| DATE @2/11/2008 Columbia County Building Permit This Permit Must Be Prominently Posted on Premises During Construction | | | | | PERMIT 000026736 | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------|------------------------------------------------|--------------------------------|----------------------------------------------------------------|--|--|
| APPLICANT | CHIDI EV | BENNETT | PHONE | 288-2430 | 000020730 | | |
| ADDRESS | 3104 | SW OLD WIRE RD | FORT WHITE | 200-2430 | FL 32038 | | |
| OWNER | | & ANGELA SILAS | PHONE | 755-9572 | <u>FL</u> 32038 | | |
| ADDRESS | 103 | NE OMAR TERR | LAKE CITY | 133-9312 | - FL 32055 | | |
| CONTRACTO | | ESTER KNOWLES | PHONE | 755-6441 | <u>1L</u> <u>32033</u> | | |
| LOCATION O | | | N-02-01-0208-1000000 | | - | | |
| LOCATION | r frofer | CURVES INTO OMAR TERR | IE KIOHI JUSI BEFORE | , KEGISTEK KI | | | |
| TYPE DEVEL | OPMENT | | STIMATED COST OF CO | NSTRUCTION | 0.00 | | |
| HEATED FLO | OR AREA | TOTAL AR | EA | HEIGHT | STORIES | | |
| FOUNDATIO | Ν | WALLS | ROOF PITCH | F | LOOR | | |
| LAND USE & | ZONING | AG-1 | MAX. | HEIGHT | 35 | | |
| Minimum Set | Back Requir | rments: STREET-FRONT 30.00 | REAR | 25.00 | SIDE 25.00 | | |
| NO. EX.D.U. | 0 | FLOOD ZONE A | DEVELOPMENT PERM | MIT NO. | | | |
| PARCEL ID | 28-1S-17- | 04583-006 SUBDIVISIO | ON | | | | |
| LOT | BLOCK | PHASE UNIT | TOTA | L ACRES | 1.23 | | |
| | | IH0000509 | Sh. 0 | Beni | A | | |
| Culvert Permit | No. | Culvert Waiver Contractor's License Nu | mber | pplicant/Owne | er/Contractor | | |
| EXISTING | | 08-0081 CS | <u></u> | Η | <u>Y</u> | | |
| Driveway Con | nection | Septic Tank Number LU & Zon | ing checked by App | roved for Issuar | nce New Resident | | |
| COMMENTS: | FLOOR 1 | ' ABOVE THE GRADED ROAD OR 2' ABO | OVE THE DIRT ROAD | | | | |
| 14.9 FAMILY | LOT PERM | ПТ | | | | | |
| N | | | | Check # or 0 | Cash 2586 | | |
| | | FOR BUILDING & ZONI | NG DEPARTMENT | ONLY | (footer/Slab) | | |
| Temporary Por | wer | Foundation | | Monolithic | (100tel/Slab) | | |
| | , | date/app. by | date/app. by | | date/app. by | | |
| Under slab rou | igh-in plumb | ping Slab | | Sheathing | g/Nailing | | |
| ** | | date/app. by | date/app. by | | date/app. by | | |
| Framing | date/ap | | above slab and below wood | l floor | | | |
| Electrical rough | 20 D | | | | date/app. by | | |
| 9.5 | - | date/app. by Heat & Air Duct | date/app. by | Peri. beam (Lin | date/app. by | | |
| Permanent pow | ver | c.O. Final | | Culvert | date/app. by | | |
| M/H tie downs | | | date/app. by | | date/app. by | | |
| | , blocking, e | | | Pool _ | | | |
| Reconnection | , blocking, e | date/ap | | 59 | date/app. by | | |
| | | date/ap Pump pole date/app. by date/app. by | op. by Utility Pole/app. by | date/app. | 57950000000 • • • • • • • • • • • • • • • • | | |
| M/H Pole | | date/ap Pump pole date/app. by Travel Trailer | Utility Pole/app. by | e | by | | |
| M/H Pole | | date/ap Pump pole date/app. by Travel Trailer | Utility Pol | date/app. | 57950000000 • • • • • • • • • • • • • • • • | | |
| M/H Pole | ate/app. by | date/ap Pump pole date/app. by Travel Trailer | Utility Pole/app. by date/app. by | date/app. | date/app. by | | |
| M/H Pole | ate/app. by | date/ap Pump pole date/app. by Travel Trailer \$ 0.00 CERTIFICATION FI | Utility Pole/app. by date/app. by EE \$ 0.00 | date/app. Re-roof SURCHARG | date/app. by | | |
| M/H Pole de BUILDING PE MISC. FEES 5 | ERMIT FEE | date/ap Pump pole date/app. by Travel Trailer \$ 0.00 CERTIFICATION FI | Utility Pole/app. by date/app. by EE \$ | date/app. Re-roof SURCHARC | date/app. by GE FEE \$ 0.00 TE FEE \$ 134.00 | | |
| M/H Pole de BUILDING PE MISC. FEES 5 | ERMIT FEE \$ 250.0 | date/app date/app date/app. by | Utility Pole/app. by date/app. by EE \$ | date/app. Re-roof SURCHARG WAS | date/app. by GE FEE \$ 0.00 TE FEE \$ 134.00 TAL FEE 510.36 | | |

FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

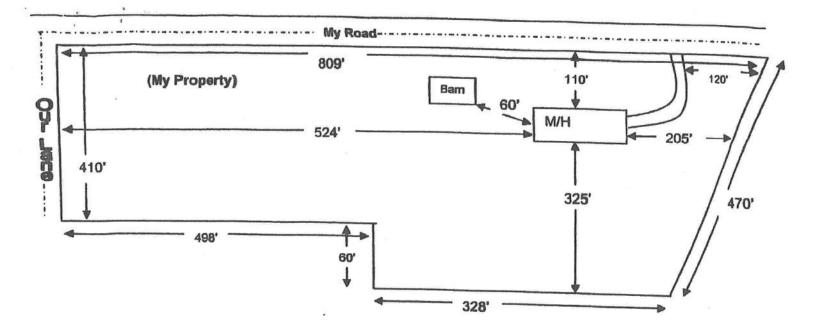
EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED TO BE IN ACTIVE PROGESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

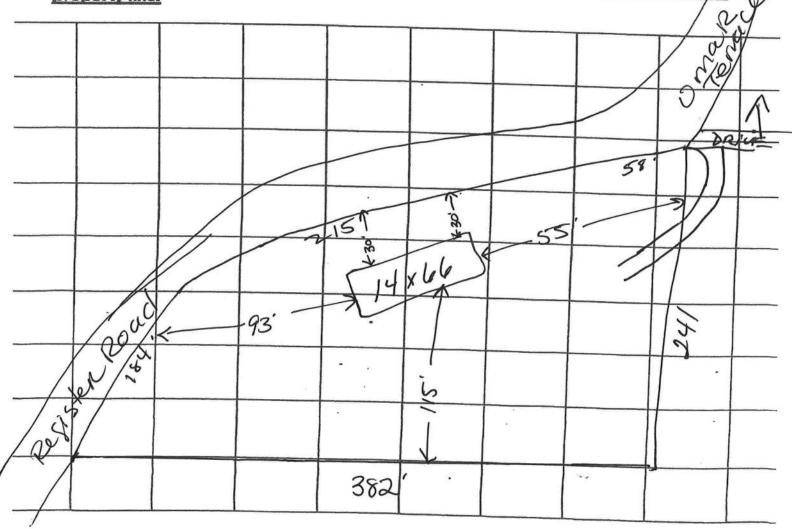
14.9 family lot permit 258%

| | PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | For Office Use Only (Revised 11-30-07) Zoning Official 3108 Building Official ok 77 # 117-08 |
| | 19# 0801-97 Date Received By 10 Permit # 26736 |
| | Flood Zone Plan Map Category A - 1 |
| | comments 2' above graded on I above |
| | + PRE. MX - Da Courty Approved paved posal |
| F | EMA Map# Elevation Finished Floor River In Floodway |
| | Site Plan with Setbacks Shown EH # 08-008 EH Release M Well letter Existing well |
| 1 | Copy of Recorded Deed or Affidavit from land owner Letter of Authorization from installer |
| | State Road Access Parent Parcel # 04583-004 - STUP-MH |
| 1 | Unincorporated area 🗆 Incorporated area 🗆 Town of Fort White 🗆 Town of Fort White Compliance letter |
| | |
| | |
| Pro | operty ID# <u>88-15-17-04583</u> -00 6 Jbdivision <u>NA</u> |
| ш | New Mobile Home Used Mobile Home Year 85 |
| 8 | Applicant Wendy Grennell Phone # 386-288-2428 Address 3104 5w Old Wire Rd Fort White FL 32038 |
| m | Address 3104 Sw Old Wire Rd Fort White FL 32038 |
| 8 | Name of Property Owner Donald + Angela Sila S Phone# 386-755-9572 |
| | 911 Address 103 NE Omar Terr Lake Coty fl 32055 |
| | Circle the correct power company - FL Power & Light - Clay Electric |
| | (Circle One) - Suwannee Valley Electric Progress Energy |
| | Name of Owner of Mobile Home Donald & angela 5/19 hone # 386-755-9572 |
| | |
| | Address/01 NE Omar Terrace lake Cety FL 3205 |
| в | Relationship to Property Owner |
| | Current Number of Dwellings on Property |
| | Lot Size Total Acreage 1.23 |
| | |
| | Do you : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Blue Road Sign) (Putting in a Culvert) |
| | Is this Mobile Home Replacing an Existing Mobile Home No OWES |
| | Driving Directions to the Property Huv 441 North to Recister Road |
| | (1 mile past Milton Country Store) turn (R) property |
| | on (R) just before Recentre Rd curus to |
| | (1) becoming Omar Terrace |
| | Name of Licensed Dealer/Installer Chester Knowles Phone # 386-755-6441 |
| | Installers Address 5801 5W SR 47 Colu City FL 32024 |
| 8 | License Number <u>THOOOSO</u> Installation Decal # <u>2923</u> |
| | |

1844 Message



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



| | - Matication 6-thutu-systems-Grane-Olister-Relainboxy | | Typical pier spacing Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) | of notice is a union or quad wide sketch in remainder of nome i understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall lies exceed 5 ft 4 in. | Manufacturer Fleetwood Langth x width 14 x 66 Rox NOTE: if home is a single wide fill out one half of the blocking plan | Installer Jessie Lichester Knowles Licenser TH 0000 509 Address of home Re eiste Lichester Roll |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| TIEDOWN COMPONENTS Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device (LSD) Longitudinal Stabilizing Device w/ Lateral Arms Marriage well Marriage well Marriage well Shearwall Shearwall | Other pier pad sizes (required by the mig.) Oraw the approximate locations of marriage wall openings 4 foot or greater. Use this A A B ZB 18 X Z S 17 X Z 17 34 18 34 17 34 18 34 18 37 19 34 10 34 10 34 11 34 12 34 13 14 34 15 34 17 37 18 37 19 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 34 10 | # 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 | 18 1/2" 20" x 20" 22" 24" 24" (6 2) (400) (484)" (6 7 8 8 8 | PIER SPACING TABLE FOR USED HOMES | Single wide Wind Zone II Wind Zone III Double wide Installation Decal # 29321 Triple/Qued Serial # 0326 | New Home Used Home Home installed to the Manufacturer's installation Manual |

POCKET PENETROMETER TEST

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

×

Floor.

Styload

POCKET PENETROMETER TESTING METHOD

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

× io

xtio

X

TORQUE PROBETEST

The results of the torque probe test is here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 4 foot anchors. inch pounds or check . A lead

A state approved lateral arm system is being used and 4 ft. reading is 275 or less and where the mobile home manufacturer may anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test requires anchors with 4000 to holding capacity.

installer Name

Date Tested

80-8-

Jessie L. Chester Knowles

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

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

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. $|< C_-|$

Sito Prepare

Water drainage: Natural Debris and organic material removed

Fastaning multi wido uni

Type Fastener: Type Fastener: Type Fastener: Spacing Spacing

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.

Capital (multisproding represent

of tape will not serve as a gaster I understand a property 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 poorly installed or no gasket being installed. I understand a strip Installer's initials / FL

Type gastest N/A
Pa. Single which

Installed:
Between Floors Yes
Between Walls Yes

Bottom of ridgebeam Yes

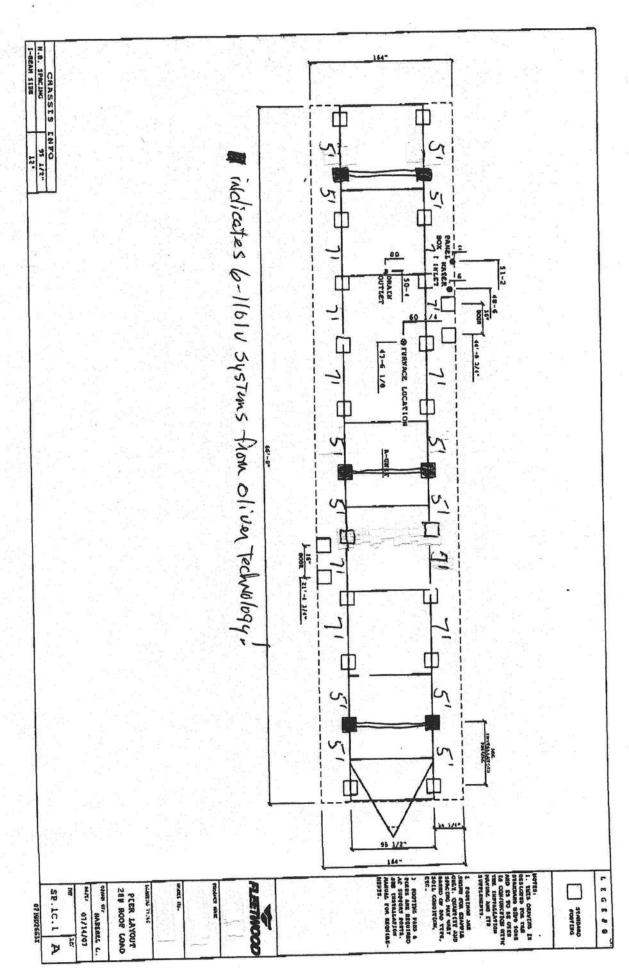
Buggoordang

Siding on units is installed to manufacturer's specifications. Yes - 2 Finance chimney installed so as not to allow intrusion of rain water. The bottomboard will be repaired and/or taped. Yes Pg 130-

Drain lines supported at 4 foot intervals. Yes Other: 15c-1 1500 1 2 5 Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. YOUND WHIS NI I SOON MONION DAIR STATE RULES OF MAY ⋚

Installer verifies all information given with this permit worksheet is accurate and true based on the

installer Signature namufacturer's installation instructions and or Rule 15C-1 & 2 Ser. Maulluvan 1-808



Wendy Grennell-Permit Services 3104 S W Old Wire Rd Ft White, FI 32038 386-288-2428 Cell 386-466-1866 Office / Fax

MOBILE HOME INSTALLER LIMIT POWER OF ATTORNEY

| Wendy Grennell, Rhoda Ingram or Shirley Bennett to be my representative and act on my behalf in all aspects of applying for a mobile home permit to be placed on the following described property. Property located in |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Mobile Home Owner Name: |
| Property Owner Name: Donald Silas |
| 911 Address: Plyster Way City Lake City |
| 911 Address: Plyster Way City Lake City Sec: 28 Twp: 15 Rge; 17 Tax Parcel # 04583-004 |
| Signed: Strie L'Chester Kmowles Mobile Hogne Installer |
| Sworn to and described before me this 14 day of Ganuary 2008 |
| Paula K. Jonescu-adams |
| Notary public |
| Paula K. Ionescu-Adams Personally known |
| Notary Name |
| DL ID |
| |



Wendy Grennell-Permit Services 3104 S W Old Wire Rd Ft White, FI 32038 386-288-2428 Cell 386-466-1866 Office / Fax

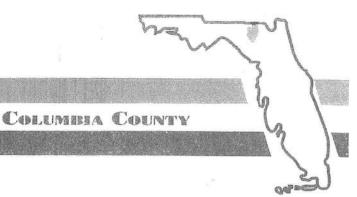
MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statues Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

| Jessie L. Chester Knowles license number I H0000509, states that the installation of the manufactured home for |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| installation of the manufactured home for installation of the manufactur |
| installation of the manufactured nome for Through Rec Stras |
| at 911 Address: City Lake Cety |
| will be done under my supervision. |
| Signed: Jessi J Chusty Mowles Mobile Home Installer |
| Sworn to and described before me this // day of fanual 2008 |
| Sworn to and described before me this 17 day of Junuary 2008 |
| |
| Taula K. Jones cu- adams |
| NOTATY PUBLIC |
| Haula K. Iowescu-Adams Personally known |
| N22700 20001 |
| DL ID |
| |





BOARD OF COUNTY COMMISSIONERS

January 14, 2008

Ms. Emma J. Thomas 101 NE Omar Terrace Lake City, FL 32055

RE: Parcel # 28-15-17-04583-004

Dear Ms. Thomas:

You recently inquired about splitting your property and deeding a portion to your son. Under Article 14, Section 14.9 of Columbia County's Land Development Regulations you are allowed to do so providing you can meet the following criteria:

- 1. Your property is zoned Agriculture or Environmentally Sensitive.
- 2. The split is at least one-half acre in size and the remaining parcel is at least one-half acre.
- 3. The division is by recorded deed.
- 4. The person receiving the divided portion must be an immediate family member.
- The person receiving the divided portion must establish their primary residence on the new parcel.
- The lot must comply with all other conditions for permitting and development as set forth in the Land Development Regulations.

Based on the information you have provided to us, you meet the above listed requirements.

If you have any other questions, please do not hesitate to contact me.

Sincerely,

Connie F. Scott Planning Technician

> BOARD MEETS FIRST THURSDAY AT 7:00 P.M. AND THIRD THURSDAY AT 7:00 P.M.

| | STATE OF FLORIDA, COUNTY OF COLUMBIA |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| When recorded, mail to: | I HERERY CERTIFY, that the above and foregoing is a true copy of the original files in this office. |
| Neme: Emma Thomas | P. DeWOTT CASON, CLERK OF COURTS |
| Name: | By Donue Cov |
| Name: Emma Thomas Address: 101 NE OMAR TERRACE La | 3 Date 01-10-0068 |
| la | May Someth May Something the State of the St |
| 1 1001 1 | COUNTY CO |
| City/State/Zip Code: Lake City FL | Doc Stamp-Deed: 0.00 |
| 32055 | DC,P.DeWitt Cason,Columbia County Page 1 of 2 |
| | Space above this line for Recorder's use |
| QUITCL | AIM DEED |
| | |
| KNOW ALL MEN BY THESE PRESENTS: | Hom As |
| Inat I(we), Identity of Top Do | liers (\$10.00) and other valuable considerations, do |
| hereby release, remise, and forever quitclaim unto | Donald hee Silas and |
| hereby release, remise, and forever quitciaim unto | Sorate Assessment |
| Angela D. Silas, his wif | |
| all right, title and interest in that certain Property | Situatoa III |
| State of qlanda_, and describ | ed as follows: |
| DESCRIPTION: | nk Cars |
| SECTION 28, TOWNSHIP 1 SOUTH, FLORIDA AND RUN THENCE S 00°1 SW 1/4 OF THE NE 1/4, 113.02 FEET 64°21'44" E, 58.89 FEET; THENCE 89°28'59" W, 382.15 FEET; THENCE 64°22'27" E, 215.84 FEET TO THE POSUBJECT TO RIGHT OF WAY FOR ACRES, MORE OR LESS. | |
| IN WITNESS WHEREOF, I(we) have hereunto | set my(our) hand(s) and seal this day of |
| January, 2008. | |
| ı | ≤ 0.10 |
| EmmA Jean Thomas | Jun Shoman |
| Printed Name of Releasor | Signature of Releasor |
| Dalated Name of Pologon | Signature of Releasor |
| Printed Name of Releasor | 1 |
| Ginger Cheatwood | Signature of Witness (If required by State Laws) |
| Printed Name of Witness (If required by State Laws) | Diffiding of Attribut (1) Indanas at a series |

ACKNOWLEDGMENT (States Other Than California)

| County of Columbia) ss. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| County of Columbia |
| On this 10th day of January ,2008, before me, the undersigned Notary Public, personally appeared Emma J. Thomas |
| known to me to be the individual(s) who executed the foregoing instrument and acknowledged the same to be his(her) (their) free act and deed. My Commission Expires: 08-03-2029 Notary Public |
| If acknowledged in the State of Florida, complete section(s) below: (Releasor) □ Personally Known (or) □ Produced Identification If applicable, Type of Identification Produced: FL DL T530-303-55-7335 Notary Public State of Florida Angele Cox My Commission DD457836 Expires 08/03/2009 |
| (Co-Releasor) □ Personally Known (or) □ Produced Identification If applicable, Type of Identification Produced: |
| ACKNOWLEDGMENT (State Of California) |
| State of California) State of California) State of California) |
| On this day of,, before me,, the undersigned Notary Public, personally appeared |
| personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is(are) subscribed to the attached instrument and acknowledged to me that he(she)(they executed the same in his(her) (their) authorized capacity (les), and that by his(her) (their) signature(s) of the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal. |
| Notary Public |

WARRANTY DEED

| THIS INDENTUPE, made this 21st day of | August : | PG2132 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Judy H. Watson, a single person | OFFICIA | AL RECORDS |
| | Social Securi | ty # |
| of the County of Columbia , Stat | Social Securi e of Florida | , grantor and |
| Leonard E. Thomas, Sr. and Emm. J. Thomas, | Social Securi | |
| Whose mailing address is Rt. 1, Box 1798, of the County of Columbia , Stat | Social Securion Lake City, Florida e of Florida | 32055 , grantee |
| WITNESSETH: This said grantor, for and in NO/100'S—Dollars, to her in hand paid by hereby acknowledged, has/have granted, bar grantee(s), her heirs and assigns forever, lying and being in Columbia County Florida | the grantee(s), the re gaincu, and sold to se the following describe | eceipt whereof is |
| SEE SCHEDULE * AND MADE A P. | ART HEREOF P. D | UMENIANT STAME 5600 ANGIBLE TAX ENTER OF RTS, COLUMBIA COLUMTY MINELE MARKET BE |
| Tax Parcel Number: | | |
| and said grantor does be 'y fully warrant the same against the lawful claims of all | the title toaid lar persons whomsoever. | ' and will defend |
| | | 140 T. NO. 1514 141 |
| IN WITNESS WHEREOF, Grantor(s) has hereun and year first above written. | to set grantor's hand | and seal the day |
| IN WITNESS WHEREOF, Grantor(s) has hereun and year first above written. Signed, sealed and delivered in our present witness | œi 🦳 | and seal the day |
| signed, sealed and delivered in our present witness Bonita Hadwin | œi 🦳 | |
| Signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS | Judy H. Watson | Watson |
| Signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS witness 95 | Judy H. Watson | Watson |
| Signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS | Judy H. Watson | ISS AUG 28 /H H: 53 |
| signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS Witness Kim Witson | Judy H. Watson | 1995 AUG 28 /H H: 53 |
| and year first above written. Signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS Witness Kim Witson PRINTED NAME OF WITNESS STATE OF FLORIDA | July H. Watson 10888 | 1995 AUG 28 /H H: 53 |
| and year first above written. Signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS Witness Kim Witson PRINTED NAME OF WITNESS STATE OF FLORIDA COUNTY OF COLUMBIA I hereby certify that on this day before me acknowledgments, personally appeared Judy Home to me the person(s) described in and who exacknowledged before me that she execute | July H. Watson 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 | ISS AUG 28 / H II 53 ISS AUG 28 / H II 53 Lified to take recruisers who instrument, who is relied upon the drivers license. Foresaid this BONITA HADWIN COMMISSION & CC 478216 EXPINES AUG 10, 1999 EXPINES AUG 10, 1999 |
| signed, sealed and delivered in our present witness Bonita Hadwin PRINTED NAME OF WITNESS Witness STATE OF FLORIDA COUNTY OF COLUMBIA I hereby certify that on this day before me acknowledgments, personally appeared Judy to me the person(s) described in and who exacknowledged before me that she execute following form(s) of identification of the Witness my hand and official seal in the Columbia day of August , 1995. | July H. Watson 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 10888 108888 108888 108888 108888 108888 108888 108888 108888 | 1995 AUG 28 /H II: 53 Lified to take recommend to the drivers license. Foresaid this BONITA HADWIN EXPIRES AUG 10, 1999 |

