Parcel:

09-68-16-03804-115 (19383)

Owner & Property Info

AYLOR GEORGE A AYLOR JOANN M

Owner

P O BOX 877

FORT WHITE, FL 32038

Site

689 SW CENTERVILLE Ave, FORT WHITE

LOT 15 DOE RUN S/D UNREC: COMM SW COR OF NW1/4 OF SW1/4, RUN N 441.41 FT, E 12 FT

DERd HARD MORGAN Josheld & Morgan Stone

TO E R/W LAZY OAK RD FOR POB, RUN N ALONG R/W 441.07 FT, THENCE E 988.21 FT, Description*

SOUTH 440.75 FT, WEST 990.57 FT TO POB. 925-2508. QC 1078-2433, PR 1211-1135, WD 1417-

1403,

Area

10.01 AC

Use Code** PASTURE CLS33 (6200)

S/T/R

09-6S-16E

Result: 1 of 14

Tax District 3

imes M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 560.00

Prepared by:

Heritage Title Services of North Florida, Inc. 201 Parshley Street S.W. Live Oak, Florida 32064

File Number: 22-0098

General Warranty Deed

Made this May 9, 2022 A.D. By George A. Aylor, and Joann M. Aylor, husband and wife, whose post office address is: PO Box 877, Fort White, Florida 32038, hereinafter called the grantor, to Joshua Robert Stone and Morgan Marie Stone, a married couple, whose post office address is: PO Box 511, Fort White, Florida 32038, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 15:

Part of the South 1/2 of Section 9, Township 6 South, Range 16 East, Columbia County, Florida, more particularly described as follows:

Commence at the Southwest corner of the Northwest 1/4 of the Southwest 1/4 of said Section 9; thence North 00 degrees 37 minutes 43 seconds West, along the West line of said Section 9, a distance of 441.41 feet; thence North 88 degrees 39 minutes 04 seconds East, 12.00 feet to a point on the East right of way line of Lazy Oak Road and the Point of Beginning; thence North 00 degrees 06 minutes 34 seconds West, along said right of way line 441.07 feet; thence North 88 degrees 40 minutes 00 seconds East, 988.21 feet; thence South 00 degrees 24 minutes 57 seconds East, 440.75 feet; thence South 88 degrees 39 minutes 04 seconds West, 990.57 feet to the Point of Beginning.

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

Parcel ID Number: 09-6S-16-03804-115

Subject to any valid and existing oil, gas or mineral right, reservation, royalty transfer or mineral deed conveying or reserving any interest in the oil, gas or minerals underlying said lands, or any portion thereof, heretofore executed and duly recorded in the public records of said county.

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 grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor 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, 2022.

DEED Individual Warranty Deed With Non-Homestead-Legal on Face

Prepared by:

Heritage Title Services of North Florida, Inc. 201 Parshley Street S.W. Live Oak, Florida 32064

File Number: 22-0098

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

Signed, sealed and delivered in our presence:

Check Book

Witness Printed Name Check Book

Joann M. Aylor

Address: PO Box 877, Fort White, Florida 32038

State of Florida

County of Sumanne

The foregoing instrument was acknowledged before me by means of [X] physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced before me by means of [X] physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced before me by means of [X] physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced for the physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced for the physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced for the physical presence of [_] online notarization, this 9th day of May, 2022; by George A. Aylor, and Joann M. Aylor, husband and wife, who is/are personally known to me or who has produced for the physical presence of [_] online notarization, this 9th day of May (_] online notarization for the physical presence of [_] online notarization for the physical p

My Commission Expires

Notary Public State of Florida Cheryl E. Beaty My Commission GG 988279 Expires 07/31/2024

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR	Ernest Scott Johnson	PHONE	352-494-8099
	-			

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

Joshua Stone

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> 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 NameJames	s Dale Williams	Signature		
	License #: EC 1	3007092	Phone #: _	386-362-2035	
Market	Qualifier Form Attached X				
MECHANICAL/		othy Shatto	Signatur		
A/C	License #:CAC	0.7	and the second s	386-496-8224	
	Qualifier Form Attached X				

Qualifier Forms cannot be submitted for any Specialty License.

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

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.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS 135 NF Hernando Ave. Suite B-21 Lake City. EL 22055

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

, Dale Williams	(license holder name), licensed qualifier			
for Affordable Electric	(company name), do certify that			
the below referenced person(s) listed on this for employee leasing arrangement; or, is an officer Florida Statutes Chapter 468, and the said personner control and is/are authorized to purchase permit	rm is/are employed by me directly or through an of the corporation; or partner as defined in con(s) is/are under my direct supervision and			
Printed Name of Person Authorized	Signature of Authorized Person			
1. Dale Burd	1.			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
authority to discipline a license holder for violatic officers, or employees and that I have full respondent ordinances inherent in the privilege granted and ordinances inherent in the privilege granted at any time the person(s) you have authorized must notify this department in writing of the charform, which will supersede all previous lists. Fail use your name and/or license number to obtain discense Holders Signature (Notarized)	by issuance of such permits is/are no longer employee(s), or officer(s), you note and submit a new letter of authorization ure to do so may allow unauthorized persons to			
NOTARY INFORMATION: STATE OFFlorida COUNTY OF Columbia The above license holder, whose name is Laws D. W. // iam Soversonally appeared before me and is known by me or has produced identification type of I.D.) on this the day of 20/9 Motary's SIGNATURE Seai/Stamp				
CHARLOTTE R. HAR	ROLD			





COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

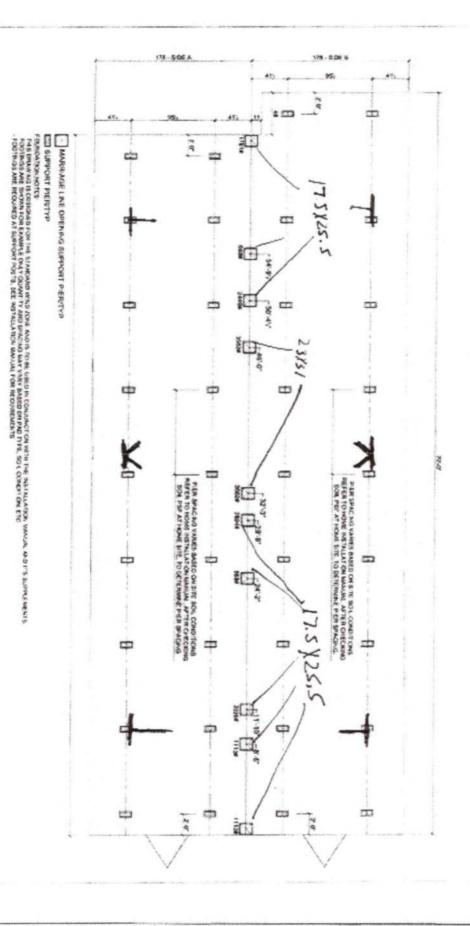
i, Timothy Shatto	(license holder name), licensed qualifier			
for Shatto Heat & Air				
the below referenced person(s) listed on this for holder, or is/are employed by me directly or three officer of the corporation; or, partner as defined person(s) is/are under my direct supervision an sign permits; call for inspections and sign subcommends.	ough an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said			
Printed Name of Person Authorized	Signature of Authorized Person			
1. Bo Royals	1. Doga			
2. Dale Burd	2.			
3.	3.			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible under my license and fully responsible for complete Local Ordinances. I understand that the State are authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted life at any time the person(s) you have authorized officer(s), you must notify this department in write authorization form, which will supersede all previous unauthorized persons to use your name and/or life.	is/are no longer agents, employee(s), or ing of the changes and submit a new letter of ious lists. Failure to do so may allow.			
Licensed Qualifiers Signature (Notarized)	CAC 057875 2/22/18 License Number Date			
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Union				
personally appeared before me and is known by (type of I.D.) on t	me or has produced identification this 20 day of february, 20 18.			
NOTARY'S SIGNATURE	(Seal/Stamp) VICTORIA K. PALMER			
	Notary Public - State of Florida			

Commission # FF 207489 My Comm. Expires Mar 9, 2019 Bonded through National National Association

Connect all sewer drains to an existing sewer tap or septic tank. Pg.	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.	Date Tested ASSUMED OLIVER HOLV USES 485 FOOT ANCHORS	anchors are allowed at the stewall locations. I understand 5 ft anchors are required at all centerine tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 b belding capacity. All TESTS MIST BE DEBEROMED BY A CENTER MIST BY A CENTER MIST BE DEBEROMED BY A CENTER MIST BY A CENTER	TORQUE PROBE TEST The results of the torque probe test is inch pounds or check here if you are declaring 5' anchors without testing A test showing 275 inch pounds or less will require 5 foot anchors. Note: A state approved lateral are setted in the control of t		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.	The pocket penetrometer tests are rounded down to pst or check here to declare 1000 lb. soil without testing X X
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	Corgo	Skirting to be installed. Yes No Dryer vent installed cutside of skirting. Yes N/A Range downflow vent installed outside of skirting. Yes Drein fines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes	Weatherproofing The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes	Type gasket Pg	Lunderstand 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.	Type Fastener: I a g Length: Type Fastener: I a g Length: Type Fastener: I a g Length: For used homes a win. 30 gauge 8" wide ga will be centered over the peak of the roof and roofing nails at 2" on center on both sides of the	Debris and organic material removed Water drainage: Natural Swale Pad Other Pastening multi wide units Floor: Type Fastener: 1415 Length: 7 Specing: 20

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

Installer Signature Claud



3266398FDM

FREEDOM 32 × 70 - 38R 2 BATH

2-4-2020 Þ R 1.999 SQ FT 1.999 SQ FT

STATE OF FLORIDA DEPARTMENT OF HEALTH

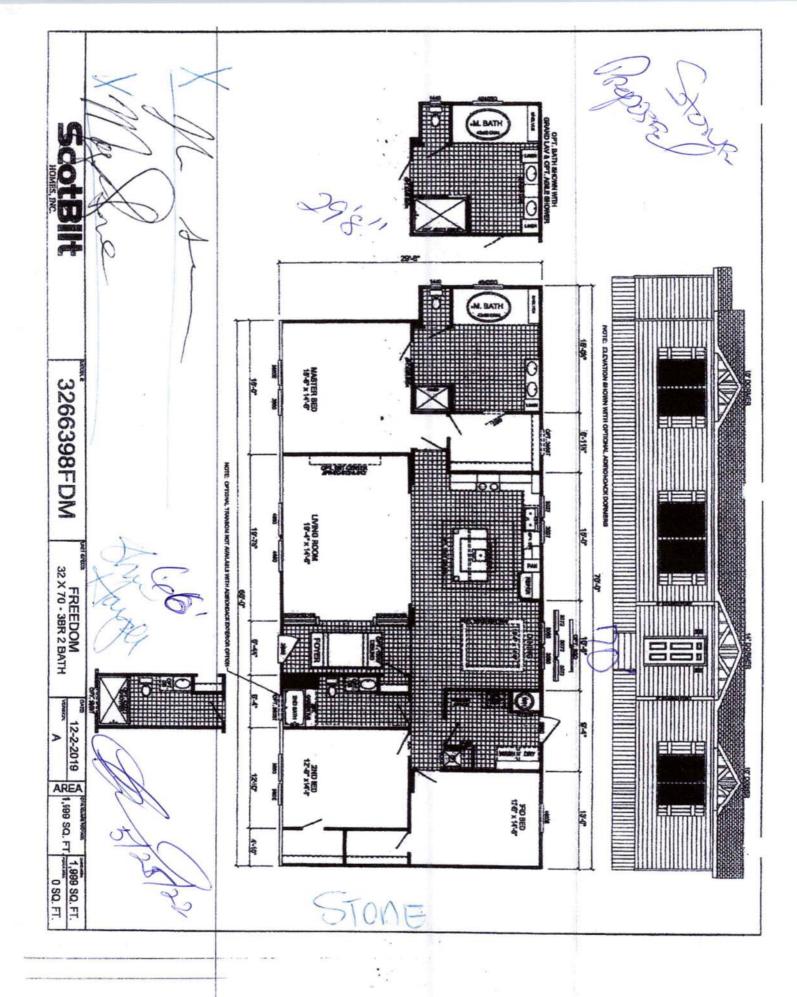
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

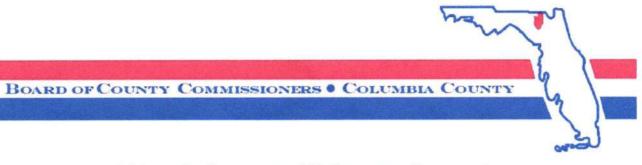
	Permit Application Number				
STONE.	PART II - SITEPLAN	210			
Scale: 1 inch = 40 feet.		0.0			
-					
20	SLOPE 70' 126' 100' 1	100 58' 35' 35'			
Notes:					
	LOS 10.01 HORASE SH	en Attachal			
	1 TRANSE STE	n H Mally			
Site Plan submitted by		CONTRACTOR			
Plan Approved	Not Approved	Date			
Ву		County Health Department			

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



1 of 1





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:

6/22/2020 2:47:18 PM

Address:

689 SW CENTERVILLE AVE

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

09-6S-16-03804-115

REMARKS:

This address is a verified address in the county's addressing system.

Verification ID: 1a4fe797-a273-4592-8f0a-f43f098476b5

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:

GIS Specialist

Columbia County GIS/911 Addressing Coordinator