

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official _____ Building Official OK JH 11-20-07

AP# 0711-39 Date Received 11-19-07 By G Permit # 26475

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Special Family Lot Permit Section 14.9
Abundant SF lot in pocket

FEMA Map# _____ Elevation 0 Finished Floor _____ River _____ In Floodway _____

☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ EH Release ☐ Well letter ☒ Existing well

☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from installer

☐ State Road Access ☐ Parent Parcel # _____ ☐ STUP-MH _____

14-55-16
Property ID # 03621-022 Subdivision no

- New Mobile Home _____ Used Mobile Home used Year 1987
- Applicant Kevin Kimball Phone # 386-623-1611
- Address 630 SW sherlock ter lake city FL 32024
- Name of Property Owner Tanya Terry Phone# _____
- 911 Address 964 SW Butzer Dr. L.C. 32024
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Kevin Kimball Phone # 623-1611
- Address 630 SW sherlock ter lake city FL 32024
- Relationship to Property Owner sister
- Current Number of Dwellings on Property one
- Lot Size 1 acreage Total Acreage _____
- 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 (ones)
- Driving Directions to the Property 47 to columbia city take Left
on 240. Right on Butzer follow all the way to the end take Left property on Right
Before stop sign "mobile home in field."
cell:
- Name of Licensed Dealer/Installer Tom Prater Phone # 1-850-879-7095
- Installers Address 2542 NE CATHAULDA, Lee, FL 32059
- License Number IH0008291 Installation Decal # 291431

PRELIMINARY MOBILE HOME INSPECTION REPORT

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

OWNERS NAME Kevin Kimball PHONE 386-754-8400 CELL 623-1611

ADDRESS 630 SW Sherlock Ter

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME 475 / 1st rd / 1st rd / on left corner of 1st rd in field behind brick house.

*** PLEASE CALL SEVERAL TIMES: VIBRATION MO IS OFF**
MOBILE HOME INSTALLER Tom Prater PHONE 850-971-5249 CELL 850-879-7095

MOBILE HOME INFORMATION

MAKE Windgate YEAR 87 SIZE _____ X _____ COLOR Tan

SERIAL No. W76S143FB01076A

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

INTERIOR: INSPECTION STANDARDS

- (P or F) - P= PASS F= FAILED
- ☒ SMOKE DETECTOR () OPERATIONAL () MISSING
 - ☒ FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
 - ☒ DOORS () OPERABLE () DAMAGED
 - ☒ WALLS () SOLID () STRUCTURALLY UNSOUND
 - ☒ WINDOWS () OPERABLE () INOPERABLE
 - ☒ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
 - ☒ CEILING () SOLID () HOLES () LEAKS APPARENT
 - ☒ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

- EXTERIOR:**
- ☒ WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
 - ☒ WINDOWS () CRACKED / BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
 - ☒ ROOF () APPEARS SOLID () DAMAGED

STATUS: ☒ **APPROVED** WITH CONDITIONS: Re-inspected 6-27-07 Approved
Need window screens, Need Light Fixture repair
☐ **NOT APPROVED** NEED REINSPECTION FOR FOLLOWING CONDITIONS 1

SIGNATURE [Signature] ID NUMBER 306 DATE 6-27-07

OK
DP

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Madison
OWNERS NAME Kevin Kimball PHONE 386-754-8400 CELL 623-1611
INSTALLER Tom Prater PHONE 850 9715249 CELL 850-879-7095
INSTALLERS ADDRESS _____

MOBILE HOME INFORMATION

MAKE Wind Gate YEAR 1987 SIZE _____ X _____
COLOR Tan SERIAL No. W76S143FB01010A ~~378~~
WIND ZONE II SMOKE DETECTOR 2

INTERIOR:
FLOORS Good
DOORS Good
WALLS Good
CABINETS Good
ELECTRICAL (FIXTURES/OUTLETS) Good

Requested 1-22-07
630 sw sherlock Terr
47 S, (L) Cates, (L) Sherlock,
on the corner of 1st Dirt Road
to the left in the field
behind brick house.

