

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 # 33-15-17-04633-002

Subdivision _____

Lot# _____

☒ New Mobile Home ☒ Used Mobile Home _____ MH Size 32x36' Year 2022

Applicant Charles Robinson Phone # 352-474-3914

Address 466 SW Deputy J. Davis Ln

Name of Property Owner BILLY H. Ramey Phone# 404-380-2588

911 Address 440 NW Spradley Rd Lake City FL 32055

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

Name of Owner of Mobile Home Nathan Billeigh Phone # 404-380-2588

Address 440 NW Spradley Rd, Lake City, FL 32055

Relationship to Property Owner Son

Current Number of Dwellings on Property 0

Lot Size 616' x 1946' x 196' x 860' x 246' x 860' x 108' x 2158' Total Acreage 21

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 T/L onto NE Madison St 233ft T/R onto US 941W
12.2mi T/L onto NW Spradley Rd for 0.3mi Jobsite on left

Name of Licensed Dealer/Installer David Albright Phone # 386-344-3645

Installers Address 353 SW Mauldin AVE Lake City FL 32024

License Number I-H 1129420 Installation Decal # 85935

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

 APPLICATION NUMBER _____ CONTRACTOR DAVID ALBRIGHT PHONE (386) 344-3645

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>WHITTINGTON ELECTRIC</u>	Signature <u>[Signature]</u>
	License #: <u>EC 13002957</u>	Phone #: <u>386 972 1700</u>
Qualifier Form Attached <input type="checkbox"/>		
MECHANICAL/ A/C	Print Name <u>STYLECREST</u>	Signature <u>[Signature]</u>
	License #: <u>CAC 1817658</u>	Phone #: <u>850-769-1453</u>
Qualifier Form Attached <input type="checkbox"/>		

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



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, 272 NW WHITNEY GLEN, LAKE CITY, FL 32055, 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
CHARLES ROBINSON	<i>Charles Robinson</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

License Holders Signature (Notarized)

1H-1129420-1

License Number

5-4-2021

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 4th day of MAY, 2021.

Linda Penhaligon

NOTARY'S SIGNATURE





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
CHARLES ROBINSON	<i>Charles Robinson</i>	FREEDOM HOMES

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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) 1H-1129420-1 5-4-2021
License Number Date

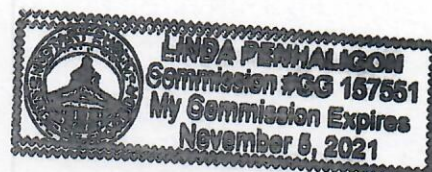
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STATE OF: Florida COUNTY OF: COLUMBIA

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personally appeared before me and is known by me or has produced identification
(type of I.D.) PERSONALLY KNOWN on this 4th day of MAY, 20 21.

Linda Penhaligon
NOTARY'S SIGNATURE

(Seal/Stamp)





COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
263 NW Lake City Ave., Lake City, FL 32055
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.com



Application for 9-1-1 Address Assignment Form

NOTE: ADDRESS ASSIGNMENT MAY REQUIRE UP TO 10 WORKING DAYS.
IF THE ADDRESSING DEPARTMENT NEEDS TO CONDUCT ON SITE GPS LOCATION
IDENTIFICATION OR OTHER ACTIONS, ADDITIONAL TIME MAY BE REQUIRED.

Date of Request: _____

REQUESTER Last Name: Robinson

First Name: Charles

Contact Telephone Number: 352-474-3914

(Cell Phone Number if Provided): same

Requested for Self: ☐ or Requested for Company: ☒
(check one)

If Address is Requested by a Company, Provide Name of Requesting Company:

Freedom Homes

Parcel Identification Number: 33-15-17-04633 - 002

If in Subdivision, Provide Name Of Subdivision:

Phase or Unit Number (if any): _____ Block Number (if any): _____

Lot Number: _____

Attach Site Plan or you may use page 2 of Application Form for Site Plan:
Requirements for Site Plan Are Listed on page 2 of Application Form:
(NOTE: Site Plan Does NOT have to be a survey or to scale; FURTHER a
Environmental Health Dept. Site Plan showing only a 210 by 210 cutout of a
property will NOT suffice for Addressing Application Requirements.)

