

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIII	IIII	IIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	✓		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient, Components and Cladding			
13	The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component, cladding materials not specifically designed by the registered design professional.			

Elevations Drawing including:

14	All side views of the structure	✓		
15	Roof pitch	✓		
16	Overhang dimensions and detail with attic ventilation	✓		
17	Location, size and height above roof of chimneys			
18	Location and size of skylights with Florida Product Approval			
18	Number of stories	✓		
20A	Building height from the established grade to the roofs highest peak	✓		

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBC 1405.13.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	✓		
25	Safety glazing of glass where needed			
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)	✓		
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails			✓
28	Identify accessibility of bathroom (see FBCR SECTION 320)	✓		

All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the pl (see Florida product approval form)

GENERAL REQUIREMENTS:
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Items to Include-
Each Box shall be
Circled as
Applicable

FBCR 403: Foundation Plans

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	All posts and/or column footing including size and reinforcing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Any special support required by soil analysis such as piling.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Assumed load-bearing value of soil _____ Pound Per Square Foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FBCR 506: CONCRETE SLAB ON GRADE

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

FBCR 318: PROTECTION AGAINST TERMITES

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Submit other approved termite protection methods. Protection shall be provided by registered termiticides	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)

37	Show all materials making up walls, wall height, and Block size, mortar type	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect

Floor Framing System: First and/or second story

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	Attachment of joist to girder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	Wind load requirements where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	Show required under-floor crawl space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45	Show required amount of ventilation opening for under-floor spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46	Show required covering of ventilation opening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	Show the required access opening to access to under-floor spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & interior of the areas structural panel sheathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

49	Show Draftstopping, Fire caulking and Fire blocking			
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 302.6			
51	Provide live and dead load rating of floor framing systems (psf).			

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls			
53	Fastener schedule for structural members per table IRC 602.3 are to be shown			
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing			✓
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems			
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per IRC Table 502.5 (1)			
57	Indicate where pressure treated wood will be placed			
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas			
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail			

FBCR :ROOF SYSTEMS:

60	Truss design drawing shall meet section FBCR 802.1.6.1 Wood trusses			
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer			
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters			
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details			
64	Provide dead load rating of trusses			

FBCR 802:Conventional Roof Framing Layout

65	Rafter and ridge beams sizes, span, species and spacing			
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating			
67	Valley framing and support details			
68	Provide dead load rating of rafter system			

FBCR 803 ROOF SHEATHING

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness			
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas			

ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof assembles covering			
72	Submit Florida Product Approval numbers for each component of the roof assembles covering			

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. **Two of the required forms are to be submitted, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure			
74	Attic space			
75	Exterior wall cavity			
76	Crawl space			

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study			
78	Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required			
79	Show clothes dryer route and total run of exhaust duct			

Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan	<input checked="" type="checkbox"/>		
81	Show the location of water heater	<input checked="" type="checkbox"/>		

Private Potable Water

82	Pump motor horse power			
83	Reservoir pressure tank gallon capacity			
84	Rating of cycle stop valve if used			

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	<input checked="" type="checkbox"/>		
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A	<input checked="" type="checkbox"/>		
87	Show the location of smoke detectors & Carbon monoxide detectors	<input checked="" type="checkbox"/>		
88	Show service panel, sub-panel, location(s) and total ampere ratings	<input checked="" type="checkbox"/>		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type. For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3	<input checked="" type="checkbox"/>		

90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed Combination arc-fault circuit interrupter , Protection device.	<input checked="" type="checkbox"/>		

Disclosure Statement for Owner Builders *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

Notice Of Commencement

A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

<p align="center">GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p align="center">Items to Include- Each Box shall be Circled as Applicable</p>
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THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	Building Permit Application A current On-Line Building Permit Application www.ccpermit.com is to be completed, by following the Checklist all supporting documents must be submitted. There is a \$15.00 application fee.	<input checked="" type="checkbox"/>		
93	Parcel Number The parcel number (Tax ID number) from the Property Appraisers Office (386) 758-1083 is required. A copy of property deed is also requested. www.columbiacountyfla.com			
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058			
95	City of Lake City A permit showing an approved waste water sewer tap 386-752-2031			<input checked="" type="checkbox"/>
96	Toilet facilities shall be provided for all construction sites	<input checked="" type="checkbox"/>		
97	Town of Fort White (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White, an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			<input checked="" type="checkbox"/>
98	Flood Information: All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations			<input checked="" type="checkbox"/>
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the approved FIRM Flood Maps show the property is in a AE, Floodway, and AH flood zones. Additionally One Foot Rise letters are required for AE and AH zones. In the Floodway Flood zones a Zero Rise letter is required.			<input checked="" type="checkbox"/>
100	A Flood development permit is also required for AE, Floodway & AH. Development permit cost is \$50.00			<input checked="" type="checkbox"/>
101	Driveway Connection: If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. County Public Works Dept. determines the size and length of every culvert before instillation and completes a final inspection before permanent power is granted. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00) Separate Check when issued. If the project is to be located on an F.D.O.T. maintained road, then an F.D.O.T. access permit is required. <i>Existing Private Road</i>	<input checked="" type="checkbox"/>		
102	911 Address: An application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125 Ext. 3			

19

Andrews Site Prep, Inc.

8230 SW State Rd. 121

Lake Butler, Fl. 32054

386-867-0323


Danielle Andrews License Number 2688

Dec. 10, 2012

To Columbia County Environmental Health:

We will be drilling a well for Richard Gorman at 643 SW Marvin Burnette Rd. Lake City, Florida. The well should go approximately 160 feet with a casing depth of 120 feet. We will install a 1hp aermotor pump and a 33 gallon challenger tank.

Thank You,



Danielle Andrews

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Christopher Collins

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 1074	Print Name: Glenn Whittington License #: EC13002957	Signature: <i>Glenn Whittington</i> Phone #: 386-484-4601
MECHANICAL/ A/C B 568	Print Name: David Aali's Inc. License #: CACO 57424	Signature: <i>David Aali's Inc.</i> Phone #: 386-755-9792
PLUMBING/ GAS X	Print Name: Paula Gorman License #: OWNER	Signature: <i>Paula Gorman</i> Phone #: 386-965-5997
ROOFING	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SHEET METAL	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: _____ License #: _____	Signature: _____ Phone #: _____
SOLAR	Print Name: _____ License #: _____	Signature: _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER 571	CBC-1516042	Plumb Level Concrete Co.	Kevin Bedenbaugh
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
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



ENGINEERING • INSPECTIONS
CERTIFICATIONS • TESTING

November 29, 2012

TownHomes, LLC
133 S.E. Newell Drive
Lake City, FL 32056



RE: Manufacturer: TownHomes, LLC
S/N Size & Occupancy: 2956-1099 (TH-87FL); 29'-0" x 76'-0"; R-3
HWC Plan#: 2198-0193F

To Whom It May Concern:

This is to certify that the plans for the referenced manufactured building have been reviewed and approved as being in compliance with the 2010 Florida Codes and Standards, as noted on the approved drawings, subject to the following limitations:

1. Approval covers factory-built structure only. (Note: Any alterations to factory built structure on site voids state approval)
2. Items installed at the site are subject to review, approval, and inspection by the local authority having jurisdiction.
3. The Chapter 633 Plan Review and Inspection shall be conducted by the local fire safety inspector.
4. Signed and sealed plans shall be on file with HWC Engineering.
5. NOT approved for High Velocity Hurricane Zone (i.e. Broward and Dade Counties)

Sincerely,
HILBORN, WERNER, CARTER & ASSOCIATES, INC.

Plan Reviewer

HILBORN, WERNER, CARTER AND ASSOCIATES, INC.
1627 SOUTH MYRTLE AVENUE CLEARWATER, FLORIDA 33756
(727) 584-8151
FAX: (727) 586-3343 / (727) 585-2392 / (727) 587-0447
Modular / Dapla / Inspection

NCF

TITLE
North Central Florida Title, LLC

A. Settlement Statement FINAL
U.S. Department of Housing and Urban Development
OMB No. 2502-0265

B. TYPE OF LOAN
1. ☐ FHA 2. ☐ FmHA 3. ☐ Conv. Unins.
4. ☐ VA 5. ☐ Conv. Ins.

6. FILE NUMBER 7. LOAN NUMBER
12Y-11013TL

8. MORTGAGE INSURANCE CASE NUMBER

C. Note: This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(p.o.c.)" were paid outside the closing; they are shown here for information purposes and are not included in the totals. WARNING: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details see: Title 18 U. S. Code Section 1001 and Section 1010.

TitleExpress Settlement System
Printed 12/06/2012 at 15:12 PHL

D. NAME OF BORROWER: PAULA L. GORMAN and RICHARD K. GORMAN ADDRESS: 643 SW MARVIN BURNETT ROAD, LAKE CITY, FLORIDA 32025	
E. NAME OF SELLER: LOVELESS DEVELOPMENT CO ADDRESS: 155 WINDSOR DRIVE, FAYETTEVILLE, GEORGIA 30215	
F. NAME OF LENDER: SMALL BUSINESS ADMINISTRATION ADDRESS: PROCESSING AND DISBURSEMENT CE, 14925 KINGSPOUR ROAD, FORT WORTH, TX 76155-2243	
G. PROPERTY ADDRESS: 643 SW MARVIN BURNETTE ROAD, LAKE CITY, FL 32025 P/O 07-4S-17-08110-000, COLUMBIA COUNTY, FLORIDA	
H. SETTLEMENT AGENT: NORTH CENTRAL FLORIDA TITLE, LLC, PH 386-752-1502 FAX 386-752-5746 PLACE OF SETTLEMENT: 343 NW COLE TERRACE, SUITE 101, LAKE CITY, FLORIDA 32055	
I. SETTLEMENT DATE: 12/08/2012	
J. SUMMARY OF BORROWER'S TRANSACTION:	
100. GROSS AMOUNT DUE FROM BORROWER	400. GROSS AMOUNT DUE TO SELLER
101. Contract sales price 15,000.00	401. Contract sales price 15,000.00
102. Personal Property	402. Personal Property
103. Settlement charges to borrower (line 1400) 1,181.75	403.
104. PAYOFF HOME 138,027.00	404.
105. FUNDS GIVEN TO BUYER BY SBA 40,000.00	405.
Adjustments for items paid by seller in advance	Adjustments for items paid by seller in advance
109.	409.
110.	410.
111.	411.
112.	412.
120. GROSS AMOUNT DUE FROM BORROWER 194,208.75	420. GROSS AMOUNT DUE TO SELLER 15,000.00
200. AMOUNTS PAID BY OR ON BEHALF OF BORROWER	500. REDUCTIONS IN AMOUNT DUE TO SELLER
201. Deposit or earnest money	501. Excess Deposit (see instructions)
202. Principal amount of new loans 192,500.00	502. Settlement charges to seller (line 1400) 594.00
203. Existing loan(s) taken subject to	503. Existing loan(s) taken subject to
204.	504. Payoff of First Mortgage Loan
205.	505.
206.	506.
207.	507.
208.	508.
209.	509.
Adjustments for items unpaid by seller	Adjustments for items unpaid by seller
213.	513.
214.	514.
215.	515.
216.	516.
217.	517.
218.	518.
219.	519.
220. TOTAL PAID BY/FOR BORROWER 192,500.00	520. TOTAL REDUCTION AMOUNT DUE SELLER 594.00
300. CASH AT SETTLEMENT FROM OR TO BORROWER	600. CASH AT SETTLEMENT TO OR FROM SELLER
301. Gross amount due from borrower (line 120) 194,208.75	601. Gross amount due to seller (line 420) 15,000.00
302. Less amounts paid by/for borrower (line 220) 192,500.00	602. Less reduction amount due seller (line 520) 594.00
303. CASH FROM BORROWER 1,708.75	603. CASH TO SELLER 14,406.00

SUBSTITUTE FORM 1099 SELLER STATEMENT: The information contained herein is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction will be imposed on you if this item is required to be reported and the IRS determines that it has not been reported. The Contract Sales Price described on line 401 above constitutes the Gross Proceeds of this transaction.

SELLER'S INSTRUCTIONS: If this real estate was your principal residence, file Form 2119, Sale or Exchange of Principal Residence, for any gain, with your income tax return; for other transactions, complete the applicable parts of Form 4797, Form 6252 and/or Schedule D (Form 1040).

You are required by law to provide NORTH CENTRAL FLORIDA TITLE, LLC PH 386-752-1502 FAX 386-752-5746 with your correct taxpayer identification number. If you do not provide your correct taxpayer identification number, you may be subject to civil or criminal penalties imposed by law, and Under penalties of perjury, I certify that the number shown on this statement is my correct taxpayer identification number.

TIN: SELLER 1 / SELLER 2 SELLER(S) SIGNATURE(S): SELLER 1 / SELLER 2

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
SETTLEMENT STATEMENT

File Number: 12Y-11013

FINAL PAGE 2

TitleExpress Settlement System Printed 12/06/2012 at 15:12 PHL

L. SETTLEMENT CHARGES		PAID FROM BORROWER'S FUNDS AT SETTLEMENT	PAID FROM SELLER'S FUNDS AT SETTLEMENT
700. TOTAL SALES/BROKER'S COMMISSION based on price \$15,000.00 @ 0.000 =			
Division of commission (line 700) as follows:			
701. \$	to		
702. \$	to		
703. Commission paid at Settlement			
800. ITEMS PAYABLE IN CONNECTION WITH LOAN			
801. Loan Origination Fee	%		
802. Loan Discount	%		
803. Appraisal Fee			
804. Credit Report			
805. Lender's Inspection Fee			
806. Mortgage Application Fee			
807. Assumption Fee			
808.			
809.			
810.			
811.			
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE			
901. Interest From	to @ \$ /day		
902. Mortgage Insurance Premium for	to		
903. Hazard Insurance Premium for	to		
904.			
905.			
1000. RESERVES DEPOSITED WITH LENDER FOR			
1001. Hazard Insurance	mo. @ \$ /mo		
1002. Mortgage Insurance	mo. @ \$ /mo		
1003. City Property Taxes	mo. @ \$ /mo		
1004. County Property Taxes	mo. @ \$ /mo		
1005. Annual Assessments	mo. @ \$ /mo		
1009. Aggregate Analysis Adjustment			
1100. TITLE CHARGES			
1101. Settlement or closing fee	to NORTH CENTRAL FLORIDA TITLE, LLC		200.00
1102. Abstract or title search	to WESTCOR LAND TITLE INSURANCE COMPANY		125.00
1103.			
1104.			
1105. Escrow/Whs/Copies Handling Fee	to NORTH CENTRAL FLORIDA TITLE, LLC		
1106. Courier/Email/Wire Handling	to NORTH CENTRAL FLORIDA TITLE, LLC		
1107. Attorney's fees			
(includes above items No:)		
1108. Title Insurance			100.00
(includes above items No:)		
1109. Lender's Policy			
1110. Owner's Policy	15,000.00 - 100.00		
1111.			
1112.			
1113.			
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES			
1201. Recording Fees Deed \$ 18.50 ; Mortgage \$ 69.50 ; Release \$		88.00	
1202. City/County tax/stamps Deed \$; Mortgage \$ 385.00		385.00	
1203. State Tax/stamps Deed \$ 105.00 ; Mortgage \$ 673.75		673.75	105.00
1204. RECORD AFFIDAVIT	to CLERK OF COURT		10.00
1205. Release Handling Fee	to NORTH CENTRAL FLORIDA TITLE, LLC-RELEASES		18.50
1300. ADDITIONAL SETTLEMENT CHARGES			
1301. Survey			
1302. Pest Inspection			
1303. Closed File Image and Storage	to Frado, LLC	35.00	
1304. RECORD CORRECTIVE EASEMENT	CLERK OF COURT		35.50
1305.			
1306.			
1307.			
1308.			
1400. TOTAL SETTLEMENT CHARGES (enter on lines 103, Section J and 502, Section K)		1,181.75	594.00

I/we carefully reviewed the HUD-1 Settlement Statement and to the best of my knowledge and belief, it is a true and accurate statement of the receipts and disbursements made on my account in this transaction. I further certify that I have received a copy of the HUD-1 Settlement Statement and have given my permission for the closing proceeds to be deposited in Title Offices, LLC's Interest Bearing Escrow Account.

PAULA L. GORMAN

RICHARD A. GORMAN

LOVELESS DEVELOPMENT CO

The HUD-1 Settlement Statement which I have prepared is a true and accurate account of this transaction. I have caused or will cause funds to be disbursed in accordance with this statement.

Settlement Agent

12/08/2012

WARNING: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction.