

20798

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

Sent 11-29-11

COUNTY THE MOBILE HOME IS BEING MOVED FROM Sarasota
OWNERS NAME Steven Rynette PHONE 386-847-3143 CELL same as phone #
INSTALLER Terry Corbett PHONE 386-362-1949 CELL 386-590-0470
INSTALLERS ADDRESS 10314 US Hwy 90 E Five Oak FL 32060

MOBILE HOME INFORMATION

MAKE Redman YEAR 1999 SIZE 28 x 76
COLOR Yellow/burgundy SERIAL No. 76214614294 B/B
WIND ZONE II SMOKE DETECTOR yes

INTERIOR:

FLOORS good
DOORS good
WALLS good
CABINETS good
ELECTRICAL (FIXTURES/OUTLETS) good

EXTERIOR:

WALLS / SIDING good
WINDOWS good
DOORS good

INSTALLER: APPROVED yes NOT APPROVED _____

INSTALLER OR INSPECTORS PRINTED NAME Terry Corbett

Installer/Inspector Signature Terry Corbett License No. EH-1625368 Date _____

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 386-758-1000 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature At S. Powell Date 11-30-11

1112-05

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ 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: Robert Walker Brack License #: (Home Owner)	Signature: [Signature] Phone #: 386-984-8520
MECHANICAL/ A/C	Print Name: Robert Grant License #: CAC1814931	Signature: [Signature] Phone #: 820-820-5700
PLUMBING/ GAS	Print Name: Robert Walker Brack License #: (Home Owner)	Signature: [Signature] Phone #: 386-984-8520

Specialty License	License Number	Print Contractor Name	Sub Contractor Signature
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.

Columbia County Subcontractor Form 1/11

001355

BUILDING DEPARTMENT
COLUMBIA COUNTY FLORIDA
135 NB HERNANDO AVENUE • PHONE 386-758-1008
LAKE CITY, FLORIDA 32055

DATE 12/2 2011

RECEIVED FROM:

Gwen Walker

DOLLARS \$ 65.00

Application

☒

No:

1112-05

Brack
TC-74

Cash or Check

4887

Pre-Inspection

☒

Service Charge

☐

Re-Inspection

☐

BOARD OF COUNTY COMMISSIONERS

BY:

[Signature]