

# **PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

For Office Use Only

(Revised 7-1-15)

Zoning Official \_\_\_\_\_

Building Official \_\_\_\_\_

AP# S2541

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 # 05-45-16-02773-034

Subdivision \_\_\_\_\_

Lot# 7

▪ New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 28x56 Year 2022

▪ Applicant H&L Customer Service, LLC Phone # (386) 984-9334

▪ Address 301 SW Faul Ct, Lake City, FL, 32024

▪ Name of Property Owner Margaret Swafford Phone# 727-637-7377

▪ 911 Address 260 SW Vista Ter, Lake City

▪ Circle the correct power company - FL Power & Light - Clay Electric

(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Donald Swafford Phone # 727-637-7377

Address 260 SW Vista Ter, Lake City.

▪ Relationship to Property Owner Son

\* Current Number of Dwellings on Property 1 to be demo

▪ Lot Size 0.86 acres Total Acreage 0.86 Acres.

▪ 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

▪ Driving Directions to the Property Turn (L) onto NE Madison St, Turn (L) onto N. Marion Ave  
Turn (L) onto W Duval St, Turn (L) onto SW CR 252B, Turn (R) onto SW Deputy  
J Davis Ln, Turn (L) onto SW Pinemont Rd, Turn (R) onto SW MARSHAL Terr,  
Turn (L) onto SW Shady Ln, Turn (R) onto SW Vista Ter, Destination on (L)

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # (386) 623-2203

▪ Installers Address 6355 SE CR 245, Lake City, FL, 32025

▪ License Number JH1025386 Installation Decal # \_\_\_\_\_



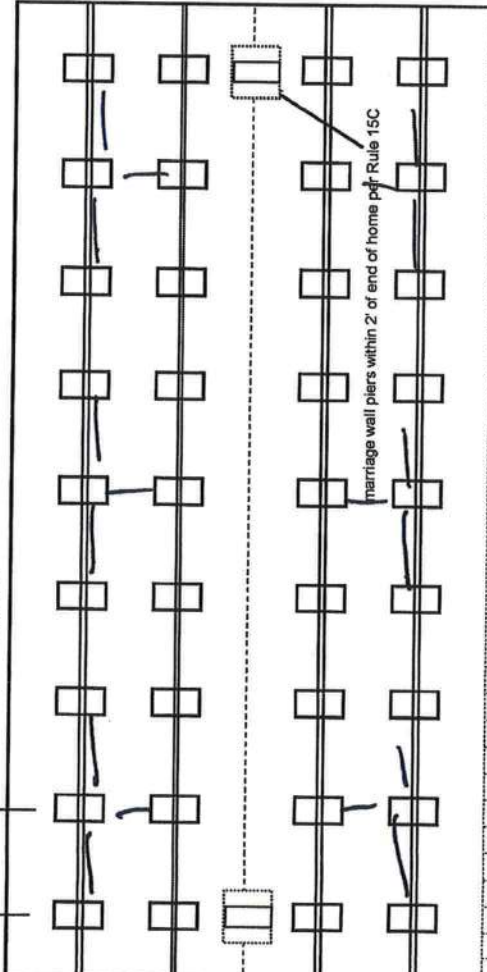
# Mobile Home Permit Worksheet

Installer: Robert Sheppard License # IT1005386  
 Address of home being installed: 260 SW Vista Ter.  
Lake City, FL  
 Manufacturer: Champion Length x width: 56 x 28

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.



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



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'	9'	10'	11'
2000 psf	6'	8'	9'	10'	11'	12'	13'
2500 psf	7' 6"	9'	10'	11'	12'	13'	14'
3000 psf	8'	10'	11'	12'	13'	14'	15'
3500 psf	8'	10'	11'	12'	13'	14'	15'

\* interpolated from Rule 15C-1 pier spacing table.

## PIER PAD SIZES

I-beam pier pad size 17x35  
 Perimeter pier pad size 16x16  
 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 \_\_\_\_\_  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer Over

## OTHER TIES

Number \_\_\_\_\_  
 Sidewall \_\_\_\_\_  
 Longitudinal \_\_\_\_\_  
 Marriage wall \_\_\_\_\_  
 Shearwall \_\_\_\_\_

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 # \_\_\_\_\_

Triple/Quad ☐ Serial # F1261-002-A-8202982-A8



# 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 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 requires anchors with 4000 lb. holding capacity.

PS Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

11/10/21

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. 29

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. 28

## Site Preparation

Debris and organic material removed \_\_\_\_\_  
Water drainage: Natural \_\_\_\_\_ Swale \_\_\_\_\_ Pad ☒ Other \_\_\_\_\_

## Fastening multi wide units

Floor: Type Fastener: lags Length: 6 Spacing: 16  
Walls: Type Fastener: lags Length: 4 Spacing: 16  
Roof: Type Fastener: lags Length: 3 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

RS

Type gasket Factory

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

Robert Sheppard

Date 11/10/21

**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_

CONTRACTOR Robert Sheppard

PHONE (886) 623-2203

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

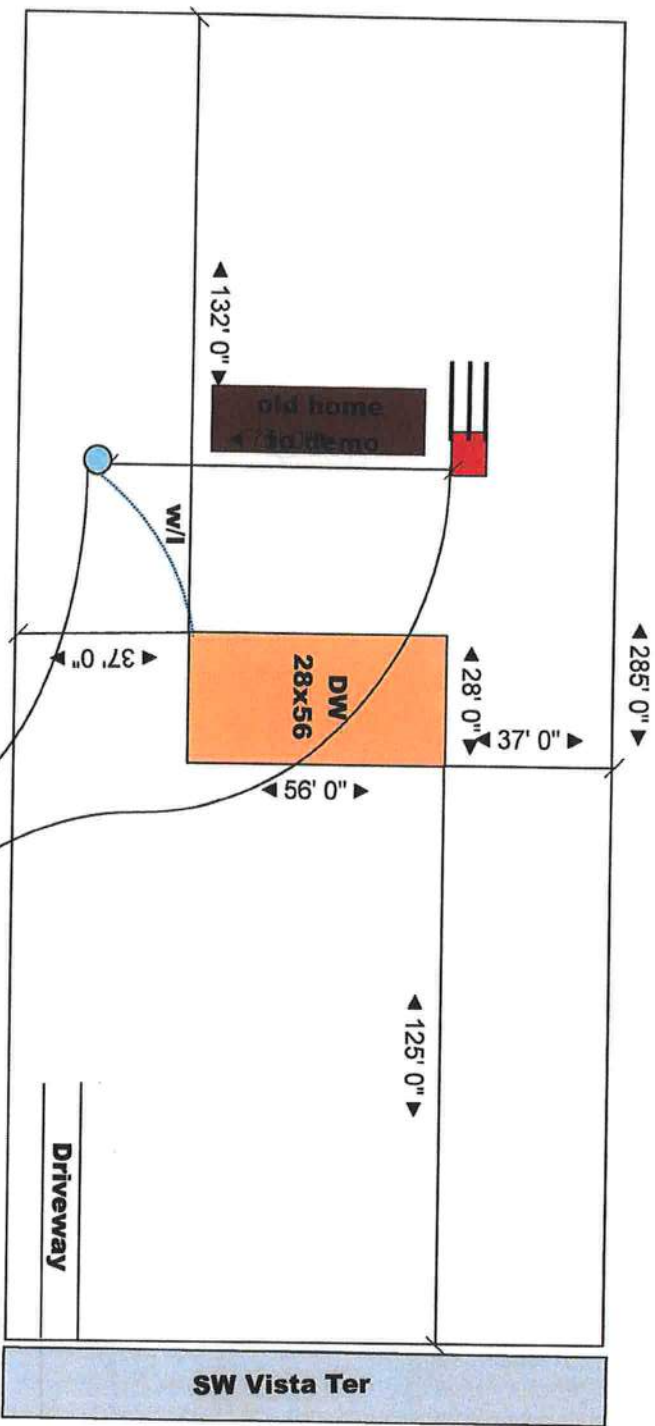
In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide 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.*

