

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official LC Building Official TL 2-8-18
 AP# 1802-10 Date Received 2-6-18 By LH Permit # 30332
 Flood Zone X Development Permit _____ Zoning A.3 Land Use Plan Map Category A
 Comments Structure not in flood zone per site plan

FEMA Map# _____ Elevation _____ Finished Floor 1' above road River _____ In Floodway _____
 Recorded Deed or Property Appraiser PO Site Plan BH # 18-0090 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 Paid on Property (owed) Out County In County Sub VF Form

Property ID # 11-6S-16-03815-170 Subdivision Cardinal Farms Unrec Lot# 70

- New Mobile Home X Used Mobile Home _____ MH Size 28 x 44 Year 2018
- Applicant Dale Burd or Rocky Ford or Kimberly Koon Phone # 386-497-2311
- Address 546 SW Dortch Street, Fort White, FL, 32038
- Name of Property Owner Samantha Thomas Phone# 352-494-1797
- 911 Address 146 SW Skyline loop fort 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 Same Phone # Same
 Address 7398 SW 155 Road, Lake Butler, FL, 32054
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 441 x 873 Total Acreage 9.47
- Do you : Have Existing Drive or Private Drive or need Convert 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 47 South, TL Herlong Road, TR (2nd) Skyline loop,
1st lot on right

- Name of Licensed Dealer/Installer Ronnie Norris Phone # 386-623-7716
- Installers Address 1004 SW Charles Terr, LC, FL, 32024
- License Number IH-1025145 Installation Decal # 48270

675.36

COLUMBIA COUNTY PERMIT WORKSHEET

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Kevin C. Williams License # ZH12514511

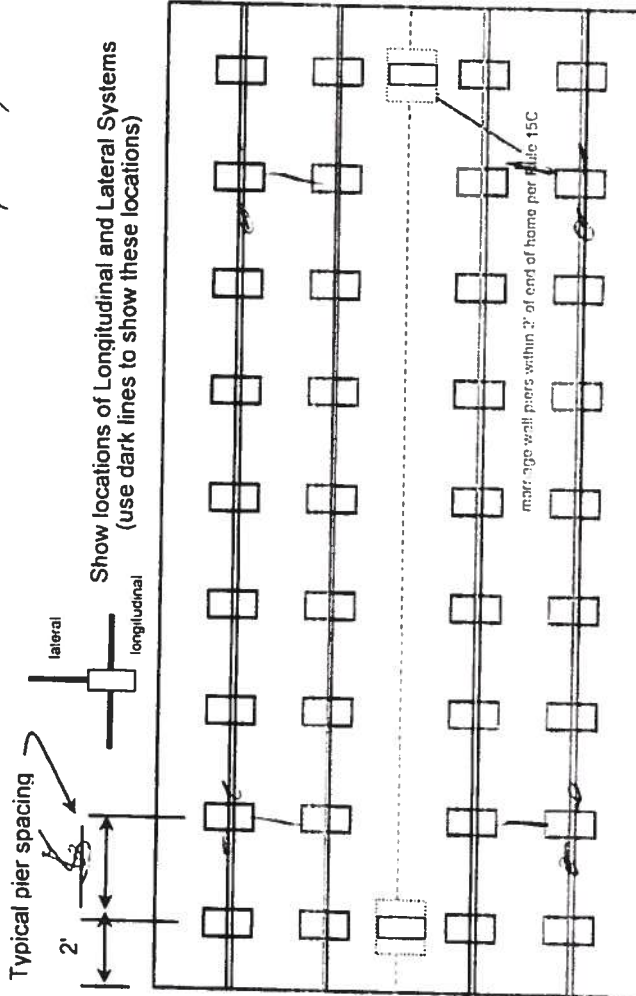
911 Address where home is being installed. 100 SW SKYLINE RD

Manufacturer SABOSEN Length x width 24 X 44

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 ZYXX44



- 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 # 48270
- Triple/Quad Serial # 35270 AB

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 dsf	3'	4'	5'	6'	7'	8'	8'
1500 dsf	4'6"	6'	7'	8'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'	8'
2500 dsf	7'6"	8'	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'	8'
3500 dsf	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.) 16 X 16

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
<u>6</u>	<u>17X25</u>
<u>4</u>	<u>16X16</u>
<u>4</u>	<u>16X16</u>

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

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 5454

FRAME TIES

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

OTHER TIES

Sidewall Number 48270

Longitudinal Marriage wall

Shearwall

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 500 psf or check here to declare 1000 lb. soil without testing.

X 500 X 1000 X 500

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 500 X 500 X 500

TORQUE PROBE TEST

The results of the torque probe test is 285 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

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: 1/2" Length: 6" Spacing: 24"
Walls: Type Fastener: 1/2" Length: 6" Spacing: 16"
Roof: Type Fastener: 1/2" Length: 6" Spacing: 16"
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 Pg.

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

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

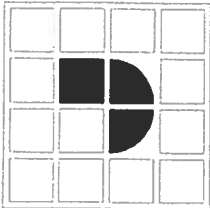
Miscellaneous

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

Installer Signature

Date



JACOBSEN HOMES
 PO BOX 368, 600 PACKARD CT.
 SAFETY HARBOR, FLORIDA 34695

(727) 726-1138

www.jachomes.com

COLUMN INFO TABLE		COLUMN PAD - MIN SIZES (sq in)						
COL. NUM.	SPAN	LOAD	1000	1500	2000	2500	3000	3500
1	18'-6"	4575	659	439	329	264	264	264
2	18'-6"	4575	659	439	329	264	264	264
3	0"	0	0	0	0	0	0	0
4	0"	0	0	0	0	0	0	0
5	0"	0	0	0	0	0	0	0
6	0"	0	0	0	0	0	0	0
7	0"	0	0	0	0	0	0	0
8	0"	0	0	0	0	0	0	0
9	0"	0	0	0	0	0	0	0
10	0"	0	0	0	0	0	0	0

AD-TD-0254 FOR COLUMN ANCHOR SIZES.
 REFER TO AD-TD-0250 THROUGH

MINIMUM PIER PAD SIZE (sq in)	I-BEAM PIER SPACING						
	1000	1500	2000	2500	3000	3500	4000
A 256 sq in.	30	48 1/2	66 1/2	85	103*	N/D	N/D
B 342.25 sq in.	42	66 1/2	90 1/2	115*	N/D	N/D	N/D
C 396 sq in.	49	77 1/2	105 1/2*	N/D	N/D	N/D	N/D
D 400 sq in.	49 1/2	78 1/2	107 1/2*	N/D	N/D	N/D	N/D
E 432.875 sq in.	54	85	116*	N/D	N/D	N/D	N/D
F 576 sq in.	74	115*	N/D	N/D	N/D	N/D	N/D
G 676 sq in.	87 1/2	N/D	N/D	N/D	N/D	N/D	N/D

N/D = SEE NOTE 10.
 REFER TO SL-01-0005 FOR
 ADDITIONAL PIER REQUIREMENTS.

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WARNING:

INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN PERSONAL INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT.

CAUTION:

MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT THAT ALL PERSONNEL ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADDEQUATELY TRAINED. A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED.

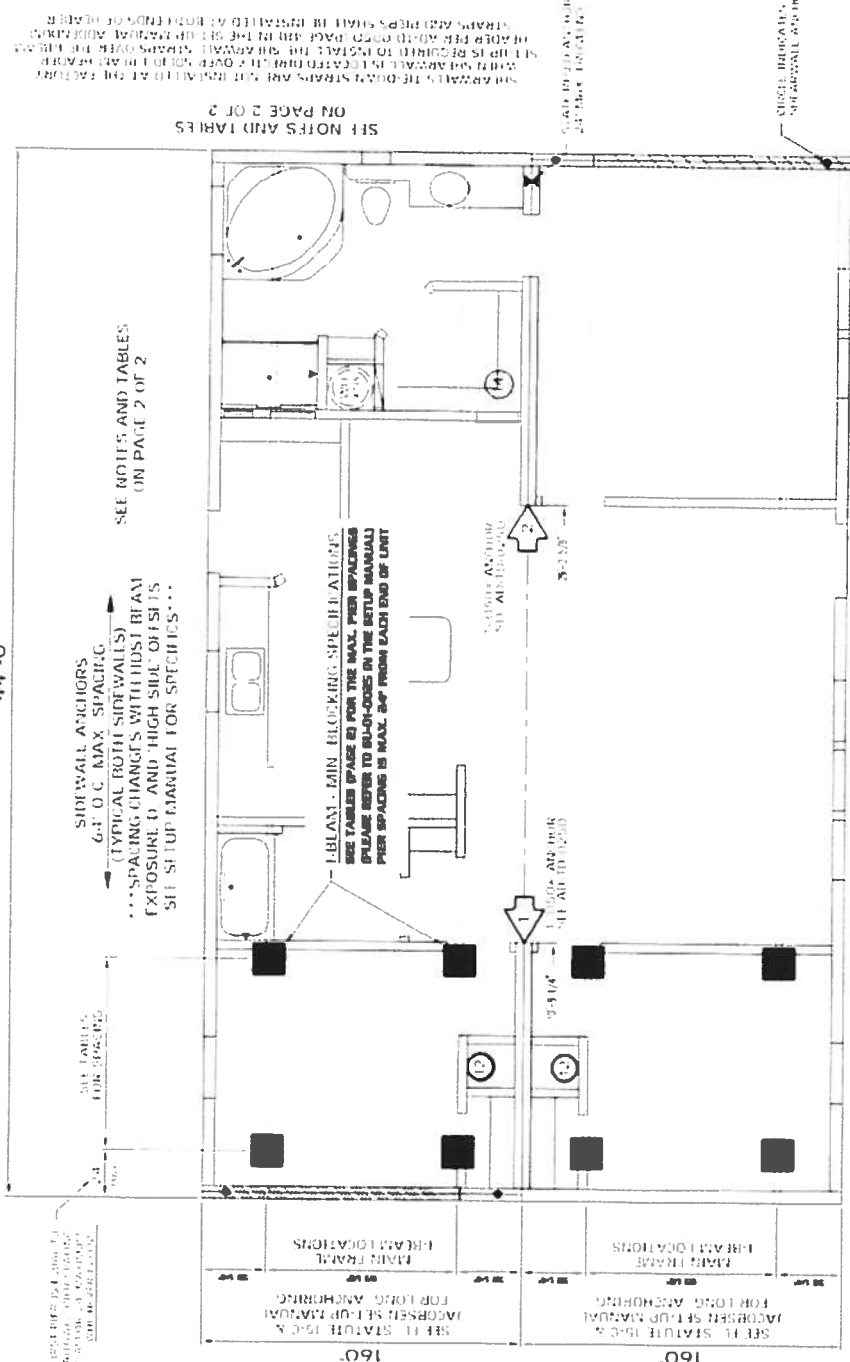
NOTES:

- REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
- REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDRESS FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERS CAN BE RELOCATED AND/OR SPANS INCREASED PER THE SETUP MANUAL.
- REFER TO SL-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.
- REFER TO THE APPROVED FLOOR PLAN FOR SHEARWALL LOCATIONS AND LOADS.
- REFER TO AD-TD-100 FOR SHEARWALL APPLICATIONS AND TIE-DOWNS.
- REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERS SHALL BE LOCATED WITHIN 12" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERS MAY BE REQUIRED ALONG THE MATING LINE. SEE THE SETUP MANUAL FOR SPECIFICS.
- ALL 184" WIDE FLOOR SYSTEMS REQUIRE PERIMETER AND MATING LINE BLOCKING.
- ALL 2-8 FLOOR SYSTEMS WIDER THAN 144" REQUIRE PERIMETER AND MATING LINE BLOCKING.
- ANY SHEARWALL AREA WITH A ROOF BEAM OR A STRUCTURAL ATTACHMENT SHALL HAVE PIERS AND ANCHORS SPACED NO FURTHER THAN 66" O.C. MAXIMUM. SOME WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION. REFER TO THE JACOBSEN HOME SETUP MANUAL FOR SPECIFICS (SEE SL-01-0005 AND SL-01-0006). WHEN THE ATTACHED STRUCTURE HAS FOURTH WALL CONSTRUCTION OR IS DEEMED AND CONSTRUCTED TO BE SELF SUPPORTING, THESE ADDITIONAL PIERS AND ANCHORS ARE NOT REQUIRED.
- MAX. PIER SPACING ON 12" I-BEAM IS 96". MAX. PIER SPACING ON 10" OR 12" I-BEAM IS 120". SEE NOTE 4 ON PAGES SL-01-0005 THROUGH SL-01-0006.

REFER TO SL-01-0020, SL-01-0021 AND OTHER DETAILS IN THE SETUP MANUAL FOR MAXIMUM HEIGHT. THIS IS NOT DESIGNED NOR INTENDED TO BE A STILL FOUNDATION.

THIS RIGGING DIAGRAM IS PROVIDED AS A COURTESY ONLY. THE LICENSED SETUP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SETUP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

44'-0"



SEE NOTES AND TABLES ON PAGE 2 OF 2

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SEE NOTES AND TABLES ON PAGE 2 OF 2 FOR ADDITIONAL ANCHORING AND BEAM LOCATIONS

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SEE NOTES AND TABLES ON PAGE 2 OF 2
SEE WARNINGS AND CAUTIONS ON PAGE 2

REFER TO SUB-GROSS FOR
ADDITIONAL PIER REQUIREMENTS

JACOBSEN HOMES
PO BOX 368, 600 PACKARD CT.
SAFETY HARBOR, FLORIDA 34655

REFER TO THE JACOBSEN HOMES SETUP MANUAL AND
ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS

IMLT-35-270
JACOBSEN HOMES



IMLT- MODEL # 448B-270

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C
35270 - PAGE 1 OF 2

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTESY ONLY. THE LISTED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LISTED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

REFER TO SUB-GROSS FOR OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED FOR HEIGHT TO BE A SLAB FOUNDATION)

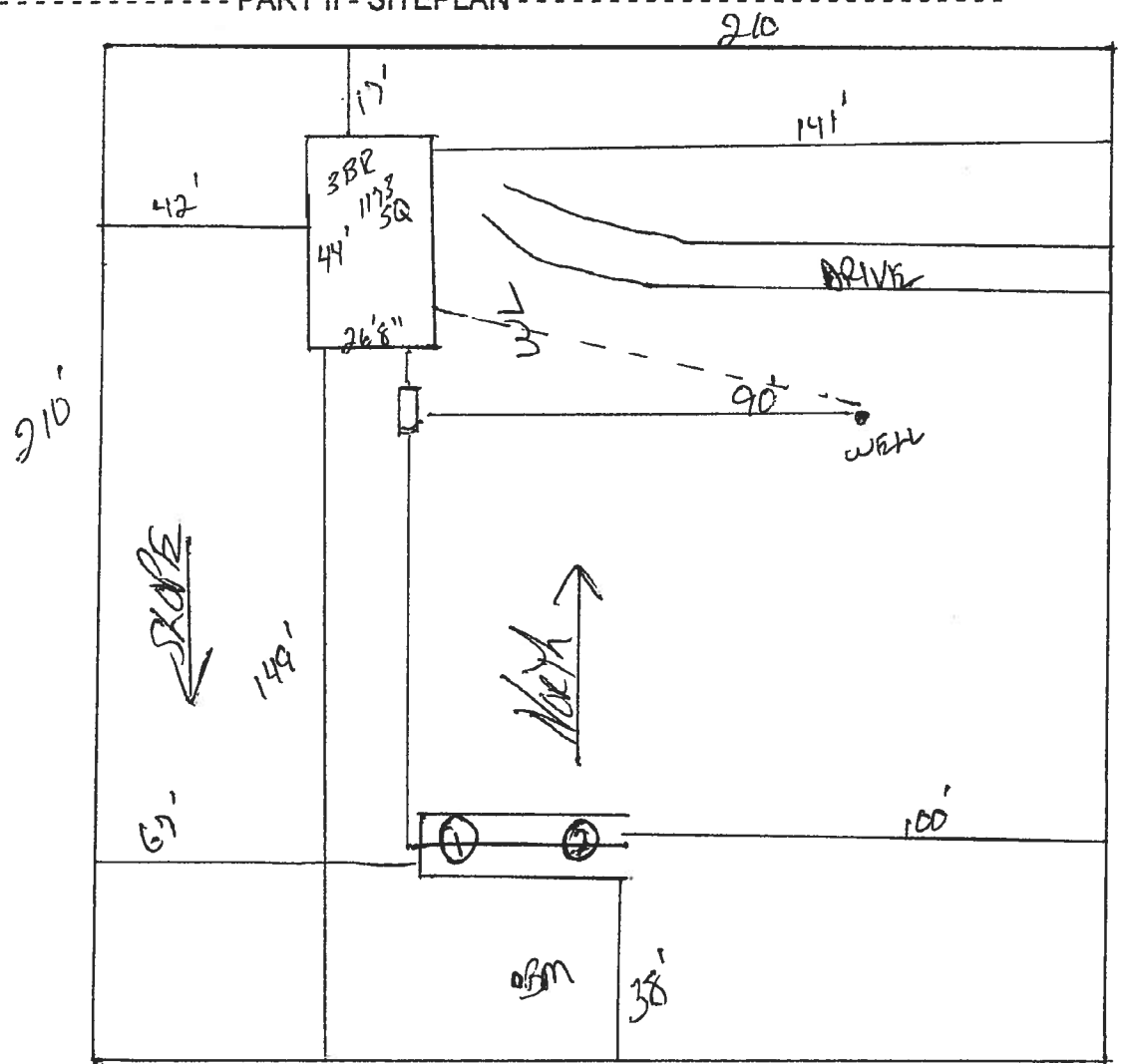
**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT**

Permit Application Number _____

Thomas

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

Scale: 1 inch = 40 feet.



