



2010029368 2 PGS

OFFICIAL RECORDS
CITRUS COUNTY
BETTY STRIFLER
CLERK OF THE CIRCUIT COURT
RECORDING FEE: \$18.50
DOCUMENTARY TAX: \$770.00
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07/01/2010 09:59 AM 2 PGS
ATYRE,DC Receipt #022629

This Document Prepared By and Return to:

Amanda Rowthorn for
Southern Security Title Services, Inc.
2676 W. Woodview Lane, Lecanto, FL 34461
This instrument was prepared incidental to the
writing of a title insurance policy.

Parcel ID Number: 1115736

Warranty Deed

This Indenture, Made this 28th day of June, 2010 A.D., Between
JOAN E. COMSTOCK, A SINGLE WOMAN

(R) of the County of Citrus, State of Florida, grantor, and
PETER TROEGER, A SINGLE MAN

whose address is: P.O. Box 1630, Homosassa FL 34447

of the County of Citrus, 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 Citrus State of Florida to wit:

Lot 20 and the North 1/2 of Lot 21, unrecorded Joe-Bea Estates,
being more particularly described as follows: Commence at the
Northwest corner of Block 37, Crystal Acres First Addition, as
recorded in Plat Book 2, page 153, Public Records of Citrus County,
Florida, thence South 1° 55 30 East along the West line of said
Crystal Acres First Addition, a distance of 543 feet to the Point of
Beginning, thence continue South 1° 55 30 East along said West line a
distance of 194.25 feet, thence South 88° 00 20 West 141.92 feet to a
point on the East right-of-way line of a 50 foot wide road, thence
North 1° 50 45 West along said East right-of-way line a distance of
194.25 feet, thence North 88° 00 22 East 141.65 feet to the point of
beginning.

Subject to current taxes, easements and restrictions of record.

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:

[Signature]
Printed Name: Dawn Wright
Witness

[Signature] (Seal)
JOAN E. COMSTOCK
P.O. Address: 5185 S. Alligator Place, Floral City, FL 34436

[Signature]
Printed Name: Amanda Rowthorn
Witness

STATE OF Florida
COUNTY OF Citrus

The foregoing instrument was acknowledged before me this
JOAN E. COMSTOCK, A SINGLE WOMAN

he is personally known to me or he has produced his



28th day of June, 2010 by

Driver's License
[Signature] as identification.
Printed Name: Amanda Rowthorn
Notary Public
My Commission Expires:

Septic System Re-Sale Inspection
 Authority: Chapter 42 – Citrus County Code

Date:	6/22/10
Buyer:	TROGER
Seller:	Comstock
Physical Address:	1625 S. Lookout Pt. Homosassa
Phone Number:	
Pumping Contractor:	Simply Septic

Septic Tank

Approximate Tank Volume:	900 Gallons
Material:	<input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other
Pumping Performed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Baffle and Tees Intact and Secure	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Outlet Filter	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Tank is Free of Structural Defects	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lid and Manholes Properly Fitted	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Dosing Tank

N/A

Approximate Tank Volume:	Gallons
Material:	<input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other
Pump is Functional and Performing	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Pump is Elevated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Check Valve	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Working Alarm	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Electrical Connections Secure	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Tank Protected From Surface Water Infiltration	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Drainfield

Drainfield Type	<input checked="" type="checkbox"/> Rock <input type="checkbox"/> Alt. Product <input type="checkbox"/> Other
Configuration	<input checked="" type="checkbox"/> Trench <input type="checkbox"/> Bed <input type="checkbox"/> Mound <input type="checkbox"/> Subsurface
Approximate Size	300+ Square Feet
Visible Signs of Seepage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Visible Signs of Previous Failure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Ponding of Sewage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Downspouts Directed Towards Drainfield	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

System Appears Functional (Signature) *A. J. Jalis*

This inspection is designed to assess the condition of a system at a particular moment in time. This inspection will identify obvious substandard systems, for example systems without drain fields. This inspection is not designed to determine precise code compliance, nor precise information to demonstrate that the system will adequately serve the use to be placed on it by this or any subsequent owner.

Patricia T.

A copy of this inspection must be provided to:
 Citrus County Environmental Health
 3650 W Sovereign Path, Suite 2
 Lecanto, FL 34461
 Fax: (352) 527-5564