Parcel:

25-3S-15-00227-006

Owner & Property Info

ROSIER LEANDOUS W JR

Owner

POBOX 2973

LAKE CITY, FL 32056

Site

COMM SE COR OF SW1/4 OF SW1/4, RUN W 582.99 FT FOR POB, CONT W 23.96 FT, N 489.84 FT

Description* TO SW R/W OSCEOLA DR, SE 228.25 FT, SW 425.5 FT TO POB. (LOT 4 BLOCK 1 SEMINOLE

VILLAGE UNR) 600-295, QC 1380-2583,

Area

1.22 AC

S/T/R

LEWIS, Michael
DEED Attached

25-3S-15

Result: 1 of 1

Tax District 3

Use Code** VACANT (000000)

Inst. Number: 202112000739 Book: 1428 Page: 415 Page 1 of 2 Date: 1/15/2021 Time: 12:31 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Deed: 210.00

SALO Price B30,000.00 Doc stan-po 10000

This Instrument Prepared by & return to:

Name:

Marla M. Landin, an employee of

Address:

Integrity Title Services, LLC 757 WEST DUVAL STREET

Lake City, FL 32055

File No. 20-10067

Inst: 202112000739 Date: 01/15/2021 Time: 12:31PM Page 1 of 2 B: 1428 P: 415, James M Swisher Jr. Clerk of Court

nty, By: BR

ty ClerkDoc Stamp-Deed: 210.00

Parcel I D #- R00227-006

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 6th day of January, A.D. 2021, by LEANDOUS W. ROSIER, JR.,

CONVEYING NON-HOMESTEAD PROPERTY, hereinafter called the grantor, to MICHAEL JACOB LEWIS, A SINGLE MAN, whose post office address is P.O. BOX 424, WELLBORN, FL 32094, 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, 2021.

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

Signed realed and delivered in the presence of:	Augen
Witness Signature PATRICIA LANG Printed Name	LEANDOUS W. ROSIER, JR. Address: P.O. BOX 2973, LAKE CITY, FL 32056
Muan. Cl.	1.0. DON 2713, LARE CIT1, FE 32030
Witness Signature Marla M. Landin Printed Name	

STATE OF FLORIDA COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me by means of physical presence or online notarization this 6th day of January, 2021, by LEANDOUS W. ROSIER, JR., who is known to me or who has produced Driver's License as identification.



Notary Public
My commission expires 5/14/22

Inst. Number: 202112000739 Book: 1428 Page: 416 Page 2 of 2 Date: 1/15/2021 Time: 12:31 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Deed: 210.00

Exhibit "A"

PARCEL 1:

LOT 4, BLOCK 1, SEMINOLE VILLAGE, AN UNRECORDED SUBDIVISION OF THE SW 1/4 OF THE SW 1/4, SECTION 25, TOWNSHIP 3 SOUTH, RANGE 15 EAST; COMMENCE AT THE SE CORNER OF THE SW 1/4 OF THE SW 1/4, SECTION 25, TOWNSHIP 3 SOUTH, RANGE 15 EAST AND RUN S 89°12'40" W, ALONG THE SOUTH LINE OF SAID SECTION 25, 582.99 FEET TO THE POB; THENCE CONTINUE S 89°12'40" W, 23.96 FEET; THENCE N 17°00'30" E, 489.84 FEET TO THE SOUTHWESTERLY LINE OF OSCEOLA DRIVE; THENCE S 46°59'30" E, ALONG SAID OSCEOLA DRIVE, 228.25 FEET; THENCE S 43°00'30" W, 425.50 FEET TO THE POB.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR _	Robert Sheppard	PHONE 386-623-2203
AFFERGATION MONIBLE	CONTINUE TON		THURL GOO GEO EEGO

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

Michael Lewis

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 Name	Glenn Whittington	Signature	MA	0
	License #:	EC 13002957	Phone #: _	386-972-1700	
		Qualifier Form A	attached X		
MECHANICAL/	Print Name	Ronald Bonds Sr.	Signature c	MA	0
A/C	License #:	CAC1817658	Phone #: _	800-259-3470	
11000 11000120001		Qualifier Form A	attached X		3

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

LICENSED QUALIFIER AUTHORIZATION

1. (Span Whitington	(license holder name), licensed qualifier
for Whittington ELBEKIC	(company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco	ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. WALSON	1
2. Hocky Fond	2. 12/2/
3.	3.
4.	4.
5.	5.
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 officer(s) you must notify this department in write authorization form, which will supersede all prevenuauthorized persons to use your name and/or I	nd County Licensing Boards have the power and one committed by him/her, his/her agents, naibility for compliance with all statutes, codes by issuance of such permits. 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
& Com Wholling to	EC 1300 2957 3/7/16
Licensed Qualifiers Signature (Notarized)	License Number Date
NOTARY INFORMATION: STATE OF:COUNTY OF:	Colmbin
The above license holder, whose name is	me or has produced identification this day of ABLA, 20 Seal/Starkely R BISHOP Notary Public - State of Florida Commission # FF 243986
	My Comm. Expires Jun 24, 2019



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

1. KONAld K Wond SE	(license holder name). licensed qualifier
FOR STIPE CHEST ENTERPRISES	The (company name), do certify that
the below referenced person(s) listed on this for holder, or is/are employed by me directly or throughout officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subcompared to the person of the corporation of	ough an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. DALE BURD	1.
2. Rocks Ford	2. (bela) 7-1
3. Kally Bishap	3. Kelly Bishof
4.	4.
5.	5.
authority to discipline a license holder for violatic officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous authorized persons to use your name and/or license.	is/are no longer agents, employee(s), or no of the changes and submit a new letter of ous lists. Failure to do so may allow cense number to obtain permits.
Licensed Qualifiers Signature (Notarized)	CAC 1817658 2-16-16 License Number Date
NOTARY INFORMATION: STATE OF:COUNTY OF:_	Bay
The above license holder, whose name is Roy personally appeared before me and is known by (type of I.D.) on the second control of th	
STELLY GAS LOUPE'S	(Seal/Stamp)



	Address of home BD SD VELVET EVEN being installed Manufacturer INCLUST MACON FL. SON Monte: 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 Lunderstand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall lies exceed 5 ft 4 in. Typical pior spacing Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) Thorisgo wall plan within 2 d and of home per fulls 15C.	Mobile Home Permit Worksheet
within 2' of end of home spaced at 5' 4" oc TIEDOWN COMPONENTS Longitudinal Stabilizing Device (LSD) Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms Marriage wall Shearwall Shearwall	New Home	Application Number:

Page 1 of 2

Mobile Home Permit Worksheet

Application Number:

E	Installer Name Date Tested ALL TESTS MUST BE PERFOR Lobin Sh	Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understance anchors are required at all centerline tie points where the treading is 275 or less and where the mobile home manufacting requires anchors with 4000 lb holding capacity.	TORQUE PROBE TEST The results of the torque probe test is 295 inch pour here if you are declaring 5' anchors without testing showing 275 inch pounds or less will require 5 foot anchors.	× 1600 ×1	3. Using 500 lb. incremend of reading and round of		POCKET PENETRON 1. Test the perimeter of	The pocket penetrometer tests are rounded down to or check here to declare 1000 lb. soil withoux 1500 × 1500
Electrical	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Name Lobint Shighard (-7-2)	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 lb holding capacity. Installer's initials	TORQUE PROBE TEST e test is 295 inch pounds or check inchors without testing A test ess will require 5 foot anchors.	×1500 ×1500	Using 500 lb. increments, take the lowest reading and round down to that increment.	the depth of the footer.	POCKET PENETROMETER TESTING METHOD Test the perimeter of the home at 6 locations.	rounded down to 1200 psf sil without testing. × 1500 × 1600

