DATE 06/0	4/2010		bia County Bu			PERMIT
I DDI IGINE	DODEDE		se Prominently Posted			000028628
APPLICANT	ROBERT	WENDEL JR		PHONE	623-3328	EI 22056
ADDRESS		PO BOX 94		LAKE CITY	206 622 2220	FL 32056
OWNER	Peter trace treated	WNDEL, JR.		PHONE FORT WHITE	386-623-3328	FL 32038
ADDRESS CONTRACTO	3528 P. CHI	SW OLD WIRE RD ESTER KNOWLES		PHONE	755-6441	<u>1L</u> <u>32038</u>
LOCATION O		Sale de Sancia de Santia de Maria de Santa de Santia de	ATSON RD, AT 90 DE			
LOCATION O	FPROPER	-	TO 2ND DRIVE ON R		ON OLD WIKE KD	,
TYPE DEVEL	OPMENT	MH,UTILITY		TIMATED COST OF C	ONSTRUCTION	0.00
HEATED FLO		1	TOTAL ARE	A	HEIGHT	STORIES
FOUNDATION	J	WAL		OOF PITCH	_	OOR
	-				X. HEIGHT 33	
LAND USE &		AG-3	DD 03 ME		3	a Ostro-uma
Minimum Set F	Back Requii	rments: STREET-	FRONT 30.00	REAR	25.00	SIDE 25.00
NO. EX.D.U.	1	FLOOD ZONE	X	DEVELOPMENT PER	RMIT NO.	
PARCEL ID	26-5S-16-	03716-129	SUBDIVISIO	N		
LOT	BLOCK	PHASE	UNIT		TAL ACRES 10	83
	William Co.		IH0000509	XIVIX	= 011	
Culvert Permit	No.	Culvert Waiver (Contractor's License Nun	nber	Applicant/Owner/	Contractor
EXISTING		10-0285-R	BK		HD /	N
Driveway Conn	ection	Septic Tank Number	LU & Zonir	ng checked by A	oproved for Issuance	e New Resident
COMMENTS:	FLOOR C	ONE FOOT ABOVE T	HE ROAD			
RPLACING EX	USTING H	ОМЕ				
A.					Check # or Ca	ash 1035
Tana da		FOR BU	JILDING & ZONIN	IG DEPARTMEN	T ONLY	(footer/Slab)
Temporary Pov	ver		Foundation		Monolithic	(tooter stab)
		date/app. by		date/app. by		date/app. by
Under slab roug	gh-in plumb		Slab _		Sheathing/	Nailing
Framing		date/ap		date/app. by		date/app. by
	date/ap	in pp. by	sulationdate	e/app. by		
	1.50 1840 - 30			• •	Electrical rough-in	
Rough-in plumi	bing above	slab and below wood f		ate/app. by	Jicon lough in	date/app. by
Heat & Air Duc			Peri. beam (Linte	1)	Pool	
D		late/app. by	00 F: 1	date/app. by	_	date/app. by
Permanent power	da	nte/app. by	C.O. Final	late/app. by	Culvert	date/app. by
Pump pole	ate/app. by	Utility Pole	M/H tie d	owns, blocking, electric	ity and plumbing	stands electron electron
Reconnection	аце/арр. бу	da	e/app. by RV		Re-roof	date/app. by
Reconnection		date/app. by	KY	date/app. by	KC-1001	date/app. by
BUILDING PE	RMIT FEE	\$ 0.00	CERTIFICATION FE	E\$ 0.00	SURCHARGE	FEE \$ 0.00
MISC. FEES \$			CERT. FEE \$ 50.00		.00 WASTI	E FEE \$
FLOOD DEVEI	-		OD ZONE FEE \$ 25.0			
INSPECTORS		7,1	bu-		//	7 22 275.00
IINDEEK IURS	OFFICE	7.210	· V/)/	CLERKS OFFICE		

PERMIT

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

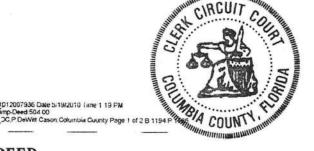
EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

-	
	Profice Use Only AP# 1005-56 Date Received 5-26-10 By 14 Permit # 28628 Flood Zone Development Permit NA Zoning A-3 Land Use Plan Map Category A 3
	Comments
	10-0285R
F	EMA Map # NA Elevation NA Finished Floor Glove River NA In Floodway NA
,,,	Site Plan with Setbacks shown Environmental Health Signed Site Plan Env. Health Release
JA.	Well letter provided Existing Well Suspendel Every Fees Suspendel Every Revised 9-23-04
	TO App. De Paid
	Property ID 26-55-16-03716-129 Must have a copy of the property deed
	New Mobile Home Vear_2005
•	Subdivision Information
	Applicant Robert Wendel. JR. Phone # 386-623-3328
	Address PO Box 94 Like Cizy Fl 32056 (3528 5W OLD WIRE RO Ft White F
	Name of Property Owner Robert Wendel, Jr. Phone# 386-623-3328
X	911 Address 3528 SW OLD WIRE ROAD Ff. White F1 37038
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Progressive Energy
=	Name of Owner of Mobile Home Robert Wendel, Jr. Phone # 386-623-3328
	Address 352F SW OLD Wire NO FT White F137038
	Relationship to Property Owner
• ,	Current Number of Dwellings on Property
	Lot Size Total Acreage
•	Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver Permit
=	Driving Directions SR 47 South T. L. ON Watson Follow To
	90° Ture TO Right (Old wike) 2 Nd Driveway on Right.
	Is this Mobile Home Replacing an Existing Mobile Home Yes (Already Moved) (Pard)
	Name of Licensed Dealer/Installer Jessiz Li Chester Kubule Phone #386-755-644/
	Installers Address 580 TSW, SR 41 LAKE CITY, FL 32024
-	New # IH10252183/1
	License Number TH 0000509 Installation Decal # 306118
	Left a message on Roberts Cell phone
	E-36-10 1 H

Inst. Number: 201012007936 Book: 1194 Page: 1786 Date: 5/19/2010 Time: 1:19:30 PM Page 1 of 2

This Instrument Prepared By: Michael H. Harrell Abstract & Title Services, Inc. 111 East Howard Street Live Oak, Florida 32064 ATS# 1-33800



STATE OF FLORIDA, COUNTY OF COLUMBIA

I HEREBY CERTIFY, that the above and foregoing is a true copy of the original filed in this office. P. DeWATA CASON, CLERK OF COURTS

GENERAL WARRANTY DEED

Individual to Individual (or Corporation/LLC)

This Warranty Deed made this 17th day of May, 2010 by

Capital Resources Financial Group, LLC

hereinafter called the Grantor, to

Robert L. Wendel, Jr.

whose post office address is P. O. Box 94, Lake City, Fl 32056, 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 Corporation.)

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, unto the Grantee all that certain land, situate in Columbia County, Florida, viz: TAX ID:03716-129 R03716 129:

See Exhibit "A" Attached Hereto And By This Reference Made A Part Thereof.

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

To have and to hold, the same in fee simple forever.

And the Grantor hereby convenants 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, 2009.

In witness whereof, the said Grantor has signed and sealed these presents the day and year first above written.

Printed Name: IVAINE OF HINTER

WITNESS Printed Name: Teresa Baker

State of Florida County of Suwannee

I hereby certify that on this 17th day of May, 2010, before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared Capital Resources Financial Group, LLC, who is personally known to me or produced a _______ for identification, and known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he/she/they executed the same, and an oath was not taken. *J. S. Baker, Sr., as Manager Member

(SEAL)

NOTARY PUBLIC

My Commission Expires:

Sr., Manager Member



Inst. Number: 201012007936 Book: 1194 Page: 1787 Date: 5/19/2010 Time: 1:19:30 PM Page 2 of 2

