Parcel:

04-48-16-02772-214

Owner & Property Info

PAMES + MARGIR Eighmy DEED ATTACHED ROSBURY DAVID R & CATHERINE M

128 NW MARCEL PL Owner

LAKE CITY, FL 32055

Site

Description* LOT 14 TIFFANY OAKS S/D. 907-413, 932-296, AG 1338-1792 QC 1386-1524,1525, WD 1405-515

Area 0 AC Use Code** VACANT (000000) S/T/R 04-4S-16E

Tax District 2

Inst: 202112001226 Date: 01/25/2021 Time: 3:29PM Page 1 of 1 B: 1428 P: 2004, Jan nes M Swisher Jr, Clerk of bia, County, By: BR Deputy ClerkDoc Stamp-Deed: 0.70

WARRANTY DEED

This Warranty Deed, made the 25th day of January,2021 by DAVID R. ROSBURY and CATHERINE M. ROSBURY hereinafter called the grantor, to JAMES C. EIGHMY and MARGIE EIGHMY, his wife whose post office address is 339 SW Riddle Lane, Lake City, Florida, 32024, 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 corporations, wherever the context so admits or requires.)

Witnesseth, That the Grantor, for and in the consideration of ten dollars and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants bargains, sells aliens, remises, releases and conveys and confirms unto the Grantee all that certain land situate in Columbia County, State of Florida, viz:

LOT 14, "TIFFANY OAKS", a Subdivision , as recorded in Plat Book 7, page 13 of the public records of Columbia County State of Florida.

TOGETHER WITH that certain year: 1996, make: Skyline Mobile Home, VIN # 496110771.

SUBJECT to :reservations, restrictions, and easements of record; local building and zoning regulations; and taxes for 2020 and subsequent years

N.B. In addition to drainage easements indicated on the Plat of "Tiffany Oaks", an easement for drainage and utilities is reserved over a 15 foot wide strip adjacent to any roadway and over a 7 1/2 foot wide Strip along all other lot lines.

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

To Have and to Hold, the same in fee simple forever.

And, the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of the 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.

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

Signed, sealed and delivered in the presence of:

Printed

Printed Name

STATE OF FLORIDA

COUNTY OF COLUMBIA

I hereby Certify that on this day, before me, an officer duly authorized to Administer oaths and take acknowledgments, personally appeared David R. Rosbury and Catherine M. Rosbury Known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that she executed the same, and an oath was not taken.

Said person is personally known to me. Said person provided the following type of diffication

identification

Witness my hand and official seal in the County and State last aforesaid this _______, 2021.

Catherine M. Rosbury

Notary Signature

Printed Notary Signature

Prepared by: Terry M. Kelly, President Kelly Companies of Lake City, Inc. P.O. Box 1116, Lake City, Fl., 32056-1116

GEORGE MORSE otary Public - State of Florida on # GG 110914 My Comm. Expires Sep 27, 2021

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM	MBER	CONTRACTOR Rusty Knowles	PHONE 386-397-0886		
	THIS FORM M	UST BE SUBMITTED PRIOR TO THE ISSUANCE OF	A PERMIT		
	James & Margie Eighmy				
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>KEQUIKED</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.					
ELECTRICAL	Print NameJames Eigh	my Signature Fo	no asky		
	License #: Owner	Phone #: 38	36-292-4456		
	, , , , , , , , , , , , , , , , , , , ,	Qualifier Form Attached			
MECHANICAL/	Print Name Ronald Bo	nds Sr. Signature	AL O		
A/C	License #:CAC 18176	658 Phone #: 8	00-259-3470		

Qualifier Forms cannot be submitted for any Specialty License.

A/C ____ License #: ___CAC 1817658

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

Qualifier Form Attached

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

Revised 10/30/2015



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

LICENSED QUALIFIER AUTHORIZATION

1. KONAld & Word SE	(license holder name). licensed qualifier
for STIPE CARST ENTERPRISE	Tin L (company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or through officer of the corporation; or, partner as defined	m is/are contracted/hired by me, the license ough an employee leasing arrangement; or, is ar in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DALE BURD	1.
2. Rocky Ford	2. (bel37) 7-1
3. Kally Bishap	3. Kelly Brishof
4.	4.
5.	5.
of at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all previous	ing of the changes and submit a new letter of ious lists. Failure to do so may allow
wind the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and/or line with the persons to use your name and your line with the persons to use your name and your line with the persons to use your name and your line with the persons to use your name and your line with the persons to use your line with the persons the persons to use your line with the persons the persons to use your line with the persons the p	CAC 1817458 2-14-14 License Number Date
NOTARY INFORMATION: STATE OF:COUNTY OF:	Bay
The above license holder, whose name is Roy personally appeared before me and is known by type of I.D.) on I	
Struy Gna ldupkins	
	(Seal/Stamp)



Page 1 of 2		martisgs wall plans within Z of and of hourse par Rules (SC	Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	If home is a trible or quible and Lateral Arm Systems on the sidewall ties exceed 5 %.	Installer: Rush, L. Kwoule License* It-1038219 Address of home Sw Addlis Lang Deing installed Lake Tay F4 32034 Menufacturer Live CAL Length x width 16x56 f3 cx	Mobile Home Permit Worksheet
of 2	Opening Pier pad sizes AR 5t FRAME TIES Within 2' of end of home spaced at 5 4" oc Longitudinal Stabilizing Device (L.SD) Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer (L.sa. 1 Longitudinal Shearwall Shearwal		4 5 6 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	PIER SPACIN PIER SPACIN ORDER 16"×16" 181 1256) 127	Used Home Used Installation Istalled in accordance with Rule 15-C Wind Zone II Used Home Used #	

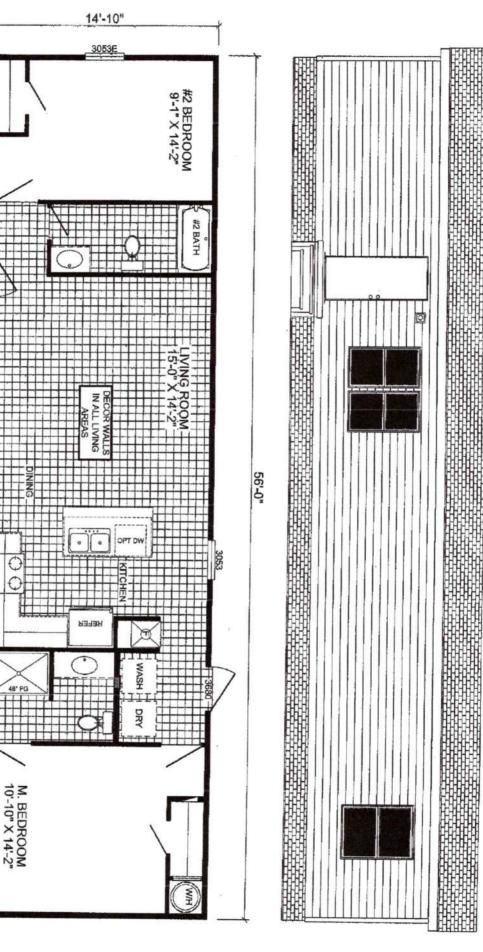
independent water supply systems. Pg. 15 2019 water meter, water tap, or other	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pgp <	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil	Mobile Home Permit Worksheet
Installer Signature & Date 1.26.20	Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2	Debris and organic material formoved Water drainage. Natural Swale Pad Other Water drainage. Natural Swale Pad Other Fastener: Length: Specing: Specing: Type Fastener: Length: Specing: Specing: Type Fastener: Length: Specing: Speci	Application Number:

Live Oak Homes MODEL: V-5562K - 14 X 60 2-BEDROOM / 2-BATH

178, 95% 41% 41% - THIS DRAWANG IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS. FOUNDATION NOTES: SUPPORT PIER/TYP 2 -41'-WS" SHEARWALL Z3 ONLY 100 08/01/20 -17-14 SHEARWALL ZZ & 3 -16:4 DODR T13'-6"

V-5562K

AC MO



V-5562K

4053E

16 X 60 - Approx. 830 Sq. Ft. 2-BEDROOM / 2-BATH

Date: 06/25/20

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

* Live Oak Homes reserves the right to change product offering at any time.

