DATE 06/02/2010

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000028611

APPLICANT ROY SMITH PHONE 386-935-1429

ADDRESS PO BOX 838 BELL FL 32619

OWNER LARRY & GLENDA POLK PHONE 386-454-1951

ADDRESS 364 SW WORRY FREE GLEN FT. WHITE FL 32038

CONTRACTOR STEVEN COX PHONE 352-472-6562

LOCATION OF PROPERTY 47 S, L CR 138, R TRULUCK, R WORRY FREE GLEN, THEN 2ND ON THE LEFT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 26-7S-16-04328-009 SUBDIVISION

LOT BLOCK PHASE UNIT 0 TOTAL ACRES 4.00

Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor
		IH0000875	

EXISTING	10-256	BK	HD	N
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD

REPLACING EXISTING MH BEEN THERE SINCE 1997

Check # or Cash 3868

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by

Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by

Framing date/app. by Insulation date/app. by

Rough-in plumbing above slab and below wood floor date/app. by Electrical rough-in date/app. by

Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by Pool date/app. by

Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by

Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by

Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE $ 0.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 300.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 0.00 WASTE FEE $

FLOOD DEVELOPMENT FEE $ FLOOD ZONE FEE $ 25.00 CULVERT FEE $ **TOTAL FEE** 375.00

INSPECTORS OFFICE L. Hodson CLERKS OFFICE CN

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED 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 NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

ck 3868

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only *(Revised 1-10-08)* Zoning Official BK 20.05.10 Building Official ND 5-18-10

AP# 1005-35 Date Received 5/14/10 By LH Permit # 28611

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

Comments Replacing Existing MH Scrap 1997

FEMA Map# N/A Elevation N/A Finished Floor ~~Slab~~ River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 10-0256 ☐ EH Release ☐ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner ☑ Letter of Auth. from installer ☑ State Road Access

Included - Bringing over

☐ Parent Parcel # ☐ STUP-MH form Back ☐ F W Comp. letter

IMPACT FEES: EMS Fire Corr Road/Code

School = TOTAL _ Impact Fees Suspended March 2009 ☑ out of County ☐ Vf form ☑ Pre-Insp. (Pd) (936329 receipt #) Sent 5/26

Property ID # 26-7S-16-04328-009 Subdivision —

- New Mobile Home ____ Used Mobile Home ✓ MH Size 28x70 Year 1988
- Applicant Roy Smith Phone # 386-935-1429
- Address PO Box 838, Bell, FL 32619
- Name of Property Owner Larry & Glenda Polk Phone# 454-1951
- 911 Address 364 SW Worry Free Glen Fort White, FL 32038
- Circle the correct power company - FL Power & Light - (Clay Electric)
  (Circle One) - Suwannee Valley Electric - Progress Energy

- Name of Owner of Mobile Home Same As Above. Phone #
  Address
- Relationship to Property Owner Owner
- Current Number of Dwellings on Property 1
- Lot Size 260 X 670 Total Acreage 4
- Do you : Have (Existing Drive) (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home Yes (PD Pd)
- Driving Directions to the Property Hwy 47 south TR e CR 138 TR e Turnback TR e Worry Free Glen. then 2nd mH on (L)

694 Name of Licensed Dealer/Installer Steven Cox Phone # 352 472 6562

- Installers Address 600 SE 43rd Ave Trenton Fla
- License Number IH0000875 Installation Decal # 1004

spoke to Roy — 5/20/10

COLUMBIA COUNTY PERMIT WORKSHEET

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

Installer Steven Cox License # IH0000875

911 Address where home is being installed 364 Worry Free Glen Ft White 32038

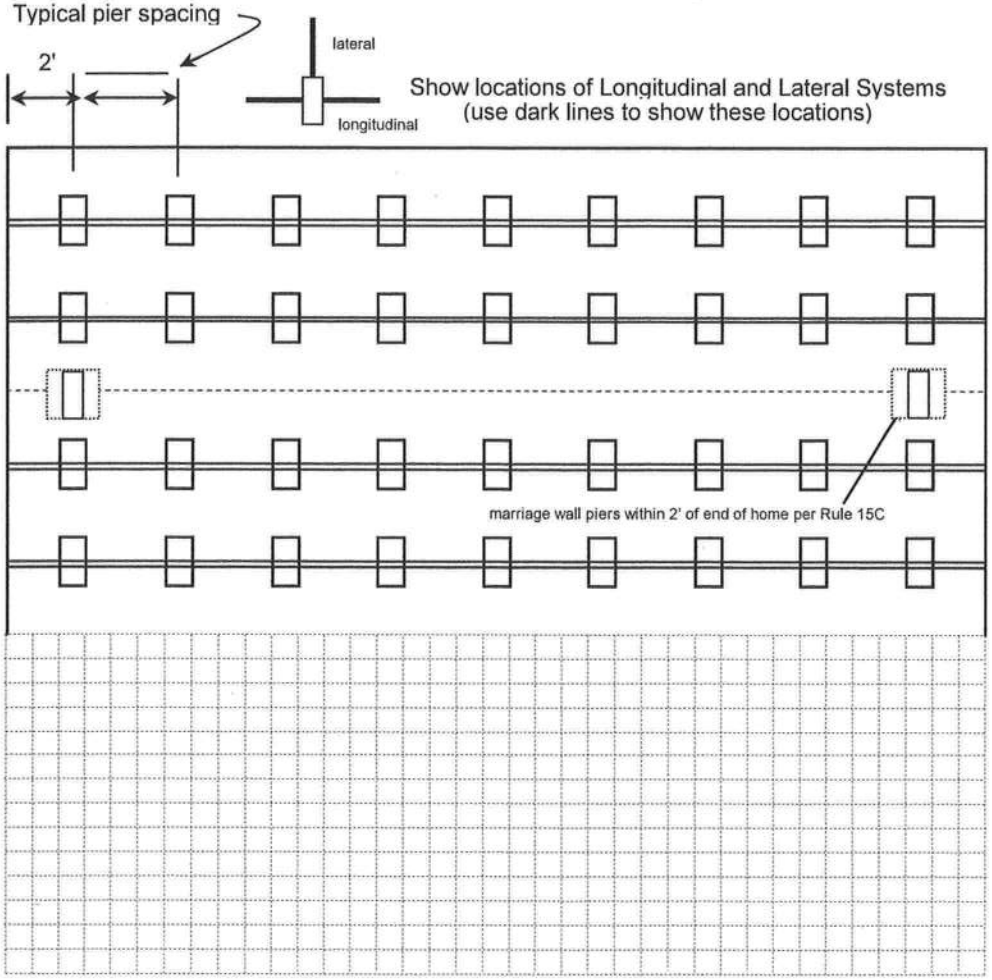
Manufacturer Conc Length x width 28x70

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



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)

New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 1004

Triple/Quad ☐ Serial # 33 8ON7246

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	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 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 20x20

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.)

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening	Pier pad size

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft ✓ 5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer MMS

OTHER TIES

	Number
Sidewall	per strap
Longitudinal	
Marriage wall	per strap
Shearwall	

COLUMBIA COUNTY PERMIT WORKSHEET

POCKET PENETROMETER TEST

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

x 1000 x 1000 x 1000

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 1000 x 1000 x 1000

TORQUE PROBE TEST

The results of the torque probe test is 276 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

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

_____ Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name _____

Date Tested May 10, 2010

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 54

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15B

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C

Site Preparation

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

Fastening multi wide units

Floor:	Type Fastener: 5/8x Lag	Length: 6	Spacing: 18 to 24 oc
Walls:	Type Fastener: 16D Nail	Length: 3	Spacing: 18 to 24 oc
Roof:	Type Fastener: 5/8x Lag	Length: 6	Spacing: 18 to 24 oc

For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials _____

Type gasket Seal Seal
Pg. 15D

Installed:
Between Floors Yes ✓
Between Walls Yes ✓
Bottom of ridgebeam Yes ✓

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 ✓

Miscellaneous

Skirting to be installed. Yes ✓ No _____
Dryer vent installed outside of skirting. Yes ✓ N/A _____
Range downflow vent installed outside of skirting. Yes ✓ N/A _____
Drain lines supported at 4 foot intervals. Yes ✓
Electrical crossovers protected. Yes ✓
Other : _____

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

Installer Signature _____ **Date** May 10 2010

HSMV 84205 (REV 4/84)

Manufacturer Data Report

State of Florida
Department of Highway Safety & Motor Vehicles
Division of Motor Vehicles

Neil Kirkman Building, 2900 Apalachee Parkway, Room A-126, Tallahassee FL 32301

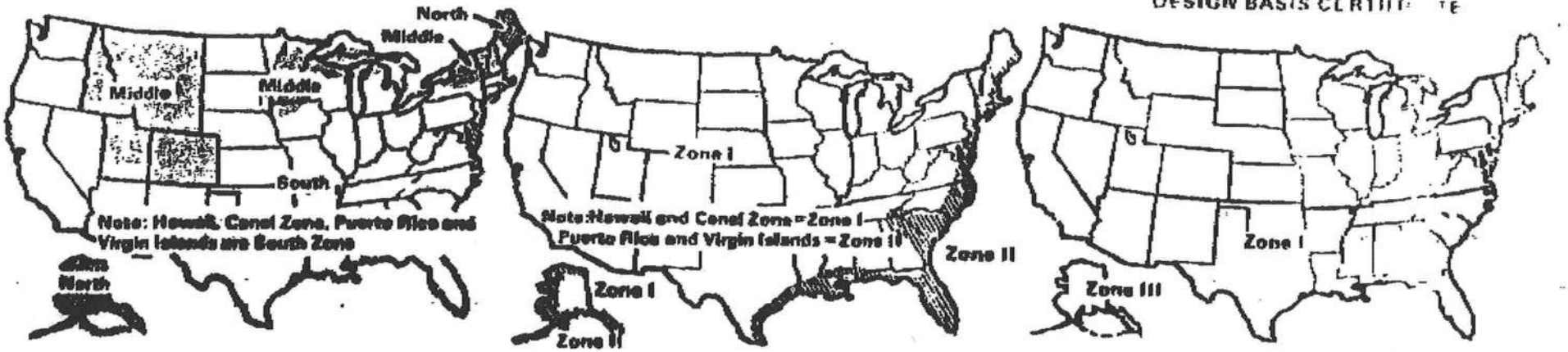
DEL: ALACHUA, FL.

FHDA LABEL # FLA. 390167, 390168
MH ID # 3303ORN7246 AB
DATE MANUFACTURED 4-18-88
MODEL # 308 YEAR 1988
MFR. NAME CHAMPION HOMES
ADDRESS RT. 7, BOX 471
LAKE CITY FL. 32055
City State Zip

DESTINATION (State) FL ☐ Single ☒ Double ☐ Triple
SIZE 28x70
Unit A Unit B Unit C
☐ EXCLUDE HITCH ☒ INCLUDE HITCH

DEALERS NAME Mid Kan
ADDRESS 1731
Saliva, Ks. 6
City State
DAPIA NAME RADCO
ADDRESS P. O. BOX 5506
CARSON CA 907
City

STRUCTURAL DESIGN BASIS CERTIFICATE



HEATING AND COOL... DESIGN BASIS CERTIFI... TE

Roof Load
☐ North 40 PSF ☒ South 20 PSF ☐ Other
☐ Middle 30 PSF

Wind Load
☐ Zone I 15 PSF Horizontal & 8 PSF Uplift ☒ Zone II 25 PSF Horizontal & 15 PSF Uplift ☐ Other

Design Winter Climate Zone
This mobile home has been thermally insulated ... with the requirements of the Federal Mobile Home Construction and Safety Standards for all locations within given zone
☒ ZONE I ☐ ZONE II ☐ ZONE III

	Manufacturer	Model Designation
Air Conditioning (49,267 Btu/hr.)		
Comfort Heating (Btu/hr.)	INTERTHERM	MCH100AB-0C
Cooking Range	WHIRLPOOL	RF311PXBW
Built-in Oven		
Counter-Top Cooking Unit		
Refrigerator	WHIRLPOOL	ET18JKXSF00
Clothes Washer		
Clothes Dryer		
Dishwasher	WHIRLPOOL	DU3000XR-
Food Waste		
Water Heater	STATE	SCI 301 REZR
Smoke Detector	FIREX	F2000

The heating equipment has the capacity to maintain ... 70° F temperature in this home at outdoor temperature ... -3 F
To maximize furnace operating economy and to conserve energy it is recommended that this home be insulated where the outdoor winter design temperature (99.6%) is not higher than ... 1 F
The above information has been calculated assuming a maximum wind velocity of 15 MPH at standard atmospheric pressure
The supply air distribution system contained in this ... home
☐ Not designed for A/C ☒ ... Heat

Manufacturer shall provide the minimum U/D requirements for heating and cooling as the "U" factors as designated below

Walls (without windows & doors) "U" = 0.082 Floors ... "U" = 0.096 Air ducts installed outside the home ... "U" = 0.227
Ceilings & roofs of light color "U" = 0.077 Air ducts in floor ... "U" = 0.130 Floor insulation from the outside of home (over air ducts)
Ceilings & roofs of dark color "U" = ... Air Ducts in ceiling ... "U" = 0.000 (Location) Insulation Thickness Sq Ft 154 Thickness Thickness Sq Ft - 52

FOR TALLAHASSEE FIELD OFFICE USE ONLY
DATE OF ...
SERIAL ...
ABOVE 25 ...
DEFECT ...

This mobile home is designed to comply with the Federal Mobile Home Construction and Safety Standards in force at the time of manufacture

SIGNED E. L. Morgan
ERNIE MORGAN
Type or Print Name

4/18/88
Date

MAY 03 1988

DHSMV No. 1101 P. 2: 02
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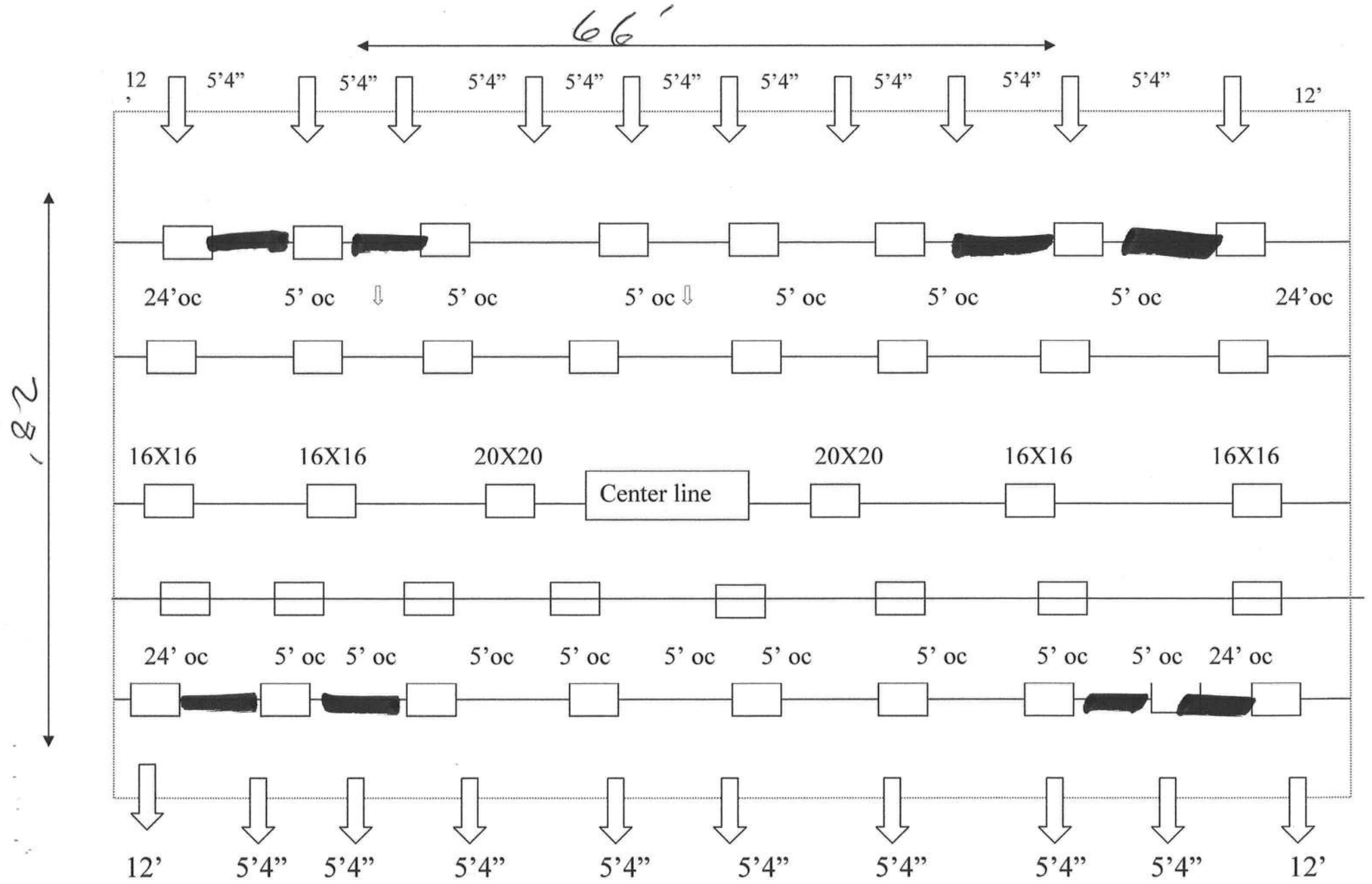


Double wide _____ x _____

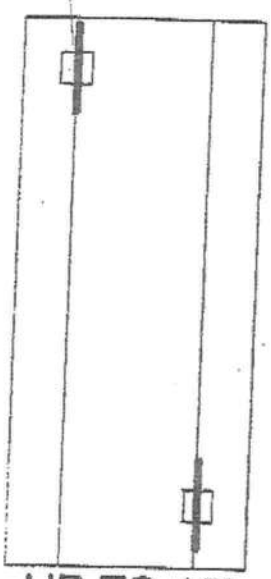
Anchors Piers ----- Mmls longitudinal line

LONGITUDINAL BRACING SYSTEMS PLACEMENT FOR FLORIDA

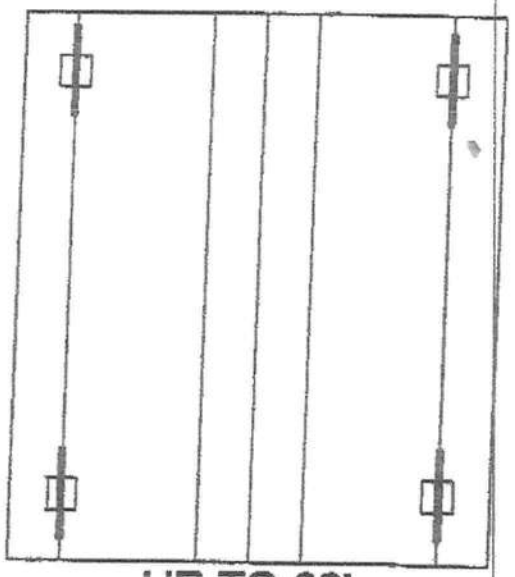
Use 650 anchors and 180 square inch stabilizers with frame ties and vertical ties at maximum 5' -4" centers. Vertical ties must be used at all connection points furnished by the home manufacturer. Marriage wall anchors must be used in accordance with the home manufacturers instructions.

