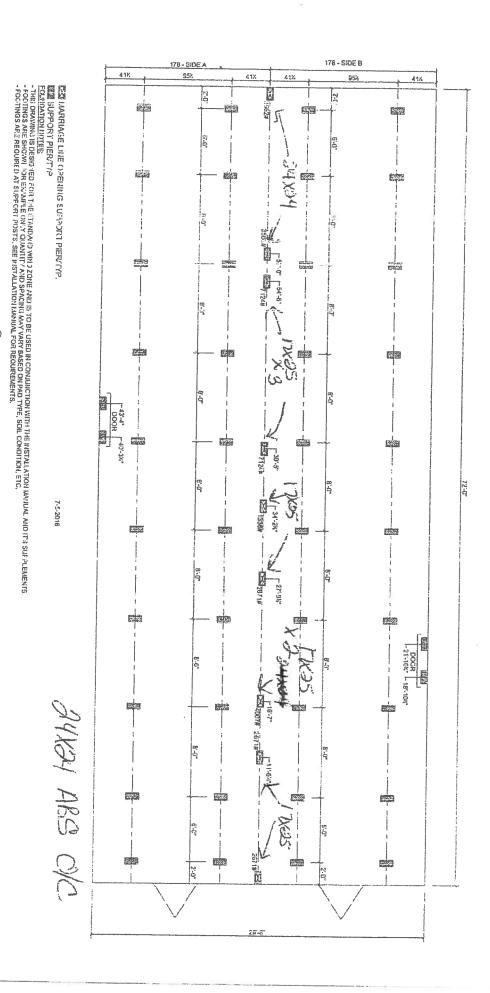
ck#1248

	PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION
E	For Office Use Only (Revised 7-1-15) Zoning Official Building Official TM 12/c/17 IP# 17 2-0 4 Date Received 12/4 By Two Permit # 36/79 Iood Zone X Development Permit Zoning A-3 Land Use Plan Map Category A
_	IMA Map# Elevation Finished Floor 1 above River in Floodway
D	Recorded Dead or II Property Appraiser FO Wate Pian 2 2mm 17-0762-N Dead letter OR Seleting well II Land Owner Affidavit Anterial Authorization II FW Comp. letter Mapp Fee Paid
	DOT Approval Parent Parcel #
	Ellisville Water Sys Assessment Tulk County In County Sub VF Form
Pro	perty ID # <u>28 -45-17- 08 7 9 7-010</u> SubdivisionLot#
e	New Mobile Home WH Size 30x72_Year 2018
	Applicant Erika Ashley Phone # 386-498-0424
•	Address 12426 NW US Hury 441 Alachua Fl 32615
=	Name of Property Owner Debra Camie Phone# 380-292-393
•	911 Address 432 SW County Road 242-A Lake City for 32025
	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Duke Energy
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u> Name of Owner of Mobile Home <u>The hoa Comie</u> <u>Phone #</u>
	Name of Owner of Mobile Home Debra Camie Shone #
= {	Name of Owner of Mobile Home Dehra Comie Phone #
= {	Name of Owner of Mobile Home Dehm Comie Shone# Relationship to Property Owner Self
n [Name of Owner of Mobile Home The home Comie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property
s :	Name of Owner of Mobile Home Dehm Camie Shone # Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size acre Total Acreage acre Do you: Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
	Name of Owner of Mobile Home Debra Camie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Carl Total Acreage Culvert Permit (Putting in a Culvert) Sethis Mobile Home Replacing an Existing Mobile Home Convertions to the Property Service Pr
	Name of Owner of Mobile Home Debra Comie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Total Acreage Culvert Permit (Currently using) Private Drive or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) or this Mobile Home Replacing an Existing Mobile Home Oc
	Name of Owner of Mobile Home Debra Camie Phone # Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Cacle Total Acreage Cacile Co you: Have Existing Drive of Private Drive or need Culvert Permit (Currently using) (Clue Road Sign) Sthis Mobile Home Replacing an Existing Mobile Home Called Ariest Cacle Priving Directions to the Property Sharest Cacile Priving Directions to the Property Sharest Cacile Priving Directions to the Property Sharest Cacile Priving Directions to the Property Cacle Private Drive of Relations Private Drive of Relati
	Name of Owner of Mobile Home Debra Comie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Total Acreage OCTU Comently using Private Drive or need Culvert Permit (Putting in a Culvert) Sthis Mobile Home Replacing an Existing Mobile Home No CR 242A 194 294 Still Denay Terr 301 104 000 1644. Phone #353-595-8339
	Name of Owner of Mobile Home Debra Comie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Total Acreage Culvert Permit (Putting in a Culvert Waiver (Circle one) (Rue Road Sign) (Rue Road Sign) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) or this Mobile Home Replacing an Existing Mobile Home Company Text Study Text Study Text Study Text Study Text Study Text Phone #353-575-8339
	Name of Owner of Mobile Home Debra Carrie Phone # Address Relationship to Property Owner Self Current Number of Dwellings on Property Lot Size Carrie Total Acreage Culvert Permit Or Culvert Waiver (Circle one) (Ruting in a Culvert) (Not existing but do not need a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) or Culvert Waiver (Circle one) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert) or Culvert Waiver (Circle one) or Culvert (C



Live Oak Homes MODEL: L-3725B - 32 X 76 5-BEDROOM / 3-BATH

(A) MANN ELECTRICAL
(B) ELECTRICAL CROSSOVER
(C) WATER INLET
(D) WATER CROSSOVER (IF ANY)
(E) GAS INLET (IF ANY)
(F) GAS CROSSOVER (IF ANY)

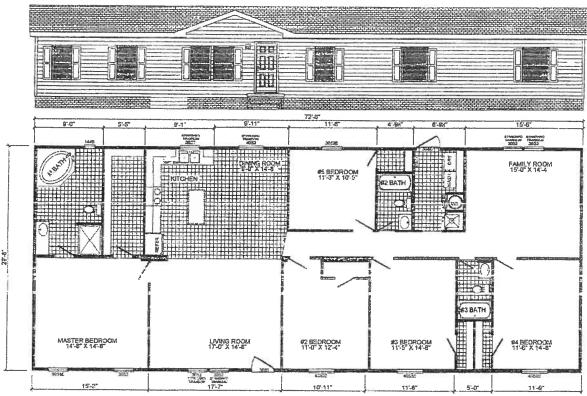
DUCT CROSSOVER
 H SELVER DROFS
 T PETURN ART (WOPT, HEAT PUMP OH DUCT)
 SUPPLY ART (WOPT, HEAT PUMP OH DUCT)

Mobile Home Permit Worksheet	Application Number: Date: 11/7/17
Installer: James Hall License # 3 141035/25	New Home Used Home Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C
Manufacturer Live CYA/C Length x width 32X79	Single wide Wind Zone II Wind Zone III Double wide Installation Decal#
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. Typical pier spacing 2' Show locations of Longitudinal and Lateral Systems	PIER SPACING TABLE FOR USED HOMES Load bearing size (sq in) (256) 18 1/2" (342) (400) (484)" (576)" (676) (676) 1000 psf 3' 4' 5' 6' 7' 8' 1500 psf 4' 6' 6' 7' 8' 8' 8'
(use dark lines to show these locations)	2000 psf 6' 8' 8' 8' 8' 8' 8' 8'
marriage wall piers within 2 of one of home per Rule 15C	List all marriage wall openings greater than 4 foot and their pier pad sizes below. Opening Pier pad size Opening Pier pad size ANCHORS ANCHORS ANCHORS ANCHORS ANCHORS FRAME TIES within 2' of end of home spaced at 5' 4" oc TIEDOWN COMPONENTS Longitudinal Stabilizing Device (LSB) Manufacturer Longitudinal Stabilizing Device w Lateral Arms Marriage wall Shearwall

Morksheet Worksheet

Wobile Home Permit Worksheet	Application Number: Date: 11/7/12
	Site Propagation
POCKET PENETROMETER TEST	
The pocket penetrometer tests are rounded down topsf or check here to declare 1000 lb. soit without testing.	Debris and organic material removed Water drainage: Natural Swale Pad 1 Other
POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations. 2. Take the reading at the depth of the footer.	Four Type Fastener: Length: Wide units Floor: Type Fastener: Length: Wide Spacing: Four Spacing: Length: Spacing: Four Spacing: Four Spacing: Four Spacing: Spacing: Four
3. Using 500 lb. increments, take the lowest	Gasket (weatherproosing requirement)
reading and round down to that increment. XXXX TORQUE PROBE TEST	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 CAM RI Installed:
The results of the torque probe test is \(\) \(Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes
	Weatherproofing
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 to noiding capacity.	The bottomboard will be repaired and/or taped. Yes Pe 50/10 Siding on units is installed to manufacturer's specifications. Yes Prireplace chimney installed so as not to allow intrusion of rain water. Yes
Installer's initials	Miscerianeous
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name Date Tested	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:
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	Installer verifies all information given with this permit worksheet
Connect all sewer drains to an existing sewer tap or septic tank. Pg. 5 CDC	manufacturer's installation instructions and or Rule 15C-1 & 2
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.	Installer Signature Date 1117/17

5K



L-3725B

5-BEDROOM / 3-BATH

32 X 76 - Approx. 2140 Sq. Ft.

2-8-2016

2-9-2016 All room dimensions include closers and impany Sociage Squips are approximate, "Transcen vandores are averlable on optional S-U sideriall houses only "Underproxing shown is optional

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

45402

LABEL#

DATE OF INSTALLATION

JAMES R. HALL

NAME

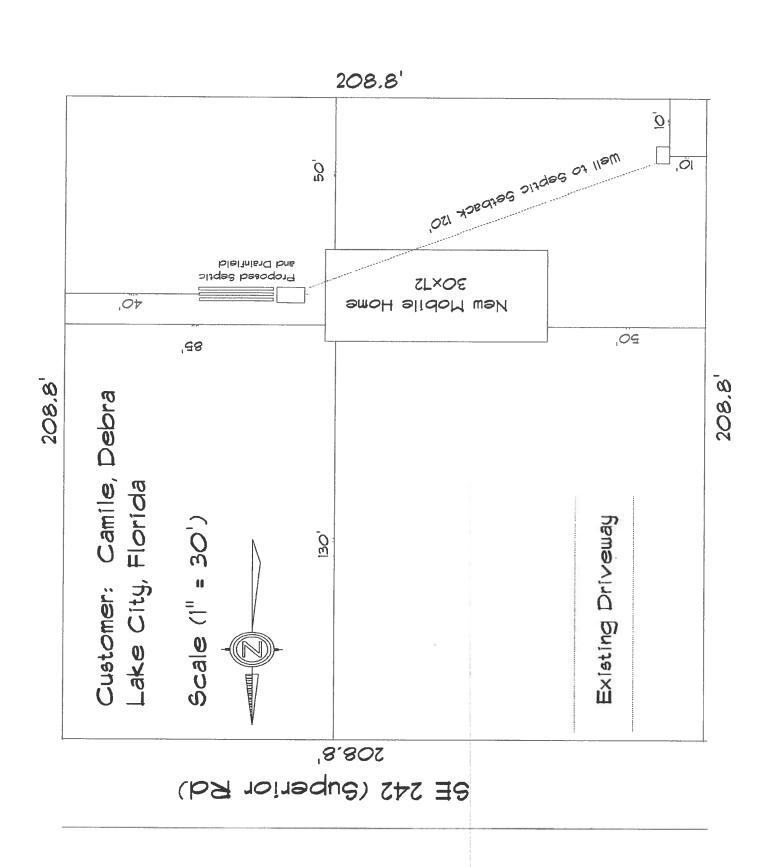
IH/1025175/1

2958

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.



District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips 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:

9/27/2017 1:21:43 PM

Address:

432 SW COUNTY ROAD 242A

City:

LAKE CITY

State:

FL

Zip Code

32025

Pracel ID

08797-010

REMARKS: Address Verification.

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 Teleph Email: gis@columbiacountyfla.com

Telephone: (386) 758-1125

Columbia County Property Appraiser Jeff Hampton

2017 Tax Roll Year updated: 10/27/2017

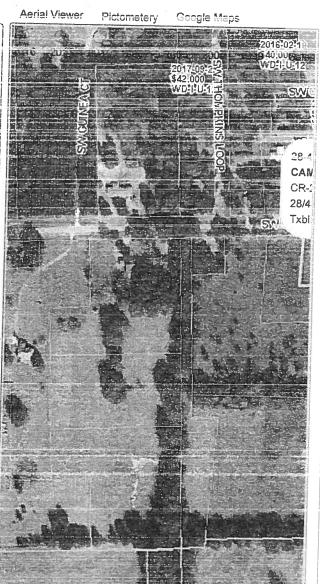
Parcel: << 28-4S-17-08797-010

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Owner & Pa	operty Info	Res	ult: 4 of 6
Owner	CAMIEL DEB 1195 SW CR- LAKE CITY, F	242A	Marie Marie Andrew (1945) Provider in view accompanya (1945)
Site	,		
Description *	COMM NE COF W ALONG C/L of FT TO S R/W C 208.80 FT, W 20 208.80 FT TO P 904, WD 1337-1	CR-242, 585.25 R-242 FOR PO 08.80 FT, N 208 OB. WD 1191-3	FT, S 40.10 B, CONT S 3.80 FT F
Area	1 AC	S/T/R	28-4S-17E
Use Code *	VACANT (000000)	Tax District	2

^{*} The Description above is not to be used as the Legal Description for this parcel in any legal transaction. The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code. Please contact the Columbia County Planning & Development office for specific zoning information.

Property & Assessment Values				
2017 Cer	tified Values	2018 Working Values		
Mkt Land (1)	\$10,575	Mkt Land (1)	\$11,633	
Ag Land (0)	\$0	Ag Land (0)	50	
Building (0)	\$0	Building (0)	\$0	
XFOB (0)		XFOB (0)	\$0	
Just	\$10,575	Just	\$11,633	
Class	\$0	Class	\$0	
Appraised	\$10,575	Appraised	\$11,633	
Exempt	\$0	Exempt	so	
Assessed	\$10,575	Assessed	\$11,633	
Total Taxable	county:\$10,575 city:\$10,575 other:\$10,575 school:\$10,575		county:\$11,633 city:\$11,633 other:\$11,633 schooi:\$11,633	



ales History						
Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
5/24/2017	\$100	1337/1495	QC	V	11	110000
5/19/2014	\$100	1275/0904	QC	V	U	11
3/29/2010	\$22,000	1191/2084	WD	V	U	37

Building Charac	teristics					
Bidg Sketch	Bldg Item	Bldg Desc	Year Blt	Base SF	Actual SF	Bldg Value
			NONE			- reg value

Extra Fea	tures & Ou	t Buildings - (Show Codes)			
Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
				NONE	11	(000)
	The same of the sa				·	

Dependable Well Drilling, Inc. 2139 NW 50th St

2139 NW 50th St Bell, Fl. 32619

Ph: 386-935-3042 Fax: 866-402-8357 E-mail: <u>drillmaster57@outlook.com</u>

181

We will be putting in a well for Debra Camiel at 1195 SW CR-242A, Lake City Fl. 32025. Property ID # 28-4S-17-08797-010, it will have a 1HP pump with cycle stop, And tank.

Randy Smith

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1712-04	CONTRACTOR DAMES Hall	PHONE 352-595-8939
----------------------------	-----------------------	--------------------

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 <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Fiorida 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 Glenn Whittington Signature Hern Whittington License #: EC 13002957 Phone #: 386-684-94601
/	1079	Qualifier Form Attached
√	MECHANICAL/	Print Name Divane West Signature Da E World License #: CAC 18 8 76 Phone #: 352-317-0176
		Qualifier Form Attached

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.

This Instrument Prepared by & return to:

Name: Address: Henry Camiel, Jr

1195 SW CR 242A

Lake City Fl 32025

Inst: 201712009754 Date: 05/25/2017 Time: 8:04AM Page 1 of 2 B: 1337 P: 1495, P.DeWitt Cason, Cicrk of Court

LS.

Columbia, County, By: PT Deputy CierkDoc Stemp-Deed: 0.70

Parcel 1.D. #: 08797-010

SPACE ABOVE THE LINE FOR PROCESSIVE DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 24th day of May, A.D. 2017, by HENRY CAMIEL, JR., A WIDOWER hereinafter called the grantor, to DEBRA D. CAMIEL, A WIDOW, whose post office address is, 1195 SW CR 242A, LAKE CITY FL. 32025 hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" 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 grantee 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 grantee 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, 2016.

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:

Signature

yler Rogers

Witness Signature

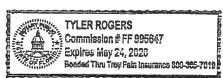
Printed Name

Address:

1195 SW CR 242A LAKE CITY FL 32025

STATE OF FLORIDA COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 24th day of May, 2017, by HENRY CAMIEL, Jr., who is known to me or who has produced ____ Driver's License as identification.



Notary Profice My commission expires

Exhibit "A"

Section 28, Township 4 South, Range 17 East, Columbia County, Florida: Part of the NW ¼ of the NW ¼ of said section, more particularly described as follows:

Commence at the NE Corner of the NW 1/4 of said NW ¼ and run South 88°25'36"West along the centerline of State Road #S-242, 585.25 feet; thence South 4°03'30"West, 40.10 feet to the South right-of-way of said State Road #S-242 for a Point of Beginning; thence continue South 4°03'30"West, 208.80 feet; thence South 88°25'36"West, 208.80 feet; thence North 4°03'30"East, 208.80 feet to the said right-of-way line; thence North 88°25'36"East, along said right-of-way line, 208.80 feet to the Point of Beginning.

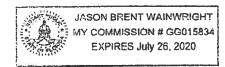


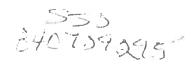
COLUMBIA COUNTY BUILDING DEPARTMENT

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, James Hall Installers Name	give this authority a	and I do certify that the below						
referenced person(s) listed on this form is/are under my direct supervision and control and								
is/are authorized to purchase po	ermits, call for inspections and sig	n on my behalf.						
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name						
Erika Ashley	Andry -	134h Street Home Sale	25					
I. the license holder, realize that	t I am responsible for all permits p	urchased, and all work done						
	responsible for compliance with a							
Local Ordinances.								
I understand that the State Licer	nsing Board has the power and au	thority to discipline a license						
holder for violations committed to	by him/her or by his/her authorized	d person(s) through this						
document and that I have full re-	sponsibility for compliance grante	d by issuance of such permits.						
License Holders Signature (Nota	TH//ic	75/75 4/10/17						
NOTARY INFORMATION:	LICENSE NO	mber Date						
STATE OF: Florida	_countrof: Alachua							
The above license holder, whose	e name is James Hal							
personally appeared before me	and is known by me or has produc	ced identification						
(type of I.D.)	on this <u>lo+h</u> day o							
1Bet 4	Direct of the second	,						
NOTARY'S SIGNATURE	(S	eal/Stamp)						







DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL F	ERMIT NO. ATE PAID: EE PAID: ECCIPT #:
APPLICATION FOR: [X] New System [] Existing System [] Holding Tank [] Repair [] Abandonment [] Temporary APPLICANT:	
AGENT: Erika Ashley TEL	EPHONE: 38(-418-0424
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEM A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA SAPPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFAT	EMS MUST BE CONSTRUCTED STATUTES. IT IS THE
PROPERTY INFORMATION	
LOT: BLOCK: SUBDIVISION:	PLATTED:
PROPERTY ID #: $28-48-17-08797-610$ ZONING : I/M OR	EQUIVALENT: [Y /N]
PROPERTY SIZE: ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []	
PROPERTY ADDRESS: 432 SU) COUNTY RANGE 242A DIRECTIONS TO PROPERTY: Hwy 441 to Sw CR 242 Sw Wendy Terr 3.1 lot on 1941.	Lake City, F-L 32C2
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIA	I
Unit Type of No. of Building Commercial/Institution Bedrooms Area Sqft Table 1, Chapter 1 (1) (1) (1) (1) (1) (2) (3) (4) (5) (5) (6) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	cutional System Design 64E-6, FAC
STONAMINE. QUI	TATE: 13/6/17

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

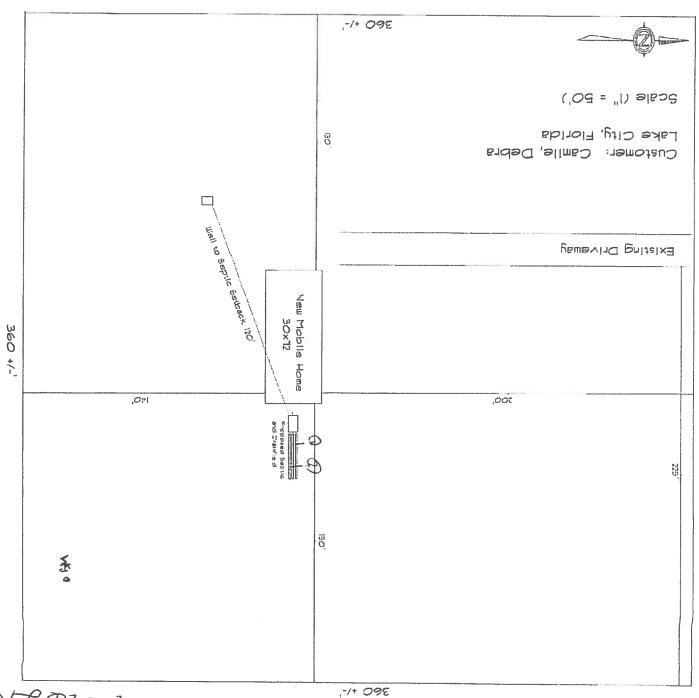
STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

OR CONSTRUCTION PERMIT

Permit Application Number 17-0762 N

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DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-8.001, FAC (Stock Number: 5744-002-4015-6)



NE920-41 Subnitied by:



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

T 11 ;	****			
I, James Hal	,give thi	s authority fo	or the job addre	ess show below
only, all permits 1	Moter my 100	nse	, and	I do certify that
the below referenced person(s)	listed on this form is/a	are under my	y direct supervi	sion and control
and is/are authorized to purcha	se permits, call for ins	pections and	d sign on my be	ehalf.
Printed Name of Authorized Person	Signature of Autho Person	rized	Authorized F (Check one)	
J. Brent Wainwight	WEst ha	my At		Officer y Owner
) (D	Agent Property	Officer y Owner
				Officer Owner
I, the license holder, realize tha	t I am responsible for	all permits p	urchased, and	all work done
under my license and I am fully	responsible for comp	iance with a	II Florida Statut	tes, Codes, and
Local Ordinances.	3			
I understand that the State Lice	nsing Board has the p	ower and at	uthority to disci	pline a license
holder for violations committed	by him/her or by his/h	er authorized	d person(s) thro	ough this
document and that I have full re	esponsibility for compli	ance grante	d by issuance o	of such permits.
License Holders Signature (Not	arized)	License Nu	(25/75)	1/1/18 Date
NOTARY INFORMATION:				Julio
STATE OF: Florida	COUNTY OF: _	Hachu	<i>O</i>	
The above license holder, whos personally appeared before me (type of I.D.)	and is known by me o	r-has produ	ced identification	
B. S. I	h	LIT day	N YOU KUCON	7 , 20
NOTARY'S SIGNATURE	1	(S	Seal/Stamp)	
	0			
			ERIKA B	. ASHLEY ON # GG015615

EXPIRES July 26, 2020

		122 20	· 122
	SEICIAL WARRANTY BEED RAMCO FORM 03		
	This Special Warranty Beed Made the 7th day of November A. D. 19 80 by	-	}
)	
	PRANK TATE, JR. and his wife, MARTHA TATE hierinalter called the presents, to HERVIN ALLEN JORES whose pustoffice address is 1515 9B 15th Avenue, Gainenville, Jacob Articles Allen Jores hierinafter called the grantee:	1	
	haroinefter called the granter, to . Oft. 255	- 3	
	HERVIN ALLEN JONES	1	35
	whose postoffice address is 1515 SB 15th Avenue, Gainesville, 32601	1 ,	e ti bran i didenni vedel
	munic bastolites andrest in 1323 28 7251 Wangel agence	190	TO SECURE OF THE
	hereinafter called the grantee:		
		1 '	
	(Princetone sound become the facous "Acontor" and "greater" include all the portion to the immunicate and the thirty high representatives and assigns at immercially and the recreasing and assigns of assigns of assigns of assigns.	1	
	Title of the second sec	1	医肾炎性性腹膜结合 的
	Williesselli: That the grantor, for and in consideration of the sum of \$10.00 - and other	g :	and remark and all
	naluable considerations, receipt whereaf is hereby acknowledged, hereby grants, bargains, sells, alians, re-	1 2	wanter (18.40 Tolker de)
	mises, releases, conveys and confirms unto the granice, all that certain land elitrate in Columbia	B독표	
	County, Florida, Mz:	THOMAS THOMAS	
	TOWNSHIP 4 SOUTH, RANGE 17 BAST		and the second second second
	24	7 3 5 8	
	Section 28: Part of NH 1/4 of NW 1/4 of said Section, more particularly	S & S &	
	described as follows:	1 2 2 2 3	THE RESERVE OF THE PARTY OF THE
	H	3 5 5	AND THE PARTY OF T
	Commence at the HE Corner of the NW 1/4 of said NW 1/4 and run E	00 A	
	South 88° 25' 36" West along the centerline of State Road \$8-242, 585.25 feet;) 5 ×	
	South 88 25 38 West Joing the circulation of the court Right of Way line of said State Road 85-242 for a Point of Beginning; themce continue South 4° 03' 30" West, 208.80 feet; thence South 85° 25' 36" West, 208.80 feet; thence	"	
	30" Wast, 208,80 feet; thence South 88" 25' 36" West, 208,80 feet; thence		
	North 4° 03' 30" East, 206.80 feet to the said Right of Way line; thence		140
•	Nowth 20° 25' 36" Post since sold Right of Way line, 205-50 IESE to the	1 12	The state of the s
	Point of Seginping. Containing I.O Acres more or less. Subject to all	119	三元·小台湾的高级。2
	existing easements, restrictions. And outstanding mineral rights.	100	
	" THEATE AT CLODIO A ! " A"		人名英格兰人
	DOCUMENTARY TAX		
	DEPT. OF NEVERUE	200	AMALESCA CONTRACTOR
	「		
			CONTRACTOR OF THE PARTY OF
	Togeliel, with all the tenements, newscame was uppurenances thereto verying of no way		There are an expension to the state of
	wire apperiulning.	1.0	A STATE OF THE PARTY OF THE PAR
	To Have and to Hold, the same to fee simple forever.		e-división-matametralement
	An Minhr nice on Tiberth	1	
	And the granter hereby covenants with said grantee that the granter is lawfully seized of said land	1	
	a to the state of the sent and total and landed authority to sell and convey sold land, and here-	1	Section 1997 - Section 1997
	by warrants the title to said land and will defend the same against the lewful claims of all persons claiming	1	100 - Act (400) 100 20
	by through or under the said granter.	1	
		1	The first open with the first of the
	In Witness Whereof, the said granter has berounto sai our hand and seal the day and year	1	
	irst above written.	1	
	Signed, seated and definered in our presences	}	
	San Ul, Brown & a arbutateds	22	- 5t. 25 34.
	Prank Tate, Jr.	1	
	() R. King martha Late 113	1	NAME OF THE PARTY
	Hartha Tate All Ro. by	臣	the control of
			A Section of the sect
	STATE OF FLORIDA,	<u> </u>	A Section of the Party of the P
	COUNTY OF Columbia	55	
	officer duly authorized in the State eleverald and in the County alorerald, to take ach moved an first particularly appointed	ž 6	(=
		3 6	y prisoners and dispersion beauty
	FRANK TATE, JR. and his wife, HARTHA TATE	င	7 77 53 63 63 77
	to see known to be the persons described in and who executed the foregoing last unenest and they appropriately		
	before me that they executed the same.	0	and the second of the state of the second
	WITNESS my hand and official seal in the County and State last aforeted this	1	114 115 115 115
1	November	1	the family of the party of
l	12 8 H 21	1	100
	Notary Public		A Santo Wares
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l	System as Could We commission expires:	- d	
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	(Notarial Seal) Hy commission expires:	3	

