Inspection Solutions, LLC. **PO BOX 219** Starke, Florida, 32091

Columbia County Building Inspection Division Private Provider Inspection Result

Project: New SFR

Inspection Type; Roof Deck

Inspection Date: 8-4-25

Contractor's Name: John Crawford Homes

Permit Number: #000053403

Building Address: 466 SW JEANLEA PL FORT WHITE, FL 32038

Parcel Number:

Private Provider Firm: Inspection Solutions, LLC. Private Provider Name: Kevin Powell - BU 1814

Duly Authorized Rep's Name: Kevin Powell – BN 4866

Inspection Performed: Roof Deck

Inspection work code(s):

Result of Inspection: **Pass**

To the best of my knowledge and belief, the building components outlined herein and inspected under my authority have been completed in conformance with the approved plans and the applicable codes.

Signature of Private Provider or Duly Authorized Representative:

Kevin Powell Certified Building Code Administrator

I hereby certify that the information indicated in this report or supplement report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath.

Inspection Solutions, LLC. PO BOX 219
Starke, Florida, 32091

Columbia County Building Inspection Division Private Provider Inspection Result

Project: New SFR

Inspection Type; Wall Sheathing

Inspection Date: 8-4-25

Contractor's Name: John Crawford Homes

Permit Number: #000053403

Building Address: 466 SW JEANLEA PL FORT WHITE, FL 32038

Parcel Number:

Private Provider Firm: Inspection Solutions, LLC. Private Provider Name: Kevin Powell – BU 1814

Duly Authorized Rep's Name: Kevin Powell – BN 4866

Inspection Performed: Wall Sheathing

Inspection work code(s):

Result of Inspection: Pass

To the best of my knowledge and belief, the building components outlined herein and inspected under my authority have been completed in conformance with the approved plans and the applicable codes.

Signature of Private Provider or Duly Authorized Representative:

Kevin Powell Howell

Certified Building Code Administrator

I hereby certify that the information indicated in this report or supplement report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath.

Inspection Solutions, LLC. PO BOX 219
Starke, Florida, 32091

Columbia County Building Inspection Division Private Provider Inspection Result

Project: New SFR

Inspection Type; Ext Strapping/Wall Sheathing

Inspection Date: 8-4-25

Contractor's Name: John Crawford Homes

Permit Number: #000053403

Building Address: 466 SW JEANLEA PL FORT WHITE, FL 32038

Parcel Number:

Private Provider Firm: Inspection Solutions, LLC. Private Provider Name: Kevin Powell – BU 1814

Duly Authorized Rep's Name: Kevin Powell – BN 4866

Inspection Performed: Ext Strapping/Wall Sheathing

Inspection work code(s):

Result of Inspection: Pass

To the best of my knowledge and belief, the building components outlined herein and inspected under my authority have been completed in conformance with the approved plans and the applicable codes.

Signature of Private Provider or Duly Authorized Representative:

Kevin Powell 2 foul

Certified Building Code Administrator

I hereby certify that the information indicated in this report or supplement report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath.