	BUIL	DING I	PERMIT APPLICATION	
S	Collier County Growth Management Division, Planning and Regulation			
	Please fold plans with the plain side out. Ens	be Drive, sure docu	Naples Florida 34104 * 239-252-2400 aments are stapled inside each set of plans	
₹R	esidential 1 or 2 Units Residential 3 or more			
	it No. PRBD 2013092			
JOB LOCATION	Folio 00436560004 Job Address <u>438 Data Palmhame</u> Owner SUN Communities Owners Phone No. 239-454-0037 Lot <u>PBlock</u> <u>95</u> Unit Subdivision NAPLES <u>GARDENS</u> RV RESORT Twnshp <u>50</u> Range <u>26 Section</u> <u>23</u>		State Cert No. IH / 1025176 Company Name JENNINGS' MOBILE HOME SET UP Qualifier Name THOMAS G. JENNINGS Contact Name M. Zeke Zielinski Address 19 Apache Trail City_Ft. Myers Beach State_FL Zip 33931 Phone 239-454-0037 Fax 239-454-8012	
	SDP COA FEMA: BFE: Zone:		E-Mail Address zzielinski@suncommunities.com	
TYPE OF IMPROVEMENTS	New Construction Doors/Windows Marine Re-Roof Addition Electric/Low Voltage Mechanical Screen Enclosure Alteration Fence Mobile Home Shutter Convenience Book Fire Plumbing Sign/Flagpole Demo Gas Electric from House Solar Pool Pool	SUB CONTRACTORS REQUIRED	Private Provider Non-Sprinkled Electrical Sprinkled Low Voltage I A Mechanical II A Plumbing III A Roofing VA Septic VA Shutters Occupancy Classification	
ECT	LOGULTUNE Description of Work:		Description of Work: Install a replacement	
			RV Park Model Home on premises # Stories 1 # Units 1 Cost of Job \$30,000 # Bedrooms 1 # Baths 1 # Tons 2 Living Sq Ft Non-Living Sq Ft Total Area 478 0 478 SDP: COA: COA:	
UTILITIES	SEWAGE WATER SUPPLY Septic Well Ave Maria Ave Maria City of Naples City of Naples Collier County Collier County Golden Gate City Golden Gate City Immokalee Immokalee Orange Tree Orange Tree Other Other	DESIGN PROFESSIONAL INFORMATION	Name Address City State Zip Phone	
July 1,	2011 (For Use By County Staff) PMR Date: 9/23	S,	Days Review: 5 #of Sets 3	

ACKNOWLEDGEMENT OF COLLIER COUNTY REGULATIONS

Per Florida Statutes 713.135 a Notice of Commencement (NOC) is required for construction of improvements totaling more than \$2,500, with certain exceptions. For A/C Replacements a notice of commencement is required for improvements more than \$7,500. The applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded NOC or a notarized statement that the

NOC has been filed for recording, along with a copy thereof. In order to comply with the state requirement, permits will be placed in inspection hold until proof of the NOC is filed with the building permitting and inspection department. The issuing authority shall not perform or approve subsequent inspections until the applicant files by mail, facsimile, hand delivery, email or any other means such certified copy with the issuing authority.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

The approved permit and/or permit application expires if not commenced within six (6) months from the date of issuance. The permit or application fee will be four times the amount of the permit fee, if work is started without an approved permit. The permittee further understands that only licensed contractors may be employed and that the structure will not be used or occupied until a certificate of occupancy is issued. By signing this permit application, I agree that I have been retained by the owner/permittee to provide contracting services for the trade for which I am listed. Furthermore, it is my responsibility to notify the Customer Service section of the Building Review and Permitting Department should I no longer be the contractor responsible for providing said contracting services. I further agree that I understand that the review and issuing of this permit does not exempt me from complying with all County Codes and Ordinances. It is further understood that the property owner/permittee is the owner of the permit.

WARNING OF POSSIBLE DEED RESTRICTIONS

THE LAND SUBJECT TO THIS PERMIT MAY BE SUBJECT TO DEED, AND OTHER RESTRICTIONS THAT MAY LIMIT OR IMPAIR THE LANDOWNER'S RIGHTS. COLLIER COUNTY IS NOT RESPONSIBLE FOR THE ENFORCEMENT OF THESE RESTRICTIONS, NOR ARE COLLIER COUNTY EMPLOYEES AUTHORIZED TO PROVIDE LEGAL OR BUSINESS ADVICE TO THE PUBLIC RELATIVE TO THESE RESTRICTIONS. THE LANDOWNER OR ANY APPLICANT ACTING ON BEHALF OF THE LANDOWNER IS CAUTIONED TO SEE PROFESSIONAL ADVICE.

WARNING ON WORK IN COUNTY RIGHT-OF-WAYS

This permit does not authorize construction or installation of any structure or utility, above or below ground, within any right- of-way or easement reserved for access, drainage or utility purposes. This restriction specifically prohibits fencing, sprinkler systems, landscaping other than sod, signs, water, sewer, cable and drainage work therein. If such improvements are necessary, a separate permit for that purpose must be obtained from Transportation/ROW Permits and Inspections (239) 252-5767.