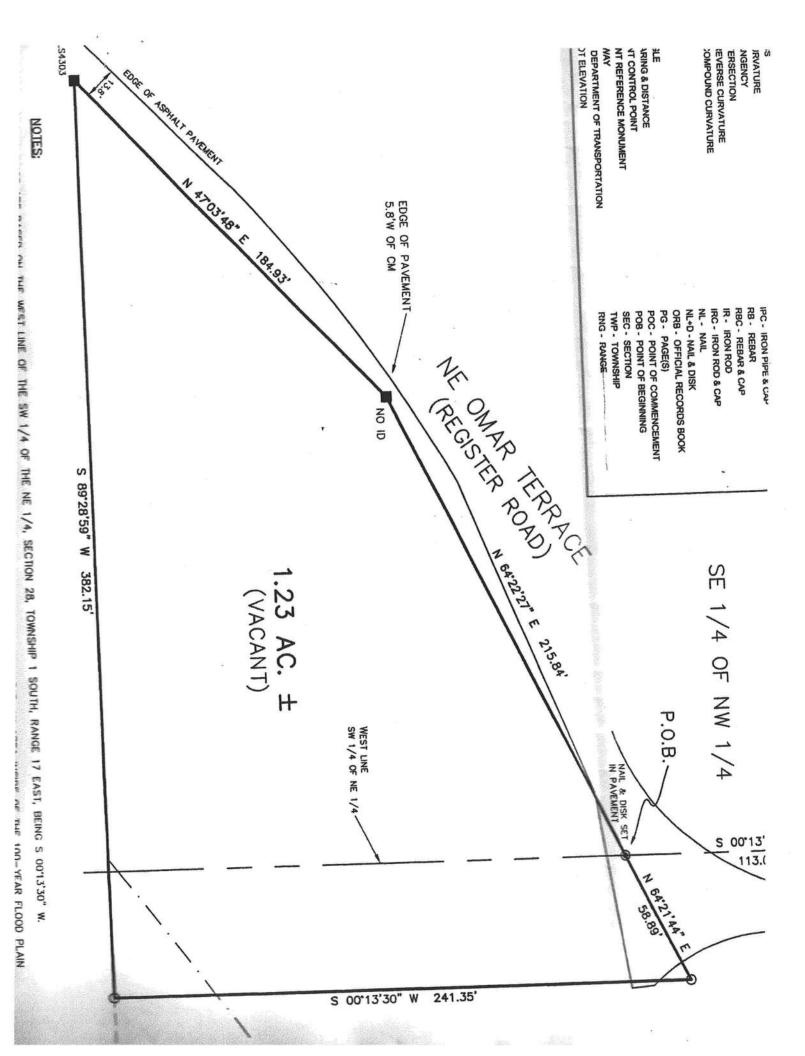
Prepared by and return to: Reflect in the Company 2015 South First Street Lake Lity, Florida 32055 Martha Bryan By: KW Schedule "A" attached to that certain Warranty Deed from Judy H. Watson, as grantor to Leonard E. Thomas, Sr. and Emma J. Thomas, his wife, as grantees.

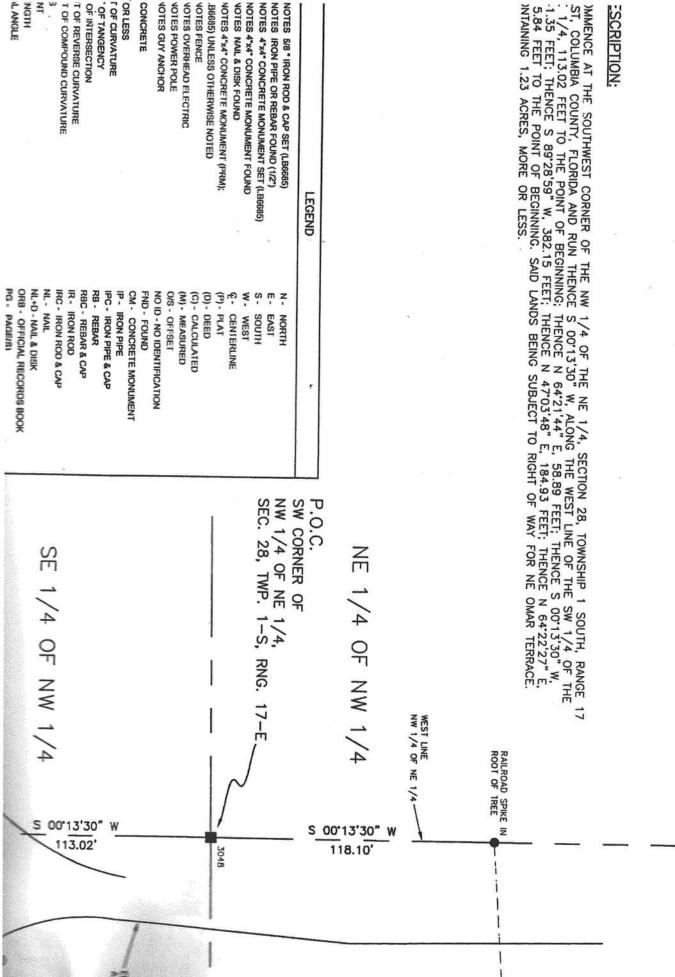
Begin at the SW Corner of the NW½ of the NE½, Section 28, Township 1 South, Range 17 East, Columbia County, Florida and run thence N 00°13'30" E, along the West line of said NW½ of NE½, 118.00 feet; thence N 86°20' E, 328.52 feet; thence S 71°54' E. 99.00 feet; thence S 6°58' E, 145.00 feet; thence S 78°07'58" W, 145.08 feet; thence S 13°38'50" W, 269.53 feet; thence S 89°35'03" W, 564.81 feet; thence N 47°09'52" E, 184.31 feet; thence N 64°25'40" E, 215.92 feet to the West line of the SW½ of NE½ of said Section 29, thence N 00°13'30" E, along said West line, 113.02 feet to the POINT OF BEGINNING. Said lands being subject to right of way for Register Road, a county maintained graded road. Containing 4.42 acres, more or less.