Skirting to be installed. Yes No Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other:	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 FOAM Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	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 C.J.	Fastening multi wide units Floor: Type Fastener: A S Length: 5'' Spacing: 10'' Walls: Type Fastener: Length: 4'' Spacing: 10'' Type Fastener: 100'S Length: 6'' Spacing: 10'' For used homes a finin, 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.	Site Preparation Debris and organic material removed Water drainage: Natural Swale Pad Other
--	--	---	--	---	--

Installer Signature

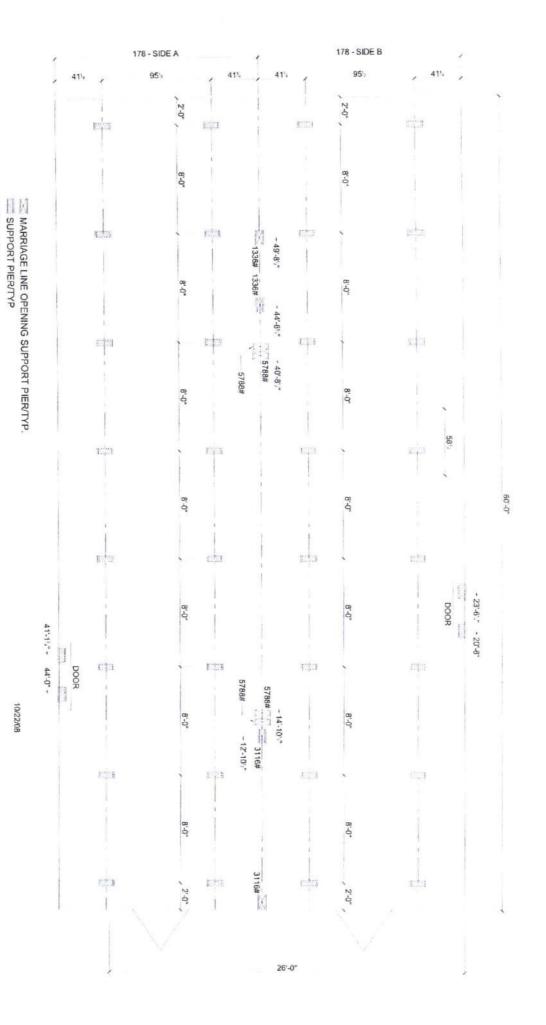
Date /- >-21

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

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Connect all sewer drains to an existing sewer tap or septic tank. Pg. $28\,$

Plumbing

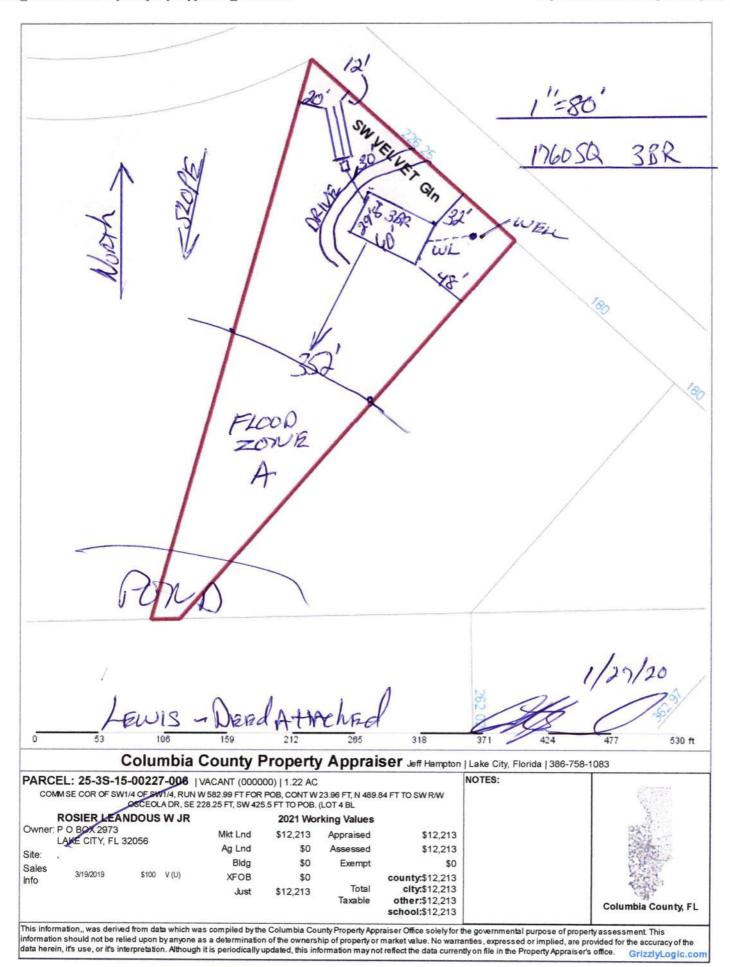


Live Oak Homes MODEL: M-3603H - 32 X 64 4-BEDROOM / 2-BATH

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

FOUNDATION NOTES:

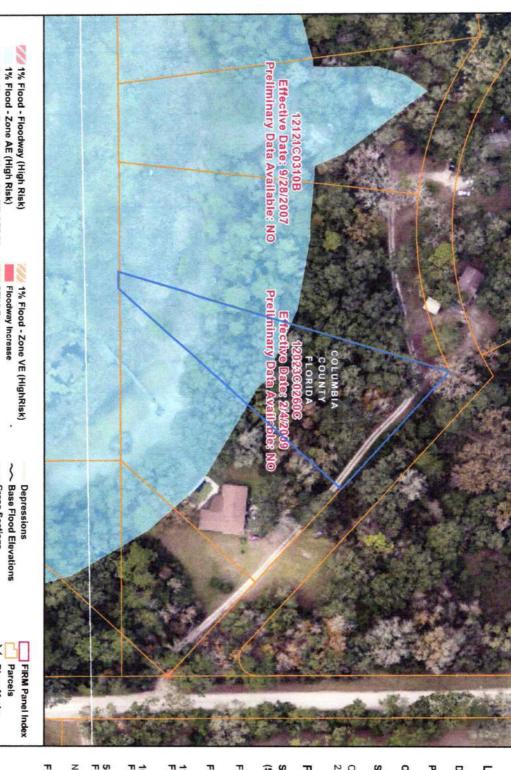
M-3603H



of 1

BEDROOM 3 2.01 BEDROOM 2 11'-6" x 12'-8" 15.7 BATHS POWERSTROKE 10.17 THE STATE OF 32 x 64 - Approx. 1760 Sq. Ft. 3-BEDROOM / 2-BATH M-3603H-0AK 3000 19:7' x 17:2" Jr. Ast. MASTER BEDROOM 16:5

Suwannee River Water Management District Effective Flood Information Report



LOCATION

Date: 11-28-2020

Parcel: 25-3S-15-00227-006

County: COLUMBIA

STR: S025 T03 R15

Columbia Flood Hazard Areas Status 2/4/2009

FLOOD INFORMATION

Special Flood Hazard Area? (SFHA): Yes

Flood Zone(s)

Floodway:

1% Annual Chance
Flood Elev (BFE): Not Applicable

10% Annual Chance Flood Elev: Not Applicable

50% Annual Chance
Flood Elev: Not Applicable

Note: Elevations are based on NAVD88

FIRM Panel(s): 12023C0260C

online (http://www.srwmdfloodreport.com). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The

County Boundaries

Cross Sections

X River Marks
Wetlands

1% Flood - Zone A, AH, or AO (HighRisk) 0.2% Flood - X-Shaded (Moderate Risk)

Floodway Increase SFHA Decrease SFHA Increase

encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (http://www.msc.fema.gov) for information on available products associated with this FIRM panel

Available products from the Map Service Center may include previously issued Letters of Map Change.

Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps