



COLUMBIA COUNTY BUILDING DEPARTMENT

Application # _____

PRELIMINARY MOBILE HOME INSPECTION REPORT

\$50.00 Fee Paid _____

DATE RECEIVED _____ **BY** _____ **IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED?** No

OWNERS NAME Blow Ryderwood LLC **PHONE** _____ **CELL** 386-365-8575

ADDRESS 1040SE Brock Glen, LC, FL, 32025

MOBILE HOME PARK No **SUBDIVISION** Lot 10, Geibieg's Addition

DRIVING DIRECTIONS TO MOBILE HOME US 90 East, TR SE Murray Terr, TL Brock Glen, To end on right

MOBILE HOME INSTALLER Brent Strickland **PHONE** _____ **CELL** 386-365-7043

MOBILE HOME INFORMATION

MAKE All American **YEAR** 1983 **SIZE** 24 **x** 40 **COLOR** _____

SERIAL No. FHGA9581

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

_____ **SMOKE DETECTOR** () OPERATIONAL () MISSING

_____ **FLOORS** () SOLID () WEAK () HOLES **DAMAGED LOCATION** _____

_____ **DOORS** () OPERABLE () DAMAGED

_____ **WALLS** () SOLID () STRUCTURALLY UNSOUND

_____ **WINDOWS** () OPERABLE () INOPERABLE

_____ **PLUMBING FIXTURES** () OPERABLE () INOPERABLE () MISSING

_____ **CEILING** () SOLID () HOLES () LEAKS APPARENT

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

EXTERIOR:

_____ **WALLS / SIDING** () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

_____ **WINDOWS** () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

_____ **ROOF** () APPEARS SOLID () DAMAGED

STATUS

APPROVED _____ **WITH CONDITIONS:** _____

NOT APPROVED _____ **NEED RE-INSPECTION FOR FOLLOWING CONDITIONS** _____

BUILDING INSPECTOR'S SIGNATURE _____ **ID NUMBER** _____ **DATE** _____