

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official _____

Building Official _____

AP# _____

Date Received _____

By _____

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 App

☐ Ellisville Water Sys ☐ Assessment _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 36-65-16-04076-137 Subdivision PARKER Woods SD Lot# 37

▪ New Mobile Home ☒ Used Mobile Home _____ MH Size 32x56/60 Year 2021

▪ Applicant PAUL BARNEY Phone # 386-209-0906

▪ Address 466 S.W. DEP. J. DAVIS LN LAKE CITY, FL 32024

▪ Name of Property Owner FREEDOM MOBILE HOME SALES Phone# 386-352-5355

▪ 911 Address 466 S.W. DEP. J. DAVIS LN. LAKE CITY, FL 32024

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home CLARK JENNIE FAYE Phone # 904-239-7462

Address 190 E OHIO AVE MCCLERNY, FL 32063

▪ Relationship to Property Owner \$ PURCHASE CONTRACT AGREEMENT

▪ Current Number of Dwellings on Property 0

▪ Lot Size 713 X 613 Total Acreage 5

▪ 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 SR 47 SOUTH TO US-27 T/L TO CR
18 T/L TO SW. OLD NIBLACK AVE T/R TO SNE
ON RIGHT

▪ Name of Licensed Dealer/Installer DAVID ALBRIGHT Phone # 386-344-3645

▪ Installers Address 353 SW. MAULDIN AVE LAKE CITY, FL 32024

▪ License Number 1H1129420 Installation Decal # 72902

127 Sales Price
\$ 24,000.00
Doc Stamp
\$ 168.00

This Instrument Prepared by & return to:
Name: TRISH LANG, an employee of
Integrity Title Services, LLC
Address: 757 WEST DUVAL STREET
Lake City, FL 32055
File No. 20-050117L

Inst: 202012009294 Date: 05/19/2020 Time: 12:12PM
Page 1 of 2 B: 1411 P: 2110, P.DeWitt Cason, Clerk of Court
Columbia, County, By: PT
Deputy Clerk Doc Stamp-Deed: 168.00

Parcel I.D. #: R04076-137

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 14th day of May, A.D. 2020, by WILLIAM SPEICHER, CONVEYING NON-HOMESTEAD PROPERTY, hereinafter called the grantor, to JENNIE CLARK and FREEDOM MOBILE HOME SALES, INC., whose post office address is 190 E OHIO AVENUE, MCCLENNY, FL 32063 AND 466 SW DEPUTY J. DAVIS LANE, LAKE CITY, FL 32024, hereinafter called the grantees:

(Wherever used herein the terms "grantor" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in Columbia County, State of Florida, viz:

See Exhibit "A"

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold the same in fee simple forever.

And the grantor hereby covenants with said grantees that he is lawfully seized of said land in fee simple; that he has good right and lawful authority to sell and convey said land, and hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever, and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2020.

In Witness Whereof, the said grantor has signed and sealed these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Debra M. Leahy
Witness Signature
Debra M. Leahy
Printed Name

Ronald A. Bertucci
Witness Signature
Printed Name

W. D. Speicher
L.S.
WILLIAM SPEICHER
Address:
39712 AMETHYST WAY, ZEPHYRHILLS, FL
33540

STATE OF FLORIDA
COUNTY OF PASCO



JOHN H. LEAHY
Commission # GG 280728
Expires December 4, 2022
Bonded thru Budget Notary Services

The foregoing instrument was acknowledged before me this 14th day of May, 2020, by WILLIAM SPEICHER, who is known to me or who has produced FL Driver's License as identification.

John H. Leahy
Notary Public
My commission expires 12/4/2022

Exhibit "A"

Lot 37 of PARKER WOODS, according to the Plat thereof as recorded in Plat Book 6, Page 81, of the
Public Records of Columbia County, Florida.

Freedom Mobile Home Sales, Inc

DATE OF BIRTH
BUYER: 12/23/82
CO-BUYER:

466 SW DEPUTY J DAVIS LN,
LAKE CITY, FLORIDA 32024
(386) 752-5355 Fax: (386) 752-4757

DRIVER'S LICENSE
BUYER: C-462-426-82-963-0
CO-BUYER: 0

BUYER(S) JENNIE FAYE CLARK		PHONE 904-239-7462		DATE 03/30/20	
ADDRESS 190 E OHIO AVE MACCLENNY FL 32063		Salesperson: WAYNE HATCH			
DELIVERY ADDRESS TBD SW OLD NIBLACK AVE FORT WHITE FL 32038					
MAKE & MODEL LIVE OAK U-3563E		YEAR 2021	BEDROOMS 3X2	FLOOR SIZE 32 w 56	HITCH SIZE 32 w 60
SERIAL NUMBER RSO		COLOR	PROPOSED DELIVERY DATE	STOCK NUMBER RSO	
New or Used HORIZON		KEY NUMBERS			
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION		
CEILING	27	9 1/5	ROCKWOOL		
EXTERIOR	11	3 1/2	FIBERGLASS		
FLOORS	22	7	FIBERGLASS		
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16 CFR, SECTION 480.16.					
OPTIONAL EQUIPMENT, LABOR, AND ACCESSORIES					
Delivered and Set Up:			Included		
Trim			Included		
Tied Down:			Included		
Dirt Pad			Included		
land clearing			NO		
Connect water and sewer within 20 feet of existing facility			Included		
Furnished			\$ NO		
Unfurnished			AGREE		
Customer responsible for any wrecker fees incurred on lot.			AGREE		
Wheels & axles deleted from sale price of home.			AGREE		
Electrical Hookup			Included		
Type of A/C			PKG HP		
Type of Skirting			LAP TO GROUND		
Type of steps			WOODCODE		
BALANCE CARRIED TO OPTIONAL EQUIPMENT			Included		
NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVER					
DESCRIPTION OF TRADE-IN		YEAR	BEDROOMS	SIZE	
MAKE	MODEL	N/A	N/A	N/A	
TITLE NO	SERIAL	COLOR			
N/A	N/A				
LIEN HOLDER	PHONE NO	AMOUNT			
N/A	N/A	N/A			
TRADE PAYOFF IS TO BE PAID BY 0					
THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on Page 2 of this contract are agreed to as part of the contract and accessories, the insurance as described has been voluntary, the Buyer's trade-in is free of all claims whatsoever except as noted.					
Liquidated Damages are agreed to \$900.00 or 10% of the cash price, whichever is greater.					
REFER TO PARAGRAPH #6 ON THE REVERSE SIDE OF THIS CONTRACT					
The U.S. Department of Housing and Urban Development (HUD) Manufactured Home Dispute Resolution Program is available to resolve disputes among manufacturers, retailers, or installers concerning defects in manufactured homes. Many states also have a consumer assistance or dispute resolution program. For additional information about these programs see sections titled "Dispute Resolution Process" and "Additional Information -- HUD Manufactured Home Dispute Resolution Program" in the consumer manual required to be provided to the purchaser. These programs are not warranty programs and do not replace the manufacturer's or any other person's warranty program.					
ESTIMATED FINAL LOAN AMOUNT \$150,900.00					
1. CASH PURCHASE PRICE \$137,400.00					
TRADE-IN ALLOWANCE \$0.00					
LESS BAL. DUE ON ABOVE \$0.00					
NET ALLOWANCE \$0.00					
CASH DOWN PAYMENT \$10,000.00					
0 \$0.00					
LESS TOTAL CREDITS \$10,000.00					
BALANCE DUE TO FREEDOM \$127,400.00					
LAND PAYOFF 24,000 500 IN ESCROW = 23500 \$23,500.00					
CLOSING COST FINANCED BY LENDER \$0.00					
INSURANCE \$0.00					
Initial: NO VERBAL AGREEMENTS WILL BE HONORED. SELLER AGREES TO PAY UP TO SIX PERCENT OF BUYERS CLOSING COST AND PREPAIDS					
The U.S. Department of Housing and Urban Development (HUD) Manufactured Home Dispute Resolution Program is available to resolve disputes among manufacturers, retailers, or installers concerning defects in manufactured homes. Many states also have a consumer assistance or dispute resolution program. For additional information about these programs see sections titled "Dispute Resolution Process" and "Additional Information -- HUD Manufactured Home Dispute Resolution Program" in the consumer manual required to be provided to the purchaser. These programs are not warranty programs and do not replace the manufacturer's or any other person's warranty program.					

Freedom Mobile Home Sales, Inc DEALER
Not Valid Unless Signed by Steve Smith (Vice Pres)

SIGNED X BUYER
SOCIAL SECURITY NO. 590-56-9007

BY Agent

SIGNED X BUYER
SOCIAL SECURITY NO.

