

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 # 32-IN-17-04465-000 Subdivision _____ Lot# _____

▪ New Mobile Home ☒ Used Mobile Home _____ MH Size 32x56 Year 2020

▪ Applicant H&L Customer Service, LLC Phone # (386) 984-9334

▪ Address 301 SW FAUL CT, Lake City, FL, 32024

▪ Name of Property Owner William Davis Phone# (386) 288-8903

▪ 911 Address 497 Frank James Rd, White Springs

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

▪ Name of Owner of Mobile Home William Davis Phone # (386) 288-8903

Address 497 Frank James Rd, White Springs

▪ Relationship to Property Owner self.

▪ Current Number of Dwellings on Property 0

▪ Lot Size 20 Acres Total Acreage 20 Acres.

▪ 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 Turn (1) onto NE Madison St, Turn (2) onto N. Marion Ave, Turn (2) onto NE Frank James Rd, destination is on your left.

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # (386) 623-2203

▪ Installers Address 6355 SE CR 245, Lake City, FL, 32025

▪ License Number IH/1025386 Installation Decal # 79411

H&L Customer Service, LLC
301 SW Faul Court, Lake City, Florida 32024

LIMITED POWER OF ATTORNEY

I, William Davis, do hereby authorize H&L Customer Service, LLC and it's members, Heide Morrison and/or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits, and picking up permits as needed for the installation of a new mobile home located at the below address;

497 Frank James Rd
White Springs, FL

In Columbia County, Florida.

W Scott Davis

Signature

05/13/20

Date

State of Florida

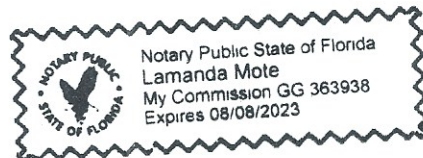
County of Columbia

This Instrument was signed or acknowledged before me on this 13th day of

May 2020 by William Davis. If ID provided, type of state issued ID provided personally known.

Lamanda Mote
Notary Public

Seal:



My Commission Expires: 08/08/2023

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Robert Sheppard License # 1025386

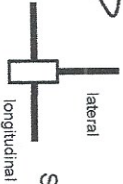
Address of home being installed 499 Frank James Rd White Springs

Manufacturer Live Oak Homes Length x width 32x56

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 R.S.

Typical pier spacing



Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)

marriage wall piers within 2' of end of home per Rule 15C

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 # 79411

Triple/Quad ☐ Serial # _____

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16' x 16" (256)	18 1/2" x 18 (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.) 17x25

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 _____

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 Oliver 1101

OTHER TIES

Number _____
Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

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 _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 270 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 require anchors with 4000 lb holding capacity. RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

05/12/20

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. 24

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

Debris and organic material removed ☒ Swale ☒ Pad ☒ Other ☐

Fastening multi wide units

Floor: Type Fastener: lags Length: 5 Spacing: 16
Walls: Type Fastener: screws Length: 4 Spacing: 16
Roof: Type Fastener: lags Length: 6 Spacing: 16
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, 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 RS

Type gasket Foam
Pg. 22

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

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 22
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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Robert Sheppard Date 5/12/20

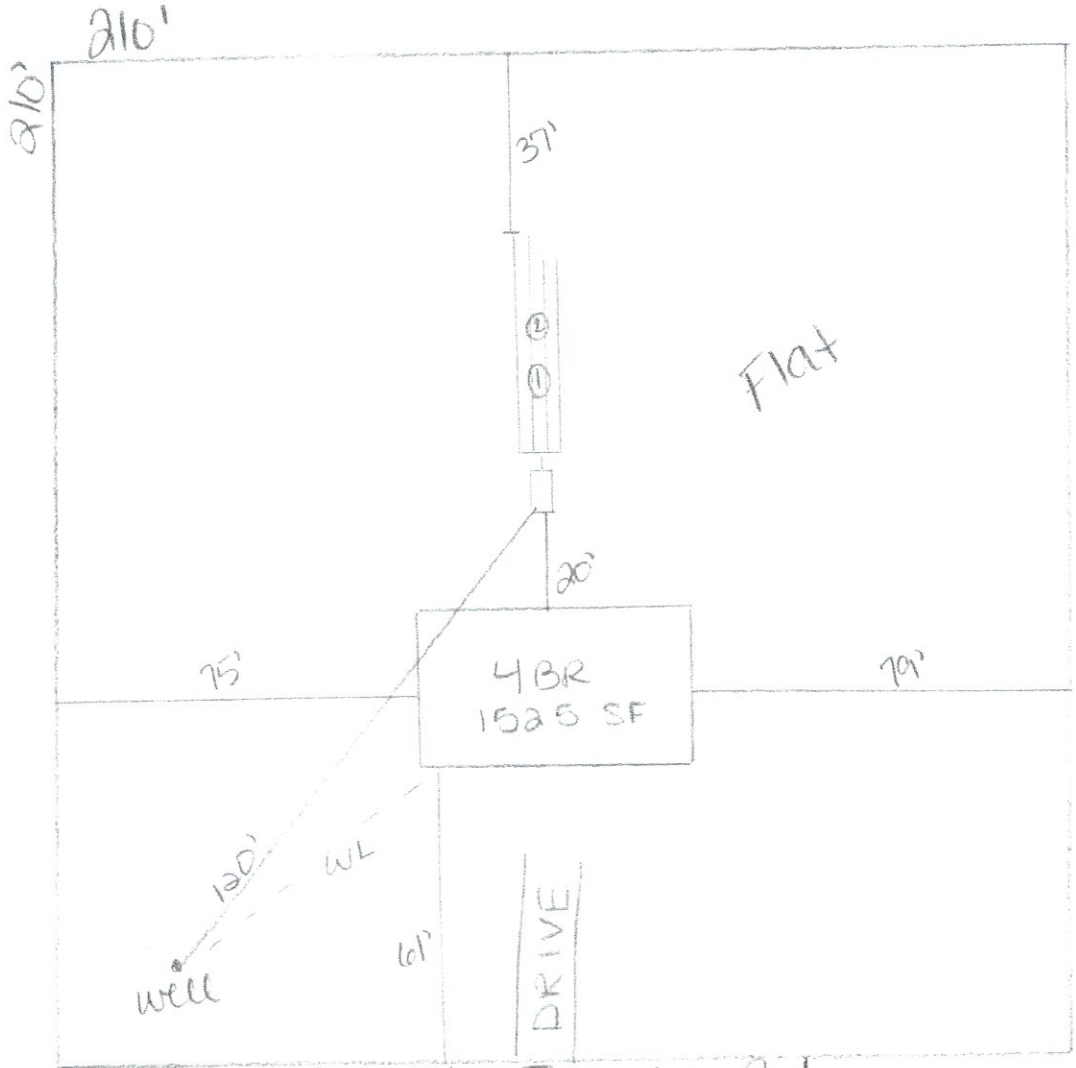
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

William Davis

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: _____ Frank James Rd.

1 acre of 20.

Site Plan submitted by: _____

MASTER CONTRACTOR

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE (386) 623-2203

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>Glenn Whittington</u> License #: <u>EC 13002957</u>	Signature <u>Glenn Whittington</u> Phone #: <u>(386) 972-1701</u>
Qualifier Form Attached <input type="checkbox"/>		
MECHANICAL/ A/C _____	Print Name <u>Charles O Thomas</u> License #: <u>CAC 1817820</u>	Signature <u>Charles Thomas</u> Phone #: <u>(419) 680-2023</u>
Qualifier Form Attached <input type="checkbox"/>		

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.

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED _____ BY _____ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? _____

OWNERS NAME William Davis PHONE (386) 288-8903 CELL _____

ADDRESS 497 Frank James Rd, White Spring

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Turn (2) onto NE Marion St,
Turn (2) onto N. Marion Ave, Turn (2) onto NE Frank James Rd,
the destination is on your (2)

MOBILE HOME INSTALLER Robert Sheppard PHONE _____ CELL (386) 623-2203

MOBILE HOME INFORMATION

MAKE Live Oak Homes YEAR 2020 SIZE 32 x 56 COLOR Gray

SERIAL No. _____

WIND ZONE 2 Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

_____ SMOKE DETECTOR () OPERATIONAL () MISSING

_____ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____

_____ DOORS () OPERABLE () DAMAGED

_____ WALLS () SOLID () STRUCTURALLY UNSOUND

_____ WINDOWS () OPERABLE () INOPERABLE

_____ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

_____ CEILING () SOLID () HOLES () LEAKS APPARENT

_____ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT
FIXTURES MISSING

EXTERIOR:

_____ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

_____ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

_____ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED _____ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER _____ DATE _____



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, Robert Sheppard, give this authority for the job address show below
Installer License Holder Name

only, 497 Frank James Rd, White Springs, 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)
H&L Customer Service	<i>[Signature]</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input 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.

Robert Sheppard
License Holders Signature (Notarized)

JH/1025386
License Number

05/13/20
Date

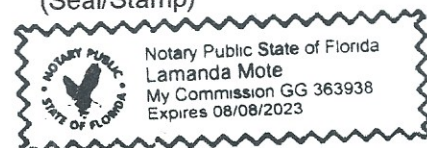
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 13th day of May, 20 20.

Lamanda Mote
NOTARY'S SIGNATURE

(Seal/Stamp)



H&L Customer Service, LLC
301 SW Faul Court, Lake City, Florida 32024

LIMITED POWER OF ATTORNEY

I, Robert Sheppard, do hereby authorize H&L Customer Service, LLC and it's members, Heide Morrison and/or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits, and picking up permits as needed for the installation of a new mobile home located at the below address;

497 Frank James Rd
White Springs, FL

In Columbia County, Florida.

Robert Sheppard

Signature

4/3/20

Date

State of Florida

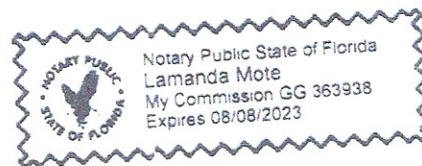
County of Columbia

This Instrument was signed or acknowledged before me on this 3rd day of

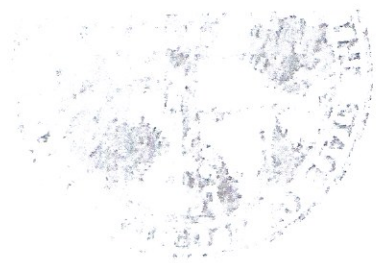
April 2020 by Robert Sheppard. If ID provided, type of state issued ID provided personally known.

Lamanda Mote
Notary Public

Seal:



My Commission Expires: 08/08/2023



Florida Mobile Home Installer License

NAME: ROBERT D. SHEPPARD

LICENSE NUMBER: IH/1025386

EXPIRATION DATE: 09/05/2019

EXPIRATION DATE: 09/30/20

LICENSEE IS HEREBY CERTIFIED UNDER THE PROVISIONS OF SECTION
101.04, F.S. TO CONDUCT AND CARRY ON BUSINESS AS AN INSTALLER
OF MOBILE HOMES IN THE STATE OF FLORIDA

Robert R. Kynard

Director, Division of Motorist

Florida - Department of Highway Safety and Motor Vehicles - Division of Motor

IRONWOOD HOMES OF LAKE CITY LLC

4109 US 90 WEST
Lake City, Florida 32055
Ph (386) 754-8844 Fax (386) 754-0190

(386) 292-9639

BUYER(S) WILLIAM DAVIS		PHONE 386-2888903		DATE 5-11-20	
ADDRESS 4835 MARION AVE LAKE CITY FLA 32025		Salesperson: KEN WALKER			
DELIVERY ADD 497 FRANK JAMES RD WINTER SPRINGS FLA 32096					
MAKE & MODEL LIVE OAK L3524F OAK	YEAR 2020	BEDROOMS 4	FLOOR SIZE L 52 W 32	HITCH SIZE L 56 W 32	#21
SERIAL NUMBER TBO	New or Used		COLOR		
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT \$83,375	
CEILING				OPTIONAL EQUIPMENT	
EXTERIOR				SUB-TOTAL	
FLOORS					
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16 CFR, SE					
OPTIONAL EQUIPMENT, LABOR, AND ACCESSORIES			SALES TAX 6% \$5002		
Standard Delivery & Setup KW			COUNTY SURTAX * (SEE BELOW) \$350		
Connect water & sewer within 20 feet to existing facilities only. KW			TAG/TITLE \$300		
Furnished (INCLUDED IN PRICE OF HOME)			NONTAXABLE ITEMS		
Unfurnished KW			1. CASH PURCHASE PRICE \$88,727		
Customer responsible for any wrecker fees incurred on lot. KW			TRADE-IN ALLOWANCE		
Wheels & axles deleted from sale price of home. KW			LESS BAL. DUE ON ABOVE		
Will lend for a local move.			NET ALLOWANCE \$16,675		
Customer responsible for any gas or electrical hookups. KW			CASH DOWN PAYMENT		
Customer responsible for releveling of home after initial setup. Cannot be responsible for settling of land. We will do again, but there will be a charge. KW			CASHASAGREED See remarks		
On All Cash Purchases Homes will be Paid in Full Before Home Is Delivered			2. LESS TOTAL CREDITS		
Options include extra: (LIST)			SUB-TOTAL		
BALANCE CARRIED TO OPTIONAL EQUIPMENT			SALES TAX (If Not Included Above) \$72,052		
NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON T			3. Unpaid Balance of Cash Sale Price		
DESCRIPTION OF TRADE-IN YEAR BEDROOMS SIZE			REMARKS:		
MAKE	MODEL	COLOR	NO VERBAL AGREEMENTS WILL BE HONORED.		
TITLE NO.	SERIAL	COLOR	Initial: _____		
LIEN HOLDER	PHONE NO	AMOUNT	*COUNTY SURTAX IS BASED ON COUNTY WHERE HOME IS DELIVERED		
TRADE PAYOFF IS TO BE PAID BY			DEL SETUP 3 1/2 TON AC 256TS CODE STEPS		
THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR			STD WHITE SKIRTINS		
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 are agreed to as part of this agreement, the			PERMITS SEPTIC TANK		
BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER HAS READ AND UNDERSTANDS PAGE 2 OF THIS AGREEMENT					
Ironwood Homes of Lake City DEALER			SIGNED X W. Scott Davis BUYER		
Not Valid Unless Signed and Accepted by An Officer of The Company			SOCIAL SECURITY NO. 594-84-2246		
BY Ken Walker OFFICER			SIGNED X _____ BUYER		
			SOCIAL SECURITY NO. _____		

RAPTOR



Date: 9-19-2018

- * All room dimensions include closets and square footage figures are approximate.
- * Transom windows are available on optional g-u" sidewall houses only.

From: Ron Mason rmason@liveoakhomes.org
Subject: raptor footer
Date: Apr 22, 2020 at 12:29:49 PM
To: Larry Martin larryironwood@yahoo.com

1645224F 12.11.14

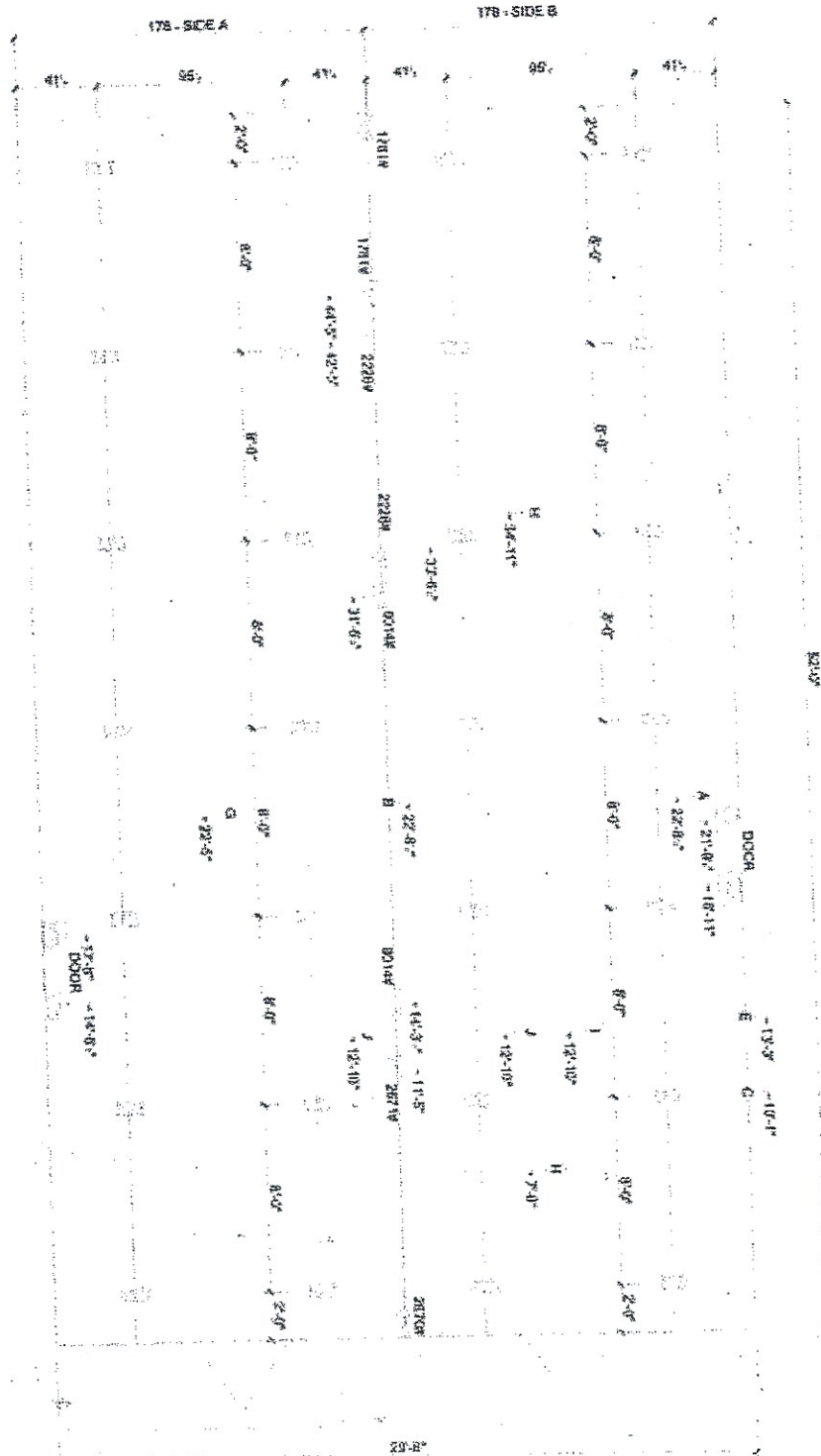
Live Oak Homes
MODEL: L-3524F - 32 X 52
4-BEDROOM / 2-BATH

- A MAIN ELECTRICAL
B ELECTRIC CROSOVER
C WATER INLET
D WATER CROSOVER (IF ANY)
E GAS INLET (IF ANY)
F GAS CROSOVER (IF ANY)
G EXCT CROSOVER
H SEWER DROPS
I RETURN AIR VENT
J SUPPLY AIR INJECT. HEAT PUMP CH DUCT
K GAS CROSOVER (IF ANY)

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 POINTS. SEE INSTALLATION MANUAL FOR REQUIREMENTS.

MARRIAGE LINE OPENING SUPPORT PIER TYPE
SUPPORT PIER TYPE

8-28-19



L-3524F

Columbia County Property Appraiser

Jeff Hampton

2020 Working Values

updated: 4/17/2020

Parcel: << 32-1N-17-04465-000 >>

Owner & Property Info

Result: 336 of 368

Owner	DAVIS WILLIAM R & VALERIE L 433 S MARION AVE LAKE CITY, FL 32025		
Site	497 FRANK JAMES RD, WHITE SPRINGS		
Description*	N1/2 OF SW1/4 OF SW1/4. 658-516, 1246-1382, DC 1280-718, PB 1315-1666, QC 1406-1461, 2648, QC 1408-258 1408-261, WD 1408-266		
Area	20 AC	S/T/R	32-1N-17
Use Code**	IMPROVED A (005000)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2019 Certified Values		2020 Working Values	
Mkt Land (1)	\$1,768	Mkt Land (1)	\$1,768
Ag Land (1)	\$4,560	Ag Land (1)	\$4,560
Building (1)	\$39,660	Building (1)	\$40,244
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$75,022	Just	\$75,606
Class	\$45,988	Class	\$46,572
Appraised	\$45,988	Appraised	\$46,572
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$45,988	Assessed	\$46,572
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$45,988 city:\$45,988 other:\$45,988 school:\$45,988	Total Taxable	county:\$46,572 city:\$46,572 other:\$46,572 school:\$46,572

Aerial Viewer Pictometry Google Maps



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
3/13/2020	\$142,000	1408/0266	WD	I	U	30
2/26/2020	\$100	1406/2648	QC	I	U	11
2/21/2020	\$100	1406/1461	QC	I	U	11
8/7/2017	\$100	1342/1521	PR	I	U	11
12/10/2012	\$0	1246/1382	PB	V	U	18

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	1	SINGLE FAM (000100)	1992	1280	1488	\$39,660

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
-----------	------	-------	-------------	----------	------------

000100	SFR (MKT)	1.000 AC	1.00/1.00 1.00/1.00	\$1,768	\$1,768
006200	PASTURE 3 (AG)	19.000 AC	1.00/1.00 1.00/1.00	\$240	\$4,560
009910	MKT.VAL.AG (MKT)	19.000 AC	1.00/1.00 1.00/1.00	\$0	\$33,594

Search Result: 336 of 368

© Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com