EXTERIOR:
WALLS / SIDING minor Dings & 2 Dents
WINDOWS Good
DOORS Good

STATUS:
APPROVED ☒ NOT APPROVED _____

NOTES: _____

INSTALLER OR INSPECTORS PRINTED NAME Thomas J. Prater
Installer/Inspector Signature [Signature] License No. TH0002291 Date 1-2-06

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 6/20/2007 DATE ISSUED: 6/20/2007

ENHANCED 9-1-1 ADDRESS:

964 SW BUTZER DR

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

14-5S-16-03621-010

Remarks:

Address Issued By:


Columbia County 9-1-1 Addressing / GIS Department

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

816

Approved Address

JUN 20 2007

911Addressing/GIS Dept

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 6/20/2007 DATE ISSUED: 6/20/2007

ENHANCED 9-1-1 ADDRESS:

964 SW BUTZER

DR

LAKE CITY FL 32024

PROPERTY APPRAISER PARCEL NUMBER:

14-5S-16-03621-010

Remarks:

Address Issued By: 
Columbia County 9-1-1 Addressing / GIS Department

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

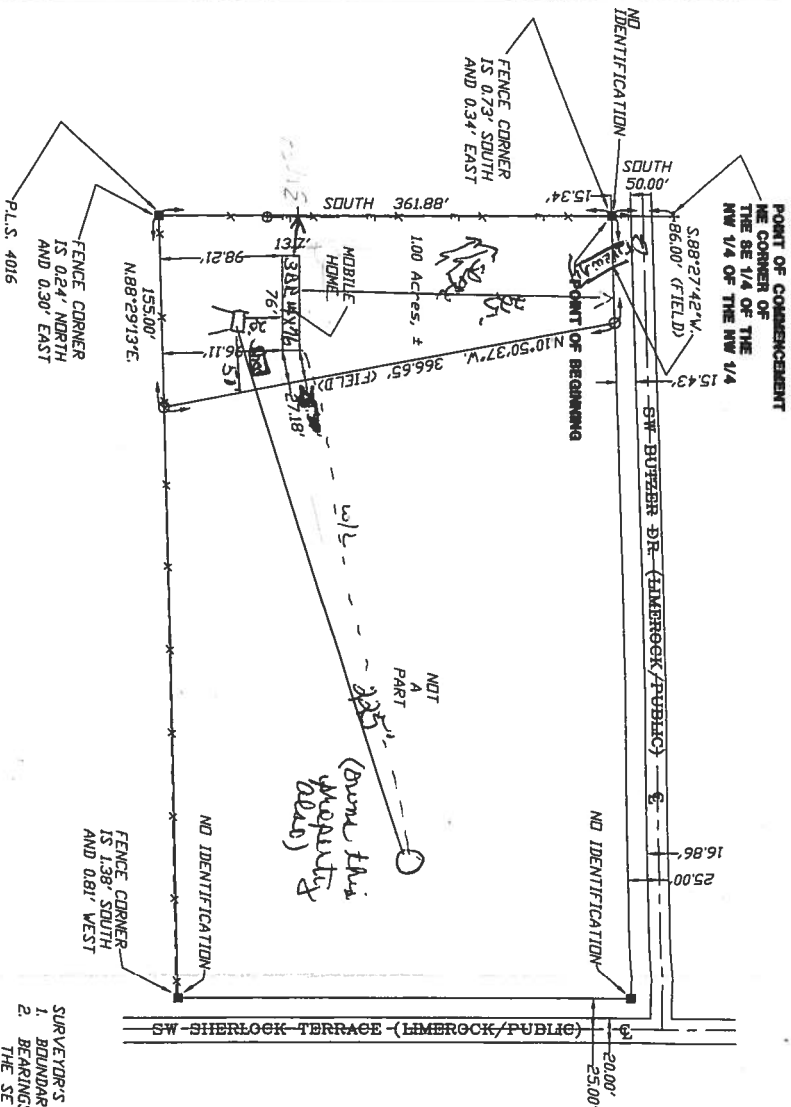
816

Approved Address

JUN 20 2007

911Addressing/GIS Dept

BOUNDARY SURVEY IN SECTION 14, TOWNSHIP 5 SOUTH,
RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.



