

DATE 12/22/2006

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000025338

APPLICANT CINDY L. KENT PHONE 386.752.3086  
ADDRESS 2325 SW ICHETUCKNEE AVENUE FT. WHITE FL 32038  
OWNER CINDY L. KENT PHONE 386.752.3086  
ADDRESS 1319 SW SPRUCE ROAD FT. WHITE FL 32038  
CONTRACTOR ROBERT SHEPPARD PHONE 386.623.2203  
LOCATION OF PROPERTY SR-247-S TO C-240,TR TO ICHETUCKNEE AVENUE,TR TO CURTAIN,TR  
TO SPRUCE,TL TO PROPERTY ON L @ CORNER OF SPRUC & CACTUS.

TYPE DEVELOPMENT M/G/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00  
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES  
FOUNDATION WALLS ROOF PITCH FLOOR  
LAND USE & ZONING A-3 MAX. HEIGHT  
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 36-5S-15-00488-066 SUBDIVISION SPRING HILLS  
LOT 16 BLOCK C PHASE UNIT TOTAL ACRES 1.00

IH0000833  
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor  
EXISTING 06-01099N BLK CFS N  
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: 1 FOOT ABOVE ROAD.REPLACEMENT . 1 UNIT CHARGED FOR ASSESSMENTS.  
OLD M/H TO BE REMOVED. 2.3.1 LEGAL NON-CONFORMING LOT.

Check # or Cash CASH REC'D.

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 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  
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by  
M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by  
Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by  
M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00  
MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$  
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 275.00  
INSPECTORS OFFICE CLERKS OFFICE

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

# PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

**For Office Use Only** (Revised 6-23-05) Zoning Official CP 12/19/06 Building Official OK JTH 12-19-06

AP# 06/E-45 Date Received 12/19 By JW Permit # 25338

Flood Zone X Development Permit N/A Zoning ESA2 Land Use Plan Map Category ESA

Comments Panel 225  
Old MH to be removed  
2.3.1 legal non-conforming lot

FEMA Map# \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_ River \_\_\_\_\_ In Floodway \_\_\_\_\_

☐ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☒ EH Release ☒ Well letter ☒ Existing well

☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from Installer

- Property ID # 36-55-15-00488-066 Must have a copy of the property deed
- New Mobile Home \_\_\_\_\_ Used Mobile Home HOMES OF MERIT Year 1998
- Applicant CINDY L KENT Phone # 386 752 3086
- Address 2325 SW Ichitucknee Ave Lake City FL 32024
- Name of Property Owner CINDY L KENT Phone# 386 752 3086
- X ■ 911 Address 1319 NW Spruce Road, Ft. 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 SAME as Above Phone # 386 752 3086  
 Address \_\_\_\_\_
- Relationship to Property Owner SAME as Above
- Current Number of Dwellings on Property 1
- Lot Size 167 X 263 Total Acreage 1.0
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property S ON 247, L ON 240, R ON Ichitucknee Ave,  
R ON CURTAIN, L ON SPRUCE to Property on Left AT CORNER OF  
SPRUCE AND SW CACTUS ST.
- X ■ Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203
- X ■ Installers Address Lake City FL 32025, 6355 SE CR 245
- X ■ License Number IN0000933 Installation Decal # 278548

JW

JW 225022 Cindy 12.19.06

# PERMIT NUMBER

Installer

Robert Shepard

License #

IFH000833

Address of home being installed

Manufacturer

Homes of West Length x width

28X72

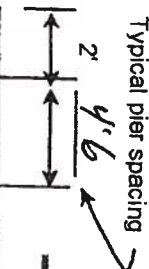
## NOTE:

*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*

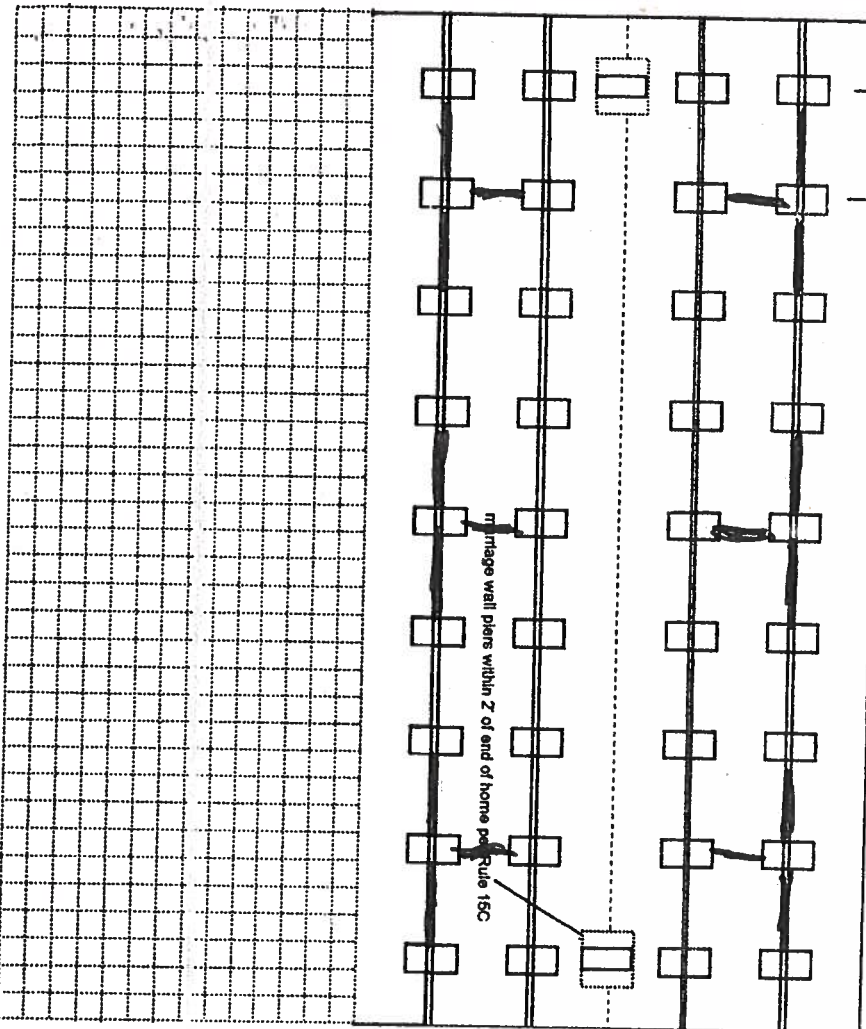
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials

RS



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



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 Decal #

278548

Triple/Quad

☐

Serial #

FLHM 387 42817076 Awh

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (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

17x22

Perimeter pier pad size

17x22

Other pier pad sizes (required by the mfg.)

17x22

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

### POPULAR PAD SIZES

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

### ANCHORS

4 ft 5 ft

### FRAME TIES

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

### TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Oliver 1101

### OTHER TIES

Number

28

6

8

4

PERMIT NUMBER

PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

x 1200 x 1700 x 1700

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 1700 x 1700 x 1700

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5" anchors without testing without. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A slate 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 lb holding capacity.

PS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

11-30-06

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. 25

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 29

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 1x35 Length: 5' Spacing: 16" OC  
Walls: Type Fastener: 5000 Length: 4" Spacing: 16" OC  
Roof: Type Fastener: 10x5 Length: 6" Spacing: 16" OC  
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

PS

Type gasket

Pg. 19 TCM

Installed:

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 ✓  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

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 ✓ N/A ✓  
Electrical crossovers protected. Yes ✓ N/A ✓  
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

Robert Shepard

Date 11-30-06



**Permit Me Services**  
3104 S W Old Wire Rd  
Ft White, FL 32038  
Wendy Grennell Owner  
386-288-2428 Cell  
386-466-1866 Office / Fax

**MOBILE HOME INSTALLER LIMIT POWER OF ATTORNEY**

I, Robert D. Shepard, license number IH 0000833 authorize Wendy Grennell or Tisa Therrell to be my representative and act on my behalf in all aspects of applying for and obtaining a mobile home permit, along with any license registration necessary, to be placed on the following described property. Property located in \_\_\_\_\_ County, State of Florida.

Mobile Home Owner Name: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

911 Address: \_\_\_\_\_ City \_\_\_\_\_

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rge: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

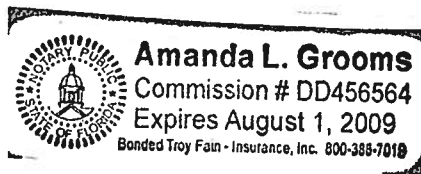
Signed: Robert Shepard  
Mobile Home Installer

Sworn to and described before me this 4 day of DEC 2006

AMANDA L GROOMS  
Notary public

Amanda L Grooms Personally known \_\_\_\_\_  
Notary Name

DL ID X



**Permit Me Services**  
3104 S W Old Wire Rd  
Ft White, FL 32038  
Wendy Grennell Owner  
386-288-2428 Cell  
386-466-1866 Office / Fax

**MOBILE HOME INSTALLER AFFIDAVIT**

As per Florida Statutes Section 320.8249 Mobile Home Installers License

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction, of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150

I, Robert D. Shepard, license number IH 0000833 state that the installation of the manufactured home for owner \_\_\_\_\_ at \_\_\_\_\_

911 Address: \_\_\_\_\_ City \_\_\_\_\_

will be done under my supervision.

Signed: Robert Shepard  
Mobile Home Installer

Sworn to and described before me this 4 day of Dec 2006

Amanda L Grooms  
Notary public

AMANDA L GROOMS Personally known \_\_\_\_\_  
Notary Name

DL ID X





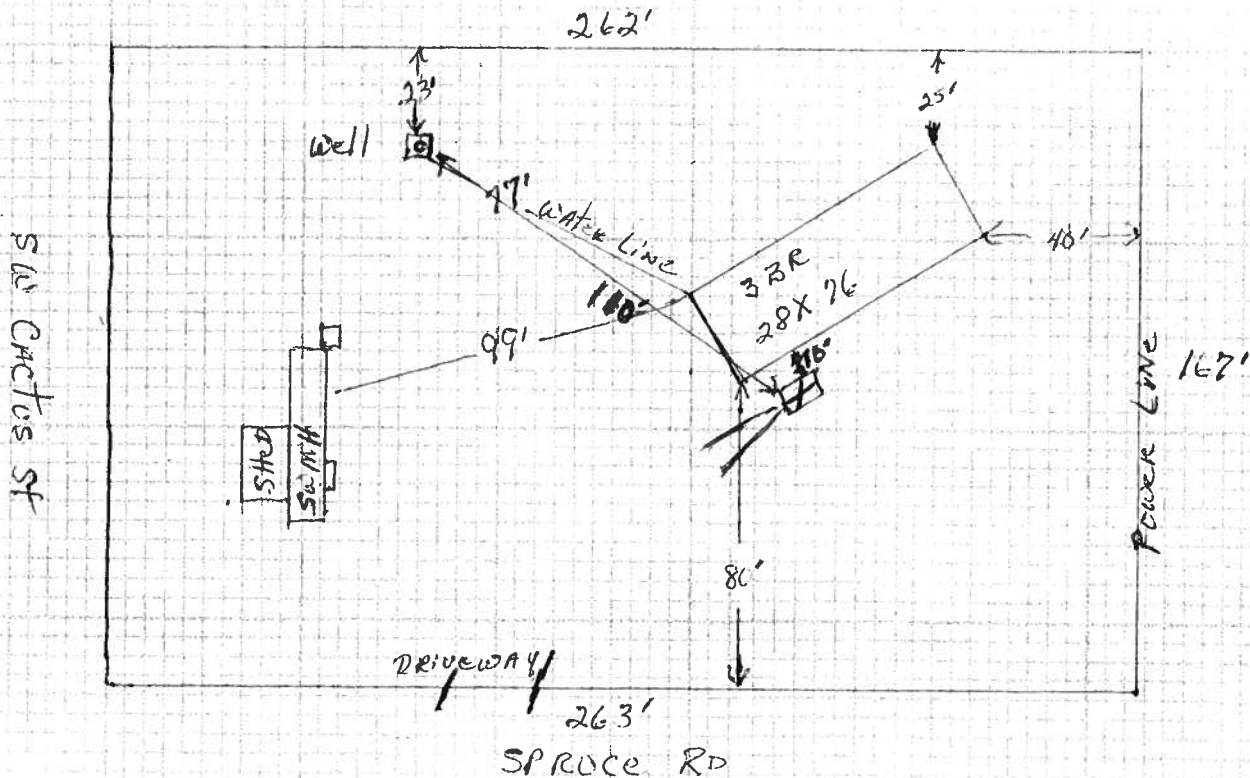
STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

PART II - SITE PLAN

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



Notes: Shed to Remain on Property  
Single Wide Mobile Home to be destroyed  
X Proposed Septic + Drain Field

Site Plan submitted by: C. J. Kunt Signature \_\_\_\_\_ Title \_\_\_\_\_

Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By \_\_\_\_\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DATE RECEIVED 12/11/06 BY Pd IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO  
 OWNERS NAME Cindy Kent PHONE 386-752-3086 CELL 386-266-0617  
 ADDRESS 4297 SW Herlong St Ft White FL 32038 (Mailing Address)  
 MOBILE HOME PARK N/A SUBDIVISION Spring Hill Lot 16  
 DRIVING DIRECTIONS TO MOBILE HOME 247 to 240 Turn left to SW Ichetucknee Turn  
right to curtain turn left to Spruce lot on left corner of  
Cactus and Spruce  
 MOBILE HOME INSTALLER Robert Sheppard PHONE \_\_\_\_\_ CELL \_\_\_\_\_

**MOBILE HOME INFORMATION**

MAKE Homer of Merit YEAR 1998 SIZE 28 x 76 COLOR Grey  
 SERIAL No. FLHML38142819076AR  
 WIND ZONE 11 Must be wind zone II or higher NO WIND ZONE I ALLOWED

**INTERIOR:****INSPECTION STANDARDS**

(P or F) - P = PASS F = FAILED

P SMOKE DETECTOR ☒ OPERATIONAL ( ) MISSING  
P FLOORS ☒ SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION \_\_\_\_\_  
P DOORS ☒ OPERABLE ( ) DAMAGED  
P WALLS ☒ SOLID ( ) STRUCTURALLY UNSOUND  
P WINDOWS ☒ OPERABLE ( ) INOPERABLE  
P PLUMBING FIXTURES ☒ OPERABLE ( ) INOPERABLE ( ) MISSING  
P CEILING ☒ SOLID ( ) HOLES ( ) LEAKS APPARENT  
P ELECTRICAL (FIXTURES/OUTLETS) ☒ OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING  
**EXTERIOR:**  
P WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING  
P WINDOWS ( ) CRACKED / BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT  
P ROOF ( ) APPEARS SOLID ( ) DAMAGED

**STATUS:**

APPROVED ☒ WITH CONDITIONS: \_\_\_\_\_  
 NOT APPROVED \_\_\_\_\_ NEED REINSPECTION FOR FOLLOWING CONDITIONS: \_\_\_\_\_

SIGNATURE



ID NUMBER

306

DATE

12-11-06



# 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: 12/6/2006 DATE ISSUED: 12/13/2006

### ENHANCED 9-1-1 ADDRESS:

1319 SW SPRUCE RD

FORT WHITE FL 32038

### PROPERTY APPRAISER PARCEL NUMBER:

36-5S-15-00488-066

### Remarks:

LOCATED ON LOT 16 BLOCK C SPRING HILLS S/D

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.**

COLUMBIA COUNTY  
9-1-1 ADDRESSING  
APPROVED

# Columbia County Property Appraiser

DB Last Updated: 11/20/2006

Parcel: 36-5S-15-00488-066

## 2007 Proposed Values

Tax Record

Property Card

Interactive GIS Map

Print

### Owner & Property Info

Search Result: 1 of 1

<b>Owner's Name</b>	MONEY IRA		
<b>Site Address</b>	C SPRING HILLS S/D		
<b>Mailing Address</b>	16950 SE 19TH CT SUMMERFIELD, FL 34491		
<b>Use Desc. (code)</b>	MOBILE HOM (000200)		
<b>Neighborhood</b>	36515.02	<b>Tax District</b>	3
<b>UD Codes</b>	MKTA02	<b>Market Area</b>	02
<b>Total Land Area</b>	1.004 ACRES		
<b>Description</b>	LOT 16 BLOCK C SPRING HILLS S/D. ORB 711-386, 741-1240, 884-798,		

### GIS Aerial



### Property & Assessment Values

<b>Mkt Land Value</b>	cnt: (2)	\$19,000.00
<b>Ag Land Value</b>	cnt: (0)	\$0.00
<b>Building Value</b>	cnt: (1)	\$2,936.00
<b>XFOB Value</b>	cnt: (0)	\$0.00
<b>Total Appraised Value</b>		\$21,936.00

<b>Just Value</b>	\$21,936.00
<b>Class Value</b>	\$0.00
<b>Assessed Value</b>	\$21,936.00
<b>Exempt Value</b>	\$0.00
<b>Total Taxable Value</b>	\$21,936.00

### Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
7/13/1999	884/798	WD	V	U	01	\$0.00
12/24/1990	741/1240	WD	V	U	02	\$0.00
1/31/1990	711/386	WD	V	U		\$8,400.00

### Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1964	WD or PLY (08)	760	760	\$2,936.00
<b>Note:</b> All S.F. calculations are based on exterior building dimensions.						

### Extra Features & Out Buildings

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

### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000102	SFR/MH (MKT)	1.000 LT - (1.004AC)	1.00/1.00/1.00/1.00	\$17,000.00	\$17,000.00
009945	WELL/SEPT (MKT)	1.000 UT - (.000AC)	1.00/1.00/1.00/1.00	\$2,000.00	\$2,000.00

Columbia County Property Appraiser

DB Last Updated: 11/20/2006

This Document Prepared By and Return to:

Darryl J. Tompkins, Esquire  
Darryl J. Tompkins, P.A.  
14420 NW 151st Blvd.  
P.O. Box 519  
Alachua, FL 32616

Inst:2006029130 Date:12/12/2006 Time:10:38

Doc Stamp-Deed : 15.50

J.P. DC, P. DeWit Cason, Columbia County B:1104 P:1460

Parcel ID Number: R00488-066

## Warranty Deed

This Indenture, Made this 8th day of December, 2006 A.D. Between  
Ira Money, an unmarried man

of the County of Marion, State of Florida, grantor, and  
Cindy L. Kent, an unmarried woman

whose address is: 2325 SW Ichetucknee Avenue, Lake City, FL 32024

of the County of Columbia, State of Florida, grantee.

Witnesseth that the GRANTOR, for and in consideration of the sum of

-----TEN DOLLARS (\$10)----- DOLLARS,  
and other good and valuable consideration to GRANTOR in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, has  
granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs, successors and assigns forever, the following described land, situate,  
lying and being in the County of Columbia, State of Florida, to wit:  
Lot 16, Block C of SPRING HILLS, a subdivision according to the Plat  
thereof as recorded in Plat Book 4, Page(s) 33 of the Public Records  
of Columbia County, Florida.

SUBJECT TO THE FOLLOWING:

- A. Zoning restrictions, prohibitions and other requirements imposed by governmental authority;
- B. Restrictions and matters appearing on the plat and/or common to the subdivision;
- C. Taxes for the year 2007 and subsequent years.

and the grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

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

Signed, sealed and delivered in our presence:

Printed Name: DARRYL J. TOMPKINS  
Witness

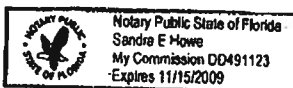
Ira Money (Seal)  
Ira Money  
P.O. Address: 16950 SE 11th Court, Summerfield, FL 34491

Printed Name: Sandra E. Howe  
Witness

STATE OF Florida  
COUNTY OF Alachua

The foregoing instrument was acknowledged before me this 8th day of December, 2006 by  
Ira Money, an unmarried man

he is personally known to me or he has produced his Florida driver's license as identification.



Sandra E. Howe  
Printed Name: Sandra E. Howe  
Notary Public  
My Commission Expires: 11/15/2009

# LETTER OF AUTHORIZATION

Date: 12. 14. 2006

Columbia County Building Department  
P.O. Drawer 1529  
Lake City, FL 32056

I Robert V. HEPPARD, License No. IHO00008.33 do hereby  
Authorize CINDY L. KERT to pull and sign permits on my  
behalf.

Sincerely,

Robert Heppard

Sworn to and subscribed before me this 14 day of December, 2006.

Notary Public: Lawanda Y. Collins

My commission expires: \_\_\_\_\_

Personally Known ✓

Produced Valid Identification: \_\_\_\_\_



Lawanda Y. Collins  
MY COMMISSION # DD246441 EXPIRES  
October 29, 2007  
BONDED THRU TROY FAIR INSURANCE, INC.



STATE OF FLORIDA  
DEPARTMENT OF HEALTH

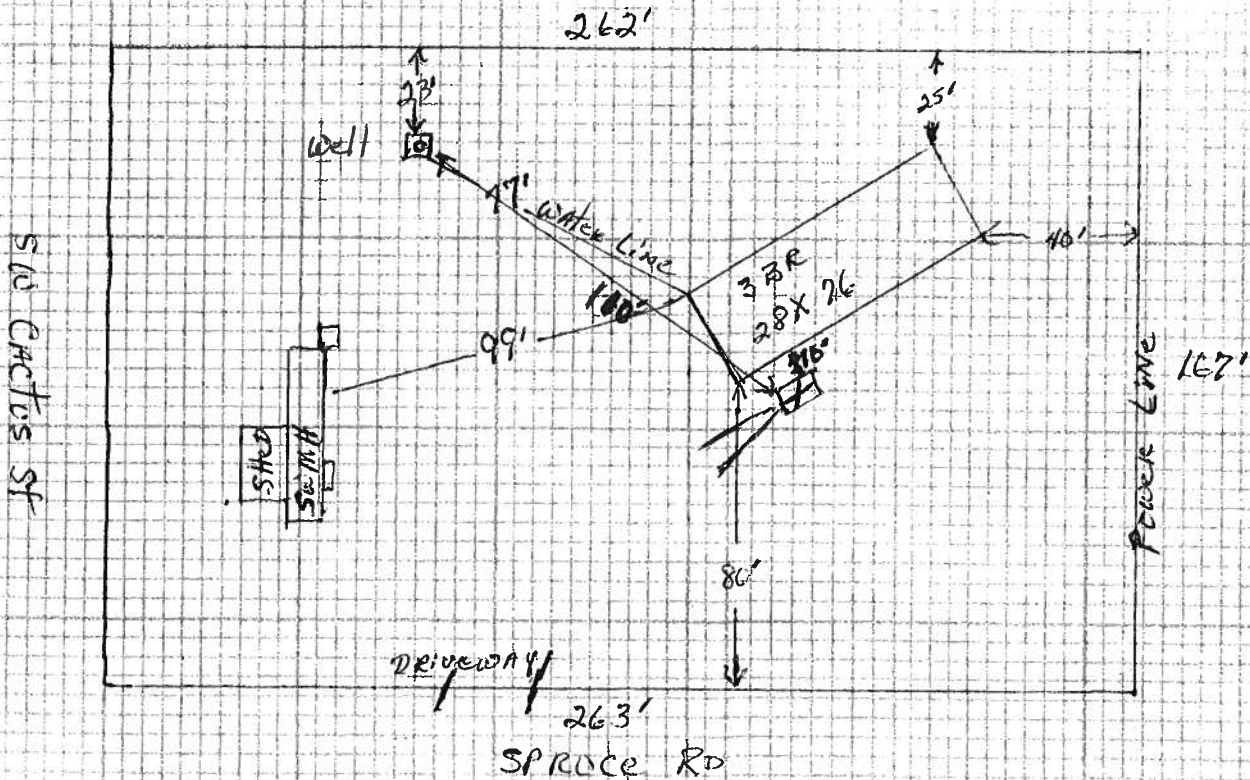
0612-45

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 06-01099N

PART II - SITE PLAN

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



Notes: Shed to Remain on Property  
Single Wide Mobile Home to be destroyed  
X PROPOSED SEPTIC + DRAINFIELD

Site Plan submitted by: CyberLink

Signature

Title

Plan Approved ✓

Not Approved \_\_\_\_\_

Date 12/24/26

By Mn 22

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT