

# **PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

For Office Use Only		(Revised 7-1-15)		Zoning Official _____	Building Official _____
AP# _____	Date Received _____	By _____	Permit # _____		
Flood Zone _____	Development Permit _____	Zoning _____	Land Use Plan Map Category _____		
Comments _____					
FEMA Map# _____	Elevation _____	Finished Floor _____	River _____	In Floodway _____	
<input type="checkbox"/> Recorded Deed or <input type="checkbox"/> Property Appraiser PO <input type="checkbox"/> Site Plan <input type="checkbox"/> EH # _____ <input type="checkbox"/> Well letter OR <input type="checkbox"/> Existing well <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Installer Authorization <input type="checkbox"/> FW Comp. letter <input type="checkbox"/> App Fee Paid <input type="checkbox"/> DOT Approval <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> STUP-MH _____ <input type="checkbox"/> 911 App <input type="checkbox"/> Ellisville Water Sys <input type="checkbox"/> Assessment _____ <input type="checkbox"/> Out County <input type="checkbox"/> In County <input type="checkbox"/> Sub VF Form					

- Property ID # 32-25-16-01809-114 Subdivision Indian Ridge Lot# 14
- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 14x56 Year 2022.
  - Applicant H&L Customer Service, LLC Phone # (386) 984-9334
  - Address 301 SW Faul Ct, Lake City, FL, 32024
  - Name of Property Owner Joseph Messeruy Phone# 770-658-9435
  - 911 Address 189 NW Tomoka, Ct, Lake City, FL
  - Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Duke Energy
  - Name of Owner of Mobile Home Valentine Messeruy Phone # 770-658-9435  
 Address TBD.
  - Relationship to Property Owner mother.
  - Current Number of Dwellings on Property 1
  - Lot Size \_\_\_\_\_ Total Acreage 5.01 acres
  - Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)  
 (Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
  - Is this Mobile Home Replacing an Existing Mobile Home NO
  - Driving Directions to the Property Turn (R) onto NW Main Blvd, Turn (L) onto NW Bascom Norris Dr, Turn (R) onto NW Lake Jeffery Rd, turn (R) onto NW Leania Way, Turn (R) onto NW Indian Ridge Ln, Turn (L) onto NW tomoka Ct, Destination on your (R).
  - Name of Licensed Dealer/Installer Robert Sheppard Phone # (386) 623-2203
  - Installers Address 6355 SE CR 245, Lake City, FL, 32025
  - License Number JH/ 1025386 Installation Decal # 81793

H&L Customer Service  
LIMITED POWER OF ATTORNEY

I Joseph Messervy, do hereby authorize H&L Customer Service and its members, Heide Morrison and or Lamanda Mote, to act fully on my behalf in all aspects of applying for permits, pulling permits and picking up permits as needed for the installation of a new mobile home located at the below address;

189 NW Tomoka CT  
Lake City, FL, 32055

In \_\_\_\_\_ county, Florida.

  
Signature

11/01/21  
Date

State of Florida

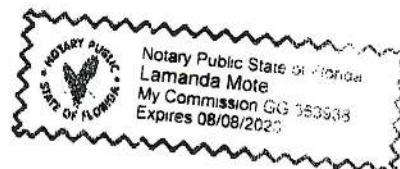
County of Columbia

This instrument was signed or acknowledged before me on this 1<sup>st</sup> day of November 2021  
by Joseph Messervy, who is personally known \_\_\_\_\_ or ID provided \_\_\_\_\_.

If ID provided, type of State issued ID provided \_\_\_\_\_.

  
Notary Public

Seal:



My Commission Expires: 08/08/2023



# Mobile Home Permit Worksheet

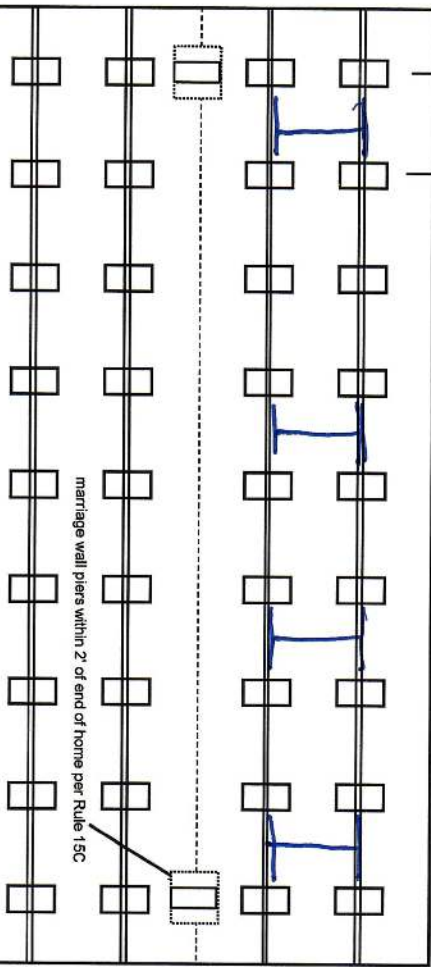
Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

Installer : Robert Sheppard License # 3141005386  
 Address of home TBD  
 being installed \_\_\_\_\_

Manufacturer Live Oak Homes Length x width 56x14

**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



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 # 81793  
 Triple/Quad ☐ Serial # LOH6A20036563

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (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 13x25  
 Perimeter pier pad size N/A  
 Other pier pad sizes (required by the mfg.) \_\_\_\_\_

## 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

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 \_\_\_\_\_

## ANCHORS

4 ft ☒ 5 ft

## FRAME TIES

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

## TIEDOWN COMPONENTS

## OTHER TIES

Longitudinal Stabilizing Device (LSD) \_\_\_\_\_ Number 28  
 Manufacturer \_\_\_\_\_  
 Longitudinal Stabilizing Device w/ Lateral Arms \_\_\_\_\_  
 Manufacturer Oliver \_\_\_\_\_  
 Sidewall \_\_\_\_\_  
 Longitudinal \_\_\_\_\_  
 Shearwall \_\_\_\_\_



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

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

X 1000 X 1000 X 1000

### 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 1000 X 1000 X 1000

### 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. A test showing 275 inch pounds or less will require 5 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

RS Installer's initials

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

Installer Name

Robert Sheppard

Date Tested

11/01/21

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. 29

Plumbing

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

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

## Site Preparation

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

### Fastening multi wide units

Floor: Type Fastener: lars Length: 6 Spacing: 12  
Walls: Type Fastener: screws Length: 4 Spacing: N/A  
Roof: Type Fastener: N/A Length: N/A Spacing: N/A  
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

RS

Type gasket

Foam

Installed:

Between Floors Yes ☒  
Between Walls Yes ☒  
Bottom of ridgebeam Yes ☒

### Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. N/A  
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 ☒  
Electrical crossovers protected. Yes ☒  
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 Sheppard Date 11/01/21

License Number: IH / 1025386 / 1 Name: ROBERT D. SHEPPARD

Order #: 4975	Label #: 81793	Manufacturer:	(Check Size of Home)
Homeowner:	Joseph Messauy	Year Model:	Single <input checked="" type="checkbox"/>
Address:	760	Length & Width:	Double <input type="checkbox"/>
City/State/Zip:	late Coly	Type Longitudinal System:	Triple <input type="checkbox"/>
Phone #:		Type Lateral Arm System:	HUD Label #: <input type="checkbox"/>
Date Installed:		New Home: <input checked="" type="checkbox"/> Used Home: <input type="checkbox"/>	Soil Bearing / PSF: <input type="checkbox"/>
Installed Wind Zone:	2	Data Plate Wind Zone:	Torque Probe / In-lbs: <input type="checkbox"/>
Note:		Permit #:	

