

Remodel Application #73317

Wednesday, September 17, 2025 8:13 AM



Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT: Jonte Hawkins

PHONE: (727) 232-4941

ADDRESS: 1720 NW 4th Ave # 100 Ocala, FL 34475

OWNER: MARSHALL THOMAS S, MARSHALL DIANE M

PHONE: (386) 466-2577

ADDRESS: 758 SW MIRACLE CT LAKE CITY, FL 32024

PARCEL ID: 06-4S-16-02787-001

SUBDIVISION:

LOT: _____ **BLOCK:** _____ **PHASE:** _____ **UNIT:** _____ **ACRES:** 8.26

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
JONTE C HAWKINS	General	CBC1265182	WEST SHORE HOME, LLC

JOB DETAILS

Description of the work being performed:	PPI - Replace 16 windows size for size
Total Estimated Cost	14860
Commercial or Residential?	Residential
Type of Structure	House
Heated Area (Sqft)	1
Total Area (Sqft)	1
If remodel of damage, what was the cause?	N/A
Site Plan Setbacks Front	0
Site Plan Setback Side 1	0
Site Plan Setback Side 2	0
Site Plan Setbacks Rear	0
Existing Dwelling Units	
Septic#	
Power Company Used:	
Service Amps	0
Current Use/Occupancy of building:	SFR
Is this changing?	
If Yes, Explain, Proposed Use/Occupancy	
Is the building Fire Sprinkled?	
Are blue prints included?	
Any driveway changes?	No
Please explain any Ingress/Egress changes:	
Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)	

Review Notes: