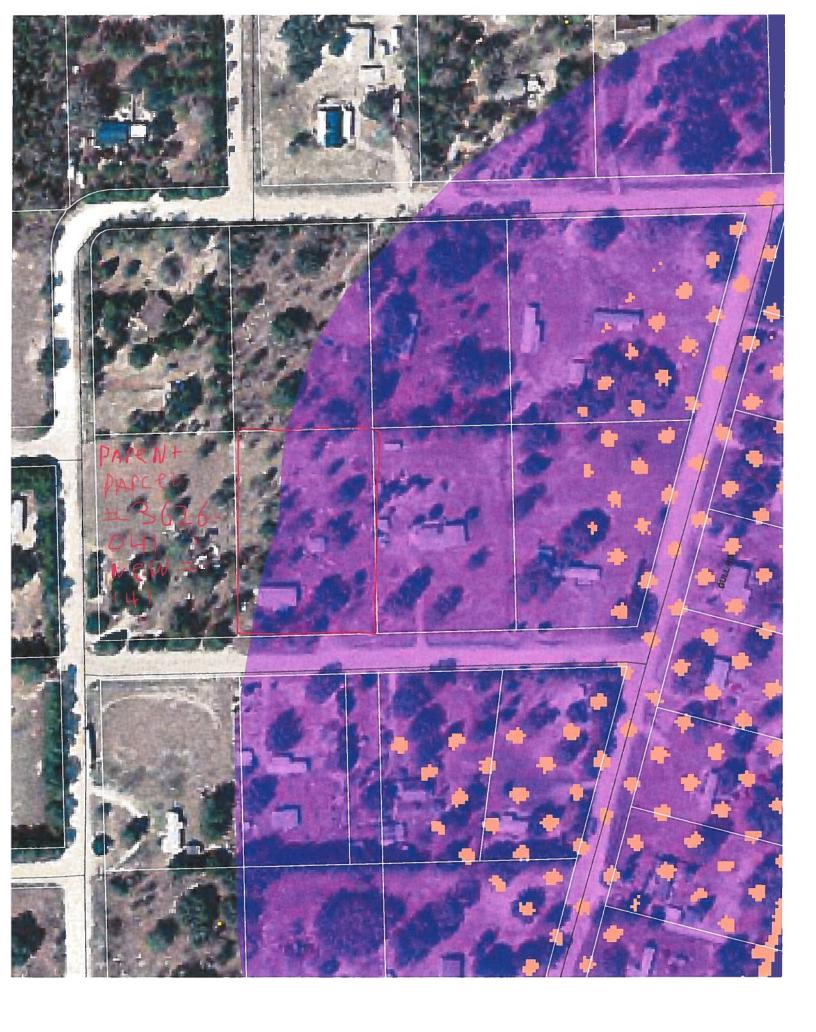
# MH will be her an Monday mages

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	11 10/p 107 at 774 10-1/-07
	For Office Use Only (Revised 9-22-06) Zoning Official Off
	10 10 - 29 Date Received 10/15/07 By LH Permit # 26343
1	Tood Zone H Development Permit Zoning H Zand Use Plan Map Category H Z
	comments flow to be I alrove paved road.
-	Ox 2'above graded hoad. Family lot permet
	EMA Map# Elevation Finished Floor River In Floodway
	Site Plan with Setbacks Shown DEH Signed Site Plan DEH Release Dell letter DExisting well
P	Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer
A	State Road Access Parent Parcel # 03626 - 041
	Lot 41
Pro	operty ID # 15-55-16-03626 Subdivision Hi-Dri-Acres unit 2
	New Mobile Home Year Year Year 2007
	Applicant Emory Maples St. Phone # 396 - 752-5581
	Address 193 5.W. Goose Pl. L.C. Fl. 32024
	November 200 Franch 200 Franch 281 - 759 - 5081
-	Name of Property Owner Emory Maples Sr. Phone# 386-752-5581
•	911 Address 195 S. W. Goose PL. Lake City Fla. 32024
•	Circle the correct power company - FL Power & Light - Clay Electric - Clay Electric - Progress Energy
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Progress Energy</u>
	Name of Owner of Mobile Home Phone #
	Address
	Relationship to Property Owner
	Current Number of Dwellings on Property
	Lot Size 210.00' by 104.00' Total Acreage 1/2
•	Do you : Have <u>Existing Drive</u> or <u>Private Drive</u> or need <u>Culvert Permit</u> or <u>Culvert Waiver</u> (Circle one)  (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
•	Is this Mobile Home Replacing an Existing Mobile Home No (owes)
•	Driving Directions to the Property 4   past Crutian Light. 2 road
	past caution light on Right (Raven) Then 1st/eft on Gull road.
	Then 1st right on Goose PL. Third place on right.
	$\alpha \sim 20A$
	Name of Licensed Dealer/Installer Phone # 6 23 00 46
-	Installers Address 212 NW Nive hunter du Lake City El 32055
•	License Number IH 6 0 000 75 Installation Decal # 290 670
	18++ mess46- 10/18/0.



Cindy Kitchens First Alliance Abstract & Title Company 1410 NW 13th Street, Suite 6, Gainesville, Florida 32601

# Quit Claim Deed

Parents

Made this September 25, 2007 A.D. by Emory Maples and his wife Rachel Maples, whose address is: 193 S.W. Goose Place, Lake City, Florida. 32024 hereinafter called the grantor, to Cynthia Maples, a single woman. whose post office address is: 193 S.W. Goose Place, Lake City, Florida, 32024 hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal re-presentatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of \$ TEN AND NO/100 DOLLARS (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, does hereby remise, release, and quit claim unto the grantee forever, all the right, title, interest, claim and demand which the said grantor has in and to, all that certain land situate in Columbia County, Florida, viz:

See Attached Emhibit "A" for full legal description

DEED RESTRICTIONS: THIS PROPERTY CANNOT BE SOLD, BORROWED AGAINST OR GARNISHED. CAN ONLY BE TRANSFERD BACK TO EMORY MAPLES AND RACHEL MAPLES HIS WIFE.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said grantor, either in law or equity, to the only proper use, benefit and behoof of the said grantee forever.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in our presence:

Witness Crustal War Printed Address Pace Lake City, Florida. 32024

Witness Crustal War Printed Rachel Maples 193 S.W. Goose Place Lake City, Florida. 32024

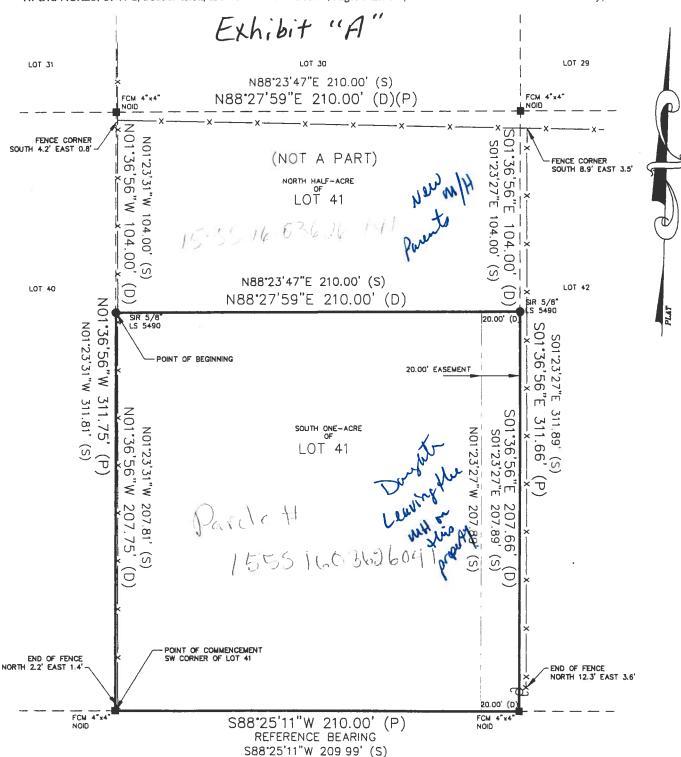
Address Address Address 193 S.W. Goose Place Lake City, Florida. 32024

State of Florida

# MAP OF BOUNDARY SURVEY

SHOWING the SOUTH ONE-ACRE of LOT 41 of HI-DRI ACRES, UNIT 2, a subdivision, as recorded in Plat Book 4, Pages 9 and 9A, of the Public Records of Columbia County, Florida more particularly described as follows: Begin at the SW corner of said Lot 41 and run N 01°36′56″ W, a distance of 207.75 feet; thence N 88°27′59″ E, a distance of 210.00 feet; thence S 01°36′56″ E, a distance of 207.66 feet to a point on the North right-of-way line of SW Goose Place (a 60-foot right-of-way); thence S 88°27′59″ W, along said North right-of-way line. a distance of 210.00 feet to the Point of Beginning.