Notes: 1 of 9.47 ACRES SEE ATTACHED

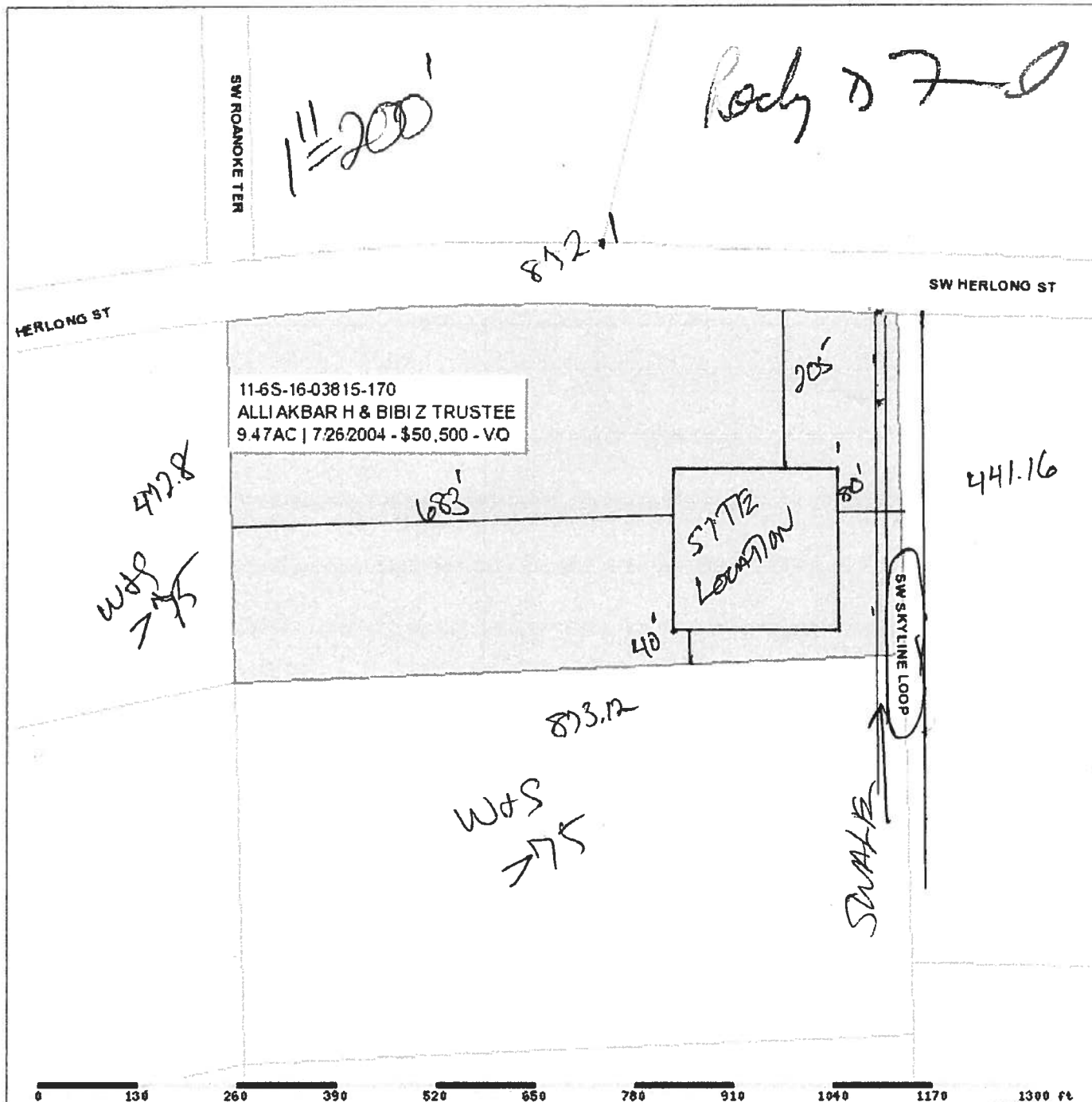
Site Plan submitted by: *Rocky D. [Signature]*
 Plan Approved _____ Not Approved _____
 By _____

MASTER CONTRACTOR
 Date _____
 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Thomas

FEB 05 2018



11-6S-16-03815-170
 ALLI AKBAR H & BIBI Z TRUSTEE
 9.47AC | 7/26/2004 - \$50,500 - VD

SITE LOCATION

SW SKYLINE LOOP

Columbia County Property Appraiser
 Jeff Hampton - Lake City, Florida 32055 | 386-758-1083