For Roof slopes up to 5/12 pitch

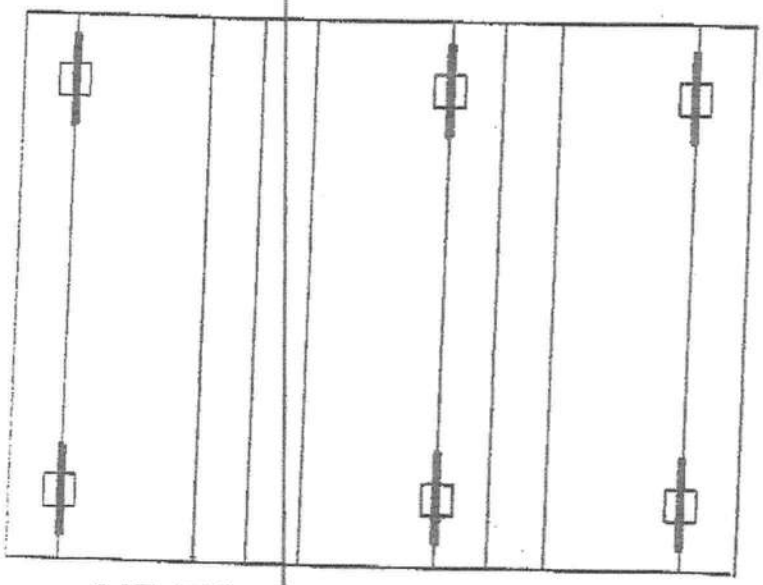
Systems must be placed no more than 16' from end of home



UP TO 16'
SINGLE WIDE



UP TO 32'
DOUBLE WIDE



UP TO 48' TRIPLE WIDE
OR DOUBLE WIDE WITH TAG

See Longitudinal and Lateral Bracing System detail assembly drawing

Patent Pending
May 2002

Minute Man anchors, inc.

Installation Instructions for Model LLBS Longitudinal and Lateral Bracing System Approved for Florida

Revised: 6/17/02

Note: Your set must be designed by a Registered Professional Engineer if all or one of the following conditions occur:

Location is within 1,500 feet of Coast
Pier Height exceeds 48"
Sidewall height exceeds 96"
Roof eaves exceeds 16"
Main beam spacing exceeds 99.5"

1. Refer to the Home Manufacturer Installation Instructions for pier locations. 6" Disc anchors 48" long with vertical ties are required at maximum 5'-4" center along both sidewalls starting a maximum of 2'-0" in from each end of the home. Vertical ties must be used at all connection points furnished by the home manufacturer. Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs require a 5' anchor.

2. Refer to the Foundation Plans for the location of Longitudinal Lateral Bracing System.. **(See Attached).** Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.

3. Remove turf to expose firm soil at each SD3 pad location.

4. Attach tube clip to SD3 pier pads (see Detail Assembly Drawing) center pad under beam, level pad. Angle Drive Pins may be driven vertically through four (4) slots in SD3 pier pad now or after home is totally set. Angle drive pins may be driven up to ten degrees (10) off of vertical. If you choose to drive pins after home is set, do not cover slots in pier pad.

5. Level home on concrete blocks or deluxe steel pier by Minute Man.

6. Install Longitudinal and Lateral Bracing in accordance with Foundation Plan and Detail Assembly Drawing.

7. Install vertical anchors , frame ties and stabilizers at each lateral arm system location..

Thank you for using Minute Man Products, Inc. If you have any questions, please call Toll Free at (800) 438-7277.

305 West King St. East Flat Rock, North Carolina 28726

FLORIDA ZONE II AND III LONGITUDINAL AND LATERAL BRACING SYSTEMS PLACEMENT

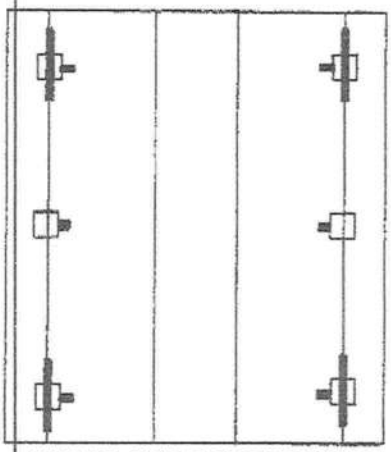
For 5/12 Roof Pitch

Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location. Systems must be as evenly spaced as possible.

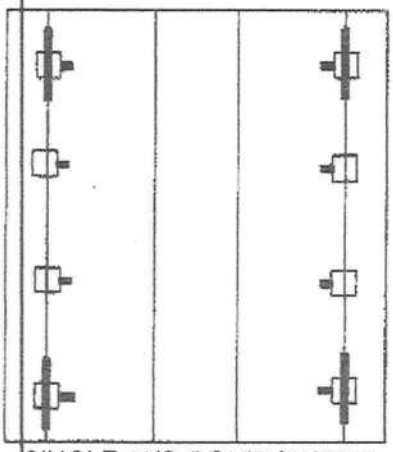
Revised: 6/17/2002

HOME DIMENSIONS REPRESENT BOX SIZE

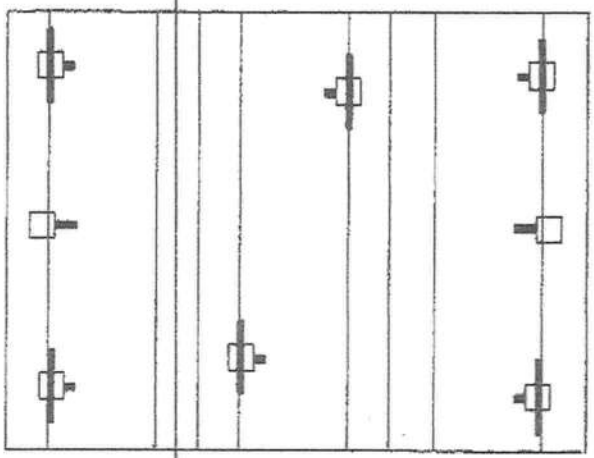
LEGEND — Longitudinal Bracing System only; Longitudinal and Lateral Bracing System; Lateral Bracing System only



