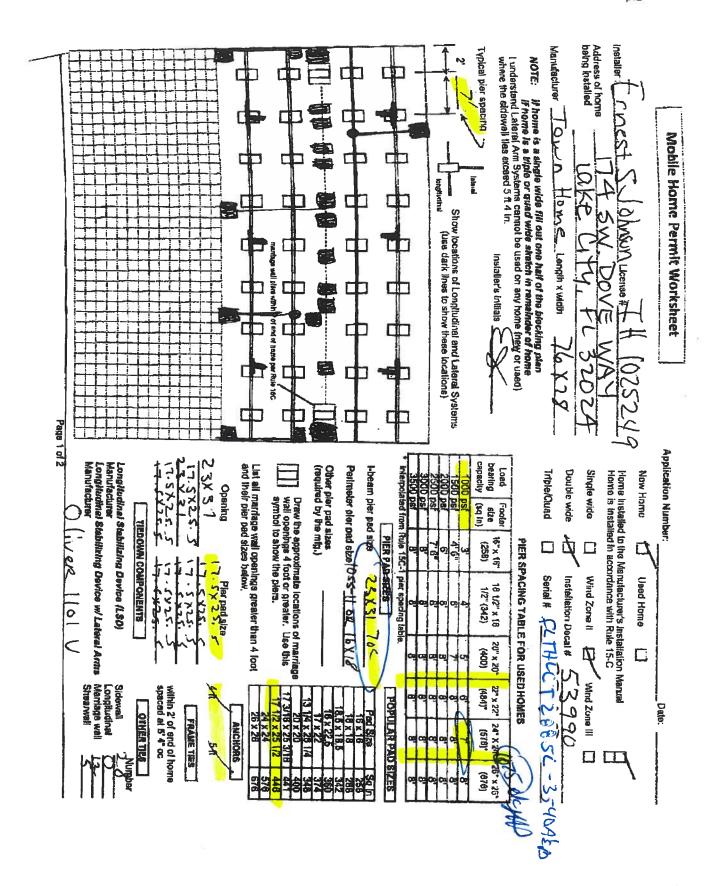
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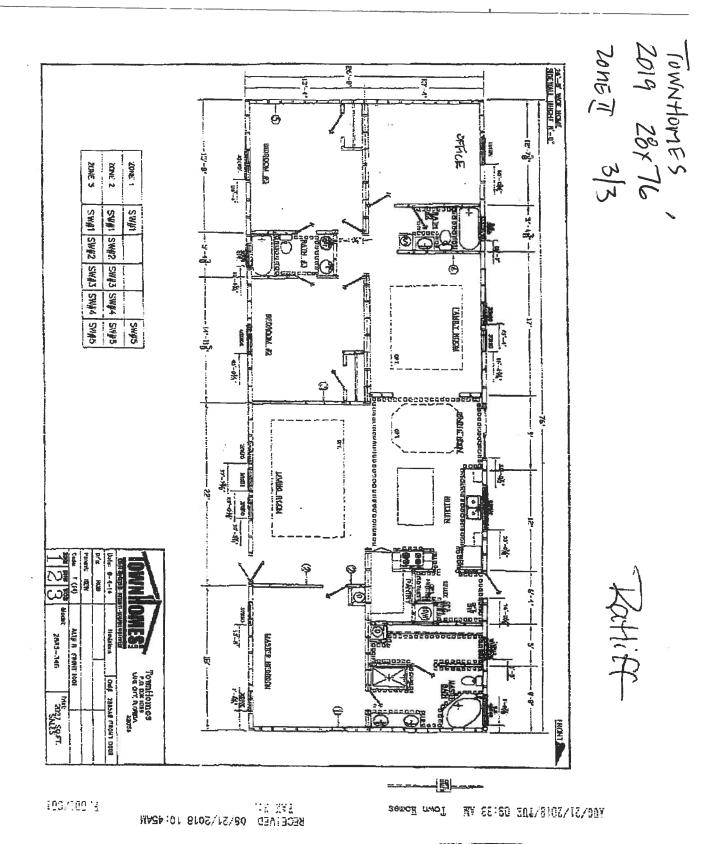
Dec 04 18 07:29a FMHS LEDIQUEMENT 3824874800 TT p.3
OCH 1985 PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
Far Office Use Only (Revised 7-1-15) Zoning Official Building Official
AP# 1812-0 Date Received 12-10-18 By 1# Permit # 37.535
Flood Zon(Z Development Permit Zoning H3 Land Use Plan Map Category ESA
Comments Replacing existing My
100 Dec
FEMA Map# Elevation Finished Floor River In Floodway
Recorded Deed or Property Appraiser PO Site Plan FH# 18-0959 DWell letter OR
Existing well D Land Owner Affidavit Installer Authorization DFW Comp. letter DApp Fee Paid
□ DOT Approval □ Parent Parcel # □ STUP-MH □ 911 App
□ Ellisville Water Sys Assessment Puid □ Out County □ In County □ Sub VF Form
Property ID # 15-58-16-03623-027 Supdivision H1-Dr1-Acres Lat# 6
New Mobile Home New Used Mobile Home MH Size 28x76 Year 2019
" Applicant Richard ov Kathy Rattiff Phone # (386) 623-9963/438-310"
* Address 174 SW DOVE WAY, Lake City, FC 32024
Name of Property Owner Kg. th CYN Phone# (386) 623 - 9963
· S11 Address 174 SW DOVE WAY, Lake City, FC 37024
" Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannes Valley Electric - Duke Energy
Name of Owner of Mobile Home Kichard or Kathy Kathithhone # (386) 623 - 9963 Address 174 SW DOVE WAY, Lake City, FL 32024
Relationship to Property Owner OWNLY
Current Number of Dwellings on Property
Lot Size Total Acreage 196
Co you: Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
Is this Mobile Home Replacing an Existing Mobile Home
Driving Directions to the Property GO ST. RD. 47, GO TO COLUMBIA CITY
go to caution LIGHT JUST PAST ELEMENTARY SCHOOL, go THRU 49ht,
go to 2nd Road on (R), TURN ON THRASHER, go around curve
to the (L) turn (L) on Dove way, 3rd place on the (R)
Name of Licensed Dealer/Installer Ernest 5 Johnson Phone # 352-494-8099
· Installers Address 22204 SE US HAN HAWThorne fl 32640
* License Number ## 1025 249 Installation Decal # 53990

LH-Spole to Kathy 12-12-18

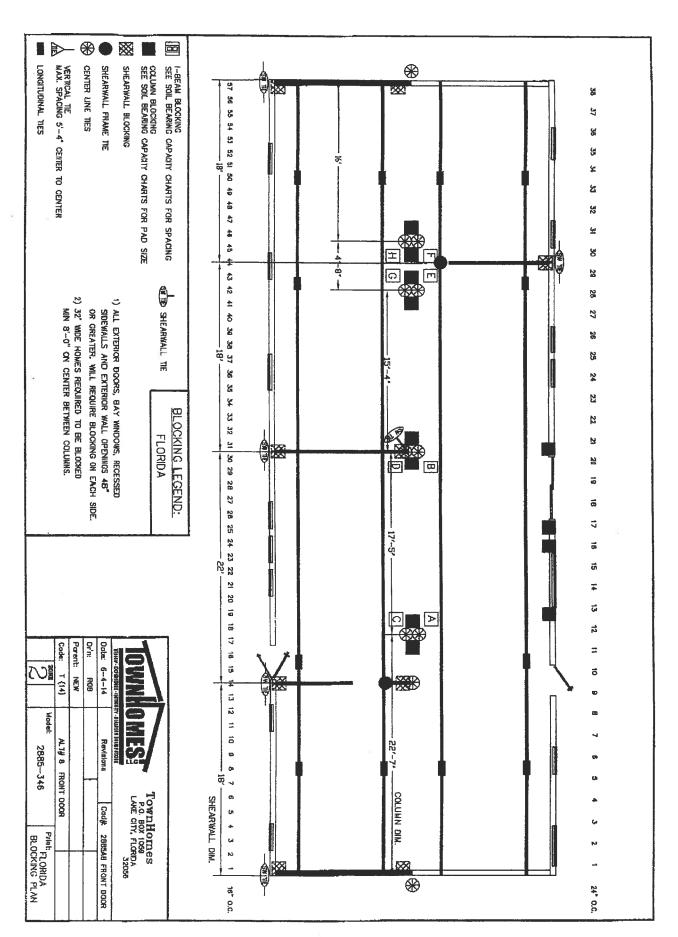


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1	2

nect electrical conductors between multi-wide units, but not to the main power ce. This includes the bonding wire between multi-wide units. Pg. Plumbing Plumbing Plumbing ect all sewer drains to an existing sewer tap or septic tank. Pg. ect all potable water supply piping to an existing water meter, water tap, or other endant water supply systems. Pg.	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name	Note: A state approved taleral arm system is being used and 4 ft. anchors are allowed at the sidewell locations. I understand 5 ft anchors are required at all centerline tie points where the torque lest reading is 275 or less and where the mobile home manufacturer may requires anchors with society holding bepacity. Installer's inflals	TORQUE PROBE TEST The results of the torque probe test is inch pounds or check here if you are declaring 5' enchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.	* Charb X (Charb X / Carbo	POCKET PENETROMETER TESTING NETHOD 1. Test the perimeter of the home at 8 locations. 2. Take the reading at the depth of the footer. 3. Using 500 lb. increments, take the lowest	The ponkst penctrometer tests are rounded down to psf or chack here to declare 1000 lb, soil without testing. x (900) x (900) x (900) x (900)	POCKET PENETRONETER TEST
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 MODEL MO	Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes NA Renge downflow vent installed outside of skirting. Yes NA Drain fines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes	ofications.	Type gasket installer's initials Type gasket installed: Pg. Hetween Floors Year Between Wells Year Bottom of rideabarh Year	I understand a proposity installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled manage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a casket	Walls: Type Fastener: 44 Length: 5 Spacing: 20 Walls: Type Fastener: 45 Length: 5 Spacing: 20 Type Fastener: 45 Length: 5 Spacing: 20 For used homes a milin, 30 pauge, 8" wide, gelvanized metal ship will be confered over the peak of the roof and between with galv. Gasket (easterproofine haddrages)	drahage: Natural Swale	Application Number; Site Propagation



p.q



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUI	MBER	12-27	CONTRACTOR	Ernest Johnson	PHONE
		THIS FORM MUST B	E SUBMITTED PRIOR	TO THE ISSUANCE OF A PERM	MIT
records of the Ordinance 89-6 exemption, get Any changes, t	subcontractor 6, a contractor neral liability i the permitted	rs who actually did r shall require all su nsurance and a val contractor is respo	the trade specific abcontractors to plid Certificate of Consible for the co	work under the permit. provide evidence of work competency license in Co	olumbia County.
ELECTRICAI.	Print Name License #:	HOMEON QUE	ATUFF /NEV_ alifier Form Attache	Signature 386 Phone #: (386	623-9963
MECHANICAL/		Michael Boll Gac1817716	and alifier Form Attache	Signature 7) 1/2 Phone #: 352-27 o	1 Bola 4-9329

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

1, Ernest SJd	hnsd/n, give this authority f	or the job address show below
only, 174 SW DOVE 1	NAY, Lake City, FL	3207A and I do certify that
	listed on this form is/are under m	
	se permits, call for inspections and	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Richard Ratliffs		Agent Officer Property Owner
Kathy Patliff	Har Raugh	Agent Officer
	•0	Agent Officer Property Owner
the license holder, realize that	em responsible for all permits p	inchanged and all world at
under my license and I am fully	responsible for compliance with a	I Florida Statutae Codes and
Local Ordinances.		
i understand that the State Licer	nsing Board has the power and au	tharity to discipling a Kanana
noide, to, violatious committed f	by him/her or by his/her authorized	December the same to the same
document and that I have full res	sponsibility for compliance granted	by issuance of such permits.
~ ~		·
2 mart	Star Tillion	
icense Holders Signature (Note	rized) License Nur	S249 12/4/18 Tiber Date
NOTARY INFORMATION: STATE OF:Florida	COUNTY OF: Columbia	,
he above license holder whose	Damain EDMANT S To	Varian
of I.D.)	no is known by me or has produce	ed identification Deconder 2018
Kebecca h arnau	-	
DTARY'S SIGNATURE	William Bearing	eVStamp)
	REBECCA L ARNAU Notary Public - State of Flori Commission # FF 328391	da
	328391	L.

My Comm. Expires Oct 18, 2019 Bonded through National Notary Assn.

Ionnie Brannon, Tax Collector

Proudly Serving The People Of Columbia County 135 NE Hernando Ave, Suite 125 Lake City, Florida 32055-4006

www.columbiataxcollector.com Account # R03623-027

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NUTTCE UF AD VALUKEIN I AAES AND INUN-AD VALUKEIN AUSBOOMELIN 2017 Real Estate Reminder

Skip The Trip. www.columbiataxcollector.com

- eCheck (Electronic payment from your checking account with no fee)
- Credit Gard (Fee added b) payment processor see website for fees) Print Your Receipt Instantly Online

CERTIFIED FUNDS OR CASH WHEN PAYING A DELINQUENT TAX BILL

> 15-5\$-16 0200/0200 .92 Acres N1/2 OF LOT 6 HI-DRI ACRES S/D UNIT 1. ORB 478-305, 850-1922 THRU 1926, QCD 1007-999, COR QC 1143-2654

> > \$0.00

RATLIFF KATHRYN C 174 SW DOVE WAY LAKE CITY FL 32024-5174

WALK-IN CUSTOMERS PLEASE BRING FOR YOUR RECEIPT Keep this portion for your records

R

AD VALOREM TAXES VALUE EXEMPTION 23,260 23,260 BOARD OF COUNTY COMMISSIONERS 8.01500 COLUMBIA COUNTY SCHOOL BOARD 0.74800 23,260 23,260 DISCRETIONARY 23,260 23,260 4 32000 LOCAL 23,260 23,260 1.50000 23.260 CAPITAL OUTLAY SUWANNEE RIVER WATER MGT DIST 23,260 0.40270 0.96200 23,260 23,260 LAKÉ SHORE HOSPITAL AUTHORITY **EXEMPTIONS APPLIED: H3 HX**

eBill

Scan to view your bill or sign up to receive future bills

TOTAL MILLAGE

columbiataxcollector.com Click "Register for eBilling"

NON-AD VALOREM ASSESSMENTS		. X 1
LEVYING AUTHORITY	RATE	AMOUNT
FFIR FIRE ASSESSMENTS GGAR SOLID WASTE - ANNUAL	Per Parcel Per Parcel	219.98 193.00
		•
TOTAL ASSESSMENTS		· · · · · · · · · · · · · · · · · · ·
		\$412.98
COMBINED TAXES AND ASSESSMENTS		9472-98

TCTAL TAXES

15.94770

PLEASE PAY 412.98	Apr 30, 2018 \$425.37	May 24, 2018 \$453.87	

Ronnie Brannon, Tax Collector

Proudly Serving The People Of Columbia County 135 NE Hemando Ave. Suite 125

Lake City, Florida 32055-4006 Account #: R03623-027

by email.

003

17831.0000

RATLIFF KATHRYN C 174 SW DOVE WAY LAKE CITY FL 32024

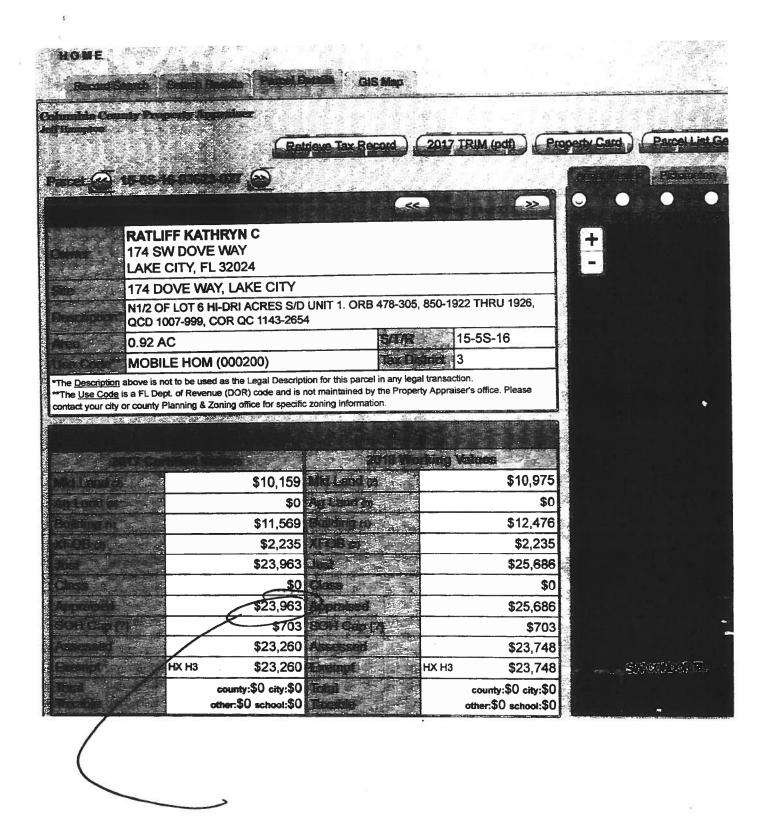
.92 Acres 15-5S-16 0200/0200 N1/2 OF LOT 6 HI-DRI ACRES S/D UNIT 1. ORB 478-305, 850-1922 THRU 1926, QCD 1007-999, COR QC 1143-2654

Pay online at www.columbiataxcollector.com AMOUNT DUE I am paying the following amount (check only one box) based on the date paid online, in the office or postmarked: ■ Mar 31, 2018 \$412.98 Apr 30, 2018 \$425.37 ☐ May 24, 2018 \$453.87 Delinquent Taxes - call for amount.

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

2017 Real Estate Reminder

Please Pay in U.S. Funds to Ronnie Brannon, Tax Collector 135 NE Hernando Ave., Suite 125, Lake City, FL 32055



CORRECTIVE QUIT CLAIM DEED

This Quit Claim Deed, made the 11th day of May, 2007 by James L. Singley Sr. & Patricia K. Singley, his wife, hereinafter called the Grantor, to Kathryn C. Ratliff, whose mailing address is 174 SW Dove Way, Lake City, FL 32024, hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH: That the Grantor, for and in consideration of the sum of TEN DOLLARS (\$10.00) paid by the said grantee, receipt whereof is hereby acknowledged, by these presents does remise, release and quit claim unto the said grantee forever, all the right, title, interest and claim which the said grantor has in and to the following described parcel of land and improvements (if any) and appurtenances thereto lying and being in <u>COLUMBIA</u> County, State of <u>FLORIDA</u>, viz:

N ½ OF Lot 6 Hi-Dri Acres S/D Unit 1 as recorded in Plat Book 4, Page 6, of the Public Records of Columbia County, FLORIDA.

Together with the following described double wide mobile home: 1982 Destiny VIN# 1994A & 1994B.

To Have and to Hold the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity to the only proper use, benefit and behoof of the said second party forever.

This corrective quit claim deed is being recorded to correct the witnesses and document type that was recorded in ORB 1007-999 in Columbia County, Florida.

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

Signed, sealed and delivered in the presence of:	
Kath R. Lord Witness Signature	frances & Surabley Grantor Signature
Printed Name	SAMES L. SINGLEY
Witness Signature Witness Signature	Grantor Signature
Judy L. Moore Printed Name	Printed Name
Witness Signature	Grantor Signature
Printed Name	Printed Name
STATE OF FLORIDA COUNTY OF COLUMBIA	Inst 200812003718 Date 2/25/2008 Time 2:14 PM Doc Stamp-Deed 0:00 DC P DeWitt Cason Columbia County Page 1 of 1
I hereby certify that on this day, before me, an officer acknowledgments, personally appeared <u>James L. Sing</u> known to me to be the persons described in and who experience me that they executed the same. Check one: Said person(s) is personally known to me. Said person(s)	duly authorized to administer oaths and take zley Sr. & Patricia K Singley, xecuted the foregoing instrument, who acknowledged
Witness my hand and official seal in the County and S This 2017 day of 120 Culture 20 Notary Signature	F. VONCILE DOW MY COMMISSION # DD 592031 EXPIRES: October 3 2010
Fronte Dow Printed Name	Bonded Thru Notary Public Underwriters

4 replacement 331.52 1016 99.73 240.98 28 PERMIEMENT Hi-Dry-Acres 113,25 331.52

WE WAY

LIMITED POWER OF ATTORNEY

I, Eynest S Janson, License # IH-1025249 Expiring 9/30/2016. DO HEREBY AUTHORIZE RICHARD OF KATHY RATIFITO BE MY REPRESENTATIVE AND ACT ON MY BE HALF IN ALL ASPECTS OF APPLYING FOR A MOBILE HOME MOVE ON PERMIT TO BE INSTALLED IN SIGNATURE 12 14 18 DATE
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF DAY OF REBECCA L ARNAU Notary Public - State of Florida Commission # FF 928391 My Comm. Expires Oct 18, 2019 Bonded through National Notary Assn. PERSONALLY KNOWN: PRODUCED ID:
YEAR 2019 MARE TOWNHOMES SN# 3540 A13 PROPERTY 174 SW DOVE WAY, Lake City, FLOVI da 32029

C&G MFG HOMES

278 SW DEPUTY J DAVIS LN PO BOX 2736

LAKE CITY, FL. 32056 (386)755-8885 / (386) 755-2386 FAX REPLACEMENT

PERMIT

PROPERTY LOCATOR ORDER FORM

ORDER
PAMES Pattiff DATE OF SALE:
ADDRESS: 174 SW DOVE WAY, Lake City, FL 32024
(3910) 1673 - 99163 SALESPERSON: OHEREALE
MAKE OF HOME: TOWNHOMES MODEL: TOWNWANDER SIZE: 28 y 76 BOX (386) 623-9963 7 By 80 44 70 H
MAKE OF HOME: 10WN/101010 MODELS 10086) 623-9963 28x 80+17CH
SERIAL NUMBER:
Front SKIRTING (TYPE): VERFICAL SIGRETING PO#: 5196
STEPS (TYPE): 3 CO CODE STEPS PO# 5196
X 560 MC (TYPE): 4 TON 14 Seer Package PO#: 5/960
DIRECTIONS TO HOME IST 475
AD US 90 E. GO INTERSTATE 75 South, TURN FRIT
60 47 SOUTH TO COMMBIA CITY, UKE going
to Fort White, Past caution light
in columbia City just past elementary
school, go down 7 ROADS TO THE (R)
Thrasher Rd go around corner to [] Turn (D) ON Dove, 3rd place on
Turn (L) ON JOVE, Jake place or
(R)

Replacement Dermit



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

OIT # 40-0020
PERMIT NO./8-19-59
DATE PAID: 12110
FEE PAID:
RECEIPT #: 1387/86

10 5	SYSTEM		THE THID DI	SPOSAL	RECEIPT #:]	200.00
CONT.		ION FOR	70		"	28118E
APPLICATION	EYID.	_				
[] New Sy	ystem)	Existing Sy	stem [] Holding Tank	: [] Tnno	vative
[] Vebori	L 1	Abandonment	: [] Holding Tank] Temporary		AUCTAG
APPLICANT:	Richa	ard Kart	IT K	athrum to	attill	
AGENT:	Kichar	d Rafliff	own	er	LEPHONE: (386	143831
MAILING ADDI	ess: 174	SW Dove 1	Nay, La	ke City, FL 32024	FL	
APPLICANT'S	RESPONSIBIL	ITY TO PROVIDE I	OCTIMENTS THE	RIZED AGENT. SYS 489.552, FLORIDA ON OF THE DATE TO STATUTORY GRANDS	A STATUTES.	IT IS THE
PROPERTY INF	ORMATION		. 1.		, , ,	
(iof. 8 6.	BLOCK:	SUBDIVISION	N: METES AN	D BOUNDS	DT.Amme	n. /9/17
		~ 03~43	027			
		02 - 10 - 0 500	DXOO SONIN	G: RES I/M O	R EQUIVALENT	: [NO]
PROPERTY SIZ	E: 98 A	CRES WATER SUPP	LY: [X] PR	IVATE PUBLIC [1<=2000GPD r	1>2000@pp
IS SEWER AVAI	CLABLE AS P	ER 381.0065, FS?	. []	DISTA	NCE TO SEWER	: N/A FT
PROPERTY ADD	RESS:					WA EI
DIRECTIONS TO	PROPERTY:	GOSTRD. 47	PAGE (A)	CITY CANTION		
		GO TO THEAT THE () 3rd	SHEE, ON LOT ON Y	the (R), Go The (R)	Dove wa	yon
						M E
BUILDING INFO	ORMATION [[X] RESIDENTIAL	[] COM	MERCIAL		
Unit Type of No. Establis	shment	No. of Bedrooms	Building Area Sqft	Commercial/Insti Table 1, Chapter	tutional Syste 64E-6, FAC	m Design
MOBILE	HOME	3 ~	2027	•		
2						
3						
4						
] Floor/Eq	uipment Dra	ains (loth-	15-			
	23	, other	(Specify)			
IGNATURE:			At 1	\mathcal{L}_{i}		

DH 4015, 08/09 (Obsoletes previous editions which may not be used).

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 28-0959

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11 17 1977													100 mg/m			
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	ed by:	· · ·			_											

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

* Replacement* 33 | 52 1,8-2959 949 113.75 240,98 127.76 -> 28 Septice Septic PERMIT Hi-Dry-Acres 100 F+ 271,52 331.52 DUE WAY