Subject to: Right of Way Easement to Suwannee Valley Electric Coop., Inc., as recorded in O.R. Brok 705, page 116, public records of Columbia County, Florida.

OFFICIAL SFERDE

T/35





Parent Parcel

Columbia County Property Appraiser DB Last Updated: 11/15/2007

2008 Proposed Values

Tax Record

Property Card

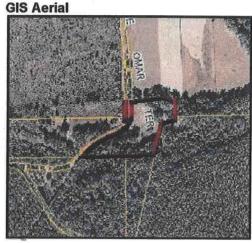
Interactive GIS Map

Search Result: 1 of 1

Parcel: 28-1S-17-04583-004 HX WX

Owner & Property Info

| Owner's Name | THOMAS EMI | 1A J | | |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|--|
| Site Address | OMAR | | | |
| Mailing Address | 101 NE OMAR TERR LAKE CITY, FL 32055 | | | |
| Use Desc. (code) | SINGLE FAM | (000100) | | |
| Neighborhood | 28117.00 | Tax District | 3 | |
| UD Codes | МКТА03 | Market Area | 03 | |
| Total Land Area | 4.420 ACRES | | | |
| Description | BEG SW COR OF NW1/4 OF NE1/4, RUN N 118 FT, E 328.52 FT, SE 71 DEG 99 FT, S 145 FT, SW 78 78 DEG 145.08 FT, SW 13 DEG 269.53 FT, W 564.81 FT, NE 47 DEG 184.31 FT, NE 64 DEG 215.92 FT, N 113.02 FT TO POB. ORB 809-2132 (ORB 1090-166 APPOINTS EMMA JEAN THOMAS AS PER REP OF EST) | | | |



Property & Assessment Values

| Total Appraised Value | | \$124,396.00 |
|-----------------------------|----------|--------------|
| XFOB Value | cnt: (4) | \$3,000.00 |
| Building Value | cnt: (1) | \$94,876.00 |
| Ag Land Value | cnt: (0) | \$0.00 |
| Mkt Land Value | cnt: (1) | \$26,520.00 |

| Just Value | , | \$124,396.00 |
|------------------------|---------------|--------------|
| Class Value | | \$0.00 |
| Assessed Value | | \$105,535.00 |
| Exempt Value | (code: HX WX) | \$25,500.00 |
| Total Taxable Value | | \$80,035.00 |

Sales History

| Sale Date | Book/Page | Inst. Type | Sale Vimp | Sale Qual | Sale RCode | Sale Price |
|-----------|-----------|------------|-----------|-----------|------------|-------------|
| 8/21/1995 | 809/2132 | WD | I | Q | | \$80,000.00 |

Building Characteristics

| Bldg Item | Bldg Desc | Year Bit | Ext. Walls | Heated S.F. | Actual S.F. | Bldg Value | |
|-----------|--------------------------|-------------|-----------------------------|----------------|-------------|-------------|--|
| 1 | SINGLE FAM (000100) | 1963 | Common BRK (19) | 1800 | 2780 | \$94,876.00 | |
| | Note: All S.F. calculati | ons are bas | sed on <u>exterior</u> buil | ding dimension | is. | | |

Extra Features & Out Buildings

| Code | Desc | Year Bit | Value | Units | Dims | Condition (% Good) |
|------|------------|----------|------------|-------|-----------|--------------------|
| 0294 | SHED WOOD/ | 1995 | \$1,600.00 | 1.000 | 0 x 0 x 0 | (.00) |
| 0030 | BARN,MT | 1995 | \$500.00 | 1.000 | 0 x 0 x 0 | (.00) |
| 0040 | BARN,POLE | 1995 | \$100.00 | 1.000 | 0 x 0 x 0 | (.00) |
| 0296 | SHED METAL | 1993 | \$800.00 | 1.000 | 0 x 0 x 0 | (.00) |

Land Breakdown

>> Print as PDF <<

| BEG S | W COR | OF NW | 1/4 OF NE 328.52 FT 145 FT, S | E1/4, | TH | OMAS E | MMAR | J TERR | | | 28 | -18-1 | 7-0458 | 3-004 | | | Columbia | Cou |
|----------------|--------|---------|-------------------------------------------|--------|------|---------|-------|-----------|-------|----------|------|-------|---------|-------|------|------------------------------------------------------------------------|-------------|------|
| 78 DE | - 145 | 08 FT | SM 13 L | DEC: | | | | | | | | | | ADDI | 0 | 11/15/200 8/10/200 | 4 DE | |
| BUSE | 00010 | 0 SING | LE FAM | AE' | ? Y | 1 | 800 | HTD A | REA | 114.75 | 51 I | NDEX | 281 | 17.00 | DIST | STR 2: MKT AR: (PUD1 AC NTCD APPR C: CNDO SUBD BLK LOT MAP# HX WX TXDT | PUSE | 001 |
| MOD | 1 SF | R | BATH | 2 | .00 | 2 | 329 | EFF A | REA | 57.3 | 76 E | -RATE | 100 | 0.000 | INDX | STR 2 | 8- 1S- 17 | |
| EXW | 19 CO | MMON BI | RK FIXT | | | 133 | 629 | RCN | | | | | | 1963 | AYB | MKT AR | EA 03 | |
| 8 | 00 | 000000 | 00 BDRM | | 3 | 71 | .00 | %GOOD | | 94,876 | B B | LDG V | AL | 1978 | EYB | (PUD1 | | |
| RSTR | 03 GA | BLE/HI | P RMS | | | | | | | | | | | | | AC | 4.420 | |
| RCVR | 03 CO | MP SHNO | GL UNTS | | | 3 FIELD | CK: | | | | | H | X AppY | 200 | 7 3 | NTCD | | |
| 8 | N/ | A | C-M8 | | | 3 LOC: | 101 | OMAR | TERR | NE LAKE | CI' | TY | | | 3 | APPR C | D | |
| INTW | 06 CU | ST PANI | EL HGHT | | | 3 | | | | | | | | | 3 | CNDO | | |
| 50% | 05 DR | YWALL | PMTR | | | 3 | | | + | 25 | + | | | | 3 | SUBD | | |
| FLOR | 14 CA | RPET | STYS | | 1.0 | 3 | | | IFSP | 1993 | I | | | | 3 | BLK | | |
| 10% | 08 SH | T VINY | L ECON | | | 3 | | | I | | I | | | | 3 | LOT | | |
| HTTP | 04 AI | R DUCTI | ED FUNC | | | 3 | | | 2 | | 2 | | | | 3 | MAP# | | |
| A/C | 03 CE | NTRAL | SPCD | | | 3 | | | 4 | | 4 | | | | 3 | HX WX | | |
| QUAL | 05 05 | | DEPR | 52 | | 3 | | | I | | I | | | | 3 | TXDT | 003 | |
| NDN | N/ | A | UD-1 | N/A | | 3 + | | 5 | 2 | 25 | -+ | -14-+ | 13 | F | 3 | | | |
| SIZE | 03 RE | CTANGLI | E UD-2 | N/A | | 3 IBAS | 1993 | | | | | I | FGR1993 | 3 | 3 | ECD1003-W | BLDG | TRA |
| CEIL | N/ | | | N/A | | 3 I | | | | | | I | 1 | | 3 | FGR1993=W W 25 S24 D W7\$ E7 | 13 BAS1993 | -W1 |
| ARCH | N/ | A | UD-4 | N/A | | 3 2 | | | | | | 2 | | 2 | 3 | W 25 S24 1 | E25\$ W52 S | 26 1 |
| PRME | 01 NO | NE | UD-5 | N/A | | 3 6 | | | | | | 6 | (| 5 | 3 | W7\$ E7 | 36 E14 N6 | E18 |
| TCH (| 01 01 | | UD-6 | N/A | | 3 I | | | | | | I | | τ | 3 | Harrison Carrella | | |
| MNDO | N/ | A | UD-7 | N/A | | 3 + | 2 | 7 | +-7+ | +- | | 18+ | 13 | + | 3 | | | |
| CLAS | N/ | A | UD-8 | N/A | | 3 | | | IFOP. | 1993 I | | | | | 3 | | | |
| OCC | N/1 | A | UD-5 UD-6 UD-7 UD-8 UD-9 % | N/A | | 3 | | | +-7+ | 14-+ | | | | | 3 | | | |
| COND | 03 03 | | 8 | N/A | | 3 | | | | | | | | | 3 _ | | PE | RMIT |
| SUB | A-ARI | EA % | E-AREA | SUB VA | LUE | 3 | | | | | | | | | 3 | NUMBER | DESC | |
| FGR93 | 3 | 38 55 | 186 1800 330 13 | | 7578 | 3 | | | | | | | | | 3 | | | |
| BAS93 | 180 | 00 100 | 1800 | 73 | 3326 | 3 | | | | | | | | | 3 | | | |
| SP93 | 61 | 00 55 | 330 | 13 | 3443 | 3 | | | | | | | | | 3 | | | SALE |
| OP93 | | 42 30 | 13 | | 529 | 3 | | | | | | | | | 3 | BOOK PAG | GE DAT | E |
| | | | | | | 3 | | | | | | | | | 3 | 809 | 2132 8/21 | /199 |
| | | | | | | 3 | | | | | | | | | 3 | GRANTOR JU | JDY H WATS | ON |
| | | | | | | 3 | | | | | | | | | 3 | GRANTEE LE | EONARD E S | R & |
| | | | | | | 3 | | | | | | | | | 3 | | | |
| | | | | | | 3 | | | | | | | | | 3 | GRANTOR | | |
| OTAL | 278 | 30 | 2329 | 94 | 876 | | | | | | | | | | | GRANTEE | | |
| | | RA FEAT | URES | | | | | | F | IELD CK: | | | | | - | | | |
| | CODE | 2 | DESC | LEN | WI | D HGHT | QTY | QL | YR I | ADJ | Ţ | UNITS | UT | PRI | CE | ADJ UT PE | R SPCD % | |
| | 0294 | SHED | MOOD\AI | | | | 1 | 19 | 95 1. | .00 | 1 | 1.000 | UT | 1600. | 000 | 1600.00 | 00 | 1 |
| | 0030 | BARN | I,MT | | | | 1 | 19 | 95 1. | .00 | 1 | 1.000 | UT | 500. | 000 | 500.00 | 00 | 3 |
| | | BARN | , POLE | | | | 1 | 19 | 95 1. | .00 | 2 | 1.000 | UT | 100. | 000 | 100.00 | 00 | 1 |
| | | SHED | METAL | | | | 1 | 19 | 93 1. | .00 | | 1.000 | UT | 800. | 000 | ADJ UT PF 1600.00 500.00 100.00 | 0 | 1 |
| L | ND | DESC | ZONE | ROAD | {UD1 | {UD3 | FRONT | r DEPT | H F | TELD CK: | | | | | | T PRI | | |
| E CC | DE C | | TOPO | UTIL | {UD2 | (UD4 | BACE | K DT | | ADJUSTM | ENTS | 5 | | UNI | TS U | T PRI | CE ADJ | UT P |
| 0001 | .00 SE | PR. | A-1 | 0002 | | | | | 1.0 | 00 1.00 | 1.00 | 1.0 | 0 | 4.42 | 0 A | C 6000. | 000 6 | 000. |
| 2001 - 2008 | SPLI | T FROM | 04583-0 | 02 | | | | | | | | | | | | | | |

App# 0801-97

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.

| Emma J. Thomas | the Owner of the mount to the 1:11 |
|-----------------------------------------------------------------------------------------------|-------------------------------------------|
| been subdivided for immediate family primar | v residence use hereinafter the Owner and |
| Donald + Ungla Tilas | the family mamban of the |
| Owner, who is the owner of the family parcel primary residence use, hereafter the Family M | which is intended for immediate family |
| Jon + daughtu -in law, and baccording to law, depose and say: | oth individuals being first duly sworn |
| | |

- 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. 28-15-17-04583-004
- 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, stepparent, 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. 28-15-17-04583-006
- 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.
- 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.

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 Subscribed and sworn to (or affirmed) before me this 21 day of Sanuary, 2008, by Emma Jean Thomas (Owner) who is personally known to me or has produced as identification. PAULA K IONESCU-ADAMS MY COMMISSION # DD605863 EXPIRES: Oct. 16, 2010 Florida Notary Service.com Subscribed and sworn to (or affirmed) before me this 21Sanuary, 2008, by Angela Silas who is personally known to me or has produced Du (Family Member) as identification. S. Jonescu-adams

Florida Notary Service.com

7. This Affidavit is made and given by Affiants with full knowledge that the facts

FFOY (COLUMBIC OF BUILDING + FOR) FOR NO. :386-758-2160 FCS. 05 1008 01:25Fts Jan 17 08 09:57a 386486 1866 Wendy Grannell

CODE ENFORCEMENT DEPARTMENT

COLUMBIA COUNTY, FLORIDA OF T OF COUNTY MOBILE HOME INSPECTION REPORT

| COUNTY THE MOBILE HOME IS BEING MOVED FROM SUWANNEE |
|----------------------------------------------------------------------------------------------------------------------------------------------|
| OWNERS NAME DONALD SILOS PHONE 36-25-95 CERT |
| NSTALLER Chester Knowles PHONE 386-755-644/CELL 386-397- |
| INSTALLERS ADDRESS 5801 SW SR 47 lake City FL 3619 |
| 32024 |
| MOBILE HOME INFORMATION |
| MAKE Fleetwood /FINTSTONER 1985 SIZE 14 x 66 |
| COLUR Clay SERIAL No. 0326 |
| WIND ZONE TECTOR LIKE |
| |
| FLOORS GOOD (Redone) |
| 200Rs 900d |
| WALLS GETO of (Rudone) |
| CABINETS 4008 |
| FLECTRICAL (FIXTURES/OUTLETS) 9000 |
| b . (.) |
| EXTERIOR: WALLS / SIDD NG GOOD (DATE COURT OF PRONT Side) |
| WINDOWS GOILD |
| DOORS |
| STATUS: APPROVED NOT APPROVED |
| NOTES: Just 1 482 |
| INSTALLER OR INSPECTORS PRINTED NAME JESSIE L'ELESTEN KNOWLES |
| retailer/Inspector Signature Case There There I have to 1 tonse No 1 H 1000 509 Date 1-21-00 |
| ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM. |
| NO WIND ZONE ONE MODILE 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 386-718-2038 TO SET UP THIS INSPECTION NO PERMIT WILL BE ISSUED BEFORE

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

| | Permit Application Number 178 - (300) |
|-----------------------------------------------------------|---------------------------------------|
| PART II - SITEP | |
| Scale: 1 inch = 50 feet. | lor 1 |
| TRECULAR 30 PO DE SUN | 2 1/5 1/5 POND |
| So. Brildy, | 240' |
| Notes: | |
| | |
| Site Dies submitted by | MACTER CONTRACTOR |
| Plan ApprovedNot Approved | MASTER CONTRACTOR Date 1/27(%) |
| By M 02 | Colarbix County Health Department |
| , | |

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787 PMONE: (386) 758-1 125 * FAX: (386) 756-1365 * Email: run_croft@columbiacountytla.com

Adiousing Maintenance

To praintain the Countywide Additioning Policy was that with application for a 3-1-1. Addition at the time you apply for a building passell. The analysis assumes a sufficient assumes for. الله وهوه الشارية , مواكنت الأنه المواكنة المواكنة الله والأوار والأراضية الأراضية الأراضية والأسار أو المارية new miles are suggested in Columbia County Organized 2001-9. The militarising system is to madic imagency before Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timety and efficient provision of combre on militario and landacenes at Palametic Palamet.

DATE DECIMENTE.

21412000

Titlije - 5.1-1 lanetie.

103

NE OMAR TER

LAKE CITY FL PROPERTY APPRAISER PARCEL NUMBER

28-15-17-04583-004

Remarku:

PARENT PARCEL

MUTICE THE ADDRESS WAS ISSUED DASSED 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.

Approved Address

FEB 0 5 2008

911Addressing/GIS Dept

1133

top # 1800 17

CODE ENFORCEMENT PRELIMINARY MOBILE HOME INSPECTION REPORT

| DATE RECEIVED 2-5-08 BY LH IS THE MIH ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? |
|---------------------------------------------------------------------------------------------------|
| OWNERS NAME DOMINES SILAS PHONE 155-9572 CELL |
| ADDRESS 101 MI CINGL Demace Lake City 76 320 55 |
| MOBILE HOME PARK NA SUBDIVISION_ |
| DRIVING DIRECTIONS TO MOBILE HOME US they go west US 441 No the winder TIN |
| End on (see Brickhome with Green Roof |
| MOBILE HOME INSTALLER Chester Know Ces PHONE 755-6441 CELL 317 3619 |
| MOBILE HOME INFORMATION |
| MAKE Floring YEAR 1985 SIZE LY X GY COLOR XCY |
| SERIAL No. (3324 |
| WIND ZONE I ALLOWED |
| 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 |
| EXTERIOR: |
| WALLS / SIDDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING |
| WINDOWS () CRACKED! BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT |
| ROOF () APPEARS SOLID () DAMAGED |
| STATUS |
| APPROVED WITH CONDITIONS |
| APPROVED WITH CONDITIONS: NOT APPROVED NEED RE-INSPECTION FOR FOLLOWING CONDITIONS |
| |
| SIGNATURE Start June 10 NUMBER 402 DATE 2 11-05 |



M/I OCCUPAIC

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection
This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 28-1S-17-04583-006

Building permit No. 000026736

Permit Holder CHESTER KNOWLES

Owner of Building DONALD & ANGELA SILAS

Location: 103 NE OMAR TERR, LAKE CITY, FL 32055

Date: 02/27/2008

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)