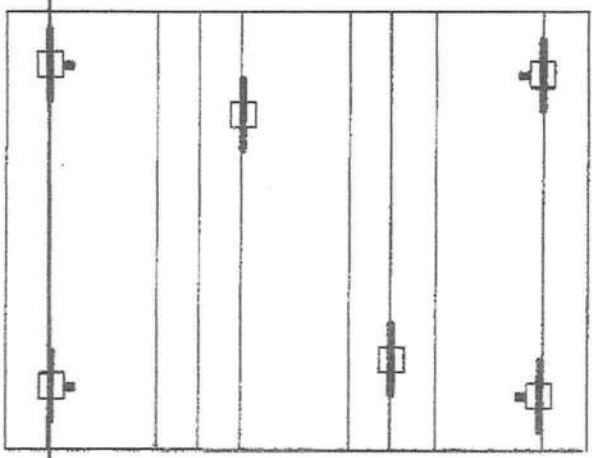
SINGLE AND DOUBLE WIDE
UP TO 32' WIDE AND 52'LONG
6 SYSTEMS
56' INCLUDING HITCH



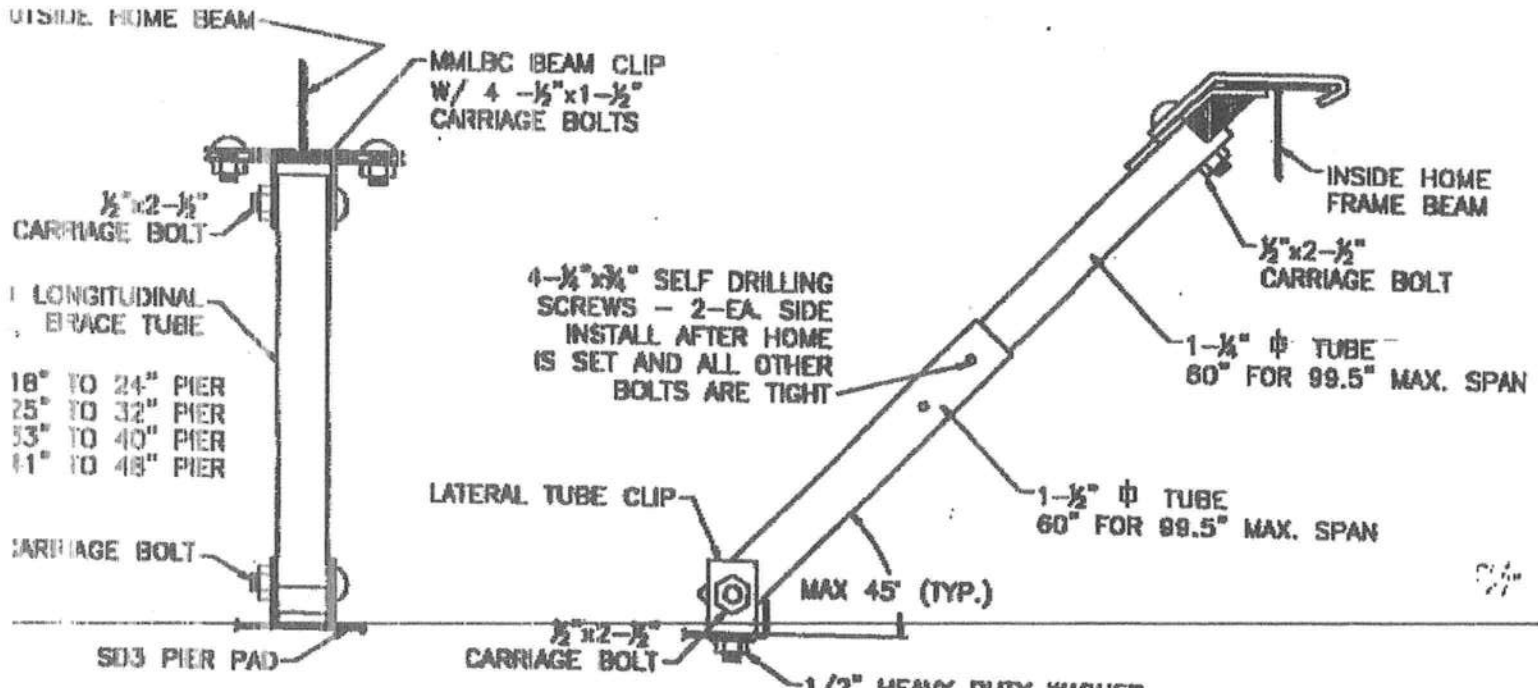
SINGLE AND DOUBLE WIDE
UP TO 32' WIDE AND 76' LONG
8 SYSTEMS
80' INCLUDING HITCH



FOR TRIPLE WIDE OR TAG UNITS-
8 SYSTEMS OVER 52' BOX/ 56' INCLUDING HITCH



FOR TRIPLE WIDE OR TAG UNITS-
6 SYSTEMS- UP TO
52' BOX/ 56'INCLUDING HITCH

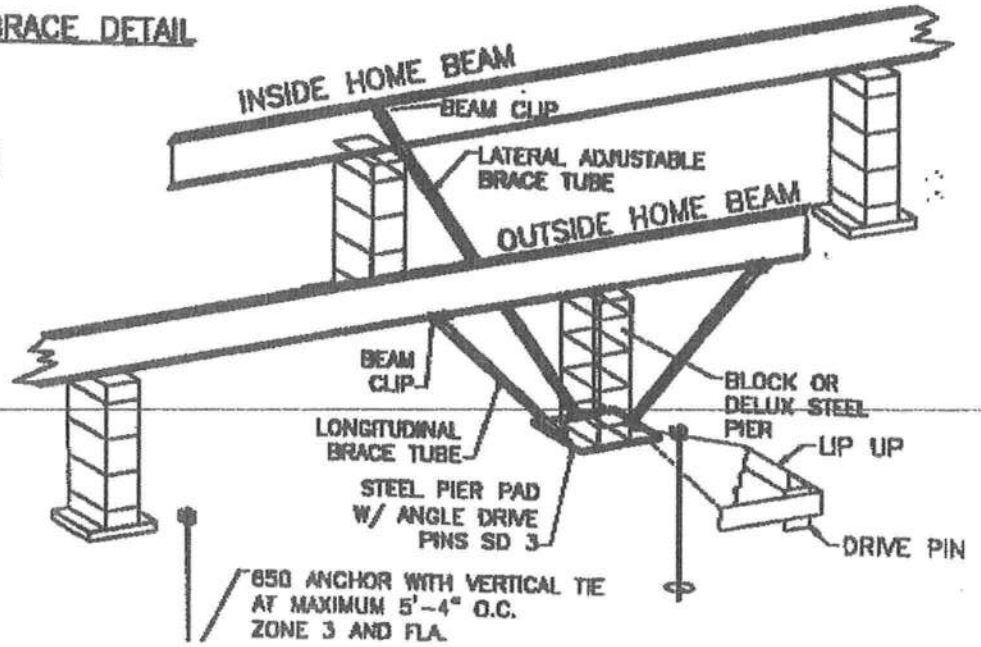


LONGITUDINAL BRACE DETAIL

LATERAL BRACE DETAIL

LONGITUDINAL & LATERAL BRACING SYSTEM

DETAIL ASSEMBLY DRAWING



ALL BOLTS ARE GRADE 5

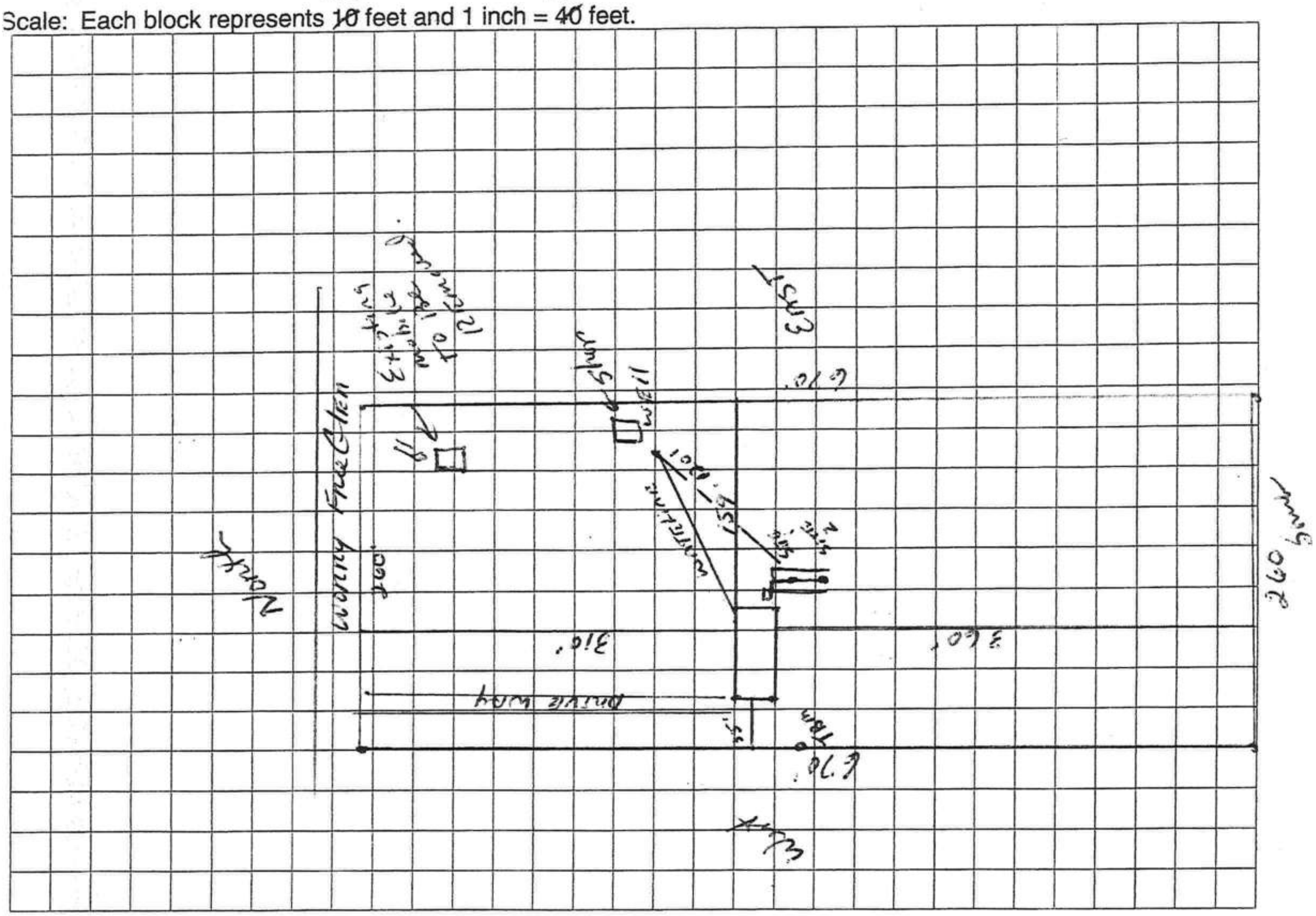
ANCHORS

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number____________________

PART II - SITEPLAN

Scale: Each block represents ~~10~~ 30' feet and 1 inch = ~~40~~ 120' feet.



Notes: ____

Site Plan submitted by: ____________________ (Signature) ____________________ (Title)

Plan Approved______ Not Approved_____ Date____________

By____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

When recorded, mail to:

Name: _____

Address: _____

City/State/Zip Code: _____

Inst:201012007425 Date:5/11/2010 Time:2:32 PM
Doc Stamp-Deed:175.00
DC,P.DeWitt Cason,Columbia County Page 1 of 4 B:1194 P:291

Space above this line for Recorder's use

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS:

That I(we), JAMES C. HUNTER AND LINDA C HUNTER, the undersigned, for the consideration of Ten Dollars ($10.00), and other valuable considerations, do hereby release, remise, and forever quitclaim unto LARRY R POLK & GLENDA M POLK And Austin B Polk, all right, title and interest in that certain Property situated in COLUMBIA County, State of FLORIDA, and described as follows:

See Exhibit "A"

IN WITNESS WHEREOF, I(we) have hereunto set my(our) hand(s) and seal this 8th day of May, 2010.