Together with an easement for ingress, egress, and utilities over and across the East 20.00 feet of the South 207.66 feet of said Lot 41 of HI-DRI ACRES. UNIT 2, a subdivision, as recorded in Plat Book 4, Pages 9 and 9A, of the Public Records of Columbia County, Florida



SW GOOSE PLACE (60' R/W)

CERTIFIED TO:
EMORY MAPLES
TAYLOR BEAN & WHITAKER
FIRST ALLIANCE ABSTRACT & TITLE
LAND AMERICA COMMONWEALTH TITLE INSURANCE

I HEREBY CERTIFY THIS SURVEY WAS DONE UNDER MY DIRECT SUPERVISION AND IT MEETS THE MINIMUM TECHNICAL STANDARDS FOR LAND SURVEYING PURSUANT TO CHAPTER 61G17-6, FLORIDA ADMINISTRATION CODE, CHAPTER 472, FLORIDA STATUES.

SURVEYORS NOTES

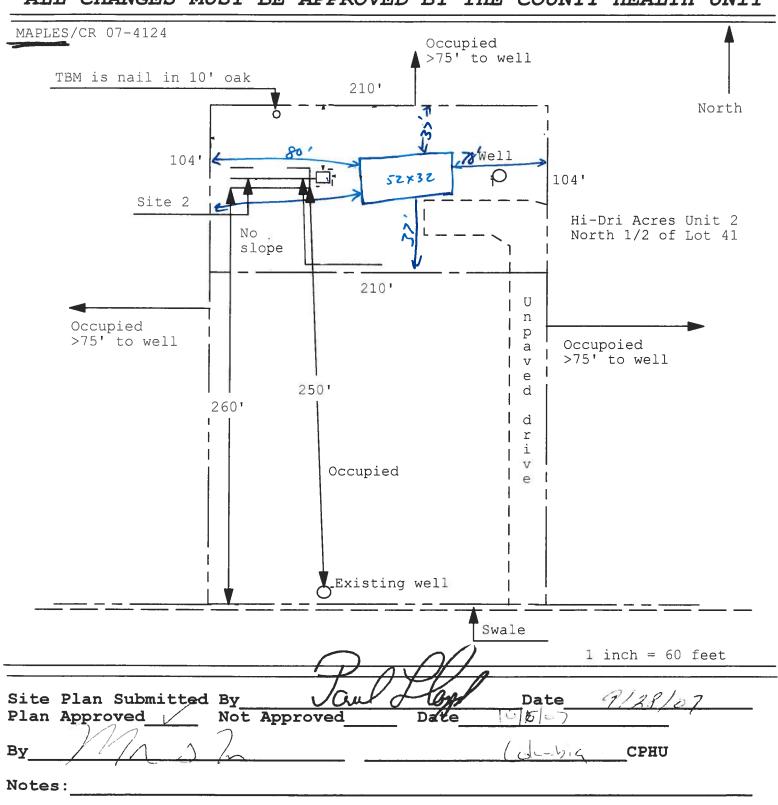
1. BEARING BASED ON PLAT

# LIMITED POWER OF ATTORNEY

I, BERNARD D. THR AUTHORIZE Find C	EIFT, LICENSE #1H-0000075 F A Maple 5 E HALF IN ALL ASPECTS OF	EXPIRING 09-30-20_ TO BE MY REPR F APPLYING FOR A I	DO HEREBY ESENTATIVE MOBILE HOME
MOVE ON PERMIT	TO BE INSTALLED IN	Columbra	COUNTY,
FLORIDA.  DENNARD D. THRIF		DATE	······································
SWORN TO AND SU 20D7. NOTARY PUBLIC	BSCRIBED BEFORE ME THI	NICOLE COLEMA MY COMMISSION # DE EXPIRES: June 7 / Bonded True Notary Public U	AN D 326664 2008
PERSONALLY KNOV	WN:		
YEAR	MAKE	S1	N#
PROPERTY ID/LOCA	TION		

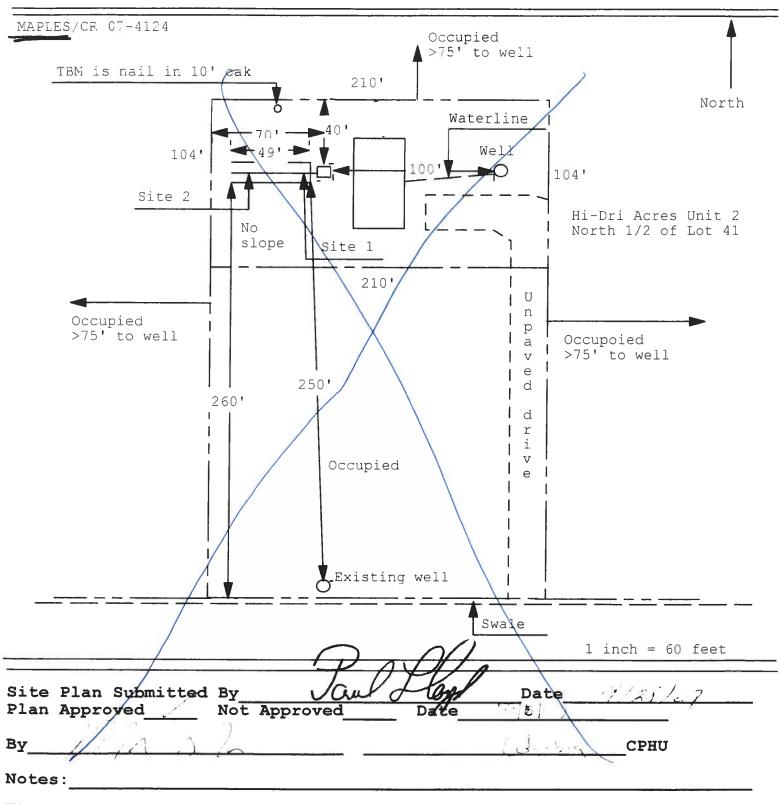
Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: 07-0804

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number:

# ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

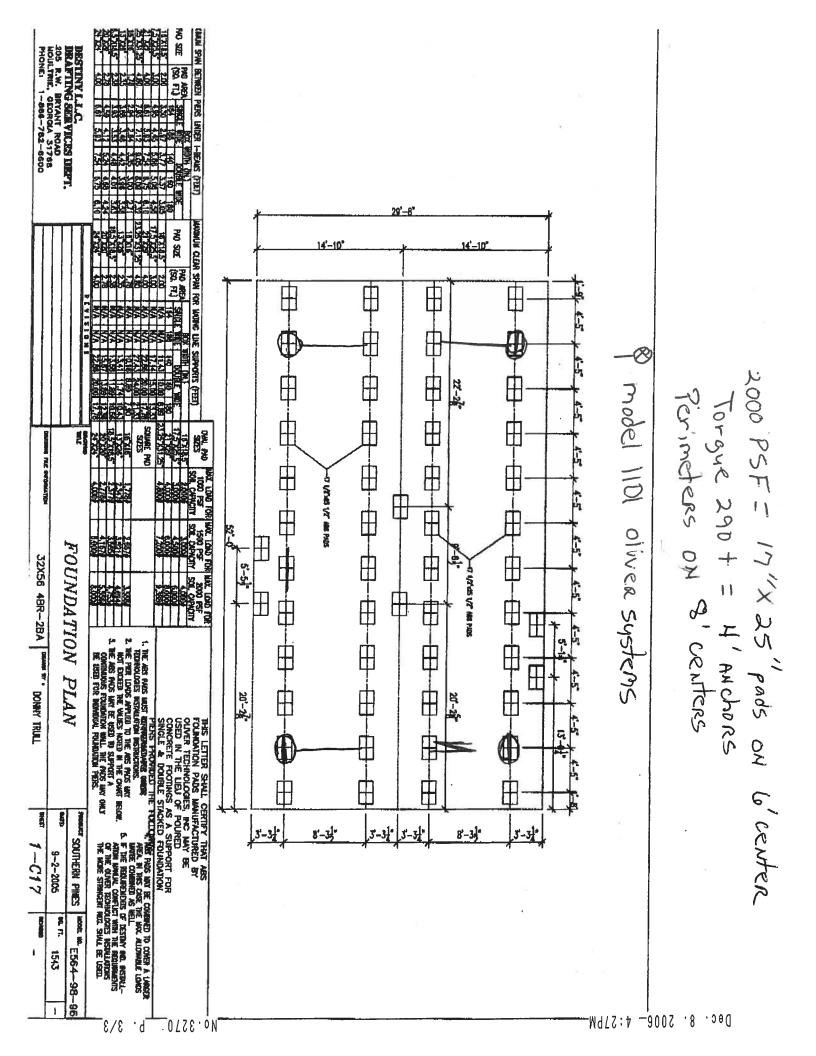


# PERMIT WORKSHEET

		marriage wall plets within 2 of end of home pet Rule 15C				Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	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  Typical pier spacing	NOTE: if home is a single wifte fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home	Address of nome being installed  Manufacturer  Oction  I conth width	Installer Scraic Thriff License # THOGODOOTS	DEBMIT NIMBED
Longitudinal Stabilizing Device (LSD)  Manufacturer Longitudinal Stabilizing Device w/, Lateral Arms Marriage wall  Manufacturer Medc \ \\ \o \w \cappa \ \o \w \cappa \ \\ \o \w \cappa \ \o \w \cappa \ \\ \o \w \cappa \ \o \w \cappa \ \\ \o \w \cappa \ \o \w \cappa \ \\ \o \w \cappa \ \o \w \cappa \\ \o \w \cappa \\ \o \w \cappa \ \\ \o \w \cappa \\\ \o \w \cappa \\ \o \w \cappa \\ \o \w \cappa \\ \o \w \cappa \\	Opening Pier pad size  Opening Pier pad size  Opening Pier pad size  Of 8 %'' / 7 % % 6 ft	3/16	18	17 X 25 Pad Size 16 X 16 16 X 18	8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8	Desi 3: 4: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6: 6:	Load   Footer   bearing   size   capacity   (sq in)   (256)   (342)   (400)   (484)*   (576)*   (576)*	Triple/Quad Serial # 348785	talled in accordance with Rule 15-C  Wind Zone II  Wind Zone III	New Home Used Home II  Home installed to the Manufacturer's Installation Manual	ASHEE I page 1 of 2

Berg
<b>43</b>
2

connect electrical conductors halves in multi-wide units, but not to the majo power ource. This includes the handing with between multi-wide units, Fg. ———————————————————————————————————	POCKET PENETRATER TESTING METHOD  1. Test the portmeter of the horne of 8 facetions.  2. Talco the teading at the depth of the focior:  3. Using 500 lb, Increments, take the lowest reading and round down to that increment.  2. Talco the teading and round down to that increment.  2. Talco the teading and round down to that increment.  3. Using 500 lb, Increments, take the lowest freeding and reading and round down to that increment.  3. Using 500 lb, Increments, take the lowest freeding and reading and reading the form to that increment.  4. The results of the tength probleted in the point of the tength of the first shear of the form and the first shear of the first shear of the shear o	FUCILET PRINTERIONETER TEST  The pocket patiefromster teste are munded down to 200 paf or chank here to declare 1000 ib, soll without tasting.  X.2.00000 X.2.0000 X.2.0000 X.3.0000
Installer vorifies all information given with this parmit workshoet is acqueate and true based on the inampliciturer's installation instructions and or Rule 186-1 & 2 installer Bignature Course and of Rule 186-1 & 2	Type Fasternor: Type Fasternor	let something Swale



# AFFIDAVIT OF SPECIAL TEMPORARY USE FOR IMMEDIATE FAMILY MEMBERS FOR PRIMARY RESIDENCE

STATE OF FLORIDA COUNTY OF COLUMBIA

. ( . .

BEFORE ME the undersigned Notary Public personally appeared.

Emory Maples, SR., the Owner of the parcel which	is being used to
place an additional dwelling (mobile home) as a primary residence for an im-	mediate family
hereinatter the Owner, and Cynthia Maples	the Family
Member of the Owner, who intends to place a mobile home as their primary	residence as a
temporarily use, hereafter the Family Member is related to the Owner as	Augh Lor
and both individuals being first duly sworn according to law, depose and say	

- 1. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit.
- 2. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 15-55-16-03626-041.
- 3. No person or entity other than the Owner claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
- 4. This Affidavit is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. Special Temporary Use Permit is valid for one (1) year, then Family Member shall comply with the Columbia County Land Development Regulations as amended.
- 5. This Special Temporary Use Permit on Parcel No. 15-55-16-03626- 14 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.

6. This Affidavit is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.
We Hereby Certify that the information contained in this Affidavit are true and correct.
Wemony a Myslen 50 X Ly the Family Member Family Member
Typed or Printed Name  St Cynthia Moples  Typed or Printed Name
Subscribed and sworn to (or affirmed) before me this 18 day of 0 chober, 20 of by Empry A. Maples (Owner) who is personally known to me or has produced personally known as identification.
Notary Public State of Florida Ottie V Maddox My Commission DD425206 Expires 05/03/2009
Subscribed and sworn to (or affirmed) before me this 18 day of 18, 2001, by Cynthia Maples (Family Member) who is personally known to me or has produced personally known to as identification.
Notary Public  Notary Public  Notary Public State of Florida Ottie V Maddox My Commission DD425206 Expires 05/03/2009



# M/H OCCUPANC

# **COLUMBIA COUNTY, FLORIDA**

Department of Building and Zoning Inspection
This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 15-5S-16-03626-141

Building permit No. 000026343

Permit Holder BERNIE THRIFT

Owner of Building EMORY MAPLES, SR

Location: 195 SW GOODE PLACE, LAKE CITY, FL

Date: 11/13/2007

**Building Inspector** 

**POST IN A CONSPICUOUS PLACE** (Business Places Only)