

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP# _____

Date Received _____

By _____

Permit # _____

Flood Zone _____

Development Permit _____

Zoning _____

Land Use Plan Map Category _____

Comments _____

FEMA Map# _____

Elevation _____

Finished Floor _____

River _____

In Floodway _____

- ☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # _____ ☐ Well letter OR
- ☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid
- ☐ DOT Approval ☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ 911 App
- ☐ Ellisville Water Sys ☐ Assessment _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 12-65-16-03816-410

Subdivision TUSTENULGEE TRACE

Lot# 10

☒ New Mobile Home ☐ Used Mobile Home _____ MH Size 16x76/80 Year 2020

Applicant PAUL BARNEY, AGENT Phone # 386-209-0906

Address 466 SW DEP. J. DAVIS LN, LAKE CITY, FL 32024

Name of Property Owner PERRY, RENEE Phone# 386-466-4408

911 Address TBD S.W. CHOCTAW AVE, FORT WHITE, FL 32038

Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

Name of Owner of Mobile Home PERRY, RENEE Phone # 386-466-4408

Address 6511 BIMINI CT. APOLLO BEACH, FL 33572

Relationship to Property Owner SELF

Current Number of Dwellings on Property 0

Lot Size 650' X 671' Total Acreage 10.03

Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (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

Driving Directions to the Property TUSTENULGEE ROAD FROM LAKE CITY. AFTER CROSSING HEKLONG GO TO JASMINE T/R, GO TO SW CHOCTAW T/R TO SITE ON RIGHT (ORANGE RIBBON ON POWER POLE)

Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-365-6549

Installers Address 353 S.W. MAULDIN AVE LAKE CITY, FL 32024

License Number 1H-1129420 Installation Decal # 71620

Prepared by and Return To:

Kelley Paul
Wollinka Wike Title Insurance Agency, a division of
LandCastle Title Group, LLC
7076 W. Gulf to Lake Highway
Crystal River, FL 34429

Order No.: CR311807024

For Documentary Stamp Tax purposes the
consideration is \$42,500.00

Doc Stamp: \$297.50

APN/Parcel ID(s): 12-6S-16-03818-410

WARRANTY DEED

THIS WARRANTY DEED dated July 24th 2018, by Rena Deopersaud, hereinafter
called the grantor, to Renee Perry, whose post office address is 8424 White Poplar Drive, Riverview, FL
33578, hereinafter called the grantee: *, an unmarried woman

(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)

WITNESSETH: That the grantor, for and in consideration of the sum of Ten And No/100 Dollars (\$10.00)
and other valuable consideration, receipt whereof is hereby acknowledged, hereby grants, bargains, sells,
aliens, remises, releases, conveys, and confirms unto the grantee, all the certain land situated in the
County of Columbia, State of Florida, to wit:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

Subject to easements, restrictions, reservations and limitations of record, if any.

The property being conveyed/mortgaged hereby, is vacant land and, to the best of grantor's knowledge,
has never been improved with a structure that could have been utilized as a residence and/or mobile
home. The property is not now, nor has it ever been, nor was it ever intended to be the homestead of the
grantor, the grantor's spouse, and/or minor children, if any. Nor is it contiguous with or adjacent to such
homestead. The grantor's residence is at the street or post office address designated below.

TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in any wise
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 said land in fee
simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor
hereby fully 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, 2017.

WARRANTY DEED
(continued)

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Signed, Sealed and Delivered in the presence of:

[Signature]
Witness Signature

Gregory J. Davis
Print Name

Alvin Gosine
Witness Signature

ALVIN GOSINE
Print Name

[Signature]
Rena Deopersaud

Address: 16395 NW 19th Street
Pembroke Pines, FL 33028

State of Florida
County of Broward

The foregoing instrument was acknowledged before me this 24 day of July, 2018,
by Rena Deopersaud, to me known to be the person(s) described in or who has/have produced
DRIVER'S LICENSE as identification and who executed the foregoing instrument and he/she/they
acknowledged that he/she/they executed the same.

Witness my hand and official seal in the County and State last aforesaid this 24 day of
July, 2018.

[Signature]
NOTARY PUBLIC
My Commission Expires: 11/15/20

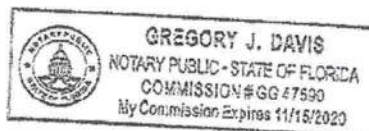


EXHIBIT "A"
Legal Description

TUSTENUGGEE TRACE

LOT 10:

COMMENCE AT THE SOUTHWEST CORNER OF THE SOUTHEAST 1/4 OF SECTION 12, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE NORTH 88°48'28" EAST ALONG THE SOUTH LINE OF SAID SECTION 12, 1310.23 FEET; THENCE NORTH 00°20'48" EAST, 1375.41 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE NORTH 00°20'48" EAST, 671.46 FEET, THENCE SOUTH 89°38'15" EAST, 650.50 FEET; THENCE SOUTH 00°20'48" WEST, 671.46 FEET; THENCE NORTH 89°38'15" WEST, 650.50 FEET TO THE POINT OF BEGINNING. THE WEST 30 FEET OF SAID LANDS BEING SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS.

60-FT. ROAD EASEMENTS IN TUSTENUGGEE TRACE:

A STRIP OF LAND 60 FEET IN WIDTH BEING 30 FEET EACH SIDE OF A CENTERLINE DESCRIBED AS FOLLOWS:

COMMENCE AT THE NORTHWEST CORNER OF THE NORTHEAST 1/4 OF SECTION 12, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA AND RUN THENCE SOUTH 00°03'14" EAST ALONG THE WEST LINE OF THE EAST 1/2 OF SAID SECTION 12, 22.91 FEET TO THE SOUTH LINE OF ICHETUCKNEE ROAD (A COUNTY MAINTAINED GRADED ROAD); THENCE NORTH 89°26'50" EAST ALONG SAID SOUTH LINE OF ICHETUCKNEE ROAD, 561.07 FEET; THENCE NORTH 89°05'20" EAST STILL ALONG SAID SOUTH LINE OF ICHETUCKNEE ROAD, 765.95 FEET TO THE POINT OF BEGINNING; THENCE SOUTH 00°20'48" WEST, 2636.12 FEET TO REFERENCE POINT "C"; THENCE CONTINUE SOUTH 00°20'48" WEST, 1325.34 FEET TO REFERENCE POINT "H"; THENCE CONTINUE SOUTH 00°20'48" WEST, 617.03 FEET TO REFERENCE POINT "J"; THENCE SOUTH 89°38'15" EAST, 1300.53 FEET TO REFERENCE POINT "K"; THENCE CONTINUE SOUTH 89°38'15" EAST, 1300.06 FEET TO REFERENCE POINT "L" AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "C" AND RUN THENCE NORTH 89°38'15" WEST, 664.25 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "H" AND RUN THENCE NORTH 89°38'15" WEST, 659.62 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "J" AND RUN THENCE SOUTH 85°54'49" WEST, 709.68 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "K" AND RUN THENCE NORTH 00°20'48" EAST, 671.46 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION. ALSO BEGIN AT REFERENCE POINT "L" AND RUN THENCE NORTH 00°20'48" EAST, 671.46 FEET TO THE CENTERPOINT OF A CUL-DE-SAC HAVING A RADIUS OF 50 FEET AND THE POINT OF TERMINATION.

ERRY
 20%3

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

AUGUSTINE U-5763E

Installer **DAVID ALBRIGHT** License # **HW 1129420**

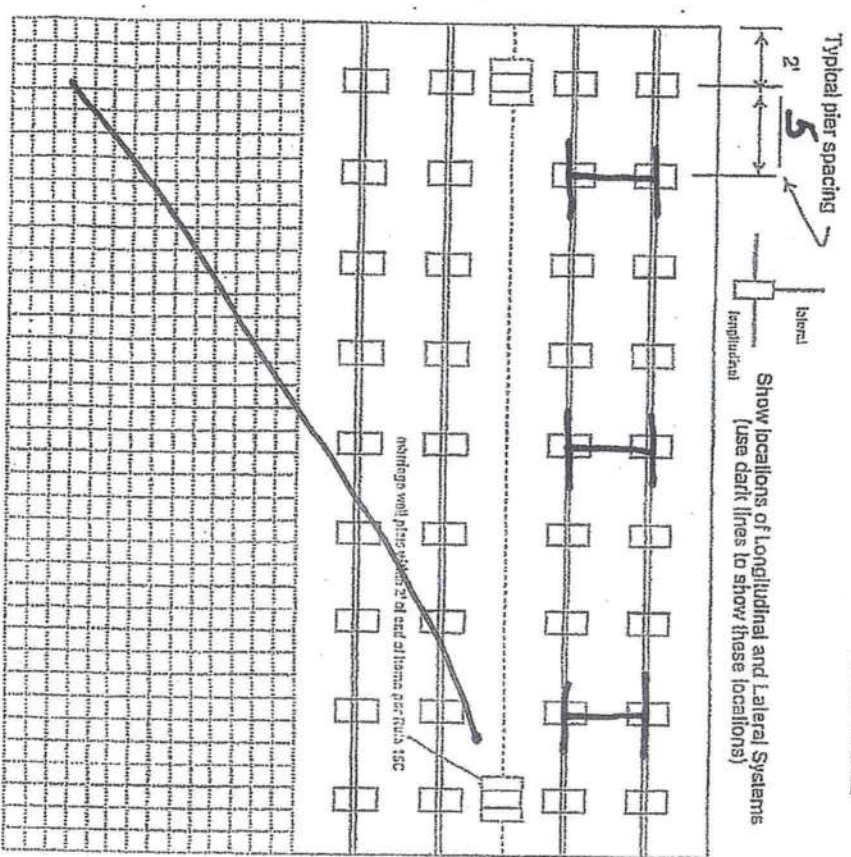
911 Address where home is being installed **TBD 500 CHOCATAW AVE**

Manufacturer **LIVE OAK HOMES** Length x width **16 x 76/80**

NOTE: If home is a single wide fill out one half of the blocking plan. If home is a triple or quad wide stretch 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 *DAV*



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 Detail # **71620**

Triple/Quad ☐ Serial # **LOHGA 12620963**

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	16' x 16' (256)	10 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4'	5'	6'	7'	8'	9'
2000 dsf	5'	6'	7'	8'	9'	10'
2500 dsf	6'	7'	8'	9'	10'	11'
3000 dsf	7'	8'	9'	10'	11'	12'
3500 dsf	8'	9'	10'	11'	12'	13'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size **17 x 25**
 Perimeter pier pad size **16 x 16**
 Other pier pad sizes (required by the mfg.) _____

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.

POPULAR PAD SIZES

Pad Size	Sq Ft
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 26 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

Opening **FACTORY** Pier pad size **DIAGRAM**

OTHER TIES

Longitudinal Stabilizing Device (LSD) **OTI**
 Manufacturer **OTI**
 Longitudinal Stabilizing Device w/ Lateral Arms **OTI**
 Manufacturer **OTI**

Side wall **6**
 Longitudinal **6**
 Marriage wall **6**
 Shearwall **6**

POCKET PENETROMETER TEST

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

x1500 x1500 x1500

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 5 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.

x1500 x1500 x1500

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 57 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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

DAVID ALBRIGHT MOBILE HOME SVC

Date Tested

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 13-17

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 79-80

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 78-110

Site Preparation

Debris and organic material removed X
Water drainage: Natural Swale Pad X Other

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:
For used types a min. 30 gauge, 8" wide, galvanized metal strip will be gaffered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherstripping requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew 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 DA

Type gasket **FACTORY**
Pg. 41 **INSTALLED**

Installed:
Between Floors Yes X
Between Walls Yes X
Bottom of ridgebeam Yes X

Weatherstripping

The bottomboard will be repaired and/or taped. Yes X Pg. 124
Siding on units is installed to manufacturer's specifications. Yes X
Fireplace chimney installed so as not to allow intrusion of rain water. Yes X

Miscellaneous

Sirting to be installed. Yes No N/A
Dryer Vent installed outside of skirting. Yes N/A X
Range downflow vent installed outside of skirting. Yes N/A X
Drain lines supported at 4 foot intervals. Yes X
Electrical crossovers protected. Yes X
Other:

BONDING WIRE

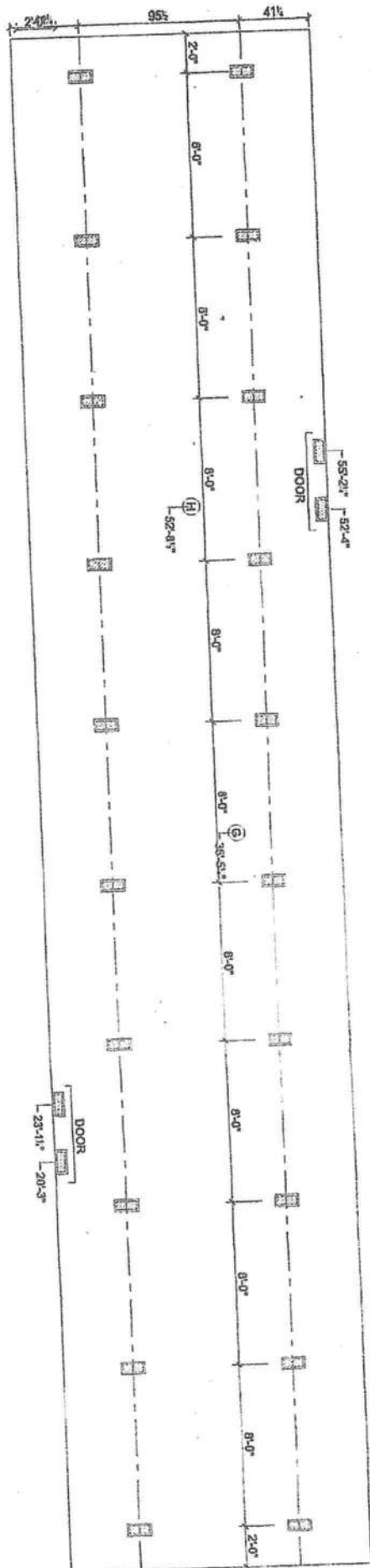
Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

David Albright

Date

Augustine



10/18/2010

SUPPORT PIERTYP

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

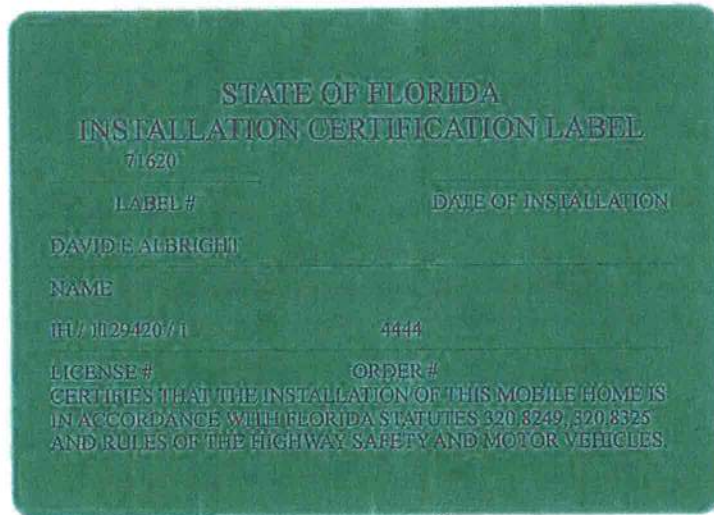
Live Oak Homes
MODEL: U-5763E - 16 X 80
3-BEDROOM / 2-BATH

- (A) MAIN ELECTRICAL
- (B) ELECTRICAL CROSSOVER
- (C) WATER INLET
- (D) WATER CROSSOVER (IF ANY)
- (E) GAS INLET (IF ANY)
- (F) GAS CROSSOVER (IF ANY)
- (G) DUCT CROSSOVER
- (H) SEWER DROPS
- (I) RETURN AIR (WOPT, HEAT PUMP OH DUCT)
- (J) SUPPLY AIR (WOPT, HEAT PUMP OH DUCT)

U-5763E

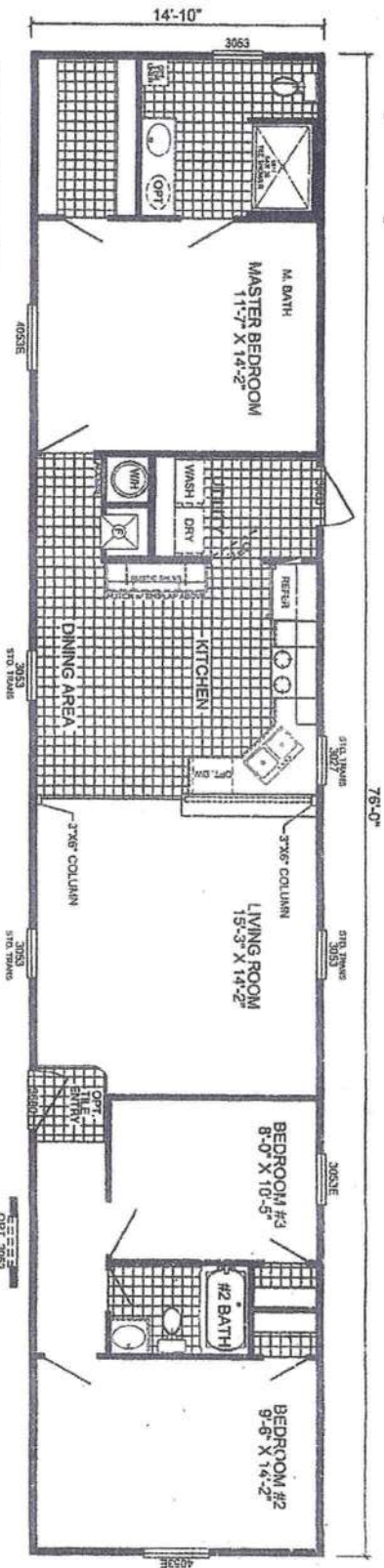
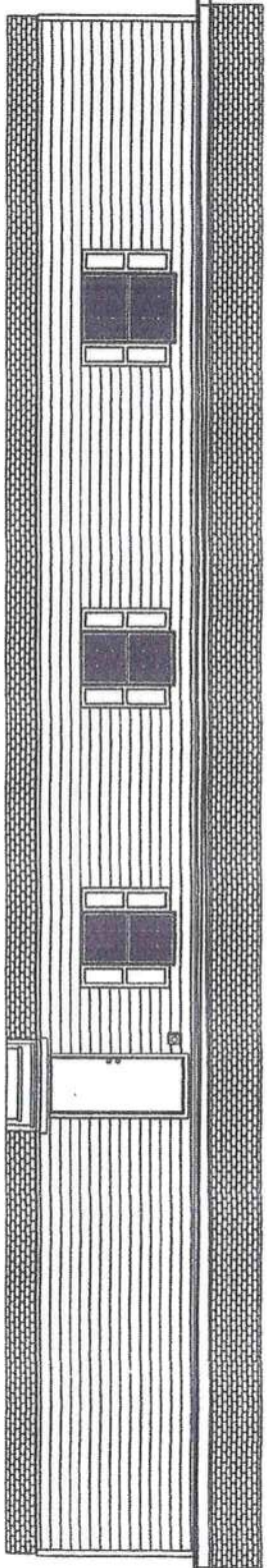
License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 4444	Label #: 71620	Manufacturer: LIVE OAK	(Check Size of Home)
Homeowner: PERRY		Year Model: 2021	Single <input checked="" type="checkbox"/>
Address: SW. CHOCTAW AVE		Length & Width: 80X16	Double <input type="checkbox"/>
City/State/Zip: PORT WHITE FL 32038		Type Longitudinal System: 60TI	Triple <input type="checkbox"/>
Phone #:		Type Lateral Arm System: 60TI	HUD Label #:
Date Installed:		New Home: <input checked="" type="checkbox"/> Used Home: <input type="checkbox"/>	Soil Bearing / PSF:
Installed Wind Zone: II		Data Plate Wind Zone: II	Torque Probe / in-lbs:
Note:			Permit #:

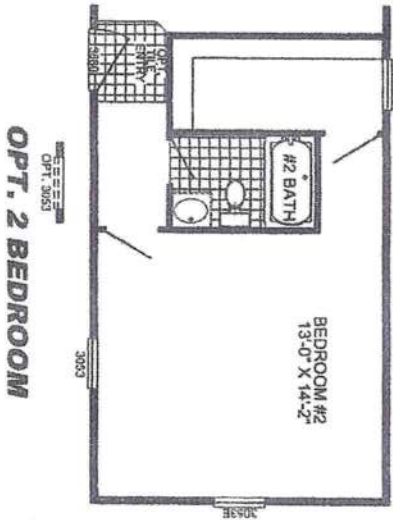


INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.



• WIND ZONE 3 IS NOT AVAILABLE FOR THIS MODEL.





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

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, DAVID ALBRIGHT, give this authority for the job address show below
Installer License Holder Name

only, TBD SW CHORTAW AVE, FORT WHITE, FL, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
PAUL A. BARNEY	<i>Paul A. Barney</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
STEVE SMITH	<i>Steve Smith</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Property Owner
LINDA PENHALIGON	<i>Linda Penhaligon</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

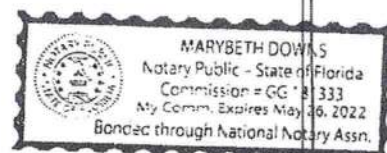
David Albright 1H1129420 7-31-2019
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright, personally appeared before me and is known by me or has produced identification (type of I.D.) Personally known on this 31 day of July, 2019.

Marybeth Downs
NOTARY'S SIGNATURE (Seal/Stamp)





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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, DAVID ALBRIGHT, give this authority and I do certify that the below
Installers Name
referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
PAUL A. BARNEY	<i>Paul A. Barney</i>	FREEDOM HOMES
STEVE SMITH	<i>Steve Smith</i>	FREEDOM HOMES
LINDA PENHALIGON	<i>Linda Penhaligon</i>	FREEDOM HOMES

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

David Albright
License Holders Signature (Notarized) 141129420 7-31-2019
License Number Date

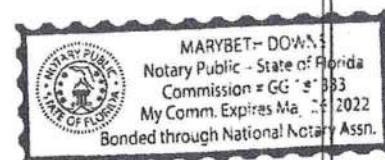
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright, personally appeared before me and is known by me or has produced identification (type of I.D.) personally known on this 31 day of July, 20 19.

Marybeth Dows
NOTARY'S SIGNATURE

(Seal/Stamp)



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 <u>WATKINSON ELECTRIC</u> License #: <u>EC13002957</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>386 972 1701</u>
MECHANICAL/ A/C _____	Print Name <u>STYLECREST</u> License #: <u>CAC1817658</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>[Signature]</u> Phone #: <u>850-769-7453</u>

Qualifier Forms cannot be submitted for any Specialty License.

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.

Revised 10/30/2015

Freedom Mobile Home Sales, Inc

DATE OF BIRTH
BUYER: 09/06/73
CO-BUYER: _____

466 SW DEPUTY J DAVIS LN.
LAKE CITY, FLORIDA 32024
(386) 752-5355 Fax: (386) 752-4757

DRIVER'S LICENSE
BUYER: P600737-73-826-0
CO-BUYER: 0

BUYER(S) RENE PERRY		PHONE -		DATE 02/04/20	
ADDRESS 6511 BIMINI CT APOLLO BEACH FL 33572		Salesperson: WAYNE HATCH			
DELIVERY ADDRESS TBD SW CHOCTAW AVE FORT WHITE FL 32038					
MAKE & MODEL LIVE OAK U-5763E		YEAR 2021	BEDROOMS 3X2	FLOOR SIZE L 16 W 76	HITCH SIZE L 16 W 80
SERIAL NUMBER		COLOR	PROPOSED DELIVERY DATE		STOCK NUMBER RSO
SPECIAL ORDER		New or Used NEW		KEY NUMBERS	
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION		BASE PRICE OF UNIT \$71,235.00
CEILING	27	9 1/5	ROCKWOOL		
EXTERIOR	11	3 1/2	FIBERGLASS		SUB-TOTAL \$71,235.00
FLOORS	22	7	FIBERGLASS		COUNTY TAX \$50.00
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16 CFR, SECTION 480.16.					SALES TAX 6% \$4,274.10
OPTIONAL EQUIPMENT, LABOR, AND ACCESSORIES					TAG AND TITLE \$0.00
Delivered and Set Up:			Included		
Trim			Included		
Tied Down:			Included		
Dirt Pad			Included		
Land clearing			NO		
Connect water and sewer within 20 feet of existing facility			Included		1. CASH PURCHASE PRICE \$75,559.10
Furnished \$ NO			AGREE		TRADE-IN ALLOWANCE \$0.00
Unfurnished			AGREE		LESS BAL. DUE ON ABOVE \$0.00
Customer responsible for any wrecker fees incurred on lot.			AGREE		NET ALLOWANCE \$0.00
Wheels & axles deleted from sale price of home.			AGREE		CASH DOWN PAYMENT \$5,000.00
Electrical Hookup			Included		0 \$0.00
					LESS TOTAL CREDITS \$5,000.00
					BALANCE DUE TO FREEDOM \$70,559.10
					LAND PAYOFF \$0.00
					CLOSING COST FINANCED BY LENDER \$0.00
					INSURANCE \$0.00
					ESTIMATED FINAL LOAN AMOUNT \$70,559.10
					Initial: _____
					NO VERBAL AGREEMENTS WILL BE HONORED.
					SELLER AGREES TO PAY UP TO \$0.00 OF BUYERS CLOSING COST AND PREPAIDS
Type of A/C PKG HP			Included		The U.S. Department of Housing and Urban Development (HUD) Manufactured Home Dispute Resolution Program is available to resolve disputes among manufacturers, retailers, or installers concerning defects in manufactured homes. Many states also have a consumer assistance or dispute resolution program. For additional information about these programs see sections titled "Dispute Resolution Process" and "Additional Information -- HUD Manufactured Home Dispute Resolution Program" in the consumer manual required to be provided to the purchaser. These programs are not warranty programs and do not replace the manufacturer's or any other person's warranty program.
Type of Skirting LAP TO GROUND			Included		
Type of steps WOODCODE			Included		
NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE					
DESCRIPTION OF TRADE-IN		YEAR	BEDROOMS	SIZE	
N/A		N/A	N/A	N/A	
MAKE		MODEL			
TITLE NO		SERIAL	COLOR		
N/A		N/A	N/A		
LIEN HOLDER		PHONE NO	AMOUNT		
N/A		N/A	N/A		
TRADE PAYOFF IS TO BE PAID BY			0		
THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on Page 2 of this contract are agreed to as part of the contract and accessories, the insurance as described has been voluntary, the Buyer's trade-in is free of all claims whatsoever except as noted.					
Liquidated Damages are agreed to \$900.00 or 10% of the cash price, whichever is greater.			REFER TO PARAGRAPH #6 ON THE REVERSE SIDE OF THIS CONTRACT		

Freedom Mobile Home Sales, Inc. DEALER
Not Valid Unless Signed by Steve Smith (Vice Pres)

SIGNED X _____
SOCIAL SECURITY NO. 266-49-1528

BUYER

BY _____
Agent

SIGNED X _____
SOCIAL SECURITY NO.

BUYER