SCALE: 1" = 100'

- SYMBOLS: L, E, G, E, N, D.
- 4"x4" CONCRETE MONUMENT FOUND
 - 1"x1" CONCRETE MONUMENT SET
 - IRON PIPE FOUND
 - IRON PIN AND CAP SET
 - POWER POLE
 - WATER METER
 - CENTERLINE
 - WELL
 - SATELLITE DISH
 - TELEPHONE BOX
 - ELECTRIC LINES
 - WIRE FENCE
 - CHAIN LINK FENCE
 - WOODEN FENCE

DESCRIPTION:
A PART OF THE NORTH 41.21 FEET OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 OF THE NORTHWEST 1/4 OF TOWNSHIP 5 SOUTH, RANGE 16 EAST, SECTION 14, LESS AND EXCEPT 50 FEET OFF THE NORTH SIDE THEREOF FOR ROAD RIGHT-OF-WAY AND LESS AND EXCEPT 25 FEET OFF THE EAST SIDE THEREOF FOR PARTIAL ROAD RIGHT-OF-WAY, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:
COMMENCE AT THE NORTHWEST CORNER OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 OF THE NORTHWEST 1/4 OF TOWNSHIP 5 SOUTH, RANGE 16 EAST, SECTION 14, 50.00 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S.00°00'00"E., 366.65 FEET, THENCE N.88°29'13"E., 155.00 FEET, THENCE N.10°50'37"W., 366.65 FEET, THENCE S.88°27'42"W., 86.00 FEET TO THE POINT OF BEGINNING, CONTAINING 100 ACRES MORE OR LESS.

SUBJECT TO RESTRICTIONS, EASEMENTS AND OUTSTANDING MINERAL RIGHTS OF RECORD, IF ANY, AND TAXES FOR THE CURRENT YEAR.

- SURVEYOR'S NOTES:
1. BOUNDARY BASED ON MONUMENTATION FOUND.
 2. BEARINGS ARE BASED ON AN ASSUMED BEARING OF S.00°00'00"E., FOR THE WEST LINE OF THE SE 1/4 OF THE NW 1/4 OF THE NW 1/4 OF SECTION 14.
 3. THIS PARCEL IS IN ZONE "X" AND IS DETERMINED TO BE OUTSIDE THE 500 YEAR FLOOD PLAIN AS PER FLOOD RATE MAP, DATED 6 JANUARY, 1998 COMMUNITY PANEL NUMBER 120070 0225 B. HOWEVER, THE FLOOD INSURANCE RATE MAPS ARE SUBJECT TO CHANGE.
 4. THE IMPROVEMENTS, IF ANY, INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
 5. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED ON THIS SURVEY EXCEPT AS SHOWN HEREON.
 6. THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE COMMITMENT OR A TITLE POLICY.

CERTIFIED TO:
KEVIN KIMBALL

FIELD BOOK: 296
PAGE(S): 37

SURVEYOR'S CERTIFICATION

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND THAT I AM A LICENSED SURVEYOR IN THE STATE OF FLORIDA. I HAVE REVIEWED THE TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPMAKERS IN CHAPTER 6107-6, FLORIDA ADMINISTRATIVE CODE, PERTAINING TO SECTION 472.02(2), FLORIDA STATUTES.

DATE: 02/08/07
DRAWN BY: [Signature]
FIELD SURVEY DATE: 02/14/07
L. BRITT, PLS. 4016
L. BRITT, PLS. 4016
L. BRITT, PLS. 4016

BRITT SURVEYING
LAND SURVEYORS AND MAPPERS
830 WEST DUVAL STREET, SUITE 100, TALLAHASSEE, FLORIDA 32305
(904) 752-7163 FAX (904) 752-5573
WORK ORDER # L-18137

Number	Side wall	Longitudinal	Marriage wall	Shear wall
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73				
74				
75				
76				
77				
78				
79				
80				
81				
82				
83				
84				
85				
86				
87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				

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

Load bearing capacity (sq. ft.)	Footer size (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 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, note c.

Number	Side wall	Longitudinal	Marriage wall	Shear wall
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73				
74				
75				
76				
77				
78				
79				
80				
81				
82				
83				
84				
85				
86				
87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				

PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

X _____ X _____ X _____

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is _____ 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.

Notes: 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

Tom P. P. P.

Date Tested

10-10-07

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. 311

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 111

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

Site Preparation

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

Fastening multi wide units

Floor: _____
Walls: _____
Roof: _____
Type Fastener: _____ Length: _____ Spacing: _____
Type Fastener: _____ Length: _____ Spacing: _____
For used homes a min. 30 gauge, 6" 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 fastening requirements

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.

Type gasket Pg.

Installer's initials

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or lapped. 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 _____

Miscellaneous

Skirting to be installed. Yes _____ No _____
Range vent installed outside of skirting. Yes _____ N/A _____
Drain downflow vent installed outside of skirting. Yes _____
Electrical crossovers protected. Yes _____
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Thur J. P. P.

Date

10-10-07

Prator's Mobile Home Sales, LLC
220 SW Gunnals Trail, P.O. Box 835, Madison, FL 32340
Phone 850-973-2353 Fax 850-973-3438

Date: 11/15/07

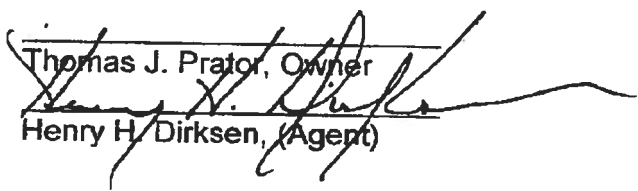
To: Building Department Personnel

From: Thomas J. Prator
P.O. Box 835
Madison, FL 32341

Dear: All Concerned Parties,

The purpose of this letter is to request that you allow Mr. Kevin Kimball To pick up the necessary documents regarding the appropriate Permit.

Sincerely,


Thomas J. Prator, Owner

Henry H. Dirksen, (Agent)

TJP/hhd



STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 07-08660

Issued

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.

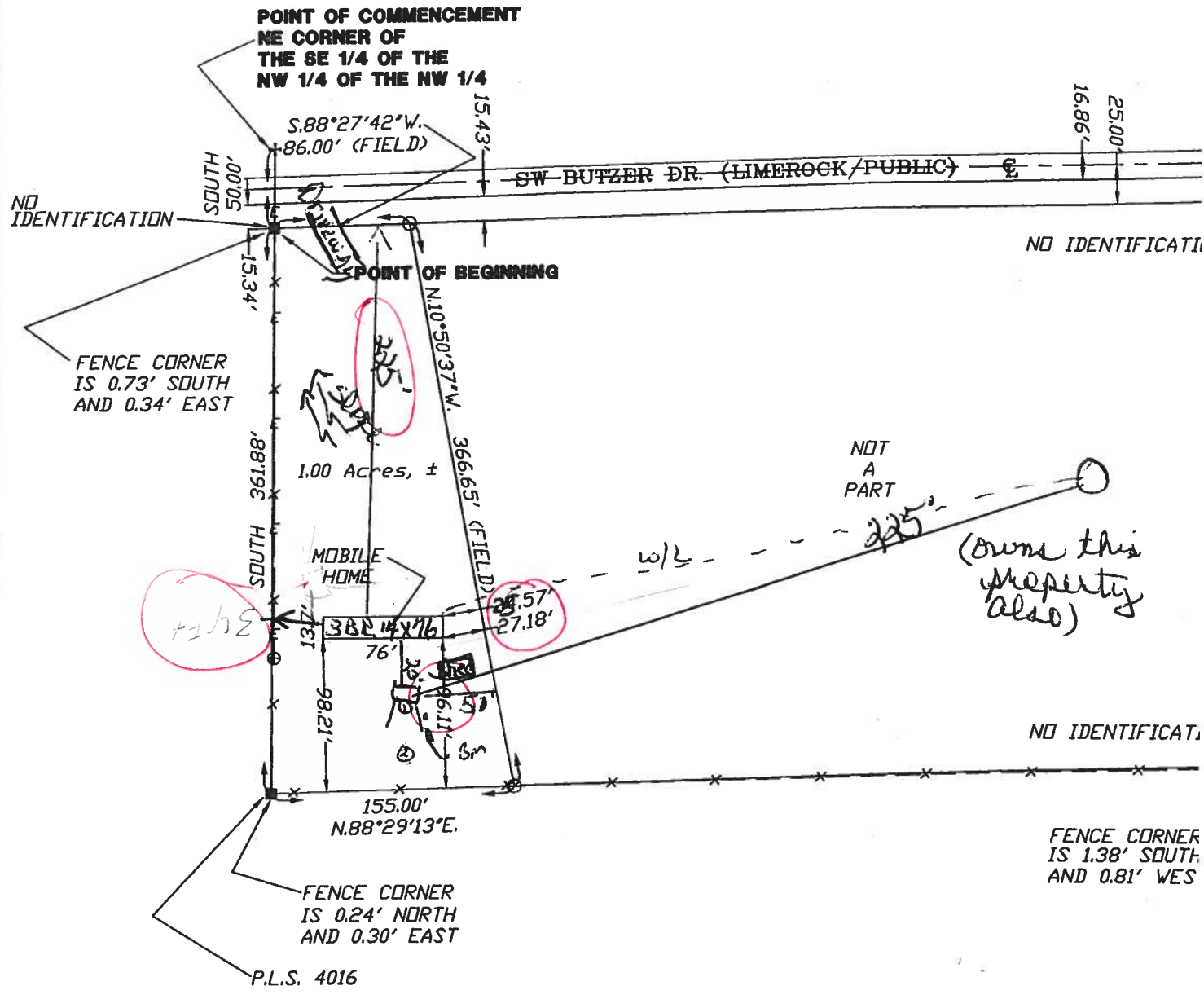
See Attached

Notes: _____

Site Plan submitted by: *Mark A. Miller* AGENT *Stoner*
Signature Title
Plan Approved ☒ **APPROVED** Not Approved _____ Date 11/13/07
By *ROM* **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

07-086



APPROVED

P. Kimball 11/13/07

Columbia CHD

CERTIFIED TO:
KEVIN KIMBALL

SURVEYOR'S CERTIFICATION

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO

02/08/07 02/14/07
FIELD SURVEY DATE DRAWING DATE

FIELD BOOK: 296 PAGE(S): 37

NOTE: UNLESS IT BEARS THE SIGNATURE AND THE ORIGINAL RAI: MAPPER THIS DRAWING, SKETCH, PLAT OR MAP IS FOR INFORMATIONAL PURPOSES ONLY

**STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL****291431**

LABEL #

DATE OF INSTALLATION

Thomas J. Prator

NAME

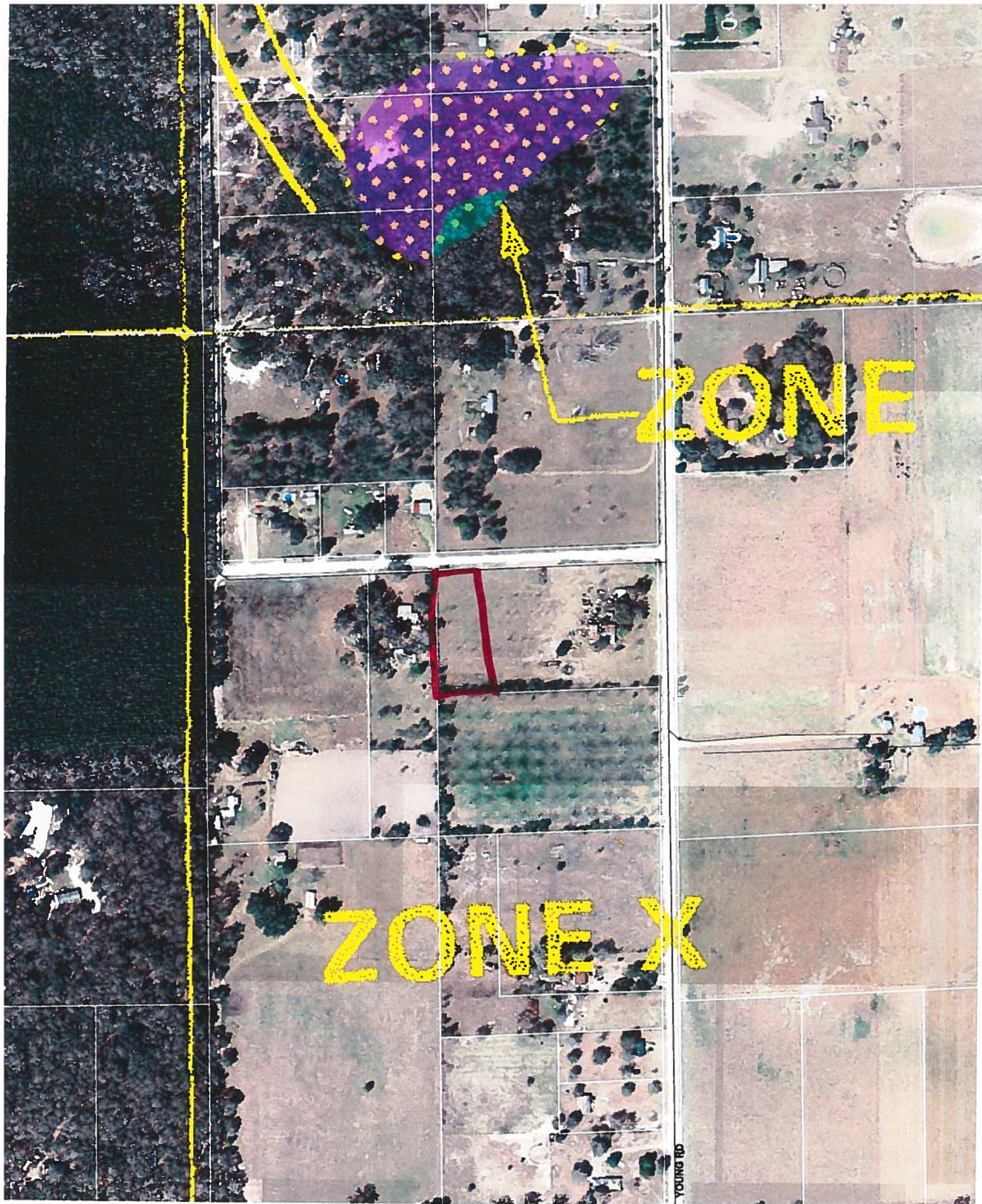
IH0000291

12748

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249,
320.8325 AND RULES OF HIGHWAY SAFETY AND MOTOR
VEHICLES, BUREAU OF MOBILE HOME AND RECREATIONAL
VEHICLE CONSTRUCTION.



0711-39

AFFIDAVIT OF SUBDIVIDED REAL PROPERTY
FOR USE OF IMMEDIATE FAMILY MEMBERS
FOR PRIMARY RESIDENCE

STATE OF FLORIDA
COUNTY OF COLUMBIA

BEFORE ME the undersigned Notary Public personally appeared.

Kevin Allen Kimball, the Owner of the parent tract which has been subdivided for immediate family primary residence use, hereinafter the Owner, and Tanya Terry, the family member of the Owner, who is the owner of the family parcel which is intended for immediate family primary residence use, hereafter the Family Member, and is related to the Owner as Sister, and both individuals being first duly sworn according to law, depose and say:

1. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit.
2. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference to the Columbia county Property Appraiser Tax Parcel No. 14-55-16-03621-010.
3. The Owner has divided his parent parcel for use of immediate family members for their primary residence and the parcel divided and the remaining parent parcel are at least ½ acre in size. Immediate family is defined as grandparent, parent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
4. The Family Member is a member of the Owner's immediate family, as set forth above, and holds fee simple title to certain real property divided from the Owner's parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No. 14-55-16-03621-022.
5. No person or entity other than the Owner and Family Member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for a family member on the parcel divided in accordance with Section 14.9 of the Columbia County Land Development Regulations.

7. This Affidavit is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the information contained in this Affidavit are true and correct.

[Signature]
Owner

Kevin A. Kimball
Typed or Printed Name

[Signature]
Family Member

Tanya Terry
Typed or Printed Name

Subscribed and sworn to (or affirmed) before me this 26th day of Nov., 20 07, by Kevin Kimball (Owner) who is personally known to me or has produced _____ as identification.

[Signature]
Notary Public



Subscribed and sworn to (or affirmed) before me this 28th day of November, 20 07, by Tanya Terry (Family Member) who is personally known to me or has produced _____ as identification.

[Signature]
Notary Public



SHIRLEY T. BARFIELD
Notary Public, State of Florida
My comm. expires July 25, 2008
Comm. No. DD 338034
☒ Personally Known
☐ ID _____

General Power of Attorney

I Thomas J. Prator hereby appoint Kevin Kimball as my attorney in fact to act in my capacity to pick-up the permit for his set-up which is being completed by Tom Prator Mobile Home Service. This Power shall be in full force and effect on the date below written and shall remain in force and effect until 12/30/07 or unless specifically extended or rescinded earlier by either party.

Dated 12-04, 2007.

By: Thomas J. Prator

Before Me, the undersigned authority, on this 4TH day of DEC., 2007, personally appeared TOM PRATOR to me well known to be the person described in and who signed the Foregoing, and acknowledged to me that he executed the same freely and voluntarily for the uses and purposes therein expressed. State of FLORIDA County of MADISON

WITNESS my hand and official seal the date aforesaid.

NOTARY PUBLIC

Henry H. Dirksen

My Commission Expires: April 16, 2011

