

DATE 09/30/2010

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028907

APPLICANT MICHAEL TRAIL PHONE 352-317-0347  
ADDRESS 28282 79TH ROAD BRANFORD FL 32008  
OWNER MICHAEL TRAIL PHONE 352-317-0347  
ADDRESS 21815 SW SR 47 FORT WHITE FL 32038  
CONTRACTOR DALE HOUSTON PHONE 386-752-7814  
LOCATION OF PROPERTY 47 S, APPROX. 3 MILES PAST HWY 27 ON THE LEFT, ARCOSS FROM  
RED/RUST PAINTED SFD & LOT PAST FENCED IN WHITE DW  
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 AG-3 MAX. HEIGHT 35  
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 17-7S-16-04232-010 SUBDIVISION  
LOT BLOCK PHASE UNIT TOTAL ACRES 1.00

IH10251421  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING DOT 10-450-N BK TC Y  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD,  
SECTION 2.3.1

APPROVAL LETTER FROM GEORGE BRADY ON FILE Check # or Cash 4817

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 \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 6.42 WASTE FEE \$ 16.75  
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 348.17  
INSPECTORS OFFICE L.H. CLERKS OFFICE CH

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.



For Office Use Only

(Revised 1-10-08)

Zoning Official

BLK 29.07.10

Building Official

1.C. 9-28-10

AP# 1009-50

Date Received 9-24-10

By CH

Permit # 28907

Flood Zone X

Development Permit N/A

Zoning A-3

Land Use Plan Map Category A-3

Comments Section 2.3.1

FEMA Map# N/A Elevation N/A Finished Floor 1st floor River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-450-N ☐ EH Release ☐ Well letter ☒ Existing well☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter

IMPACT FEES: EMS

Fire

Corr

Road/Code

School

= TOTAL N/A Suspended

☒ out of County  
☒ In County  
☒ off form  
☒ App fee

Property ID # 17-75-16-04232-010 Subdivision

New Mobile Home Used Mobile Home ☒ MH Size 16x80 Year 2002

Applicant Michael Trail Phone # (352) 317-0347

Address 28282 79th Road Branford FL 32008

Name of Property Owner Michael Trail &amp; George Brady Phone# (352) 317-0347

911 Address 21815 SW SR 47, 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 Michael D Trail Phone # (352) 317-0347

Address 28282 79th Road Branford FL 32008

Relationship to Property Owner NA

Current Number of Dwellings on Property none (owes)

Lot Size Total Acreage

Do you : Have DOT Existing Drive or Private Drive or need Culvert Permit (Culvert Waiver) (Circle one)  
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Need a Culvert)

Is this Mobile Home Replacing an Existing Mobile Home NO (was a home in the 80's?)

Driving Directions to the Property Hw 47 South, go through fort white  
2.5 to 3 miles Land is on the left south of the  
white Double wide on Hw 47

Name of Licensed Dealer/Installer Dale Houston Phone # 386-752-7814

Installers Address 136 SW Barrs Glen Lake City, FL 32024

License Number TH 10251421 Installation Decal # 1610

Spoke to Michael on 9-29-10



# PERMIT WORKSHEET

page 1 of 2

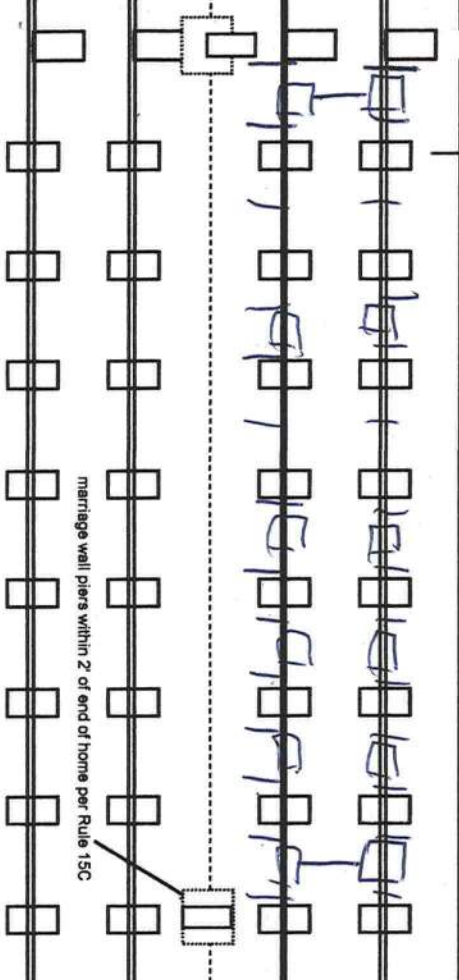
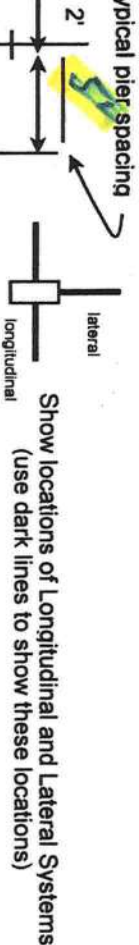
Installer Dale Bush License # TH10251921  
 Manufacturer Featherd Length x Width 76x16  
 Name of Owner of this Mobile Home Michael D Traval  
 Phone 2828279 84 Bradford FL 32002  
 Address 2828279

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

DT



16x76 - 1000 Soil 17x25  
 Piers 15 per Side - 5' 00" oc  
 Anchors 14 per Side 5' 40" oc  
 2. Longitudinal Systems

New Home ☐ Used Home ☒ Year 2002  
 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 # 1610  
 Triple/Quad ☐ Serial # 9492 2074 49712 WBSJ

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (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 17x25  
 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

17x25

ANCHORS

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

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

\* Longitudinal Stabilizing Device (LSD)  
 Manufacturer  
 Longitudinal Stabilizing Device w/ Lateral Arms  
 Manufacturer

Sidewall  
 Longitudinal Marriage wall  
 Shearwall

40° Required  
 425 provided



PERMIT NUMBER \_\_\_\_\_

**POCKET PENETROMETER TEST**

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

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

**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 \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

**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 4 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 holding capacity.

Installer's initials DAE

**ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER**

Installer Name DALE Housh

Date Tested 9-22-10

**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. N/A

**Plumbing**

Connect all sewer drains to an existing sewer tap or septic tank. Pg. N/A  
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. N/A

**Site Preparation**

Debris and organic material removed ☒ Swale ☐ Pad ☒ Other \_\_\_\_\_

**Fastening multi wide units**

Floor: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Walls: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
Roof: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_  
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 \_\_\_\_\_

Type gasket \_\_\_\_\_ Installed: \_\_\_\_\_  
Pg. \_\_\_\_\_ 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 N/A  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

**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 N/A  
Other: \_\_\_\_\_

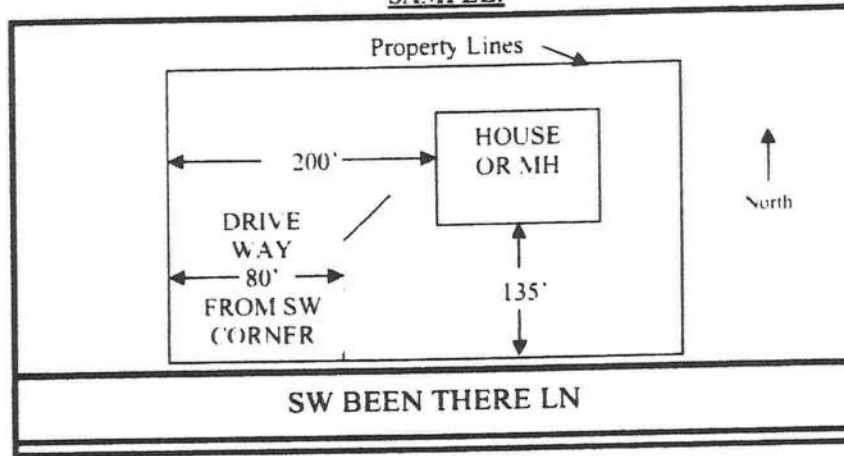
**Installer verifies all information given with this permit worksheet is accurate and true based on the**

Installer Signature DALE Housh Date 9-23-10

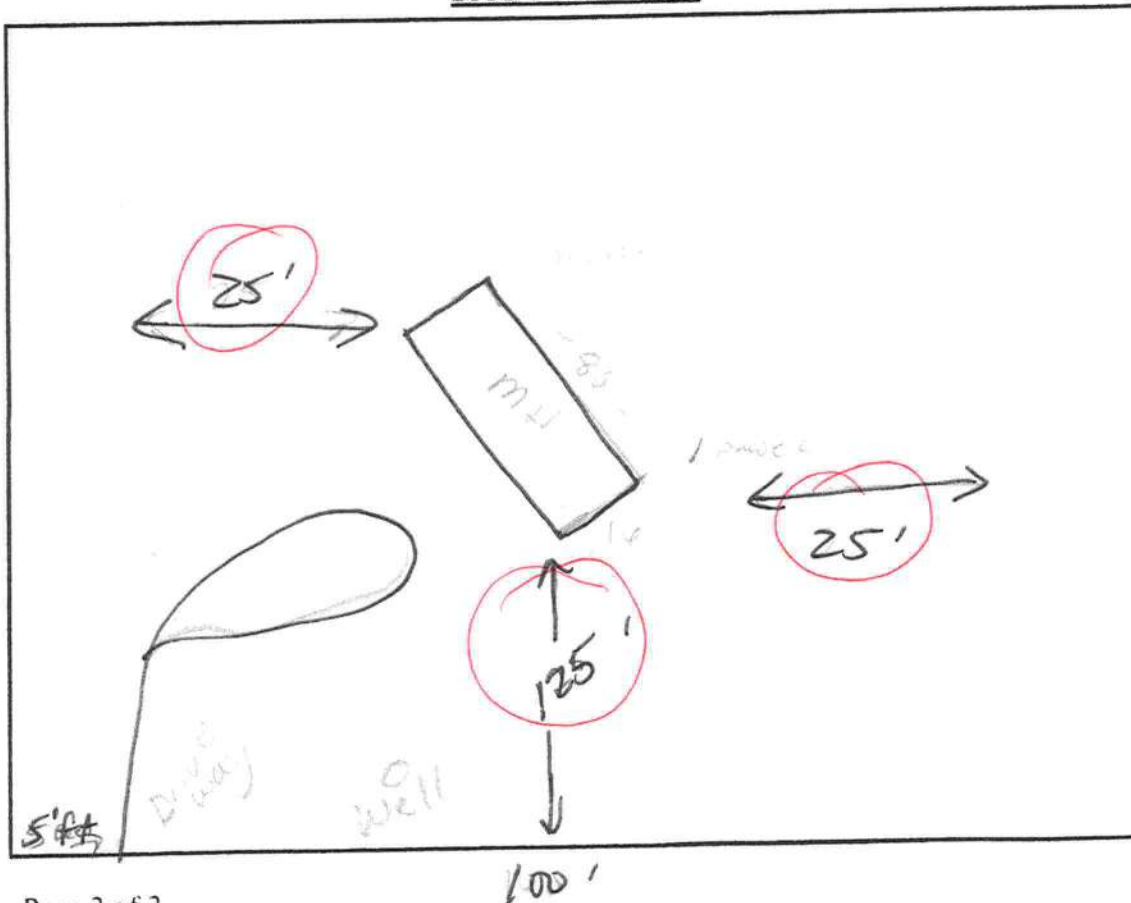
# SITE PLAN

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

## SAMPLE:



## SITE PLAN BOX:





# Columbia County Property Appraiser

DB Last Updated: 8/5/2010

2009 Tax Roll Year

Parcel: 17-7S-16-04232-010

&lt;&lt; Next Lower Parcel Next Higher Parcel &gt;&gt;

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

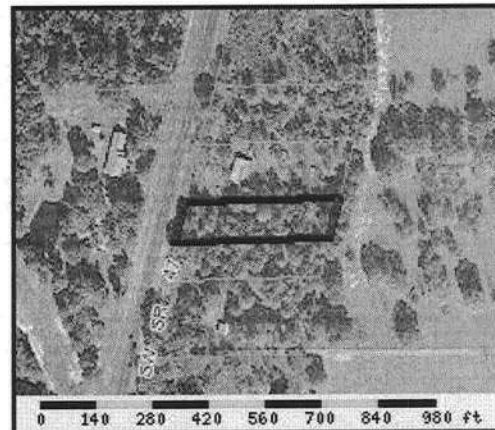
Interactive GIS Map

Print

## Owner & Property Info

Search Result: 1 of 1

<b>Owner's Name</b>	BRADY GEORGE JR &		
<b>Mailing Address</b>	MICHAEL TRAIL 9960 NE 36TH AVE. ANTHONY, FL 32617		
<b>Site Address</b>	MICHAEL TRAIL		
<b>Use Desc. (code)</b>	VACANT (000000)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	17716
<b>Land Area</b>	1.000 ACRES	<b>Market Area</b>	02
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.  COMM INTERS OF C/L SR-47 & N LINE OF NE1/4 OF SW1/4, RUN SW 300 FT FOR POB, CONT SW 100 FT, E 435 FT, NE 100 FT, W 435 FT TO POB. ORB 778-946, 925-71, JTWRS 958-2516, CT 1018-1151. QC 1049-1313. WD 1049-1315.		



## Property & Assessment Values

2009 Certified Values		
<b>Mkt Land Value</b>	cnt: (0)	\$16,298.00
<b>Ag Land Value</b>	cnt: (2)	\$0.00
<b>Building Value</b>	cnt: (0)	\$0.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$16,298.00
<b>Just Value</b>		\$16,298.00
<b>Class Value</b>		\$0.00
<b>Assessed Value</b>		\$16,298.00
<b>Exempt Value</b>		\$0.00
<b>Total Taxable Value</b>	Cnty: \$16,298 Other: \$16,298   Schl: \$16,298	

## 2010 Working Values

### NOTE:

2010 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

## Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
6/15/2005	1049/1315	WD	I	U	01	\$62,900.00
6/2/2004	1018/1151	CT	I	U	03	\$0.00
7/11/2002	958/2516	WD	I	U	03	\$100.00
4/19/2001	925/71	WD	I	Q		\$64,400.00
8/3/1993	778/946	WD	V	Q		\$3,000.00

## Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

## Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

# 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.**

<b>ELECTRICAL</b>	Print Name <u>Michael D Trail</u>	Signature <u>Michael D Trail</u>	Phone #: <u>(352) 317-0347</u>
	License #: <u>Home owner</u>		
<b>MECHANICAL/A/C</b>	Print Name <u>Michael D Trail</u>	Signature <u>Michael D Trail</u>	Phone #: <u>(352) 317-0347</u>
	License #: <u>Home owner</u>		
<b>PLUMBING/GAS</b>	Print Name <u>Michael D Trail</u>	Signature <u>Michael D Trail</u>	Phone #: <u>(352) 317-0347</u>
	License #: _____		
<b>ROOFING</b>	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
<b>SHEET METAL</b>	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
<b>FIRE SYSTEM/SPRINKLER</b>	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
<b>SOLAR</b>	Print Name _____	Signature _____	Phone #: _____
	License #: _____		

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.





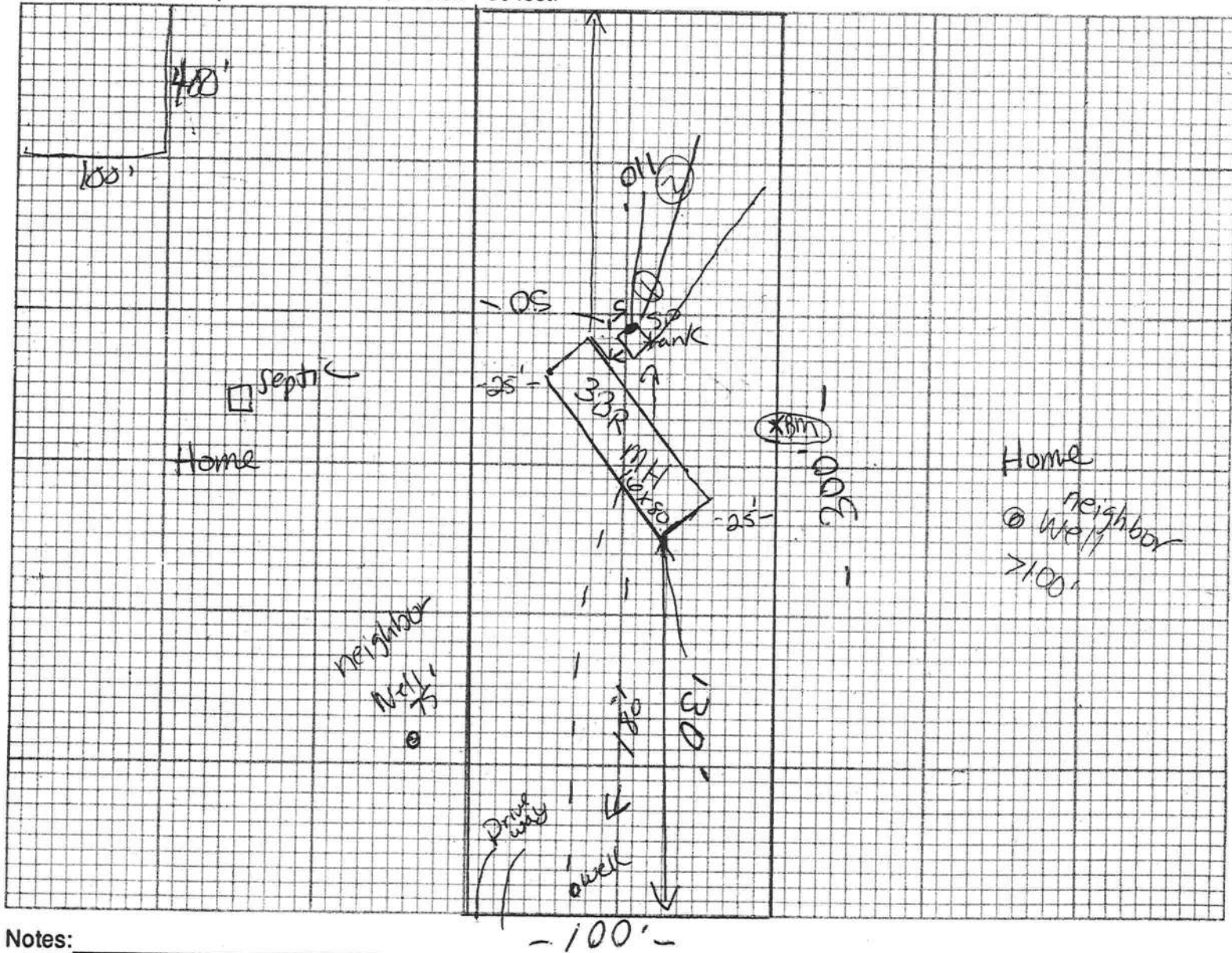
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 10-0450

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: \_\_\_\_\_

Site Plan submitted by: Michael D. Trail Signature  
Plan Approved X Not Approved  
By Sally Ford, CH Director Date 10-1-10  
Columbia CHD County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



CODE ENFORCEMENT DEPARTMENT  
COLUMBIA COUNTY, FLORIDA  
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM SWANSEA  
OWNERS NAME Michael D. Trail PHONE 352-317-0344 CELL  
INSTALLER Dale Houston PHONE 386-752-7814 CELL  
INSTALLERS ADDRESS 136 SW Bams Glen Lake City, FL 32924

**MOBILE HOME INFORMATION**

MAKE Fleetwood YEAR 2002 SIZE 16 x 76  
COLOR Tan SERIAL No. GAFL 2074 49712 WE 21  
WIND ZONE II SMOKE DETECTOR Yes

INTERIOR:  
FLOORS OK

DOORS OK

WALLS OK

CABINETS OK

ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:  
WALLS / SIDING OK

WINDOWS OK

DOORS OK

STATUS:  
APPROVED X NOT APPROVED

NOTES:

INSTALLER OR INSPECTORS PRINTED NAME Dale Houston  
Installer/Inspector Signature Dale Houston License No. I H0000040 Date 9-28-10

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

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

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

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

Code Enforcement Approval Signature [Signature] Date 10-1-10



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, DALE Houston, 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
Michael D Trail	<i>Michael D Trail</i>	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.

*Dale Houston* License Holders Signature (Notarized) 1A 000040 License Number 9-28-10 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is DALE Houston,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) \_\_\_\_\_ on this 28<sup>th</sup> day of SEPT, 2010.

*Jan Clark*  
NOTARY'S SIGNATURE

(Seal/Stamp)



JAN CLARK  
MY COMMISSION # DD 634946  
EXPIRES: March 28, 2011  
Bonded Thru Budget Notary Services



Inst: [REDACTED] Date: 06/20/2005 Time: 15:01  
Doc Stamp-Deed : 440.30  
JDK DC, P. DeWitt Cason, Columbia County B: 1049 P: 1315

Prepared by and return to:

William J. Gardner, PA  
7280 W Palmetto Park Rd Suite 208N  
Boca Raton, FL 33433

File Number: 2244  
REO#: A045565

[Space Above This Line For Recording Data]

## Special Warranty Deed

This Special Warranty Deed made this 15 day of June, 2005 between Federal National Mortgage Association whose post office address is 14221 Dallas Parkway, Suite 1000, International Plaza II, Dallas, TX 75254, grantor, and George Brady, Jr. and Michael Trail whose post office address is , grantee:

(Whenever used herein the terms 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, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

See Exhibit "A" attached hereto and made a part hereof as if fully set forth herein.

Parcel Identification Number: R04232-009 and R04232-010

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 claiming by, through or under grantors.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

DoubleTimee

Inst:2005014438 Date:06/20/2005 Time:15:01  
Doc Stamp-Deed : 440.30

DC, P. DeWitt Cason, Columbia County B:1049 P:1316

Signed, sealed and delivered in our presence:

Witness Name:

*Sheryl Martin*

Witness Name:

*D. VANESSA BROWN*

Federal National Mortgage Association

By:

Name: Cheryl Young

Title: Vice President

(Corporate Seal)

State of Texas  
County of Dallas

The foregoing instrument was sworn to and subscribed before me this 15 day of June, 2005 by Cheryl Young as Vice President of Federal National Mortgage Association, on behalf of the corporation. He/She [ ] is personally known to me or [X] has produced a driver's license as identification.

[Notary Seal]



Notary Public

Printed Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



# Exhibit A

See Exhibit "A" attached hereto and made a part hereof as if fully set forth herein.

Parcel Identification Number: R04232-009 and R04232-010

COMMENCE AT THE INTERSECTION OF THE NORTH LINE OF THE NE 1/4 OF THE SW 1/4 OF SECTION 17, TOWNSHIP 7 SOUTH, RANGE 16 EAST AND THE CENTER LINE OF SR # 47; RUN THENCE SOUTH 14 DEGREES 56' 21" WEST ALONG THE CENTER LINE OF SR #47 300 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE S. 14 DEGREES 56' 21" WEST ALONG THE CENTER LINE OF SR #47, 100 FEET; THENCE 435 FEET EAST TO A POINT; THENCE NORTHEASTERLY, PARALLEL TO THE CENTER LINE OF SR #47, 100 FEET TO A POINT; THENCE WEST 435 FEET TO POINT OF BEGINNING, COLUMBIA COUNTY, FLORIDA. ALSO, COMMENCE AT THE INTERSECTION OF THE NORTH LINE OF THE NE 1/4 OF SW 1/4 OF SECTION 17, TOWNSHIP 17 SOUTH, RANGE 16 EAST, AND THE MIDDLE LINE OF RT #47; RUN THENCE SOUTH 14 DEGREES 56' 21" WEST ALONG THE CENTER LINE OF RT #47, 150 FEET FOR THE POINT OF BEGINNING; THENCE SOUTH 14 DEGREES 56' 21" WEST ALONG THE CENTER LINE OF RT #47, 150 FEET; THENCE EAST 435 FEET TO A POINT; THENCE NORTHEASTERLY, PARALLEL TO THE CENTER LINE OF RT #47, 150 FEET TO A POINT; THENCE WEST 435 FEET TO THE POINT OF BEGINNING, COLUMBIA COUNTY, FLORIDA. MS/TL -TOGETHER WITH: A 1990 REDM DOUBLEWIDE MOBILE HOME, I.D.#14605265A & [REDACTED] SUBJECT TO RIGHT OF WAY FOR STATE ROAD 47.

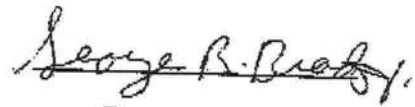
Inst:2005014438 Date:06/20/2005 Time:15:01  
Doc Stamp-Deed : 440.30

DC, P. Dewitt Cason, Columbia County B:1049 P:1317

September 27, 2010

To whom it may concern,

I've been informed that Mike Trails is setting up a mobile home on Parcel  
Account# 17-75-16-04 232-0\* This property is owned by Brady & Trails, I approve  
of this action and have no problems in placing the mobile home on this property.

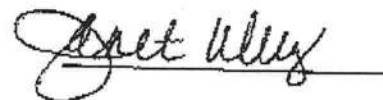


George B. Brady Jr.

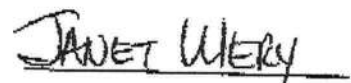
State of Florida

County of Marion

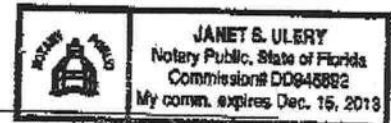
The foregoing instrument was acknowledged before me on 9/27/2010 by George B.  
Brady, Jr., who is personally known to me.



Notary Public



Notary Print Name



My Commission Expires



# COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

## Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 9/24/2010 DATE ISSUED: 9/27/2010

### ENHANCED 9-1-1 ADDRESS:

21815 SW STATE ROAD 47

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

17-7S-16-04232-010

Remarks:

Address Issued By:



Columbia County 9-1-1 Addressing / GIS Department

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

1206

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

PERMIT NO. 949900  
DATE PAID: 9/24/10  
FEE PAID: 425.00  
RECEIPT #: 1499194

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative  
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Michael D Trail  
AGENT: Ame TELEPHONE: 352-317-0347  
MAILING ADDRESS: 28282 79th Rd Brantford FL 32008

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 17-75-16-04232-00 ZONING: Res. I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 5. Hwy 47

DIRECTIONS TO PROPERTY: Take Hwy 47 South of fort white 3 miles  
Landis on the left South of white Double wide home  
Road front.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>Mobile Home</u>	<u>3</u>	<u>1280</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: Michael D Trail DATE: 9/22/2010

CODE ENFORCEMENT  
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 10/5/10 BY LH (28907) IS THE MOBILE HOME ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes  
OWNERS NAME Michael Trail PHONE \_\_\_\_\_ CELL 352-317-0347  
ADDRESS 21815 SW SR 47 Fort White, FL 32038  
MOBILE HOME PARK N/A SUBDIVISION N/A  
DRIVING DIRECTIONS TO MOBILE HOME 47 S, on ② 3 miles past Fort White  
next to white D/W fence in and across from Red  
House  
MOBILE HOME INSTALLER Dale Houston PHONE 752-7814 CELL \_\_\_\_\_

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 2002 SIZE 16 x 76 COLOR Tan  
SERIAL No. GAF 207A49712W1521  
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

☒ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING  
☒ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION  
☒ DOORS ( ) OPERABLE ( ) DAMAGED  
☒ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND  
☒ WINDOWS ( ) OPERABLE ( ) INOPERABLE  
☒ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING  
☒ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT  
☒ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT  
FIXTURES MISSING

\$50.00

Date of Payment: 10/5/10

Paid By: Michael Trail

Notes: \_\_\_\_\_

EXTERIOR:

☒ WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING  
☒ WINDOWS ( ) CRACKED / BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT  
☒ ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ☒ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS Glen, Call Michael  
so he can open the door 352-317-0347

SIGNATURE Anthony S. Rull ID NUMBER 402 DATE 10-6-10

(Out of County Approved on 10-1-10)