

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

Property ID # 24-65-15-00513-002 Subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32x80 Year 2022
- Applicant Heide Morrison Phone # (386) 984-9334
- Address 313 NW Brook Loop, Lake City, FL, 32055
- Name of Property Owner Jerry Bratcher Phone# (386) 984-5332
- 911 Address 355 SW Tiffany Ct, 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 Tiffany Moses Phone # (386) 984-5332
 Address 357 SW Tiffany Ct, Fort White, FL, 32038
- Relationship to Property Owner Daughter
- Current Number of Dwellings on Property 2
- Lot Size 38.9 Total Acreage 38.9
- 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 Yes.
- Driving Directions to the Property Turn (L) onto NE Madison St, Turn (L) onto NW Main Blvd, keep (R) onto SR 476, Turn (R) onto SW Elgin Church Rd, Turn (L) onto SW Junction Rd, Turn (R) onto US-27, Turn (R) onto SW Tiffany Ct. Destination on your (R).
- Name of Licensed Dealer/Installer Wendell Cross Phone # 382-351-6100
- Installers Address 4650 NE 35th St Ocala FL 34479
- License Number IH1025316 Installation Decal # TBD

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Wendell Crews PHONE 352-351-6100

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>Michael Boland</u> License #: <u>ES 12000926</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Michael Boland</u> Phone #: <u>352-274-9326</u>
MECHANICAL/ A/C	Print Name <u>Michael Boland</u> License #: <u>CAC 1817716</u> Qualifier Form Attached <input type="checkbox"/>	Signature <u>Michael Boland</u> Phone #: <u>352-274-9326</u>

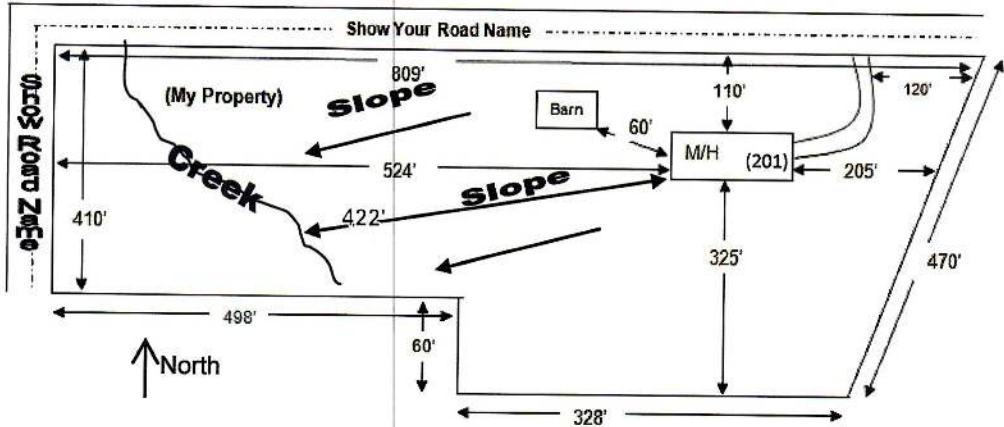
F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10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

SITE PLAN CHECKLIST

- ___ 1) Property Dimensions
- ___ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ___ 3) Distance from structures to all property lines
- ___ 4) Location and size of easements
- ___ 5) Driveway path and distance at the entrance to the nearest property line
- ___ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ___ 7) Show slopes and or drainage paths
- ___ 8) Arrow showing North direction

SITE PLAN EXAMPLE

Revised 7/1/15



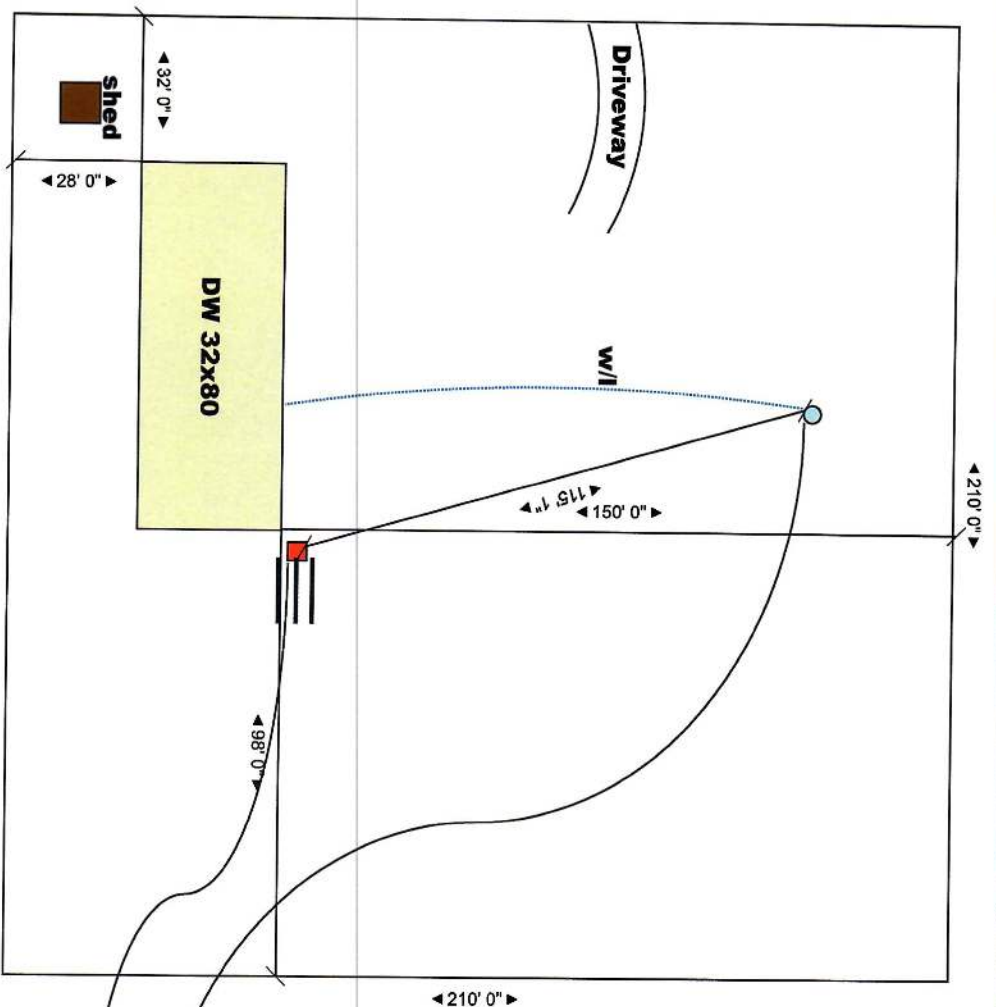
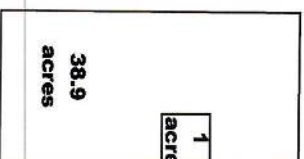
NOTE:

This site plan can be copied and used with the 911 Addressing Dept. application forms.

See attached



Parcel ID: 24-6S-15-00513-002
1 acre lot of 38.9 acres



Existing Well

Existing Septic

Site:	357 SW Tiffany Ct, Fort White			Drawing:	8357	Project:	0357	Drawn:	Heide M	Notes:	Heide Morrison 313 NW Brook Loop Lake City, FL 32055 (386)984-9334
Title:	Tiffany Moses			Scale:	1"=40'	Date:	05/10/22	Rev:	A		

APPLICATION AGENT AUTHORIZATION FORM

TO: Columbia County Zoning Department
135 NE Hernando Avenue
Lake City, FL 32055

Authority to Act as Agent

On my/our behalf, I appoint Heide Morrison
(Name of Person to Act as my Agent)

for North FL Building Permits
(Company Name for the Agent, if applicable)

to act as my/our agent in the preparation and submittal of this application
for STUP & mobile home permit
(Type of Application)

I acknowledge that all responsibility for complying with the terms and conditions for approval of this application, still resides with me as the Applicant/Owner.

Applicant/Owner's Name: Jerry Bratcher

Applicant/Owner's Title: _____

On Behalf of: _____
(Company Name, if applicable)

Telephone: _____ Date: 05/09/2022

Applicant/Owner's Signature: [Signature]

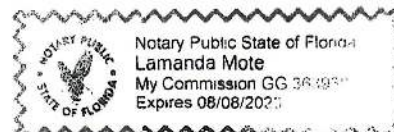
Print Name: Jerry W. Bratcher

STATE OF FLORIDA
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 9th day of May, 2022, by Jerry Bratcher,
whom is personally known by me ☒ OR produced identification ☐.
Type of Identification Produced _____

[Signature]
(Notary Signature)

(SEAL)



Mobile Home Permit Worksheet

Application Number: _____

Date: _____

Installer: Wendell Crews

License # LH1025316

Address of home being installed

357 SW Tiffany Ct
Fort White, FL

Manufacturer Live Oak

Length x width

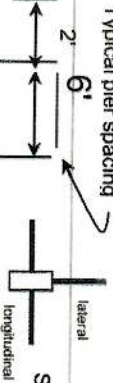
76X32

NOTE:

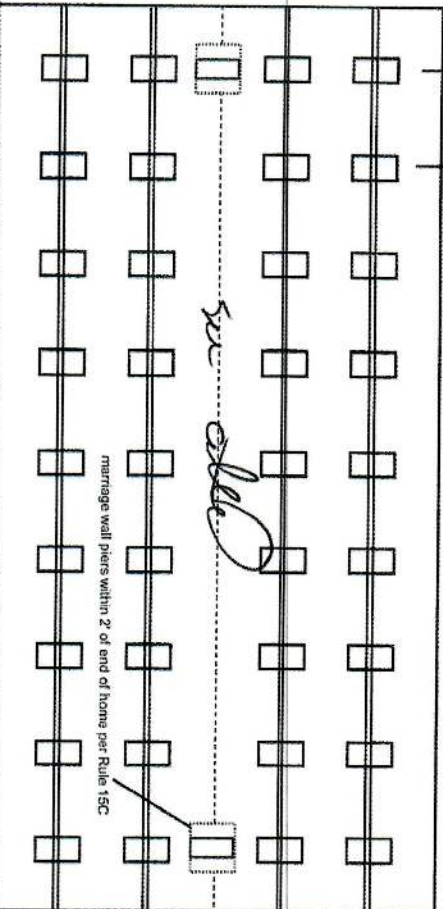
If home is a single wide fill out one half of the blocking plan
If home is a triple or quad wide sketch in remainder of home
I understand Lateral Arm Systems cannot be used on any home (new or used)
where the sidewall ties exceed 5 ft 4 in.

Installer's initials WC

Typical pier spacing



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



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 # TBD

Triple/Quad ☐ Serial # LH6A-30073004A18

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (sq in)	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

L-beam pier pad size 17X25

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) 16X16 Doors

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.

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 X 5 ft

FRAME TIES

within 2' of end of home
spaced at 5' 4" OC N/A

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver 1101V

Number
Sidewall
Longitudinal
Marriage wall
Shearwall
@olivers
@olivers

OTHER TIES

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 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is N/A 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 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 *W*

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Wendell Crews

Date Tested 5-3-22

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. 39

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 39

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 39

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: Lag Length: 3/8x5" Spacing: 16"oc
Walls: Type Fastener: Screw Length: #8x4" Spacing: 16"oc
Roof: Type Fastener: Metal Length: 76" Spacing: 2"oc
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 *W*

Type gasket Foam Installed:
Pg. 13 Between Floors Yes X
Between Walls Yes X
Bottom of ridgebeam Yes X

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X Pg. 13
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

Skirting to be installed. Yes X No
Dryer vent installed outside of skirting. Yes X N/A
Range downflow vent installed outside of skirting. Yes X N/A X
Drain lines supported at 4 foot intervals. Yes X
Electrical crossovers protected. Yes X
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 *Wendell Crews* Date 5-3-22

Manufacturer Live Oak
Width x Length 32 x 76



Soil Bearing Capacity 1500

Probe test / anchor length 10' 11" / 4' 6.5" on loads over 3150 #

I-beam Pier/Pad size 12x25

Marriage Wall Pier Pad Sizes 1' 10" x 1' 6" 5' 11" x 1' 6"
9' 12x25

Manual

Marriage Wall Pier Pad Sizes

I-beam Pier-Pad size

$$\begin{array}{r} 1 \overline{) 6x^2} \\ 5 \overline{) 10x^2} \end{array}$$

g) 12x25

$$\begin{array}{r} 2.24 \times 24 \\ 6.17 \times 25 \end{array}$$
$$\begin{array}{r} 3 \overline{24 \times 21} \\ 7 \overline{24 \times 24} \end{array}$$
$$\begin{array}{r} 4 \overline{24 \times 24} \\ 8 \overline{17 \times 25} \end{array}$$

