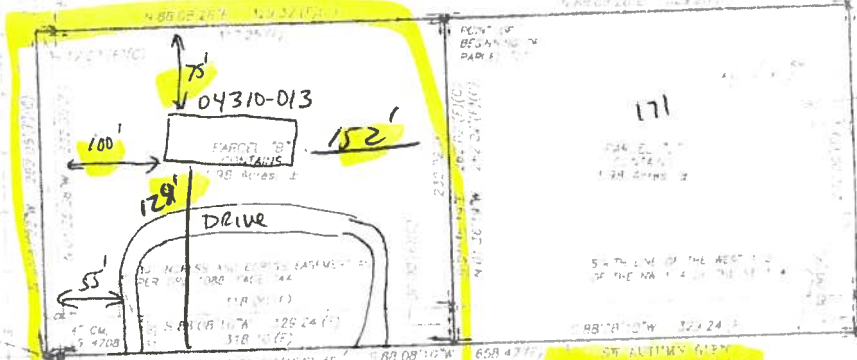
725

OTHER LANDS OF  
ARICK ANDREW AND ANGELA SUE MCKENZIE  
TAX PARCEL NO  
24-75-16-04310-000  
10RB 1150 PAGE 453  
CONTAINS 14.15 ACRES  
NOT A PART

04310-000

791

ON DRIVER OF NW 1/4  
4" CM 15 4728  
POINT OF BEGINNING TO PARCEL 79  
POINT OF COMMENCEMENT OF PARCEL 79



LANDS OF  
MATTHEW T. AND PAUL A. BOUTIN  
TAX PARCEL NO  
24-75-16-04310-012  
10RB 1150 PAGE 453

## FAMILY RELATIONSHIP AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF COLUMBIA

Inst: 201912003814 Date: 02/18/2019 Time: 11:22 AM  
Page 1 of 2 B: 1378 P: 1216, P. DeWitt Cason, Clerk of Court  
Columbia County, By: LK  
Deputy Clerk

BEFORE ME the undersigned Notary Public personally appeared, Arick McKenzie  
the Owner of the parent parcel which has been subdivided for and  
Summer McKenzie, the Immediate Family Member of the Owner, which is  
intended for the Immediate Family Members primary residence use. The Immediate Family  
Member is related to the Owner as Daughter. Both individuals being  
first duly sworn according to law, depose and say:

1. Affiant acknowledges Immediate Family Member is defined as parent, grandparent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
2. Both the Owner and the Immediate Family Member have personal knowledge of all matters set forth in this Affidavit.
3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Parent Tract Tax Parcel No. 24-75-16-04310-000
4. The Immediate Family Member holds fee simple title to certain real property divided from the Owners' parent parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No. 24-75-16-04310-013.
5. No person or entity other than the Owner and Immediate Family Member to whom permit is being issued, including persons residing with the family member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the property.
6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for an Immediate Family Member being in compliance with the density requirements of the Columbia County's Comprehensive Plan and Land Development Regulations (LDR's).
7. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

*Arick Andrew McKenzie*  
Owner

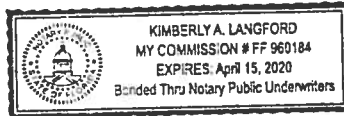
Arick Andrew McKenzie  
Typed or Printed Name

*Summer Faye McKenzie*  
Immediate Family Member

Summer Faye McKenzie  
Typed or Printed Name

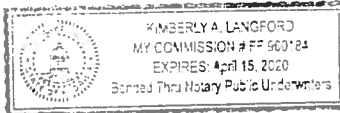
Subscribed and sworn to (or affirmed) before me this 28<sup>th</sup> day of JANUARY, 2019,  
by Arick Andrew McKenzie (Owner) who is personally known to me or has produced  
\_\_\_\_\_ as identification.

*Kimberly A. Langford*  
Notary Public



Subscribed and sworn to (or affirmed) before me this 28<sup>th</sup> day of JANUARY, 2019,  
by SUMMER FAYE MCKENZIE (Family Member) who is personally known to me or has  
produced \_\_\_\_\_ as identification.

*Kimberly A. Langford*  
Notary Public



APPROVED:  
COLUMBIA COUNTY, FLORIDA

By: *Laurie H.*

Name: Laurie H.

Title: O.M.





Inst: 201912003806 Date: 02/18/2019 Time: 10:41AM  
Page 1 of 4 B: 1378 P: 1189, P.DeWitt Cason, Clerk of Court  
Columbia, County, By: LK  
Deputy ClerkDoc Stamp-Deed: 0.70

**Prepared By**

Arick Mckenzie  
28113 nw 182nd ave.  
High Springs, Florida  
32643

**After Recording Return To**

Summer Mckenzie  
28113 nw 182nd ave.  
High Springs, Florida  
32643

---

Space Above This Line for Recorder's Use

**FLORIDA QUIT CLAIM DEED**

State of Florida

Columbia County


KNOW ALL MEN BY THESE PRESENTS, that for and in consideration of the sum of One-Dollar (\$1.00) and/or other valuable consideration to the below in hand paid to:

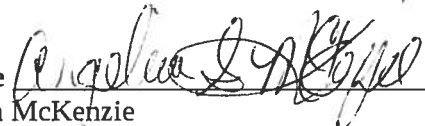
Arick McKenzie and Angelia McKenzie, a married couple, residing at 28113 nw 182nd ave., High Springs, Florida, 32643.


The receipt whereof is hereby witnessed and acknowledged, the undersigned hereby quitclaims to Summer McKenzie, a single individual, residing at 28113 nw 182nd ave. , High Springs, Florida, 32643 (hereinafter called the "Grantee(s)") all the rights, title, interest, and claim in or to the following described real estate, situated in Columbia County, Florida, to-wit:

Attached

**To have and to hold**, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

**Grantor's Signature**  Date February 18th 2019  
**Print Name:** Arick McKenzie  
**Address:** 28113 nw 182nd ave., High Springs, Florida, 32643

**Grantor's Signature**  Date February 18th 2019  
**Print Name:** Angelia McKenzie  
**Address:** 28113 nw 182nd ave., High Springs, Florida, 32643

**Witness's Signature**  Date February 18th 2019

James Hart  
Name of Witness  
450 paradise Ln Bronson, FL.  
Street Address

**Witness's Signature**  Date February 18th 2019

Janet B. Frierson  
Name of Witness  
7320 NW 158<sup>th</sup> St. Altchua, FL 32615  
Street Address

State of Florida

County of Alachua

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that ARICK m'KENZIE & Angela m'KENZIE whose names are signed to this Quit Claim Deed, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they, executed the same voluntarily on the day the same bears date.

Given under my hand this 18 day of February, 2019.

Debbie Pittenger (SEAL)  
Notary Public

My Commission Expires: 6/13/22



DEBBIE PITTENGER  
Commission # GG 200307  
Expires June 13, 2022  
Banded Thru Budget Notary Services

DESCRIPTION: PARCEL "B"

PART OF THE WEST  $\frac{1}{2}$  OF THE NW  $\frac{1}{4}$  OF THE NE  $\frac{1}{4}$  OF SECTION 24, TOWNSHIP 7 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT A CONCRETE MONUMENT, LS 4708, MARKING THE SW CORNER OF THE WEST  $\frac{1}{2}$  OF THE NW  $\frac{1}{4}$  OF THE NE  $\frac{1}{4}$  OF SECTION 24, TOWNSHIP 7 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND THENCE N.01 DEGREES 37'22"W., ALONG THE WEST LINE OF SAID NW  $\frac{1}{4}$  OF THE NE  $\frac{1}{4}$ , A DISTANCE OF 262.05 FEET; THENCE N.88 DEGREES 08'26"E., 12.07 FEET TO A 5/8" IRON ROD, LS 4708, ON THE EASTERLY MAINTAINED RIGHT-OF-WAY LINE OF SW SPIRIT AVENUE; THENCE CONTINUE N.88 DEGREES 08'26"E., 317.25 FEET TO A 5/8" IRON ROD, LS 4708; THENCE S.01 DEGREES 36'19"E., 232.02 FEET, TO A 5/8" IRON ROD, LS 4708, ON THE NORTH LINE OF A 30.00 INGRESS AND EGRESS EASEMENT; THENCE CONTINUE S.01 DEGREES 36'19"E., 30.00 FEET TO THE SOUTH LINE OF SAID NW  $\frac{1}{4}$  OF THE NE  $\frac{1}{4}$ ; THENCE S.88 DEGREES 08'10"W., 318.10 FEET TO A CONCRETE MONUMENT, LS 4708, ON THE EASTERLY MAINTAINED RIGHT-OF-WAY LINE OF SW SPIRIT AVENUE; THENCE CONTINUE S.88 DEGREES 08'10"W., 11.14 FEET TO THE POINT OF BEGINNING.

DESCRIBED LANDS CONTAIN 1.98 ACRES, MORE OR LESS.

SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE SOUTH 30.00 FEET OF THE ABOVE DESCRIBED LANDS.

SUBJECT TO EXISTING MAINTAINED PUBLIC ROAD RIGHT-OF-WAY FOR SW SPIRIT AVENUE.

## MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1902-42 CONTRACTOR Forums Jones PHONE \_\_\_\_\_

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

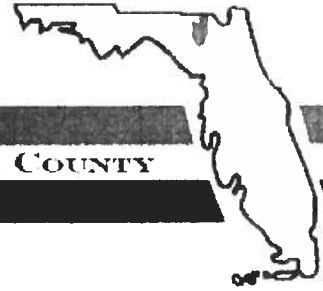
In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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.*

ELECTRICAL	Print Name <u>Arick A McKelvie</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>Arick A McKelvie</u> Phone #: _____
MECHANICAL/ A/C _____	Print Name <u>Arick A McKelvie</u> License #: _____ Qualifier Form Attached <input type="checkbox"/>	Signature <u>Arick A McKelvie</u> Phone #: _____

**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.

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: **2/26/2019 11:39:50 AM**  
Address: **133 SW AUTUMN Gln**  
City: **FORT WHITE**  
State: **FL**  
Zip Code **32038**

Parcel ID **04310-013**

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)



# Mobile Home

Applicant: ARICK MCKENZIE (352-538-4778) Application Date: 2/19/2019

Convert To ▾

1. ACTION LOCATION

2. CONTRACTOR

3. MOBILE HOME  
DETAILS

4. APPLICANT

5. REVIEW

6. FEES/PAYMENT

7.  
DOCUMENTS/REPORTS

8. NOTES/DIRECTIONS

9. INSPECTIONS (1)

## Completed Inspections

Add Inspection

Release Power

Schedule Inspection (ScheduleInspection.aspx?Id=40332)

Inspection	Date	By	Notes
Passed: Mobile Home - In County Pre- Mobile Home before set-up	2/20/2019	TOMMY MATTHEWS	

The completion date must be set To release Certifications to the public.

**Permit Completion Date**  
(Releases Occupancy and Completion Forms)

**Permit Closed On**

## Incomplete Requested Inspections

Inspection	Date	By	Notes
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STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

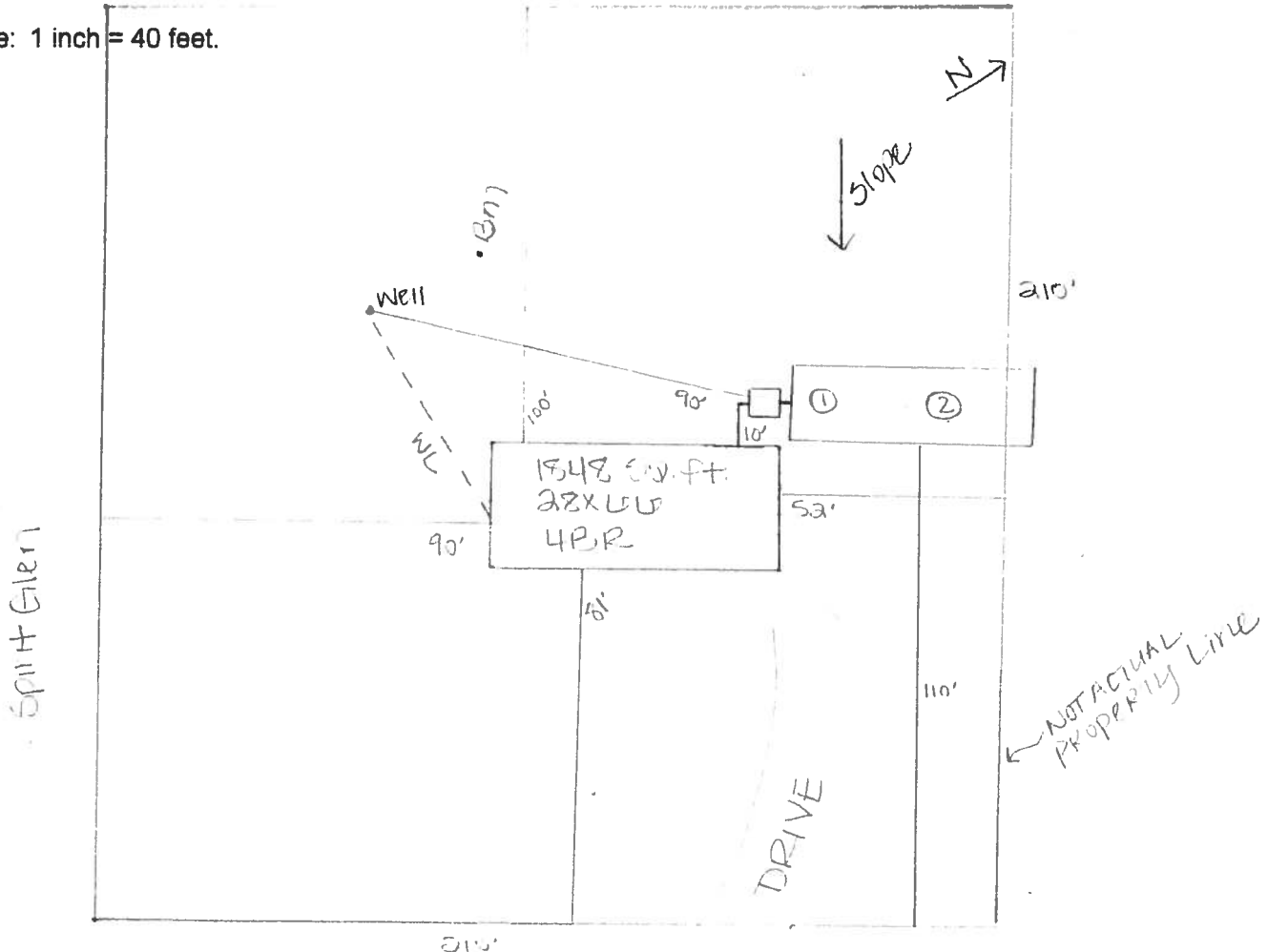
Permit Application Number

19-0154

McKenzie

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

Autumn Glen

1 ACRE OF 17.53

Site Plan submitted by:

Roddy D F

Plan Approved

Not Approved

By

M. H. Smith

MASTER CONTRACTOR

Date 2/27/19

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ON-SITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 19-0154  
DATE PAID: 2/20/19  
FEE PAID: 310.00  
RECEIPT #: 1899247

APPLICATION FOR:

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

APPLICANT: Arick McKenzie (Summer McKenzie)

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: NA BLOCK: NA SUB: NA PLATTED: \_\_\_\_\_

PROPERTY ID #: 24-7S-16-04310-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y / ☐ N ]

PROPERTY SIZE: 17.53 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ]<=2000GPD ☐ ]>2000GPD

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

PROPERTY ADDRESS: Autumn gln. Fort White FL

DIRECTIONS TO PROPERTY: 47 Left on 27 Right on Fry Left on Spirit Left on Autumn  
1<sup>st</sup> place on Left

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	SF Residential	4	1848	
2				
3				

☐ Floor/Equipment Drains    ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: Rocky D 7 DATE: 2/19/2019



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, Fernon Jones, give this authority for the job address show below  
Installer License Holder Name

only, \_\_\_\_\_, 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>Arick A McKenzie</u>	<u>Arick A McKenzie</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
<u>Summer McKenzie</u>	<u>Summer McKenzie</u>	<input 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.

Fernon Jones License Holders Signature (Notarized) FF102541A License Number 2/4/19 Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Union

The above license holder, whose name is Fernon Jones, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 4 day of February, 20 19.

Sandra W. Perry  
NOTARY'S SIGNATURE

