

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP# _____

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 # 22-55-17-09340-071 Subdivision Mason City Lot# _____

▪ New Mobile Home _____ Used Mobile Home MH Size 28x56 Year 1983

▪ Applicant Permitting Services & More, LLC Phone # (386) 288-9673

▪ Address 301 SW PAUL CT Lake City FL 32024

▪ Name of Property Owner Joseph Decarolis Phone # (716) 523-5994

▪ 911 Address 190

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Joseph Decarolis Phone # 716-523-5994

Address 190 SW Hodges way Lake City FL 32085

▪ Relationship to Property Owner Self

▪ Current Number of Dwellings on Property (1) replacing

▪ Lot Size 0.54 Total Acreage 0.54

▪ Do you : Have Existing Drive on 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

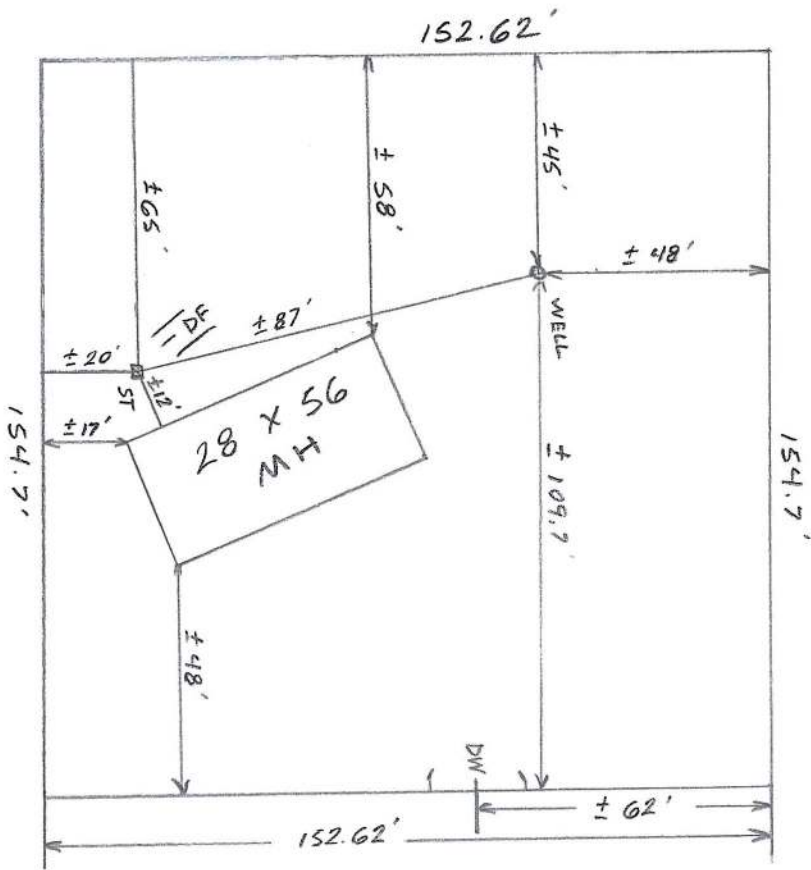
▪ Driving Directions to the Property (P) N Marion Ave, (L) NW Justice St (L) onto NW Columbia Ave (P) onto W. Dural St, (P) SW Main Blvd, (L) onto Main Blvd, (P) onto SW Turner Pl, (L) SW Bloomington Terr, (P) SW Cavalry Place, (L) onto SW Hodges way - destination on right.

Email Address for Applicant: Lumanda.Mote@gmail.com

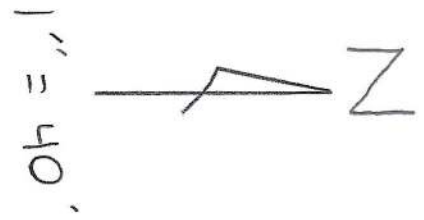
▪ Name of Licensed Dealer/Installer Brent Strickland Phone # 386 365-7043

▪ Installers Address 1294 NW Hump Farmer Rd Lake City FL 32055

▪ License Number 1H/1104218 Installation Decal # 93845



SW HODGES WAY



Joseph Decarolis
 190 SW Hodges way
 Lake City FL

Permitting Services
 Lamanda Mote
 (386) 288-9673
 YKnotel

Parcel 22-55-17-09340-071

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Brent Strickland PHONE 386 365-1743

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.

<p>ELECTRICAL</p>	<p>Print Name <u>Glenn Whittington</u> License #: <u>13002957</u></p>	<p>Signature <u>Glenn Whittington</u> Phone #: <u>386 972-1701</u></p>
<p align="center">Qualifier Form Attached <input type="checkbox"/></p>		
<p>MECHANICAL/ A/C</p>	<p>Print Name <u>Timothy Shatto</u> License #: <u>CAC 057875</u></p>	<p>Signature <u>Timothy Shatto</u> Phone #: <u>386 496-8224</u></p>
<p align="center">Qualifier Form Attached <input type="checkbox"/></p>		

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.

License Number: IH / 1104218 / 1 Name: BRENT STICKLAND		
Order #: 5559	Label #: 93845	Manufacturer: CONC
Homeowner: Joe De Carolis	Year Model: 1983	(Check Size of Home) Single <input type="checkbox"/>
Address: 190 SW Hodges Way	Length & Width: 56 x 28	Double <input checked="" type="checkbox"/>
City/State/Zip: Lake City, FL 32025	Type Longitudinal System: D/Over/1101V	Triple <input type="checkbox"/>
Phone #:	Type Lateral Arm System: D/Over/1101V	HUD Label #:
Date Installed:	New Home: <input type="checkbox"/> Used Home: <input checked="" type="checkbox"/>	Soil Bearing / PSF: 1000
Installed Wind Zone: II	Data Plate Wind Zone: II	Torque Probe / in-lbs: 290
Permit #:		
Note: C+G used M# home 1983 CONC 28x56		

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

93845

LABEL #	DATE OF INSTALLATION
BRENT STICKLAND	
NAME	
IH / 1104218 / 1	5559
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

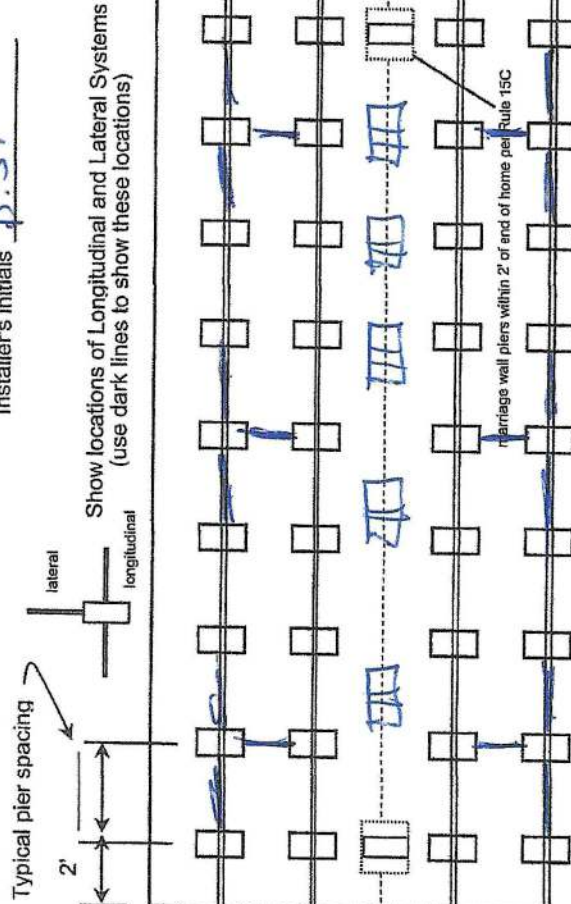
PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

Mobile Home Permit Worksheet

Installer: Brent Strickland License # JA 1104218
 Address of home being installed: 190 SW Hodges Way
Lake City FL
 Manufacturer: CONC Length x width: 28 x 56

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: B.S.