Perimeter Pier Pad Sizes

16x16

2008

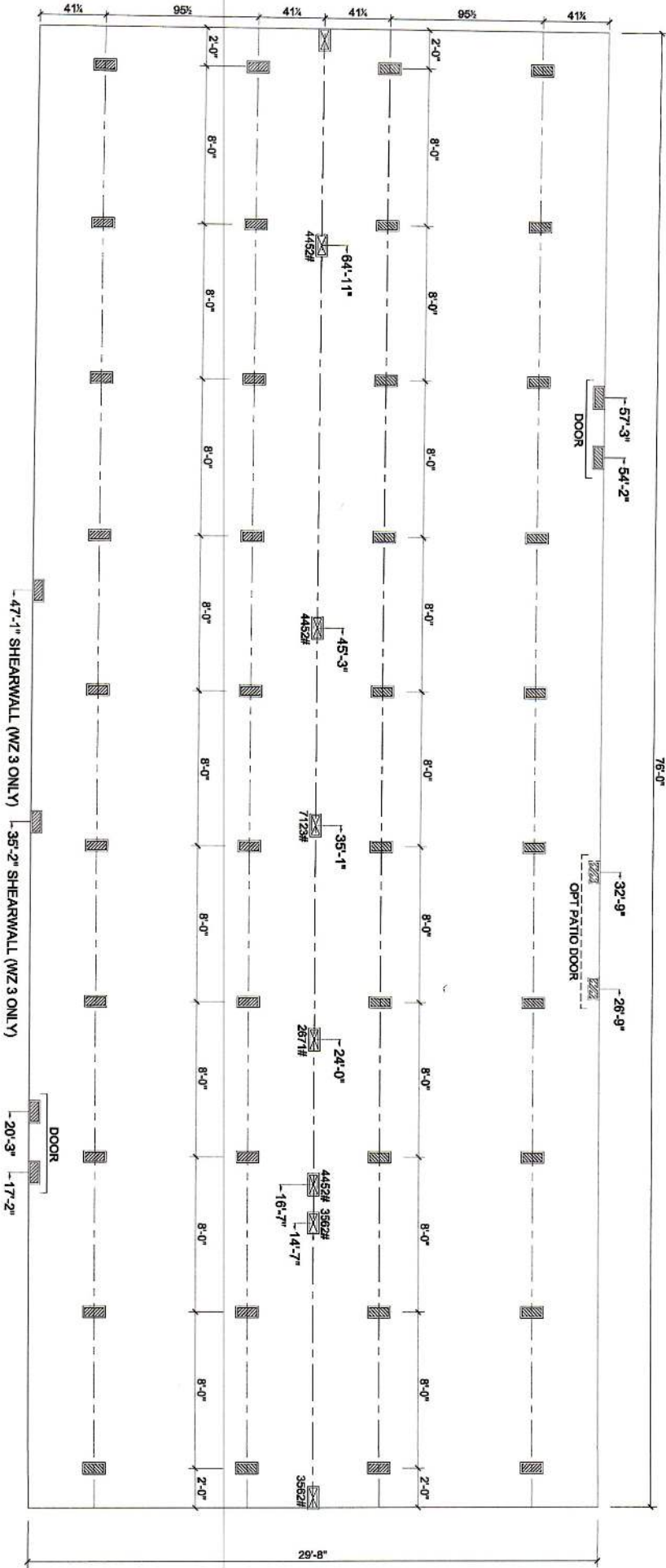


- * All room dimensions include closets and square footage figures are approximate.
- * Transom windows are available on optional 9'-0" sidewalk houses only.
- * Skirting shown is optional.
- * Small dormer is optional only.

Live Oak Homes
MODEL: D-3764W - 32 X 76
4-BEDROOM / 2-BATH

- ☒ MARRIAGE LINE OPENING SUPPORT PIERTYP.
 - ☒ 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.

01/08/19



D-3764W



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, Wendell Crews, give this authority for the job address show below
Installer License Holder Name

only, 357 SW Tiffany Ct, 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)
Heide Morrison	<i>H Morrison</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.

Wendell Crews License Holders Signature (Notarized)
JH 1025316 License Number
5-3-22 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Wendell Crews, personally appeared before me and is known by me or has produced identification (type of I.D.) 3rd on this May day of 2022.

Lamanda Mote
NOTARY'S SIGNATURE





Moses

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, Wendell Crews, 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
Heide Morrison	H Morrison	North Fl Building Permits, LLC

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.

Wendell Crews
License Holders Signature (Notarized) TH1025316 5-3-22
License Number Date

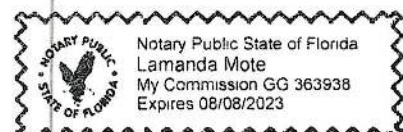
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Wendell Crews,
personally appeared before me and is known by me or has produced identification
(type of I.D.) on this 3rd day of May, 2022.

Lamanda Mote
NOTARY'S SIGNATURE

(Seal/Stamp)



**Address Assignment and Maintenance Document**

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **6/22/2020 2:46:27 PM**

Address: **357 SW TIFFANY CT**

City: **FORT WHITE**

State: **FL**

Zip Code **32038**

Parcel ID **24-6S-15-00513-002**

REMARKS: **This address is a verified address in the county's addressing system.**
Verification ID: cb9a81d5-08f4-40b0-84f2-3603cd45fd14

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

Address Issued By: **GIS Specialist**

Columbia County GIS/911 Addressing Coordinator

Corporate Office:
CIRCLE B OF OCALA, INC.
1031 N. Pine Ave
Ocala, FL 34475
352/671-9213*FAX:352/671-9216

ALL DEALER'S SERVICE RENDER BY
Circle B of Ocala - SERVICES-352/671-9213
Field Operation-352/671-9213

Sales Center
Circle B Mobile Home Sales
2410 S. Pine Ave.
Ocala, FL 34471

**PURCHASE AGREEMENT
UCC 201**

Date of Birth
Buyer #1
Buyer #2
Buyer #3

DRIVER'S LICENSE
Buyer #1
Buyer #2
Buyer #3

SOLD TO		Matthew Paul Moses		Tiffany Kay Moses		PHONE 386-984-5332 386-292-4574		Dealer Contract Date Finance Contract Date	
ADDRESS		CITY		STATE		ZIP		COUNTY	
18326 CR 250		Live Oak		FL		Columbia		SALES ASSOC David Gaylard	
Subject to the Terms and Conditions Stated on Both Sides of this Agreement Seller Agrees to Sell and The Purchaser Agrees to Purchase the Following Described Property.									
MAKE 2022		MODEL		B. ROOMS		FLOOR SIZE		HITCH SIZE	
Live Oak		D-3764W		4		L 76 / W 30		L 80 / W 32	
SERIAL NUMBER		X NEW		COLOR		PROPOSED		357 SW Tiffany Ct	
LOHGA30073004AB		USED		Gray		DELIVERY ADDRESS		Ft. White FL 32038	
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES				PRICE OF UNIT				\$ 162,900.00	
DELIVERED, BLOCKED, LEVELED & ANCHORED				LICENSED CONTRACTOR FEE				\$ 0.00	
2 Sets of County Code Steps				Included				SALES-TAX \$ 9,824.00	
White Vertical Soffit Skirting				Included				NON-TAXABLE ITEMS \$ 5,600.00	
5 Ton Package Unit W/ Heat Strips				Included				1. CASH PRICE \$178,324.00	
				2. DOWN PAYMENT					
				DOWN PAYMENT COLLECTED					
				BALANCE DUE					
I fully understand if A/C is not purchased then this home will not have heat. Buyer will be responsible for furnishing my own form of heating.				NET ALLOWANCE					
				CASH DOWN PAYMENT				\$17,866.00	
NON-TAXABLE ITEMS included in Line #1				TOTAL DOWN PAYMENT				\$17,866.00	
Land Improvement Allowance \$ 5,600.00				3. UNPAID BALANCE OF CASH PRICE				\$160,458.00	
0 \$ -				4. TAG & TITLE FEE				\$ -	
				INSURANCE PAID TO OTHERS ON YOUR BEHALF				\$ 0.00	
				5. PRINCIPAL BALANCE				\$160,458.00	
S.S.#		Name		Matthew Paul Moses					
S.S.#		Name		Tiffany Kay Moses					
S.S.#		Name							
THE CONTRACT AND PAPERWORK I AM SIGNING NOW SUPERSEDES ANY PREVIOUS VERBAL/WRITTEN AGREEMENTS OR PAPERWORK, INCLUDING PRICE POSTING THAT APPEAR IN HOMES. THIS PAPERWORK REFLECTS THE ACCURATE PRICE ON THE SALE OF THIS HOME.									
DESCRIPTION OF TRADE-IN		Year		0					
Make		Model		Bedrooms		Size			
0						X			
Title No.		Serial No.		Color					
		0							
The cash price unless otherwise stated to remove trade from property is based on the assumption that the trade is transportable. If this is not the case then it is the buyer's responsibility for any and all additional expenses.									
TRADE-IN DEBT TO BE PAID BY <input checked="" type="checkbox"/> DEALER <input type="checkbox"/> CUSTOMER									
CIRCLE B OF OCALA, INC. DEALER									
Not Valid Unless Signed and Accepted by an Officer of the Company									
By: Wayne Frier/Rick Bolling, Sr.									
Approved, subject to acceptance of financing or cash paid in full.									
I, OR WE, HEREBY ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER									
SIGNED X PURCHASER									
SIGNED X T. Moses PURCHASER									
SIGNED X PURCHASER									

Columbia County Property Appraiser

Jeff Hampton

2022 Working Values

updated: 4/28/2022

Parcel: << **24-6S-15-00513-002 (2558)** >>**Owner & Property Info**

Result: 1 of 1

Owner	BRATCHER ROBIN L BRATCHER JERRY W 355 SW TIFFANY CT FORT WHITE, FL 32038		
Site	355 SW TIFFANY Ct, FORT WHITE		
Description*	BEG NW COR OF NE1/4, RUN E 698.69 FT, S 2473.43 FT TO N R/W US-27, NW ALONG R/W 699.68 FT, N 2390.46 FT TO POB. 880-1429, LE 1427-1036, 880-1429, LE 1427-1036,		
Area	38.9 AC	S/T/R	24-6S-15
Use Code**	IMPROVED AG (5000)	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

2021 Certified Values		2022 Working Values	
Mkt Land	\$9,200	Mkt Land	\$3,500
Ag Land	\$11,370	Ag Land	\$11,370
Building	\$25,576	Building	\$29,448
XFOB	\$13,934	XFOB	\$20,434
Just	\$160,356	Just	\$186,032
Class	\$60,080	Class	\$64,752
Appraised	\$60,080	Appraised	\$64,752
SOH Cap [?]	\$5,549	SOH Cap [?]	\$9,180
Assessed	\$54,531	Assessed	\$55,572
Exempt	HX HB \$25,000	Exempt	HX HB \$25,000
Total Taxable	county:\$29,531 city:\$0 other:\$0 school:\$29,531	Total Taxable	county:\$30,572 city:\$0 other:\$0 school:\$30,572

▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
12/31/2020	\$100	1427/1036	LE	I	U	14
5/14/1999	\$0	0880/1429	WD	V	U	01

▼ Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	MOBILE HME (0800)	1993	1848	2232	\$29,448

*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
0010	BARN,BLK	0	\$5,208.00	1.00	36 x 40
0010	BARN,BLK	0	\$3,240.00	720.00	18 x 40
0040	BARN,POLE	2015	\$200.00	1.00	0 x 0
0120	CLFENCE 4	2015	\$100.00	1.00	0 x 0
9945	Well/Sept		\$3,250.00	1.00	0 x 0

Aerial Viewer Pictometry Google Maps

☒ 2019
 ☐ 2016
 ☐ 2013
 ☐ 2010
 ☐ 2007
 ☐ 2005
 ☒ Sales
