License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 5175 Label #: 85944	Manufacturer: LIVE OAK	(Check Size of Home)	
Homeowner: LEE	Year Model: 2022	Single	X
Address: 147 SW JENSEN LN	Length & Width: 68/72 x 14	Double	
City/State/Zip: FORT WHITE FL 32038	Type Longitudinal System: 6 OTI	Triple	
Phone #:	Type Lateral Arm System: 6 OTI	HUD Label #:	
Date Installed:	New Home: X Used Home:	Soil Bearing / PSF:	
Installed Wind Zone: II	Data Plate Wind Zone: II	Torque Probe / in-lbs:	
Note:		Permit #:	

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

85944
LABEL #

DATE OF INSTALLATION

DAVID E ALBRIGHT
NAME

IH / 1129420 / 1
LICENSE #

5175
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.

Lee-cl

DART L-4723A

page 1 of 2

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

Installer DAVID ALBRIGHT License # IH/ 1129420

911 Address where home is being installed. 147sw Jensen lane Fort white FL, 32038

Manufacturer LIVE OAK HOMES Length x width 14 x 68/72

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

New Home [X] Used Home [ ]

Home installed to the Manufacturer's Installation Manual [X]

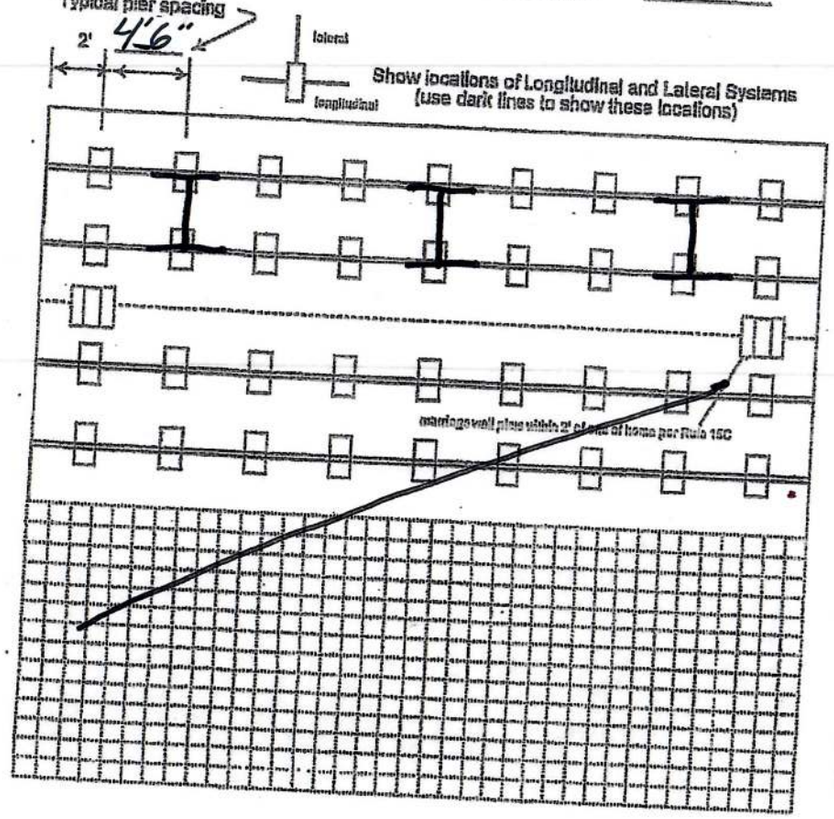
Home is installed in accordance with Rule 15-C [ ]

Single wide [X] Wind Zone II [X] Wind Zone III [ ]

Double wide [ ] Installation Decal # 85944

Triple/Quad [ ] Serial # LOHGA20037460

Typical pier spacing 2' 4'6"



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.) —

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

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft 1 5 ft 1 / SHEARWALL

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer OTI

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer OTI

OTHER TIES

	Number
Sidewall	16 PER SIDE
Longitudinal	6
Marriage wall	—
Shearwall	3

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil __X__ 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 245 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.

DJ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name DAVID AIBRIGHT

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. _____

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 79-80

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 78-110

Site Preparation

Debris and organic material removed X

Water drainage: Natural _____ Swale _____ Pad X Other _____.

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____

Walls: Type Fastener: _____ Length: _____ Spacing: _____

Roof: Type Fastener: _____ Length: _____ Spacing: _____

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, meldew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials _____

Type gasket _____

Pg. _____

Installed:

Between Floors Yes _____

Between Walls Yes _____

Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X. Pg. 124

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

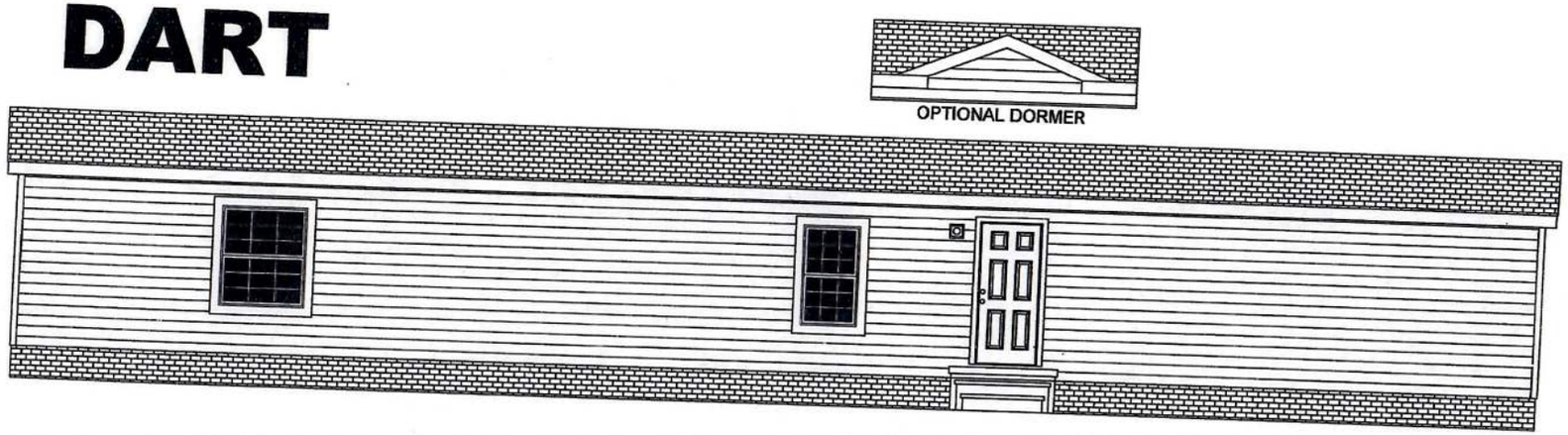
Electrical crossovers protected. Yes ____

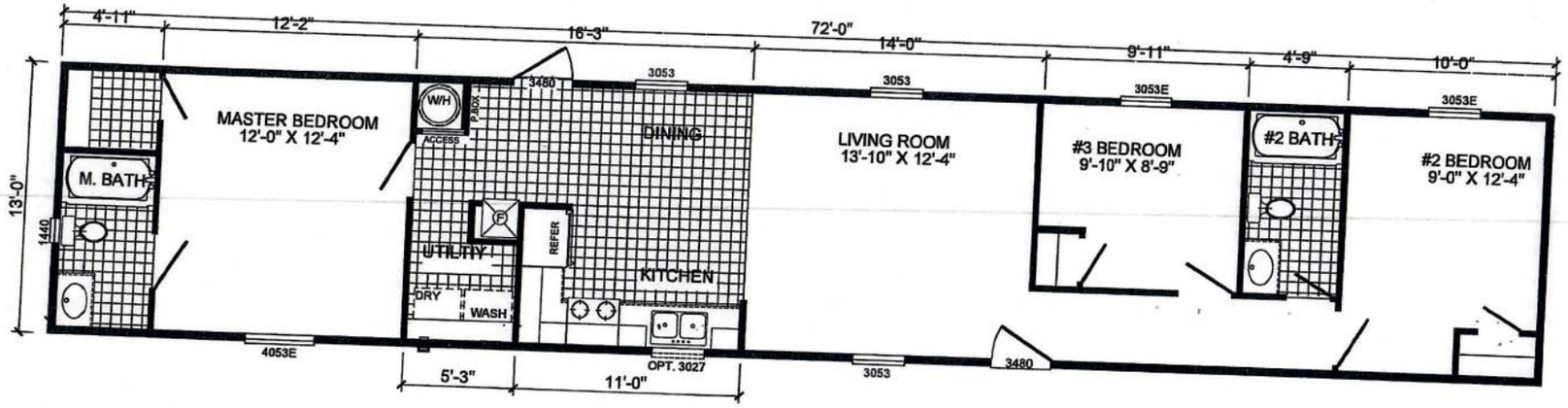
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature David A Albright Date _____

DART



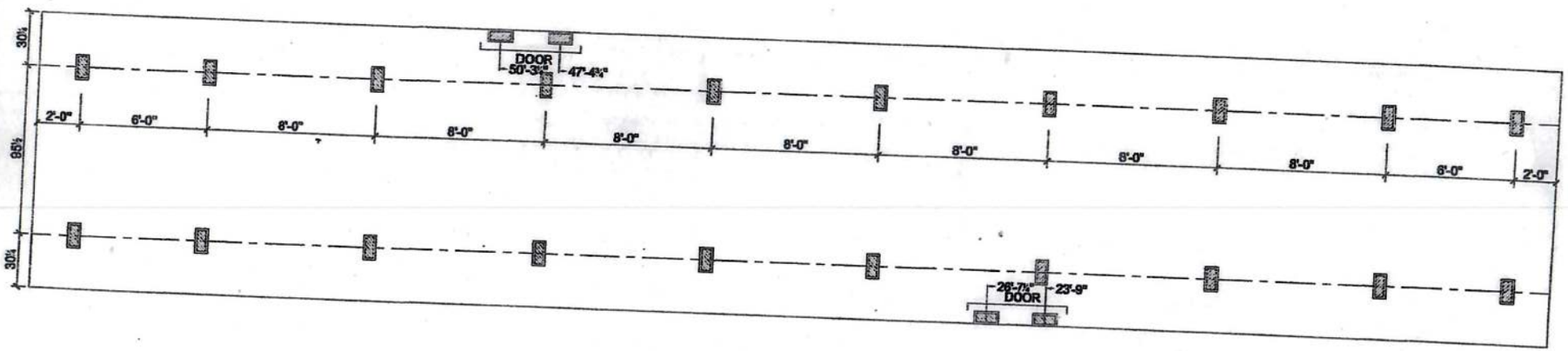


L-4723A RUNNER
3-BEDROOM / 2-BATH
14 X 72 - Approx. 936 Sq. Ft.

Date: 10-30-2014

* All room dimensions include closets and square footage figures are approximate.

DART



SUPPORT PIER/TYP

6-25-2015

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.

Live Oak Homes
MODEL: L-4723A - 14 X72
3-BEDROOM / 1-BATH

L-4723A

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, David Albright (Installer/License Holder Name), give this authority for the job address show below only, TBD SW Jensen Ln. Fort White FL. 32038 (Job Address), and I do certify that 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)
Christal Willett	Christal Willett	X Agent ___ Officer ___ Property Owner
Paul Barney	Paul A Barney	X Agent ___ Officer ___ Property Owner
Steven Smith	Steven Smith	X 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.

David Albright — License Holders Signature (Notarized)
HH1129420 — License Number
2/8/22 — 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 8th day of February, 2022.

Christy Lynne Coburn
NOTARY'S SIGNATURE

(Seal/Stamp)

CHRISTY LYNNE COBURN
Notary Public - State of Florida
Commission # HH 169705
My Comm. Expires Aug 25, 2025
Bonded through National Notary Assn.

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 (Installers Name), give this authority and I do certify that 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	Agents Company Name
Christal Willett	Christal Willett	Freedom Homes
Paul Barney		Freedom Homes
Steven Smith		Freedom Homes

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.

David Albright — License Holders Signature (Notarized)
CH1129420 — License Number
2/8/2022 — 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 8th day of February, 2022.

Christy Lynne Coburn
NOTARY'S SIGNATURE

(Seal/Stamp)

CHRISTY LYNNE COBURN
Notary Public - State of Florida
Commission # HH 169705
My Comm. Expires Aug 25, 2025
Bonded through National Notary Assn.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR DAVID ALBRIGHT PHONE (386)344-3645

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 WHITTINGTON ELECTRIC License #: EC13002957 Qualifier Form Attached ☐	Signature [signature] Phone #: 386 972 1700
MECHANICAL/ A/C ____	Print Name STYLECREST License #: CAC1817658 Qualifier Form Attached ☐	Signature Ronald E Brindi SR Phone #: 850-769-4453

Qualifier Forms cannot be submitted for any Specialty License.

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

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

Inst. Number: 202112013241 Book: 1441 Page: 1398 Page 1 of 2 Date: 7/2/2021 Time: 8:25 AM
James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 2,486.40

Prepared by and return to:
Brent E. Baris, P.A.
Brent Baris, Esq.
18731 NW US Highway 441
High Springs, FL 32643
(386) 454-0688
File Number: **21-276C**

Parcel Identification No. **18-6S-16-03865-001**

[Space Above This Line For Recording Data]

Warranty Deed

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

This Indenture made this **30th day of June, 2021** between **Jerry Bowles and Jennifer Bowles, Husband and Wife** whose post office address is **P.O. Box 885, Fort White, FL 32038** of the County of **Columbia**, State of **Florida**, grantor*, and **Jenifer Lee and Gary Lee, Husband and Wife** whose post office address is **211 SW Jensen Lane, Fort White, FL 32038** of the County of **Columbia**, State of **Florida**, 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:

LOT 2, ICHETUCKNEE MEADOWS, A SUBDIVISION ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 4, PAGES 66-66A OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

AND

PART OF LOT 1, ICHETUCKNEE MEADOWS, A SUBDIVISION ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 4 PAGES 66 - 66A OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT THE NE CORNER OF SAID LOT 1 AND RUN SOUTH 88° 29' 14" WEST, 599.69 FEET TO THE NW CORNER OF SAID LOT 1, THENCE RUN SOUTH 01° 22' 01" EAST, 638.63 FEET TO THE SW CORNER OF SAID LOT 1, ALSO BEING THE P.C. OF A CURVE OF A CURVE BEING CONCAVE TO THE SOUTH, HAVING A RADIUS OF 330.00 AND AN INCLUDED ANGLE OF 11° 39' 58", THENCE RUN EAST ALONG THE ARC OF SAID CURVE AN ARC DISTANCE OF 67.19 FEET, SAID CURVE BEING SUBTENDED BY A CHORD BEARING AND DISTANCE OF SOUTH 85° 40' 47" EAST, 67.08 FEET, THENCE NORTH 22° 21' 04" EAST, 217.45 FEET, THENCE NORTH 24° 00' 05" EAST, 210.00 FEET, THENCE SOUTH 67° 38' 42" EAST, 210.00 FEET, THENCE NORTH 24° 07' 47" EAST, 379.29 FEET TO THE POINT OF BEGINNING.

Subject to taxes for 2021 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:

Witness
Printed Name: Christina L. Stainfield

Witness
Printed Name: [redacted]

Jerry Bowles

Witness
Printed Name: Christina L. Stainfield

Witness
Printed Name: **Emily Brennan**

Jennifer Bowles

State of Florida
County of Alachua

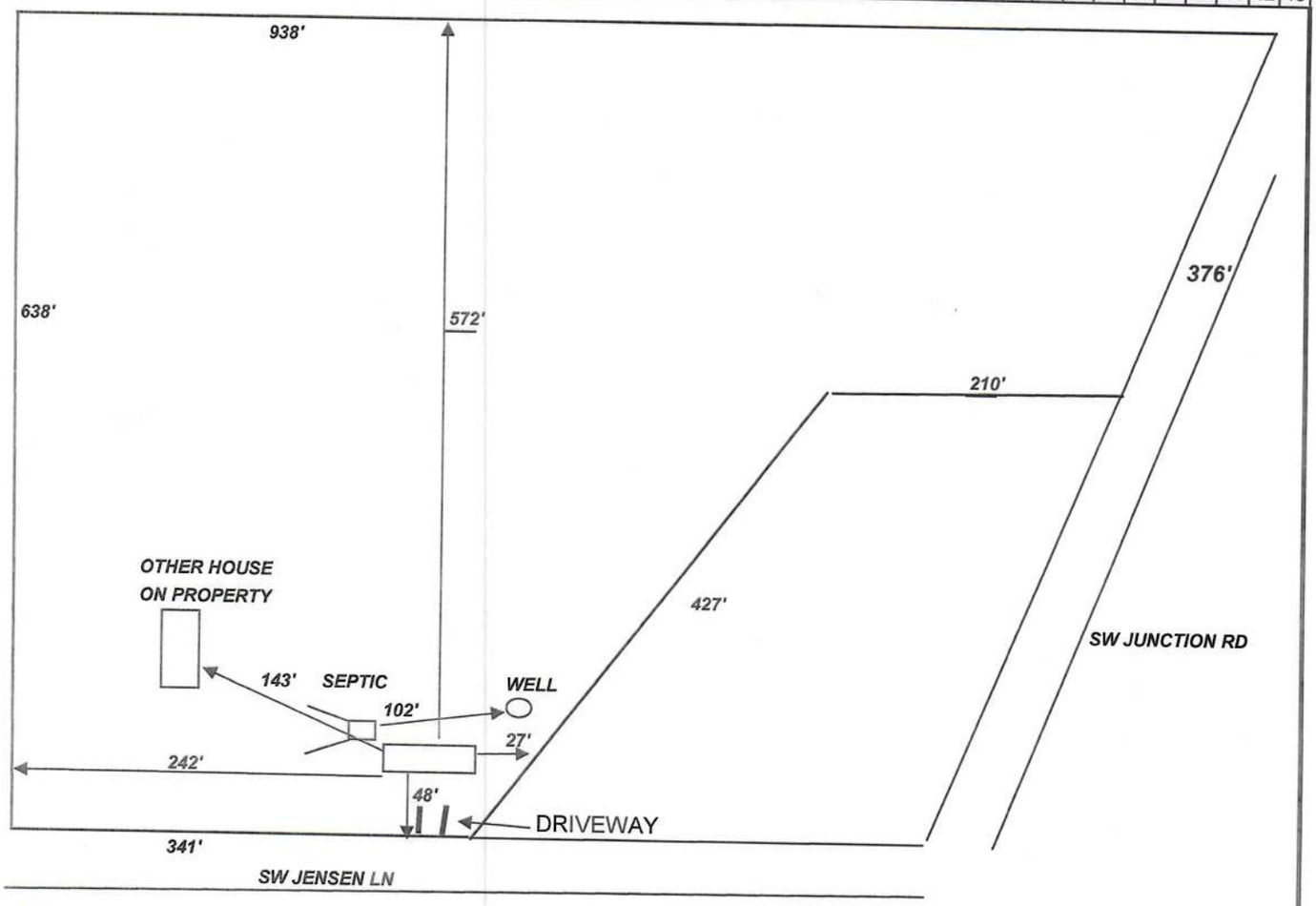
The foregoing instrument was acknowledged before me by means of [X] physical presence or [_] online notarization, this 30th day of June, 2021 by Jerry Bowles and Jennifer Bowles who [_] are personally known or [X] have produced drivers' licenses as identification.

[Seal]

Notary Public
Print Name: Christina L. Stainfield

My Commission Expires: 2/27/24

CHRISTINA L. STAINFIELD
MY COMMISSION # GG 946416
EXPIRES: February 27, 2024
Bonded Thru Notary Public Underwriters



BUYER GARY LEE PARCEL ID# 18-6S-16-03865-001 DATE DRAWN

ACREAGE 9.77 DEALER: FREEDOM HOMES 386-752-5355