

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 # 33-15-17-04628-002 Subdivision _____ Lot# _____

▪ New Mobile Home _____ Used Mobile Home ☒ MH Size 28x40 Year 1999

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

▪ Address 301 SW FAUL CT, Lake City, FL, 32024

▪ Name of Property Owner Peter Spradley Phone# (386) 365-4507

▪ 911 Address 316 NE Deep Creek Gln, Lake City, FL, 32055

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

▪ Name of Owner of Mobile Home Peter Spradley Phone # (386) 365-4507

Address 316 NE Deep Creek Gln, Lake City, FL, 32055

▪ Relationship to Property Owner Self.

▪ Current Number of Dwellings on Property 0

▪ Lot Size 1 Acre Total Acreage 1 Acre.

▪ 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 (R) onto N Marion Ave, Turn (R) onto NE Deep Creek Glen, the destination is on your (R)

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

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

▪ License Number IH/1025386 Installation Decal # 13624

H&L Customer Service, LLC

301 SW Faul Court, Lake City, Florida 32024

LIMITED POWER OF ATTORNEY

I Pete Spradley, do hereby authorize H&L Customer Service, LLC and it's 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;

3116 NE Deep Creek Gln
Lake City FL 32055

In Columbia County, Florida.

Pete Spradley

Signature

8/10/20

Date

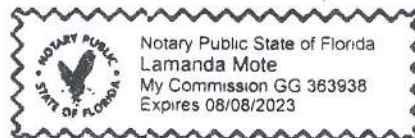
State of Florida

County of Columbia

This Instrument was signed or acknowledged before me on this 10th day of August 2020 by Pete Spradley. If ID provided, type of state issued ID provided personally known.

Lamanda Mote
Notary Public

Seal:



My Commission Expires: 08/08/2023

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED _____ BY _____ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____

OWNERS NAME Peter Spradley PHONE _____ CELL (386) 365-4507

ADDRESS 314 NE Deep Creek Gln, Lake City, FL, 32055

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Turn (L) onto NE Madison ST, Turn (R) onto N Marion Ave, Turn (R) onto NE Deep Creek Gln, the destination is on your (R)

MOBILE HOME INSTALLER Robert Sheppard PHONE _____ CELL (386) 623-2203

MOBILE HOME INFORMATION

MAKE Jaguar YEAR 1999 SIZE 28 X 60 COLOR Tan

SERIAL No. GM1GA4059923267A/B

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

_____ SMOKE DETECTOR () OPERATIONAL () MISSING

_____ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____

_____ DOORS () OPERABLE () DAMAGED

_____ WALLS () SOLID () STRUCTURALLY UNSOUND

_____ WINDOWS () OPERABLE () INOPERABLE

_____ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

_____ CEILING () SOLID () HOLES () LEAKS APPARENT

_____ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

_____ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

_____ WINDOWS () CRACKED/BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

_____ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED _____ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER _____ DATE _____



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, 314 NE Deep Creek Gln, Lake City, 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)
H&L Customer Service	H. Lamson	☒ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ 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 JH11025386 08/06/20
License Holders Signature (Notarized) License Number Date

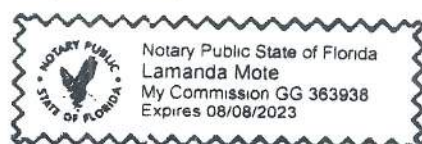
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

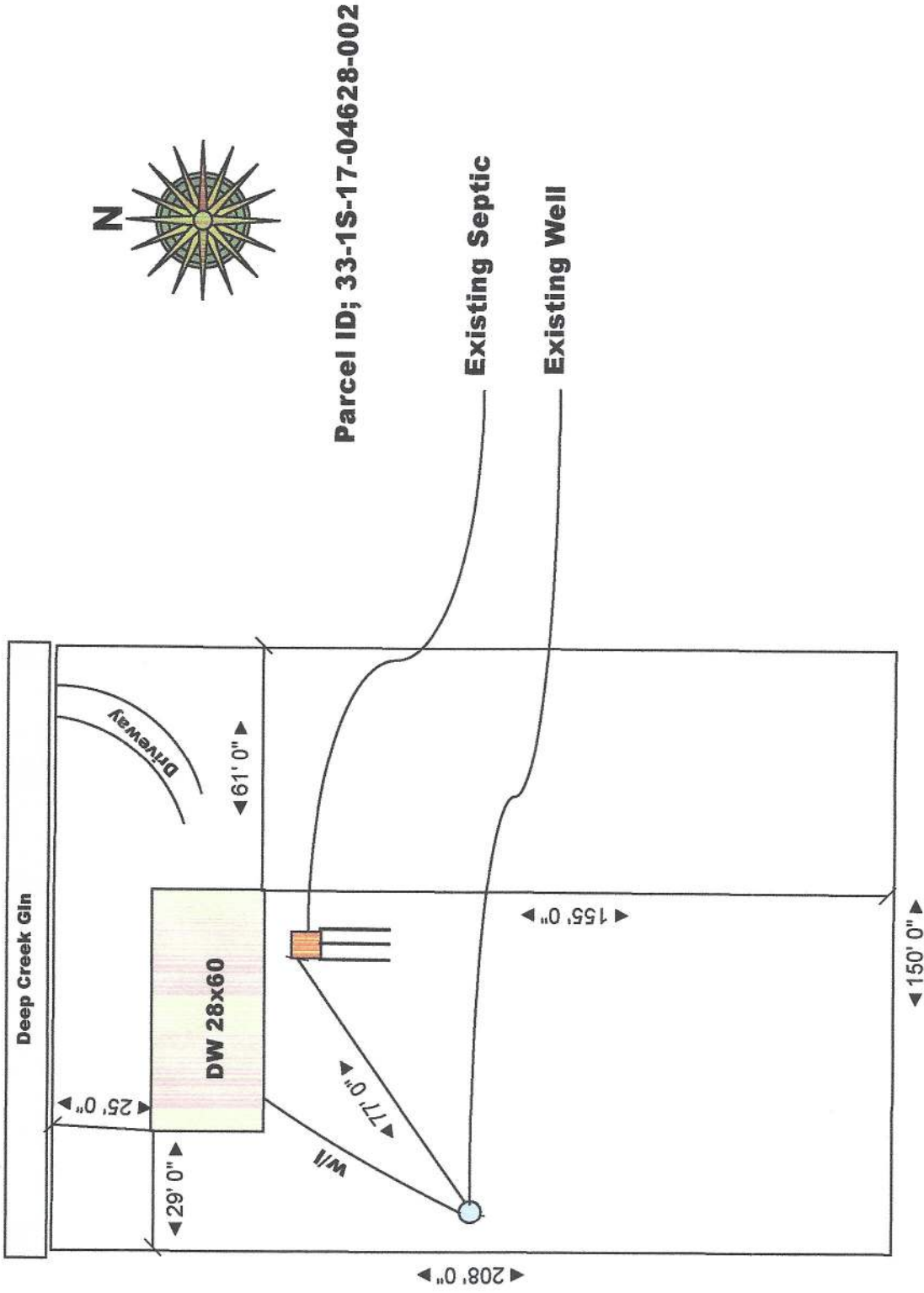
The above license holder, whose name is Robert Sheppard, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 06 day of August, 2020.

Lamanda Mote
NOTARY'S SIGNATURE

(Seal/Stamp)







Site: 316 NE Deep Creek Gln, Lake City	Drawing: 801316	Project: 0000316	Drawn: Heide M	Notes:
Title: Peter Spradley	Scale: 1"=40'	Date: 08/10/20	Rev: A	

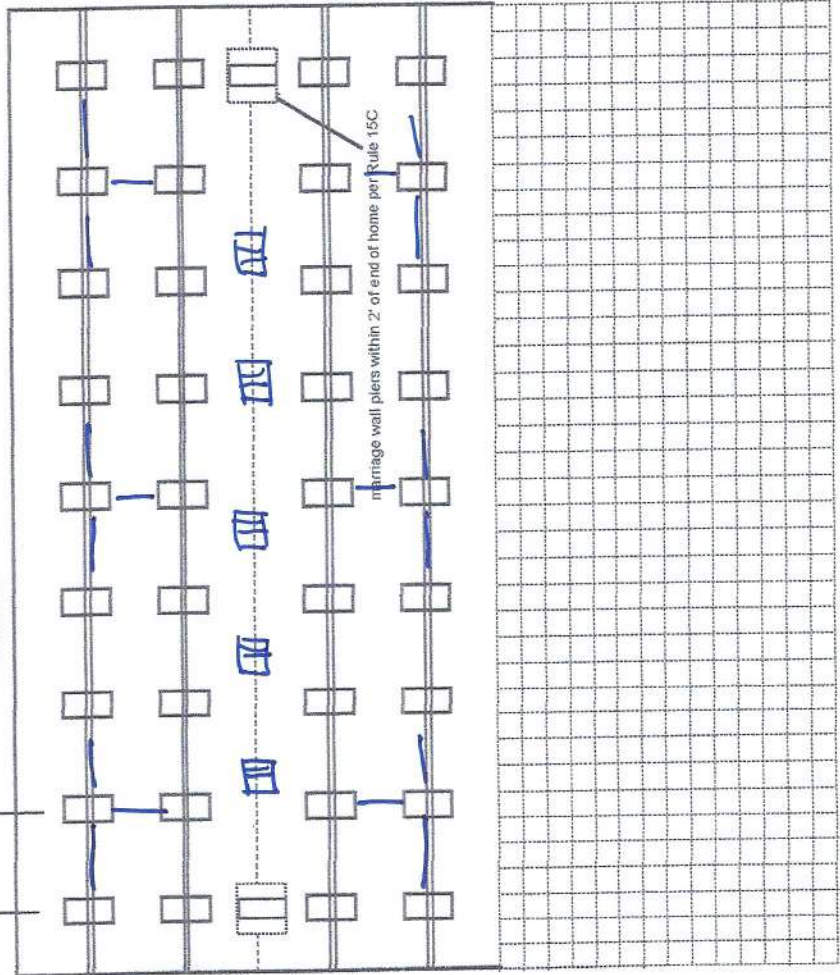
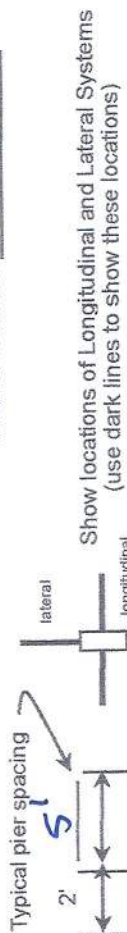
H&L Customer
Service, LLC
301 SW Faul Ct
Lake City, FL, 32024
(386) 984-9334

Mobile Home Permit Worksheet

Installer: Robert Sheppard License # 14/1025386
 Address of home being installed: 316 NE Deep Creek Ln
Lake City, FL 32055
 Manufacturer: Jayvar Length x width: 28 x 40

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: RS



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 # 13624
 Triple/Quad ☐ Serial # GMGA4059923267AB

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'
1500 psf	4' 6"		6'	7'	8'	8'	8'
2000 psf	6'		8'	8'	8'	8'	8'
2500 psf	7' 6"		8'	8'	8'	8'	8'
3000 psf	8'		8'	8'	8'	8'	8'
3500 psf	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

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

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Number 24
 Sidewall 24
 Longitudinal 24
 Marriage wall 24
 Shearwall 24

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer Oliver 1101
 Longitudinal Stabilizing Device w/ Lateral Arms

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil ☒ 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 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

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

08/06/20

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

Application Number: _____

Date: _____

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: Lags Length: 5 Spacing: 16
Walls: Type Fastener: Screws Length: 4 Spacing: 16
Roof: Type Fastener: Lags 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 RS

Type gasket Pg. 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

Robert Sheppard

Date

8/6/20

Columbia County Property Appraiser

Jeff Hampton

2020 Working Values

updated: 7/20/2020

Parcel: << 33-1S-17-04628-002 >>

Owner & Property Info

Result: 23 of 36

Owner	SPRADLEY PETER THOMAS 316 NE DEEP CREEK GLN LAKE CITY, FL 32055		
Site	316 DEEP CREEK GLN, LAKE CITY		
Description	COMM NE COR OF NW1/4, RUN E 177.94 FT FOR POB, CONT E 150 FT, S 290.40 FT, W 150 FT, N 290.40 FT TO POB. ORB 822-747, CD 823-1177, 910-1299,		
Area	1 AC	S/T/R	33-1S-17E
Use Code	MOBILE HOM (000200)	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

2019 Certified Values		2020 Working Values	
Mkt Land (2)	\$12,503	Mkt Land (2)	\$12,503
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$3,254	Building (1)	\$3,414
XFOB (1)	\$300	XFOB (1)	\$300
Just	\$16,057	Just	\$16,217
Class	\$0	Class	\$0
Appraised	\$16,057	Appraised	\$16,217
SOH Cap [?]	\$2,081	SOH Cap [?]	\$1,920
Assessed	\$13,976	Assessed	\$14,297
Exempt	HX H3 \$13,976	Exempt	HX H3 \$14,297
Total Taxable	county:\$0 city:\$0 other:\$0 school:\$0	Total Taxable	county:\$0 city:\$0 other:\$0 school:\$0

Aerial Viewer Pictometry Google Maps

☒ 2019 ☐ 2016 ☐ 2013 ☐ 2010 ☐ 2007 ☐ 2005 ☒ Sales


Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
5/22/1996	\$0	822/0747	WD	V	U	03

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	MOBILE HME (000800)	1965	470	470	\$3,414

*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	Condition (% Good)
0296	SHED METAL	2004	\$300.00	120.000	10 x 12 x 0	AP (050.00)

Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000200	MBL HM (MKT)	1.000 AC	1.00/1.00 1.00/1.00	\$9,254	\$9,253
009945	WELL/SEPT (MKT)	1.000 UT - (0.000 AC)	1.00/1.00 1.00/1.00	\$3,250	\$3,250

Search Result: 23 of 36

Identification Number GMHGA4059923267A	Year 1999	Make JAGUAR	Body HS	WT-L-BHP 56'	Vessel Regis. No.	Title Number 80693855
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Registered Owner:

Date of Issue

02/13/2020

PATRICIA ANN PIATT

2827 SW 40TH AVE

GAINESVILLE, FL 32608

Lien Release

Interest in the described vehicle is hereby released

By

Title

Date

IMPORTANT INFORMATION

1. When ownership of the vehicle described herein is transferred, the seller MUST complete in full the Transfer of Title by Seller section at the bottom of the certificate of title.
2. Upon sale of this vehicle, the seller must complete the notice of sale on the reverse side of this form.
3. Remove your license plate from the vehicle.
4. See the web address below for more information and the appropriate forms required for the purchaser to title and register the vehicle, mobile home or vessel: <http://www.hsmv.state.fl.us/html/titlinf.html>

Mail To:

PATRICIA ANN PIATT

2827 SW 40TH AVE

GAINESVILLE, FL 32608

CERTIFICATE OF TITLE

Identification Number GMHGA4059923267A	Year 1999	Make JAGUAR	Body HS	WT-L-BHP 56'	Vessel Regis. No.	Title Number 80693855
Prev State FL	Color	Primary Brand	Secondary Brand	No of Brands	Use PRIVATE	Prev Issue Date 10/10/2006
Odometer Status or Vessel Manufacturer or OH use				Engine Drive	Hull Material	Prop
				Date of Issue 02/13/2020		Date

Lien Release

Interest in the described vehicle is hereby released

By

Title

Date

Registered Owner

DUPLICATE

PATRICIA ANN PIATT

2827 SW 40TH AVE

GAINESVILLE, FL 32608

1st Lienholder

NONE

DIVISION OF MOTORIST SERVICES

TALLAHASSEE



FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Robert R. Kynoch
DirectorControl Number **142416011**Terry L. Rhodes
Executive Director

29 / 1 142416011

TRANSFER OF TITLE BY SELLER (This section must be completed at the time of sale.)

Federal and/or state law require that the seller state the mileage, purchaser's name, selling price and date sold in connection with the transfer of ownership.

Failure to complete or providing a false statement may result in fines and/or imprisonment.

This title is warranted to be free from any liens except as noted on the face of the certificate and the motor vehicle or vessel described is hereby transferred to:

Seller Must Enter Purchaser's Name:

Address: **412 SE Jefferson Glen**

Seller Must Enter Selling Price:

giftSeller Must Enter Date Sold: **2-13-2020**

I/We state that this

☐ 5 or☐ 6 digit odometer now reads☐ 1. reflects ACTUAL MILEAGE☐ 2. is IN EXCESS OF ITS MECHANICAL LIMITS.☐ 3. is NOT THE ACTUAL MILEAGE

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SELLER Must

Sign Here:

Patricia Piatt

CO-SELLER Must

Sign Here:

Print Here:

Patricia Piatt

Print Here:

Selling Dealer's License Number:

9300681459070

Tax No.:

Tax Collected:

Auction Name:

License Number:

PURCHASER Must

Sign Here:

CO-PURCHASER Must

Sign Here:

Print Here:

Print Here:

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE.

T# 1135972740

B# 1281261

Identification Number GMHGA4059923267B	Year 1999	Make JAGUAR	Body HS	WT-L-BHP 56'	Vessel Regis. No.	Title Number 80693983
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Registered Owner:

Date of Issue 02/13/2020

PATRICIA ANN PIATT
2827 SW 40TH AVE
GAINESVILLE, FL 32608

Lien Release
 Interest in the described vehicle is hereby released
 By _____
 Title _____
 Date _____

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Mail To:

PATRICIA ANN PIATT
2827 SW 40TH AVE
GAINESVILLE, FL 32608

CERTIFICATE OF TITLE

Identification Number GMHGA4059923267B	Year 1999	Make JAGUAR	Body HS	WT-L-BHP 56'	Vessel Regis. No.	Title Number 80693983
--	---------------------	-----------------------	-------------------	------------------------	-------------------	---------------------------------

Lien Release
 Interest in the described vehicle is hereby released
 By _____

Prev State FL	Color	Primary Brand	Secondary Brand	No of Brands	Use PRIVATE	Prev Issue Date 10/10/2006
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Title _____

Odometer Status or Vessel Manufacturer or OH use	Engine Drive	Hull Material	Prop	Date of Issue 02/13/2020	Date _____
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Registered Owner

DUPLICATE

PATRICIA ANN PIATT
2827 SW 40TH AVE
GAINESVILLE, FL 32608

1st Lienholder

NONE

DIVISION OF MOTORIST SERVICES

TALLAHASSEE



FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Robert R. Kynoch
 Director

Control Number **142416012**

Terry L. Rhodes
 Executive Director

29 / 1 142416012

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 Failure to complete or providing a false statement may result in fines and/or imprisonment.
 This title is warranted to be free from any liens except as noted on the face of the certificate and the motor vehicle or vessel described is hereby transferred to:

Seller Must Enter Purchaser's Name:

Address: **412 SE Jefferson Glen**Seller Must Enter Selling Price: **gift**Seller Must Enter Date Sold: **2-13-2020**

I/We state that this ☐ 5 or ☐ 6 digit odometer now reads _____ and I hereby certify that to the best of my knowledge the odometer reading:
☐ 1. reflects ACTUAL MILEAGE, ☐ 2. is IN EXCESS OF ITS MECHANICAL LIMITS, ☐ 3. is NOT THE ACTUAL MILEAGE.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SELLER Must

Sign Here:

CO-SELLER Must

Sign Here:

Print Here:

Print Here:

Selling Dealer's License Number: **P300 68145 9070** Tax No.:

Tax Collected:

Auction Name:

License Number:

PURCHASER Must

Sign Here:

CO-PURCHASER Must

Sign Here:

Print Here:

Print Here:

NOTICE: PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE.

Return to (enclose self addressed stamped envelope)

Name Peter Thomas Spradley
Address Rt 1 Box 161
Lake City, FL 32055

This Instrument Prepared by

Name Shelton Spradley
Address Rt 1 Box 161
Lake City, FL 32055

Properties Appraised For Ad Valorem Tax

Value Number(s)

Grantee(s) S.S. No(s)

0823 PG1177

96-08380

HIGHLAND COUNTY, FL

1996 JUN 12 PM 1:24

CLERK OF COURTS
COLUMBIA COUNTY, FLORIDA
BY *[Signature]*AD VALOREM TAX
DEWITT CASON, CLERK OF
COURTS, COLUMBIA COUNTY
FL

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed, Made the 12th day of June, 1996, by
Shelton Spradley & Joan Spradley Rt 1 Box 161 Lake City, FL
hereinafter called the Grantor, to Peter Thomas Spradley
whose post office address is Rt 1 Box 161, Lake City, FL 32055
hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and 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 considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises,
releases, conveys and confirms unto the Grantee all that certain land, situate in Columbia
County, State of Fla, viz:

Section 33 Township 1 South Range 17 East

Begin at the Northeast corner of the Northwest quarter CNW 1/4, Run East along
the North Line of the Section, continue East 177.94 Feet for point of
beginning, run south 290.40 feet, east 150.0 feet north 290.40 feet, west 150 feet
to the point of beginning

Corrective Warranty Deed

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 the grantor is lawfully seized of said land in fee
simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby 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, 19

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 (as to first Grantor)
[Signature]

Printed Name
Jones F. Greene Jr.

Witness Signature (as to first Grantor)
[Signature]

Printed Name
Mandi B. McKinley

Witness Signature (as to second Grantor)
[Signature]

Printed Name
Mandi B. McKinley

Witness Signature (as to third Grantor, if any)

Printed Name
Mandi B. McKinley

Witness Signature (as to Co-Grantor, if any)

Printed Name
Mandi B. McKinley

Printed Name
Mandi B. McKinley

Printed Name
Mandi B. McKinley

STATE OF Florida

COUNTY OF Columbia

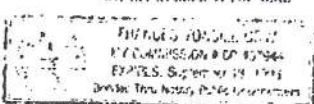
SHELTON SPRADLEY and JOAN SPRADLEY

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that

executed the same, and an oath was not taken. (Check one: ☒ Said person(s) is/are personally known to me. ☐ Said person(s) provided the

following type of identification: FL D/L 5163-780-49-421-0 FL D/L 264-25163-402-0-88-0

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid

this 12th day of June, A.D. 1996

*[Signature]*Printed Name
Frances Vanceile Dow