

**PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION**

For Office Use Only		(Revised 7-1-15)	Zoning Official _____	Building Official _____
AP# <u>57055</u>	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 # 19-55-16-03653-009 Subdivision N/A Lot# N/A

- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 28x60 Year 2022
- Applicant Heide Morrison Phone # (386) 984-9334
- Address 313 NW Brook Loop, Lake City, FL, 32055
- Name of Property Owner William Newcomb Phone# (386) 965-5141
- 911 Address 2141 SW Ichetucknee Ave, Lake City, FL, 32024
- Circle the correct power company - FL Power & Light - Clay Electric  
 (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home SAME AS ABOVE Phone # \_\_\_\_\_  
 Address \_\_\_\_\_
- Relationship to Property Owner \_\_\_\_\_
- Current Number of Dwellings on Property 0
- Lot Size 2 Acres Total Acreage 2 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 (L) onto NE Madison St, Turn (R) onto N. Marion Ave, Turn (R) onto W Duval St, Turn (L) onto SR 2470, Turn (L) onto SW Park Way, Turn (L) onto SW CR 240, Turn (R) onto SW Ichetucknee Ave
- Email Address for Applicant: heidemorrison@gmail.com
- Name of Licensed Dealer/Installer Ryan Norn's Phone # (386) 234-1005
- Installers Address 1004 SW Charles Terr, Lake City, FL, 32004.
- License Number IH/1135009 Installation Decal # 92800



# Mobile Home Permit Worksheet

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

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

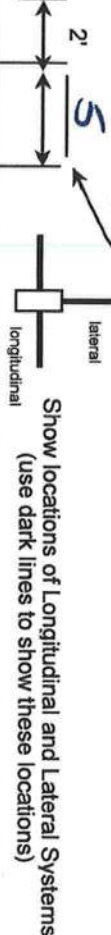
Installer: Ryan Morris License # IT411135009

Address of home being installed: 2141 SW Ichetucknee Ave.  
Lake City, FL 32024

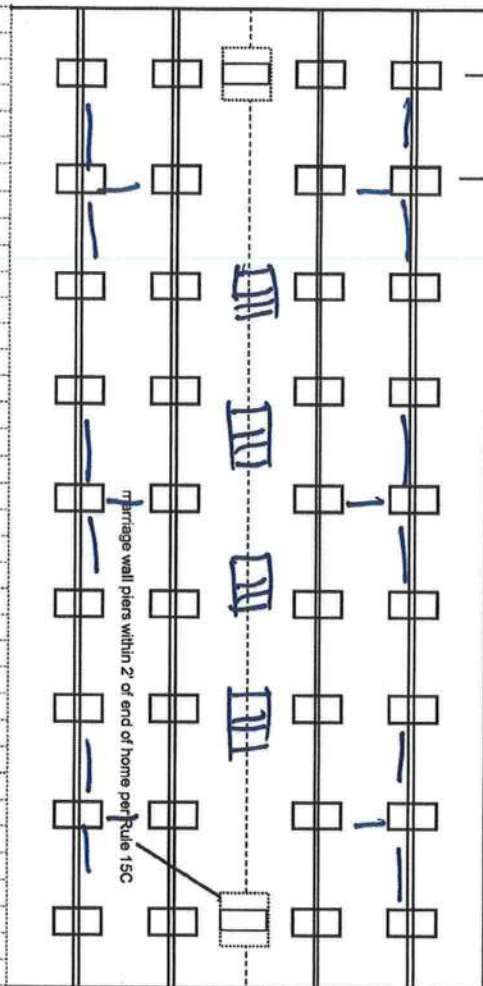
Manufacturer: Live Oak Homes Length x width: 40 x 28

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.

Typical pier spacing



Installer's initials: RM



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 # 92800

Triple/Quad ☐ Serial # LOH6A20039597A6

## 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: 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

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: \_\_\_\_\_

### OTHER TIES

Number: 24  
Sidewall: \_\_\_\_\_  
Longitudinal Marriage wall: \_\_\_\_\_  
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 1600 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 285 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.

RN Installer's initials

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

Installer Name

Ryan Morris

Date Tested

11/04/22

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: lags Length: 5 Spacing: 16  
Walls: Type Fastener: screws Length: 4 Spacing: 16  
Roof: Type Fastener: lags Length: 4 Spacing: 16  
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

RN

Type gasket Pg. 22 factory

Installed:

Between Floors Yes ✓  
Between Walls Yes ✓  
Bottom of ridgebeam Yes ✓

### Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 16  
Siding on units is installed to manufacturer's specifications. Yes ✓  
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 ✓  
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

Ryan Morris

Date

11/04/22



License Number: IH / 1135009 / 1 Name: RONALD "RYAN" NORRIS

Order # 5509 Label # 92800

Homeowner

Address:

City/State/Zip

Phone #

Date Installed:

Installed Wind Zone

Note:

Manufacturer:

Year Model:

Length & Width

Type Longitudinal System

Type Lateral Arm System

New Home \_\_\_\_\_ Used Home \_\_\_\_\_

Data Plate Wind Zone

(Check Size of Home)

Single \_\_\_\_\_

Double \_\_\_\_\_

Triple \_\_\_\_\_

HUD Label #

Soil Bearing / PSF

Torque Probe / in.-lbs

Permit #

# STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

92800

LABEL #

RONALD "RYAN" NORRIS

NAME

IH / 1135009 / 1

5509

DATE OF INSTALLATION

ORDER #

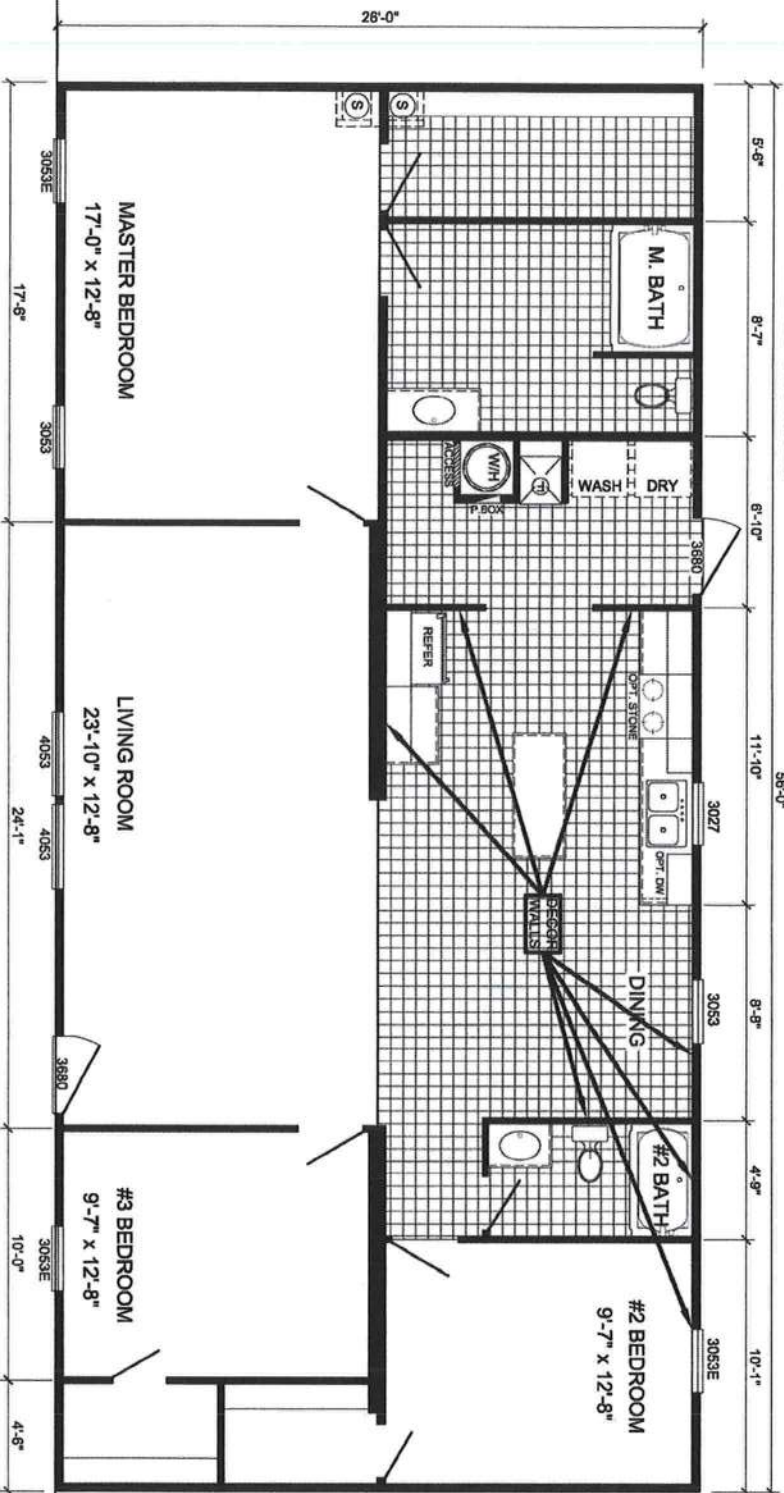
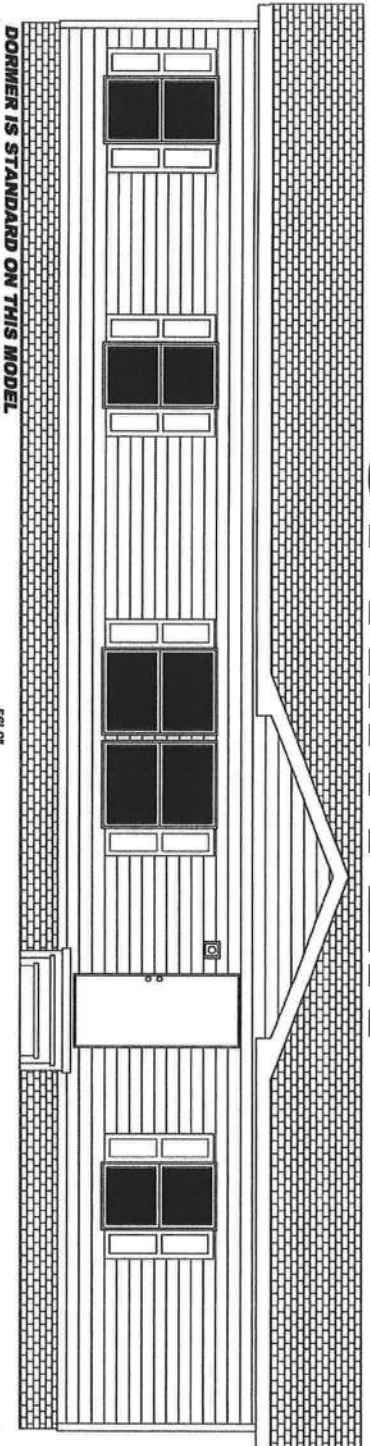
LICENSE #  
CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS  
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325  
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES

## 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.



# SPRINTER



## L-2563G - RUNNER 3-BEDROOM / 2-BATH 28 x 60 - Approx. 1456 Sq. Ft.

Date: 03/06/20

- \* All room dimensions include closets and square footage figures are approximate.
- \* Transom windows are available on optional 9'-0" sidewall houses only.
- \* Live Oak Homes reserves the right to change product offering at any time.



**MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_

CONTRACTOR Ryan Nornis

PHONE (386) 234-1005

**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.*

<p><b>ELECTRICAL</b></p>	<p>Print Name <u>Richard Sapp</u>          License #: <u>EC13006007</u></p>	<p>Signature <u>[Signature]</u>          Phone #: <u>(386) 362-4058</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>
<p><b>MECHANICAL/ A/C</b></p>	<p>Print Name <u>Ron E Bonds</u>          License #: <u>CAC 1817658</u></p>	<p>Signature <u>[Signature]</u>          Phone #: <u>(850) 545-8664</u></p> <p align="center">Qualifier Form Attached <input type="checkbox"/></p>

**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.

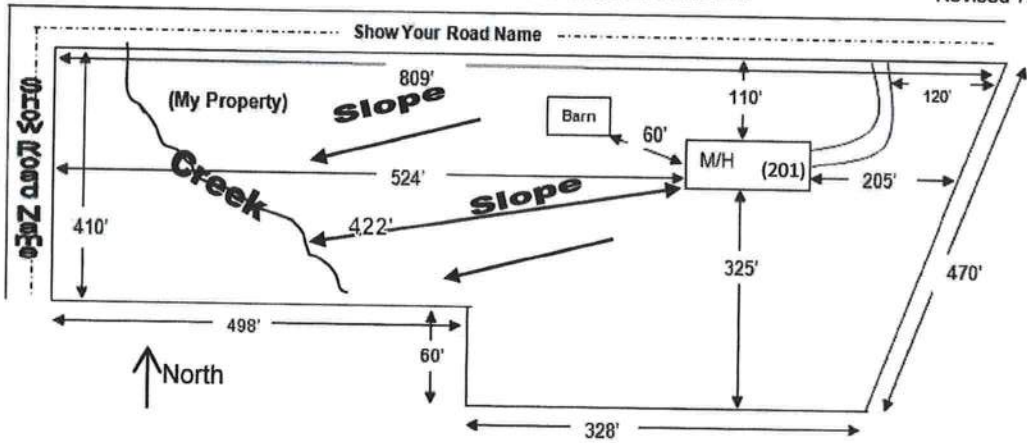


## SITE PLAN CHECKLIST

- \_\_\_ 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



Newcomb Job

1 1/4 40'

Robert W. Zide

10-31-2022

295.25

SW Cheyenne Rd

North

Slope

Proposed Well

BM

180'

w/L

45'

10'

S1

S2

28'x60'  
3 BR  
1456

82'

100'

160'

D/W

295.25

Drain

SW Cheyenne Ave

295.25



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, Ryan Morris, give this authority for the job address show below  
Installer License Holder Name

only, TBO, 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.

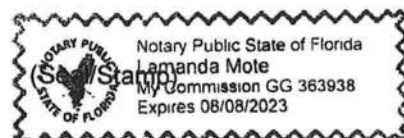
*Ryan Morris* License Holders Signature (Notarized)  
11/1135009 License Number  
11/4/22 Date

## NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ryan Morris,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 4th day of November, 20 22.

*Lamanda Mote*  
NOTARY'S SIGNATURE







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, Ryan Norm's, 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 Norm's	<i>Heide Norm's</i>	North Florida Building Permits, LLC

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.

*Ryan Norm's* License Holders Signature (Notarized) JH/1135009 License Number 11/04/22 Date

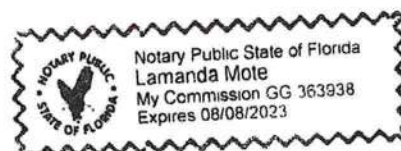
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ryan Norm's,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) personally known on this 4th day of November, 2022.

*Lamanda Mote*  
NOTARY'S SIGNATURE

(Seal/Stamp)



## LII

CO-BUYER: N251-421-71-808-0

Page 1 of 2 pages



**Columbia County Property Appraiser**

Jeff Hampton

**2023 Working Values**

updated: 10/20/2022

Parcel: << **19-5S-16-03653-009 (45588)** >>**Owner & Property Info**

Result: 4 of 5

Owner	NEWCOMB WILLIAM BRADLY 1020 NE NO NAME RD BRADFORD, FL 32008		
Site			
Description*	BEG AT INTERS OF S R/W LINE OF SW CARPENTER RD & E R/W LINE OF SW ICHETUCKNEE AVE, RUN E 295.25 FT, S 295.25 FT, W 295.25 FT TO E R/W LINE SW ICHETUCKNEE AVE, N 295.25 FT TO POB. 623-653, 851-2427, LE 1036-916, DC 1384-730, QC 1475-1911,		
Area	2 AC	S/T/R	19-5S-16
Use Code**	TIMBERLAND 80-89 (5500)	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 & Zoning office for specific zoning information.

**Property & Assessment Values**

2022 Certified Values	2023 Working Values	
There are no 2023 Certified Values for this parcel	Mkt Land	\$0
	Ag Land	\$904
	Building	\$0
	XFOB	\$0
	Just	\$20,000
	Class	\$904
	Appraised	\$904
	SOH Cap [?]	\$0
	Assessed	\$904
	Exempt	\$0
	Total Taxable	county:\$904 city:\$0 other:\$0 school:\$904

Aerial Viewer Pictometry Google Maps

☒ 2022 ☐ 2019 ☐ 2016 ☐ 2013 ☐ 2010 ☒ Sales
**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
9/16/2022	\$0	1475/1911	QC	V	U	11

**▼ Building Characteristics**

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
NONE					

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

Code	Desc	Year Blt	Value	Units	Dims
NONE					

**▼ Land Breakdown**

Code	Desc	Units	Adjustments	Eff Rate	Land Value
5500	TIMBER 2 (AG)	2.000 AC	1.0000/1.0000 1.0000/ /	\$452 /AC	\$904
9910	MKT.VAL AG (MKT)	2.000 AC	1.0000/1.0000 1.0000/ /	\$10,000 /AC	\$20,000

**Prepared By**

Name: Julie Newcomb  
Address: 1020 NE No Name Road  
Brantford  
State: FL Zip Code: 32008

**After Recording Return To**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**TAX PARCEL ID #** \_\_\_\_\_

Inst: 202212018232 Date: 09/19/2022 Time: 10:45AM  
Page 1 of 2 B: 1475 P: 1911, James M Swisher Jr, Clerk of Court  
Columbia, County, By: VCW Deputy Clerk

Space Above This Line for Recorder's Use

**FLORIDA QUIT CLAIM DEED**

STATE OF FLORIDA

Columbia COUNTY

THIS QUIT CLAIM DEED, executed this 16 day of September, 2022,  
between first party, as Grantor, Jay Koon, a  
Grandmother, whose post office address is 2227 SW Carpenter Rd  
County of Columbia, City of Lake City, State of Florida, and  
second party, as Grantee, William Bradley Newcomb a Grandson,  
whose post office address is 1020 NE No Name Rd, County of Sumner,  
City of Brantford, State of Florida.

**WITNESSETH**, that Grantor, and in consideration of love and affection  
(\$ \_\_\_\_\_), and other good and valuable consideration paid by the  
Grantee, the receipt of which is hereby acknowledged, does hereby remise, release and  
forever quitclaim unto the Grantee, all the rights, title, interest, and claim in or to the  
following described parcel of land, and improvements and appurtenances thereto, in  
Columbia County, Florida, to-wit:

**[INSERT LEGAL DESCRIPTION HERE OR ATTACH EXHIBIT A]**

DESCRIPTION:  
SECTION 19, TOWNSHIP 5 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA;  
BEGIN AT THE INTERSECTION OF THE SOUTH RIGHT-OF-WAY LINE OF SW CARPENTER ROAD AND  
THE EAST RIGHT-OF-WAY LINE OF SW ICHTUCKNEE AVENUE, THENCE RUN N.89°13'10"E., ALONG  
THE SOUTH MAINTAINED RIGHT-OF-WAY LINE OF SAID SW CARPENTER ROAD, 295.25 FEET; THENCE  
RUN S.01°24'01"E., 295.25 FEET; THENCE S.89°13'10"W., 295.25 FEET TO SAID EAST RIGHT-OF-WAY  
LINE SW ICHTUCKNEE AVENUE; THENCE N.01°24'01"W., 295.25 FEET TO THE POINT OF BEGINNING,  
CONTAINING 2.00 ACRES, MORE OR LESS.



To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

IN WITNESS WHEREOF, Grantor has executed and delivered this Quit Claim Deed under seal as of the day and year first above written.

Joy Koon  
Grantor's Signature  
Joy Koon  
Grantor's Name  
2227 SW Carpenter Rd  
Address  
Lake City FL 32024  
City, State & Zip

\_\_\_\_\_  
Grantor's Signature  
\_\_\_\_\_  
Grantor's Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State & Zip

Leslie Edow  
Witness's Signature  
Leslie Edow  
Witness's Name

Sherrie Thomas  
Witness's Signature  
Sherrie Thomas  
Witness's Name

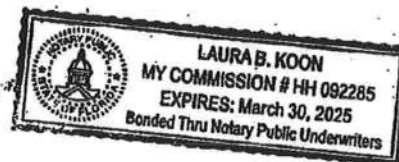
STATE OF FLORIDA)  
COUNTY OF Columbia

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 16<sup>th</sup> day of September, 2022, by Joy Koon who is personally known to me or who has produced \_\_\_\_\_ as identification.

Laura B Koon  
Notary Public

(SEAL)

My Commission Expires: March 30, 2025



**BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY**



**Address Assignment and Maintenance Document**

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **11/4/2022 3:20:22 PM**  
Address: **2141 SW ICHETUCKNEE Ave**  
City: **LAKE CITY**  
State: **FL**  
Zip Code **32024**

Parcel ID **03653-009**

REMARKS: New address for Habitable structure (family home, business, etc.) on the parcel.

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

Address Issued By: **MOORE, DAVID R.**