

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official [Signature] Building Official 2.C 5-14-19

AP# 1905-27 Date Received 5/8 By [Signature] Permit # 38149

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category AG

Comments Floor 1' Above Rd. Hs. in X zone per site plan
Front 30' sides 25' Rear 25'

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

☒ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0370 ☐ 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 5-21-19 ☒ Sub VF Form

Property ID # 13.45.17.08335.039 Subdivision DEERHAVEN LINDPC Lot# 13-B

- New Mobile Home _____ Used Mobile Home ☒ MH Size 28x64 Year 1994
- Applicant JEFFERY R. FRANKLIN Phone # 386.361.1852
- Address 929 SE SULTON Lp, LAKE CITY, FL 32025
- Name of Property Owner JEFFERY R. FRANKLIN Phone# 386.361.1852
- 911 Address 929 SE SULTON Lp, LAKE CITY, FL 32025
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home JEFFERY R. FRANKLIN Phone # 386.361.1852
 Address SAME AS ABOVE
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage .52
- 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 (REMOVED) *1
- Driving Directions to the Property 90-E to SR 100, TR To C-245, TR To
WEEKS, FL TO SULTON AND TAKE 2ND ENTRANCE to Sulton
Lp - SK ON L.
- Name of Licensed Dealer/Installer GLENN WILLIAMS Phone # 386.344.3669
- Installers Address 660 SE Putnam St - LAKE CITY, FL 32025
- License Number IH1054858 Installation Decal # 87664

John spoke w/ Jeff 5.15.19

SCANNED

Mobile Home Permit Worksheet

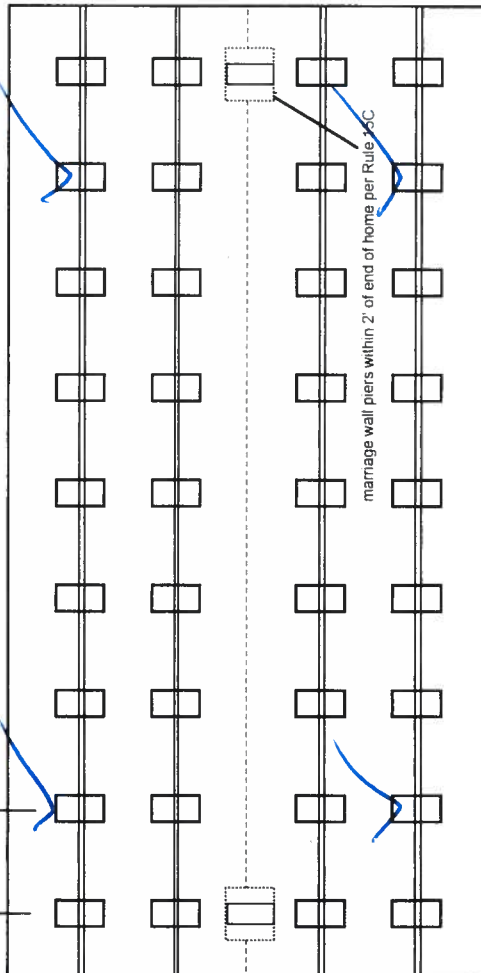
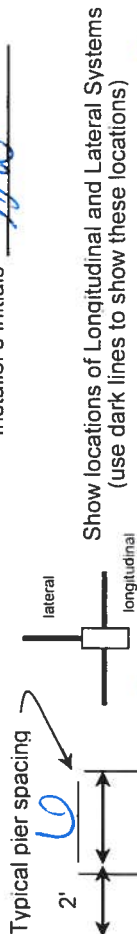
Installer: Glen Williams Jr License # 111654858

Address of home being installed _____

Manufacturer Flechevald Length x width 28x64

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 GW



26 Frame Ties

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 # 87664

Triple/Quad ☐ Serial # 15398 A/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 17x22

Perimeter pier pad size 17x22

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.

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 4
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer _____

OTHER TIES

Number

Sidewall 10
Longitudinal 22
Marriage wall 5
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil without testing.

X 2000 X 2000 X 2000

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 2000 X 2000 X 2000

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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Glenn Sullivan
5-6-19

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. _____

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 _____
Water drainage: Natural _____ Swale _____ Pad ☒ Other _____

Fastening multi wide units

Floor: _____ Type Fastener: 1/4" Length: 6" Spacing: 24"
Walls: _____ Type Fastener: 1/4" Length: 6" Spacing: 24"
Roof: _____ Type Fastener: 1/4" 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 GS

Type gasket from
Pg. _____

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

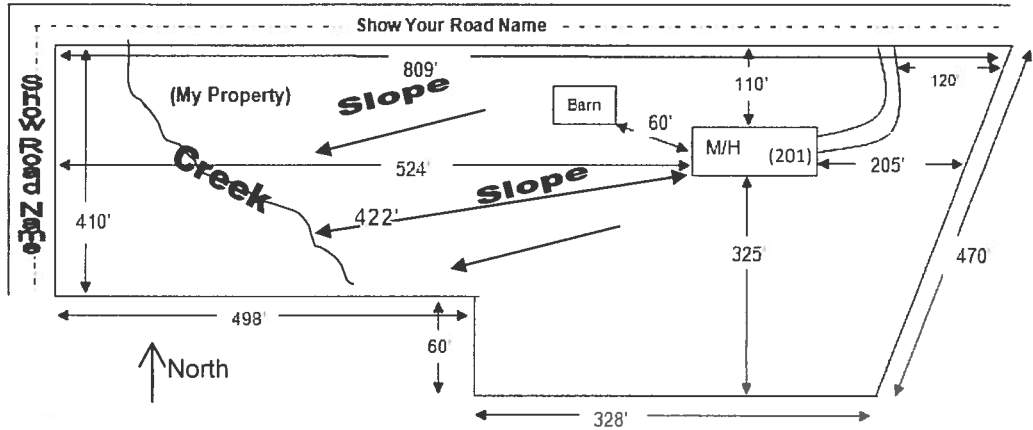
Glenn Sullivan 5-7-19

SITE PLAN CHECKLIST

- ___ 1) Property Dimensions
- ___ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ___ 3) Distance from structures to all property lines
- ___ 4) Location and size of easements
- ___ 5) Driveway path and distance at the entrance to the nearest property line
- ___ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ___ 7) Show slopes and or drainage paths
- ___ 8) Arrow showing North direction

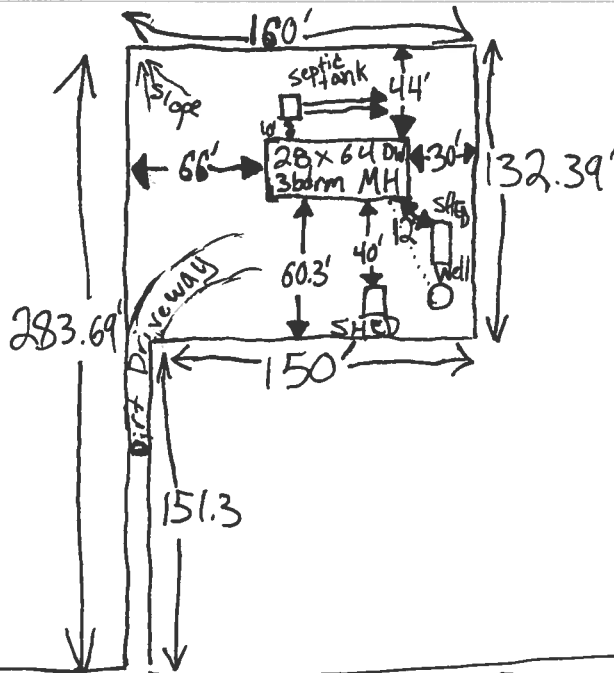
SITE PLAN EXAMPLE

Revised 7/1/15



NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.



$$\square = 105' \times 105'$$



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, Glenn Williams, give this authority for the job address show below
Installer License Holder Name

only, 929 SE SULTON LP, 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)
Jeffrey R. Franklin	<i>Jeffrey R. Franklin</i>	☒ Agent ☐ Officer ☒ Property Owner
		☐ 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.

Glenn Williams License Holders Signature (Notarized) 1141054858 License Number 5-9-19 Date

NOTARY INFORMATION:

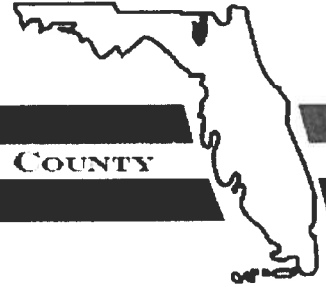
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Glenn Williams Jr, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 8 day of May, 2019.

[Signature]
NOTARY'S SIGNATURE



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: **5/2/2019 11:42:27 AM**
Address: **929 SE SULTON Loop**
City: **LAKE CITY**
State: **FL**
Zip Code **32025**

Parcel ID **08335-037**

REMARKS: Address Verification.

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

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1905-27 CONTRACTOR Williams, Glen PHONE 386.361.1852

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>Jeffrey R. Franklin</u> License #: _____ Qualifier Form Attached ☐	Signature <u>Jeffrey R. Franklin</u> Phone #: <u>(386) 361-1852</u>
MECHANICAL/ A/C	Print Name <u>Jeffrey R. Franklin</u> License #: _____ Qualifier Form Attached ☐	Signature <u>Jeffrey R. Franklin</u> Phone #: <u>(386) 361-1852</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.

Inst: 201912006106 Date: 03/13/2019 Time: 3:31PM
Page 1 of 4 B: 1380 P: 646, P. DeWitt Cason, Clerk of Court
Columbia County, By: BD
Deputy Clerk Doc Stamp-Deed: 7.00

Quitclaim Deed

RECORDING REQUESTED BY Byrda R. Mitchell

AND WHEN RECORDED MAIL TO:

Jeffrey Richard Franklin, Grantee(s)
186 SE Eloise Ave
Lake City, FL, 32025

Consideration: \$ 1000.00

Property Transfer Tax: \$ ~~0.00~~

Assessor's Parcel No.: R08335-037

PREPARED BY: Byrda R. Mitchell certifies herein that he or she has prepared this Deed.

Byrda R. Mitchell
Signature of Preparer

3/13/19
Date of Preparation

Byrda R. Mitchell
Printed Name of Preparer

THIS QUITCLAIM DEED, executed on March 13, 2019 in the County of
Columbia State of Florida

by Grantor(s), Byrda Ruth Mitchell

whose post office address is 206 NW Rebel Pl. Lake City, FL 32055

to Grantee(s), Jeffrey Richard Franklin

whose post office address is 186 SE Eloise Ave, Lake City, FL 32025

WITNESSETH, that the said Grantor(s), Byrda R. Mitchell,
for good consideration and for the sum of One thousand
(\$ 1000.00) paid by the said Grantee(s), the receipt whereof is hereby acknowledged,
does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title

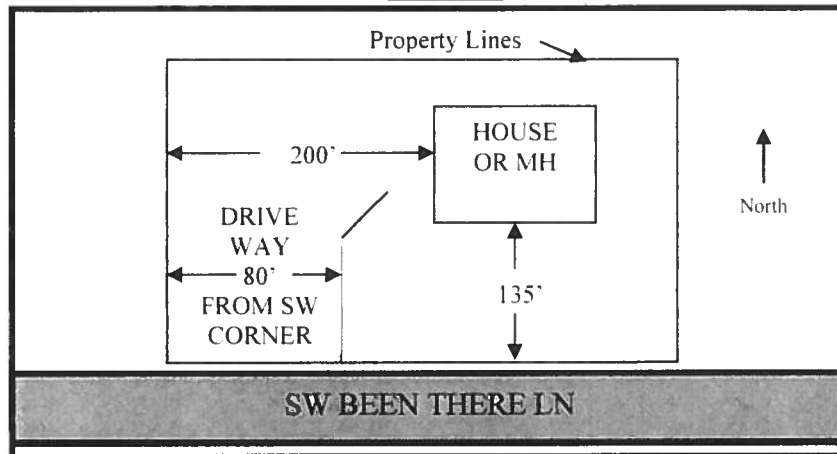
EXHIBIT "A"

A part of Lot 13, Block B, Deerhaven Subdivision, an unrecorded subdivision of the W $\frac{1}{2}$ of the SE $\frac{1}{4}$ of Section 13, Township 4 South, Range 17 East, Columbia County, Florida, more particularly described as follows: Commence at the Southwest corner of the W $\frac{1}{2}$ of the SE $\frac{1}{4}$ of Section 13, and run N 01 deg. 41'25" East 1150 feet; run thence N 89 deg. 18'59" East 627.38 feet to the point of beginning; thence continue N 89 deg. 18'59" East, 283.69 feet; run thence N 01 deg. 41'25" East 10 feet; thence run S 89 deg. 18'59" West 151.30 feet; run thence N 01 deg. 41'25" East 150 feet; run thence S 89 deg. 18'59" West 132.39 feet; run thence S 01 deg. 41'25" West 160 feet to the point of beginning.

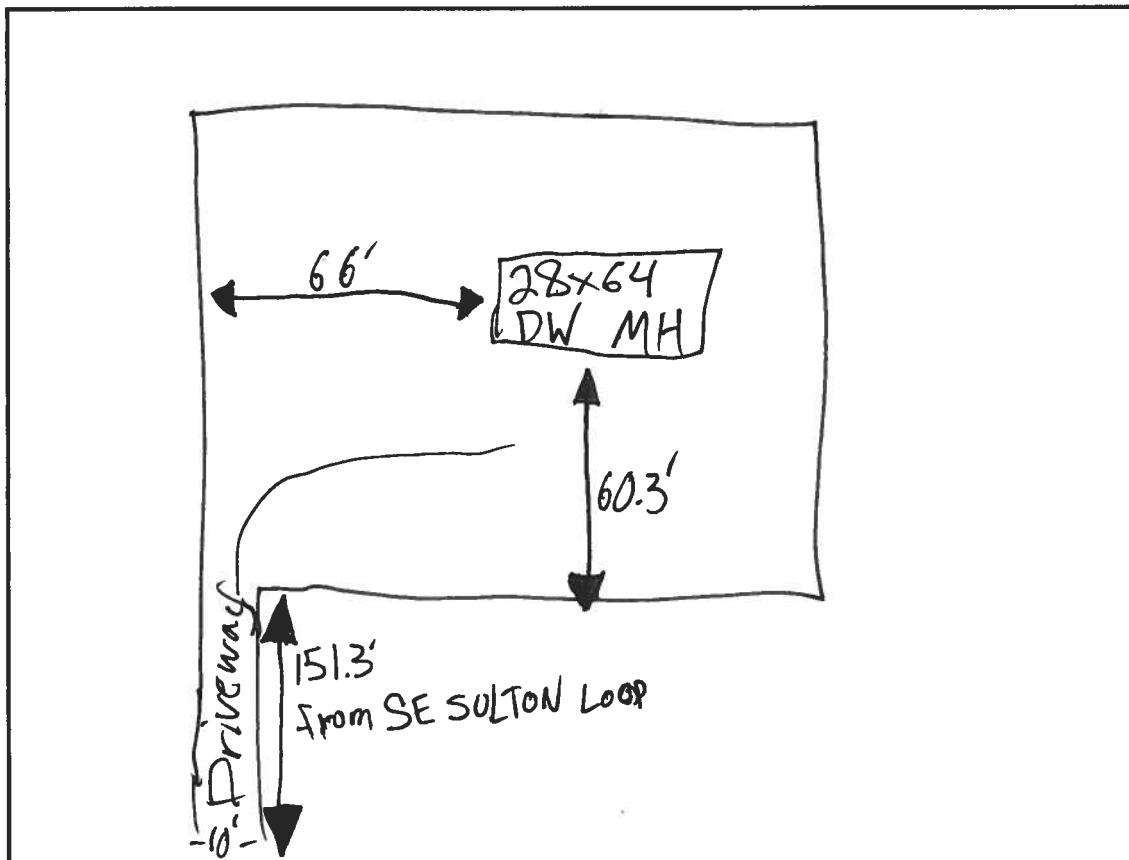
Page 2, Site Plan for 9-1-1 Address Application From

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Alachua
OWNERS NAME Jeff Franklin PHONE _____ CELL _____
INSTALLER Glenn Williams PHONE _____ CELL 386-344-3661
INSTALLERS ADDRESS 460 Se Putnam St Lake City Fl 32025

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 94 SIZE 28 X 64
COLOR Grey SERIAL No. _____
WIND ZONE 2 SMOKE DETECTOR 2

INTERIOR:

FLOORS OK
DOORS OK
WALLS OK
CABINETS OK
ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:

WALLS / SIDING OK
WINDOWS OK
DOORS OK

INSTALLER: APPROVED ✓ NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME _____

Installer/Inspector Signature Glenn Williams License No. 1H1054858 Date 5-9-19

NOTES: _____

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature Jay C Date 5-14-19

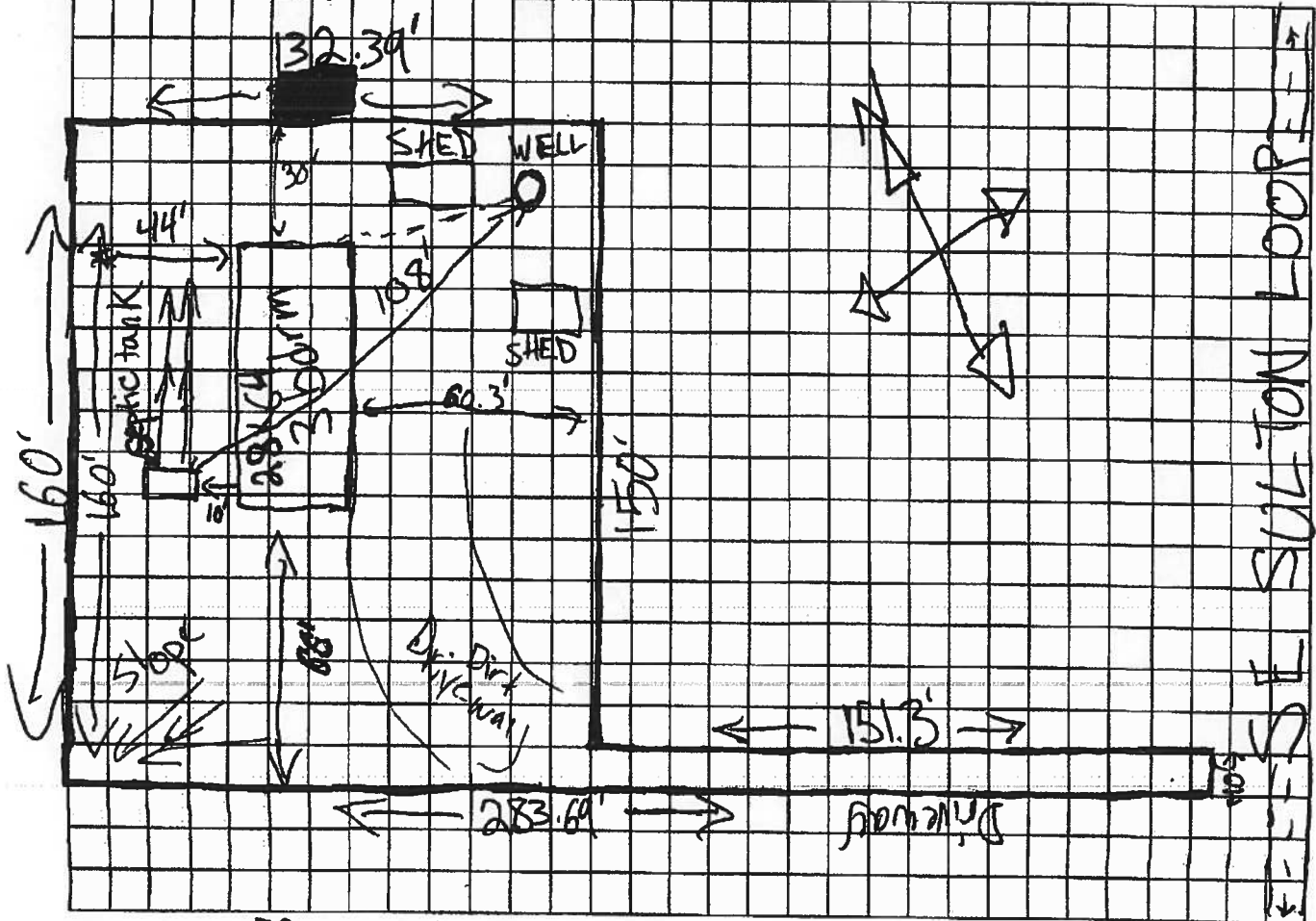
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

19-0370

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

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



Notes: .52 acres

Site Plan submitted by: Jeffrey R. Franklin

Plan Approved

Not Approved

Date 5/7/19

By

EST

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 19-2270
DATE PAID: 5/2/19
FEE PAID: 265.00
RECEIPT #: 1412273

APPLICATION FOR:

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

APPLICANT: Jeffrey R. Franklin

AGENT:

TELEPHONE: (386) 361-1850

MAILING ADDRESS: 929 SE Sulton LP, Lake City, FL, 32025

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: 13 BLOCK: B SUBDIVISION: Deerhaven PLATTED: —

PROPERTY ID #: 13-48-17-08335-037 ZONING: — I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: .52 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☒ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☐ N DISTANCE TO SEWER: — FT

PROPERTY ADDRESS: 929 SE Sulton Loop, Lake City, FL, 32025

DIRECTIONS TO PROPERTY: Head down pike creek rd (245), off of SR 100. Turn left on Weeks rd. Turn left on Sulton Loop, second entrance.

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 DW Mobile Home 3 1,560

2

3

4

☐ Floor/Equipment Drains ☐ Other (Specify) —

SIGNATURE: Jeffrey R. Franklin

DATE: 5/2/19

Mobile Home

Applicant: JEFFRY R. FRANKLIN (386.361.1852) Application Date: 5/21/2019

Convert To ▾

Action ▾

1. JOB LOCATION

2. CONTRACTOR

3. MOBILE HOME
DETAILS

4. APPLICANT

5. REVIEW

6. FEES/PAYMENT

7.
DOCUMENTS/REPORTS
(2)

8. NOTES/DIRECTIONS

9. INSPECTIONS (2)

Completed Inspections

Add Inspection

Release Power

Schedule Inspection (ScheduleInspection.aspx?Id=40897)

Inspection	Date	By	Notes
Septic Release Inspection	5/22/2019	HEALTH DEPT	
Passed: Mobile Home - In County Pre-Mobile Home before set-up	5/22/2019	TROY CREWS	

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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