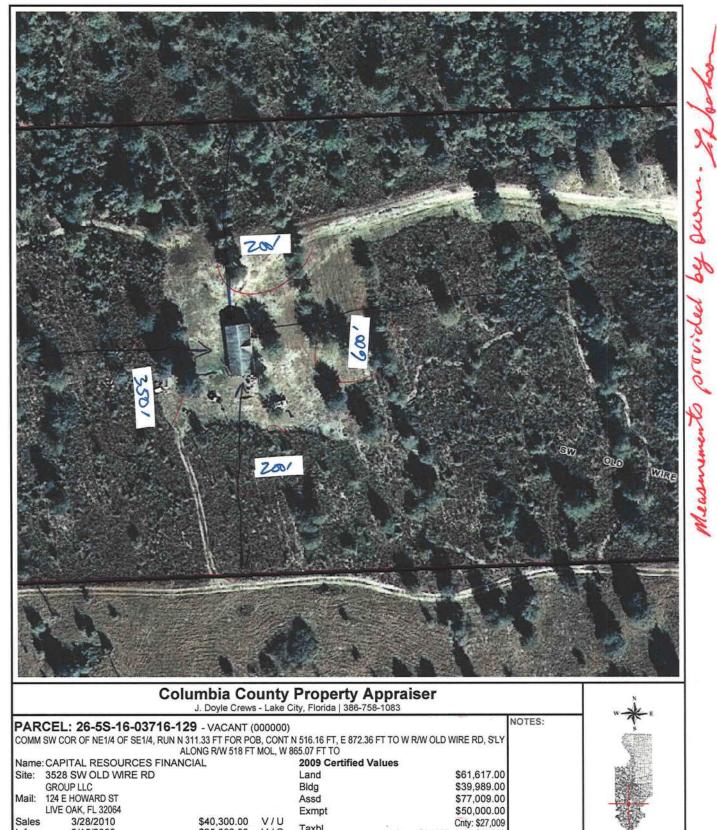
ATS# 33800

Exhibit "A"

Commence at the Southwest corner of the Northeast ¼ of the Southeast ¼ of Section 26, Township 5 South, Range 16 East, Columbia County, Florida and run N 01 deg 00'37" E along the West line of said Northeast ¼ of the Southeast ¼ of Section 26, a distance of 311.33 feet to the POINT OF BEGINNING; thence continue N 01 deg 00'37" E along said West line of the Northeast ¼ of the Southeast ¼ of Section 26, a distance of 516.16 feet; thence S 89 deg 39'15" E 872.36 feet to the West maintained right of way line of Old Wire Road; thence Southerly along said West maintained right of way of Old Wire Road 518 feet more or less; thence N 89 deg 39'15" W 865.07 feet to the Point of Beginning.

AB THE

site Plan



This information, GIS Map Updated: 5/6/2010, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessi

V/Q

\$25,000.00

Info

3/15/2000

Taxbl

powered by: GrizzlyLogic.com

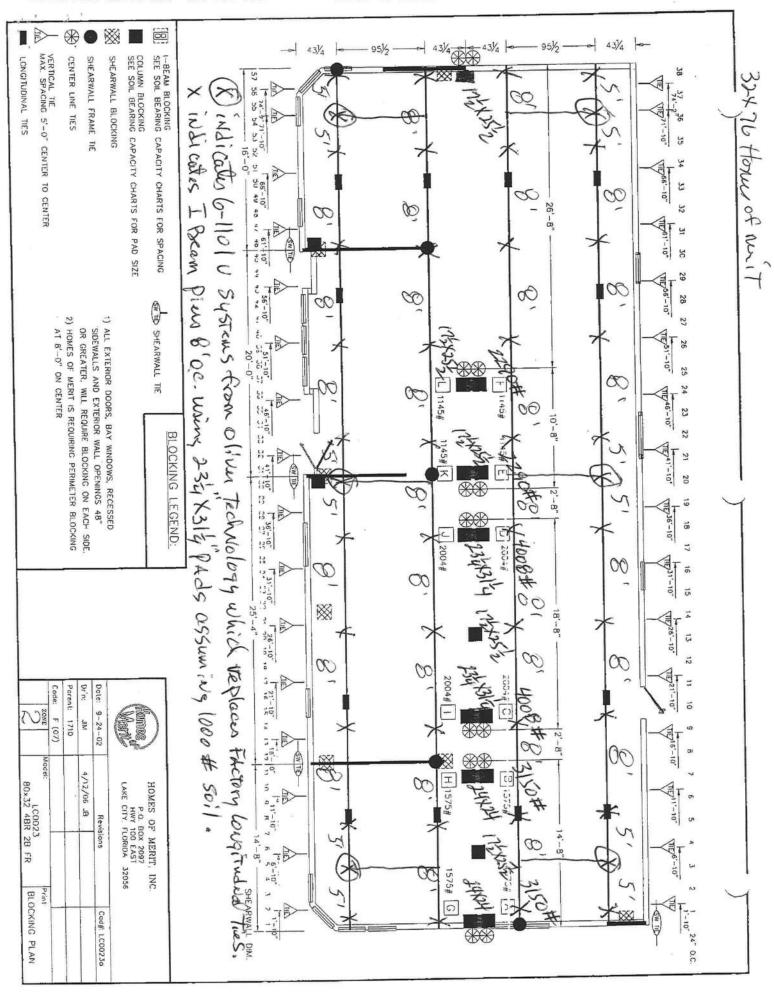
Other: \$27,009 | Schl: \$52,009

		mertinge wall plots within 2 of end of flome per 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 it 4 in. Installer's initials Typical pier specing	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	Manufacturer Homes Of West't Langth x width 32x76	Ra ho phin	Installer Jessie LiChester KNOWLES License # IH 000509	PERMIT NUMBER
Longitudinal Stabilizing Davice (LSD) Manufacturer Longitudinal Stabilizing Davice (LSD) Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Stabilizing Davice w/ Lateral Arms Shearwall Shearwall	Obening Pier pad size 134341 511 FRAME TIES	Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the plars. List ell marriage wall openings greater than 4 foot and their pler pad sizes below.	Dealin pler pad size	RI BI	(sq lii) (256) (342) (400) (484)* (576)* DSI	SPACIN	Serial# 28959 A	Single wide Wind Zone II Wind Zone III Double wide INstallation Decal # 306718	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	New Home Used Home X	SHEET page 1 of 2

**Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems: Pg. / < e - /	Connect all sewer drains to an existing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 15c-1	Ejecirica)	Date Tested 5-26-10	Installer Name Jessie L. Christer KNDWles	requires anchors with 4000 lb bolding capacity. ALL TESTS MUST BE DESCRIPTION OF THE DES	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewell locations, I understand 5 ft anchors are required at all centerline the points where the torque test	2-4	TORQUE PROBE TEST	× Lo × Lo	3. Using 500 lb. Increments, take the lowest reading and round down to that increment.	2. Take the reading at the depth of the footer.	1. Test the perimeter of the home at 8 locations	x to x to x to	efrometer tests are rounded down to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST
Installor Signal		installer verifi	Olher: He	Dryer vent installed Range downflow ve Drain lines supporte	Skirling to be install	The bottomboard w Siding on units is in Fireplace chimney!		Type gasket Act	**************************************	a result of a poorly i	i understand a prop	roofing na	Roof: Type Fas		Debris and organic i Water drainage: Nat	

The bottomboard will be repaired and/or taped. Yes Pg. 15c. Skiling on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes Miscelleneous Skirling to be installed. Yes No Dryer vent installed outside of skirling. Yes NA Range downflow vent installed outside of skirling.	I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are of tape will not serve as a gasket. Installer's initials Type gasket Actor and the form of ridgebeam Yes Belween Walls Yes Bottom of ridgebeam Yes Westherproofing	Debris and organic material removed Water drainage: Natural Swale Pad Other Fastening multi wide units Floor: Type Fastener: Aes Length: Spacing: B' Walls: Type Fastener: Statos Length: Spacing: As Spacing:
--	--	---

Installer verifies all information given with this permit worksheet is accurate and true based on the imanufacturer's installation instructions and or Rule 15C-1 & 2 installer Signature Like J. Chiefe Market Date 5-16-10 Installer Phone #: 386-755-644



SUBCONTRACTOR VERIFICATION FORM

1.20				
APPLICATION NUMBER	CONTRACTOR	PHONE		
TIME	FORM MALICT DE CURNAITTED DRIOR TO THE ISSUANCE	OF A DEPMIT		

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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.

start of that su	bcontracto	beginning any w	OIK. VIOIGEIOIIS W	in result in stop t	WOIR Offices array	J. H. Co.	
ELECTRICAL	Print Name License #:	KUBERT We	woel Ji		Phone #:	W/	
MECHANICAL/ A/C	Print Name License #:	Robert W	eworl In	Signature	Phone #:	Telp	- 12 - 124 - 145
PLUMBING/ GAS	Print Name License #:	Robert W	ENDEL JA.		Phone #:	4	
ROOFING	Print Name License #:				Phone #:		-
SHEET METAL	Print Name License #:			Signature	Phone #:		
FIRE SYSTEM/ SPRINKLER	Print Name License#:				Phone #:		
SOLAR	Print Name License #:				Phone #:		
Specialty Li	cense	License Number	Sub-Contract	ors Printed Name	Sub-C	Contractors Sig	gnature
MASON				-			-

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			22
FRAMING			. 1
INSULATION			5.
STUCCO			11
DRYWALL			*
PLASTER			'A
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS /			
CERAMIC TILE		4	
FLOOR COVERING			
ALUM/VINYL SIDING	[8]		
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

Contractor Forms: Subcontractor form: 6/09



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hemando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

Installer License Holder No	Mowles give this authority	for the job address show below
only, 3528 SW OLD (wine RA Ft. White F	137.37 and I do certify that
) listed on this form is/are under m	
and is/are authorized to purcha	ise permits, call for inspections an	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Robert Wendel JR. X	Att. Windel.	Agent Officer Y Property Owner
		AgentOfficerProperty Owner
		Agent Officer Property Owner
Local Ordinances. I understand that the State Licentholder for violations committed by	I am responsible for all permits presponsible for compliance with all assing Board has the power and authorized sponsibility for compliance granted	Thorida Statutes, Codes, and thority to discipline a license
J. C. L.	MEN It 102	5283/1 0509 5-26-10 mber Date
The above license holder, whose personally appeared before me a type of I.D.) DerStrally		ester" Knowks
DUSE M Smill OTARYS SIGNATURE	(Se	al/Stamp)
	TEDECA M. O	1117

TERESA M. SMITH
Notary Public, State of Florida
My comm. exp. Jan. 23, 2011
Comm. No. DD 632275

Faxed 5 - 26-10 CODE ENFOR :EMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 5-24-10 BY CH IS THE MIN ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?
OWNERS NAME Polert Wendel Jr PHONE CELL 623 - 3328
ADDRESS 3528 SW Old wire Rd, fort White Ife 32038
MOBILE HOME PARKSUB INISION
DRIVING DIRECTIONS TO MOBILE HOME ST BOX: Coty Middle & Elas .
MOBILE HOME INSTALLER Chester Knowles PHONI 623-3328 CELL
MOBILE HOME INFORMATION
MAKE Homes of Werit YEAR 05 SIZE 32 x 76 COLOR Tan SERIAL NO. 28959 A & B
WIND ZONE Must be wind zone ii or higher N 3 WIND ZONE I ALLOWED
INSPECTION STANDARDS INTERIOR: (P or F) - P= PASS F= FALED \$50.00
CHANGE PROPERTY AND ALL AND A PROPERTY AND A PROPER
Date of Payment: 3 2070
FLOORS () BOLID () WEAK () HOLES DAMAGED LI CATION _ Pald By: Robert Wented Jr
DOORS () OPERABLE () DAMAGED Notes: Call for him to
WALLS () SOLID () STRUCTURALLY UNSOUND WINDOWS () OPERABLE () INOPERABLE WINDOWS () OPERABLE () INOPERABLE
PLUNBING FIXTURES () OPERABLE () INOPERABLE (MISSING
CEILING () SOLID () HOLES () LEAKS APPARENT
ELECTRICAL (FIXTURESIOUTLETS) () OPERABLE () EXP ISED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING
EXTERIOR: WALLS / BIDDING () LOOSE SIDING () STRUCTURALLY UN SOUND () NOT WEATHERTIGHT () NEEDS CLEANING
WINDOWS () GRACKED/ BROKEN GLASS () SCREENS N SSING () WEATHERTIGHT
ROOF () APPEARS SOLID () DAMAGED
STATUS
APPROVED WITH CONDITIONS:
NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING COND TIONS
SIGNATURE ALL DRUMBER 402 DATE 5-27-70





STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number __ PART II - SITE PLAN -Scale: Each block represents 5 feet and 1 inch = 50 feet. 210 SW Old Wire Rock White, Florida 320 Notes: Not Approved — Columbia Cl Site Plan submitted by: QC MASTER Date 6-4-10 Plan Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

County Health Department