

Columbia County Gateway to Florida

FOR PLANNING USE ONLY

Application # SFLP _____
Application Fee \$50.00
Receipt No. _____
Filing Date _____
Completeness Date _____

Special Family Lot Permit Application

A. PROJECT INFORMATION

1. Title Holder's Name: Doris Wright
2. Address of Subject Property: _____
3. Parcel ID Number(s): 22-7S-17-10052-000
4. Future Land Use Map Designation: _____
5. Zoning Designation: _____
6. Acreage of Parent Parcel: 10
7. Acreage of Property to be Deeded to Immediate Family Member: 2.5
8. Existing Use of Property: Vacant Land
9. Proposed use of Property: Residential Manufactured Home
10. Name of Immediate Family Member for which Special Family Lot is to be Granted: _____

PLEASE NOTE: Immediate family member must be a parent, grandparent, adopted parent, stepparent, sibling, child, adopted child, stepchild, or grandchild of the person who is conveying the parcel to said individual.

B. APPLICANT INFORMATION

1. Applicant Status ☒ Owner (title holder) ☐ Agent
2. Name of Applicant(s): Doris Wright Title: _____
Company name (if applicable): _____
Mailing Address: 23008 N W 180TH AVE
City: High Springs State: FL Zip: 32643
Telephone: (____) _____ Fax: (____) _____ Email: _____

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.

3. If the applicant is agent for the property owner*.
Property Owner Name (title holder): _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Telephone: (____) _____ Fax: (____) _____ Email: _____

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.

***Must provide an executed Property Owner Affidavit Form authorizing the agent to act on behalf of the property owner.**

C. ATTACHMENT/SUBMITTAL REQUIREMENTS

1. Map, Drawing, or Sketch of Parent Parcel Showing the Location of the Proposed Lot being Deeded to Immediate Family Member with Appropriate Dimensions (Must be a Minimum of One Acre).
2. Personal Identification and Proof of Relationship, to Establish the Required Immediate Family Member Status, of both the Parent Parcel Owner and the Immediate Family Member. The Personal Identification Shall Consist of Original Documents or Notarized Copies from Public Records. Such Documents may include Birth Certificates, Adoption Records, Marriage Certificates, and/or Other Public Records.
3. Family Relationship Residence Agreement Affidavit is Required Stating that the Special Family Lot is being Created as a Homestead by the Immediate Family Member, that the Immediate Family Member shall obtain Homestead Exemption on the Lot. This Affidavit shall be Recorded in the Clerk of Courts Office.
4. Legal Description of Parent Parcel with Acreage (In Microsoft Word Format).
5. Legal Description of Property to be Deeded to Immediate Family Member with Acreage (In Microsoft Word Format).
6. Legal Description of Parent Parcel with Immediate Family Member Lot Removed with Acreage (In Microsoft Word Format).
7. Proof of Ownership (i.e. deed).
8. Agent Authorization Form, if applicable (signed and notarized).
9. Proof of Payment of Taxes (can be obtained online via the Columbia County Tax Collector's Office).
10. Fee. \$50.00 - No application shall be accepted or processed until the required application fee has been paid.

NOTICE TO APPLICANT

A special family lot permit may be issued by the Board of County Commissioners on land zoned Agricultural or Environmentally Sensitive Area within these Land Development Regulations, for the purpose of conveying a lot or parcel to an immediate family member who is the parent, grandparent, adopted parent, stepparent, sibling, child, or adopted child, stepchild or grandchild of the person who conveyed the parcel to said individual, **not to exceed one (1) dwelling unit per one (1) acre** and the lot complies with all other conditions from permitting development as set forth in these Land Development Regulations. This provision is intended to promote the perpetuation of the family homestead in rural areas by making it possible for immediate family members to reside on lots as their primary residence which exceed maximum density for such areas, provided that the lot complies with the conditions for permitting established in Section 14.9 of the Land Development Regulations.

If approved by the Board of County Commissioner, the division of lots shall be recorded by separate deed, comply with all other applicable regulations of the Land Development Regulations, and comply with all other conditions for permitting and development as set forth in the Land Development Regulations. A completed building permit application shall be submitted within one (1) year of receiving approval by the Board of County Commissioners. One (1) extension can be requested in writing and approved by the Land Development Regulations Administrator not to exceed nine (9) months. If a special family lot permit expires, it shall have to go through the process again for approval as required by this section. A building permit for a special family lot shall be issued only to the immediate family member or their authorized representative (i.e. licensed building contractor or mobile home installer) after a recorded copy of the family relationship residence agreement affidavit and deed to the special family lot has been submitted to the Land Development Regulation Administrator as part of the building permit application process.

Special family lots which have not met the requirements for homestead exemption shall not be transferable except, as follows:

1. The deeding of the parcel back to the original owner of the parent tract as indicated in Section 14.9 of the Land Development Regulations;
2. To another individual meeting the definition of immediate family member;
3. To an individual not meeting the definition of immediate family member due to circumstances beyond the reasonable control of the family member to whom the original special family lot permit was granted such as divorce, death or job change resulting in unreasonable commuting distances, the immediate family member is no longer able to retain ownership of the special family lot, subject to approval by the original reviewing body that approved the special family lot permit; and
4. Upon approval of the transfer of the special family lot, the County will issue a Certificate of Transfer and the owner shall record the certificate in the Public Records in the Clerk of the Courts Office. This process shall apply retroactively to special family lots previously created under the Land Development Regulations.

Any decision made by the Board of County Commissioners is subject to a 30 day appeal period as outlined in Article 12 of the Land Development Regulations. Any action taken by the applicant within the 30 day appeal period is at the applicant's risk. No Certificate of Occupancy shall be issued until the 30 day appeal period is over or until any appeal has been settled.

Upon the applicant obtaining a Certificate of Occupancy, the applicant must file for Homestead Exemption. Homestead Exemptions can be filed each year with the Columbia County Property Appraiser's Office from January 1 to March 31.

I hereby certify that all of the above statements and statements contained in any documents or plans submitted herewith are true and accurate to the best of my knowledge and belief.

DORIS WRIGHT

Applicant/Agent Name (Type or Print)

Doris Wright

Applicant/Agent Signature

2/7/2023

Date

MARRIAGE RECORD FLORIDA

APPLICATION NO.

415538

STATE FILE NO.

PERSONAL DATA	MALE	1. Name of Male (First) (Middle) (Last)	MORRIS (NMN) WRIGHT		2. Race	BLACK	
		3. Usual Residence of Male	Route 1, box 254 HIGH SPRINGS ALACHUA FLORIDA		4A. DATE OF BIRTH	09/26/25	
		5. NUMBER OF THIS MARRIAGE	2nd	6A. LAST MARRIAGE ENDED BY	divorce	6B. DATE LAST MARRIAGE ENDED	DEC., 1975
		7. STATE OF BIRTH (IF NOT IN U.S.A. NAME COUNTRY)	FLORIDA				
PERSONAL DATA	FEMALE	8. Name of Female (First) (Middle) (Last)	DORIS MARIE MORING		Maiden name if different	KELLY	
		9. Race	BLACK				
		10. Usual Residence of Female	HIGH SPRINGS ALACHUA FLORIDA		11A. DATE OF BIRTH	08/15/38	
		12. NUMBER OF THIS MARRIAGE	3rd	13A. LAST MARRIAGE ENDED BY	divorce	13B. DATE LAST MARRIAGE ENDED	AUG., 1976
		14. STATE OF BIRTH (IF NOT IN U.S.A. NAME COUNTRY)		FLORIDA			

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF, STATE THAT THE FOREGOING INFORMATION IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, AND WE HEREBY APPLY FOR THE ISSUANCE OF A LICENSE TO MARRY.

16. Signature of Male (Sign full name)
Morris Wright
17. Title
DEPUTY CLERK
18. Date
02/09/78

19. Signature of Female (Sign full name)
Doris Marie Moring
20. Title
DEPUTY CLERK
21. Date
02/09/78

22. Signature of Clerk
Bonita A. Parker

23. Signature of Clerk
Bonita A. Parker

LICENSE TO MARRY

CERTIFICATE OF MARRIAGE

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MAR-
GE CEREMONY WITHIN THE STATE OF FLORIDA TO SOLEMNIZE THE MARRIAGE OF THE ABOVE
ED PERSONS.

23. DATE LICENSE ISSUED
2/13/78
24. EXPIRATION DATE
3/15/78

27. I HEREBY CERTIFY THAT THE ABOVE NAMED BRIDE AND GROOM WERE JOINED BY ME
IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

ON 2-13-78 DATE AT High Springs CITY OR TOWN FLORIDA

THIS LICENSE MUST BE USED ON OR BEFORE THE ABOVE EXPIRATION DATE IN THE
STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

25A. SIGNATURE OF PERSON ISSUING LICENSE
A. Curtis Powers

25B. BY D.C.
J.S.U.

25C. TITLE
CLERK OF CIRCUIT COURT

26. COUNTY
ALACHUA

28A. SIGNATURE OF PERSON PERFORMING CEREMONY

Rev. L.C. Hicks

28B. NAME OF PERSON PERFORMING CEREMONY (TYPE OR PRINT)

minister

28C. TITLE

P.O. Box 913 Palatka Fla.

28D. ADDRESS

31. Date Returned
2/22/78

32. RECORDED IN BOOK 1120 PAGE 411

33. CLERK OF COURT
A. CURTIS POWERS

29. WITNESS TO CEREMONY
Mrs Ida Mae Wright

30. WITNESS TO CEREMONY
Mrs. Alberto Kelly

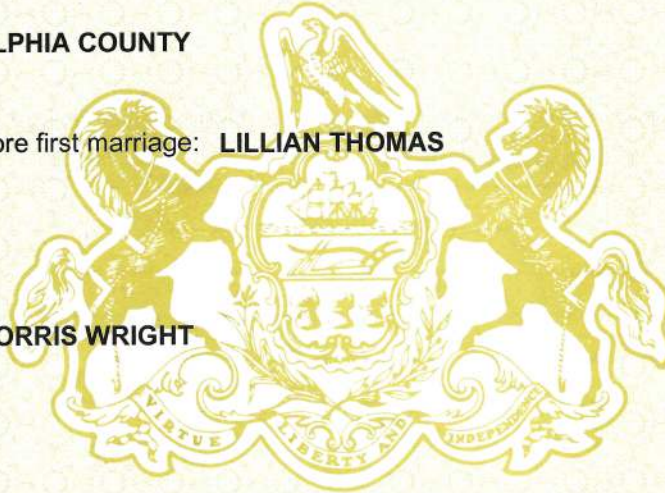
V.S. 301 REV. 12-74

This license not valid unless seal of Clerk, Circuit or County Court, appears thereon.

A. Curtis Powers, Clerk Circuit Court, & County Court, Eighth Judicial Circuit of Florida, in and for Alachua County, the same being a Court of record do hereby certify that the above and foregoing is a true and correct copy of what it purports to be from the face of the original as presented to me. This 27th day of Feb. A. D. 1978
A. CURTIS POWERS, Clerk Circuit Court & County Court By *Jean S. Knight D.C.*

VITAL RECORDS

WARNING: IT IS ILLEGAL TO DUPLICATE THIS COPY BY PHOTOSTAT OR PHOTOGRAPH.

*Certification of Birth*Date of Birth: **MAY 04, 1951**State File Number: **093132-1951**Date Issued: **NOVEMBER 15, 2016**Date Filed: **MAY 10, 1951**Name: **MADELINE WRIGHT**Sex: **FEMALE**Time of Birth: **11:50 PM**Place of Birth: **PHILADELPHIA COUNTY**Mother/Parent's Name before first marriage: **LILLIAN THOMAS**Father/Parent's Name: **MORRIS WRIGHT**

This is to certify that this is a true copy of the record which is on file in the Pennsylvania Department of Health, in accordance with the Vital Statistics Law of 1953, as amended.

Debra M. Romberger

Debra M. Romberger
State Registrar



THE DOCUMENT FACE CONTAINS A YELLOW BACKGROUND AND EMBOSSED SEAL.
THE BACK CONTAINS SPECIAL LINES WITH TEXT.

H105.105.1D Rev. (6/2016)

WARNING: THIS DOCUMENT IS PRINTED ON SECURITY WATERMARKED PAPER.
DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK.

**0002544638****DETACH HERE****TEAR AT THIS PERFORATION****DETACH HERE**

MADELINE SOTO
211 W CHEW AVE
PHILADELPHIA, PENNSYLVANIA 19120-2328

Order Number: **20160919087**

Commonwealth of Pennsylvania
Department of Health

Division of Vital Records

The information appearing on the Certification of Birth is transcribed from the original birth certificate as filed with the Division of Vital Records. The Division of Vital Records reserves the right to accept or reject any correction.

Instructions to Correct Birth Certificate:

Complete the affidavit form below in the presence of a Notary Public. Upon receipt and review of the documentation and notarized affidavit, the Division of Vital Records will determine if the correction can be processed.

An original document that supports the correction(s) requested must be submitted, such as marriage record, baptismal record, school record, military record, etc.

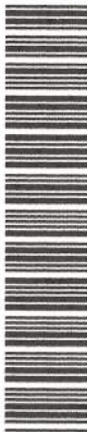
The person(s) requesting the correction must include with the notarized affidavit a clear copy of his/her valid government issued photo ID that verifies his/her name and current mailing address. Examples of acceptable identification are a state issued driver's license or non-driver photo ID that verifies the name and current address. If possible, enlarge photo ID on copier by at least 150%. If you do not possess photo ID that verifies your current mailing address, you may submit two documents that do verify the address such as lease agreement, utility bills, pay stub, bank statement, credit card statement, etc.

Mail completed affidavit form, documents and photo ID to:

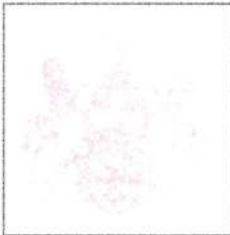
Division of Vital Records
101 S. Mercer Street
P.O. Box 1528
New Castle, PA 16103
(724) 656-3100

For additional information, visit our website at www.health.pa.gov/MyRecords/Certificates

DATA	ORIGINAL RECORD NOW READS	CORRECTION(S) DESIRED (print full names, dates, other)			
NAME AT BIRTH		First	Middle	Last	Suffix
DATE OF BIRTH					
SEX					
FATHER/PARENT		First	Middle	Last	Suffix
MOTHER/PARENT		First	Middle	Last	Suffix
OTHER ERROR					
OTHER ERROR					
SIGNATURE OF FATHER/PARENT		PRESENT ADDRESS STREET			
SIGNATURE OF MOTHER/PARENT		CITY STATE ZIP CODE			
SIGNATURE OF PERSON NAMED ON RECORD		PHONE NUMBER ()			
TO BE COMPLETED BY NOTARY PUBLIC ONLY		Notary Instructions:			
State of		Use BLUE or BLACK INK for <u>all</u> signatures and/or the notary stamp.			
Signed and sworn to before me		Do not notarize if there are any alterations, such as: scratch out, correction fluid, write-over or erasure.			
this (Day) of (Month), 20		Do not notarize unless signed by subject (or parent(s) if under age 18) in the presence of the Notary.			
Print name of person(s) appearing before the Notary Public		Complete <u>all</u> items in the Notary section and affix your notary stamp and/or seal.			
1.					
2.					
Signature of Notary Public					
Address of Notary Public					
My commission expires					
Notary Stamp and/or Seal					



0002544638



Legal Description of Full Parcel

THE NORTH 358.00 FEET OF THE SW $\frac{1}{4}$ OF THE NW $\frac{1}{4}$ OF SECTION 22, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AS LIES EAST OF US HIGHWAY NO 441.

Legal Description of 2.26 Acre Lot Split

THE WEST 275.00 FEET OF THE NORTH 358.00 FEET OF THE SW $\frac{1}{4}$ OF THE NW $\frac{1}{4}$ OF SECTION 22, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, AS LIES EAST OF US HIGHWAY NO 441.

SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE NORTH 30.00 FEET THEREOF

Legal Description for the Remaining Piece

THE NORTH 358.00 FEET OF THE SW $\frac{1}{4}$ OF THE NW $\frac{1}{4}$ OF SECTION 22, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AS LIES EAST OF US HIGHWAY NO 441. LESS THE WEST 275.00 FEET OF THE NORTH 358.00 FEET OF THE SW $\frac{1}{4}$ OF THE NW $\frac{1}{4}$ OF SECTION 22, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, AS LIES EAST OF US HIGHWAY NO 441.

SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE NORTH 30.00 FEET THEREOF

Name: MICHAEL L. SOTO AND MADELINE SOTO

Address: 3533 SW 24TH AVE, APT G
GAINESVILLE, FL 32607

Parcel ID No.: A PART OF R10052-000

Inst: 202312002018 Date: 02/07/2023 Time: 11:10AM
Page 1 of 1 B: 1484 P: 541 James M. Swisher Jr. Clerk of Court
Columbia County, By: VC [Signature]
Deputy Clerk Doc Stamp-Deed: 0.70

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This **CORRECTIVE WARRANTY DEED**, made the 6TH day of JANUARY, 2023, by **DORIS WRIGHT, CONVEYING NON-HOMESTEAD PROPERTY**, hereinafter called the Grantor, to **MICHAEL L. SOTO and MADELINE SOTO, HUSBAND AND WIFE**, whose post office address is 3533 SW 24TH AVE, APT G, GAINESVILLE, FLORIDA 32607, hereinafter called the Grantees:

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 Grantees all that certain land situate in COLUMBIA COUNTY, State of FLORIDA, viz:

THE WEST 275.00 FEET OF THE NORTH 358.00 FEET OF THE SW ¼ OF THE NW ¼ OF SECTION 22, TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AS LIES EAST OF U.S. HIGHWAY NO. 441. SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE NORTH 30.00 FEET THEREOF.

THIS DEED WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH OR SURVEY AND MAKES NO WARRANTIES AGAINST THE SAME. LEGAL PROVIDED BY GRANTOR.

TOGETHER WITH all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

SUBJECT TO TAXES FOR THE YEAR 2023 AND SUBSEQUENT YEARS, RESTRICTIONS, RESERVATIONS, COVENANTS AND EASEMENTS OF RECORD, IF ANY.

TO HAVE AND TO HOLD the same in fee simple forever.

And the Grantor hereby covenants with the Grantees 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 and that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever. Grantor further warrants that said land is free of all encumbrances, except as noted herein and except taxes accruing subsequent to December 31, 2023.

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:

Madeline Soto
Witness Signature
Printed Name: Madeline Soto

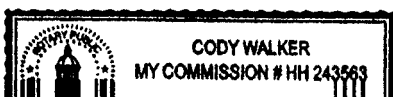
Doris Wright L.S.
Name: DORIS WRIGHT
Address: 23008 N W 180TH AVE, HIGH SPRINGS, FL 32643

Cody Walker
Witness Signature
Printed Name: Cody Walker

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, 2023, by DORIS WRIGHT, who is personally known to me or who has produced FL DL as identification.

Cody Walker
Signature of Notary
Printed Name: Cody Walker
My commission expires 03/22/26



Last Update: 2/9/2023 6:05:10 AM EST

Details

Tax Record

> Print View

Legal Desc.

Tax Payment

Payment History

Print Tax Bill NEW!

Change of Address

[Register for eBill](#)**Ad Valorem Taxes and Non-Ad Valorem Assessments**The information on this web page does not constitute a title report and should not be relied on as such.

Account Number	Tax Type	Tax Year
R10052-000	REAL ESTATE	2022

Searches

Account Number

GEO Number

Owner Name

Property Address

Mailing Address

Mailing AddressWRIGHT DORIS MARIE
23008 N W 180TH AVE
HIGH SPRINGS FL 32643**Property Address**GEO Number
227817-10052-000**Exempt Amount**
See Below**Taxable Value**
See Below**Site Functions**

Tax Search

Local Business Tax

Contact Us

County Login

Home

Exemption Detail

NO EXEMPTIONS

Millage Code

003

Escrow Code**Legal Description (click for full description)**21-7S-17 5500/550011.00 Acres THE N 356 FT OF SW1/4 OF NW1/4 AS LIES E
OF ROAD. (PARCEL 1). 355-58,**Ad Valorem Taxes**

Taxing Authority	Rate	Assessed Value	Exemption Amount	Taxable Value	Taxes Levied
BOARD OF COUNTY COMMISSIONERS	7.8150	7,900	0	\$7,900	\$61.74
COLUMBIA COUNTY SCHOOL BOARD					
DISCRETIONARY	0.7480	8,222	0	\$8,222	\$6.15
LOCAL	3.2990	8,222	0	\$8,222	\$27.12
CAPITAL OUTLAY	1.1000	8,222	0	\$8,222	\$12.23
SUNWAVE RIVER WATER MGT DIST	0.3368	7,900	0	\$7,900	\$2.66
LAKE CHORE HOSPITAL AUTHORITY	0.0001	7,900	0	\$7,900	\$0.03
Total Millage	13.6989		Total Taxes		\$110.00

Non-Ad Valorem Assessments

Code	Levying Authority	Amount
FEIR	FIRE ASSESSMENTS	\$0.00

Total Assessments \$0.00**Taxes & Assessments** \$110.00

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

Doris Wright
Owner

Doris Wright
Typed or Printed Name

Madeline Soto
Immediate Family Member

Madeline Soto
Typed or Printed Name

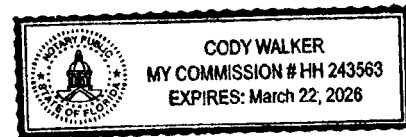
Subscribed and sworn to (or affirmed) before me this 6th day of Feb., 2023,
by Doris Wright (Owner) who is personally known to me or has produced
FL DL as identification.

Cody Walker
Notary Public



Subscribed and sworn to (or affirmed) before me this 6th day of Feb., 2023,
by Madeline Soto (Family Member) who is personally known to me or has
produced PA DL as identification.

Cody Walker
Notary Public



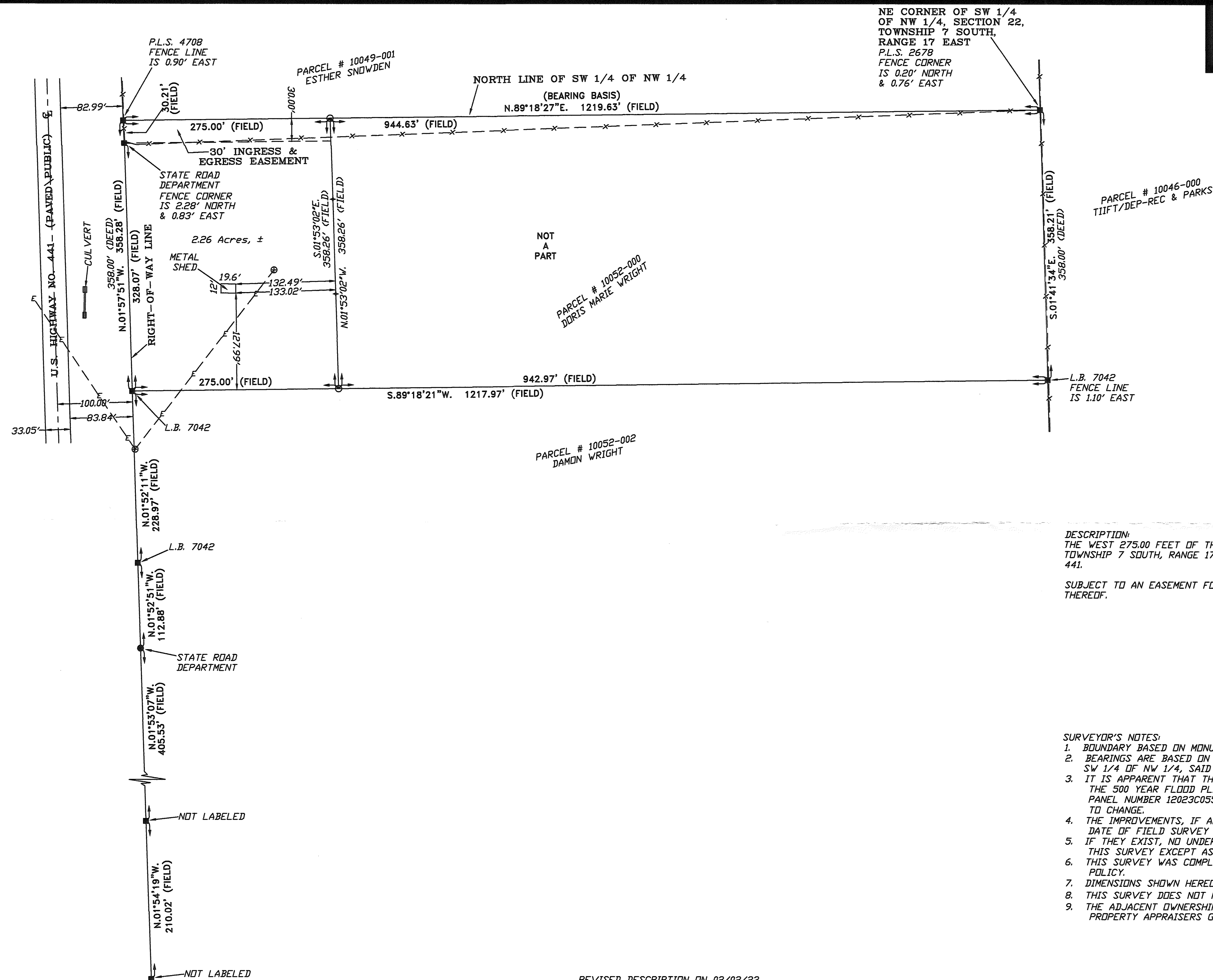
APPROVED:
COLUMBIA COUNTY, FLORIDA

By: _____

Name: _____

Title: _____

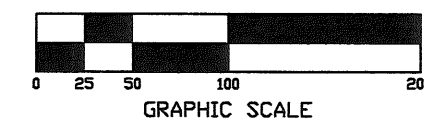
A BOUNDARY SURVEY IN SECTION 22, TOWNSHIP 7 SOUTH,
RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA.



SYMBOL LEGEND:

■	4\"X4\" CONCRETE MONUMENT FOUND
□	4\"X4\" CONCRETE MONUMENT SET
○	IRON PIPE FOUND
○	IRON PIN AND CAP SET
×	*\"X\" CUT IN PAVEMENT
+	CALCULATED PROPERTY CORNER
⊕	NAIL & DISK
⊕	POWER POLE
+	STAKE PLACED ON PROPERTY LINE
▲	WATER METER
⊕	UTILITY BOX
⊕	WELL
⊕	SANITARY MANHOLE
⊕	CENTERLINE
---	SECTION LINE
-E-	ELECTRIC LINES
-X-	WIRE FENCE
-O-	CHAIN LINK FENCE
-□-	WOODEN FENCE
(PLAT)	AS PER A PLAT OF RECORD
(DEED)	AS PER A DEED OF RECORD
(CALC.)	AS PER CALCULATIONS
(FIELD)	AS PER FIELD MEASUREMENTS
P.R.M.	PERMANENT REFERENCE MARKER
P.C.P.	PERMANENT CONTROL POINT

SCALE: 1" = 100'



DESCRIPTION:
THE WEST 275.00 FEET OF THE NORTH 358.00 FEET OF THE SW 1/4 OF THE NW 1/4 OF SECTION 22,
TOWNSHIP 7 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA AS LIES EAST OF U.S. HIGHWAY NO.
441.

SUBJECT TO AN EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE NORTH 30.00 FEET
THEREOF.

SURVEYOR'S NOTES:

1. BOUNDARY BASED ON MONUMENTATION FOUND.
2. BEARINGS ARE BASED ON AN ASSUMED BEARING OF N.89°18'27"E. FOR THE NORTH LINE OF SW 1/4 OF NW 1/4, SAID SECTION 22.
3. IT IS APPARENT THAT THIS PARCEL IS IN ZONE "X" AND IS DETERMINED TO BE OUTSIDE THE 500 YEAR FLOOD PLAIN AS PER FLOOD RATE MAP, DATED 4 FEBRUARY, 2009 FIRM PANEL NUMBER 12023C0551C. HOWEVER, THE FLOOD INSURANCE RATE MAPS ARE SUBJECT TO CHANGE.
4. THE IMPROVEMENTS, IF ANY, INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
5. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.
6. THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE COMMITMENT OR A TITLE POLICY.
7. DIMENSIONS SHOWN HEREON ARE IN FEET AND DECIMAL PARTS THEREOF.
8. THIS SURVEY DOES NOT REFLECT OR DETERMINE OWNERSHIP.
9. THE ADJACENT OWNERSHIP INFORMATION AS SHOWN HEREON IS BASED ON THE COUNTY PROPERTY APPRAISERS GIS SYSTEM, UNLESS OTHERWISE DENOTED.

REVISED DESCRIPTION ON 02/02/23.

CERTIFIED TO:

MADELINE SOTO

SURVEYOR'S CERTIFICATION:

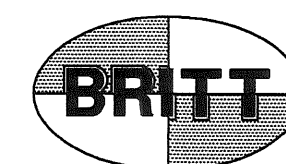
I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM
TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS
IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES.

12/20/22
FIELD SURVEY DATE

01/03/23
DRAWING DATE

L. SCOTT BRITT, P.S.M.
CERTIFICATION # 5757

NOTE: UNLESS IT BEARS THE ORIGINAL SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR
AND MAPPER THIS DRAWING, SKETCH, PLAT OR MAP IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT VALID.



BRITT SURVEYING
& MAPPING, LLC

LAND SURVEYORS AND MAPPERS, L.B. # 8016
1438 SW MAIN BLVD,
LAKE CITY, FLORIDA, 32025

www.brittsurvey.com
TELEPHONE: (386) 752-7163 FAX: (386) 752-5573

WORK ORDER # L-29124

FIELD BOOK: SEE PAGE(S): FILE