Corbetts Liability & Licnee

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 20 April 2012 Building Official T.C. 4-17-12

AP# 1204-14 Date Received 4-9-12 By LH Permit # 30131

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Replacing MH already removed from property

FEMA Map# N/A Elevation N/A Finished Floor Unknown River N/A In Floodway N/A

☑ Site Plan with Setbacks Shown ☑ EH # 12-0233-N ☐ EH Release ☐ Well letter ☑ Existing well

☑ Recorded Deed or Affidavit from land owner (Affidavit from 2nd Owner) ☑ Installer Authorization N/A State Road Access ☑ 911 Sheet Applied

N/A Parent Parcel # ☐ STUP-MH N/A FW Comp. letter ☑ VF Form

IMPACT FEES: EMS Fire Corr ☐ Out County ☑ In County

Road/Code School = TOTAL Impact Fees Suspended March 2009

Ck# 115 375.00

Property ID # 16-6S-30-04001-115 Subdivision San Tucknee Estates Lot 15

- New Mobile Home ____ Used Mobile Home ✓ MH Size 28x66 Year 1997
- Applicant Donna Nestor Phone # 386-362-8322
- Address 484 SW San Tucknee Fort White FL 32038
- * Name of Property Owner Virgle L. Eggleton Phone# 352-318-6902
- ✓ 911 Address 484 San Tucknee Fort White FL 32038
- Circle the correct power company - FL Power & Light - (Clay Electric)
  (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Virgle L. Eggleton & Donna Nestor Phone # 386-362-8322
  Address 484 SW San Tucknee Fort White FL 32038
- Relationship to Property Owner Fiance / Self
- Current Number of Dwellings on Property ____
- Lot Size ____ Total Acreage 10.01
- Do you : Have (Existing Drive) (Currently using) or (Private Drive) (Blue Road Sign) per-flor * or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Driving Directions to the Property 47 South Rt on 1S27 Lt on Utah Lt on Roberts Lt on Talley Ellinos Stephen San Tucknee all the way to End on Right.
- Name of Licensed Dealer/Installer Corbett's Mobile Home Center Phone # 386 364 1340
- Installers Address 1126 Howard St E Live Oak FL 32064
- License Number DIH 1015386/1 Installation Decal # 2338

Left a message 4-20-12 for Wendy

spoke to Donna 4-20-12

Spoke to Wendy 4-26-12 Wendy at Corbetts

fax 386-364-5747

spoke to Wendy 5-2-12

14 & 15 Pumped out septic on 4-2-12

Columbia County Property Appraiser

DB Last Updated: 3/12/2012

2011 Tax Year

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print

Parcel: 30-6S-16-04001-115

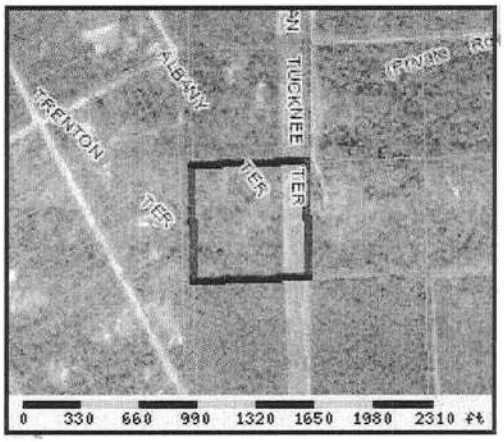
<< Next Lower Parcel | Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	HAWORTH DEBBIE &		
Mailing Address	EGGLETON VIRGLE 1050 SWAYING OATS DR YORK, SC 29745		
Site Address	484 SW SAN TUCKNEE TER		
Use Desc. (code)	SINGLE FAM (000100)		
Tax District	3 (County)	**Neighborhood**	30616
Land Area	10.010 ACRES	**Market Area**	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		

BEG SW COR OF SEC, RUN N 664.22 FT, E 657.29 FT, S 662.71 FT, W 657.31 FT TO POB. (AKA LOT 15 SANTUCKNEE ESTATES S/D UNREC) ORB 894-1120.



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	$46,793.00
Ag Land Value	cnt: (1)	$0.00
Building Value	cnt: (1)	$6,959.00
XFOB Value	cnt: (2)	$1,046.00
Total Appraised Value		$54,798.00
Just Value		$54,798.00
Class Value		$0.00
Assessed Value		$54,798.00
Exempt Value		$0.00
Total Taxable Value		Cnty: $54,798 Other: $54,798 | Schl: $54,798

2012 Working Values

NOTE:
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
10/2/1998	894/1120	WD	V	U	01	$23,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1996	BELOW AVG. (03)	240	396	$6,827.00
	Note: All S.F. calculations are based on exterior building dimensions.					

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0040	BARN,POLE	1996	$546.00	0000728.000	26 x 28 x 0	AP (070.00)
0255	MBL HOME S	2008	$500.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value

ALL M/H APPLICATIONS MUST HAVE A COMPLETED BUILDING PERMIT APPLICATION ATTACHED

PREMIT APPLICATION/MANUFACTURED HOME INSTALLATION

Applicant Donna Nestor

Address 484 sw San Tucknee
Fort White FL 32038

Permit # _____

Owner Name Virgle Eggleton

Address 484 SW SanTucknee
ft White FL 32038

Name of Licensed Dealer/1nstaller Corbett's Mobile Home Center

License Number OIH1015386/1 Installation Decal # 2338

Manufacturers Name Liberty

Roof Zone _____ Wind Zone II

Number of Sections 2 Width 28 Length 66 Year 1997 Serial # 10L25811X 10L25811U

Installation Standard Used (Check One)

MANUFACTURERS MANUAL _____ 15C-1 ✓

SITE PREPARATION :

Debris and Organic Removal _____ Compacted Fill _____

Water Drainage: Natural ✓ Swale _____ Pad _____ Other _____

SUPPLY A FOUNDATION PLAN DRAWN TO SCALE

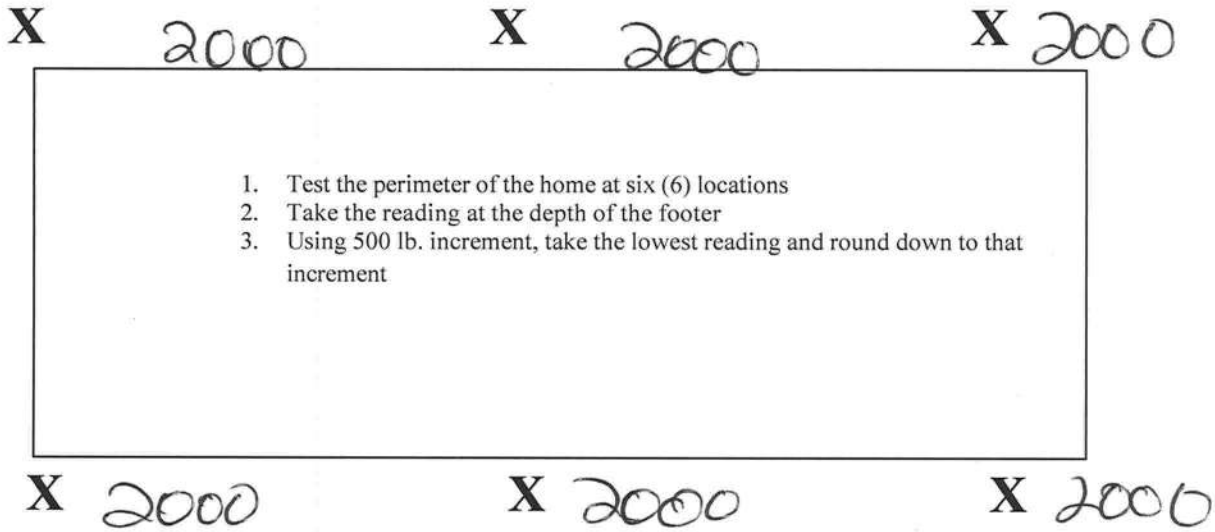
See Foundation Plan Example:

Anchors

1. Use manufactures set-up manual if available
2. If not available use the following;
   a. Frame ties shall be a maximum of 5' 4" apart
   b. Over the roof ties when required a 60ft. home or less shall have 3.61 ft. or above shall have four when required.

Minimum Permitting Requirements : A building permit by the local building authority must be obtained prior to the installation of any new or used mobile/manufactured home. The building permit application shall include, but not limited to a scale drawing of all pier block locations and foundation or footer dimensions and the soil load bearing capacity at the installation site. The soil load bearing capacity can be determined by a penetrometer test performed by a licensed installer, a general soil load bearing capacity declaration by a local building official or a test performed by a geotechnical testing company. When the soil load bearing capacity is not known, pier placement shall be based on soil load bearing capacity of 1,000 psf. (See example of pocket penetrometer test)

POCKET PENETROMETER TEST



X - Test locations around perimeter of home

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer Corbett's Mobile Home Center License # DIH000017

Address of home being installed 484 SW San Tucknee

Manufacturer Liberty Length x width 66 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.

Installer's initials RC

New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

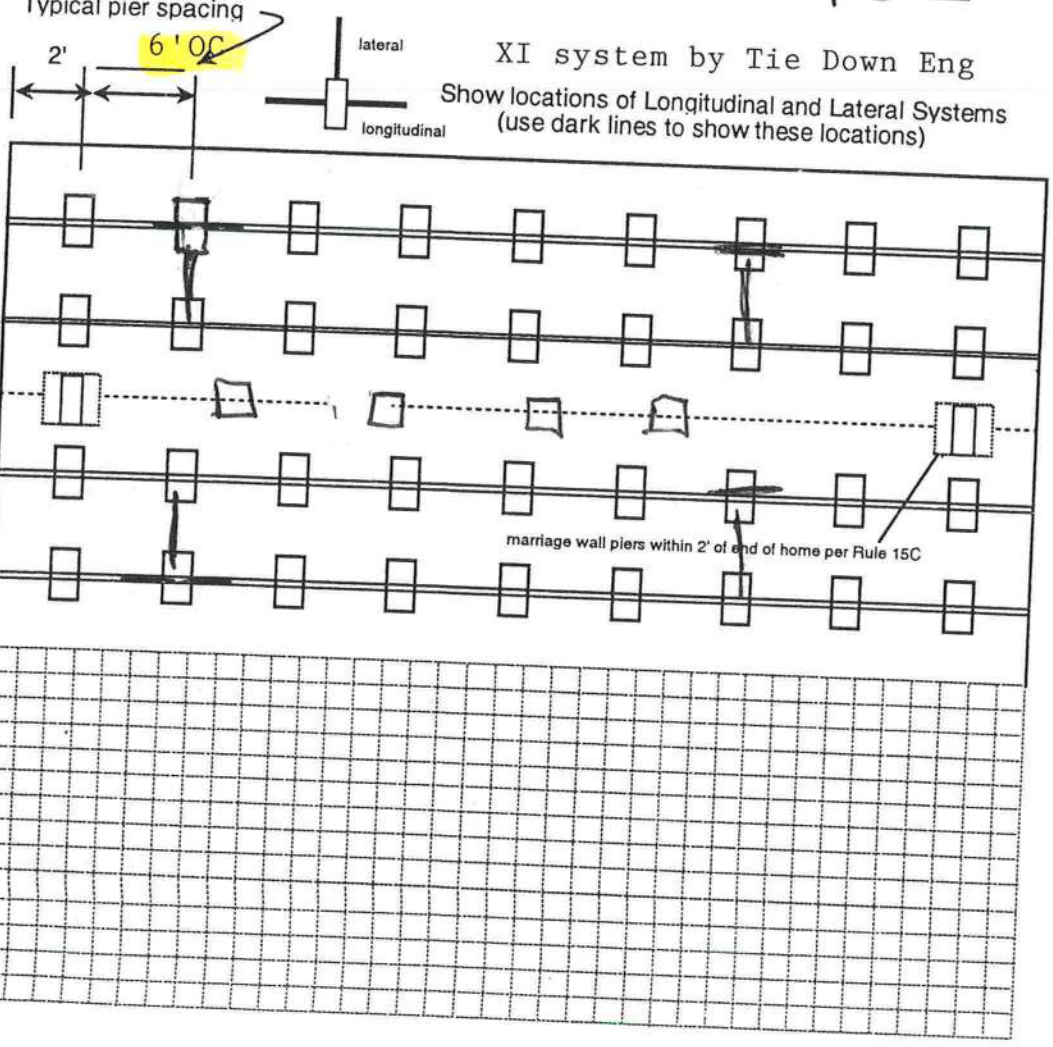
Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 2338

Triple/Quad ☐ Serial # 102884 & 102858

Roof System: X **Typical** _____ **Hinged** 576 provided

Typical pier spacing



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (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 24x24x1

Perimeter pier pad size 24x24x1

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
18'	3 = 24x24x1

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

ANCHORS

4 ft ✓ 5 ft _____

FRAME TIES

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

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Tie Down Eng

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Tie Down Eng

OTHER TIES

	Number
Sidewall	24 XI Systen
Longitudinal	4
Marriage wall	4
Shearwall	

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psf or check here to declare 1000 lb. soil _____ without testing.

x 2000 x 2000 x 2000

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 2000 x 2000 x 2000

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 tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

KC Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Corbett's Mobile Home Center

Date Tested 4-6-12

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 14

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15

Site Preparation

Debris and organic material removed Yes.
Water drainage: Natural ✓ Swale _____ Pad _____ Other _____.

Fastening multi wide units

Floor: Type Fastener: 3/8 Lag Length: 5" Spacing: 16"OC
Walls: Type Fastener: 8 screw Length: 3" Spacing: 24"OC
Roof: Type Fastener: 3/8 Lag Length: 5" Spacing: 16"OC
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, meldew 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 KC

Type gasket Foam
Pg. 8

Installed:
Between Floors Yes X
Between Walls Yes X
Bottom of ridgebeam Yes X

Weatherproofing

The bottomboard will be repaired and/or taped. Yes X. Pg. 21
Siding on units is installed to manufacturer's specifications. Yes X
Fireplace chimney installed so as not to allow intrusion of rain water. Yes X

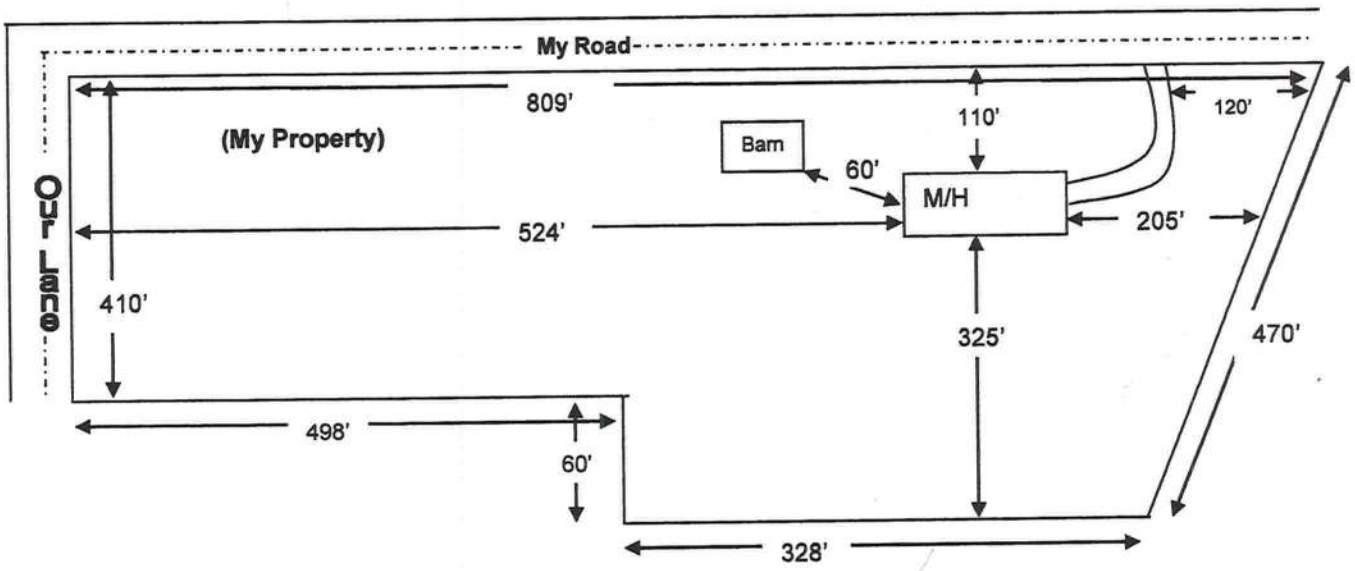
Miscellaneous

Skirting to be installed. Yes X No _____
Dryer vent installed outside of skirting. Yes _____ N/A X
Range downflow vent installed outside of skirting. Yes _____ N/A X
Drain lines supported at 4 foot intervals. Yes X
Electrical crossovers protected. Yes X
Other :

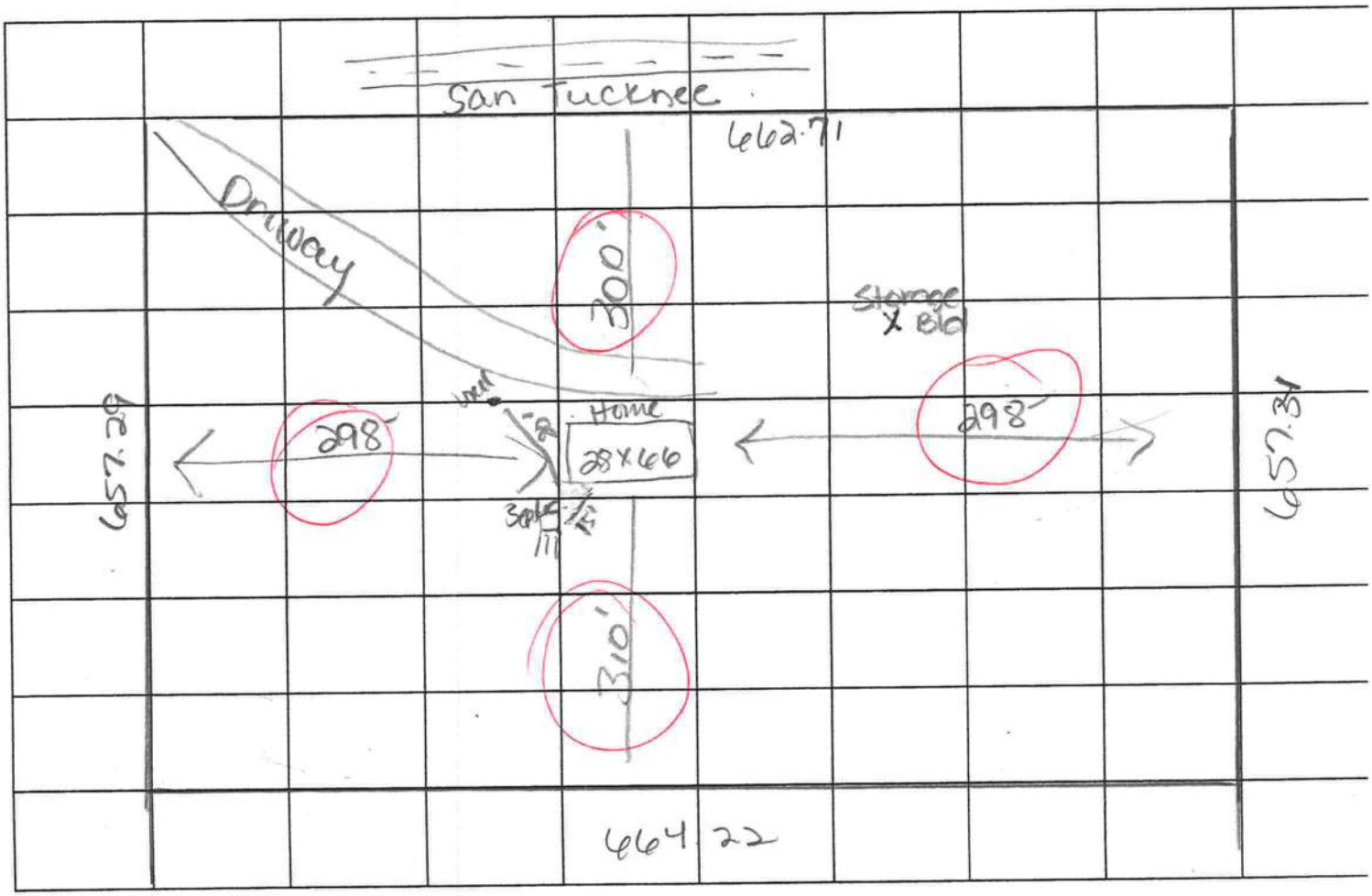
Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Robert Corbett Date 4-6-12

