

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15)

AP# 56599 Date Received 9/28 Zoning Official [Signature] Building Official _____

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 Staff pulled

☐ Ellisville Water Sys ☐ Assessment _____ ☐ Out County ☐ In County ☒ Sub VF Form

Property ID # 16-45-16-03041-035 Subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32'x76' Year 2022
- Applicant PAUL BARNEY David Downs Phone # 386-209-0906
- Address 466 SW DEP. J. DAVIS LN. LAKE CITY, FL. 32024
- Name of Property Owner DAWN & JOSEPH WILKERSON Phone # 386-984-8190
- 911 Address 291 SW LEGION DRIVE, LAKE CITY, FL 32024
- Circle the correct power company -
 (Circle One) - FL Power & Light - Clay Electric
Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home WILKERSON Phone # 386-984-8190
- Address 291 SW. LEGION DRIVE, LAKE CITY, FL. 32024
- Relationship to Property Owner SELF
- Current Number of Dwellings on Property 1 (TAKING IN TRADE)
- Lot Size 220' X 200' Total Acreage 1
- 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 US 90 TO FL 247 (BRANFORD HWY) TO
S.W. TAMARACK LOOP T/R, FOLLOW TO S.W. LEGION DRIVE T/L
TO 291 SW LEGION DR. ON RIGHT.
- Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-344-3645
- Installers Address 353 S.W. MAULDIN AVE LAKE CITY, FL 32024
- License Number 1H 1129420 Installation Decal # _____

W10K16Z550N (989)

Mobile Home Permit Worksheet

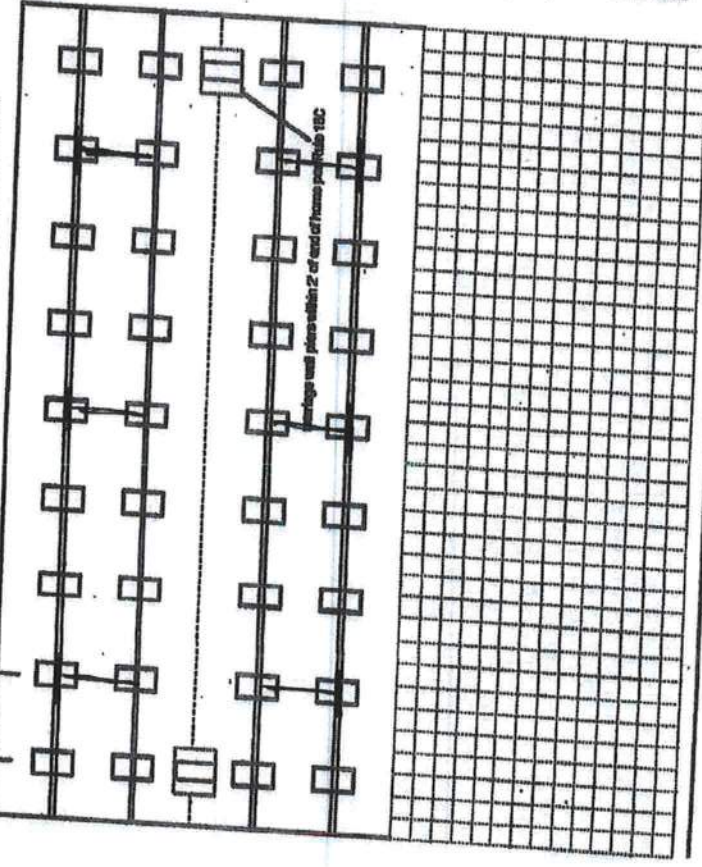
Installer: DAVID ALBRIGHT License # 1H-1129420
 Address of home being installed: 291 SW. LEGION DRIVE
LAKE CITY, FL. 32024
 Manufacturer LINDE OAK Length x width 76'10" x 32'

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 # 90281

NOTE: If home is a single wide fill out one half of the blocking plan
 If home is a triple or quad wide attach 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.

Typical pier spacing 2' 4" 6"
 Installer's Initials DA

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



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	16' x 16' (256)	18 1/2' x 18 1/2' (342)	20' x 20' (400)	22' x 22' (484)	24' x 24' (576)	25' x 25' (625)
1000 psf	3	4	5	6	7	8
1500 psf	4	5	6	7	8	9
2000 psf	5	6	7	8	9	10
2500 psf	6	7	8	9	10	11
3000 psf	7	8	9	10	11	12
3500 psf	8	9	10	11	12	13

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17.5 x 25.5
 Perimeter pier pad size 16 x 16
 Other pier pad sizes (required by the mfg.) 23.25 x 31.25

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the plans.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening FACTORY Pier pad size DIAGRAM

ANCHORS

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Sidewall
Longitudinal
Marriage wall
Shear wall

NUMBER
35
0
35
2

TIEDOWN COMPONENTS

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

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 Y without testing.

X _____ X _____ X _____

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 260 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

DAVID ALBRIGHT MOBILE HOME SVC

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. 64-63

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 70

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 107

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: LAB Length: 6" Spacing: 2'
Walls: Type Fastener: SCREENS Length: 4" Spacing: 18"
Roof: Type Fastener: LAB Length: 6" Spacing: 2'
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 DA

Type gasket FACTORY

Pg. 36

Installed:
Between Floors Yes X
Between Walls Yes END WALLS
Bottom of ridgebeam Yes X

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X Pg. 119
Siding on units is installed to manufacturer's specifications. Yes _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

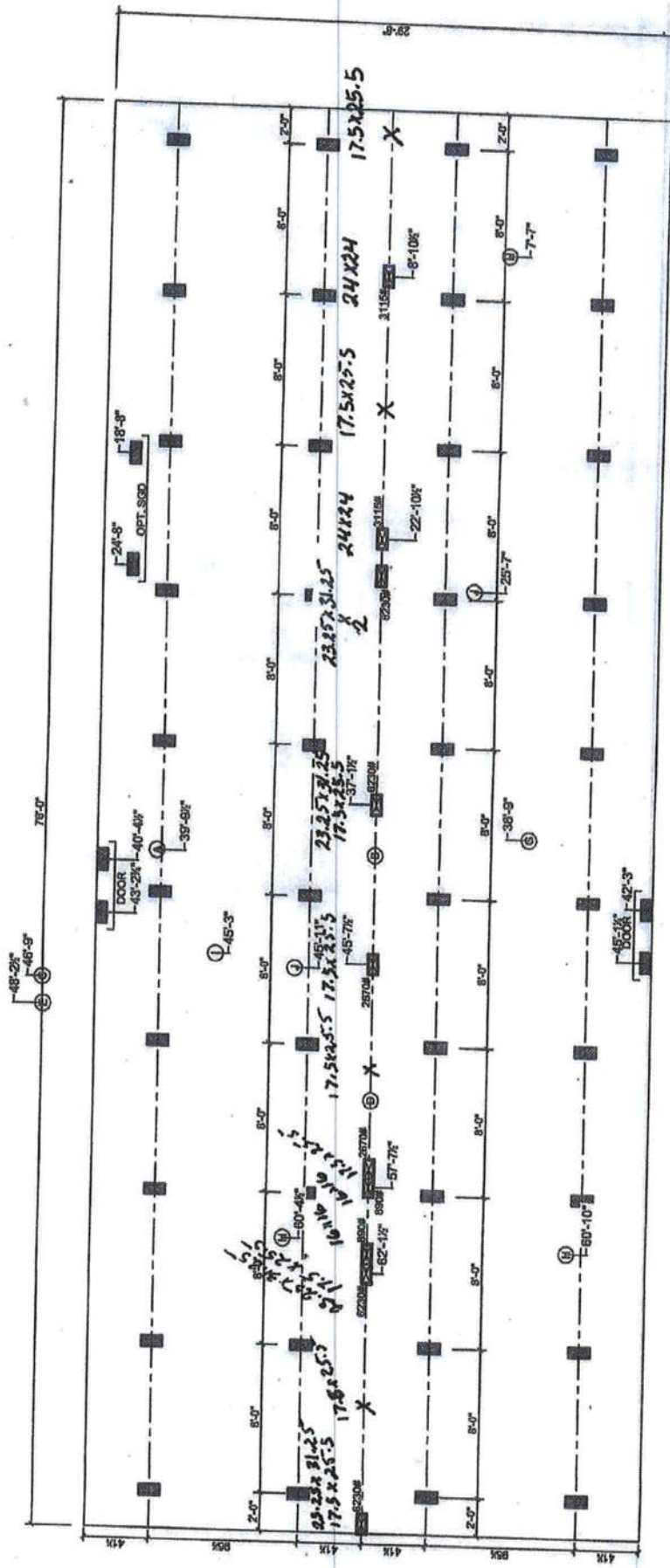
Miscellaneous

Skirting to be installed. Yes _____ No X
Dryer vent installed outside of skirting. Yes _____ N/A X
Range downflow vent installed outside of skirting. Yes _____ N/A X
Drain lines supported at 4 foot intervals. Yes X
Electrical crossovers protected. Yes X
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 David Albright Date _____

BIG FOOT



MARRIAGE LINE OPENING SUPPORT PIERTYP.
SUPPORT PIERTYP

FOUNDATION NOTES:

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

12-10-2015

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (W/OPT. HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)

Live Oak Homes
MODEL: U-3764C-SVS - 32 X 80
4-BEDROOM / 2-BATH

U-3764C-SELECT

This instrument prepared by & return to:
Name: KIM WATSON, an employee of
TITLE OFFICES, LLC
Address: 1089 SW MAIN BLVD.
LAKE CITY, FLORIDA 32055
File No. 06Y-07023KW

Inst: 2006026401 Date: 11/07/2006 Time: 10:07
Doc Stamp-Deed : 0.70

Parcel ID #: 03041-011

1.7 E. F. Newitt Cason, Columbia County B: 1101 P: 905

BEACH ABOVE THIS LINE FOR PROGRESSIVE DATA

THIS WARRANTY DEED Made the 7th day of **NOVEMBER**, A.D. 2006, by **BILLY J. WILKERSON AND LINDA L. WILKERSON, HIS WIFE**, hereinafter called the grantor, to **JOSEPH A. WILKERSON and DAWN MARIE WILKERSON, HIS WIFE**, whose post office address is

hereinafter called the grantees:

(Wherever used herein the terms "grantor" and "grantees" 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 grantees all that certain land situate in Columbia County, State of Florida, viz:

COMMENCE AT THE NW CORNER OF SR 1/4 OF SECTION 16, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE S 89°43'23" E., ALONG THE NORTH LINE THEREOF, 335.36 FEET; THENCE S 01°18'22" E., 413.51 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S 01°18'22" E., 218.00 FEET; THENCE S 89°49'25" E., 200.00 FEET; THENCE N 01°18'22" W., 218.00 FEET; THENCE N 89°49'25" W., 200.00 FEET TO THE POINT OF BEGINNING.

SUBJECT TO AN EASEMENT FOR INGRESS & EGRESS OVER AND ACROSS THE FOLLOWING: SAID EASEMENT LIES 30 FEET TO THE LEFT OF THE FOLLOWING DESCRIBED LINE: COMMENCE AT THE NE CORNER OF SR 1/4 OF SECTION 16, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE S 89°43'23" E., ALONG THE NORTH LINE THEREOF, 335.36 FEET; THENCE S 01°18'22" E., 413.51 FEET TO THE POINT OF BEGINNING OF SAID LINE; THENCE CONTINUE S 01°18'22" E., 218.00 FEET TO THE POINT OF TERMINATION OF SAID LINE, SAID EASEMENT IS TO EXTEND OR CONTRACT AS NEEDED TO CREATE THE BOUNDARIES THEREOF.

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 grantees 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, 2006.

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

Cynthia Bickel
Witness Signature
Cynthia Bickel
Printed Name
Amie Clark
Witness Signature
AMEL CLARK
Printed Name

Billy J.
BILLY J. WILKERSON L.S.
Address
Linda L. Wilkerson
LINDA L. WILKERSON

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 7th day of NOVEMBER, 2006, by BILLY J. WILKERSON AND LINDA L. WILKERSON, HIS WIFE who is known to me or who has produced
us identification.



April D. Clark
Notary Public
My commission expires 4-15-09

Inst:2006026401 Date:11/07/2006 Time:10:07

Doc Stamp-Deed : 0.70

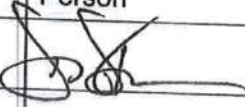
DC, P. DeWitt Cason, Columbia County B:1101 P:906



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, DAVID ALBRIGHT, 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
DAVID DOWNS		FREEDOM MOBILE HOME SALES

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

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.


License Holders Signature (Notarized)


1H-1129426
License Number

9/28/2022
Date

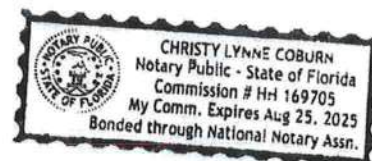
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 28th day of SEPTEMBER, 20 22.


NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>GLENN WHITTINGTON</u> Signature <u>POA ATTACHED</u> License #: <u>EC-13002957</u> Phone #: <u>386-684-4601</u> <p align="center">Qualifier Form Attached <input checked="" type="checkbox"/></p>
MECHANICAL/ A/C _____	Print Name <u>RONALD BONDS, Jr</u> Signature <u>POA ATTACHED</u> License #: <u>1817658</u> Phone #: <u>850-541-5824</u> <p align="center">Qualifier Form Attached <input checked="" 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.

Whittington Electric Inc.

EC13002957
164 Queens Country Rd
Interlachen, Fl. 32148
386-684-4601
Whitt1954@gmail.com

To whom it may concern,

I Glenn Whittington, am writing on behalf of Whittington Electric Inc., as the Owner, to give David Downs, Power of Attorney, to pull permits, pick up permits, and anything related to permitting.

Thank You,

Glenn Whittington

Glenn Whittington

The Forgoing instrument was acknowledged before me on this 18th day of August, 2022 by a Glenn Whittington who is personally known to me or has produced _____ as identification and who did not take an oath.

Jacqueline Lareen

Notary Public Signature

03/28/25

My Commission Expires





August 18, 2022

STATE OF FLORIDA

PERMIT AUTHORIZATION LETTER

I, RONALD E BONDS, SR, Mechanical License number CAC1817658, Electrical License number EC13007246, hereby authorize the following to obtain a mechanical HVAC permit and corresponding HVAC wiring permit (if necessary) for ANY install in the STATE OF FLORIDA, on behalf of Style Crest, Inc.

David Downs

This authorization is to remain in effect indefinitely, unless cancelled by me in writing.

Contractor's Signature

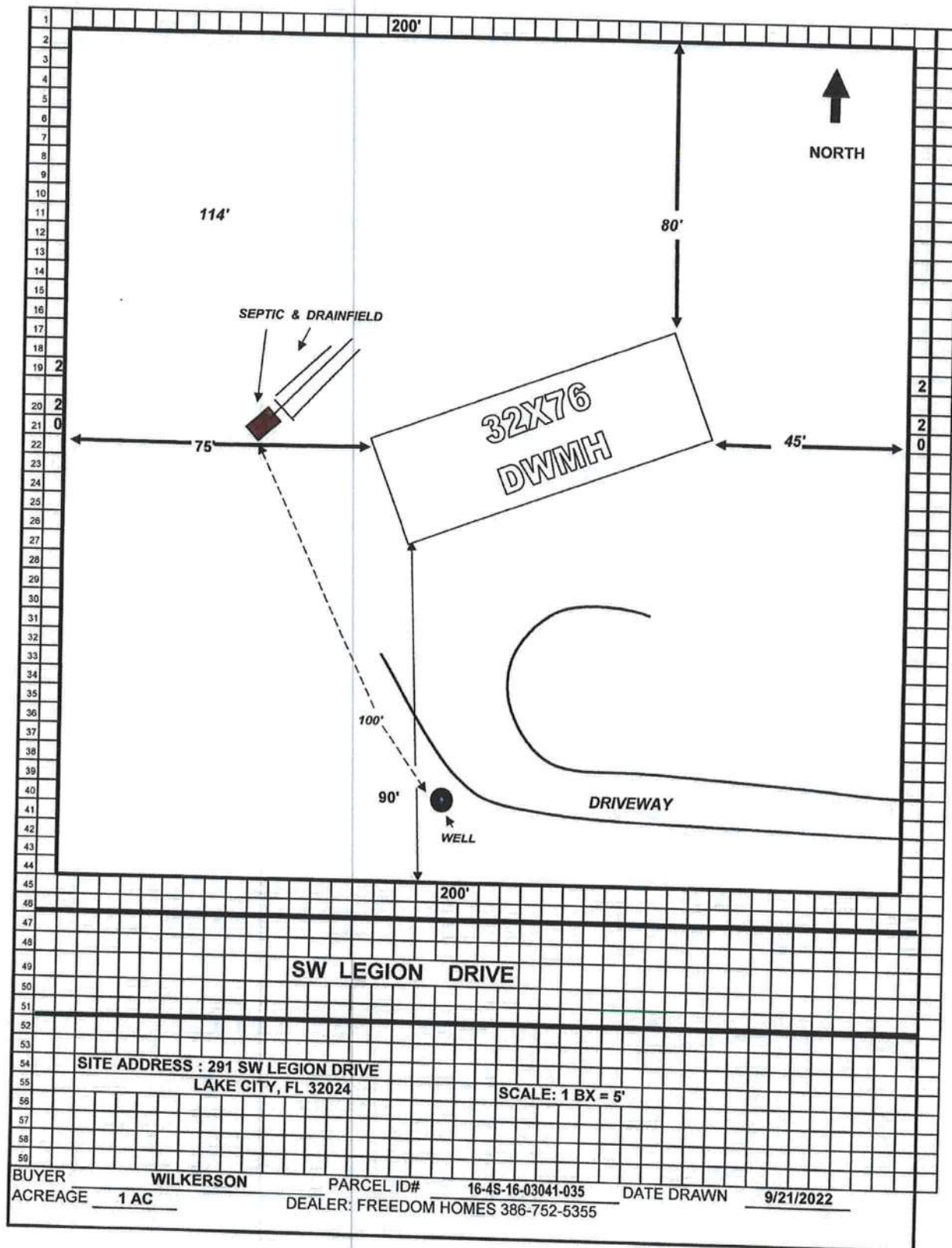
Sworn to and subscribed before me this 18 day of August, 2022
By RONALD E BONDS, SR who is personally known to me or has produced himself
as identification and who did/did not take an oath.

Notary Public

My commission expires: 3-29-2025



STEPHANIE HEIDELBURG
Notary Public, State of Ohio
My Commission Expires:
03/29/2025



License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT		
Order #: 5393	Label #: 90281	Manufacturer: <u>LIVE OAK</u>
Homeowner: <u>WILKERSON</u>	Year Model: <u>2022</u>	(Check Size of Home) Single _____ Double <u>X</u> Triple _____
Address: <u>291 SW LEGION DRIVE</u>	Length & Width: <u>76/80 x 32</u>	HUD Label #:
City/State/Zip: <u>LAKE CITY FL 32024</u>	Type Longitudinal System: <u>6 OTI</u>	Soil Bearing / PSF:
Phone #: <u>336-984-8190</u>	Type Lateral Arm System: <u>6 OTI</u>	Torque Probe / in-lbs:
Date Installed:	New Home: <u>X</u> Used Home: _____	Permit #:
Installed Wind Zone: <u>II</u>	Data Plate Wind Zone: <u>II</u>	
Note:		

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

90281

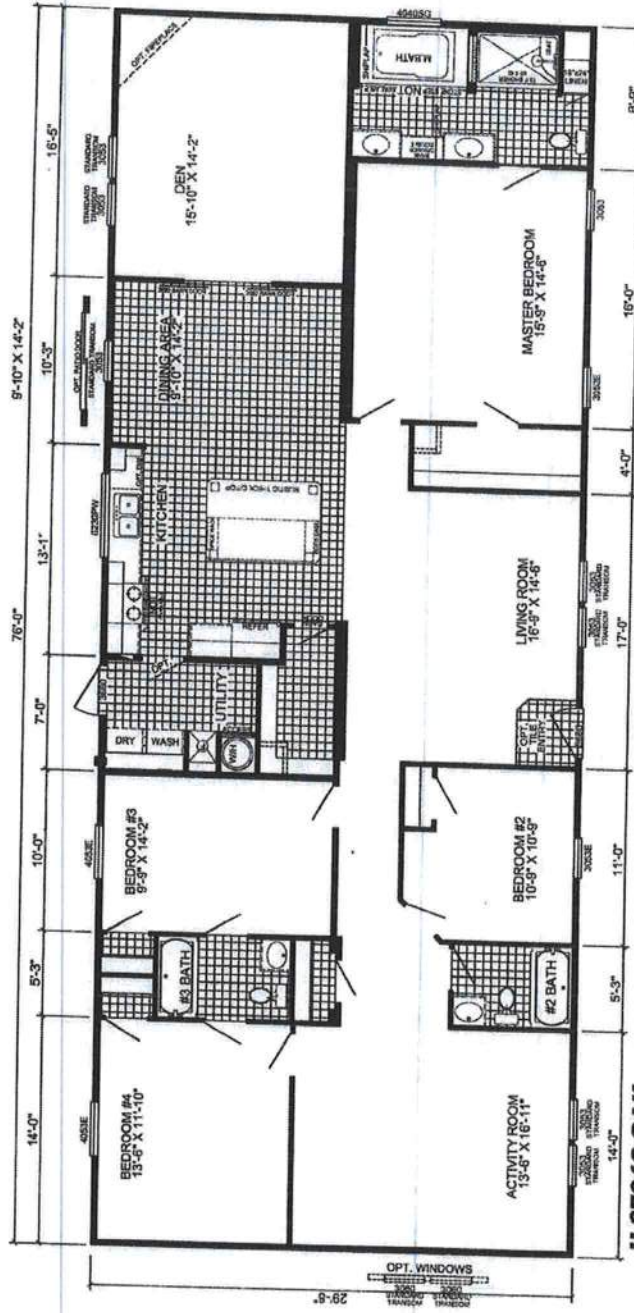
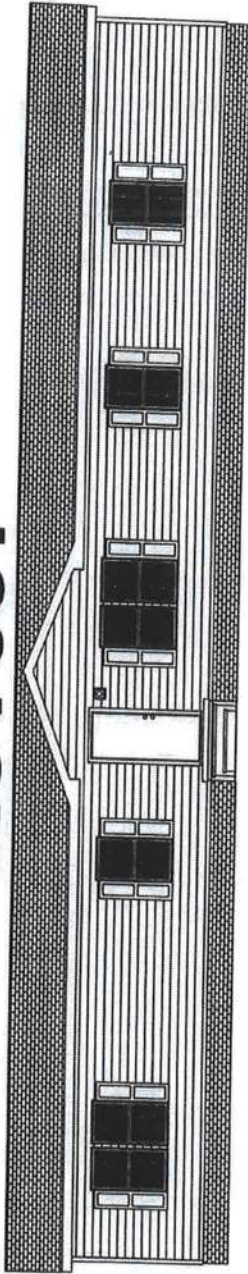
LABEL #	DATE OF INSTALLATION
DAVID E ALBRIGHT	
NAME	
IH / 1129420 / 1	5393
LICENSE #	ORDER #

