

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15) Zoning Official ms Building Official mta  
 AP# 48079 Date Received 12/31/2020 By UH Permit # \_\_\_\_\_  
 Flood Zone \_\_\_\_\_ Development Permit \_\_\_\_\_ Zoning \_\_\_\_\_ Land Use Plan Map Category \_\_\_\_\_  
 Comments \_\_\_\_\_

FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_  
☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH # \_\_\_\_\_ ☐ Well letter OR  
☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid  
☐ DOT Approval ☐ Parent Parcel # \_\_\_\_\_ ☐ STUP-MH \_\_\_\_\_ ☒ 911 Approval mta  
☐ Ellisville Water Sys ☐ Assessment \_\_\_\_\_ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 01-75-15-04149-414 Subdivision Wilson Springs Lot# 14

- New Mobile Home \_\_\_\_\_ Used Mobile Home X MH Size 14x66 Year 2002
- Applicant Jan Hart Phone # 386 965 9470
- Address 273<sup>SW</sup> Monument Ln Fort White, FL 32038
- Name of Property Owner Jan Hart Phone# 386 965 9470
- 911 Address 273 SW Monument Ln
- Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Duke Energy

- Name of Owner of Mobile Home Jan Hart Phone # \_\_\_\_\_
- Address 273<sup>SW</sup> Monument Ln Fort White, FL 32038
- Relationship to Property Owner self

- Current Number of Dwellings on Property 0
- Lot Size 1.80 Total Acreage 1.21 (Lots 14, 15, 16)
- 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
- Driving Directions to the Property In Fort White take Wilson Springs Rd toward river. At stop sign, turn left at store. Follow around and take slight right on Memorial Drive to end. Take a slight right on Monument Ln (dirt road) & follow to 273.

- Name of Licensed Dealer/Installer Manuel Brannan Phone # 386-590-3289
- Installers Address 5107 CR 202 W. Palm Beach
- License Number 1025396 Installation Decal # 76498

Located now 4667 SW Pine Mount Rd  
Lake City

jhart12296@aol.com

01-75-15-04149-414

54 1 LKC 5510

AUDIT # 143478001



STATE OF FLORIDA  
APPLICATION FOR VEHICLE/VESSEL  
CERTIFICATE OF TITLE

L# 586979  
T# 1178868130  
B# 373720  
S# 80472860

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR. MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR	WT/LENGTH	GVW/LOC
85106272	GAFL207A49436TW21	2002	TMBRWD	HS		66'	

DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	FUEL	VESSEL TYPE	WATER	FL NUMBER	AUTH DESTRUCTION
11 06 20	TRT	PRIVATE							

Applicant/Owner's Name &amp; Address

BIRTHDATE  
SEX MO. DAY YEAR Y N ALIEN RES.#

1st OWNER FL/DL# OR  
F.E.I.D.#

2nd OWNER FL/DL# OR  
UNIT #

VOLUNTARY CONTRIBUTIONS

AGENCY  
FEE

TITLE FEE

SALES TAX

GRAND TOTAL

8.25

77.50

70.00

155.75

Action Requested: TRANSFER TITLE

Brands:

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	ODOMETER DECLARATION CERTIFICATION
FL	11/06/2020		XX		<input type="checkbox"/>

LIEN INFORMATION DATE OF LIEN RECEIVED DATE FEID # OR FL / DL AND SEX AND DATE OF BIRTH DMV ACCOUNT #

NAME OF FIRST LIENHOLDER:

ADDRESS

SALVAGE TYPE

## SELLER INFORMATION

NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER

ADDRESS

DEALER LICENSE NO.

CONSUMER OR SALES TAX EXEMPTION #

## SALES TAX AND USE REPORT

TRANSFER OF TITLE ☐ PURCHASER HOLDS VALID  
IS EXEMPT FROM EXEMPTION CERTIFICATE  
FLORIDA SALES OR ☐ VEHICLE / VESSEL WILL BE  
USE TAX FOR THE USED EXCLUSIVELY FOR RENTAL  
REASON(S) CHECKED ☐ OTHER

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS \$ 1,000.00

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES \$ 70.00

☒ SELLING PRICE VERIFIED

## APPLICANT CERTIFICATION

I/WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.

I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.

I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.

I/WE HEREBY CERTIFY THAT I/WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I/WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of Applicant/Owner

Signature of Applicant/Co-Owner

HSMV 82041 REVISED 02/06

SCAN CODE

MVT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.