<b>ELECTRICAL</b>	Print Name <u>Glen Whittington</u> License #: <u>EC 13002957</u>	Signature <u>Glen Whittington</u> Phone #: <u>(886) 972-1701</u>
	Qualifier Form Attached <input type="checkbox"/>	
<b>MECHANICAL/ A/C</b>	Print Name <u>Charles Thomas</u> License #: <u>CAC 1817820</u>	Signature <u>Charles O. Thomas</u> Phone #: <u>(419) 680-2023</u>
	Qualifier Form Attached <input type="checkbox"/>	

**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.





**Parcel ID: 05-04S-16-02773-034**

**Existing Septic**

**Existing Well**

<b>Site:</b>  <b>260 SW Vista Dr, Lake City</b>	<b>Drawing:</b>  <b>80260</b>	<b>Project:</b>  <b>00260</b>	<b>Drawn:</b>  <b>Heide M</b>	<b>Notes:</b>  <b>H&amp;L Customer Service, LLC</b> <b>301 SW Faul Ct</b> <b>Lake City, FL, 32024</b> <b>(386)984-9334</b>
<b>Title:</b>  <b>Donald Swafford</b>	<b>Scale:</b>  <b>1"=40'</b>	<b>Date:</b>  <b>11/14/21</b>	<b>Rev:</b>  <b>A</b>	



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, Robert Sheppard, give this authority for the job address show below

Installer License Holder Name

only, 260 SW Vista Ter, 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)
Heide Morrison	<i>H Morrison</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.

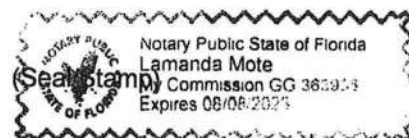
Robert Sheppard JH/1025386 11/10/21  
License Holders Signature (Notarized) License Number Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 10<sup>th</sup> day of November, 2021.

Lamanda Mote  
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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Robert Sheppard, 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
Heide Morrison	H Morrison	Hdl Customer Service.

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.

Robert Sheppard JH/1025376 11/10/21  
License Holders Signature (Notarized) License Number Date

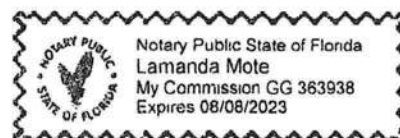
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) on this 10<sup>th</sup> day of November, 20 21.

Lamanda Mote  
NOTARY'S SIGNATURE

(Seal/Stamp)





**CHAMPION**  
HOME BUILDERS

1. Approx. Square Footage  
2. Approximate Permitted Living Area

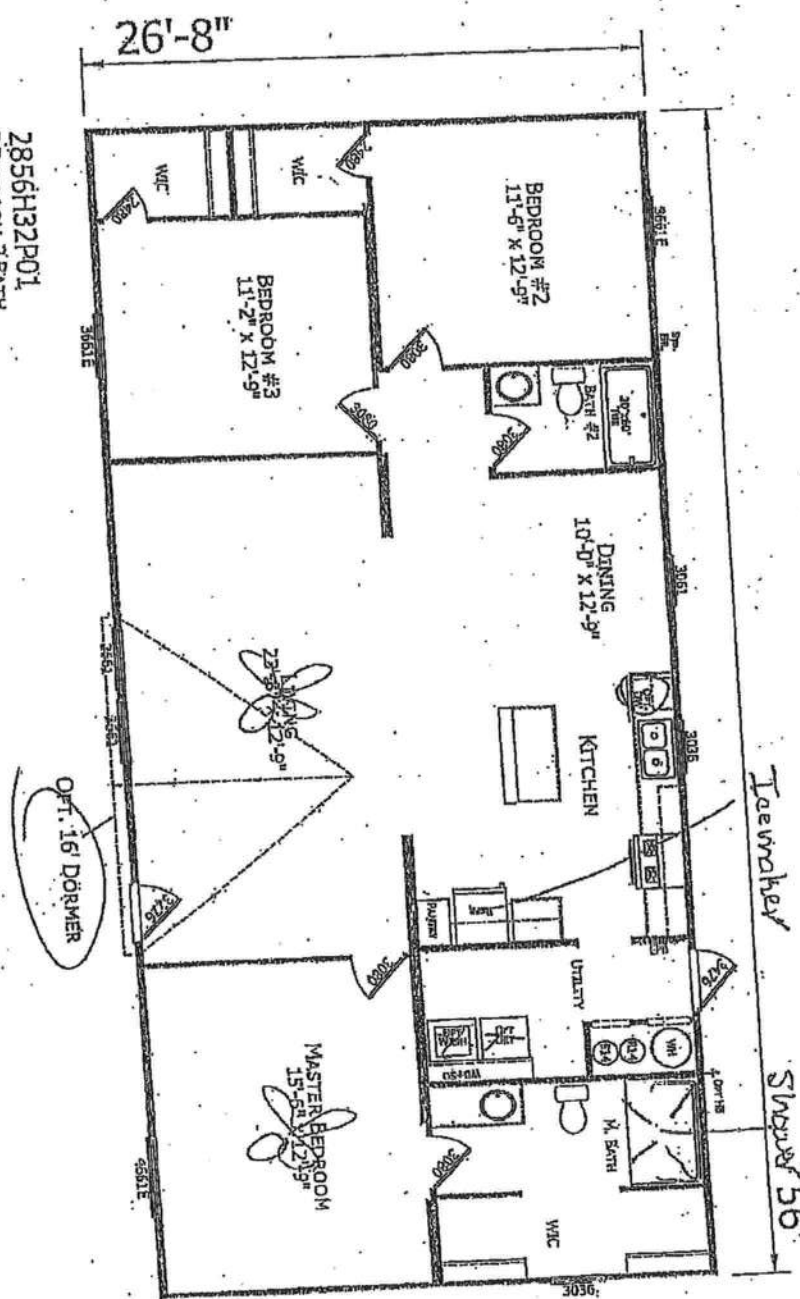
APPROXIMATE  
SQUARE  
FOOTAGE

2856H32P01  
56'-0" X 26'-8"  
3 BD 2 BT

LITERATURE  
PLAN

1-101

2856H32P01  
3 BEDROOM 2 BATH  
56'-0" X 26'-8"  
1493 Sq. Ft. TOTAL  
06-16-2020



16' x 12'-9"

56'-0"

12



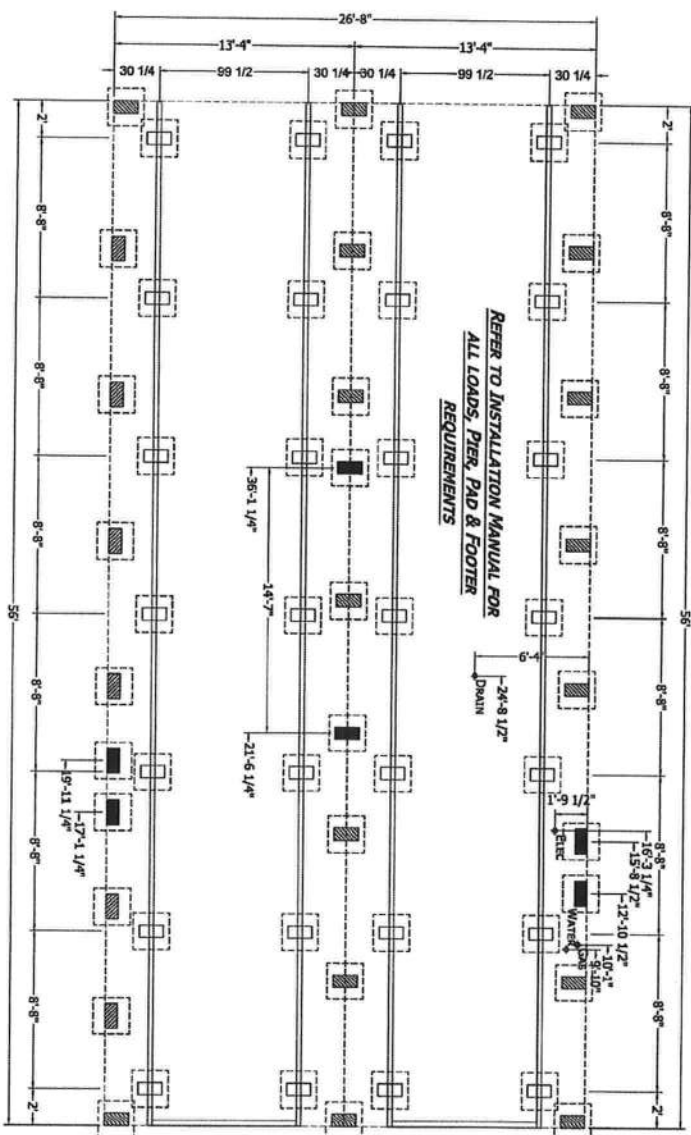
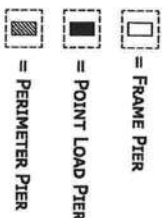
733 W. BIG BEAVER ROAD, SUITE 1000 TROY, MI 48064  
PHONE: 313-614-2200

- 5) IT WILL BE THE RESPONSIBILITY OF THE SITE CONTRACTOR TO VERIFY THE PROPER LOCATION OF COOLING SUPPORT BLOCKING AND TO VERIFY THE PROPER MATING LINE GROWTH DIMENSIONS BASED UPON ACTUAL SITE CONDITIONS AND REQUIREMENTS (DOUBLE WIDES ONLY).
- 6) ALLOW 1/2" AT MATING LINE FOR MATE UP GROWTH.
- 7) SEE SETUP AND INSTALLATION MANUAL FOR PERMETER BLOCKING REQUIREMENTS.

PLEASE READ AND UNDERSTAND THE FOLLOWING INFORMATION FOR HOMES PRODUCED ON OR AFTER JUNE 1ST 2009.  
THE MANUFACTURER ASSUMES NO LIABILITY FOR THE DEFECTIVE CONTRACTOR TO INSURE THAT ALL SITE WORK WILL CORRELATE WITH THE UNIT ORDERED.

NOTICE TO HOME INSTALLERS: MANUFACTURED HOMES WEIGH SEVERAL TONS. DO NOT ATTEMPT TO INSTALL ANY HOME ON SITE WITHOUT HAVING EXPERIENCE, KNOWLEDGE, AND UNDERSTANDING OF ALL INSTALLATION REQUIREMENTS. FAILURE TO MEET THESE REQUIREMENTS MAY RESULT IN INJURY OR DEATH TO AN EXPERIENCED INSTALLER. INSTALLERS, PLEASE READ AND UNDERSTAND THE SET-UP AND INSTALLATION MANUAL SUPPLIED WITH THE HOME BEFORE ATTEMPTING ANY INSTALLATION OF ANY MANUFACTURED HOME.

PERMANENT FOUNDATIONS: CHECK LOCAL BUILDING CODES AND REGULATIONS AND CONSULT A REGISTERED PROFESSIONAL OR STRUCTURAL ENGINEER WHEN YOU ARE SITTING YOUR HOME ON A PERMANENT FOUNDATION (SUCH AS A FULL BASEMENT, CRAWL SPACE, OR LOAD BEARING PERIMETER FOUNDATION).



### **MODIFICATIONS**

PROJECT

**Time:**

SHEET

2856H32P01  
56'-0" x 26'-8"  
3 BD 2 BT

DRAWN BY: B. CAMPBELL

FILENAME: 261-2856122P01 6-16-2020

PROPRIETARY AND CONFIDENTIAL  
THESE DRAWINGS AND SPECIFICATIONS ARE ORIGINAL,  
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Home only or Land & Home	
Financed by	
Southern Insurance?	
DOB	12/2/60
BUYER	

IRONWOOD HOMES OF LAKE CITY LLC

4109 WEST US HWY 90

Lake City, FL 32055

(386) 754-8844 fax (386) 754-0190

SWAFFORD DONALD EUGENE

727-637-7377

DATE 10/27/2021

ADDRESS  
1031 PORT LANE HOLIDAY FL 34691  
DELIVERY ADDRESS  
TBD SW VISTA TER LAKE CITY FL 32024

PASCO COUNTY

SALES PERSON  
MIKE COX

MAKE & MODEL  
CHAMPION 2856H32P01  
YEAR  
2022  
BEDROOMS  
3X2  
FLOOR SIZE  
28X56

HITCH SIZE  
L  
28X60

SERIAL NUMBER  
FL261-00P-H-B202982AB  
☒ NEW ☐ USED  
COLOR

PROPOSED DELIVERY DATE

TBD

KEY NUMBERS

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
CEILING			
EXTERIOR			
FLOORS			

This insulation information was furnished by the manufacturer and is disclosed

in compliance with the Federal Trade Commission Rule 16CFR, Sec. 460.16.

BASE PRICE OF UNIT	\$85,900.00
TAXABLE ADDS	\$15,045.00
Other (taxable)	\$0.00
SUB-TOTAL	\$100,945.00
SALES TAX 6%	\$6,056.70
If Base Price < \$5,000 1%	\$0.00
County Surtax (Sales price over \$5,000)	\$50.00
Tag & Title Fees	
NON TAXABLE ADDS	\$8,070.00
LAND PURCHASE	
Points	\$0.00
Security Interest	\$0.00
1. CASH PURCHASE PRICES	\$115,121.70
TRADE IN ALLOWANCE	\$ 0.00
LESS BAL. DUE ON ABOVE	\$ 0.00
NET ALLOWANCE	\$
CASH DOWN PAYMENT	\$
PRE PAIDS	\$ 0.00
2. LESS TOTAL CREDITS	\$ 27,000.00
SUB-TOTAL	\$ \$88,121.70
SALES TAX(not included above)	\$0.00
3. UNPAID BAL OF CASH SALE PRICE	\$ \$88,121.70

REMARKS:  
NO VERBAL AGREEMENTS WILL BE HONORED.  
Initial: \_\_\_\_\_  
Connect water & sewer within 20 ft. to existing facilities  
Customer responsible for any gas or electrical hookups  
Wheels & Axles deleted from sale price of home. Will lend for a local move  
Customer responsible for leveling of home after initial setup. Cannot be responsible for settling of land.  
PRICE INCLUDES SET-UP A/C STEPS AND STANDARD WHITE SKIRTING

NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.

DESCRIPTION OF TRADE-IN	YEAR	SIZE
MAKE	MODEL	BEDROOMS
TITLE NO.	SERIAL	COLOR
AMOUNT OWING TO WHOM	NO.	

ANY DEBT BUYER OWES ON THE TRADE-IN IS TO BE PAID BY THE ☐ DEALER ☐ BUYER

THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures. Buyer is purchasing the above described trailer, manufactured home or vehicle: the optional equipment and accessories, the insurance as described has been voluntarily: that Buyer's trade-in is free from all claims whatsoever, except as noted.  
BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER HAS READ AND UNDERSTANDS THE BACK OF THIS AGREEMENT.

By \_\_\_\_\_  
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent  
APPROVED

BUYER  
SOCIAL SECURITY NO. \_\_\_\_\_  
SIGNED X \_\_\_\_\_  
BUYER  
SOCIAL SECURITY NO. \_\_\_\_\_



H&L Customer Service  
LIMITED POWER OF ATTORNEY

I Donald Swafford, do hereby authorize H&L Customer Service and its members, Heide Morrison and or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits and picking up permits as needed for the installation of a new mobile home located at the below address;

260 SW Vista Ter.  
Lake City, FL

In Columbia county, Florida.

Margaret Swafford  
Signature

11/8/21  
Date

State of Florida

County of Pasco

This instrument was signed or acknowledged before me on this 8 day of November by Margaret Swafford, who is personally known X or ID provided

If ID provided, type of State issued ID provided N/A

[Signature]  
Notary Public

Seal:

My Commission Expires: August 17, 2025



STATE OF FLORIDA  
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Margaret Swafford  
(State Corporation Name as it appears on the Property Appraisers Office website)  
as the owner of the below described property:

Property tax Parcel ID number 05-45-16-02773-034

Subdivision (Name, lot, Block, Phase) \_\_\_\_\_

Give my permission for Donald Swafford to place a

Circle one Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home /  
or more — Barn — Shed — Garage / Culvert / Other \_\_\_\_\_

I (We) understand that the named person(s) above will be allowed to receive a building  
permit on the property number I (we) have listed above and this could result in an  
assessment for solid waste and fire protection services levied on this property.

Margaret Swafford 11/8/21  
Owner Signature Date

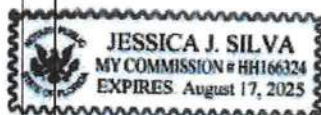
\_\_\_\_\_  
Owner Signature Date

\_\_\_\_\_  
Owner Signature Date

Sworn to and subscribed before me this 8 day of November, 2021, by  
X physical presence or \_\_\_\_\_ online notarization and this (these) person(s) are  
personally known to me X or produced ID NIA

Jessica J. Silva Jessica J. Silva  
Notary Public Signature Notary Printed Name

Notary Stamp/



Revised 5/21/2021



# Columbia County Property Appraiser

Jeff Hampton

2022 Working Values

updated: 11/4/2021

Parcel: << 05-4S-16-02773-034 (11744) >>

Aerial Viewer Pictometry Google Maps

## Owner & Property Info

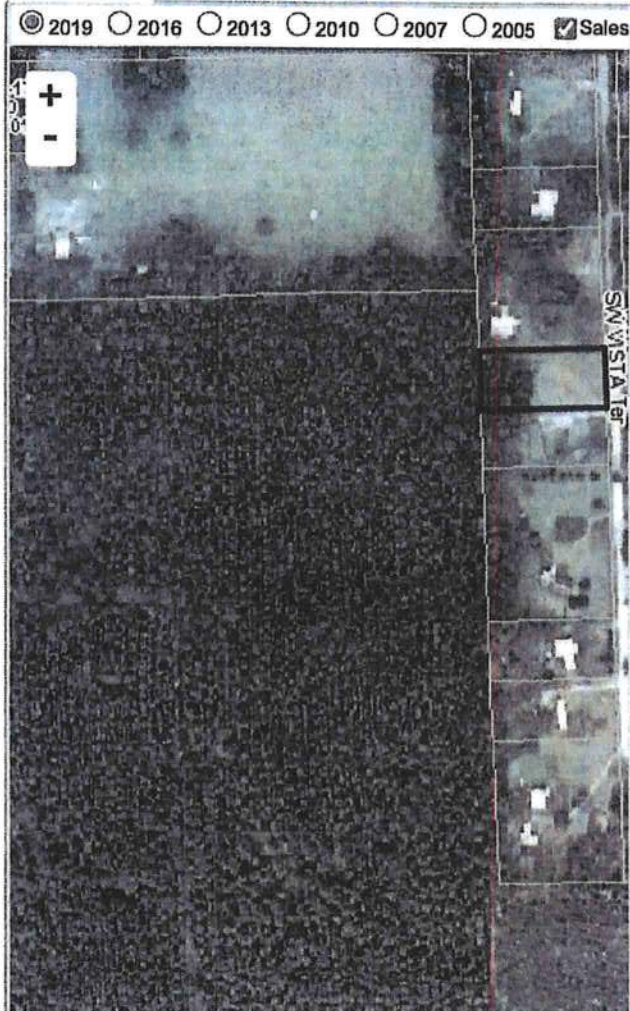
Owner	SWAFFORD MARGARET P <i>Mother</i> 1031 PERT LN HOLIDAY, FL 34691-5163		
Site	260 SW VISTA Ter, LAKE CITY		
Description*	THE N 132.58 FT OF THE S 1193.23 FT OF THE W 333.16 FT OF SE1/4 OF NE1/4, EX RD R/W (AKA PRCL #7). 533-148, 889-431, 891-1867, 985-2662, QC 1026-1327, QC 1429-2667,		
Area	0.86 AC	S/T/R	00--
Use Code**	AC/XFOB (9901)	Tax District	2

\*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	\$15,701	Mkt Land	\$15,701
Ag Land	\$0	Ag Land	\$0
Building	\$0	Building	\$0
XFOB	\$1,100	XFOB	\$1,100
Just	\$16,801	Just	\$16,801
Class	\$0	Class	\$0
Appraised	\$16,801	Appraised	\$16,801
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$16,801	Assessed	\$16,801
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$16,801 city:\$0 other:\$0 school:\$16,801	Total Taxable	county:\$16,801 city:\$0 other:\$0 school:\$16,801



## Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
2/8/2021	\$100	1429/2667	QC	I	U	11
8/20/2004	\$100	1026/1327	QC	I	U	01
8/18/2004	\$25,000	1024/0093	WD	I	Q	
6/10/2003	\$28,000	0985/2662	WD	I	Q	
11/10/1999	\$11,500	0891/1867	WD	V	Q	

## Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
NONE					

## Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims
0296	SHED METAL	2006	\$100.00	1.00	0 x 0
0285	SALVAGE	2020	\$1,000.00	1.00	x

## Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
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PREPARED BY & RETURN TO:

Name: Margaret P. Swafford

Address: 1031 Pert Ln, Holiday FL 34691

Parcel No.: 02773-034

Inst: 202112042275 Date: 02/08/2021 Time: 3:46PM  
Page 1 of 1 B: 1429 P: 2667, James M Swisher Jr, Clerk of Court  
Columbia, County, By: BR  
Deputy Clerk Doc Stamp-Deed: 0.70

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This **QUITCLAIM DEED**, made the 08<sup>th</sup> day of February, 2021, by **DANA J. DANIEL and CHARLES E. DANIEL, HUSBAND AND WIFE, RELINQUISHING THEIR INTEREST**, hereinafter called the Grantors, to **MARGARET P. SWAFFORD**, whose post office address is 1031 PERT LN. HOLIDAY, FLORIDA 34691, hereinafter called the Grantee:

WITNESSETH: That the Grantors, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, do hereby remise, release, convey and quitclaim unto the Grantee all the right, title, interest, claim and demand which the Grantors have in and to that certain land situate in County of Columbia, State of Florida, viz:

**THE NORTH 132.58 FEET OF THE SOUTH 1193.23 FEET OF THE WEST 333.16 FEET OF THE SE ¼ OF THE NE ¼, LYING AND BEING IN SECTION 5, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA; LESS AND EXCEPT ROAD RIGHT OF WAY OFF THE EAST SIDE THEREOF.**

**TOGETHER WITH A 1985 SINGLEWIDE MOBILE HOME ID#SSMFLAC61679**

**THIS DEED WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH OR SURVEY AND MAKES NO WARRANTIES AGAINST THE SAME.**

TOGETHER WITH all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

SUBJECT TO TAXES FOR THE YEAR 2021 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

IN WITNESS WHEREOF, the said Grantors have signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Patricia Lang  
Witness Signature  
Printed Name: **PATRICIA LANG**

Dana Daniel L.S.  
Name: DANA DANIEL  
Address: 259 SW ANGELA TER, LAKE CITY, FL 32024

Jenna A Bernier  
Witness Signature  
Printed Name: **Jenna A Bernier**

Charles Daniel L.S.  
Name: CHARLES DANIEL  
Address: 259 SW ANGELA TER, LAKE CITY, FL 32024

STATE OF FLORIDA  
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 08<sup>th</sup> day of February, 2021, by DANA J. DANIEL and CHARLES E. DANIEL, who are personally known to me or who have produced Driver's License as identification.

Patricia Lang  
Signature of Notary  
Printed Name: **PATRICIA LANG**  
My commission expires: 2-5-23