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.

BIG FOOT

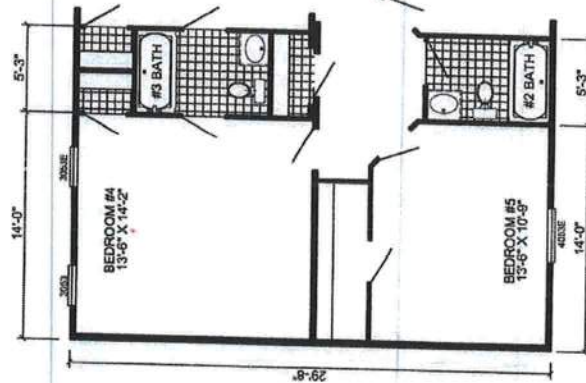


U-3764C-OAK

4-BEDROOM / 3-BATH

32 X 80 - Approx. 2254 Sq. Ft.

Dist: 06/05/19
 • All room dimensions include closets and square footage figures are approximate.
 • Window dimensions are available on optional 9'-0" standard houses only.
 • Live Oak Homes reserves the right to modify product offering at any time.



OPTIONAL 5TH BEDROOM

OAKS
Signature Series

Freedom Mobile Home Sales, Inc

3439

DATE OF BIRTH

BUYER: 05/26/80

CO-BUYER: 10/23/81

EMAIL: dwilkerson80@hotmail.com

466 SW DEPUTY J DAVIS LN,

LAKE CITY, FLORIDA 32024

(386) 752-5355 Fax: (386) 752-4757

DRIVER'S LICENSE

BUYER: W426-173-80-688-0

CO-BUYER: W426-481-81-383-0

BUYER(S) DAWN MARIE WILKERSON & JOSEPH ALEXANDER WILKERSON				PHONE 386-984-8190		DATE 04/26/22	
ADDRESS 291 SW LEGION DRIVE LAKE CITY FL 32024				Salesperson: STEVE SMITH			
DELIVERY ADDRESS 291 SW LEGION DRIVE LAKE CITY FL 32024							
MAKE & MODEL LIVE OAK U-3764C				YEAR 2022	BEDROOMS 4X3	FLOOR SIZE L 32 W 76	HITCH SIZE L 32 W 80
SERIAL NUMBER				COLOR	PROPOSED DELIVERY DATE	STOCK NUMBER 1862	
New or Used BIG FOOT				KEY NUMBERS			
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	HOME PACKAGE \$181,732.99			
CEILING	27	9 1/5	ROCKWOOL	INCL			
EXTERIOR	11	3 1/2	FIBERGLASS	SUB-TOTAL \$181,732.99			
FLOORS	22	7	FIBERGLASS	COUNTY TAX \$50.00			
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16 CFR, SECTION 460.16.				SALES TAX 6% \$4,551.99			
OPTIONAL EQUIPMENT, LABOR, AND ACCESSORIES							
Delivered and Set Up:							
Trim				Included			
Tied Down:				Included			
Dirt Pad				Included			
land clearing				NO			
Connect water and sewer within 20 feet of existing facility				Included			
				WELL SEPTIC CLEARING PERMITS NON TAXABLE \$9,525.00			
				1, CASH PURCHASE PRICE \$195,859.98			
				TRADE-IN ALLOWANCE \$30,000.00			
				LESS BAL. DUE ON ABOVE \$0.00			
				NET ALLOWANCE \$0.00			
				CASH DOWN PAYMENT \$0.00			
				LESS TOTAL CREDITS \$0.00			
				BALANCE DUE TO FREEDOM \$195,859.98			
				ESTIMATED FINAL LOAN AMOUNT \$195,859.98			
				Initial:			
				NO VERBAL AGREEMENTS WILL BE HONORED.			
				SELLER AGREES TO PAY UP TO SIX PERCENT OF BUYERS CLOSING COST AND PREPAIDS			
				The U.S. Department of Housing and Urban Development (HUD) Manufactured Home Dispute Resolution Program is available to resolve disputes among manufacturers, retailers, or installers concerning defects in manufactured homes. Many states also have a consumer assistance or dispute resolution program. For additional information about these programs see sections titled "Dispute Resolution Process" and "Additional Information - HUD Manufactured Home Dispute Resolution Program" in the consumer manual required to be provided to the purchaser. These programs are not warranty programs and do not replace the manufacturer's or any other person's warranty program.			
				Liquidated Damages are agreed to be \$900.00 or 10% of the cash price, whichever is greater.			
				REFER TO PARAGRAPH #6 ON THE REVERSE SIDE OF THIS CONTRACT			
				THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO 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 Page 2 of this contract are agreed to as part of the contract and accessories, the insurance as described has been voluntary, the Buyer's trade-in is free of all claims whatsoever except as noted.			
Type of A/C HP PKG				Included			
Type of Skirting GREY/BLACK				Included			
Type of steps WOOD CODE				Included			
BALANCE CARRIED TO OPTIONAL EQUIPMENT				Included			
NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE							
DESCRIPTION OF TRADE-IN							
YEAR 2007				BEDROOMS 3/2			
MODEL 28X48/52				SIZE			
MAKE				COLOR			
TITLE NO.				SERIAL			
N/A				GAFL634A/B79721-TW21			
LIEN HOLDER				PHONE NO			
N/A				N/A			
AMOUNT				N/A			
TRADE PAYOFF IS TO BE PAID BY 0							