PARCEL: 11-6S-16-03815-170 - VACANT (000000)
 LOT 70 CARDINAL FARMS UNREC: COMM SE COR & RUN W 5311.34 FT N 1995.16 FT, W 60.18 FT, N 642.99 FT, N 2780.95 FT, N 77 DG E 887.51 FT TO POB, N 504.69

Name: ALLI AKBAR H & BIBI Z TRUSTEE

Site: 100 SW SKYLINE LOOP
 OF ALLI FAMILY REV TRUST

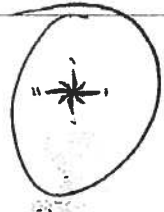
Mail: 9760 SW 11TH ST
 PEMBROKE PINES, FL 33025

Sales 5/8/2012 \$100.00 V/U
 Info 7/26/2004 \$60,500.00 V/Q

2017 Certified Values

Land	\$38,345.00
Bldg	\$0.00
Assd	\$38,345.00
Exmpt	\$0.00
Other: \$38,345 Sch: \$38,345	

NOTES:



This information, updated: 2/1/2018, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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GnizzlyLogic.com

District No. 1 - Ronald Williams
District No. 2 - Rusty DePratter
District No. 3 - Bucky Nash
District No. 4 - Everett Phillips
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: **2/7/2018 3:25:54 PM**
Address: **146 SW SKYLINE Loop**
City: **FORT WHITE**
State: **FL**
Zip Code **32038**
Parcel ID **03815-170**

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

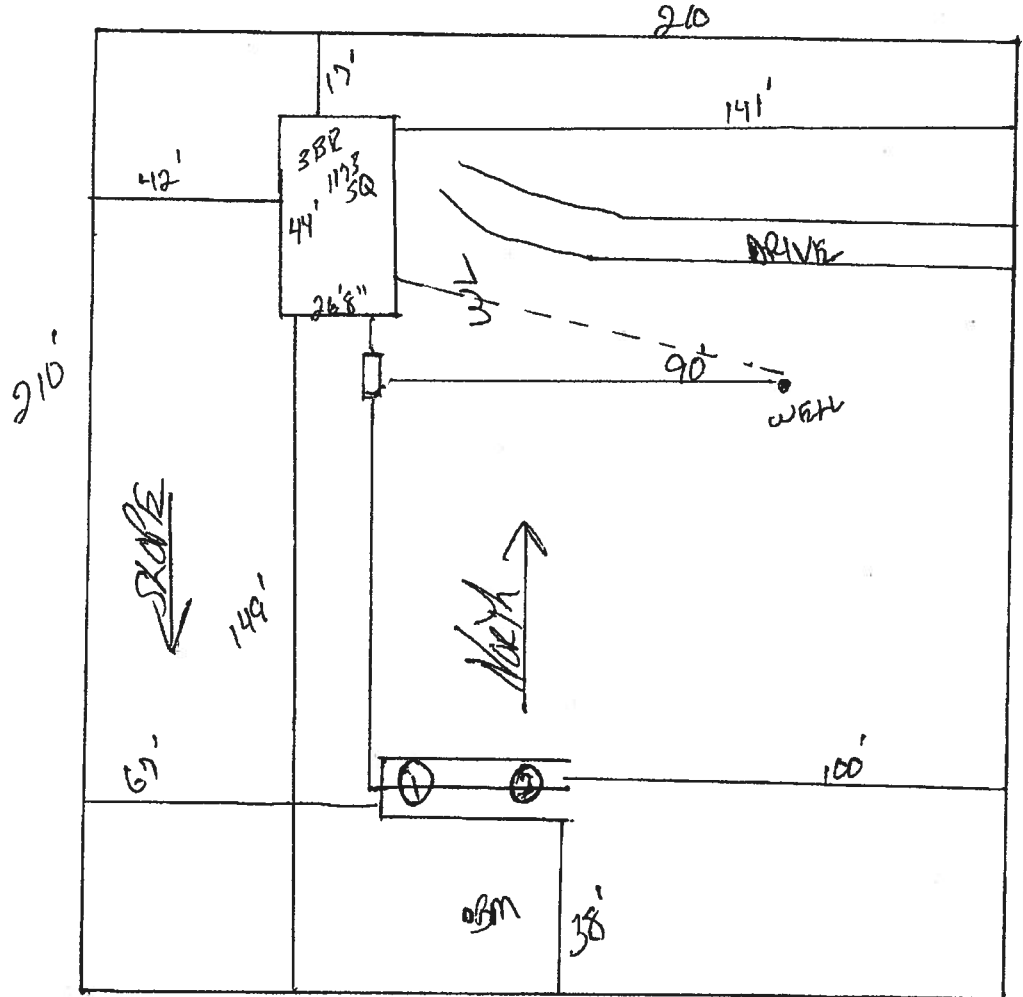
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 18-0090