Will Divers Steel Piers
Arms

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 # 93845
 Triple/Quad Serial # 3338733205AB

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'	8'
1500 psf	4' 6"	6'	7'	8'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'	8'
2500 psf	7' 6"	8'	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.): 17x25

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

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: _____
 Longitudinal Stabilizing Device w/ Lateral Arms
 Manufacturer: DIVERSION

OTHER TIES: _____
 Sidewall: _____
 Longitudinal: _____
 Marriage wall: _____
 Shearwall: _____
 Number: 2

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 290 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.

Installer's initials B.S.

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Brent Strickland

Date Tested 1-30-2023

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. 21

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28
 Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: lags Length: 5 1/2" Spacing: 16"
 Walls: Type Fastener: scabs Length: 4 1/2" Spacing: 16"
 Roof: Type Fastener: lags Length: 6 1/2" 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 B.S.

Type gasket 22 FOAM

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 [Signature] Date 1-30-23



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, Brent Strickland, give this authority for the job address show below
Installer License Holder Name

only, 190 SW Hodgesway Lake City FL, 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)
Lamanda Mote	<i>Lamanda Mote</i>	<input checked="" 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
		<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.

Brent Strickland
 License Holders Signature (Notarized)

FH1104218
 License Number

1/30/2023
 Date

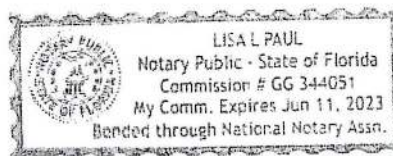
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

The above license holder, whose name is Brent Strickland, personally appeared before me and is known by me or has produced identification (type of I.D.) Driver's license on this 30th day of January, 2023.

Lisa L. Paul
 NOTARY'S SIGNATURE

(Seal/Stamp)





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 AGENT AUTHORIZATION

I, Brent Strickland, give this authority and I do certify that the below
Installers Name

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	Agents Company Name
Lamanda Mote	<i>Lamanda Mote</i>	Permitting Services # More, LLC

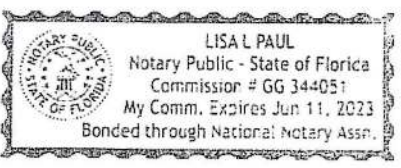
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

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.

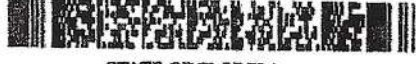
Brent Strickland License Holders Signature (Notarized) *FH1104218* License Number *1/30/2023* Date

NOTARY INFORMATION:
 STATE OF: Florida COUNTY OF: Suwannee
 The above license holder, whose name is Brent Strickland, personally appeared before me and is known by me or has produced identification (type of I.D.) Driver's License on this 30 day of January, 20 23.

Lisa L. Paul
 NOTARY'S SIGNATURE

(Seal/Stamp)


CNTY# AGY# SUB# RPT#
29 1 MN# 5954
AUDIT#



LP 2393911
TR 1688748085
EP 1449818
SP 93115703

STATE OF FLORIDA
APPLICATION FOR VEHICLE/VESSEL
CERTIFICATE OF TITLE

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION#	YR. MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR	WT/LENGTH	GVW/LOC		
20588778	3338733205A B	1983	CONC	HS	UNK	55'			
DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	FUEL	VESSEL TYPE	WATER	PL NUMBER	AUTH DESTRUCTION
07 29 22	TRT	PRIVATE							

Applicant/Owner's Name & Address
JOSEPH ANTHONY DE CAROLIS
155 LINCOLN AVE
LOCKPORT, NY 14094-5525

Sold to DECAROLIS
trade in info

BIRTHDATE MO. DAY YEAR	SEX	RESIDENT Y N ALIEN	CNTY RES#
11 19 56	M	X	29
1st OWNER FLD# OR F.E.D.#	2nd OWNER FLD# OR UNIT#		
D264481564190			

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
4.75	91.00	0.00	95.75

Action Requested: TRANSFER TITLE
RETAINED AS ELECTRONIC TITLE

Brands:

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	ODOMETER DECLARATION CERTIFICATION
FL	05/31/2022		XX		<input type="checkbox"/>

LIEN INFORMATION
NAME OF FIRST LIENHOLDER
ADDRESS

SELLER INFORMATION
NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER
C & G MANUFACTURED HOMES
ADDRESS
278 SW DEPUTY J DAVIS LN
LAKE CITY, FL 32024-3738
DEALER LICENSE NO.
DH10162781

This is what he is buying

SALES TAX AND USE REPORT

TRANSFER OF TITLE PURCHASER HOLDS VALID
IS EXEMPT FROM EXEMPTION CERTIFICATE
FLORIDA SALES OR VEHICLE / VESSEL WILL BE
USE TAX FOR THE USED EXCLUSIVELY FOR RENTAL
REASON(S) CHECKED OTHER

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS \$

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES \$ 0.00

SELLING PRICE VERIFIED

APPLICANT CERTIFICATION
I HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.
I CERTIFY THAT THE CERTIFICATE OF TITLE IS NOT LOST OR DESTROYED.
I CERTIFY THAT THE MOTOR VEHICLE/VESSEL HAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.
I HEREBY CERTIFY THAT I AM LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL, DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I AM FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.
UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of Applicant/Owner
HSMV 62041 REVISED 02/06 SCAN CODE MVT
Signature of Applicant/Co-Owner

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.

Columbia County Property Appraiser

Jeff Hampton

2022 Working Values

updated: 8/25/2022

Parcel: << **22-5S-17-09340-071 (34319)** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info		Result: 1 of 1	
Owner	DECAROLIS JOSEPH ANTHONY 155 LINCOLN AVE LOCKPORT, NY 14094		
Site	190 SW HODGES Way, LAKE CITY		
Description*	THE S1/2 OF E1/2 OF N1/2 OF BLOCK 48 MASON CITY. 896-1357, 956-2506,2507, CT 1263- 776, WD 1282-2369, WD 1298-2456, WD 1341- 112, WD 1341-1297, QC 1367-476, QC 1381-1490, WD 1401-2202,		
Area	0.54 AC	S/T/R	22-5S-17E
Use Code**	MOBILE HOME (0200)	Tax District	3
*The Description above is not to be used as the Legal Description for this parcel in any legal transaction. **The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.			



Property & Assessment Values			
2021 Certified Values		2022 Working Values	
Mkt Land	\$12,868	Mkt Land	\$9,855
Ag Land	\$0	Ag Land	\$0
Building	\$7,846	Building	\$9,382
XFOB	\$0	XFOB	\$3,250
Just	\$20,714	Just	\$22,487
Class	\$0	Class	\$0
Appraised	\$20,714	Appraised	\$22,487
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$20,714	Assessed	\$22,487
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$20,714 city:\$0 other:\$0 school:\$20,714	Total Taxable	county:\$22,487 city:\$0 other:\$0 school:\$22,487

Sales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
12/18/2019	\$26,500	1401/2202	WD	I	U	35
4/2/2019	\$100	1381/1490	QC	I	U	11
8/21/2018	\$100	1367/0476	QC	I	U	11
7/27/2017	\$100	1341/1297	WD	V	U	11
7/20/2017	\$11,000	1341/0112	WD	V	Q	03
7/30/2015	\$53,000	1298/2456	WD	I	Q	01
9/5/2014	\$4,000	1282/2369	WD	I	U	12
9/25/2013	\$100	1263/0776	CT	I	U	18
6/28/2002	\$14,500	0956/2507	WD	I	U	03
3/2/2002	\$100	0956/2506	QC	I	U	03
9/24/1999	\$9,500	0896/1357	WD	V	Q	

▼ **Building Characteristics**

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	MOBILE HME (0800)	1985	924	924	\$9,382

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

▼ **Extra Features & Out Buildings (Codes)**

Code	Desc	Year Blt	Value	Units	Dims
9945	Well/Sept		\$3,250.00	1.00	0 x 0

▼ **Land Breakdown**

Code	Desc	Units	Adjustments	Eff Rate	Land Value
0200	MBL HM (MKT)	0.540 AC	1.0000/1.0000 1.0000/1.4600000 /	\$18,250 /AC	\$9,855

Search Result: 1 of 1



0 26 52 78 104 130 156 182 208 234 260 ft

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

PARCEL: 22-5S-17-09340-071 (34319) | MOBILE HOME (0200) | 0.54 AC
 THE S1/2 OF E1/2 OF N1/2 OF BLOCK 48 MASON CITY, 896-1357, 956-2506,2507, CT 1263-776, WD 1282-2369, WD 1298-2456, WD 1341-112, WD 1341-1297, QC 1367

DECAROLIS JOSEPH ANTHONY
 Owner: 155 LINCOLN AVE
 LOCKPORT, NY 14094
 Site: 190 SW HODGES Way, LAKE CITY

Sales 12/18/2019 \$26,500 I(U)
 Info 4/2/2019 \$100 I(U)
 8/21/2018 \$100 I(U)

2022 Working Values			
Mkt Lnd	\$9,855	Appraised	\$22,487
Ag Lnd	\$0	Assessed	\$22,487
Bldg	\$9,382	Exempt	\$0
XFOB	\$3,250	county:	\$22,487
Just	\$22,487	Total	city:\$0
		Taxable	other:\$0
			school:\$22,487



This information, 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, it's

Prepared by and return to:
Brent E. Baris
For the Firm
Brent E. Baris, P.A.
18731 NW US Highway 441
High Springs, FL 32643
386-454-0688
File Number: 19-457

Parcel Identification No. 22-5S-17-09340-071

RECORDED ELECTRONICALLY
County Columbia
Instrument # 201912029900
Date 12/22/19 Time 7:57am
Book 1701 Page 2202

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 18th day of December, 2019 between James Burdge, a single man and Jorg S. Thome, a single man whose post office address is 1540 Upper Middle Creek Road, c/o Bare Bones Campground #25, Sevierville, TN 37876 of the County of Sevier, State of Tennessee, grantor*, and Joseph Anthony DeCarolis, a single man whose post office address is 35 Lisbon Avenue, Buffalo, NY 14214 of the County of Erie, State of New York, grantee*.

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

The South 1/2 of the East 1/2 of the North 1/2 of Block 48 Mason City Subdivision, according to the Plat thereof, recorded in Plat Book 1, Page 31, of the Public Records of Columbia County, Florida.

Subject to taxes for 2020 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

* "Grantor" and "Grantee" are used for singular or plural, as context requires.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Stephanie Bean
Witness Name: Stephanie Bean
Romila Gunsallus
Witness Name: Romila Gunsallus

James Burdge (Seal)
James Burdge

Stephanie Bean
Witness Name: Stephanie Bean
Romila Gunsallus
Witness Name: Romila Gunsallus

Jorg S. Thome (Seal)
Jorg S. Thome

State of TN

County of Sevier

The foregoing instrument was acknowledged before me this 18th day of December, 2019 by James Burdge and Jorg S. Thome, who are personally known or have produced drivers' licenses as identification.

[Notary Seal]



Romila Gunsallus
Notary Public

Printed Name: Romila Gunsallus

My Commission Expires: 9-22-20