SITE PLAN EXAMPLE / WORKSHEET



Use this example to draw your own site plan. Show all existing buildings and any other homes on this property and show the distances between them, Also show where the roads or roads are around the property. This site plan can also be used for the 911 Addressing department if you include the distance from the driveway to the nearest property line.



LIMITED POWER OF ATTORNEY

I, Robert Corbett, license # 01H1015386/1 hereby authorize Donna Destor to be my representative and act on my behalf in all aspects of applying for a mobile home permit to be placed on the following described property located in Suwannee County, Florida.

Property owner: Virgle Eggleton

Sec _____ Twp. _____S Rge _____E

Tax Parcel No. _____

Robert Corbett
Mobile Home Installer

4-9-12
(Date)

Sworn to and subscribed before me this 9th day of April 20 12.

Wendi Tullis
Notary Public

My Commission expires: 5/1/2014
Commission No. DD
Personally known: ✓
Produced ID (Type) _____

WENDI TULLIS
MY COMMISSION # DD 958930
EXPIRES: May 9, 2014
Bonded Thru Notary Public Underwriters

1264-14

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwannee

OWNERS NAME Donna Nestor PHONE 386-362-8322 CELL

INSTALLER Corbett's Mobile Home Center PHONE 386-364-1340 CELL

INSTALLERS ADDRESS 1126 Howard St E Lake City FL 32064

MOBILE HOME INFORMATION

MAKE Liberty YEAR 1997 SIZE 28 x 66

COLOR Yellow SERIAL No. IOL25811U + IOL25811X

WIND ZONE II SMOKE DETECTOR yes

INTERIOR:
FLOORS good

DOORS Fair

WALLS need painting

CABINETS Good

ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:
WALLS / SIDDING Good

WINDOWS Good

DOORS Fair

INSTALLER: APPROVED ✓ NOT APPROVED

INSTALLER OR INSPECTORS PRINTED NAME Robert Corbett

Installer/Inspector Signature Robert Corbett License No. DIH1015386/b Date 4/9/12

NOTES:

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [signature] Date 4-10-12

Spoke to Wendy 4-10-12

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide 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 assigning 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 Service 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 REQUESTED: 4/9/2012 **DATE ISSUED:** 4/11/2012

ENHANCED 9-1-1 ADDRESS:

484 SW SAN TUCKNEE TER

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

30-6S-16-04001-115

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR PROPOSED REPLACEMENT STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT

Columbia County 9-1-1 Addressing / GIS Department

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

2256

AFFIDAVIT

1204-14

STATE OF FLORIDA
COUNTY OF COLUMBIA

This is to certify that I, (We), Debbie Haworth owner of the below described property:

Tax Parcel No. 30-6S-16-04001-115

Subdivision (name, lot, block, phase) Santuclenee Est, S/O Unrec. Lot 15

Give my permission to Virgle Eggleton \ Donna Nestor to place a mobile home/travel trailer/single family home (circle one) on the above mentioned property.

I (We) understand that this could result in an assessment for solid waste and fire protection services levied on this property.

Debbie Haworth
Owner

Owner

SWORN AND SUBSCRIBED before me this 27th day of April 2012. This (these) person(s) are personally known to me or produced ID SC DL# 102716284.

Randy J Moss
Notary Signature

RANDY J. MOSS
COMM. EXP.
NOTARY
PUBLIC
DECEMBER 13, 2021
SOUTH CAROLINA

B & Z fax #
386-758-2160

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1204-14 CONTRACTOR Arbetta M/H 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 Owner/Virgle Eggleton Signature Virgle Eggleton License #: Phone #:	✓
MECHANICAL/ A/C ____	Print Name Owner Signature License #: Phone #:	
PLUMBING/ GAS	Print Name Owner Signature License #: Phone #:	✓

MASON			
CONCRETE FINISHER			

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.

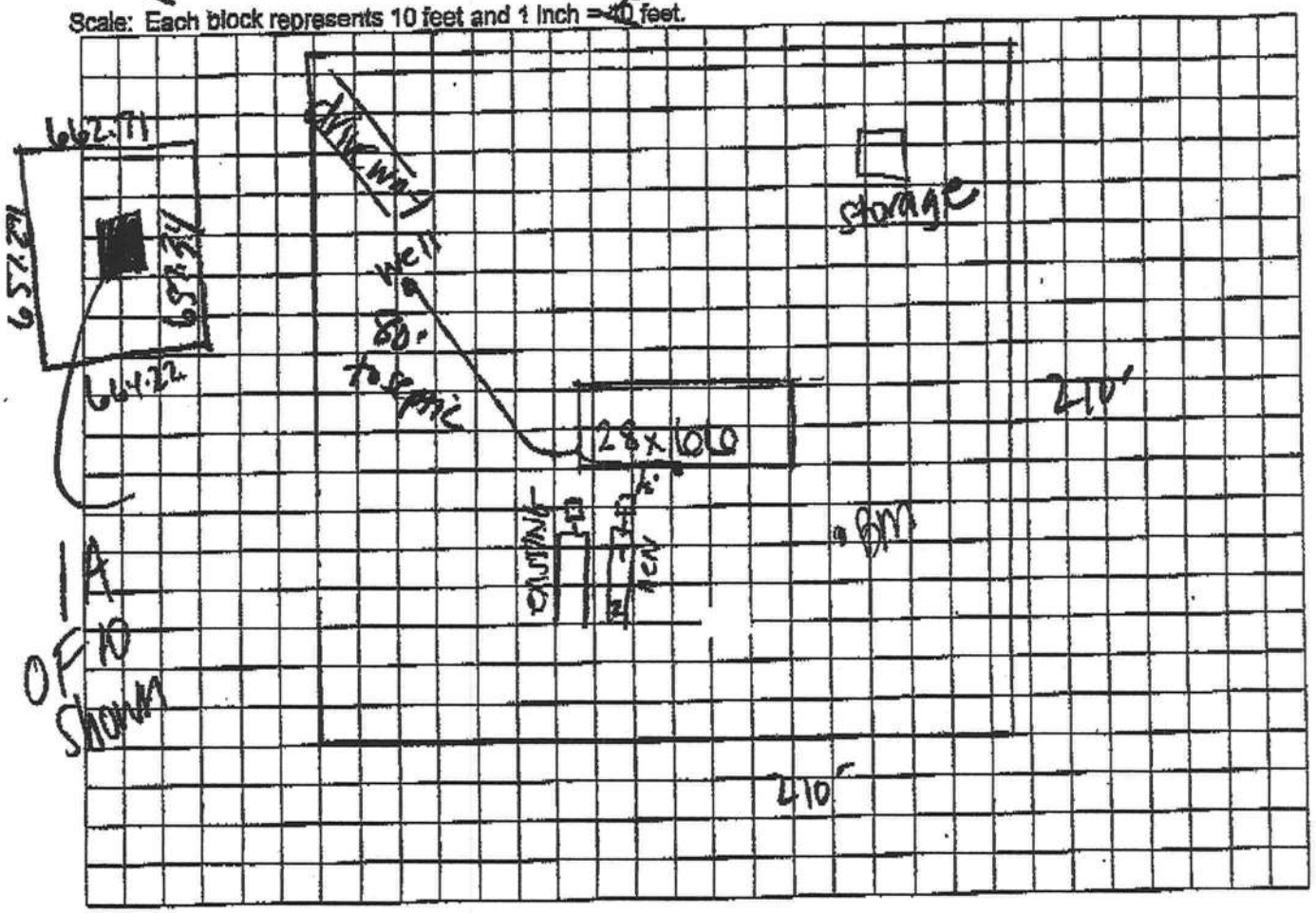
Contractor Permit Subcontractor Form 1/11