Thomas

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: 1 of 9.47 Acres SEE ATTACHED

Site Plan submitted by: *Rocky D. Ford*
Plan Approved *x* Not Approved _____
By *[Signature]* *Celina*

MASTER CONTRACTOR
Date 2/15/18
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. 18-0090
DATE PAID: 2/6/18
FEE PAID: 318.50
RECEIPT #: 1327144

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Samantha Thomas

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: 70 BLOCK: na SUB: Cardinal Farms Unrec PLATTED: _____

PROPERTY ID #: 11-6S-16-03815-170 ZONING: _____ I/M OR EQUIVALENT: [Y] [N]

PROPERTY SIZE: 9.47 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] [N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 100 SW Skyline Loop, FW, 32038

DIRECTIONS TO PROPERTY: 47 South, TL Herlong Road, TR (2nd) Skyline loop, 1st lot on right

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

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	3	1174	
2				
3				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Rocky D Ford DATE: 2/5/2018

*La. Co. 2018 \$43,000.00
Doc. # 301.00*

This Instrument Prepared by & return to:

Name: TRISH LANG, an employee of
Integrity Title Services, LLC
Address: 343 NW Cole Terrace, #101
Lake City, FL 32055
File No. 17-11021TL

Inst: 201812002144 Date: 02/02/2018 Time: 1:35PM
Page 1 of 2 B: 1352 P: 2179, P.DeWitt Cason, Clerk of Court
Columbia, County, Fl: 80
Deputy ClerkDoc Stamp-Deed: 301.00

Parcel I.D. #: R03815-170

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 26th day of January, A.D. 2018, by **AKBAR H. ALLI**,
INDIVIDUALLY AND AS TRUSTEE OF ALLI FAMILY REVOCABLE TRUST DATED NOVEMBER 12, 2004,
hereinafter called the grantor, to **SAMANTHA LYNN THOMAS**, whose post office address is **7398 SW 155 ROAD,**
LAKE BUTLER, FL 32054, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee all that certain land situate in **Columbia County, State of Florida**, viz:

LOT 70, CARDINAL FARMS PHASE III, UNRECORDED:

A PARCEL OF LAND IN SECTION 11, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCE AT THE SOUTHEAST CORNER OF SECTION 11, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE SOUTH 88°19'59" WEST ALONG THE SOUTH LINE OF SAID SECTION 11, A DISTANCE OF 5311.34 FEET TO THE SOUTHWEST CORNER OF SECTION 11; THENCE NORTH 01°22'42" WEST ALONG THE WEST LINE OF SECTION 11, BEING ALSO THE EAST LINE OF SECTION 10, A DISTANCE OF 1995.16 FEET; THENCE SOUTH 88°38'56" WEST A DISTANCE OF 60.18 FEET; THENCE NORTH 01°01'15" EAST A DISTANCE OF 642.99 FEET; THENCE NORTH 01°21'04" WEST A DISTANCE OF 2137.96 FEET; THENCE NORTH 77°55'23" EAST A DISTANCE OF 887.51 FEET TO THE POINT OF BEGINNING; THENCE NORTH 01°21'04" WEST A DISTANCE OF 386.41 FEET TO A POINT ON THE SOUTH LINE OF SECTION 2; THENCE CONTINUE NORTH 01°21'04" WEST A DISTANCE OF 118.28 FEET TO A POINT ON THE SOUTHERLY MAINTAINED RIGHT-OF-WAY LINE OF OLD ICHETUCKNEE ROAD; THENCE NORTHEASTERLY, EASTERLY AND SOUTHEASTERLY ALONG SAID SOUTHERLY MAINTAINED RIGHT-OF-WAY LINE OF OLD ICHETUCKNEE ROAD A DISTANCE OF 875 FEET, MORE OR LESS; THENCE SOUTH 01°21'04" EAST A DISTANCE OF 92.62 FEET TO A POINT ON THE NORTH LINE OF SECTION 11; THENCE CONTINUE SOUTH 01°21'04" EAST A DISTANCE OF 376.06 FEET; THENCE SOUTH 87°29'42" WEST A DISTANCE OF 872.18 FEET TO THE POINT OF BEGINNING.

LESS AND EXCEPT ADDITIONAL RIGHT OF WAY OF HERLONG STREET PURSUANT TO ORDER OF TAKING RECORDED IN BOOK 1286, PAGE 744 OF THE PUBLIC RECORDS OF SAID COUNTY.


Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantee that he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2018.

In Witness Whereof, the said grantor has signed and sealed these presents, the day and year first above written.

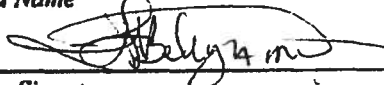
Signed, sealed and delivered in the presence of:



Witness Signature

Adia L. Alfonso

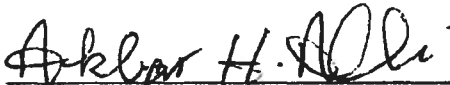
Printed Name



Witness Signature

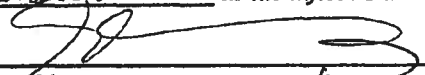
Victoria L. Jones-Belzaine

Printed Name


 L.S.
AKBAR H. ALLI, INDIVIDUALLY AND AS TRUSTEE OF ALLI FAMILY REVOCABLE TRUST DATED NOVEMBER 12, 2004
Address:
9760 SW 11TH STREET, PEMBROKE PINES, FL 33025

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 26th day of January, 2018, by **AKBAR H. ALLI, INDIVIDUALLY AND AS TRUSTEE OF ALLI FAMILY REVOCABLE TRUST DATED NOVEMBER 12, 2004**, who is known to me or who has produced Richard Brown LLC as identification.



Notary Public
My commission expires July 6th 2019


Mohamed Azeez
State of Florida
MY COMMISSION # FF 233006
Expires: July 6, 2019
Bonded thru Western Surety Company

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM



APPLICATION NUMBER 1802-10 CONTRACTOR Ronnie Norris PHONE 386-623-7716

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

Thomas

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>Micheal Reader / Madison Services</u> Signature 
	License #: <u>EC13002315</u> Phone #: <u>850-973-0111</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/ A/C	Print Name <u>Michael Boland / Ace A/C of Ocala</u> Signature 
	License #: <u>CAC1817716</u> Phone #: <u>352-274-9326</u>
	Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

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 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Michael Leader (license holder name), licensed qualifier
 for Madison Services LLC (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Rock D Ford</u>	1. <u>[Signature]</u>
2. <u>Dale B Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

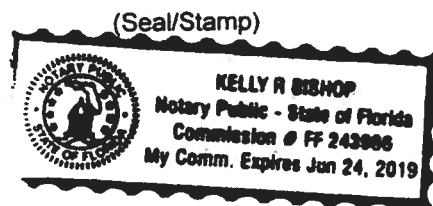
Michael Leader License Qualifiers Signature (Notarized) ELIZABETH License Number 11/2/15 Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Michael Leader, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 2 day of Nov, 2015.

Kelly Bishop
 NOTARY'S SIGNATURE





COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave. Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Michael A Boland (license holder name), licensed qualifier
 for ACE H/C of Ocala, LLC (company name), do certify that
 the below referenced person(s) listed on this form is/are contracted/hired by me, the license
 holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an
 officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said
 person(s) is/are under my direct supervision and control and is/are authorized to purchase and
 sign permits, call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dale Reed</u>	1. <u>[Signature]</u>
2. <u>Kelly Bishop</u>	2. <u>Kelly Bishop</u>
3. <u>Larry Ford</u>	3. <u>[Signature]</u>
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
 under my license and fully responsible for compliance with all Florida Statutes, Codes, and
 Local Ordinances. I understand that the State and County Licensing Boards have the power and
 authority to discipline a license holder for violations committed by him/her, his/her agents,
 officers, or employees and that I have full responsibility for compliance with all statutes, codes
 and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or
 officer(s), you must notify this department in writing of the changes and submit a new letter of
 authorization form, which will supersede all previous lists. Failure to do so may allow
 unauthorized persons to use your name and/or license number to obtain permits.

Michael A Boland License Qualifiers Signature (Notarized) CA1217716 License Number 11/17/15 Date

NOTARY INFORMATION
 STATE OF Florida COUNTY OF Marion

The above license holder, whose name is Michael A. Boland
 personally appeared before me and is known by me or has produced identification
 (type of I D) _____ on this 17th day of November, 20 15

Amanda Flood
 NOTARY'S SIGNATURE

(Seal/Stamp)



A & B Well Drilling, Inc.
5673 NW Lake Jeffery Road
Lake City, FL, 32055
(O) 386-758-3409
(F) 386-758-3410
(C) 386-623-3151

2/6/2018

To: Columbia County Building Department

Description of well to be installed for Customer: _____ Thomas
Located at Address: 100 SW SKYLARK RD

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Bruce Park
Sincerely
Bruce Park
President