JAMES C HUNTER
Printed Name of Releasor

James C Hunter
Signature of Releasor

LINDA C. HUNTER
Printed Name of Releasor

Linda D. Hunter
Signature of Releasor

Printed Name of Witness (if required by State Laws)

Ron P Shaw
Signature of Witness (if required by State Laws)

Prepared by: Dale C. Ferguson
Attorney at Law
P.O. Box 111
Lake City, Florida 32056-0111

BK 0845 PG 2359

WARRANTY DEED

OFFICIAL RECORDS

THIS INDENTURE, Made this 19th day of September, 1997, **BETWEEN** ELAINE HUNTER AND HER HUSBAND, WILBERN HUNTER, parties of the first part, and JAMES C. HUNTER AND LINDA G. HUNTER, HIS WIFE, whose post office address is Route 2, Box 8662, Ft. White, FL 32038, and whose social security number are 262-89-0799 and 264-13-8680, parties of the second part.

WITNESSETH, That the parties of the first part, for and in consideration of the sum of Ten and No/100 ($10.00) Dollars, to them in hand paid by the said parties of the second part, the receipt whereof is hereby acknowledged, have granted, bargained, and sold to the said parties of the second part, their heirs and assigns forever, the following described land, situate, and being in the County of Columbia, State of Florida, to-wit:

A part of the NE 1/4 of the SW 1/4 of the NW 1/4 of Section 26, Township 7 South, Range 16 East, more particularly described as follows: Begin at the NE Corner of the NE 1/4 of the SW 1/4 of said NW 1/4 and run S 0 degrees 36'30" East, along the East line thereof, 670.20 feet to the Northeast Corner of lands described in Official Records Book 719, Page 332 of the public records of Columbia County, Florida thence S 89 degrees 14'21" West, along the North line thereof, 260.63 feet; thence N 0 degrees 36'30" West, 670.20 feet to a point on the North line of the NE 1/4 of the SW 1/4 of said NW 1/4; thence N 89 degrees 14'22" East, along the North line thereof, 260.63 feet to the Point of Beginning. Columbia County, Florida, containing 4.01 acres, more or less.

Subject to real property taxes accruing subsequent to December 31, 1996 and subject to easements and mineral rights and interest of record and subject to an ingress and egress easement over and across the North 25.00 feet thereof. Together with the right of ingress and egress over and across the North 25.00 of the SE 1/4 of the NW 1/4 of Section 26, Township 7 South, Range 16 East, Columbia County, Florida.

And the said parties of the first part do hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

FILED AND RECORDED IN PUBLIC RECORDS OF COLUMBIA COUNTY

97-13520

1997 SEP 19 PM 2:36

Documentary Stamp .70
Intangible Tax 0
P. DeWitt Cason
Clerk of Court
By MCK D.C.

RECORDED
P. DeWitt Cason
CLERK OF COURTS
COLUMBIA COUNTY, FLORIDA
BY MCK D.C.

IN WITNESS WHEREOF, *The said parties of the first part have hereunto set their hand and seal the day and year first above written.*

Signed, sealed and delivered in the presence of:

Dale C. Ferguson
Printed Name: DALE C. FERGUSON

Karen M. Wright
Printed Name: KAREN M. WRIGHT

"Witnesses"

Elaine Hunter (SEAL)
ELAINE HUNTER

Wilbern Hunter (SEAL)
WILBERN HUNTER

Address: Rt. 1, Box 77
Ft. White, FL 32038

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 19th day of September, 1997, by Elaine Hunter and her Husband, Wilbern Hunter, who are personally known to me or who have produced Personal Knowledge as identification and who did not take an oath.

(Notarial Seal)

Karen M. Wright
Notary Public

Commission No. _____
My commission expires:

KAREN M. WRIGHT
MY COMMISSION # CC 344837
EXPIRES: January 17, 1998
Bonded Thru Notary Public Underwriters

BK 0845 PG 2360
OFFICIAL RECORDS

Cox Mobile Home Moving and Set-up

600 S.E. 43 rd Ave.
Trenton, Fla 32693
Phone (352)472-6562
Fax (352)472-6598
coxmhmoving@aol.com

May 11, 2010

To Whom It May Concern:

I, Steven Cox license no.IH0000875, give Roy Smith permission to pull permits under my license.

Thanks,

Steven Cox

PAULINE PARHAM
MY COMMISSION # DD 638161
EXPIRES: February 8, 2011
Bonded Thru Notary Public Underwriters

License Number: IH / 1025399 / 1 Name: STEVEN E. COX

Order #: 83 Label #: 1004	Manufacturer:	(Check Size of Home)
Homeowner: Polk	Year Model:	Single ___
	Length & Width: 28x66	Double X
Address:		Triple ___
	Type Longitudinal System:	HUD Label #:
City/State/Zip: Columbia County	Type Lateral Arm System: mmL	Soil Bearing / PSF:
Phone #:	New Home:___ Used Home: X	Torque Probe / in-lbs:
Date Installed:	Data Plate Wind Zone:	Permit #:
Installed Wind Zone:		
Note:		

Polk

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

1004 — LABEL #

DATE OF INSTALLATION

STEVEN E. COX — NAME

IH / 1025399 / 1 — LICENSE #

83 — ORDER #

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

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LABEL. USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEARS. YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

Appl #1005-35

CODE ENFO CEMENT DEPARTMENT
COLUM IA COUNTY, FLORIDA
OUT OF COUNTY MO ILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED F OM Alachua

OWNERS NAME Larry, Glenda, Aust , Polk PHONE 396-454-1957 CELL 352-258-6861

INSTALLER Steven Cox PHONE 352-472-6562 CELL 352-822-1857

INSTALLERS ADDRESS 600 SE 43RD A e Trenton Fla 32693

MOBILE HOME INFORMATION

MAKE Cons YEAR 1988 SIZE 28 X 70

COLOR Grey T White SERI L No. 3380N7246 A+B

WIND ZONE II SMOKE DETECTOR Yes

INTERIOR:
FLOORS Good

DOORS Good

WALLS Good

CABINETS Good

ELECTRICAL (FIXTURES/OUTLETS) Good

EXTERIOR:
WALLS / SIDDING Good

WINDOWS Good

DOORS Good

INSTALLER:
APPROVED ✓ NOT AP ROVED

NOTES:

INSTALLER OR INSPECTORS PRINTED NAME Steven Cox

Installer/Inspector Signature [signature] License No. IH0120875 Date 5/12/10

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

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

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

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

Code Enforcement Approval Signature [signature] Date 5-25-10

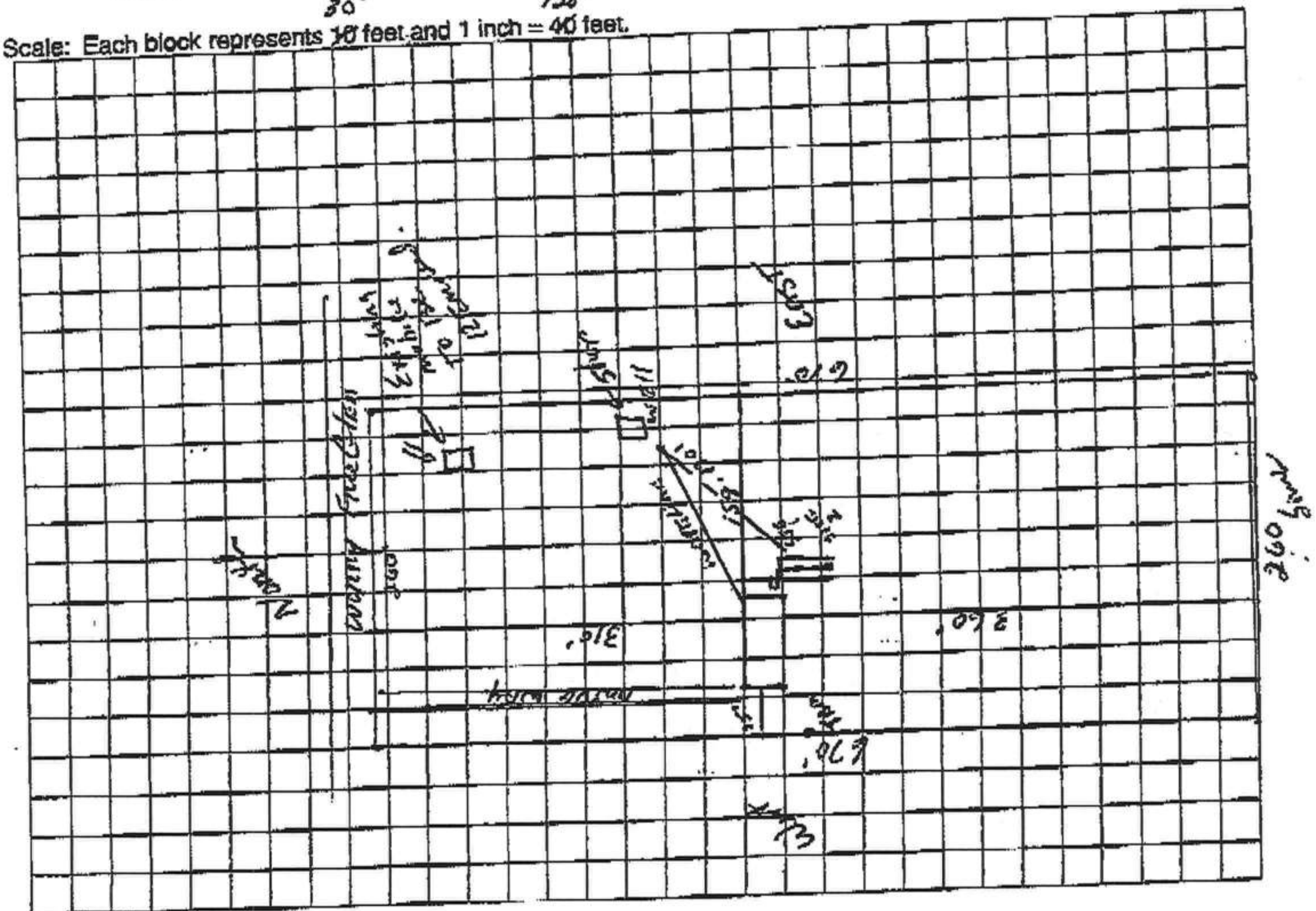
App# 100535

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10-0256

PART II - SITEPLAN

Scale: Each block represents ~~10~~ 30' feet and 1 inch = ~~40~~ 120' feet.



Notes: ______

Site Plan submitted by: [signature] ______ Signature ______ Title

Plan Approved ✓ Not Approved ______ Date 5-24-10

By Sallie Ford - EH Director Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4016 which may be used)
(Stock Number: 5744-002-4015-6)

ST

CODE ENFOR(EMENT
PRELIMINARY MOBILE HOME NSPECTION REPORT

DATE RECEIVED 5/26/10 BY G IS THE M/H ON THE PROP ERTY WHERE THE PERMIT WILL BE ISSUED? Yes

OWNERS NAME Larry Polk PHONE 4 4-1961 CELL

ADDRESS 364 SW Worry Glen, Fi White, FL

MOBILE HOME PARK N/A SUBD VISION N/A

DRIVING DIRECTIONS TO MOBILE HOME 475, TL CR 138, TR @ Trailer, TR Worry Free Glen, 2nd. MH on left

MOBILE HOME INSTALLER Steven Cox PHONE 352 472 6562 CELL

MOBILE HOME INFORMATION

MAKE Conc YEAR 1988 SIZE 28 x 70 COLOR Grey/White

SERIAL No. 3380N72446 A+B

WIND ZONE II Must be wind zone II or higher N(WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:
(P or F) - P= PASS F= FAILED

$50.00

Date of Payment: 5/14

Paid By: Roy Smith

Notes:

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

P FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LC CATION

P DOORS ( ) OPERABLE ( ) DAMAGED

P WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS ( ) OPERABLE ( ) INOPERABLE

P PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

P CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

P ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXP(SED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UN OUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS M SSING ( ) WEATHERTIGHT

P ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED P WITH CONDITIONS:

NOT APPROVED ____ NEED RE-INSPECTION FOR FOLLOWING COND IONS

SIGNATURE [signature] ID NUMBER 402 DATE 5-27-10

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1005-35 CONTRACTOR STEVE COX PHONE

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name LARRY POLK License #: Home Owner	Signature Larry Polk Phone #: 454-1951
MECHANICAL/ A/C _____	Print Name LARRY POLK License #: Home Owner	Signature Larry Polk Phone #: 454-1951
PLUMBING/ GAS	Print Name LARRY POLK License #: Homeowner	Signature Larry Polk Phone #: 454-1951
ROOFING	Print Name License #:	Signature Phone #:
SHEET METAL	Print Name License #:	Signature Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name License#:	Signature Phone #:
SOLAR	Print Name License #:	Signature Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.