PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only *(Revised 7-1-15)* Zoning Official_____ Building Official_____

AP# 100889 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 # 32-15-17-04620-002 Subdivision N/A Lot#____

- New Mobile Home ✓ Used Mobile Home_____ MH Size 16x80 Year 2023
- Applicant Shannon Langford Phone # 386-288-4811
- Address 849 NW Cripple Creek St. Lake City, FL 32055
- Name of Property Owner Shannon Langford Phone# 386-288-4811
- 911 Address 849 NW Cripple Creek St. 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 Shannon Langford Phone # 386-288-4811
  Address 849 NW Cripple Creek St. Lake City, FL 32055
- Relationship to Property Owner Self
- Current Number of Dwellings on Property 0
- Lot Size_____ Total Acreage 10 acres
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property 441-N past I-10 approx 8miles turn left on Cripple Creek St. 3rd gate on Right past 2nd MH.

Email Address for Applicant: Michellelangford78@yahoo.com

- Name of Licensed Dealer/Installer Rusty Knowles Phone # 386-397-0586
- Installers Address 3801 SW SR 47 Lake City, FL 32024
- License Number IH 10382191 Installation Decal # 94489


N
Flood Zone A
330'
POND
900'
300'
947'
124'
MH 16X80
125'
1400'
100'
DRIVEWAY
30' EASEMENT
560'
437'
180'
CRIPPLE CREEK Street

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ 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 Leo Jackson JR Signature _____ License #: ES12001176 Phone #: 386-688-3821 Qualifier Form Attached ☐
MECHANICAL/ A/C _____	Print Name Shannon Braun-Langford Signature _____ License #: N/A Phone #: 386-288-4811 Qualifier Form Attached ☐

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.

Revised 4/27/2017

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain compliance with the county's Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are in accordance with Chapter 102, Article IV of the Columbia County Code of Ordinances. The addressing system better enables Emergency Services and Law Enforcement Agencies to respond in the event of an emergency. This address is also used by the United States Postal Service and delivery services in the timely and efficient provision of services.

Date/Time Issued:	**3/15/2023 4:02:26 PM**
Address:	**849 NW CRIPPLE CREEK St**
City:	**LAKE CITY**
State:	**FL**
Zip Code	**32055**
Parcel ID	**04620-000**

REMARKS: **New address for Habitable structure (family home, business, etc.) on the 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: MOORE, DAVID R.

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

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, Rusty L Knowles, 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)
Shannon B Langford	Shannon B Langford	___ Agent ___ Officer X 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.

License Holders Signature (Notarized) | CRC1331719 License Number | 3-30-23 Date

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Rusty L Knowles, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 30th day of March, 2023.

Brenda H Carroll
NOTARY'S SIGNATURE

(Seal/Stamp)

BRENDA H. CARROLL
Commission # HH 185328
Expires November 20, 2025
Bonded Thru Troy Fain-Insurance 800-385-7019

Inst: 202312005571 Date: 04/04/2023 Time: 9:14AM
Page 1 of 4 B: 1487 P: 1568, James M Swisher Jr, Clerk of Court
Columbia, County, By: VC
Deputy ClerkDoc Stamp-Deed: 0.70

Quitclaim Deed

RECORDING REQUESTED BY Shannon Michelle Brown-Langford
AND WHEN RECORDED MAIL TO:
849 NW Cripple Creek St, Grantee(s)
Lake City, FL 32055

Consideration: $ 10.00
Property Transfer Tax: $
Assessor's Parcel No.:
PREPARED BY: Karen T. Brown certifies herein that he or she has prepared this Deed.

Karen T. Brown
Signature of Preparer

4-4-2023
Date of Preparation

Karen T. Brown
Printed Name of Preparer

THIS QUITCLAIM DEED, executed on 4-4-2023 in the County of Columbia, State of Florida
by Grantor(s), William L. Brown, Karen T. Brown,
whose post office address is 772 NE Cemetary Loop Lake City, FL 32055
to Grantee(s), Shannon Michelle Brown-Langford,
whose post office address is 849 NW Cripple Creek St. Lake City, FL 32055

WITNESSETH, that the said Grantor(s), William L. Brown, Karen T. Brown,
for good consideration and for the sum of Ten Dollars and no/100
($ 10.00) 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 parcel of land containing 10 Acres.
Located in 32-1S-T7
Parcel number 4620-000

Beginning at SE corner of parcel 04620-000 going N approx. 1400 ft., W 330 ft., S approx. 900 ft. to existing private drive ditch, cont. S approx. 560 Ft. along private drive ditch, back to county road, then E back to point of beginning.

Also to include easement to access along existing private drive. 30 ft. wide beginning at county road running to Western line of above mentioned property.

interest and claim which the said Grantor(s) have in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Columbia, State of Florida and more specifically described as set forth in EXHIBIT "A" to this Quitclaim Deed, which is attached hereto and incorporated herein by reference.

IN WITNESS WHEREOF, the said Grantor(s) has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

GRANTOR(S):

Signature of Grantor

William L. Brown
Print Name of Grantor

Signature of First Witness to Grantor(s)

Ashley Adams
Print Name of First Witness to Grantor(s)

Signature of Second Grantor (if applicable)

Karen T. Brown
Print Name of Second Grantor (if applicable)

Signature of Second Witness to Grantor(s)

Alexis Melum
Print Name of Second Witness to Grantor(s)

GRANTEE(S):

Signature of Grantee

Shannon Brown-Langford
Print Name of Grantee

Signature of First Witness to Grantee(s)

Ashley Adams
Print Name of First Witness to Grantee(s)

Signature of Second Grantee (if applicable)

Print Name of Second Grantee (if applicable)

Signature of Second Witness to Grantee(s)

Alexis Melum
Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT

State of Florida

County of Columbia

On April 4th, 2023, before me, Ashley Adams, a notary public in and for said state, personally appeared, Shannon Brown-Langsford, Karen Brown, and William Brown

who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

Ashley Adams

Signature of Notary

Affiant Known _____ Produced ID ✓

Type of ID Florida Drivers License

NOTARY PUBLIC STATE OF FLORIDA Seal

ASHLEY ADAMS
MY COMMISSION # HH 293230
EXPIRES: July 31, 2026

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer Rusty Underdown License # TH-10 38218

Installer Mobile Phone # 346-347-0586

Address of home being installed _____

Manufacturer Live Oak Length x width 16x80

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 RU

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 # 94429

Triple/Quad ☐ Serial # Orland LOHGA10023413

Roof System: Typical Hinged

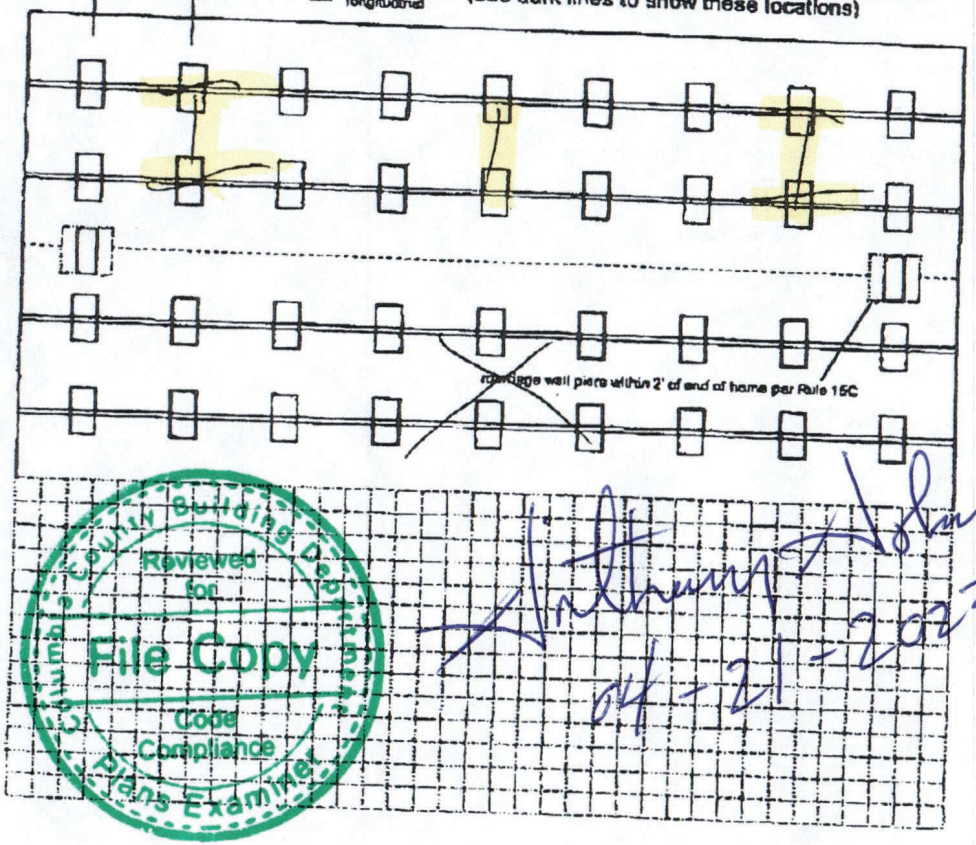
Typical pier spacing

2' 6'

lateral

longitudinal

Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



Lauren Building Services Reviewed for File Copy Code Compliance Plans Examiner

04-21-2023

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'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	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 24x24

Perimeter pier pad size NA

Other pier pad sizes (required by the mfg.) 16x16

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

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 ✓

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Olin Tie Down Systems

OTHER TIES

	Number
Sidewall	32
Longitudinal	10
Marriage wall	2
Shearwall	2

PERMIT NUMBER

PERMIT WORKSHEET

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil ____ without testing.

X 1.5 X ____ X ____

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 ____ X ____ X ____

TORQUE PROBE TEST

The results of the torque probe test is N/A kpa 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.

RLK Installer's Initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Rusty L Knowles

Date Tested 3-30-23

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source This includes the bonding wire between mult-wide units. Pg. 15C-1

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C-1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C-1

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural Swale Pad ✓ Other

Fastening multi wide units

Floor:	Type Fastener:		Length:	Spacing:
Walls:	Type Fastener:	N/A	Length:	Spacing:
Roof:	Type Fastener:		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 (see the weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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
Pg. ____

Installed:
Between Floors Yes ____
Between Walls Yes N/A
Bottom of ridgebeam Yes ✓

Weatherproofing

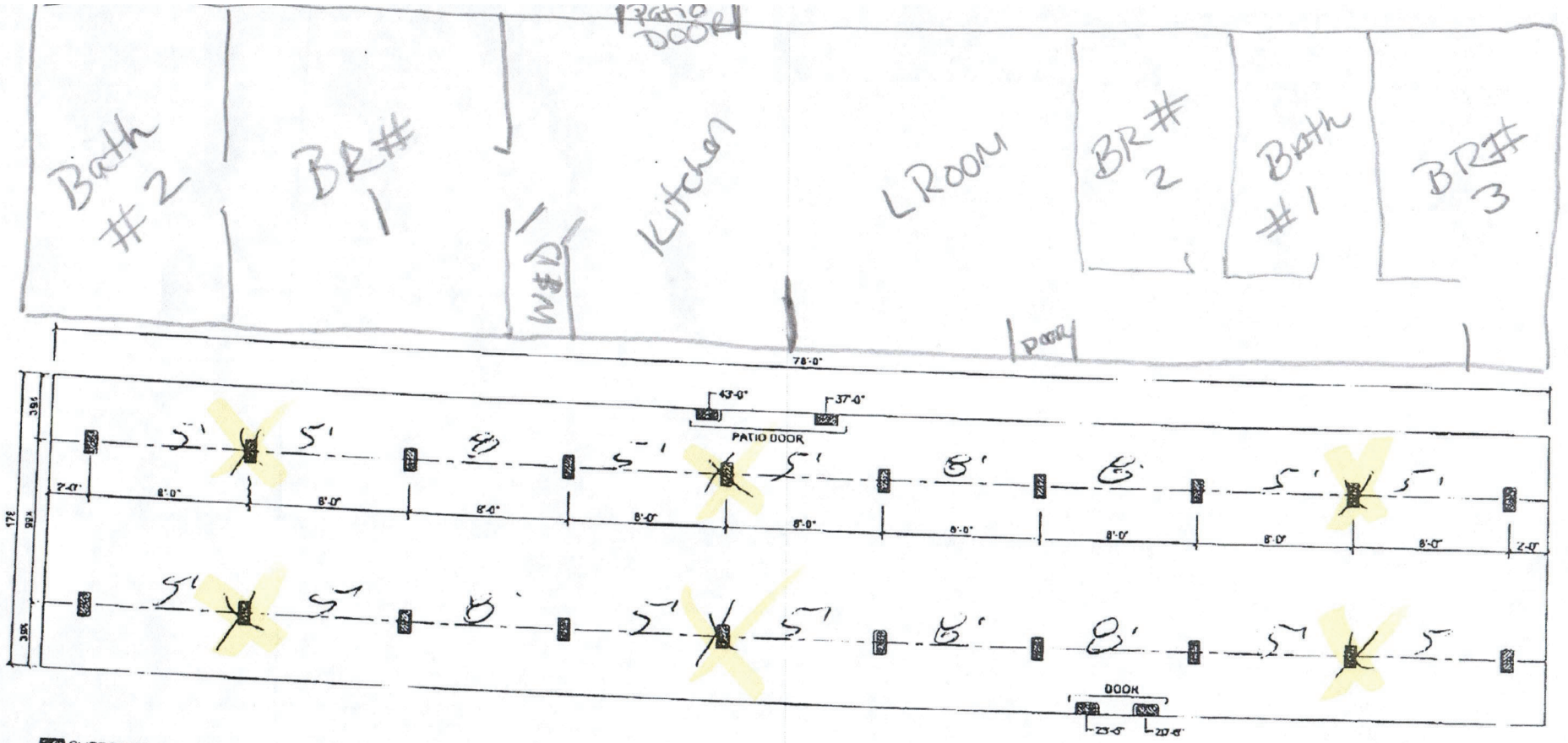
The bottomboard will be repaired and/or taped. Yes ✓ Pg. 15C-1
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

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 N/A
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 3-30-23



SUPPORT PIER/TYP

02/17/22

FOUNDATION NOTES:
- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: M-57630 - 16 X 80
3-BEDROOM / 2-BATH

Columbia County Building Department
Reviewed for
File Copy
Code Compliance
Plans Examiner

4-12-23

(99.5" I-BEAM SPAN)

M-57630

License Number: IH / 1038219 / 1 Name: RUSTY L. KNOWLES

Order #: 5586 Label #: 94489	Manufacturer:	(Check Size of Home)
Homeowner:	Year Model:	Single ____
Address:	Length & Width:	Double ____
		Triple ____
City/State/Zip:	Type Longitudinal System:	HUD Label #:
Phone #:	Type Lateral Arm System:	Soil Bearing / PSF:
Date Installed:	New Home:____ Used Home:____	Torque Probe / in-lbs:
Installed Wind Zone:	Data Plate Wind Zone:	Permit #:
Note:		

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

94489

LABEL # DATE OF INSTALLATION

RUSTY L. KNOWLES

NAME

IH / 1038219 / 1 5586

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.