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), STEVE SMITH,
as the owner of the below described property:

Property tax Parcel ID number 36-65-16-04076-137

Subdivision (Name, lot, Block, Phase) PARKER WOODS S/D LOT 37

Give my permission for JENNIE CLARK to place a

Circle one Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home /
Barn - Shed - Garage / Culvert / Other _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

[Signature] 7-28-2020
Owner Signature Date

Owner Signature Date

Owner Signature Date

Sworn to and subscribed before me this 28 day of JULY, 2020. This

(These) person(s) are personally known to me or produced ID _____
(Type)

[Signature] PAUL A. BARNEY
Notary Public Signature Notary Printed Name

Notary Stamp/





[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation

FREEDOM MOBILE HOME SALES, INC.

Filing Information

Document Number S68882
FEI/EIN Number 59-3084660
Date Filed 07/25/1991
State FL
Status ACTIVE

Principal Address

466 SW DEPUTY J DAVIS LN
LAKE CITY, FL 32024

Changed: 03/15/2004

Mailing Address

12788 US 90 WEST
LIVE OAK, FL 32060

Changed: 04/28/2001

Registered Agent Name & Address

KRIS, ROBINSON B
582 W DUVAL ST.
LAKE CITY, FL 32055

Name Changed: 04/04/2008

Address Changed: 04/04/2008

Officer/Director Detail

Name & Address

Title DP

FRIER, WAYNE
12788 US 90 WEST
LIVE OAK, FL 32060

Title DVS

SMITH, STEVEN L
466 SW DEPUTY J DAVIS LN
LAKE CITY, FL 32024

Title DT

FRIER, TODD D
12788 US 90 WEST
LIVE OAK, FL 32060

Title D

FRIER, MATTHEW W
12788 US HWY 90W
LIVE OAK, FL 32060

Annual Reports

Report Year	Filed Date
2018	03/27/2018
2019	02/19/2019
2020	03/17/2020

Document Images

03/17/2020 - ANNUAL REPORT	View image in PDF format
02/19/2019 - ANNUAL REPORT	View image in PDF format
03/27/2018 - ANNUAL REPORT	View image in PDF format
03/03/2017 - ANNUAL REPORT	View image in PDF format
03/02/2016 - ANNUAL REPORT	View image in PDF format
03/04/2015 - ANNUAL REPORT	View image in PDF format
02/27/2014 - ANNUAL REPORT	View image in PDF format
03/26/2013 - ANNUAL REPORT	View image in PDF format
03/23/2012 - ANNUAL REPORT	View image in PDF format
02/24/2011 - ANNUAL REPORT	View image in PDF format
02/23/2010 - ANNUAL REPORT	View image in PDF format
01/15/2009 - ANNUAL REPORT	View image in PDF format
04/04/2008 - ANNUAL REPORT	View image in PDF format
02/22/2007 - ANNUAL REPORT	View image in PDF format
04/17/2006 - ANNUAL REPORT	View image in PDF format
03/03/2005 - ANNUAL REPORT	View image in PDF format
03/15/2004 - ANNUAL REPORT	View image in PDF format
03/05/2004 - ANNUAL REPORT	View image in PDF format
04/03/2003 - ANNUAL REPORT	View image in PDF format
05/22/2002 - ANNUAL REPORT	View image in PDF format
04/28/2001 - ANNUAL REPORT	View image in PDF format
04/18/2000 - ANNUAL REPORT	View image in PDF format
04/21/1999 - ANNUAL REPORT	View image in PDF format
04/15/1998 - ANNUAL REPORT	View image in PDF format
04/30/1997 - ANNUAL REPORT	View image in PDF format
05/01/1996 - ANNUAL REPORT	View image in PDF format

CLARK

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

HORIZON 4-3563C

Installer **DAVID ALBRIGHT**

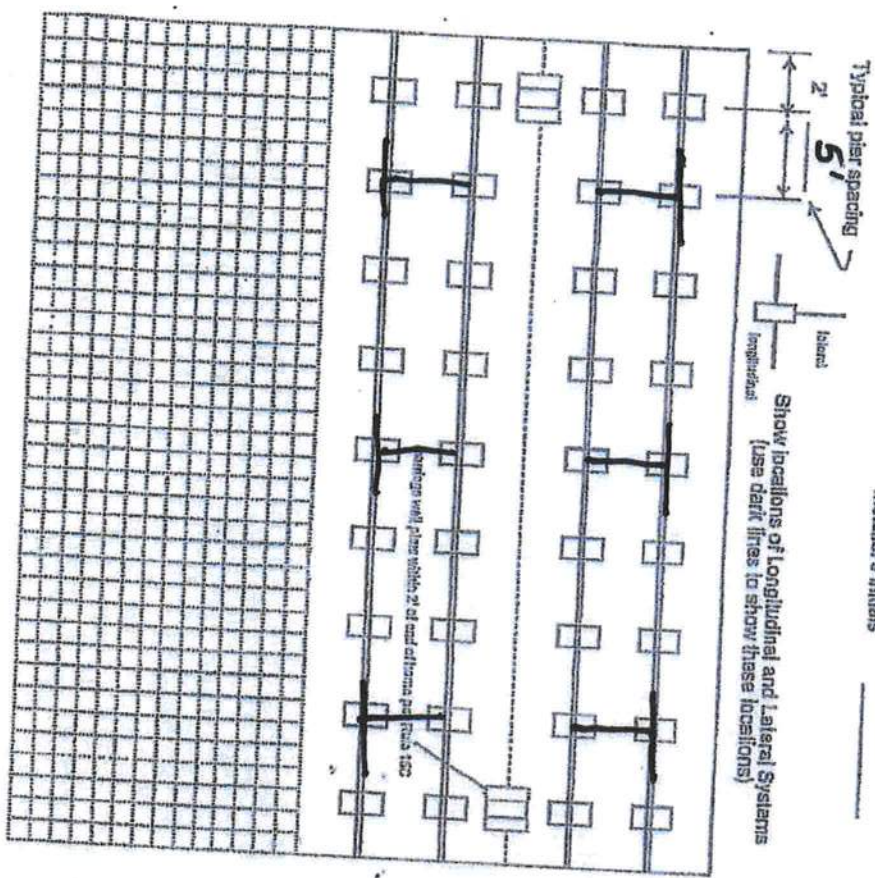
License # **IH/1129420**

911 Address where home is being installed **TBD 500 OLD NIBBAC AVE**

Manufacturer **LIVE OAK HOMES** Length x width **32x56/60**

NOTES: 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. Underlaid Lateral Arm Systems cannot be used on any home (new or used) where the skidwall ties exceed 5 ft 4 in.

Installer's initials



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 Detail # **72902**

Triple/Quad ☐ Serial # **LOHGA**

PIER SPACING TABLE FOR USED HOMES

Land bearing capacity (sq ft)	16' x 16' (256)	18' 1/2" x 18' (342)	20' x 20' (400)	22' x 22' (484)	24' x 24' (576)	26' x 26' (676)
1000 net	3'	4'	5'	6'	7'	8'
1500 net	4'	5'	6'	7'	8'	9'
2000 net	5'	6'	7'	8'	9'	10'
2500 net	6'	7'	8'	9'	10'	11'
3000 net	7'	8'	9'	10'	11'	12'
3500 net	8'	9'	10'	11'	12'	13'

PIER PAD SIZES

I-beam pier pad size **17x125**

Perimeter pier pad size **16x16**

Other pier pad sizes (required by the mfg.) **23x31**

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 **FACTORY** Pier pad size **DIAGRAM**

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) **OTT**

Manufacturer **OTT**

Longitudinal Stabilizing Device w/ Lateral Arms **OTT**

Manufacturer **OTT**

ANCHORS

4 ft ☒ 5 ft ☒

FRAME TIES

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

OTHER TIES

Sidewall **Number**

Longitudinal Marriage wall **7-3-3-4**

Shearwall **2**

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 285 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 require anchors with 4000 lb loading capacity.

Installer's initials DA

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name DAVID ALBRIGHT MOBILE HOME SVC

Date Tested _____

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. 73-77

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 79-80

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 78-110

Application Number: _____

Date: _____

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: LAGS Length: 6" Spacing: 2'
Walls: Type Fastener: SCREWS Length: 3" Spacing: 18"
Roof: Type Fastener: LAGS Length: 6" Spacing: 2'
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, 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.

Installer's Initials DA

Type gasket FACTORY
Pg. 41

Installed:
Between Floors Yes X
Between Walls Yes END WALLS
Bottom of ridgebeam Yes X

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X _____, Pg. 124
Siding on units is installed to manufacturer's specifications. Yes X _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes X _____

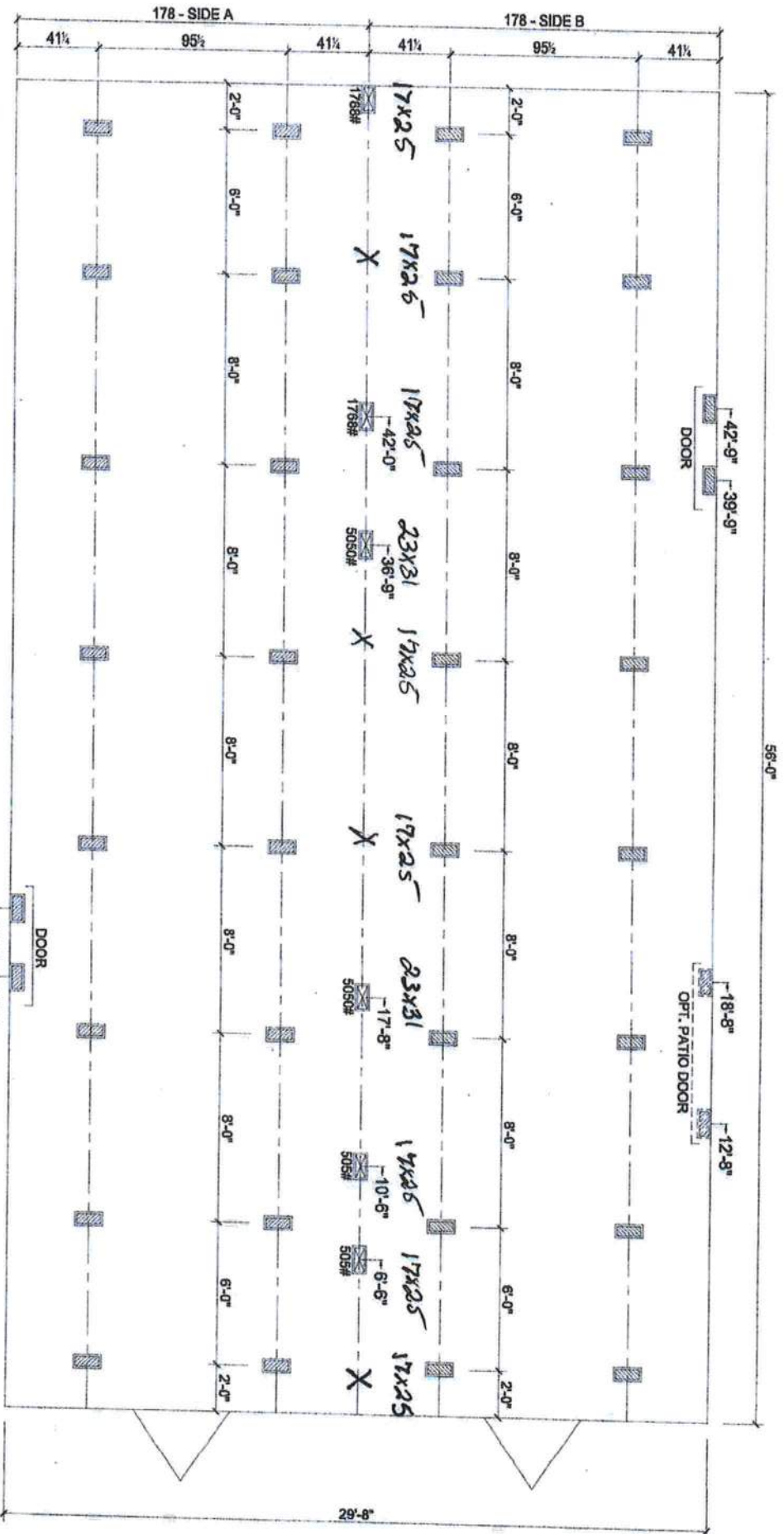
Miscellaneous

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

Date _____



- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY. QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

Live Oak Homes
MODEL: U-3563E-SIG - 32 X 60
3-BEDROOM / 2-BATH

HORIZON

U-3563E-SIG

License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT		
Order #: 4517	Label #: 72902	Manufacturer: LIVE OAK
Homeowner: CLARK	Year Model:	(Check Size of Home)
Address: S.W. OLD NIMBIA AVE	Length & Width: 60x32	Single _____
City/State/Zip: FORT WORTH FL 32038	Type Longitudinal System: 60TI	Double <input checked="" type="checkbox"/>
Phone #:	Type Lateral Arm System: 60TI	Triple _____
Date Installed:	New Home: <input checked="" type="checkbox"/> Used Home: _____	HUD Label #:
Installed Wind Zone: II	Data Plate Wind Zone: II	Soil Bearing / PSF:
Note:		Torque Probe / in-lbs:
		Permit #:

**STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL**

72902

LABEL #	DATE OF INSTALLATION
DAVID E ALBRIGHT	
NAME	
IH / 1129420 / 1	4517
LICENSE #	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.

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.

PRETER	REFR
--------	------



32 X 60 - Approx. 1661 Sq. Ft.

Date: 06/04/19

- All room dimensions include closets and square footage figures are approximate.
- Transom windows are available on optional 9'-0" sidewalk houses only.
- Live Oak Homes reserves the right to modify product offerings at any time.
- Siding shown is optional.
- Small dormer is optional only

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: 8/7/2020 5:56:44 PM
Address: 272 SW OLD NIBLACK Ave
City: FORT WHITE
State: FL
Zip Code: 32038
Parcel ID: 04076-137

REMARKS: Address for proposed structure on parcel.

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

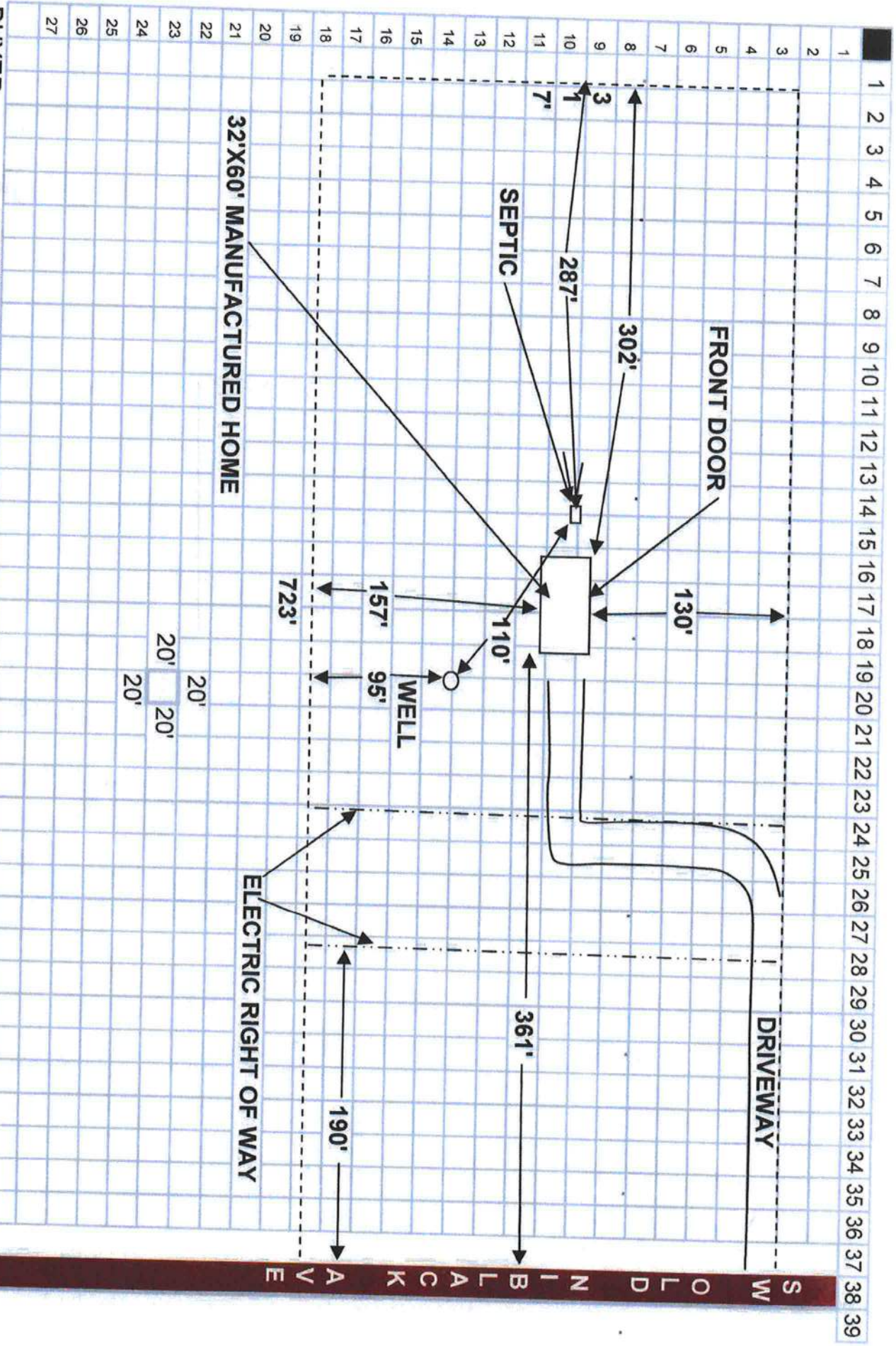
Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

BUYER JENNIE CLARK PARCEL ID# 36-6S-16-04076-137 DATE DRAWN 4/16/20
ACREAGE 5.0 DEALER: FREEDOM HOMES 386-752-5355





Columbia County Property Appraiser

Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 36-6S-16-04076-137 | VACANT (000000) | 5 AC

LOT 37 PARKER WOODS S/D. WD 1019-2770, WD 1149-677, QC 1411-2109, WD 1411-2110,

CLARK JENNIE &

Owner: **FREEDOM MOBILE HOMES SALES INC**
466 SW DEPUTY J DAVIS LN
LAKE CITY, FL 32024

Site:

Sales

Info

5/14/2020
10/31/2018
4/22/2008

\$24,000 V (Q)
\$100 V (U)
\$100 V (U)

2020 Working Values

Mkt Lnd	\$29,744	Appraised	\$29,744
Ag Lnd	\$0	Assessed	\$29,744
Bldg	\$0	Exempt	\$0
XFOB	\$0		
Just	\$29,744	Total	county:\$29,744
		Taxable	city:\$29,744
			other:\$29,744
			school:\$29,744

NOTES:



Columbia County, FL

This information, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office.

GrizzlyLogic.com



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave. Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, DAVID ALBRIGHT, give this authority for the job address show below
Installer License Holder Name

only, 272 S.W. OLD NIBLACK AVE, FORT WHITE, FL, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control
and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
PAUL A. BARNEY	<i>Paul A. Barney</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
STEVE SMITH	<i>Steve Smith</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Property Owner
LINDA PENHALIGON	<i>Linda Penhaligon</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license
holder for violations committed by him/her or by his/her authorized person(s) through this
document and that I have full responsibility for compliance granted by issuance of such permits.

David Albright License Holders Signature (Notarized) 1H1129420 License Number 7-31-2019 Date

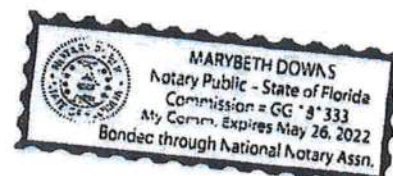
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 31 day of July, 2019.

Marybeth Downs
NOTARY'S SIGNATURE

(Seal/Stamp)





COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, DAVID ALBRIGHT, give this authority and I do certify that the below
Installers Name

referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
PAUL A. BARNEY	<i>Paul A. Barney</i>	FREEDOM HOMES
STEVE SMITH	<i>Steve Smith</i>	FREEDOM HOMES
LINDA PENHALIGON	<i>Linda Penhaligon</i>	FREEDOM HOMES

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license
holder for violations committed by him/her or by his/her authorized person(s) through this
document and that I have full responsibility for compliance granted by issuance of such permits.

David Albright License Holders Signature (Notarized) 1H1129420 License Number 7-31-2019 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is David Albright,
personally appeared before me and is known by me or has produced identification
(type of I.D.) personally known on this 31 day of July, 20 19.

Marybeth Downs
NOTARY'S SIGNATURE

(Seal/Stamp)



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ 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 <u>WATKINSON ELECTRIC</u> License #: <u>EG13002957</u>	Signature <u>[Signature]</u> Phone #: <u>386 972 1700</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>STYLECREST</u> License #: <u>CAC1817658</u>	Signature <u>[Signature]</u> Phone #: <u>850-769-1453</u>
	Qualifier Form Attached <input type="checkbox"/>	

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. 5. 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.

Revised 10/30/2015