<u>NOTICE:</u> In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management district, state agencies, or federal agencies.

CONVENIENCE BOOKS

A convenience book can be purchased for air conditioning, water heaters, or residential garage doors (size for size). They may not be used for work having a value of over \$5000. They are not valid for work in the Right of Way. A separate ROW permit must be obtained. Reapplications are allowed for convenience permits. The permit must be completely filled out by you prior to commencing the work, and the job-site copy posted at the electric meter. It is your responsibility to ensure the documents are posted correctly and securely. Inspections must be called for within 24 hours of work completion. A permit is not required for a water heater under 52 gallons for a single family detached house only. Residential garage doors need NOA or Florida Product Approval. Approval numbers must be written on the convenience permit. Approval must be on the job site with the copy of the permit. Convenience permits can be delivered or faxed to the office at (239) – 252-3990.

Company Name: Jennings MH Set-up LLC. State	License#: IH 1025176
Qualifier's Name Thomas 6 Jenning Quali State of Florda, County of Polk	fier's Signature
Sworn to (or affirmed) and subscribed before me this Who is personally known OR Produced ID	110.13
Type of ID	SEAL DTARY PUBLIC
Notary Public Signature Kinherh Worther	STATE OF FLORIDA
	Expires 1/7/9815

6/6/2011

SUBCONTRACTOR AFFIRMATION

PERMIT #_____

JOB ADDRESS_____

To be completed by the Qua	lifier working under GC.
Electrical Contractor Low Voltage Contractor	TAN
Email Address: Www. SUNE lectric Peruce	State License #: ECQQ02485
Qualifier's Name_Robert J. Bonaue	Qualifier's Signature Rotter Durg
State of, County of Lee	Qualifier's signature
Sworn to (or affirmed) and subscribed before me this	9113113
Who is personally known 🔀 OR Produced ID	
Type of ID PERSONALY KNOW	MARLON B. ZIELINSKI
Notary Public Name_Marlon b. Ziel	MY COMMISSION # EE 195744 EXPIRES: September 4, 2016 Bonded Thru Notary Public Underwriters
Notary Public Signature Manlon b. Culm	ndh
Plumbing Contractor	
Company Name: _ Jennings Mobile Home the	
Email Address: jenningsming tamphayarcom	
Qualifier's Name Thomas & Jennings	Qualifier's Signature
State of <u>Honda</u> County of <u>Park</u> Sworn to (or affirmed) and subscribed before me this	9,10,113
Who is personally known OR Produced ID	
Type of ID	KIMBERLY WATKINS
Lite as the second state of the	NOTARY PUBLIC
Notary Public Name Kimberly (anthins	SEOHAN == E041978
Notary Public Signature The berly Worthow	Empirhe 1/7/2018
Mechanical Contractor	
Company Name: Whale's ALC Inc	State License #: <u>CAC 1813195</u>
Email Address: whatev saw e amail. Qualifier's Name Michael E Whatev	Can mall gunly
State of, County of	Qualifier's Signature
Sworn to (or affirmed) and subscribed before me this	9112113
Who is personally known 🔀 OR Produced ID	
Type of ID <u>alcsocally</u> Know	MARLON B. ZIELINSKI
Notary Public Name_Marton b. Fielinski	MY COMMISSION J EE 195744 EXPIRES: Sejatember 4, 2018 Bonded Thru Notary Public Underwriters
Notary Public Name	Bonded Thru Notary Public Underwriters
Notary Public Signature Manlin b. Tu	linsti
Roofing Contractor	
Company Name:	State License #:
Email Address:	Qualifieda Cimentum
Qualifier's Name, County of	Qualifier's Signature
Sworn to (or affirmed) and subscribed before me this _	
Who is personally known OR Produced ID	
Type of ID	
Notary Public Name	(SEAL)
	(3272)

AND IS

TORQUE TEST AFFIDAVIT

property location.	, have personally performed the Torque Test at the following
43FDate	Palm Lance Naples EVasort 8230 911 or legal description Collier Blud.
SKN	Commities Property Owner

I have made the following determination as follows:

Torque Value: 295	Inch Pounds	/FT. Anchors	
Thom a Open	_ J IHIOZ		
Signature	Licens	se # Date	

PENETROMETER TEST AFFIDAVIT

I, Thomas & Jenning , have personally performed the Penetrometer Test at the following property location:
438 Date Palun Lane Naples RV Cont 8330 Collier BUB
SUN Communities
Property Owner
I have made the following determination:
Soil load bearing capacity:, or assumed 1000 PSF. Ves 1.1.1.
Thomas I. Jen JH1025176 J 9-10-13

Signature

License #

Date

Permit Application/Manufactured Home Installation
Property Owner SUW Communities Name of Licensed Dealer/Installer Thomas Jennings
Property Address 438 Date PAMM Licensed Number IH1025176
Lane Installation Decal #
Manufacturer's Name Skyline
Roof Zone South (20PSF)
Number of Sections: WIDTH 14 Length 40 YEAR 2013 SERIAL #
Installation Standard Used: (Check one) MANUFACTURER'S MANUAL
SITE PREPARATION:
Debris and Organic Material Removed Yes Compacted Fill Yes Page # 14
Water Drainage: NaturalSwalePadVOtherPage #/4
FOUNDATION:
Load Bearing Soil Capacity: or Assumed 1000 PSF Page# Page#
Footing Type: Poured in place Portable Size and Thickness Page# Page#
I-Beam or Mainrall Piers: Single Tiered V Double Interlocked V Page# See ATT. Exqueering
Size of Piers 8 × 16 or 16 × 16 Placement O/C 96 or 8' Page# 21
Perimeter Pier Blocking: Size YA Placement O/C NA Page# Ridge Beam Support Blocking: Size Number Location(s) Page# Singkewide
Ridge Beam Support Blocking: Size <u>NA</u> Number <u>Location(s)</u> Page# <u>NA</u> <u>Needed</u>
Ridge Beam Support Footer Size: Size Number Location(s) Page# //
Center Line Blocking Number Size Location(s) Page#
Special Pier Blocking: Required (Fireplace, Bay Window, Etc.) Yes_v_No Page#_24
Mating of Multiple Units: Mating Gasket <u>NA</u> Type Used <u>NA</u> Page#
Fasteners: ROOFS Type and Size NA Spacing O/C Page#
ENDWALLS Type and Size Spacing O/C Page#
FLOORS Type and Size SpacingO/C Page#
ANCHORS:
Type 3150 Working Load 4000 Working Load Page#_72
Height of Unit (Top of Foundation or Footer to Bottom of Frame) 4/2 To 48" Page# Rev Engineering
Number of Frame Ties: <u>4</u> Spacing <u>More</u> O/C Angle of Strap <u>45°</u> Degree Page# <u>71</u>
Number of Over Roof Ties (If Required) NA Page# NA
Number of Sidewall Anchors Zone II Zone III Page# Page#
Number of Centerline Anchors_N/ANumber of Stabilizer Devices_4 Page#_Miante Mark
Venia Required for Underpinning (1 S/F150 SF of Floor Area) Number 7 Page# 96

6/6/2011

Mobile Home Installers Affidavit

Florida Administrative Code 15C-2.0073-No person may perform a manufactured home installation unless licensed by the department pursuant to Florida Statute section 3200.8249, regardless of whether that person holds a local installer's license or any other local or state license.

I. Thomas & Jennings V, License No, 1023176

Do hereby state that the installation of the manufactured home at:

438 Data Palm Lane Waples Ru Runt 8230 Callier Blut. 911 or legal description

Will be done under my supervision,

Thom s. Gen	\checkmark
Signatu	re
Sworn to and subscribed before me this/(day of September 2013
Notary public: Kurberly Walkers	/, My Commission Expires: 1/7/15
Personally Known:	
Produced Valid ID:	(seal) KIMBERLY WATKINS
	STATE OF FLORIDA Commit E041978 Expires 1/7/2015

Subcontractor Verification

Permit Number:			
Customer Name:SM	to Home S	Servirus,	The.
Installer: Thomas 6. Je Sign	nnings	, IH	1025176
			License No.
Company Name: Jennings	M.H. Set-up	LLC	
-	0		
Plumbing Contractor: Thomas	1 Denne	IH	1025176
Sign	ature	,	Certificate No.
Company Name: Jenning	MH Set-up	LLC lease Print	
Electrical Contractor:	104 B		ECDD0-2455 Certificate No.
Company Name: SNN	Electric =	Please Print	the.
HVAC Contractor:	nature	Shily_	CAC 1813 145 Certificate No.
Company Name:h	aley's Al	lease Print	5

Permit Application for Manufactured/Mobile Home Installations

Name of License Installer Thomas G. Jennings
License Number-(IH or DIH) IH 1025176
Home Owner SUD Communities
Installation Site Address 438 Date Palm Lane
Manufacturer Name SkyLine
Wind Zone Year 2013 Serial Number
Installation Standard Used: Manufactures Installation Manual Ves or DMV, 15C-1
Provisions For Positive Water Drainage
Soil Bearing Capacity or assume 1000 PSF
Frame Pier Base Pad Size 23 1/2 × 31 1/2 × 1.125
Pier On Center Spacing
Ridge Beam/Column Loads with Pier Base Pad Size: (1) NA - Singhuride
(2)(3)(4)(5)
Probe Test, Torque value at 4' 295 Inch Pounds.

All bottom boards, end walls, and ceilings must be sealed for air infiltration. No field treading of vertical straps. All new and used homes must have longitudinal stabilizing. Strap angle is approximately 45 degrees, do not exceed 50 degrees. Anchors must be installed full depth. No shaft visible. Stabilizer to be snug to anchor.