STATE OF FLORIDA  
INSTALLATION CERTIFICATION LABEL  
81793

LABEL #

ROBERT D. SHEPPARD

NAME

IH / 1025386 / 1

DATE OF INSTALLATION

4975

LICENSE #

ORDER #

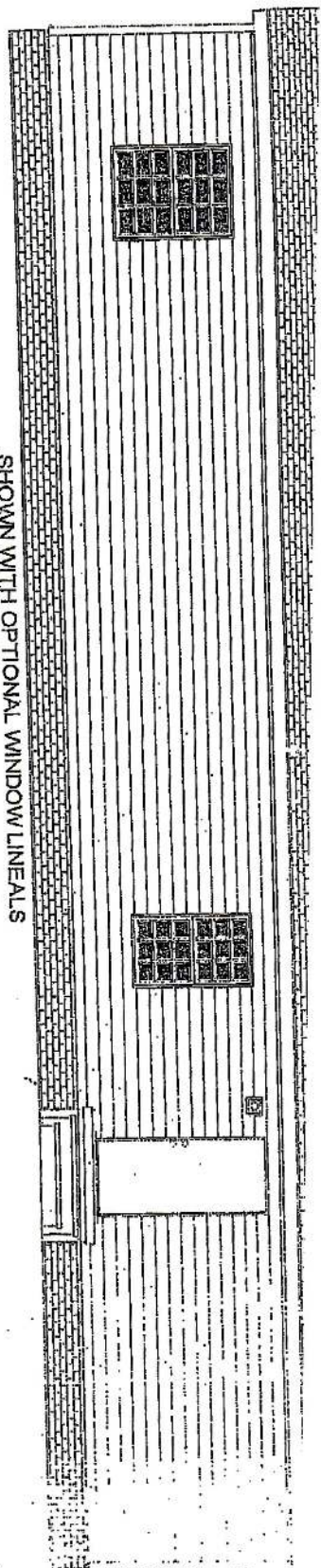
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS  
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325  
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

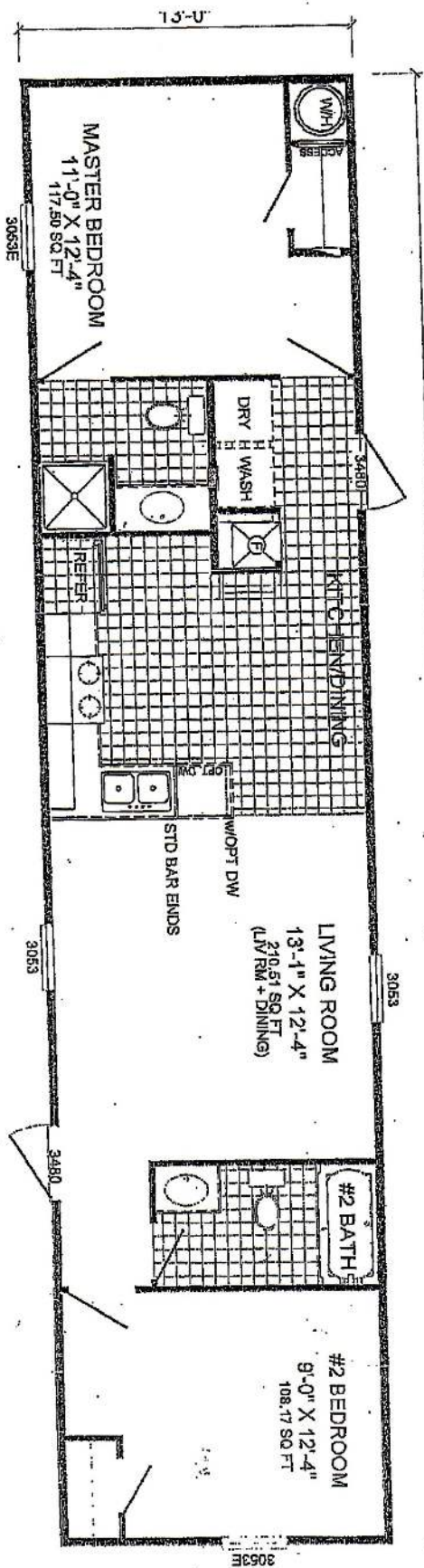
PLEASE WRITE DATE OF  
INSTALLATION AND AFFIX  
LABEL NEXT TO HUD LABEL.  
USE PERMANENT INK PEN  
OR MARKER ONLY.

COMPLETE INFORMATION  
ABOVE AND KEEP ON FILE  
FOR A MINIMUM OF 2 YEARS.  
YOU ARE REQUIRED TO  
PROVIDE COPIES WHEN  
REQUESTED.





SHOWN WITH OPTIONAL WINDOW LINEALS  
56'-0"



**L-4562A**

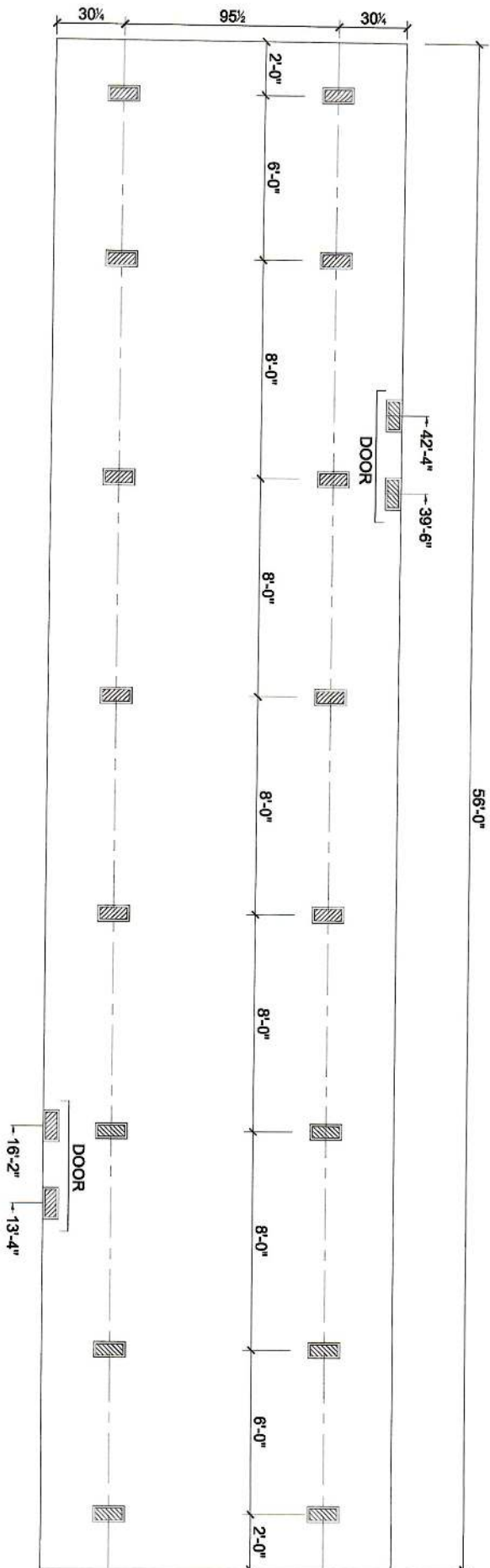
**2-BEDROOM / 2-BATH**

**14 X 56 - Approx. 728 Sq. Ft.**

Date: 2-18-2014

\* All room dimensions include closets and square footage figures are approximate.

*10 # Lighting*



1-31-2014

**SUPPORT PIERTYP**

**FOUNDATION NOTES:**

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.

**Live Oak Homes**

**MODEL: L-4562A - 14 X 60**  
**2-BEDROOM / 2-BATH**

# MOBILE HOME INSTALLATION 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.*

ELECTRICAL	Print Name <u>Glenn Whittington</u> License #: <u>EC 13002957</u>	Signature <u>Glenn Whittington</u> Phone #: <u>(386) 972-1701</u>
Qualifier Form Attached <input type="checkbox"/>		
MECHANICAL/ A/C _____	Print Name <u>Charles Thomas</u> License #: <u>CPC 1817820</u>	Signature <u>Charles Thomas</u> Phone #: <u>64191680-2023</u>
Qualifier Form Attached <input type="checkbox"/>		

**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.

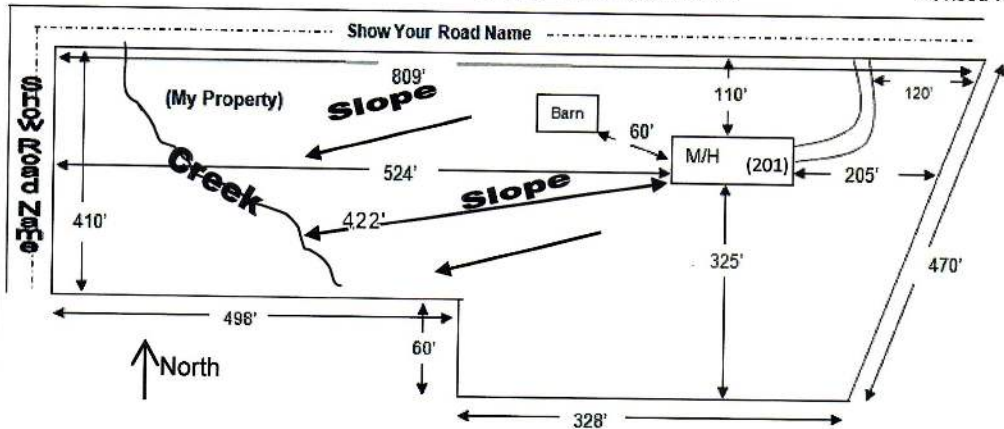


## SITE PLAN CHECKLIST

- ☐ 1) Property Dimensions
- ☐ 2) Footprint of proposed and existing structures (including decks), label these with existing addresses
- ☐ 3) Distance from structures to all property lines
- ☐ 4) Location and size of easements
- ☐ 5) Driveway path and distance at the entrance to the nearest property line
- ☐ 6) Location and distance from any waters; sink holes; wetlands; and etc.
- ☐ 7) Show slopes and or drainage paths
- ☐ 8) Arrow showing North direction

### SITE PLAN EXAMPLE

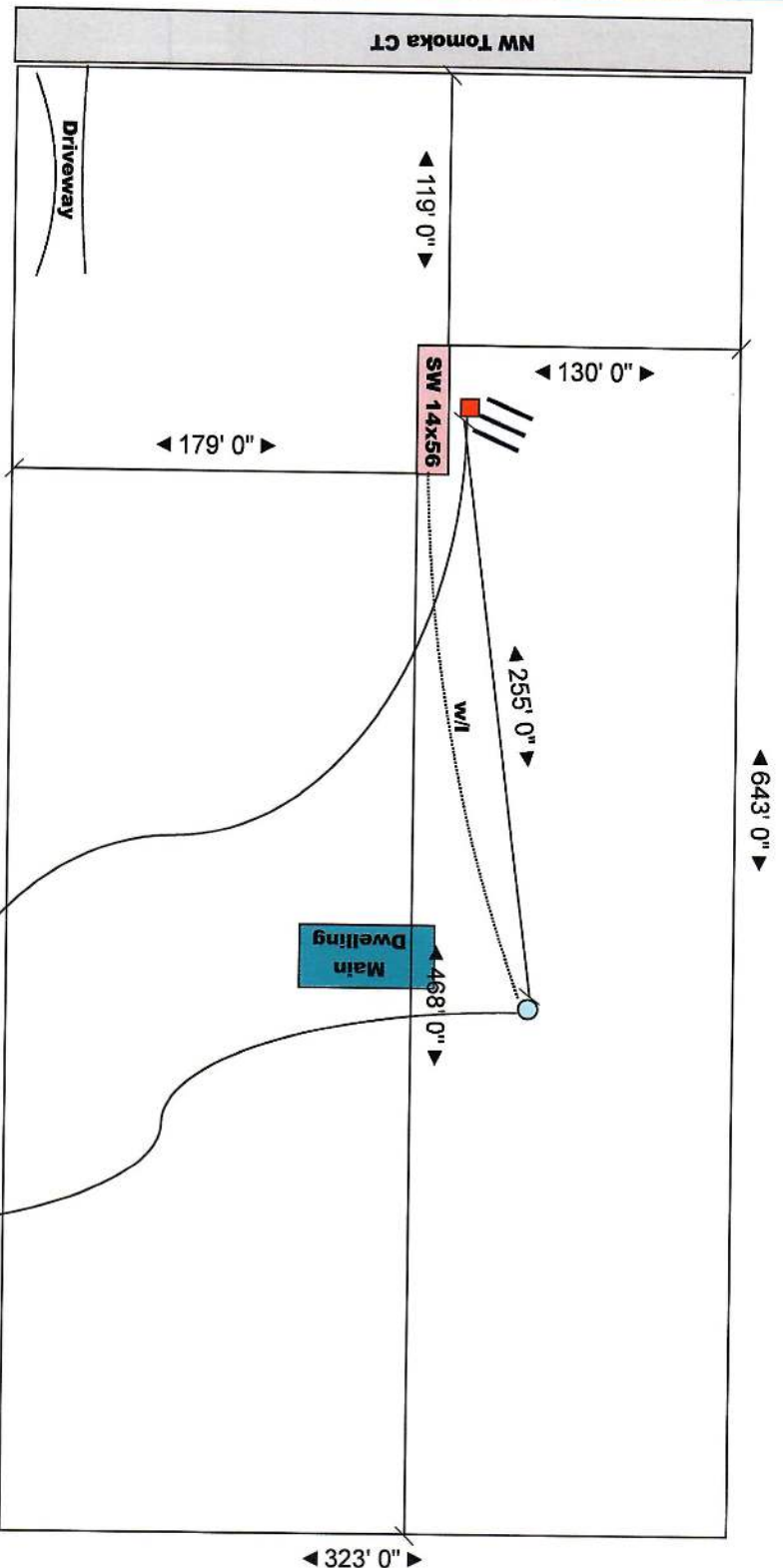
Revised 7/1/15



#### **NOTE:**

This site plan can be copied and used with the 911 Addressing Dept. application forms.

See Attached.



**Parcel ID: 32-2S-16-01809-114**

**Proposed New Septic  
Existing (sharing) well**

<b>Site:</b>  <b>TBD NW Tomoka Ct, Lake City</b>	<b>Drawing:</b> <b>801102</b>	<b>Project:</b> <b>0112</b>	<b>Drawn:</b> <b>Heide M</b>	<b>Notes:</b>  <b>H&amp;L Customer Services, LLC 301 SW Faul Ct Lake City, FL, 32024 (386)984-9334</b>
<b>Title:</b>  <b>Joseph Messervy</b>	<b>Scale:</b> <b>1"=80'</b>	<b>Date:</b> <b>11/02/21</b>	<b>Rev:</b> <b>A</b>	





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

# MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Robert Sheppard, give this authority for the job address show below  
Installer License Holder Name

only, TBD NW Tomoka Ct, Lake City, and I do certify that  
Job Address

the below 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	Authorized Person is... (Check one)
Heide Morrison	<i>Heide Morrison</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property 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.

Robert Sheppard JH1025386 11/02/21  
License Holders Signature (Notarized) License Number Date

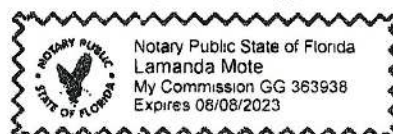
## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 02 day of November, 2021.

Lamanda Mote  
NOTARY'S SIGNATURE

(Seal/Stamp)





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, Robert Sheppard, 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
Heide Morrison	H Morrison	H&L Customer Service

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.

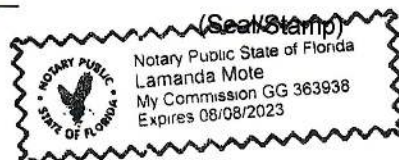
Robert Sheppard JH/1025326 11/02/21  
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Robert Sheppard,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 2nd day of November, 20 21.

Lamanda Mote  
NOTARY'S SIGNATURE





Home only or Land & Home

Financed by

Southern Insurance?

9/18/1960

IRONWOOD HOMES OF LAKE CITY LLC

4109 WEST US HWY 90

Lake City, FL 32055

(386) 754-8844 fax (386) 754-0190

BUYER

MESSERVY JOSEPH MICHELLE LOUIS

770-658-9435

DATE 9/14/2021

ADDRESS

189 NW TOMOKA CT LAKE CITY FL 32055

SALES PERSON

MIKE COX

DELIVERY ADDRESS

TBD TOMOKA CT LAKE CITY FL 32055

MAKE & MODEL

LIVE OAK L4562A-R

YEAR

2022

BEDROOMS

2X2

FLOOR SIZE

14X56

HITCH SIZE

L

14X60

SERIAL NUMBER

LOHGA20036563

☒ NEW ☐ USED

COLOR

LOCATION

R-VALUE

THICKNESS

TYPE OF INSULATION

CEILING

EXTERIOR

FLOORS

This insulation information was furnished by the manufacturer and is disclosed

in compliance with the Federal Trade Commission Rule 16CFR, Sec. 460.16.

NON-TAXABLE ITEMS		TAXABLE ITEMS	
LAND IMPROVEMENTS:		SET UP ITEMS	
LAND CLEARING	CUSTOMER	DELIVER & SET	CUSTOMER \$0.00
DIRT PAD	CUSTOMER	14SEER AC HEAT PUMP	\$3,800.00
4" METAL WELL	CUSTOMER	SKIRTING	CUSTOMER
PUMP OUT EXISTING TANK	NA	STEPS X2	CUSTOMER
ADDED DRAIN FIELD	NA	TAPE & TEXTURE TRIM	NA
PLUMBING TO OUTSIDE WALL	CUSTOMER	TRIM OUT	NA
POLE AND WIRING WELL ALSO	CUSTOMER		
PERMITS	\$0.00		
DRIVE WAY	NA	FOOTERS	\$0.00
ALL COUNTY PERMITS	\$950.00	PAN ROOF	\$0.00
FHA FEES			
TERMITE TREATMENT	\$0.00		
ENGINEER FEES	\$0.00		\$0.00
FHA VA WATER TEST			\$0.00
FHA VA INSPECTIONS			\$0.00
TOTAL NON-TAXABLE		TOTAL TAXABLE	\$3,800.00

NOTE: WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.

DESCRIPTION OF TRADE-IN

YEAR

SIZE

MAKE

MODEL

BEDROOMS

TITLE NO.

SERIAL

COLOR

AMOUNT OWING TO WHOM

NO.

ANY DEBT BUYER OWES ON THE TRADE-IN IS TO BE PAID BY THE ☐ DEALER ☐ BUYER

THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS CONTRACT. Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures. Buyer is purchasing the above described trailer, manufactured home or vehicle; the optional equipment and accessories, the insurance as described has been voluntary; that Buyer's trade-in is free from all claims whatsoever, except as noted.

OF THIS ORDER AND THAT BUYER HAS READ AND UNDERSTANDS THE BACK OF THIS AGREEMENT.

BUYER ACKNOWLEDGES RECEIPT OF A COPY

SIGNED X

BUYER

SOCIAL SECURITY NO.

SIGNED X

BUYER

SOCIAL SECURITY NO.

Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent

By

APPROVED

Customer own electrical  
Own set up.

Jim Taylor

Monday 2 am

Form 500



**Columbia County Property Appraiser**

Jeff Hampton

**2022 Working Values**

updated: 10/28/2021

Parcel: &lt;&lt; 32-2S-16-01809-114 (5901) &gt;&gt;

**Owner & Property Info**

Result: 1 of 1

Owner	MESSERVY JOSEPH 189 NW TOMOKA CT LAKE CITY, FL 32055-7643		
Site	189 NW TOMOKA CT, LAKE CITY		
Description*	LOT 14 INDIAN RIDGE S/D PHS 1. WD 1173-701, WD 1177-2375, WD 1192-1247, WD 1291-1119, AG 1351-912, WD 1386-206, WD 1386-207,		
Area	5.01 AC	S/T/R	32-2S-16
Use Code**	MOBILE HOME (0200)	Tax District	3

\*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

\*\*The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning &amp; Zoning office for specific zoning information.

**Property & Assessment Values**

2021 Certified Values		2022 Working Values	
Mkt Land	\$36,750	Mkt Land	\$36,750
Ag Land	\$0	Ag Land	\$0
Building	\$93,030	Building	\$91,112
XFOB	\$0	XFOB	\$0
Just	\$129,780	Just	\$127,862
Class	\$0	Class	\$0
Appraised	\$129,780	Appraised	\$127,862
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$129,780	Assessed	\$127,862
Exempt	\$0	Exempt	\$0
Total Taxable	county: \$129,780 city: \$0 other: \$0 school: \$129,780	Total Taxable	county: \$127,862 city: \$0 other: \$0 school: \$127,862

Aerial Viewer Pictometry Google Maps

2019 2016 2013 2010 2007 2005 Sales

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
6/3/2019	\$132,000	1386/0207	WD	I	Q	01
5/31/2019	\$100	1386/0206	WD	I	U	11
12/19/2017	\$45,000	1351/0912	AG	V	U	21
3/14/2015	\$48,500	1291/1119	WD	V	U	38
3/25/2010	\$100	1192/1247	WD	V	U	11
7/2/2009	\$100	1177/2375	WD	V	U	11
5/11/2009	\$55,000	1173/0701	WD	V	Q	01

**▼ Building Characteristics**

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	MANUF 1 (0200)	2018	1782	1782	\$91,112

\*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

**▼ Extra Features & Out Buildings (Codes)**

Code	Desc	Year Blt	Value	Units	Dims
NONE					



Prepared by:  
Michael H. Harrell  
Abstract Trust Title, LLC  
283 NW Cole Ter  
Lake City, FL 32055

ATT# 4-8972

Inst: 201912012803 Date: 06/07/2019 Time: 3:28PM  
Page 1 of 1 B: 1386 P: 207, P.DeWitt Cason, Clerk of Court Colum  
County, By: PT  
Deputy Clerk Doc Stamp-Deed: 924.00

## Warranty Deed

Individual to Individual

THIS WARRANTY DEED made the 3<sup>rd</sup> day of June, 2019, by Kimberly Hodil Bowen and Her Husband, James Bowen, hereinafter called the grantor, to Joseph Messervy whose post office address is: 1730 Cotton Patch Lane, Alpharetta, GA 30004 hereinafter called the grantee:

(Wherever 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 corporation)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys, and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida:

Lot 14, Indian Ridge, Phase One, according to the map or plat thereof, as recorded in Plat Book 9, Page(s) 72 through 79, of the Public Records of Columbia County, Florida.

TOGETHER with all 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 whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to the prior year.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Witness:  
Sarah D. Bebay  
Printed Name:

Witness:  
Dwayne L. Howard  
Printed Name:

[Signature]  
Kimberly Hodil Bowen

[Signature]  
James Bowen

STATE OF Florida  
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> day of June, 2019 by KIMBERLY HODIL BOWEN AND HER HUSBAND, JAMES BOWEN personally known to me or, if not personally known to me, who produced Drivers License for identification and who did not take an oath. B500-508-678-01 B500-445-678-1167-0

[Signature]  
Notary Public

(Notary Seal)