Addressing / GIS Department Use Only:

Date Received: _____

Received by: Walk in: _____ Fax: _____ Email: _____ Other: _____



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

PARCEL: 33-1S-17-04633-002 (23694) | PASTURE CLS33 (6200) | 21.98 AC
 THAT PORTION OF W1/2 OF NW1/4 LYING S OF SPRADLEY RD, EX 5 AC OF E SIDE OF SW1/4 OF NW1/4 & EX 0.11 AC DESC ORB 970-1816 ALSO, COMM SE COR OF NW1/4 OF

NOTES:

Owner: **BILLEYH RAMEY**
 440 NW SPRADLEY RD
 LAKE CITY, FL 32055-5251
Site: 440 NW SPRADLEY Rd, LAKE CITY

2022 Working Values

Mkt Lnd	\$0	Appraised	\$16,525
Ag Lnd	\$5,825	Assessed	\$16,525
Bldg	\$0	Exempt	\$0
XFOB	\$10,700	county:	\$16,525
Just	\$76,640	city:	\$0
		other:	\$0
		school:	\$16,525
Sales Info	6/12/2020 \$99,000 I (Q)		
	7/8/2004 \$100,000 I (Q)		
	12/4/2002 \$148,700 V (Q)		



Columbia County, FL

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

This Instrument Prepared by & return to:

Name: **TRISH LANG, an employee of
Integrity Title Services, LLC**
Address: **757 WEST DUVAL STREET
Lake City, FL 32055
File No. 20-050107L**

Inst: 202012010453 Date: 06/15/2020 Time: 10:30AM
Page 1 of 2 B: 1413 P: 1128, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy ClerkDoc Stamp-Deed: 693.00

Parcel I.D. #: **R04633-002**

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the **12th** day of **June, A.D. 2020**, by **PAUL J. LESCENSKI and
SUSAN LESCENSKI, HUSBAND AND WIFE**, hereinafter called the grantors, to **RAMEY BILLEYH**, whose post
office address is **360 KALEB COURT, MCDONOUGH, GA 30253**, hereinafter called the grantee:

(Wherever used herein the terms "grantors" and "grantee" include all the parties to this instrument, singular and plural, 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 grantors, for and in consideration of the sum of \$10.00 and other valuable consideration,
receipt whereof is hereby acknowledged, do hereby grant, bargain, sell, alien, remise, release, convey and confirm
unto the grantee all that certain land situate in **Columbia County, State of Florida**, viz:

See Exhibit "A"

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 grantors hereby covenant with said grantee that they are lawfully seized of said land in fee simple;
that they have good right and lawful authority to sell and convey said land, and hereby fully warrant 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, 2020.

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

Signed, sealed and delivered in the presence of:

Witness Signature
BRANDI BROWN

Printed Name

Witness Signature
Maria M. Landin

Printed Name

PAUL J. LESCENSKI L.S.

Address:
**1268 NW SCENIC LAKE DRIVE, LAKE CITY, FL
32055**

SUSAN LESCENSKI L.S.

Address:
**1268 NW SCENIC LAKE DRIVE, LAKE CITY, FL
32055**

**STATE OF FLORIDA
COUNTY OF COLUMBIA**

The foregoing instrument was acknowledged before me this **12th** day of **June, 2020**, by **PAUL J.
LESCENSKI and SUSAN LESCENSKI**, who are known to me or who have produced
Driver's License as identification.



Notary Public
My commission expires **9/14/22**

Exhibit "A"

A part of the W 1/2 of the NW 1/4 of Section 33, Township 1 South, Range 17 East, Columbia County, Florida, being more particularly described as follows:

Begin at the SW corner of the NW 1/4 of said Section 33, and run thence S 89°39'51" E, along the South line of NW 1/4 of said Section 33, 572.60 feet; thence N 01°00'25" E, 1959.96 feet to a point on the South right-of-way line of Spradley Road (a county maintained road); thence N 71°20'13" W, along said South right-of-way line, 600.86 feet to a point on the West line of said Section 33; thence S 01°00'25" W, along said West line, 2148.91 feet to the POINT OF BEGINNING

LESS AND EXCEPT:

COMMENCE at the Southwest corner of the Northwest 1/4 of Section 33, Township 1 South, Range 17 East, Columbia County, Florida, and run North 87°55'02" East along the South line of the Northwest 1/4 of Section 33 a distance of 110.00 feet to the POINT OF BEGINNING; thence North 04°34'24" East a distance of 861.00 feet; thence North 87°55'02" East a distance of 254.68 feet; thence South 04°34'24" West a distance of 861.00 feet to a point on the South line of the Northwest 1/4 of Section 33; thence South 87°55'02" West along said South line of the Northwest 1/4 of Section 33 a distance of 254.68 feet to the POINT OF BEGINNING.

Subject to a non-exclusive easement, being 30 feet in width, for ingress and egress purposes and public and private utilities, lying 30 feet right of and adjacent to the following described line: Commence at the SW corner of the NW 1/4 of Section 33, Township 1 South, Range 17 East, Columbia County, Florida and run N 87°55'02" E along the South line of the NW 1/4 of Section 33 a distance of 572.87 feet; thence N 01°26'30" W a distance of 779.08 feet to the point of beginning; thence S 58°04'28" W a distance of 79.78 feet; thence S 79°25'29" W a distance of 34.36 feet; thence N 77°43'15" W a distance of 28.10 feet to the terminal point of herein described line and easement.

Madam Ned

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

Installer **DAVID ALBRIGHT** License # **IHI 1129420**

911 Address where home is being installed. **TBD NW Spadley Rd Lake City FL 32055**

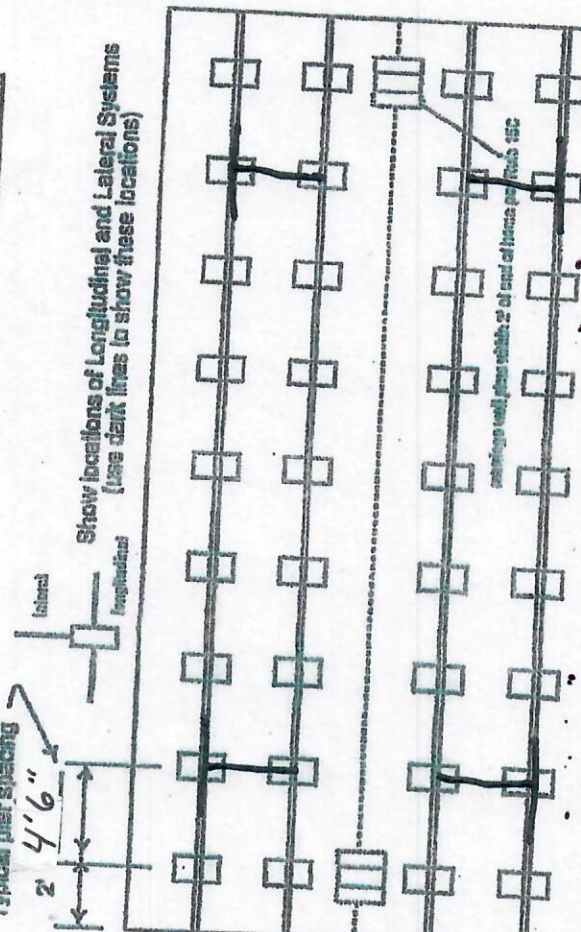
Manufacturer **LIVE OAK HOMES** Length x width **32x52/56**

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

Underland Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's Initials DA

Typical pier spacing



DUKE 4-3524D

page 1 of 2

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 # **85955**
Triple/Quad ☐ Serial # **LONGA**

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	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 osf	3'	4'	5'	6'	7'	8'
1500 osf	4'	5'	6'	7'	8'	9'
2000 osf	5'	6'	7'	8'	9'	10'
2500 osf	6'	7'	8'	9'	10'	11'
3000 osf	7'	8'	9'	10'	11'	12'
3500 osf	8'	9'	10'	11'	12'	13'

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

PIER PAD SIZES

I-beam pier pad size **17x26**
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 **32x23**

4 **17x25**

3 **17x25**

TIEDOWN COMPONENTS

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

OTHER TIES

Number
Sidewall **23**
Longitudinal **4**
Marriage wall **5**
Shearwall **3**

ANCHORS

4 ft ☒ 5 ft **CTR**

FRAME TIES

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

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 X 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 2.76 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.

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. 73-77

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: 6" Spacing: 2"
Walls: Type Fastener: SCREWS Length: 3" Spacing: 18"
Roof: Type Fastener: LAGS Length: 6" Spacing: 2"

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 DAV

Type gasket FACTORY

Pg. 41

Installed:

Between Floors Yes X
Between Walls Yes END WALLS
Bottom of ridgebeam Yes X

Weatherproofing

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

Skirting to be installed. Yes _____ No X

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: _____

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 David Albright

Date _____

Duke



8-22-2011

- 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: U3524D - 32 X 52
4-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 (W/OPT. HEAT PUMP OH DUCT)
 (J) SUPPLY AIR (W/OPT. HEAT PUMP OH DUCT)

U-34

U-3524D

Overall Dimensions:
 Total Width: 52'-0"
 Total Depth: 10'-6 1/2"

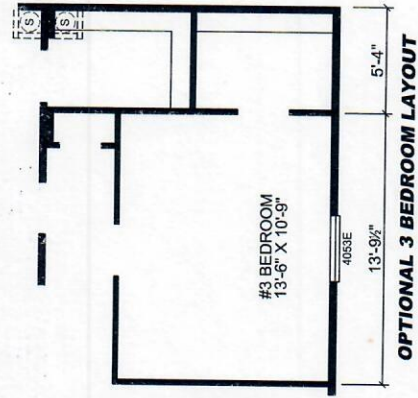
Room Dimensions and Features:

- Master Bedroom:** 12'-6" x 14'-6" (includes en-suite bathroom, closet, and optional shower).
- Living Room:** 17'-8" x 14'-6" (includes fireplace, TV, and optional patio door).
- Dining Area:** 10'-3" x 14'-6" (includes kitchenette with sink, stove, and refrigerator).
- Bathroom #2:** 10'-1" x 8'-6" (includes tub/shower, toilet, and vanity).
- Bedroom #3:** 10'-4" x 10'-9" (includes closet).
- Bedroom #4:** 10'-1" x 8'-6" (includes closet).
- Bedroom #2:** 11'-7" x 14'-2" (includes closet).

Other Features:
 - Central Hallway with multiple closets.
 - Optional Shower in Master Bedroom.
 - Optional Patio Door leading to a small outdoor area.
 - Various built-in furniture like shelving, wash/dry area, and storage units.

Date: 12/05/19

- All room dimensions include closets and square footage figures are approximate.
- Transom windows are available on optional 9'-0" sidewall houses only.
- Underpinning shown is optional.
- Live Oak Homes reserves the right to modify product offering at any time.



OAKS
Signature Series

3376

EMAIL	0
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466 SW DEPUTY J DAVIS LN,
LAKE CITY, FLORIDA 32024
(386) 752-5355 Fax: (386) 752-4757

CO-BUYER: 0

BUYER(S)		Trevor Mohammed		PHONE 404-380-2588		DATE 10/30/21	
ADDRESS		374 NW Spradley Rd LC FL 32055				Salesperson: Don Downs	
DELIVERY ADDRESS		TBD NW Spradley Rd Lake City FL 32055					
MAKE & MODEL		LIVE OAK U-3524D					
SERIAL NUMBER		LOGHA30072777AB		YEAR 2022		BEDROOMS 4X2	FLOOR SIZE L 32 W 52 HITCH SIZE L 32 W 56 STOCK NUMBER 1770
LOCATION		R-VALUE	THICKNESS	TYPE OF INSULATION	COLOR	PROPOSED DELIVERY DATE	
CEILING	27	9 1/5	ROCKWOOL				
EXTERIOR	11	3 1/2	FIBERGLASS				
FLOORS	22	7	FIBERGLASS				
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16 CRF, SECTION 460.16.							
OPTIONAL EQUIPMENT, LABOR, AND ACCESSORIES							
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			
Furnished				NO			
Unfurnished				AGREE			
Customer responsible for any wrecker fees incurred on lot.				AGREE			
Wheels & axles deleted from sale price of home.				AGREE			
Electrical Hookup				Included			
Type of A/C				HP			
Type of Skirting				ROCK			
Type of steps				WOOD CODE			
NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE							
DESCRIPTION OF TRADE-IN		YEAR	BEDROOMS	SIZE			
MAKE		N/A	N/A	N/A			
MODEL							
TITLE NO.		SERIAL	COLOR				
N/A		N/A					
TEN 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.							
Freedom Mobile Home Sales, Inc DEALER							
Valid Unless Signed by Steve Smith (Vice Pres)							
Agent							
SIGNED X _____				BUYER			
SOCIAL SECURITY NO. 084-50-6685							
SIGNED X _____				BUYER			
SOCIAL SECURITY NO.							

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

Order #: 5175	Label #: 85935	Manufacturer: LIVE OAK	(Check Size of Home)
Homeowner: MOHAMMED	Year Model: 2022	Single _____	
Address: NW SPRADLEY RD	Length & Width: 52/56 x 32	Double X	
City/State/Zip: LAKE CITY FL 32055	Type Longitudinal System: 4 OTI	Triple _____	
Phone #:	Type Lateral Arm System: 4 OTI	HUD Label #:	
Date Installed:	New Home: <input checked="" type="checkbox"/> Used Home: _____	Soil Bearing / PSF:	
Installed Wind Zone: II	Data Plate Wind Zone: II	Torque Probe / in-lbs:	
Permit #:			
Note:			

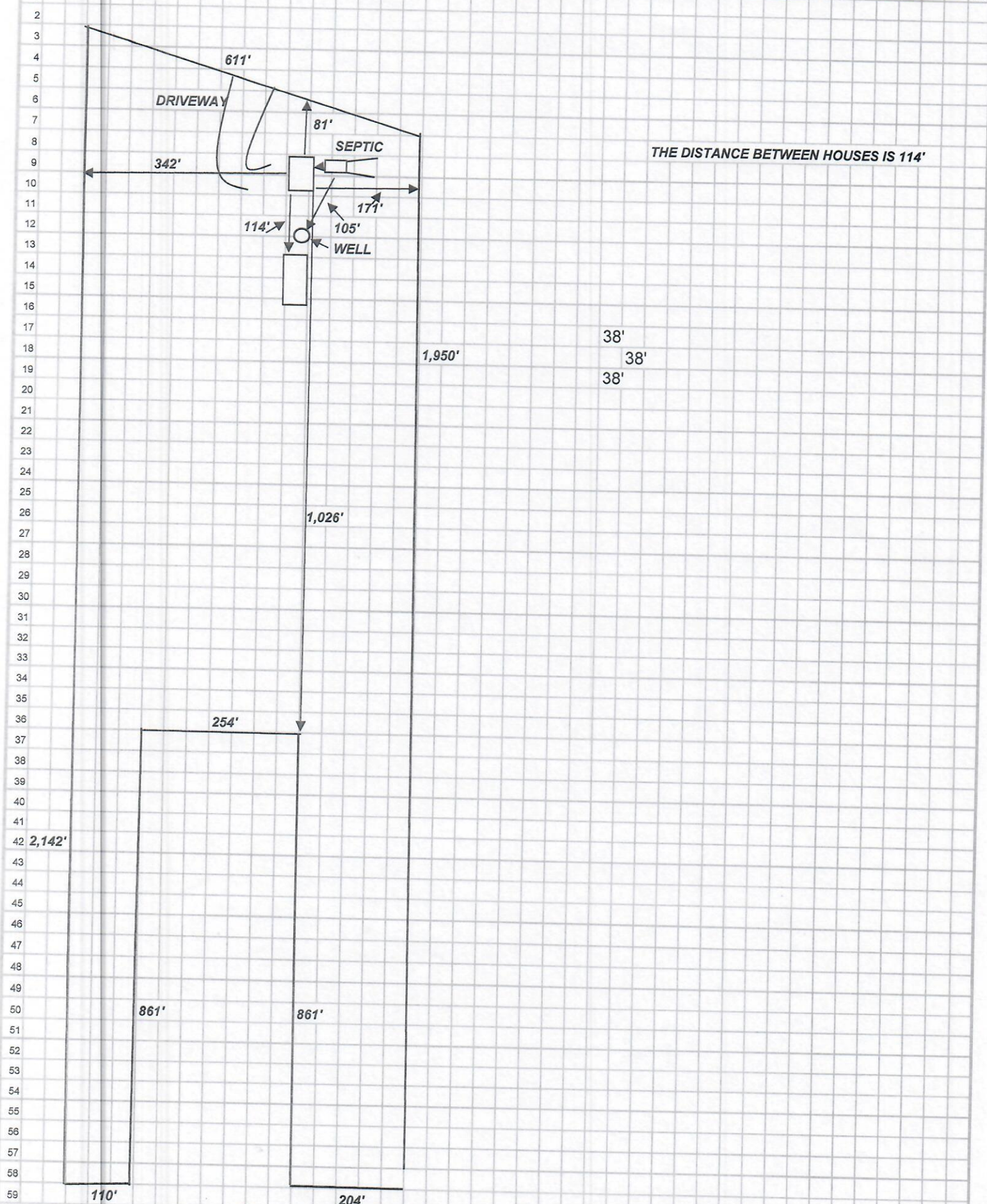
STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL
85935

LABEL #	DATE OF INSTALLATION
DAVID E ALBRIGHT	
NAME	
IH / 1129420 / 1	5175

LICENSE # ORDER #
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

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.



STATE OF FLORIDA
COUNTY OF COLUMBIA

SPECIAL TEMPORARY USE
LAND OWNER AFFIDAVIT

This is to certify that I, (We), Ramey Billeyh,
(State Name as it appears on the Property Appraisers Office website)
as the owner of the below described property:

Property tax Parcel ID number 33-15-17-04633-002

Subdivision (Name, lot, Block, Phase) _____

_____ Give my permission for
Nathan Billeyh to place a Mobile Home on this land.

☒ This is to allow a 2nd Mobile Home on the above listed property for a family member
through Columbia County's Special Temporary Use provision.

Family Members Name Nathan Billeyh

Relationship to Lessee Son

I (We) understand that the named person(s) above will be allowed to receive a building
permit on the property number I (we) have listed above and this could result in an
assessment for solid waste and fire protection services levied on this property.

[Signature]
Owner Signature _____ Date _____

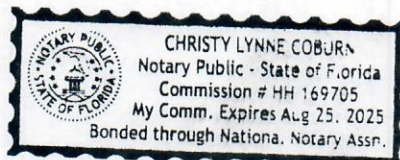
Owner Signature _____ Date _____

Sworn to and subscribed before me this 17th day of January, 2022, by
____ physical presence or _____ online notarization and this (these) person(s) are
personally known to me X or produced ID FL DL.

Christy Lynne Coburn
Notary Public Signature

Christy Lynne Coburn
Notary Printed Name

Notary Stamp/



Revised 5/21/2021