PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only	(Revised 7-1-15)	Zoning Official	Building Offic	ial
AP#	Date Rece	ivedBy	Permit #	
Flood Zone I Comments		Zoning	Land Use Plan Ma	ap Category
	Elevation	Finished Floor	River In F	loodway
Recorded Deed or	□ Property Appraiser	r PO □ Site Plan □ EH#		□ Well letter OR
☐ Existing well ☐ La	and Owner Affidavit	☐ Installer Authorization	□ FW Comp. letter	□ App Fee Paid
□ DOT Approval □ P	arent Parcel #	= STUP-I	MH	🗆 911 App
□ Ellisville Water Sys	□ Assessment	□ Out County	□ In County □ Sub	VF Form
operty ID # 34-4	5-14-03271-	Oll Subdivision		Lot#
New Mobile Home	eUse	ed Mobile Home	MH Size 30X	53 Year 2022
Applicant Permi	thing Services &	More, uc	Phone # (3610)288	9673
		Lakeaty Pl 320		
	- ICCOL COULT		7 7	
	•		•.	1417-1278
Name of Property	Owner ROSanne	u Ailinson	Phone# <u>954</u> -	
Name of Property 911 Address 43	OSW BIShop	Alinson Are Lakecity i	Phone# 954-	
Name of Property 911 Address 43	Owner ROSANNA OSW BIShop power company -	u Ailinson	Phone# 954- 1 32024 ht - Clay Ele	ctric
Name of Property 911 Address 43 Circle the correct	Owner ROSUNN OSW BISHOP t power company - (Circle One) -	Ave Lake City in FL Power & Light Suwannee Valley Election	Phone# 954- 1 32024 ht - Clay Electric - Duke Er	ectric nergy
Name of Property 911 Address 43 Circle the correct	Owner ROSANN OSW BISHOP t power company - (Circle One) -	Ave Lake city in FL Power & Lig Suwannee Valley Electrons	Phone# 954- 2024 ht - Clay Ele ectric - Duke Er Phone # 9	ectric nergy
Name of Property 911 Address 43 Circle the correct Name of Owner of Address 430 5	Owner ROSANNE OSW BISHOP t power company - (Circle One) - of Mobile Home R	Suwannee Valley Ele DSanne Allinso E Lake City Fr	Phone# 954- 2024 ht - Clay Ele ectric - Duke Er Phone # 9	ectric nergy
Name of Property 911 Address 43 Circle the correct	Owner ROSANNE OSW BISHOP t power company - (Circle One) - of Mobile Home R	Ave Lake city in FL Power & Lig Suwannee Valley Electrons	Phone# 954- 2024 ht - Clay Ele ectric - Duke Er Phone # 9	ectric nergy
Name of Property 911 Address 43 Circle the correct Name of Owner of Address 430 Relationship to P	Owner ROSANNE OSW BISHOP t power company - (Circle One) - of Mobile Home R	Schinson Ave Lake City in FL Power & Lig Suwannee Valley Ele DSanne Allinso e Lake City Fr Sch	Phone# 954- 2024 ht - Clay Ele ectric - Duke Er Phone # 9	ectric nergy
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Name of Property 911 Address 43 Circle the correct Name of Owner of Address 430 Relationship to P Current Number of Lot Size 1,3 Do you: Have Ex	Owner ROSANNE OSW BISHOP power company - (Circle One) - of Mobile Home R Oroperty Owner of Dwellings on Pro 33 ACVES	Sch Total Acreage ate Drive or need Culve	Phone# 954- 1 32024 ht - Clay Electric - Duke Er Phone # 9 33034	ectric nergy 54-647-03
Name of Property 911 Address 43 Circle the correct Name of Owner of Address 430 S Relationship to P Current Number of Lot Size 1.3 Do you: Have Ex	Owner ROSUNIVE OSW BISHOP (Circle One) - Of Mobile Home R OF Mo	ELAKE City From Some Lake City From Total Acreage (Putting Mobile Home_	Phone# 954- 132024 ht - Clay Electric - Duke Er Phone # 91 33034 et Permit or Culvert (Not existing NO)	Waiver (Circle one g but do not need a Culver
Name of Property 911 Address 43 Circle the correct Name of Owner of Address 430 Relationship to P Current Number of Lot Size 1,3 Do you: Have Ex	Owner ROSANNA O SW BISHOP Topower company - (Circle One) - of Mobile Home Row Froperty Owner of Dwellings on Pro Cisting Drive or Private arrently using) The Replacing an Extension of the Property (Parently (Parent	Schron Electry Frederick Schroll Acreage Road Sign) Ave Lake City Frederick Schroll Addings Total Acreage (Putting Road Sign) Ave Lake City Frederick Schroll Addings (Putting Road Sign) Ave Lake City Frederick Schroll Addings (Putting Road Sign)	Phone# 954- 1 32024 tht - Clay Electric - Duke Er Phone # 9 30004 Phone # 9 And	Waiver (Circle one of but do not need a Culver
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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, Ernest Scott Johns Installer License Holder Na.	give this authority forms	or the job address show below
only, 430 SW Bishop	Lakeuty Pl 32024	and I do certify that
the below referenced person(s)	listed on this form is/are under my	y direct supervision and control
and is/are authorized to purcha	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)
Lamanda Mote	Kamande liste	Agent Officer Property Owner
Connu Binins	ConneBinn	Agent Officer Property Owner
		Agent Officer Property Owner
under my license and I am fully Local Ordinances. I understand that the State Lice holder for violations committed	t I am responsible for all permits per	Il Florida Statutes, Codes, and uthority to discipline a license d person(s) through this
License Holders Signature (Not	arized) License No	5249 1114 22 Imber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF: alachua	
	and is known by me or has produ on this 14 day	ced identification
Shayon on mulan NOTARY'S SIGNATURE	Notary Public State of Flori	. \$

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUM			JChnson The issuance of a permit	352- PHONE_ 494-\$099
records of the Ordinance 89-6	ounty one permit will cover all trac subcontractors who actually did t 5, a contractor shall require all sul neral liability insurance and a valid	he trade specific we bcontractors to pro	ork under the permit. Per Flor vide evidence of workers' cor	rida Statute 440 and mpensation or
	the permitted contractor is responsible permitted contractor beginning any work			
ELECTRICAL	Print Name Glenn WhH License #: 130029157	ngton	Signature Hem Whattnat Phone #: 386 972	-170
	Qualifier Fo	orm Attached		
MECHANICAL/ A/C	Print Name Timoth Shot License #: CAC 05 18	to 75	Signature Juntay Short Phone #: 386 4910 -	w . 8224

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.

Qualifier Form Attached



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, Ernest Scot Johns Installers Name	give this authority a	and I do certify that the below
referenced person(s) listed on t	his form is/are under my direct su	pervision and control and
	ermits, call for inspections and sig	
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
Lamanda Mote	Lamander Jute	Permitting Services +
Connie Birns.	Gamanda Mite Connie Bivino	Permitting serves &
under my license and I am fully	t I am responsible for all permits p responsible for compliance with a	
Local Ordinances.		
holder for violations committed	nsing Board has the power and au by him/her or by his/her authorized sponsibility for compliance grante	d person(s) through this
License Holders Signature (Not	License Nu	5249 111422 Imber Date
NOTARY INFORMATION: STATE OF: Florida	COUNTY OF alachua	
personally appeared before me	e name is <u>Frankt led denor</u> and is known by me or has produ on this <u>14</u> day o	ced identification
Shows on metho Notary's signature		Seal/Stamp)

	namisge wall piers within 2 of end of home per Rule 15C	Ste Battony blocking than	Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	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 Typical pier spacing I lateral	Installer: Fryst Scott Johnson License # 1H 1025249 Address of home 430 SW BIShop being installed Lake Utyl TC 37024 Manufacturer Polym Hourboyr Length x width 32 x 52.	Mobile Home Permit Worksheet
FRAME TIES CONTINUE COMPONENTS Within 2' of end of home spaced at 5' 4" oc	.	Pad Size 57 25 25 16 x 16 256 Perimeter pler pad size 17.5 x 25.5 16 x 18 288 Perimeter pler pad size 17.5 x 25.5 360 Other pier pad sizes 16 x 22.5 360 (required by the mfg.) 17 x 22 374 To Draw the approximate locations of marriage 20 x 20 400	8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8' 8	PIER SPACING TABLE FOR USED HOMES 16" x 16" 18 1/2" x 18 20" x 20" 22" x 22" 24" x 24" 26" (256) 1/2" (342) (400) (484)" (576)" (1841)" (New Home Used Home	Application Number: Date:

Mobile Home Permit Worksheet

Application Number:

Electrical	Installer Name ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name EY Dest Scott Johnson Date Tested ASSUMED OLIVER 11017 USES 455 And Bod	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 requires anchors with 4000 Artholding canacity.	TORQUE PROBETEST The results of the torque probe test is 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.	3. Using 500 lb. increments, take the lowest reading and round down to that increment. x 1000 x 1000 x 1000	resting Me ne at 6 locat h of the foote	POCKET PENETROMETER TEST The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing. X 1000 x 1000 x 1000
	Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes NA Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Other:	Weatherproofing The bottomboard will be repaired and/or taped. Yes Pg. Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Type gasket ZII Installed: Pg. FACTOry Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are a result of a poorty installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	Walls: Type Fastener: 445 Walls: Type Fastener: 445 Roof: Type Fastener: 425 Roof: Type Fastener: 425 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 fractionarida metals and contents.	and organic material removed / Other drainage: Natural Swale Pad / Other Oth

Installer Signature The entry

hand Date

Installer verifies all Information given with this permit worksheet

manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the

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

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

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

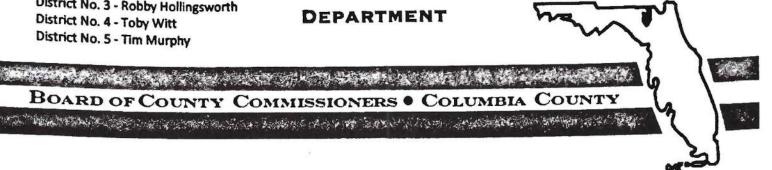
District No. 1 - Ronald Williams

District No. 2 - Rocky Ford

District No. 3 - Robby Hollingsworth

District No. 4 - Toby Witt District No. 5 - Tim Murphy

BUILDING AND ZONING DEPARTMENT



MOBILE HOME INSTALLER **OBLIGATION LETTER**

1, Frust Scott Johnson, of Dependable Mobile Home, license number

IH_1025249, do hereby agree to affix the installation decal onto this manufactured home as required by law and provide a copy of this decal to the permitting authority.

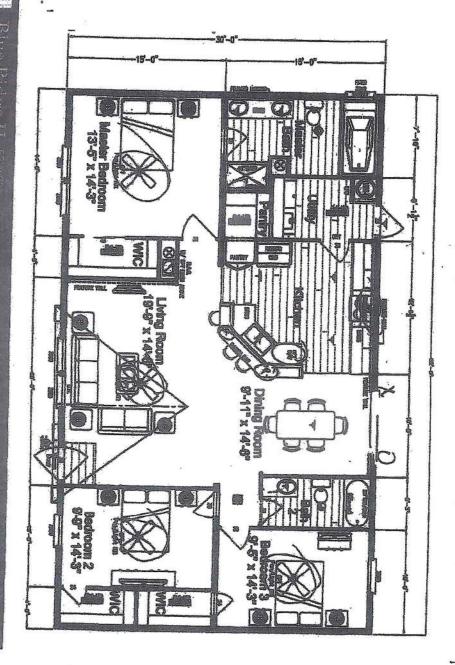
I further understand that once these decals become available I must provide them to obtain any further permits in Columbia County, Florida.

Job Information

Job Name: AllinSON

Location: 430 SW Bishop Lakeuty Pl 32024

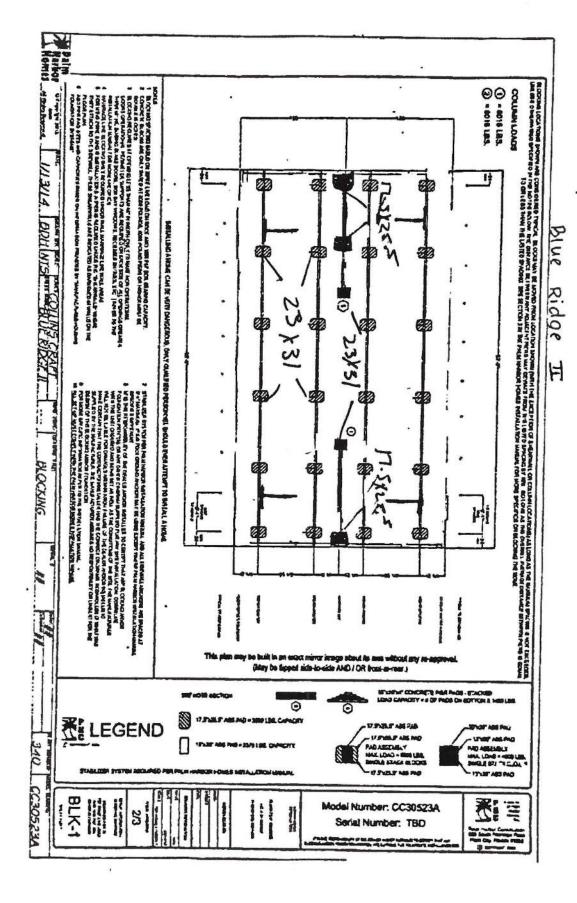
Application or Permit #:



Collins Craft Peries

BOOKED

Original Spec From PCMC 6MY 26 2021



AST DAKE IN PERO. MOIAE, O. KIANTENCZ FLONDA HEGISERED SIRVEYRY & MAPPIR REGISTRATION NUMBER 156611 SCAMP BY MIC 1 of 1 SURVEYOR'S CERTIFICATE.

1 YEARD CENTY THAT THIS SURVEY IS TRUE AND CORRECT TO THE BEST OF MEMORIPHE AND MELLE THIS SURVEY IS IN ACCOUNTY OF THE STATE OF TORON LAWS AND STANDINGS PROCINCE AS REQUIRED FOR THIS FIFE OF SURVEY. (oublide Road (PANED/PUBLIC) Mreel 34-45-14-03571-011 Allinson Rusanne THE ASSERT PARTIES TO AKE CITY, COLUMBIA COUNTY, FLORIDA HEREIT DER LEEREN TOWNSHIP 4 SOUTH, RANGE 16 EAST MONTH IN NAME POINT OF BEGINNING BOUNDARY SURVEY A PORTION OF SECTION 34 POINT OF COMMENCEMENT 8-11-22 SA-85-16-03271 OFF DATE SIGNED VACANT 375.20 NATIONAL FLOOD INSURANCE PROCRAM date dies 120215 7,389 D2-24-2009 PA-12-16-01259-012 PADINY 2 BASTY CERTIFIC TO.

OWRES & ALBERT AND POSUME C. NAMESON HATBOWN AND WITH 349.17 NB950'51'E 275 DER NEW HOUSE SP. COMMUNATY PANET NO FIRM MOSY DATE FYECHY DATE W. 16,05.60S REVATION DATE ,88 4 LEGEND. Gum ALL TATE FROM AND A CARD TATE OF THE COMMENS. MIND & MAY FINE 1 NOT MAD BEHINGTON THE STEAM THE ONIGNAL SAISTS SAIL IN A PLORIDA LICENZED SHALS HAVE TO MAD ALBERTON TO MAD ASSERTED FOR RIGHTS—GE-WAY. EASEMPTS
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1. LOCATION OF THE MANNOTACTURED FIGURE. .59 160.00 M_60,60.00N SECTION 14 TOTANDERS 4 SOUTH, RANGE TO EAST A FORTOW OF THE ESST 17 OF SEASON 17 OF SEASON AS A MONE FURTHERS AND VESSENDERS AS FOLLOWS COMMENTER AT THE SEASON SEASON AS FOLLOWS COMMENTER AT THE SEASON SEA TOP NOW IS STRONG OF THE STRON 80, MAPPIER HE GRAPPIE SCALE 40, 4 PROFESSONAL SUPPENDE A 4.6 SW BUSIGE AVENUE LANE CITY TI 19024 (361)244-5153 LEGAL DESCRIPTION: Reduc SURVEYOR'S NOTES VILL BUSNESS No.

22-0880 Revised 10/31/22

PURCHASE AGREEMENT

P.O. Box 2736 Lake City, FL 32056

332 SW Deputy J Davis Lane Lake City, FL



386-758-9538 Toll Free: 1-888-313-2899

Fax: 386-758-6889

Email: Showcasehomesdirect@comcast.net			Locally	Owned and Operated
SOLDTO CLUCKO POSANNE All	INSON PHO	DNE 954-647	7-0278 DA	TE 7/11/2Z
ADDRESS	cou	INTY Columbia	EM	AIL ///
In consideration of and subject to the terms and conditions stated in	n this purchase agreemen			
2066 raim Harbor Riber River	lac It	B.ROOMS	L 52 W 3	Z L I W
SERIAL NUMBER 140 F1 ZZ-ZZ 82 3 A R	□ NEW		SALESMAN	1
OPTIONAL EQUIPMENT, LABOR AND ACCESS		Grey	Vance	COX
11 / 1)	OKIES		PRICE OF UNIT	
Hud Home			Con Street Control of the State Control of the Stat	400,900.00
INCludes Schup,				
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SO, SELITING, CODE STEPS		N	ON-TAXABLE ITEMS	
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		VARIOUS FEES		700.00
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		ON ABOVE	\$	
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Manufacture of the second seco		PAYMENT	3000.00	
		2. LESS TOTAL CREDIT		
		3. UNPAID BALANCE C	F CASH SALE PRICE	\$204,677.00
		purchase price the execution of a Rei Agreement and its upon title to the was of the date of ei	re for is paid in fi tail Installment Co acceptance by a fir ithin described uni ther full cash paym uments even thoug	eller until the agreed ull in cash or by the ntract, or a Security lancing agency; there t passes to the buyer ent or on the signing th the actual physical late.
				REEMENT IS SUBJECT TO
				S CONCERNING CHANGES HE TIME OF SETTLEMENT.
FOR THE PURPOSE OF THIS AGREEMENT THE TERM (B MAY BE USED INTERCHANGEABLE AND MAY REPRES PLURAL IN MEANING. Seller is not permitted to make plumbing or electrical conne	SENT SINGULAR O	Buyer represents h suitable for his/her p	particular needs, and uyer relied upon i	ne unit and found it that it is of acceptable his/her judgment and
Certain natural gas or propane appliances where state or loo a licensed plumber or electrician so to do. Special buildir requiring plumbing, electrical or construction changes are of Seller or the manufacturer Seller is not responsible to	cal ordinances requing ordinances or land in the responsibility of	ty There is no assurance		emain level when placed,
sanitation permits, nor for local, county or state permits	involving restricti	upon any surface othe		
Seller is not permitted to make plumbing or electrical connectain natural gas or propane appliances where state or io a licensed plumber or electrician so to do. Special buildir requiring plumbing, electrical or construction changes are of Seller or the manufacturer. Seller is not responsible for sanitation permits, nor for local, county or state permits zoning. (COST OF CHANGES NEEDED FOR COMPLIANCE BUYER, IT IS SOLELY THE BUYERS RESPONSIBILITY TO AS HOME SITE IS ACCEPTABLE FOR HOME PLACEMENT WITH ANY LOCAL, STATE, OR FEDERAL GUIDELINES.)	SSURE THEIR CHOSE HOUT VIOLATION	unit, the optional equipm	the additional terms and lave been legally emancipa ent and accessories there	nderstand and agree to this conditions; that buyers are of sted; that the within described on and, insurance if included,
Seller is not responsible or liable for any delays caused accidents, strikes, fires, Acts of God, Independent Subconcause beyond Seller's control.	by the manufactur tractors, or any oth	er in is free from all encumbi each paragraph and provi	rances whatsoever, except sion of this contract is sev	hat the property being traded as noted above. Buyer agrees er-able; if one portion thereof emain in full force and effect.
BUYERS FULLY UNDERSTAND AND AGREE THAT THE BUYERS WILL I				
TO PAY ANY PRICE INCREASES GIVEN BY THE MANUFACTURER UN' WHICH TIME THE HOME IS BUILT AND INVOICED BY THE MANUFAC	TUDED	BUYERS HERE BY ACKNO CHASE AGREEMENT AN		
SHOWCASE HOMES DIRECT	DEALER SIGN	or The for	M 260	2 - A - A - DINCE
Not Valid Unless Signed and Accepted by an officer of the Compa	any SiGN	EDX Looa	ne Clie	BUYER BUYER
Approved, Subject to complete and final acceptance of financing by bank, finance company or c	ash payment in full.			

THIS AGREEMENT (TOGETHER WITH ITS ATTACHED SCHEDULES, ADDENDUM, AND EXHIBITS) CONTAINS AND SETS FORTH THE COMPLETE UNDERSTANDING AND AGREEMENT OF THE BUYERS AND THE SELLER, AND SUPERSEDES ALL PRIOR WRITTEN OR ORAL DISCUSSIONS, AGREEMENTS, COMMUNICATIONS, OR REPRESENTATIONS. THIS AGREEMENT MAY BE MODIFIED ONLY BY MEANS OF A WRITING SIGNED BY THE PARTIES TO THIS AGREEMENT. BUYERS AND SELLER BOTH HAD AN OPPORTUNITY TO REVIEW THIS ENTIRE AGREEMENT WITH THE COUNSEL OF THEIR CHOOSING. IN THE EVENT OF LITIGATION OR RELATED LEGAL ACTIONS INVOLVING THIS AGREEMENT, THE TERMS AND CONDITIONS OF THIS AGREEMENT SHALL BE INTERPRETED AS OF EQUAL WEIGHT BETWEEN BUYERS AND SELLER.

Columbia County Property Appraiser
Jeff Hampton

Parcel: << 34-4S-16-03271-011 (45584) >>>

Aprial Viewer

Owner & Pi	operty Info	Result	1 of 1
Owner	ALLINSON CHARL ALLINSON ROSAN 436 SW BISHOP AV LAKE CITY, FL 3202	NE G Æ	
Site			
Description*	COMM SE COR OF N W R/W BISHOP RD 7 349.17 FT, N 160 FT, I BISHOP RD, S 9 DEG 1871, WD 981-1320, N CT 1284-2612, WD 12 more>>>	17.90 FT FOR PO E 375.20 FT TO W G W 162.10 FT TO WD 1069-1187, CT	B, RUN W R/W POB. 861- 1284-1179,
Area	1.33 AC	S/T/R	34-4S-16E
Use Code**	SINGLE FAMILY (0100)	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 Va	alues	
2021 Certified Values	2022 Wor	king Values
There are no 2021 Certified	Mkt Land	\$17,290
Values for this parcel	Ag Land	\$0
	Building	\$0
	XFOB	\$0
	Just	\$17,290
	Class	\$0
	Appraised	\$17,290
	SOH Cap [?]	\$0
	Assessed	\$17,290
	Exempt	\$0
	Total Taxable	county:\$17,290 city:\$0 other:\$0 school:\$17,290

Aerial Viewer	Pictometery	Google Ma	aps	
© 2022 O 2	019 02016 0	2013 🔾	2010	Sales
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	100	B. B. TY		

Sales History	Manager and Assessment and Assessment					
Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
9/16/2022	\$100	1475/1712	QC	V	U	11

Dide Cleatel	D	1 1/ 50			
Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value

<u> </u>			7	1	
Code	Desc	Year Blt	Value	Units	Dims

▼ Land Breakdown						
Code	Desc	Units	Adjustments	Eff Rate	Land Value	
0000	VAC RES (MKT)	1.330 AC	1.0000/1.0000 1.0000/ /	\$13,000 /AC	\$17,290	

PREPARED BY AND RETURN TO: Name: Michele Christina Klimkiewicz 436 SW Bishop Ave

Lake City, FL 32024

Parcel No.: 34-4S-16-03271-011

This Instrument was prepared with no Title Examination being performed nor has the preparer issued any Title Insurance or furnished any opinion regarding the Title, Existence of Liens, the Quantity of lands included, or the location of boundaries. The Name, Address, Tax ID number, and Legal description was furnished by the parties to this instrument.

Inst: 202212018164 Date: 09/16/2022 Time: 1:55PM
Page 1 of 2 B: 1475 P: 1712, James M Swisher Jr, Clerk of Court
Columbia, County, By: VC
Deputy Clerk

(Space Above This Line For Recording Data)

Quit Claim Deed

THIS QUIT-CLAIM DEED is made as of this // day of September, 2022, by Michael Klimkiewicz and Michele Christina Klimkiewicz, husband and wife ("Grantor"), whose post office address is: 436 SW Bishop Ave Lake City, FL 32024 given to Charles M. Allinson and Rosanne G. Allinson, husband and wife, second party, whose post office address is:436 SW Bishop Ave, Lake City, 32024. ("Grantee").

WITNESSETH:

For good and valuable consideration to Grantor, the receipt whereof is hereby acknowledged, Grantor does hereby quitclaim, grant, bargain, sell, alien, remise, release and convey unto Grantee, its successors and assigns all of Grantor's right, title and interest in and to that certain property interest (the "Property") in Columbia County, Florida, as more particularly described as follows:

Section 34, Township 4 South, Range 16 East: A Portion of the East ½ of East ½ of said section 34, more particularly described as follows:

Commence at the Southeast corner of the Northeast ¼ of said section 34, thence run N 09°05'19" E, along the East line of said section 34, also being the West right of way line of SW Bishop Avenue, 717.90 feet to the point of beginning. Thence S 89°50'51" W, 349.17 feet; thence N 00°09'09"W, 160.00 feet; thence N 89°50'51" E, 375.20 feet to the East line of said Section 34 and the West Right of Way line of said SW bishop avenue; thence along said section line, S 09°05'19" W, 162.10 feet to the Point of Beginning. Said lands lying in Columbia County, Florida.

SUBJECT to taxes for 2022 and subsequent years, not yet due and payable; covenants, restrictions, easements, reservations and limitations of record, if any, without intention of creation or reimposing same.

SIGNATURE PAGE TO FOLLOW

IN WITNESS WHEREOF, the Grantor has caused thi first above written.	is Quit-Claim Deed to be executed and delivered the day and year
Signed, sealed and delivered.	Michael Bleuber
Mitness PRINT NAME: MICOVE MOORE Monday On Uniols	Michael Klimkiewicz
WITNESS () PRINT NAME: (Wendy Mireles STATE OF FLORIDA COUNTY OF JULIANIO D	Michele Christina Klimkiewicz
The foregoing instrument was acknowledged before me by meaday of September, 2022, by Michael Klimkiewicz and Michael	ans of (Yphysical presence or () online notarization this 16th
Signature of Notary Public Print, Type/Stamp Name of Notary	NICOLE MOORE Commission # HH 147061 Expires June 29, 2025 Bonded Thru Troy Fain Insurance 800-385-7019
Personally Known: OR Produced Identification:	X



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:

10/21/2022 4:10:57 PM

Address:

430 SW BISHOP Ave

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

03271-011

REMARKS: New address for Habitable structure (family home, business, etc.) on the parcel.

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:

MOORE, DAVID R.