This instrument prepared by & return to:
Name: KIM WATSON, an employee of
TITLE OFFICES, LLC
Address: 1000 SW MAIN BLVD.
LAKK CITY, FLORIDA 32025
File No. 06Y-07023KW

Inst: 2006026401 Date: 11/07/2006 Time: 10:07
Doc Stamp-Deed : 0.70

Parcel ID #: 03041-011

S. J. P. Bel Witt Cason, Columbia County B: 1101 P: 905

SPACE ABOVE THIS LINE FOR PROCESSING DATA

THIS WARRANTY DEED Made the 7th day of **NOVEMBER, A.D. 2006**, by **BILLY J. WILKERSON AND LINDA L. WILKERSON, HIS WIFE**, hereinafter called the grantor, to **JOSEPH A. WILKERSON and DAWN MARIE WILKERSON, HIS WIFE**, whose post office address is

hereinafter called the grantees:

(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 grantees all that certain land situate in **Columbia County, State of Florida**, viz:

COMMENCE AT THE NW CORNER OF SR 1/4 OF SECTION 16, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE S 89°43'23" E., ALONG THE NORTH LINE THEREOF, 335.36 FEET; THENCE S 01°18'22" E., 413.51 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S 01°18'22" E., 218.00 FEET; THENCE S 89°49'25" E., 200.00 FEET; THENCE N 01°18'22" W., 218.00 FEET; THENCE N 89°49'25" W., 200.00 FEET TO THE POINT OF BEGINNING.

SUBJECT TO AN EASEMENT FOR INGRESS & EGRESS OVER AND ACROSS THE FOLLOWING: SAID EASEMENT LIES 30 FEET TO THE LEFT OF THE FOLLOWING DESCRIBED LINE: COMMENCE AT THE NE CORNER OF SR 1/4 OF SECTION 16, TOWNSHIP 4 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE S 89°43'23" E., ALONG THE NORTH LINE THEREOF, 335.36 FEET; THENCE S 01°18'22" E., 413.51 FEET TO THE POINT OF BEGINNING OF SAID LINE; THENCE CONTINUE S 01°18'22" E., 218.00 FEET TO THE POINT OF TERMINATION OF SAID LINE, SAID EASEMENT IS TO EXTEND OR CONTRACT AS NEEDED TO CREATE THE BOUNDARIES THEREOF.

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 grantees 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, 2006.

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:

Cynthia Bickel
Witness Signature
Cynthia Bickel
Printed Name
April Clark
Witness Signature
APRIL CLARK
Printed Name

B. J. Wil
BILLY J. WILKERSON
Address
Linda L. Wilkerson
LINDA L. WILKERSON

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 7th day of NOVEMBER, 2006, by BILLY J. WILKERSON AND LINDA L. WILKERSON, HIS WIFE who is known to me or who has produced
his identification.



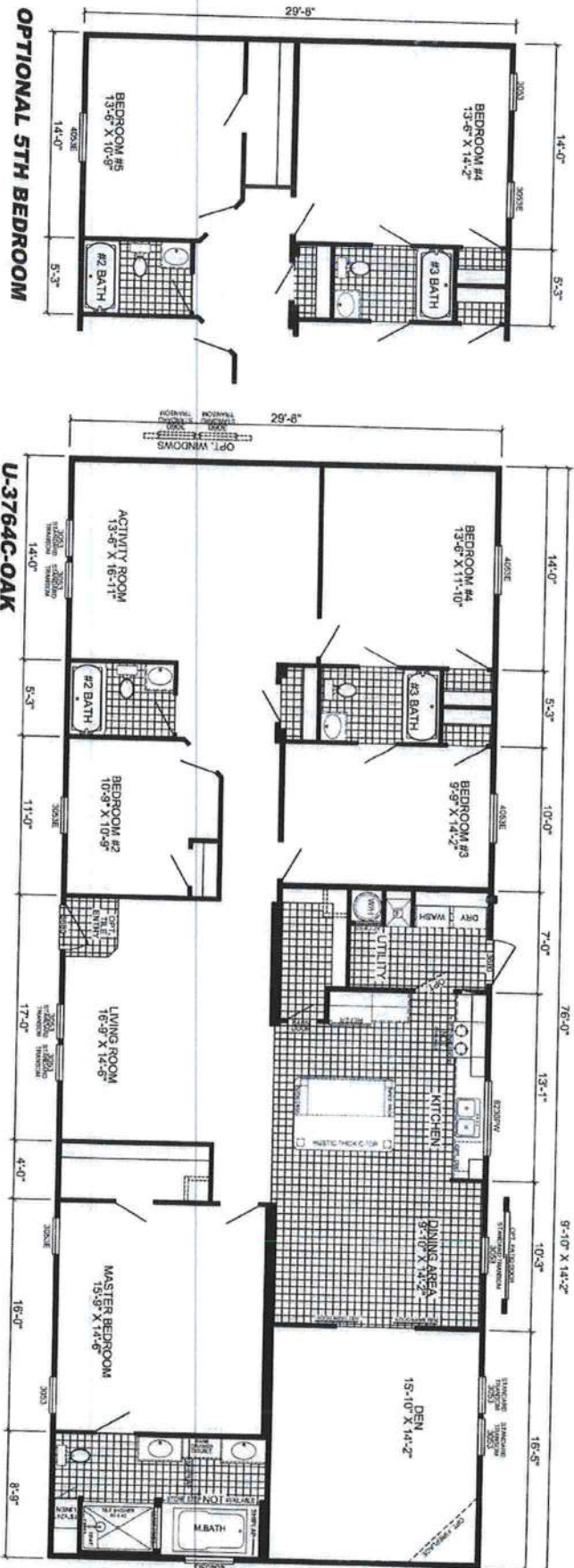
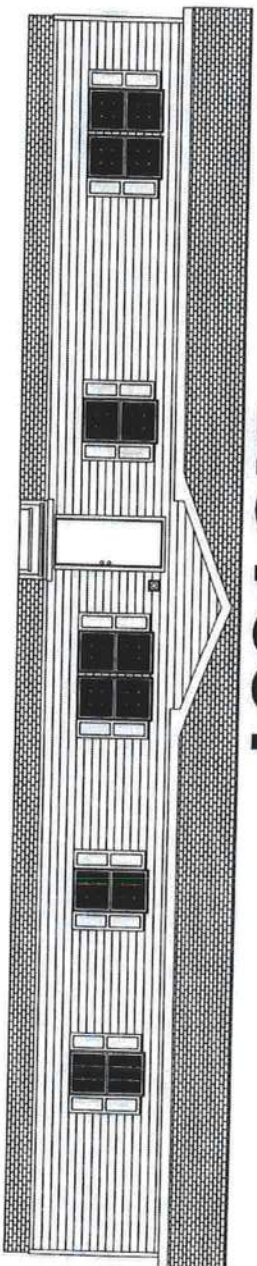
April D. Clark
Notary Public
My commission expires 4-15-09

Inst:2006026401 Date:11/07/2006 Time:10:07

Doc Stamp-Deed : 0.70

DC, P. DeWitt Cason, Columbia County B:1101 P:906

BIG FOOT



U-3764C-OAK
4-BEDROOM / 3-BATH
32 X 80 - Approx. 2254 Sq. Ft.

* All room dimensions include closets and square footage figures are approximate.
 * Kitchen window is optional.
 * Live Oak Homes reserves the right to modify product offerings at any time.

