Winchester (34)

T. S. Debby ☑ SFHA form Given

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BHK 14 DEC 2012 Building Official T.C. 12-12-12

AP# 1212-13 Date Received 12-7-12 By LH Permit # 30682

Flood Zone A Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments ∅ bottom of finished floor 2 feet above graded road

FEMA Map# 0195C Elevation N/A Finished Floor ∅ River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 12-0536-E ☐ EH Release ☐ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Installer Authorization on file ☑ State Road Access ☑ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☑ F W Comp. letter ☑ VF Form ☑ Mechanical

IMPACT FEES: EMS Fire Corr ☑ Out County ☑ In County

Road/Code School = TOTAL Impact Fees Suspended March 2009

Property ID # 01-3S-16-01910-034 Subdivision Carter Acres S/D Lot 2 & 3

- New Mobile Home ✓ Used Mobile Home MH Size 28x52 Year 2013
- Applicant Bo Royals Phone # 754-6737
- Address 4068 US Hwy 90 Lake City FL 32055
- Name of Property Owner Patrick Winchester Phone# 623-6701
- 911 Address 290 NW Dicks St. Lake City, FL. 32055
- Circle the correct power company - (FL Power & Light) - Clay Electric
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Patrick Winchester Phone # 623-6701
  Address 290 NW Dick St. Lake City, FL. 32055
- Relationship to Property Owner
- Current Number of Dwellings on Property ∅ Replacement
- Lot Size 2 & 3 Carter Acres S/D Total Acreage 6.85
- Do you : Have (Existing Drive) (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home (Yes)
- Driving Directions to the Property 41 North Turn Rt. onto Falling Creek Rd. Turn left on Dicks Rd. 1st property on left.
- Name of Licensed Dealer/Installer Manuel Brannan Phone # 386-590-3289
- Installers Address 5107 CR 252 Wellborn Fla. 32094
  - License Number 1025396 Installation Decal # 12998

spoke to BO on 12-14-12

SFHA FLOOD DISCLOSURE STATEMENT

The undersigned, Patrick Winchester, (herein "Owner"), whose mailing address is 200 NW Dicks ST Lake City FL 32055 hereby executes this Agreement and Release to induce **COLUMBIA COUNTY, FLORIDA**, to issue a building or other development permit to Owner's property described as follows:

Inst:201212019129 Date:12/28/2012 Time:1:04 PM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1247 P:61

Tax Parcel No.: 01-3S-16-01910-034

Owner has made application to **COLUMBIA COUNTY, FLORIDA** for a building permit for the property affected by Tropical Storm Debby which is located in a Special Flood Hazard Area according to the 2009 FEMA Flood Insurance Maps and does not meet the requirements of Substantial Damage as defined by the 2010 Florida Building Code and Columbia County Land Development Regulations for the rebuild, repair or remodel of an existing dwelling. Should the rebuild, repair or remodel of the dwelling exceed 50 percent of the market value of the dwelling, thus meeting the definition of Substantial Damage, then the dwelling shall be required to be brought up to all current applicable codes of the 2010 Florida Building Code and Columbia County Land Development Regulations.

Owner is aware that the property is located in a Special Flood Hazard Area as designated by the 2009 FEMA Flood Insurance Rate Maps, the property has flooded in the past and may be subject to flooding in the future. Owner has been advised to review all available flood data including 2012 aerial photographs or other available flood maps in making the decision or proceed with the building permit. Owner is aware that such natural flooding may occur in the future.

COLUMBIA COUNTY, FLORIDA is issuing a building permit at Owner's request, but makes no representations to Owner whether the property will or will not be subject to future flooding conditions resulting in damages to Owner's dwelling or other improvements on the property. Owner will recorded this Flood Disclosure Statement in the public records of Columbia County, Florida

Owner acknowledges having read and received a copy of this Flood Disclosure Statement this 10th day of December, 2012.

Signed, sealed and delivered in the presence of:

Witness

William E. Royals I

Print or type name

Witness

William E. Royals Sr.

Print or type name

Owner

Co-Owner

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before ~~me this~~ 10th day of December, 2012 by Patrick Winchester who is/are personally known to me or who has/have produced _____ as identification.

WILLIAM P. CREWS
Notary Public - State of Florida
My Comm. Expires Aug 21, 2015
Commission # EE 123888
Bonded Through National Notary Assn.

Notary Public, State of Florida

My Commission Expires: 8-21-15

Columbia County Property Appraiser

CAMA updated: 10/15/2012

2012 Tax Year

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print

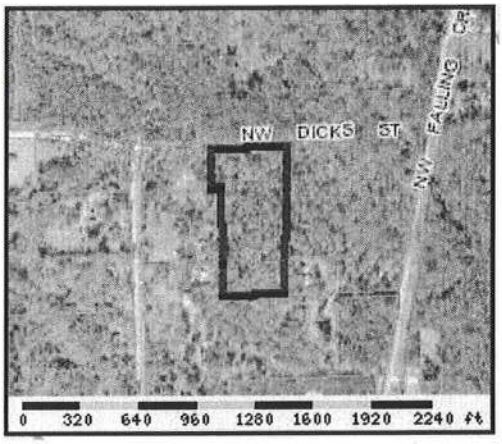
Parcel: 01-3S-16-01910-034

<< Next Lower Parcel | Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	WINCHESTER PATRICK L		
Mailing Address	290 NW DICKS ST LAKE CITY, FL 32055		
Site Address	290 NW DICKS ST		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	**Neighborhood**	1316
Land Area	6.850 ACRES	**Market Area**	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOTS 2 & 3 UNIT 2 CARTER ACRES S/D. ORB 461-685, 694-681 1000-2770,WD 1002-33,QC 1193- 942.			



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	$16,409.00
Ag Land Value	cnt: (3)	$0.00
Building Value	cnt: (1)	$25,131.00
XFOB Value	cnt: (1)	$200.00
Total Appraised Value		$41,740.00
Just Value		$41,740.00
Class Value		$0.00
Assessed Value		$41,740.00
Exempt Value	(code: HX H3)	$25,000.00
Total Taxable Value		Cnty: $16,740 Other: $16,740 | Schl: $16,740

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
8/3/2009	1193/942	QC	I	U	11	$100.00
12/11/2003	1002/33	WD	I	Q		$41,000.00
11/14/2003	1000/2770	WD	V	Q		$20,000.00
8/22/1989	694/681	WD	V	U		$27,500.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SFR MANUF (000200)	1997	(31)	1248	1248	$24,022.00
	Note: All S.F. calculations are based on exterior building dimensions.					

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0080	DECKING	2009	$200.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

COLUMBIA COUNTY PERMIT WORKSHEET

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil _____ without testing.

x 1.5 x 1.5 x 1.5

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 1.5 x 1.5 x 1.5

TORQUE PROBE TEST

The results of the torque probe test is 285 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.

MB Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Manuel Brannan

Date Tested 11-26-12

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 15E

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. _____

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

Site Preparation

Debris and organic material removed _____.

Water drainage: Natural _____ Swale _____ Pad ___/___ Other _____.

Fastening multi wide units

Floor:	Type Fastener:	lags	Length:	6"	Spacing:	18"
Walls:	Type Fastener:	screws	Length:	4"	Spacing:	24"
Roof:	Type Fastener:	lags	Length:	6"	Spacing:	24"

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 MB

Type gasket Foam

Pg. _____

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

Installer Signature Manuel Brannan **Date** 11-26-12

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Manuel Brannan License # 1025396

911 Address where home is being installed 200 NW Dicks St. Lake City, FL. 32055

Manufacturer Clayton Length x width 28 x 52

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 MB

New Home ☑ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☑

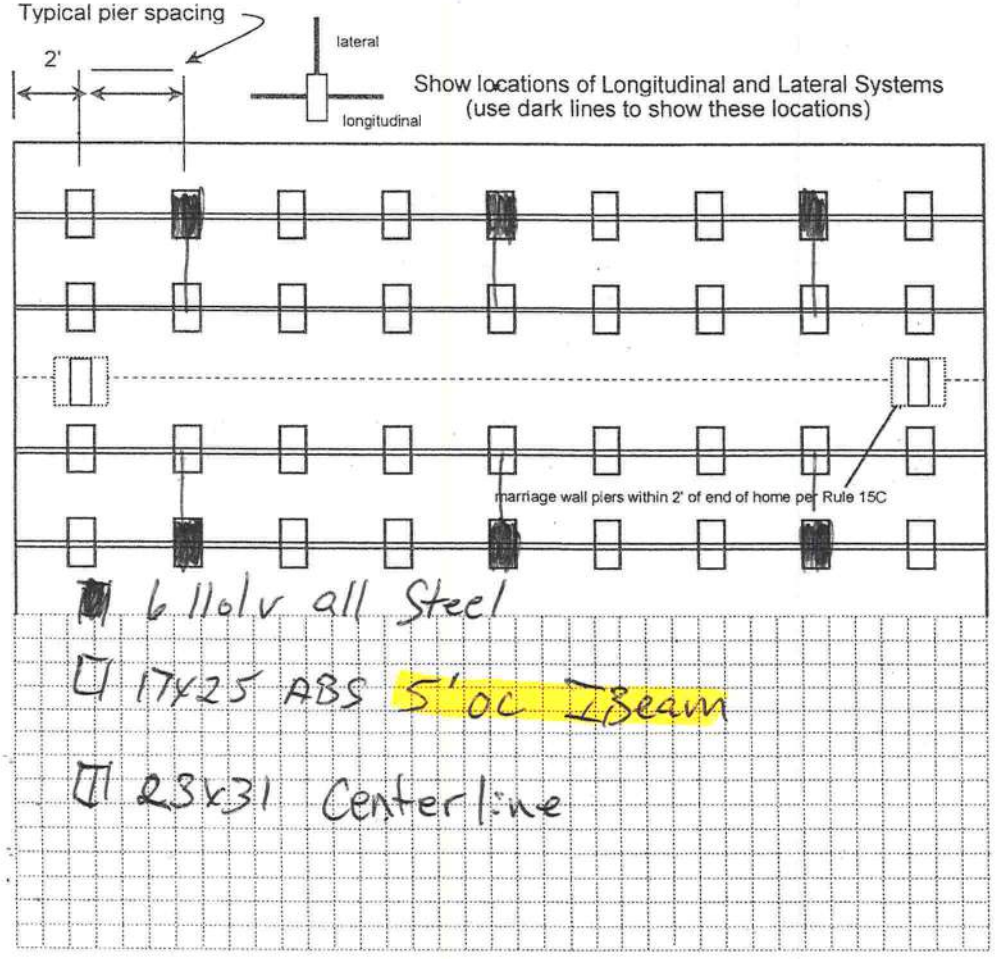
Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

Double wide ☑ Installation Decal # 12998

Triple/Quad ☐ Serial # WHC019677GAAB

Typical pier spacing



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.) 23x31

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
15'	23x31

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 ✓ 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer OT

OTHER TIES

	Number
Sidewall	20
Longitudinal	6
Marriage wall	4
Shearwall	

GENERAL NOTES:

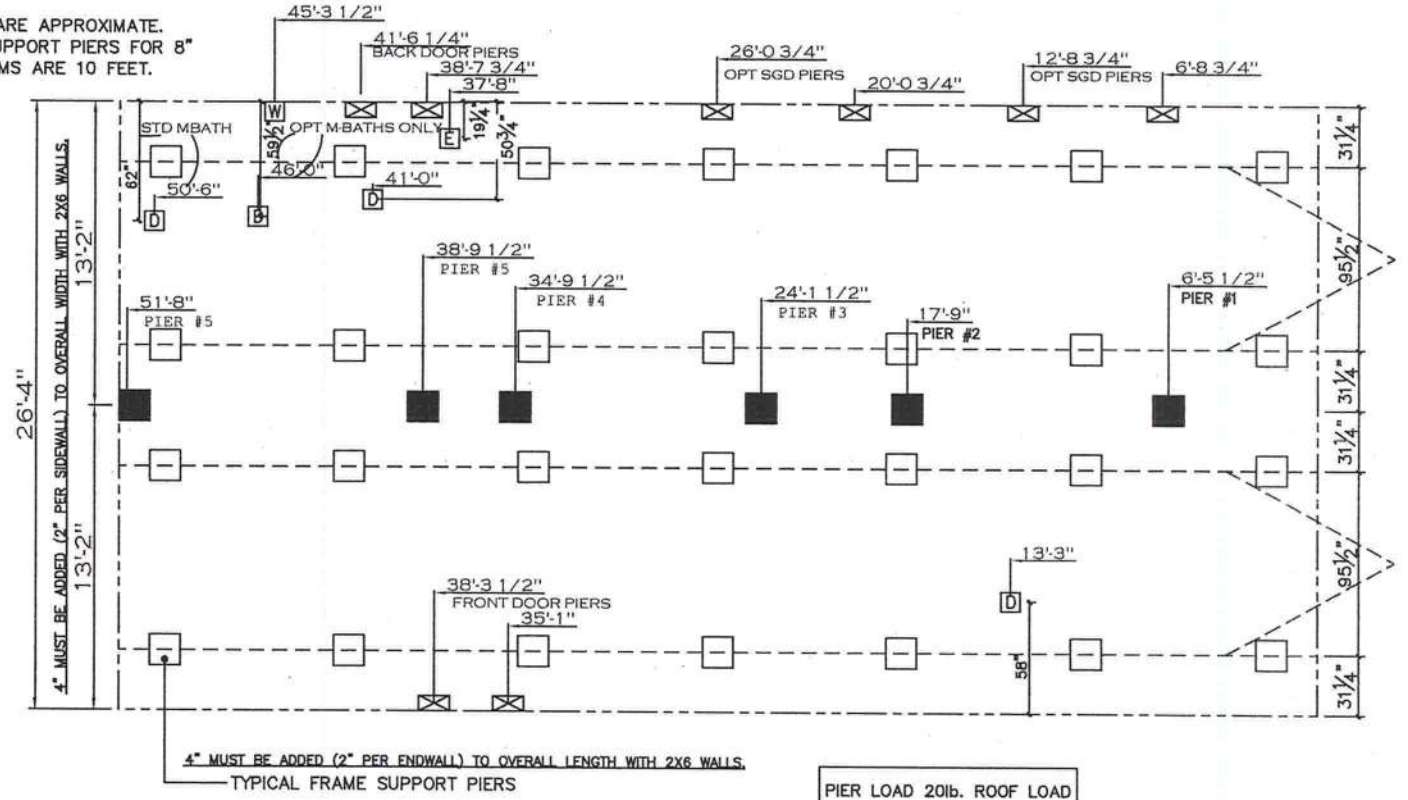
1. PIER LOADS SHOWN ARE TO BE USED TO SIZE THE FOOTINGS BELOW THE MARRIAGEWALL FOR COLUMN SUPPORT PIERS. REFER TO TABLES 6b AND 6c IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT DO NOT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 7b AND 7c IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS THAT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS.
2. REFER TO TABLE 9 FOR PIER CONFIGURATION AND MAXIMUM ALLOWABLE HEIGHTS. CROSS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 18, 19, AND 20).
3. FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY. CONTACT THE MFG PLANT FOR SPECIFICATIONS OF OPTIONS ORDERED.
4. SERVICE DROP LOCATIONS IDENTIFIED ARE APPROXIMATE.
5. THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 8" I-BEAMS IS 8 FEET, 10" & 12" I-BEAMS ARE 10 FEET.

20 lb ROOF LOAD SIDEWALL OPENING PIER LOAD 28' BOX WIDTH	SIDEWALL OPENING (FT) REQUIRED PIER LOAD (LBS)					
	3	4	5	6	8	10
	1175	1330	1485	1640	1950	2260

*FOR 30 lb & 40 lb ROOF LOAD REFER TO TABLES 7b & 7c IN THE INSTALLATION MANUAL.

PIER LEGEND

- □ = SUPPORT UNDER MATING OPENING
- ■ = SUPPORT AT MATING COLUMN
- ▨ = SUPPORT UNDER MATING WALL
- ■ = PIER PORCH/RECESSED ENTRY
- □ = PIER MAIN BEAM
- ▭ = PIER PERIMETER
- ● = TIE-DOWN SUPPORT (QTY PER TBL M, SEE DETAIL D-6 IN FOUND. PKG.)



4" MUST BE ADDED (2" PER ENDWALL) TO OVERALL LENGTH WITH 2X6 WALLS.
TYPICAL FRAME SUPPORT PIERS

PIER LOAD 20lb. ROOF LOAD	
COLUMN PIER #	COLUMN LOAD (lbs)
PIER # 1	1,515
PIER #2	1,515
PIER # 3	2,507
PIER # 4	2,507
PIER # 5	1,672
PIER # 6	1,672

SERVICE DROP LEGEND

- [E] = ELECTRICAL DROP
- [W] = WATER INLET
- [D] = DWV PLUMBING DROP
- [G] = GAS INLET

1,369 SQ.FT. (STD PLAN "CONDITIONED")
N/A SQ.FT. (W/OPT. PORCH/RECESS "CONDITIONED")

CMH MANUFACTURING	Model #: 5CL28523A	Drawing #: 30M117
	Date: 5.31.11 Scale: N.T.S.	
Product Designer: Alex Whaley	28'x52' Solution	
PEIR LOADS		

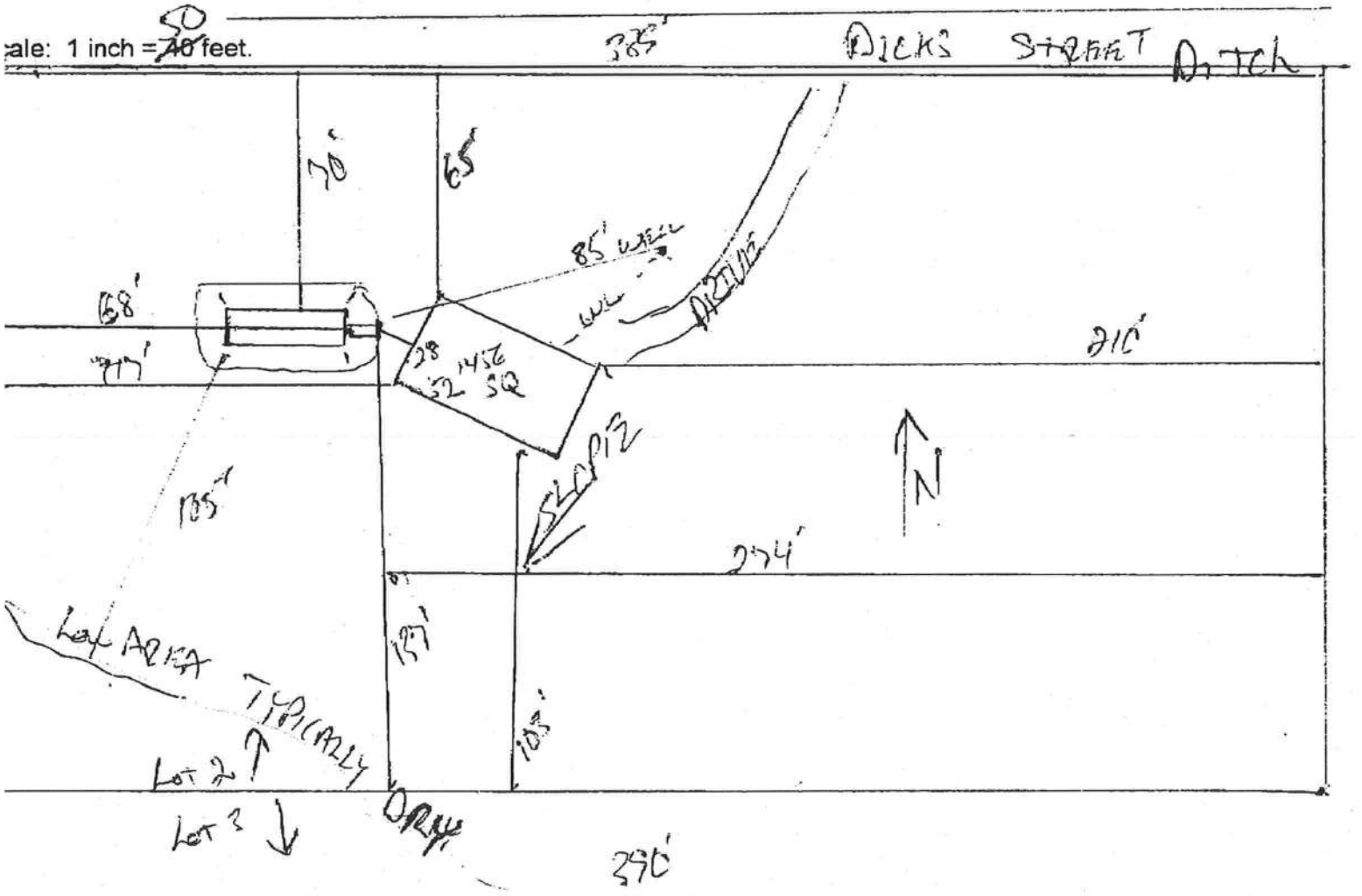
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number_____

CHICHESTER

PART II - SITEPLAN

Scale: 1 inch = ~~40~~ 50 feet.



Notes: ALL IMPROVEMENTS ON LOT 2

Site Plan submitted by: Rocky D Fo MASTER CONTRACTOR

Plan Approved_____ Not Approved_____ Date_____

_____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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 1338	Print Name Michael Reader License #: EC13002315	Signature _____ Phone #: 850-973-0111
MECHANICAL/ A/C _____	Print Name _____ License #:	Signature _____ Phone #.
PLUMBING/ GAS	Print Name Manuel Brenner License #: 1025396	Signature _____ Phone # 590-3215

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.

WINCHESTER - Col Co

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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 _____ Signature _____ License #: Phone #:	
MECHANICAL/ A/C	Print Name Timothy D Shatto Signature Tim Shatto License #: CAC057875 Phone #: 386-496-8224	
PLUMBING/ GAS	Print Name Manuel Branan Signature Manuel Branan License #: 1025396 Phone #: 590-3285	

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.

Contractor Owner Subcontractor form 1/11

TOTAL P.01

Royals Homes

ROYALS MOBILE HOME SALES
386/754-6737 FAX 386/758-7764
PROPERTY LOCATOR

Customer Patrick Manchester

Telephone (____) _____ Cell # (386) 623-6701

Work # (____) _____ Email _____

Make Clayton Model Magnolia Serial# WHCO 19677 GAAB

DOD _____ Size 28 x 52

Physical Address 200 NW Dicks ST. Lake City, FL. 32055

Mailing Address _____

Directions:

Hwy 90 East, Turn Left on Hwy 41. Go apx 4 miles
After I-10, Take 1st right (Falling Creek Rd).
Go apx 1 mile Past Park, Turn Left on Dicks Rd.
1ST Property on Left

Royals Mobile Home Sales & Service, Inc.

4068 West U.S. Highway 90
LAKE CITY, FLORIDA 32055
(386) 754-6737 • Fax: (386) 758-7764

CLEAR FORM

BUYER(S) Patrick Leon Winchester	PHONE (386) 623-6701	DATE	
ADDRESS 290 NW Dicks Street Lake City, FL 32055	SALESPERSON Catherine Marks		
DELIVERY ADDRESS 290 NW Dicks Street Lake City, FL 32055			

MAKE & MODEL	YEAR	BEDROOMS	FLOOR SIZE	HITCH SIZE	STOCK NUMBER
Clayton 30SCX28523AH12	2013	3	L 52 W 28	L 56 W 28	

SERIAL NUMBER		COLOR	PROPOSED DELIVERY DATE	KEY NUMBERS
WHC019677GAAB	☑ NEW ☐ USED			

DATE OF BIRTH		DRIVER'S LICENSE	
BUYER	03/05/63	BUYER	W522-672-63-085-0
CO-BUYER		CO-BUYER	

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
CEILING	28	7.93	Fiberglass
EXTERIOR	11	3.50	Fiberglass
FLOORS	22	7.00	Fiberglass

THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CRF, SECTION 460.16.

Delivery & Setup standard 3 blocks high. (1 pad and 2 solid blocks). Anything over standard is customer's responsibility.
Unfurnished XXXXXXXXXXX Furnished _____
Water & Sewer is run under home.
Customer responsible for any gas, electrical, water & sewer hook-up.
Wheels and axles deleted from sale price of home.
Customer responsible for permits.
Homeowner's manual located in Manufactured Home.

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES	$
Two Sets of Code Steps	
Standard White Skirting	
A/C Heat Pump 13 Seer	
Nothing Else Follows	
BALANCE CARRIED TO OPTIONAL EQUIPMENT	$ 0.00

BASE PRICE OF UNIT	$	51,125.00
OPTIONAL EQUIPMENT		0.00
PROCESSING FEE		0.00
SUB-TOTAL	$	51,125.00
PROCESSING FEE/SEPTIC PERMIT/FEE		675.00
SALES TAX		3,067.50
COLUMBIA COUNTY SURTAX		50.00
NON-TAXABLE ITEMS		
VARIOUS FEES AND INSURANCE		450.00
DIRT PAD/ LAND CLEARING		3,100.00
CASH PURCHASE PRICE	$	58,467.50
TRADE-IN ALLOWANCE	$	
LESS BAL. DUE on above	$	
NET ALLOWANCE	$	0.00
CASH DOWN PAYMENT	$	20,500.00
CASH AS AGREED SEE REMARKS	$	
LESS TOTAL CREDITS	$	20,500.00
SUB-TOTAL	$	37,967.50
Unpaid Balance of Cash Sale Price	$	37,967.50

REMARKS:
CUSTOMER IS RESPONSIBLE FOR ALLOWANCE OVERAGES.
DOWN PAYMENT NON-REFUNDABLE ONCE HOME IS ORDERED.

SIGN

Liquidated Damages are agreed to be $ _____ or 10% of the cash price, whichever is greater.
REFER TO PARAGRAPH #6 ON THE REVERSE SIDE OF THIS AGREEMENT.

DESCRIPTION OF TRADE-IN	MAKE	MODEL	YEAR

COLOR	BEDROOMS	SIZE X	TITLE NO.	SERIAL NO.

AMOUNT OWING $ _____ TO WHOM _____ ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY ☐ DEALER ☐ BUYER

Buyer is purchasing the above described manufactured home, the optional equipment and accessories, the insurance has been voluntary; the Buyer's trade-in is free from all claims whatsoever, except as noted.

THE REVERSE SIDE of this agreement contains **ADDITIONAL TERMS AND CONDITIONS**, including, but not limited to, provisions regarding **WARRANTY, EXCLUSIONS AND LIMITATION OF DAMAGES.**

Dealer and Buyer acknowledge and certify that such additional terms and conditions printed on the other side of this agreement are agreed to as part of this agreement, the same as if printed above the signatures.

The agreement contains the entire agreement between the Dealer and Buyer and no other representation or inducement, verbal or written, has been made which is not contained in this agreement. Buyer(s) acknowledge receipt of a copy of this agreement and that Buyer(s) have read and understand the back of this agreement.

Royals Mobile Home Sales & Service, Inc. DEALER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent

By _____

SIGNED X _____ BUYER
SOCIAL SECURITY NO. 229 / 15 / 6864

SIGNED X _____ BUYER
SOCIAL SECURITY NO. _____ / _____ / _____

FEMA

W. Craig Fugate
Administrator
Federal Emergency Management Agency

Richard L. Scott
Governor
State of Florida

National Processing Service Center
P.O. Box 10055
Hyattsville, MD 20782-8055
1-800-621-FEMA(3362)
Fax No.: 1-800-827-8112

Date: 07/05/2012

FEMA Application No: 393795313

Disaster No: 4068

Mr Patrick L Winchester
290 Nw Dicks St
Lake City, FL 32055

Dear Mr Patrick L Winchester:

Enclosed for your records is a copy of the Application for Disaster Assistance that you recently filed with the Federal Emergency Management Agency (FEMA), the agency that coordinates disaster assistance on behalf of the President.

Based on the information you provided during the registration interview, FEMA has identified certain disaster assistance programs that may be helpful to you. These are listed at the bottom of the Application form, item number 25. Administered by a variety of organizations, information on these and other programs can be found on the Additional Disaster Assistance Program Information Sheet, included in this mailing. You must contact these agencies directly to learn how their programs can help you.

If your home or business has been damaged by the disaster, you do not need to wait until the inspector visits the property before starting to clean up. We strongly suggest, however, that you make a list of your losses, take pictures, and keep all receipts to verify your disaster-related expenses.

Correct information
Please check the information on this form and call the FEMA Disaster Helpline at 1-800-621-FEMA(3362) (hearing/speech impaired ONLY call 1-800-462-7585 (TTY)) if you have any corrections. Please also make special note of your Registration ID located at the top of the form; this is your unique identifying number and you will need to refer to this number whenever you contact FEMA.

Disaster Recovery Centers/SBA Disaster Loan Outreach Centers
Disaster Recovery Centers may be opened to provide a central location for information on disaster assistance programs and tips on reducing damage from future disasters. To find out about the Disaster Recovery Center nearest to you, please call the FEMA Disaster Helpline at 1-800-621-FEMA(3362) (hearing/speech impaired ONLY call 1-800-462-7585 (TTY)). To inquire about the status of your application for assistance, you may either visit a Disaster Recovery Center or you may call the FEMA Disaster Helpline.

If you have been referred to the Small Business Administration (SBA) for a disaster loan (check item number 25on your Application for Disaster Assistance), you may wish to visit an SBA Disaster Loan Outreach Center for help in completing the loan application. The SBA Disaster Loan Outreach Center locations will be announced through your local news media.

DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

Application/Registration for Disaster Assistance

Registration ID. 39-3795313 | O.M.B. No. 1660-0002 Exp. August 31, 2013 | DR # 4068

1. Name (Last, First, MI)	2. Language	3. Social Security Number	4. Date of Birth	5. Date of loss	6. Application Date
WINCHESTER PATRICK L	English	XXX-XX-6864	3/5/1963	6/23/2012	7/4/2012

7A. Damaged phone #	7B. Alt Damaged phone #	7C. Current phone #	7D. Alt Contact phone #	7E. Email
(386) 754-3801	(386) 623-6701	(386) 754-3801	(386) 497-4807	patrickjj290@google.com
		NOTE:	NOTE: FRIEND	

8. Address of Damaged Property

Street Address	City	State	Zip+4	County
290 NW DICKS ST	LAKE CITY	FL	32055 - 5794	COLUMBIA

9. Current Mailing address

290 NW DICKS ST	LAKE CITY	FL	32055 - 5794

10. What is your current location? **Family/Friends Dwelling**

11. Do you own or rent your home? **Own**

12. Is the address listed in #8 your primary residence? **Yes (Primary)**

13. Type of residence: **Mobile Home**

14A. Was your home damaged by the disaster? **Yes**

14B. Personal property damaged? **Yes**

14C. Was the access to your home restricted? **Not Restricted**

Utilities Out? **Yes**

Emergency Needs? **No**

Food?

Clothing?

Shelter?

15. Cause of Damages: **Flood**

16. Other Expenses:

17. Disaster related expense? (for uninsured or underinsured)

Medical (including medication): **No** Dental: **No** Funeral: **No**

18. Home/Personal Property Insurance	Company Name
No RP or PP Insurance	

19. Vehicle Damage due to Disaster

20. Special Needs: Did you, your spouse, or any dependents have help or support doing things like walking, seeing, hearing, or taking care of yourself before the disaster and have you lost that help or support because of the disaster?

Mobility:
Cognitive/Developmental Disabilities/Mental Health:
Hearing or Speech:
Vision:
Other:

21. Names of all persons living in home at the time of disaster	Relationship	Social Security Number	Age	Dependent
WINCHESTER, PATRICK L	Registrant	XXX-XXX-6864	49	Yes

22. Business Damages:

Self Employment is primary income? **No**

Own/Represent a business or rental property affected by disaster? **No**

23. Number of claimed dependents: **1** Combined family pre-disaster gross income: **$ 4000000** 24. Electronic Funds Transfer: **Yes**

25. You have been referred to the following sources for Disaster Aid.
Housing Assistance (Owner); SBA Home & Personal Property (Owner); Other Other; SBA Workshop; Tax Assistance

If you have any questions or feel our information is incorrect, please call the Disaster Helpline at 1-800-621-FEMA, or for the speech or hearing impaired only, call 1-800-462-7585

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 12/7/2012 **DATE ISSUED:** 12/13/2012

ENHANCED 9-1-1 ADDRESS:

290 NW DICKS ST

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

01-3S-16-01910-034

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR REPLACEMENT STRUCTURE.

Address Issued By: SIGNED:/ RONAL N. CROFT

Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

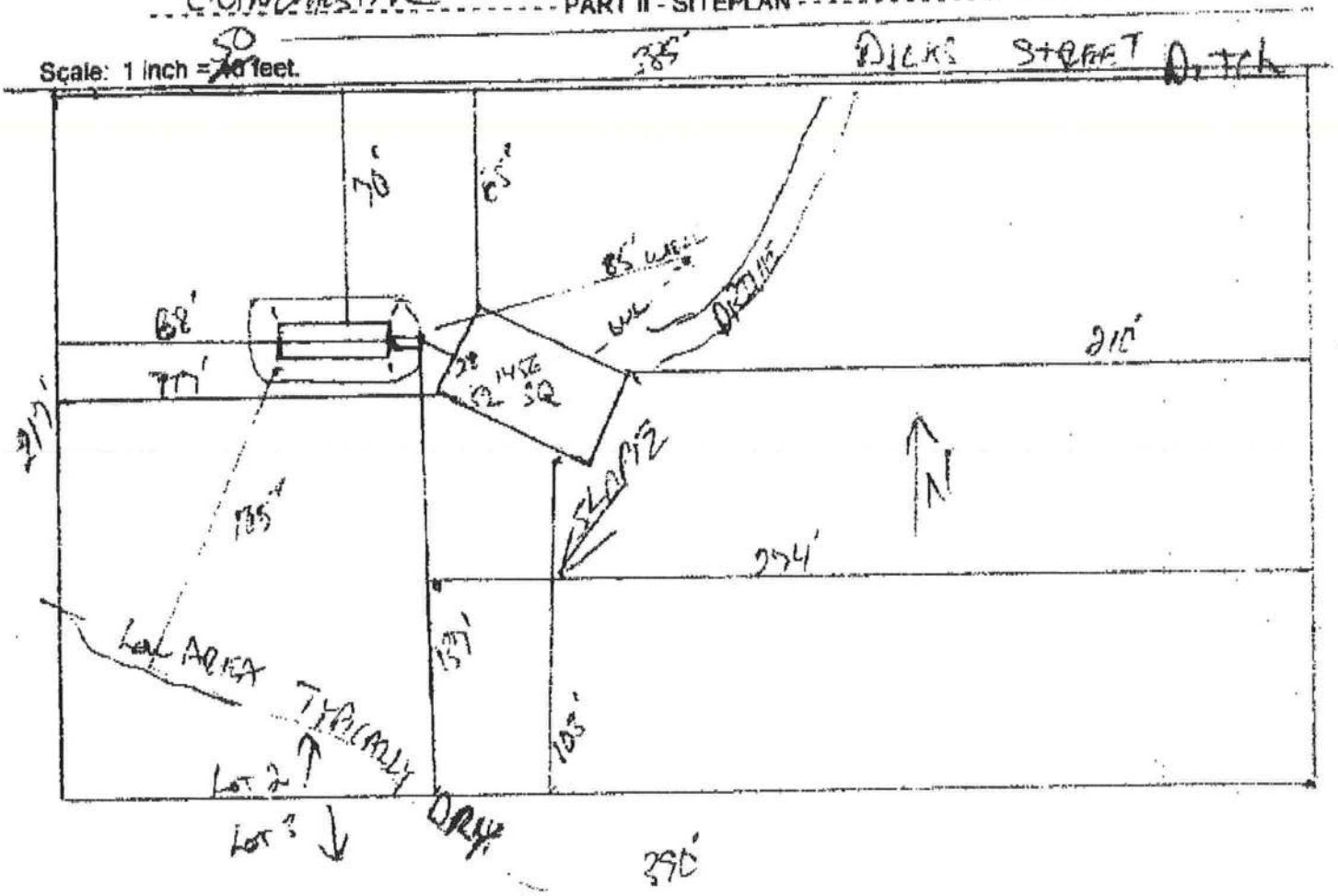
2422

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 12-0536E

CHICHESTER ---------- PART II - SITEPLAN ----------

Scale: 1 inch = ~~40~~ 50 feet.



Notes: ALL IMPROVEMENTS ON LOT 2

Site Plan submitted by: Rocky D Taylor MASTER CONTRACTOR

Plan Approved X Not Approved ____ Date 12/19/12

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CERTIFICATE OF

M/H OCCUPANCY

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 01-3S-16-01910-034 **Building permit No.** 000030682

Permit Holder MANUEL BRANNON

Owner of Building PATRICK WINCHESTER

Location: 290 NW DICKS ST, LAKE CITY, FL 32055

Date: 01/25/2013

Joey Green

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)