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 1A-1223EN

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: _____ Owner

Plan Approved ✓ Not Approved Date 5-1-12

By Sallie A Lord Env Health Director 5-1-12 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-002-4015-8)

Columbia CHD

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. [illegible]
DATE PAID: [illegible]
FEE PAID: [illegible]
RECEIPT #: [illegible]

APPLICATION FOR:
[ ] New System [✓] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: Virgle Eggleton

AGENT: Donna Nestor TELEPHONE: (352) 318-6902

MAILING ADDRESS: 484 SW San tucknee Terrace, Fort White FL 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 15 BLOCK: _____ SUBDIVISION: San tucknee Estates PLATTED: _____

PROPERTY ID #: 30-6S-16-04001-115 ZONING: Res I/M OR EQUIVALENT: [No]

PROPERTY SIZE: 10.0 ACRES WATER SUPPLY: [✓] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [No] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 484 SW San Tucknee Ter. Fort White, FL 32038

DIRECTIONS TO PROPERTY: 47 South to US 27 TR. Left on Utah, Left on Roberts, Left on San Tucknee to the end on right.

BUILDING INFORMATION [✓] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SFR	3	1848	ORIGINAL ATTACHED
2				
3				
4				Zone X

[ ] Floor/Equipment Drains [ ] Other (Specify) _____

SIGNATURE: Virgle Eggleton Donna Nestor DATE: 4/23/12

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

PM

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 3.1.12 BY JM IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES

OWNERS NAME DONNA NESTOR PHONE 386.362.8322 CELL _____

ADDRESS —

MOBILE HOME PARK — SUBDIVISION SUN-TUCKNEE ESTATES, LOT 15

DRIVING DIRECTIONS TO MOBILE HOME 47-S TO US 27, TL TO. UTAH, TL TO ROBERTS, TL TO SUNTUCKNEE, TL All the way to END on L.

MOBILE HOME INSTALLER COLBERT'S MHC PHONE 352.362.8322 CELL _____

MOBILE HOME INFORMATION

MAKE LIBERTY YEAR 1997 SIZE 28 X 66 COLOR YELLOW

SERIAL No. IOL25811X

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

$50.00

Date of Payment: 4.9.12

Paid By: DONNA NESTOR

Notes: 12-04-14

P SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

P FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION _

P DOORS ( ) OPERABLE ( ) DAMAGED

P WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

P WINDOWS ( ) OPERABLE ( ) INOPERABLE

P PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

P CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

P ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

P WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

P ROOF ( ) APPEARS SOLID ( ) DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE _____ ID NUMBER 304 DATE 5-2-12