

**SNEADS TOWN COUNCIL
REGULAR MEETING
JANUARY 9, 2024**

The Town Council of the Town of Sneads, Florida, met in a regular session at the Sneads Town Hall on Tuesday, January 9, 2024, at 6:00 p.m.

Mike Weeks called the meeting to order with the following present:

Mike Weeks, Tony Money,
Angela Locke and Donovan Weeks, Council Members
Daniel Cox, Attorney
Tyler Weeks, Police Chief
Sherri Griffin, City Clerk
Danielle Guy, Deputy Clerk

And the following were absent:

George Alexander, Councilman
Vacant, Town Manager

All stood for the Pledge of Allegiance.

Tony Money made a motion to approve the Consent Agenda as presented. Donovan Weeks seconded. All voted aye.

1. Minutes for **December** 2024
2. Financial Statements and Budget Review Summary
3. Pay Approved Bills

Agenda #4, JCSO Election Agreement. (See attached) Donovan Weeks made a motion to approve the agreement as presented. Angie Locke seconded. All voted aye.

Agenda # 5, Town Manager Position. Mike Weeks stated that we would like to have a workshop to discuss the position in further detail. All agreed to do so on Jan 17th @ 5pm.

Attorney Cox stated that he had spoken with Angie Locke and other members about the position. He suggested we extend the deadline. Tony Money made a motion to extend it to February 28th. Donovan Weeks seconded. All voted aye.

Mr Cox also presented an Ordinance that would change requirements for the Manager to live within 20 miles of the town limits. He said if everyone agreed with this change, we could read it and advertise. All agreed.

Ordinance #2024-01, entitled;

**AN ORDINANCE OF THE TOWN OF SNEADS, FLORIDA AMENDING THE
QUALIFICATIONS OF THE TOWN MANAGER TO REMOVE THE REQUIREMENT
OF THE RESIDENCY WITHIN THE TOWN REPEALING ANY ORDINANCE IN
CONFLICT; PROVIDING AN EFFECTIVE DATE.**

was presented and read. Angie Locke made a motion to approve pending publication. Tony Money seconded. All voted aye.

Regular Meeting
January 9, 2024
Page 2

Agenda #6, **Resolution #24-01**, to hold an election and elect members for Groups I and II, was presented for approval. Tony Money made a motion to approve Resolution #24-01 as presented. Donovan Weeks seconded. All voted aye.

Agenda #7, **Resolution #24-02**, Authorizing the Town Manager to sign documents and in the absence of the Town Manager signature authority transfers to Town Clerk. Tony Money made a motion to approve Resolution #24-02 as presented. Donovan Weeks seconded. All voted aye

Agenda # 8, Sneads Recreation Board. Angie Locke stated Spring Ball signups are going on and Ball Day is April 6th. There will be a work/ clean-up day at the ballpark, January 27th. Angie Locke asked the Councils thoughts on play equipment/bench swings for the recreation area. She stated these would be purchased with the grant funds from JC Department of Health, Covid Funds (See attached) They all agreed with her choices.

Agenda #9, Attorney Cox. He stated we would have the second reading of the mobile home ordinance at the February meeting.

Mike Weeks asked that Mr Kaminski come before the Council at that point to discuss the waiver he was requesting. (See attached) The address is 8083 Eugenia St, and the structure is a 16x48, shed converted into a tiny home. It was inspected by a certified home inspector and said to be approved as a tiny home at this point. After discussion, Tony Money made a motion to allow the waiver. Donovan Weeks seconded. All voted aye.


Agenda #10 Police & Fire. Chief Weeks presented the Police Departments monthly report. (See attached)

Agenda #11, Council Members. Mike Weeks asked about the ACI sewer increase and asked Mr Cox to check on it.

Agenda #12, Public Comments: None

Donovan Weeks made a motion to adjourn at 7:03 pm.

Respectfully Submitted,


Danielle Guy, Deputy Clerk

APPROVED:

MIKE WEEKS, COUNCIL PRESIDENT

**Regular Meeting
JANUARY 9, 2023**

Budget Summary

GENERAL FUND

DECEMBER- Revenues are 2.39% **below** budgeted amount. Expenditures are 6.91% **above** budgeted amount.

GAS TAX

DECEMBER- Gas Tax County is 21.31% **above** budgeted amount. Local Option Gas Tax is 5.41% **above** budgeted amount. Expenditures are 4.79% **below** budgeted amount.

SOLID WASTE

DECEMBER – Garbage revenues are slightly **above** budgeted amount. Expenditures are 8.69% **below** budgeted amount.

WATER AND SEWER

DECEMBER – Will update in February, 2024 meeting.

RECREATION FUND

DECEMBER- Will update in February, 2024 meeting.

ELECTION SERVICES AGREEMENT

This agreement entered into this _____ day of _____ 202____, between the **CITY of SNEADS** a Florida municipal corporation, hereinafter "CITY" and CAROL A. DUNAWAY, as Supervisor of Elections of JACKSON County, Florida, hereinafter "SUPERVISOR", witnesseth:

1. **SCOPE OF SERVICES.** The **SNEADS** City Election to be held April 09, 2024, in a manner which is in compliance with the Election Laws of the State of Florida and the City of **SNEADS**.

The Supervisor shall provide the following services:

- a. Advertise the Notice of Election, the Canvassing Board Schedule, Sample Ballot, Logic and Accuracy Testing, and the Post-Election audit.
- b. Coordinate the coding of all ballots with Election Systems and Software.
- c. Deliver, Set-Up, and Remove the Voter Check-In Devices (EViD), Digital Scan Equipment (DS200) for ballot tabulation and the Express Vote (ADA ballot marking device).
- d. Select, train, and pay all election workers needed for the election.
- e. The Supervisor of Elections shall serve on the Canvassing Board and oversee the Logic and Accuracy testing of the DS200 and Express Vote on a day selected by the SUPERVISOR.
- f. Provide technical support by phone or on-site, if needed, for the EViD, DS200, and Express Vote.
- g. Process all requests for Vote-By-Mail ballots; mail out, receive, and secure all Vote-By-Mail ballots.
- h. In coordination with all members of the Canvassing Board, the Supervisor or Elections shall conduct post-election audit.
- i. Physically and digitally maintain all election records in accordance with the rules governing election records maintenance.

The City of **SNEADS** agrees to provide the following services:

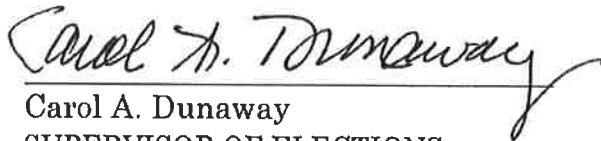
- a. Qualify all candidates according to the Election Code and the **SNEADS** Charter, to include advertisement for the qualifying period. Must provide a copy of the ad to the SOE office.
- b. Qualifying week should be held the last week of ^{Feb.}~~January~~ 2024 to ensure the coding of the ballot is completed timely, unless your charter states a specific date for qualifying.
- c. The Supervisor of Elections shall serve on the Canvassing Board and the city shall provide the names of two members of the Canvassing Board to the Supervisor on or before January 31, 2024.
- d. Agree to proof ballot within 24 hours of receiving the proof. If a proof is received during a holiday or weekend, agree to proof ballot within 24 hours of resuming normal business hours. Failing to proof the ballot in the time outlined above could result in additional fees related to the coding of the ballot.
- e. Educating their community that all Vote-By-Mail ballots must be returned to the Supervisor of Elections office prior to 7:00PM on Election Day and that Vote-By-Mail ballots cannot be returned to city hall. The ballots can be mailed or dropped off at the Supervisor of Elections office during normal business hours with the exception of Election Day in which the SOE office will be open until 7:00 pm.

2. COMPENSATION FOR SERVICES.

- a. The Supervisor shall be compensated for conducting the **SNEADS** City Election on April 09, 2024, in the amount of \$300 plus the following reimbursed expenses of which itemized invoices will be provided to the city clerk:
- b. All postage for Vote-By-Mail ballots.
- c. All expenses related to coding of the ballot by Election Systems and Software.
- d. All expenses for election workers.
- e. All expenses for truck rental for delivery of equipment. If the truck is used to deliver equipment to more than one town on the same day, your town will pay a pro rata share of the truck rental expense.

f. Within 10 days of the completion of the election, the City of **SNEADS** will be provided an itemized invoice of the expenses incurred by the Supervisor of Elections in order to conduct their municipal election.

TERMS. This Agreement shall become effective on the date of its approval and shall only be effective for the City of **SNEADS** to be held on April 09, 2024. Nothing herein shall be deemed to constitute an undertaking of any obligation or responsibility to any person, firm, or corporation not a party to this agreement (other than as would otherwise accrue under the law) to take any action or refrain from any action with respect to compliance with any other requirements of law. Nothing herein shall be deemed to waive any immunity from suit (in agreement, in tort, or otherwise) that might accrue in favor of the City or the Supervisor. The City or the Supervisor do not intend, by any provision hereof, to create any rights or benefits in favor of any person, firm, or corporation not a party to this agreement.



Carol A. Dunaway
SUPERVISOR OF ELECTIONS

CHAIRMAN
Board of City Commissioners

MAYOR
City of SNEADS

ATTESTED: _____
Clerk



CAROL A. DUNAWAY
SUPERVISOR OF ELECTIONS
JACKSON COUNTY, FLORIDA

December 7, 2023

City of Sneads

Email: danielle@sneadsfl.com; info@sneadsfl.com

Dear City Official,

Please find enclosed an Election Services Agreement for your upcoming 2024 Municipal Election. If your city wishes to use our services for your upcoming election, please review and sign the attached agreement and return it to our office no later than January 22, 2024.

Please contact me with any questions or concerns at 850-482-9652.

At your service,

Carol A. Dunaway

Ordinance No. 2024-01

AN ORDINANCE OF THE TOWN OF SNEADS, FLORIDA, AMENDING THE QUALIFICATIONS OF THE TOWN MANAGER TO REMOVE THE REQUIREMENT OF RESIDENCY WITHIN THE TOWN REPEALING ANY ORDINANCE IN CONFLICT; PROVIDING AN EFFECTIVE DATE.

WHEREAS, the Town Council of the Town of Sneads, Florida, has previously adopted an Ordinance providing the qualifications and requirements of employment of its Town Manager, and

WHEREAS, the Town Council of the Town of Sneads, Florida, wishes to modify the residency requirements applicable to the Town Manager.

NOW, THEREFORE, BE IT ORDAINED by the Town Council of the Town of Sneads, Florida, as follows:

Section 1. Town Manager Appointment, qualifications, removal:

(a) The Town Council shall appoint a Town Manager upon such terms and for such compensation as the Town council may set. The Town Manager shall be an officer of the Town and shall have such powers and shall perform such other duties as the Town council may direct. No council member shall receive such appointment during the term for which he/she shall have been elected or appointed, nor within one year the expiration of his term as such Councilman.

(b) The Town Manager shall be chosen by the Town Council solely on the basis of his/her executive and administrative qualifications with special reference to actual experience in or knowledge of, accepted practice in respect to the duties of his/her office. At the time of appointment, he/she need not to be a resident of the town or state, but the Town Manager's residence's distance from the town's limits shall not excuse unacceptable performance of the Town Manager's duties.

(c) The Town Council may remove the Town Manager by a majority vote of the Town Council at any regular or Special Session. In the event of such a removal of the Town Manager, the Town Council shall adopt a resolution setting forth the removal effective date thereof. Upon removal of the Town Manager, the Town Council shall cause the Town Manager to be paid any accrued compensation as of the effective date of removal plus a sum equal to one month's salary as of the date of such removal.

Section 2. Powers and duties: the Town Manager shall be the chief executive officer and the head of the administrative branch of the town government. He/she shall be responsible to the Town Council for the proper administration of all affairs of the town and to that end, he/she shall have the power and shall be required to:

(a) Appoint and when necessary for the good of the Town, remove all employees of the Town except the Town Clerk, Town Attorney, Fire Chief and Police Chief. Appointment of or removal of the Town Clerk, Town Attorney, Fire Chief and Police Chief must be approved by a majority vote of the Town council.

(b) Prepare the budget annually and submit it to the Town Council and be responsible for its administration after adoption.

(c) Prepare and submit to the Town council as of the end of the fiscal year a complete report on the finances and administrative activities of the Town for the preceding year.

(d) Keep the Town council advised of the financial condition and future needs of the Town and make such recommendations as may seem to him/her desirable.

(e) Submit annually to the Town a list of recommended capital improvements which in the opinion of the manager are necessary or desirable to be constructed during the forthcoming one-year period. Such a list is to be arranged in order of preference, with recommendations as to which projects shall be constructed.

(f) Perform such other duties as may be prescribed by the charter or required of him/her by the council, not inconsistent with the charter.

Section 3. Absence of Town Manager: To perform his/her duties during his/her temporary absence or disability, the town manager may designate a qualified administrative officer of the Town to perform the duties of the manager until he/she return.

Section 4. Town Council not to interfere in appointments or removals: Neither the council nor any of its members shall direct or request the appointment of any person to, or their removal from office by the Town Manager or by any of his/her subordinates, or in any manner take part in the appointment or removal of officers and employees in the administrative service of the Town except as provided in other sections of this ordinance. Except for the purpose of inquiry, the Council nor any member thereof shall give orders to any subordinates of the Town Manager, either publicly or privately without the knowledge of the Town Manager.

Section 5. This Ordinance shall become effective upon its adoption by the Town council.

PRESENTED, READ IN FULL, AND TABLED PENDING PUBLICATION ON

Jan 9, 2024.

PRESENTED, READ IN FULL AND PASSED ON THIS _____ DAY OF

_____, 2024.

President, Town Council

SEAL

Town Clerk

**A RESOLUTION CALLING FOR AN ELECTION
FOR THE TOWN OF SNEADS, FLORIDA**

WHEREAS, it is necessary that an Election be called to elect **two** Council members for a regular term of two years for the Town of Sneads, Florida, City Council.

THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF SNEADS, FLORIDA:

That an Election for the Town of Sneads, Florida, for the election of **two** Council members for a regular term of two years is hereby called to be held on **Tuesday, April 9, 2024**, at the City Hall in the Town of Sneads, Florida, and

That each person qualifying for the offices mentioned above shall be qualified residents of the Town of Sneads, Florida, and shall be duly registered in the Registration Books for voters in the Town of Sneads. That the ballot shall be so prepared for said election that the names of the candidates for the **two** Council members to be elected for the full term of two years shall be placed on the ballot or voting machine in **Group I and II**, each candidate for the position of Council member shall qualify in one of such groups.

The designation "Council member" shall be printed on the ballot over each numbered group and each numbered group shall be clearly separated from the next numbered group so as to emphasize the necessity for voting for one candidate in each of the numbered groups.

An election shall be held on **April 9, 2024**. If a candidate for a Council Group receives a majority of the votes cast for all candidates for election for such office or if he/she has no opposition, he/she shall be declared elected for such office.

That each person who desires his/her name be placed on the ballot to be a candidate for the offices mentioned shall file his/her application in writing for his/her name to be placed upon said ballot with the City Clerk of the Town of Sneads, and shall, at the time of filing such application, pay the City Clerk an amount equal to 5.0% of the annual expense account of office being sought. All such fees paid shall be placed in the General Fund Account of the Town of Sneads, from which the expenses of holding the Town elections are paid. Filing of such applications shall begin at 7:00 a.m. on Monday, **February 19, 2024**, and shall end at 12:00 noon on Friday, **February 23, 2024**.

That any person who possesses the qualification to become a qualified elector or who is a qualified elector for the State and County elections in the State of Florida and in the County of Jackson, and who is a bona fide resident of the Town of Sneads, Florida, and who shall be duly registered in the Registration Book for voters in the Town of Sneads, Florida, shall be qualified to vote in said election.

We hereby appointed the **Jackson County Supervisor of Elections Office** over the Sneads Town election herein called. The polls shall open at 7:00 a.m. and close at 7:00 p.m.

ADOPTED, by the Town Council of the Town of Sneads, Florida this 9th day of **January 2024**.

MIKE WEEKS -PRESIDENT, TOWN COUNCIL

ATTEST:

CITY CLERK

RESOLUTION NO. 24-02

**A RESOLUTION OF THE TOWN COUNCIL, TOWN OF SNEADS, FLORIDA,
AUTHORIZING THE TOWN MANAGER TO SIGN DOCUMENTS RELATED TO
ITEMS THAT HAVE BEEN APPROVED BY THE TOWN COUNCIL FOR THE
ROUTINE OPERATION OF THE TOWN'S BUSINESS**

WHEREAS the Town of Sneads, by Ordinance, created the position of Town Manager for the efficient and expeditious administration of the Town's affairs; and

WHEREAS, the Town Manager is the chief executive officer of the Town government, and as such is responsible to the Town Council for the proper administration of all business affairs of the Town.

THEREFORE, BE IT RESOLVED, that the Town Council authorizes the Town Manager to sign letters of intent, letters of inquiry, notices, permit documents, bid documents and contract documents related to items that have been approved by the Town Council for the routine operation of the Town's business. Be it further resolved that in the absence of the Town Manager this signature authority shall transfer to the Town Clerk.

APPROVED, this day of **January 9, 2024**, by the Town Council of the Town of Sneads, Florida.

TOWN OF SNEADS

Mike Weeks, Town Council President

ATTEST

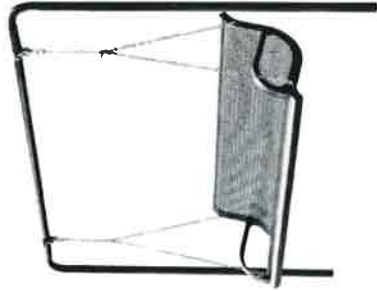
Sherri Griffin
Town Clerk

Modern Style Park Bench Swing

Manufacturer:
Webcoast

SKU: B4WBMODSWING

\$1,089.00 ~~MSRP \$1,399.00~~
You Save 15% (\$310.00)



Size *

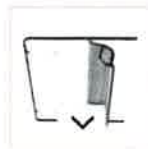
4 feet

ADD TO QUOTE

Qty 1

Highlights:

- 4-foot and 6-foot length options
- Mix and match frame and seat colors
- Fun and inviting piece to add to your space
- Comes with uncoated galvanized swing chain



WEIGHT
214.00 LBS



AVAILABILITY
19-28 weeks



SHIP FREIGHT
This is packaged too large for UPS, FedEx, or USPS. A freight carrier is required for items of this size. Freight charges will be added to the total price. Contact us for details.



PDF FLYER
Download the Modern Style Park Bench Swing PDF Flyer for a printable 24" x 36" version.



PRODUCT WARRANTY
See Product Warranty.



COLOR OPTIONS
View color options.



SHARE

FREQUENTLY BOUGHT TOGETHER

ADA Accessible UltraLeisure Rectangular Portable Table

Manufacturer: WOODCOCK

SKU: TOUCHDCP

\$1,048.00 MSRP: \$1,452.00
You Save: 15% (\$404.00)



Size:

6 feet, ADA Single Overhang

Qty: 1

ADD TO QUOTE

Highlights:

- Single overhang has 24 inches of clearance
- Offers convenience for wheelchair seating
- Both lengths provide copious space for food
- Tough powder coat painted galvanized steel frame



WEIGHT: 205.00 LBS

AVAILABILITY: 19-25 weeks

SHIP FREIGHT: This is packaged too large for UPS, FedEx, or USPS. A freight trailer is required. We can arrange to ship by rail or by truck. Contact us for details.

PDF FLYER: Download the ADA Accessible UltraLeisure Rectangular Portable Table PDF Flyer. Portable table image.

PRODUCT WARRANTY: See Product Warranty

COLOR OPTIONS: View color options

SHARE

FRECUENTLY ROLIGHT TOGETHER

Outdoor Candy Caterpillar Crawl Tunnel for Preschool Kids

Candy Caterpillar Toddler Play Tunnel

Manufacturer: ECK-4 Kids
SKU: ECR12511

\$318.00 MSRP: \$397.00
You Save 20% (3%)

ADD TO QUOTE



Click here to Watch Now!



WEIGHT 162 lbs

AVAILABILITY 1-2 weeks

SHIP PARCEL This product is usually packaged for UPS FedEx or USPS. Contact us for specific details.

PDF FLYER Download the PDF flyer for Candy Caterpillar Toddler Play Tunnel. PDF is VEG for a printable 10th version.

PRODUCT WARRANTY View Product Warranty

SHARE

FREQUENTLY BOUGHT TOGETHER

Bouncing Betsy Fun Bounce

Manufacturer: **SKU: PFB005**
Playground Equipment Out-Com

COMPLIES WITH:
ASTM F1487 17
CPSC PUB #325

IN STOCK

\$619.00 MSRP: \$650.00
You Save: \$31.00 (5%)

ADD TO QUOTE

QTY

Age Group: 2 to 5 years

Footprint: 2' x 4' 6"

Use Zone: 14' 0" x 16' 6"

Highlights:

- Approachable for young or first time riders.
- Foot rests molded into both sides for two riders.
- Durable rotationally molded plastic body with adorable eyes.
- Traditional harembar style grip at the front and a circular grip at the rear.

WEIGHT: 20,001.85

AVAILABILITY: 179 items

SHIP FREIGHT: This is packaged 600 large full UPS, FedEx, or USPS. A freight trailer is up to 5.5 hours long. Unload by hand with 2-3 people. (contact us for details)

PDF FLYER: Download the Bouncing Betsy Fun Bounce PDF Flyer for a printable to go version.

PRODUCT WARRANTY: View Product Warranty

COLOR OPTIONS: View Color Options

SHARE:



IN STOCK



Harry Hopper Fun Bounce

Manufacturer: Playground Equipment Dot-com
SKU: PFB006

\$619.00 ~~MSRP: \$812.00~~
You Save 23% (\$193.00)

Qty 1 **ADD TO QUOTE**

- Age Group:** 2 to 12 years
- Footprint:** 1' 8" x 4' 3"
- Use Zone:** 13' 8" x 16' 3"
- Highlights:**
- Ideal unit that evokes imaginative play
 - Galvanized steel spring keeps the fun moving
 - Cozy seat with easily reached bars for optimum comfort
 - Rotationally molded plastic designed to look like a grasshopper

COMPLIES WITH:
ASTM F1487-17
CPSC PUB #325

WEIGHT
70.00 LBS

AVAILABILITY
1-2 weeks

SHIP FREIGHT
This is packaged too large for UPS, FedEx, or USPS, a freight trailer is up to 5.5 feet long. Unload by hand with 2 people. Contact us for details.

PDF FLYER
Download the Harry Hopper Fun Bounce PDF Flyer for a printable to go version.

PRODUCT WARRANTY
View Product Warranty

COLOR OPTIONS
View Color Options

SHARE

QUOTE CART
EMPTY

CALL NOW: 1-877-826-2776 Live Chat Online Contact Us

Work

Encourage Group Play for Toddler

www.aaa-state-of-play.com

Mon, Fri: 8:00am - 6:00pm EST

Home

Playground Equipment

Independent Play

Spinners

Free Play Sit-N-Spin

Request a Catalog

Quick Ship

AAA STATE OF PLAY

CALL NOW! 1-877-826-2776


Live Chat Online

Contact Us

QUOTE CART

EMPTY

IN STOCK



Free Play Sit-N-Spin

Manufacturer: Playground Equipment Out-Form

SKU: PFS019PBKD

\$561.00

MSRP: \$849.00

You Save 33% (\$288.00)

Seat Color: Pacific Blue

Mount Color: Black Red

Qty: 1

ADD TO QUOTE

COMPLIES WITH:

ASTM F1487 17

CPSC PUB #325

WEIGHT

63.00 LBS

AVAILABILITY

1-2 weeks

SHIP PARCEL

This product is usually packaged for UPS. FedEx, or USPS. Contact us for specific details.

PDF FLYER

Download our Free Play Sit-N-Spin Flyer. It is a printable to go version.

PRODUCT WARRANTY

View Product Warranty


COLOR OPTIONS


View color options


SHARE

Highlights:

- Climb into it from any direction.
- Small footprint that needs a limited amount of space.







2:50 PM

1/8/2024

Pebble Path

Manufacturer:
[Playground Equipment Direct.com](#)

SKU: PPS014P

\$1,391.00 MSRP: \$2,499.00
You Save 43% (\$1,108.00)

Color: Pacific Blue - Primary

Qty:

COMPLIES WITH:
ASTM F1487 17
CPSC PUB #325

WEIGHT:
171.00 LBS

AVAILABILITY:
In Stock

SHIP FREIGHT:
This is packaged too large for UPS, FedEx or USPS. A freight broker is used to ship long. Unload by hand with 2 people. Contact us for details.

PDF FLYER:
[Download the Pebble Path PDF Flyer for a printable reference.](#)

PRODUCT WARRANTY:
[View Product Warranty](#)

COLOR OPTIONS:
[View Color Options](#)

SHARE:

Age Group: 2 to 12 years

Footprint: 7' diameter, 16" or less install height

Use Zone: 13' 0" x 14' 0"

Highlights:

- Comes with 12 pebbles
- Great way for children to engage in social play
- Color palettes are available that spice up any space
- Leg and core strength will progress through continuous play

danielle@sneadsfl.com

From: johnridingharley <johnridingharley@aol.com>
Sent: Friday, December 15, 2023 7:39 AM
To: danielle@sneadsfl.com
Subject: 8083 Eugenia St. Sneads 32460

Danielle Guy / Deputy Clerk

I am requesting a Waiver to allow a Tiny House that is located at:
8083 Eugenia St.
Sneads, Florida 32460

It was previously occupied and I would like to occupy it and make it a Beautiful home for myself. On 12-9-23, Cody Baker of CBE Inspections will be doing a Full House and Property inspection of the above mentioned property and forward a copy of that Report to you.

Kindly contact me anytime if you need anything further.

John Kaminski
(330) 283-8171
Sent from my Galaxy



Thomas "Cody" Baker
Licensed Home Inspector
CBE Inspections

850.326.5217
office@cbeinspections.com
P.O. Box 306 Chipley, FL 32428

To whom it may concern,

On Tuesday, December 19, a site visit was conducted at 8083 Eugenia St. to determine whether a "tiny home" meets standards for homes set by the Town of Sneads, and if the home is safe and habitable.

This structure is a single wide sized 16x48 built in 2019, with a bedroom, a bathroom, living room, kitchen and laundry room. The foundation is masonry/concrete piers, and the structure is securely anchored with typical mobile home straps and anchors that are lag screwed to the main beams in the proper installation fashion. The floor framing is wood joist decked, as well as wood subflooring. The exterior walls are wood framed with exterior wood siding.

The home has a metal roof covering which is in good, working condition, a properly installed 200 amp Square D electrical panel, and PEX piping with no apparent supply leaks present. All windows, doors and locks are operable. The home currently uses a space heater that is sufficiently sized to heat the home as required by HUD. Taking the current condition of this home into consideration, it is a safe and livable structure. These structures are now generally engineered to specifications for Wind Zone 2.

This home appears to be structurally sound, and meets criteria listed in Ordinance No. 2019-03, and the "mobile home checklist" provided by the Town of Sneads.

If you have any questions, please contact us via any of the methods listed above.

Sincerely,

A handwritten signature in black ink, appearing to be 'Cody Baker', written in a cursive style.

License # HI11703

INSPECTION BY



I N S P E C T I O N S

| | |
|----------------------------|---------------------------------|
| INSPECTION TYPE(S): | Four Point Inspection |
| CUSTOMER: | John Kaminski |
| DATE: | 12/19/2023 |
| ADDRESS: | 8083 Eugenia St Sneads Fl 32460 |
| ADDITIONAL NOTES: | |
| | |
| | |
| | |
| | |



4-Point Inspection Form

Insured/Applicant Name: John Kaminski Application / Policy #: _____

Address Inspected: 8083 Eugenia St Sneads Fl 32460

Actual Year Built: 2019 Date Inspected: 12/19/2023

Minimum Photo Requirements:

- ☒ Dwelling: Each side
- ☒ Roof: Each slope
- ☒ Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
- ☒ Main electrical service panel with interior door label
- ☒ Electrical box with panel off
- ☒ All hazards or deficiencies noted in this report

A Florida-licensed inspector must complete, sign and date this form.

Be advised that Underwriting will rely on the information in this sample form, or a similar form, that is obtained from the Florida licensed professional of your choice. This information only is used to determine insurability and is not a warranty or assurance of the suitability, fitness or longevity of any of the systems inspected.

Electrical System

Separate documentation of any aluminum wiring remediation must be provided and certified by a licensed electrician.

Main Panel

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 200

Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)

Second Panel

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 200

Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)

Indicate presence of any of the following:

- ☐ Cloth wiring
- ☐ Active knob and tube
- ☐ Branch circuit aluminum wiring (If present, describe the usage of all aluminum wiring):
* If single strand (aluminum branch) wiring, provide details of all remediation. *Separate documentation of all work must be provided.*
- ☐ Connections repaired via COPALUM crimp
- ☐ Connections repaired via AlumiConn

Hazards Present

- ☐ Blowing fuses
- ☐ Tripping breakers
- ☐ Empty sockets
- ☐ Loose wiring
- ☐ Improper grounding
- ☐ Corrosion
- ☐ Over fusing
- ☐ Double taps
- ☐ Exposed wiring
- ☐ Unsafe wiring
- ☐ Improper breaker size
- ☐ Scorching
- ☐ Other (explain)

General condition of the electrical system: ☒ Satisfactory ☐ Unsatisfactory (explain)

Supplemental information

Main Panel

Panel age: 3-5yr est

Year last updated: _____

Brand/Model: GE

Second Panel

Panel age: 3-5yr est

Year last updated: _____

Brand/Model: Square D

Wiring Type

- ☒ Copper
- ☐ MN, BX or Conduit



4-Point Inspection Form

HVAC System

Central AC: ☒ Yes ☐ No

Central heat: ☒ Yes ☐ No

If not central heat, indicate **primary** heat source and fuel type: _____

Are the heating, ventilation and air conditioning systems in good working order? ☐ Yes ☒ No (explain)

Date of last HVAC servicing/inspection: _____

Hazards Present

Wood-burning stove or central gas fireplace *not* professionally installed? ☐ Yes ☒ No

Space heater used as primary heat source? ☐ Yes ☒ No

Is the source portable? ☐ Yes ☒ No

Does the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area?
☐ Yes ☒ No

Supplemental Information

Age of system: 3yrs

Year last updated: 2020

(Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)

Plumbing System

Is there a temperature pressure relief valve on the water heater? ☒ Yes ☐ No

Is there any indication of an active leak? ☐ Yes ☒ No

Is there any indication of a prior leak? ☐ Yes ☒ No

Water heater location: utility/2019

General condition of the following plumbing fixtures and connections to appliances:

| | Satisfactory | Unsatisfactory | N/A | | Satisfactory | Unsatisfactory | N/A |
|-----------------|-------------------------------------|--------------------------|--------------------------|---------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| Dishwasher | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilets | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Refrigerator | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sinks | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Washing machine | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sump pump | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Water heater | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Main shut off valve | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Showers/Tubs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All other visible | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.).

Active leak at kitchen sink, and beneath bathroom sink drain plumbing at exterior.

Supplemental Information

Age of Piping System:

XX Original to home

_____ Completely re-piped

_____ Partially re-piped

(Provide year and extent of renovation in the comments below)

Type of pipes (check all that apply)

☐ Copper

☐ PVC/CPVC

☐ Galvanized

☒ PEX

☐ Polybutylene

☐ Other (specify)



4-Point Inspection Form

Roof (With photos of each roof slope, this section can take the place of the *Roof Inspection Form*.)

Predominant Roof

Covering material: Metal

Roof age (years): 4yrs

Remaining useful life (years): 12-15yr est

Date of last roofing permit: _____

Date of last update: _____

If updated (check one):

☐ Full replacement

☐ Partial replacement

% of replacement: _____

Overall condition:

☒ Satisfactory

☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

☐ Cracking

☐ Cupping/curling

☐ Excessive granule loss

☐ Exposed asphalt

☐ Exposed felt

☐ Missing/loose/cracked tabs or tiles

☐ Soft spots in decking

☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary Roof

Covering material: _____

Roof age (years): _____

Remaining useful life (years): _____

Date of last roofing permit: _____

Date of last update: _____

If updated (check one):

☐ Full replacement

☐ Partial replacement

% of replacement: _____

Overall condition:

☐ Satisfactory

☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

☐ Cracking

☐ Cupping/curling

☐ Excessive granule loss

☐ Exposed asphalt

☐ Exposed felt

☐ Missing/loose/cracked tabs or tiles

☐ Soft spots in decking

☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☐ No

Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

Additional Comments/Observations (use additional pages if needed):

All 4-Point Inspection Forms must be completed and signed by a verifiable Florida-licensed inspector.
I certify that the above statements are true and correct.

Inspector Signature

Licensed Home Inspector

HI 11703

12/19/2023

Title

License Number

Date

CBE Inspections

Home Inspector

850-326-5217

Company Name

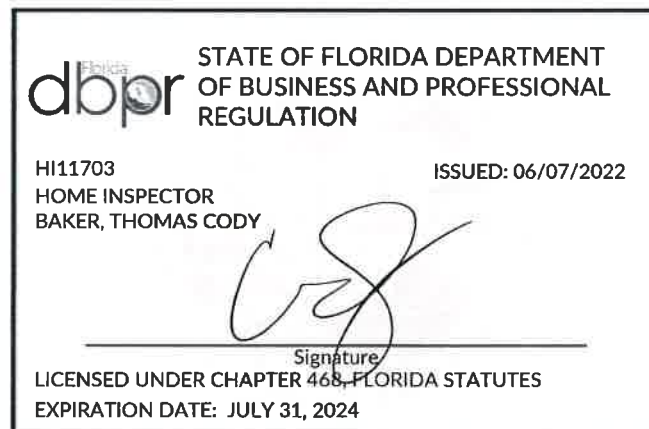
License Type

Work Phone

This inspection report was prepared by Licensed Home Inspector, Cody Baker of Cody Baker Enterprises, LLC, after an on-site home inspection was performed.

- Inspections are a “limited visual inspection” only.
- No warranties or guarantees are expressed or implied, written or spoken, within the inspection or report.
- Estimates are for insurance purposes only.
- During a Four Point Inspection, only the four main systems of the home are inspected. Those systems are inspected for “working order” and “working condition” AT THE TIME OF INSPECTION, and are reported herein as such.
- For questions or concerns about this report, please call 850.326.5217 or email office@cbeinspections.com.

Respectfully submitted,



Thank you for choosing





Front Elevation



Rear Elevation



Elevation



Roof 1



Roof 2



Roof 3



Roof 4



Roof 5



Roof 6



Main Electrical Panel



Main Panel Label



Other Mn Pnl



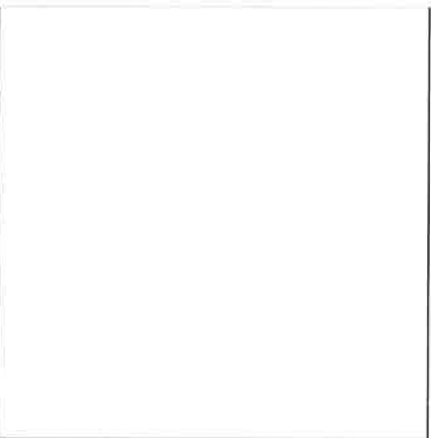
Subpanel



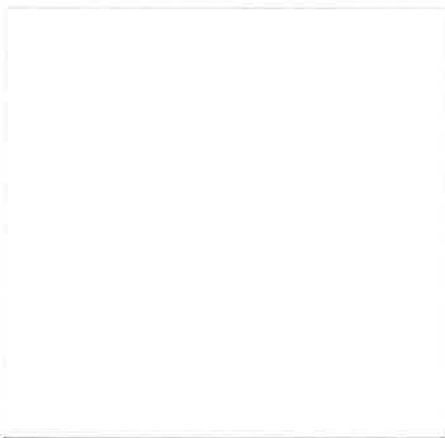
Subpanel Label



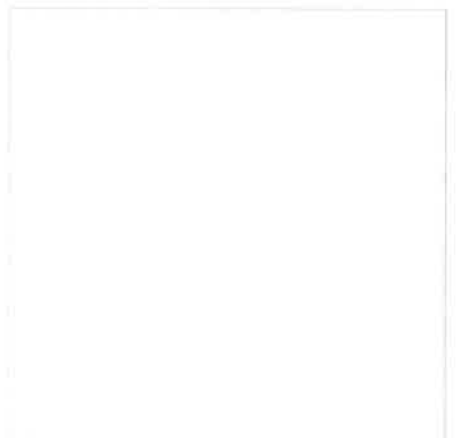
Other Sbpnl



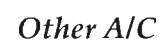
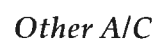
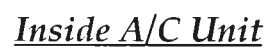
SubPanel 2



SubPanel 2 Label



N/A



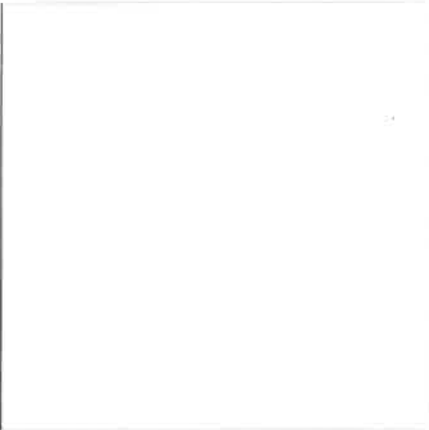


Water Heater 1



Water Heater 1 Label

N/A



N/A



Kitchen Plumbing



Bathroom Plumbing



N/A



Other Plumbing



Other Plumbing

END OF REPORT & PHOTOS

**INFORMATION CONTAINED WITHIN THIS REPORT
INTENDED FOR EXCLUSIVE USE OF THE CLIENT/
CUSTOMER ONLY.**

**IF YOU HAVE RECEIVED THIS REPORT IN ERROR,
PLEASE IMMEDIATELY DISCARD IT.**



INSPECTION BY



I N S P E C T I O N S

| | |
|----------------------------|---------------------------------|
| INSPECTION TYPE(S): | Roof Certification |
| CLIENT: | John Kaminski |
| DATE: | 12/19/2023 |
| ADDRESS: | 8083 Eugenia St Sneads FL 32460 |
| ADDITIONAL NOTES: | |
| | |
| | |
| | |
| | |



Roof (With photos of each roof slope, this section can take the place of the *Roof Inspection Form*.)

Predominant Roof

Covering material: Metal

Roof age (years): 4yrs

Remaining useful life (years): 12-15yr est

Date of last roofing permit: _____

Date of last update: _____

If updated (check one):

☐ Full replacement

☐ Partial replacement

% of replacement: _____

Overall condition:

☒ Satisfactory

☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

☐ Cracking

☐ Cupping/curling

☐ Excessive granule loss

☐ Exposed asphalt

☐ Exposed felt

☐ Missing/loose/cracked tabs or tiles

☐ Soft spots in decking

☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary Roof

Covering material: _____

Roof age (years): _____

Remaining useful life (years): _____

Date of last roofing permit: _____

Date of last update: _____

If updated (check one):

☐ Full replacement

☐ Partial replacement

% of replacement: _____

Overall condition:

☐ Satisfactory

☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

☐ Cracking

☐ Cupping/curling

☐ Excessive granule loss

☐ Exposed asphalt

☐ Exposed felt

☐ Missing/loose/cracked tabs or tiles

☐ Soft spots in decking

☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☐ No

Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

Additional Comments/Observations (use additional pages if needed):

All 4-Point Inspection Forms must be completed and signed by a verifiable Florida-licensed inspector.
I certify that the above statements are true and correct.

Inspector Signature

Licensed Home Inspector

HI 11703

12/19/2023

Title

License Number

Date

CBE Inspections

Home Inspector

850-326-5217

Company Name

License Type

Work Phone



Roof Certification Form

APPLICANT/INSURED NAME: John Kaminski APPLICATION/POLICY #: _____
ADDRESS INSPECTED: 8083 Eugenia St Sneads FL 32460
DATE OF INSPECTION: 12/19/2023

(Note: This form **does not** verify loss mitigation features. Use Uniform Mitigation Verification Form, OIR-B1-1802.)

Certification Information

Roof Covering: Metal Approximate remaining useful life of the roof: 12-15yr est

Age of roof (in years): 4yrs Date last updated? _____

What, if any, updates were completed? ☐ Full Replacement ☐ Partial Replacement

Are there any visible signs of damage/deterioration (such as curling/lifted/loose/missing shingles or tiles, sagging or uneven roof deck, etc.)? ☐ Yes ☒ No. If yes, explain _____

Are there any visible signs of leaks? ☐ Yes ☒ No. If yes, explain _____

Two photos representing the roof's condition are required to be submitted with this form.

Florida Fraud Statement

Any person who knowingly and with the intent to injure, defraud, or deceive any insurer, files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Thomas Cody Baker

850-326-5217

Name of Licensed Home Inspector (printed)

Telephone Number

Signature of Licensed Home Inspector

HI 11703

License Number

12/19/2023

Date



Front Elevation



Rear Elevation



Elevation



Roof 1



Roof 2



Roof 3



Roof 4



Roof 5



Roof 6

This inspection report was prepared by Licensed Home Inspector, Cody Baker of Cody Baker Enterprises, LLC, after an on-site home inspection was performed.

- Inspections are a “limited visual inspection” only.
- No warranties or guarantees are expressed or implied, written or spoken, within the inspection or report.
- Estimates are for insurance purposes only.
- During a Four Point Inspection, only the four main systems of the home are inspected. Those systems are inspected for “working order” and “working condition” AT THE TIME OF INSPECTION, and are reported herein as such.
- For questions or concerns about this report, please call 850.326.5217 or email tcodybaker@yahoo.com.

Respectfully submitted,



A handwritten signature in black ink, appearing to be "Cody Baker", written over a light blue grid background.

Thank you for choosing



END OF REPORT & PHOTOS

**INFORMATION CONTAINED WITHIN THIS REPORT
INTENDED FOR EXCLUSIVE USE OF THE CLIENT/
CUSTOMER ONLY.**

**IF YOU HAVE RECEIVED THIS REPORT IN ERROR,
PLEASE IMMEDIATELY DISCARD IT.**





Sneads Police Department

CONTACT

Chief Tyler Weeks
Phone: (850) 593-6403
Fax: (850) 593-6339

Monthly Report 12/12-1/9

- Traffic Stops-30
- Arrest-5
- Animal Complaints-2
- Traffic Crash-3
- Juvenile-1
- Drug Overdose-2
- Assist Other Agency-16
- Baker Act-2

1. On 1/5/24 Officers were involved in a high-speed pursuit which started in Sneads and ended near Greenwood. Officers were finally able to get the suspect stopped when he wrecked his vehicle. During the pursuit the suspect Elijah Johnson attempted numerous times to wreck the pursuing Officers and put several other motorists in harm's way by forcefully running them off the

roadway. Once the suspect was stopped, he exited the vehicle in an aggressive manner and charged toward the officers, punching one officer in the face before fleeing on foot. After a lengthy foot pursuit, the Officers were able to catch up to the suspect and attempted to detain him. While trying to detain Johnson he continued to resist arrest while reaching for his waistband and pocket. Once Officers were able to detain Johnson, they discovered that he had a knife in his pocket that he was trying to reach for to cause harm to Officers. Johnson was eventually placed under arrest and transported by ambulance to Jackson Hospital with minor injuries. Another Officer also went to the hospital and treated for minor injuries. Once Johnson was medically cleared, he was transported to the Jackson County Correctional Facility where he is being held without bond due to an Active Arrest Warrant for VOP. Johnson was also charged with multiple Felony charges in reference to this incident. I would like to thank the deputies with the Jackson County Sheriffs Office for their assistance in this arrest.

2. Early this morning a severe storm moved through our area causing major damage in the county. I activated an emergency plan and had extra patrol on duty during the storm. Once the storm was clear, myself and other officers made our way to Marianna and other areas in the county to provide aid and assistance where needed. To my knowledge at this time Sneads did not receive any major damage and no injuries were reported in town. Please keep those affected by the storm in your thoughts and prayers.