| Project ID: | 46755 | |
|-------------|-------|--|
|-------------|-------|--|



Private Provider Certificate of Compliance

| Project Name: | MARK STUART & GAYATHRI M DUCHARME | | | | |
|---|--|--|---|---|--|
| Project Address: | 385 NW Horizon St Lake City, FL 32055 | | | | |
| Permit No: | 000053400 | | | | |
| Applicant Name: | Renewal By Andersen - Jacksonville | | | | |
| | 997 W Kennedy Bl | | 310 | | |
| In accordance with providing the Buildin To the best of my language. | Florida Statute 553 g Division with the firknowledge and belied, duly authorized 3) under my authori | 3.791, Section (13) nal disposition of the ef, the building cou agents who are fu | , pertaining to e building inspe mponents and ully licensed Fl | Private Provider Serection conducted under site improvements or orida inspectors/plan mance with the approximation. | er our authority. outlined herein, reviewers, as |
| 1. Building: | Yes: X | No: | | | |
| Mechanical: | Yes: | No: | | | |
| Electrical: | | No: | N/A: | X | |
| 4. Plumbing: | | No: | | X | |
| 5. Gas: | Yes: | No: | N/A: | X | |
| Respectfully subm Inspected.com Private Provider Sign NOTARY STATE OF FLORIDA COUNTY OF Brow | ature | | | | |
| | | | | , personally appeared, | |
| | ed for the purposes the | | | ent, and acknowledged | |
| | | ype of ID | ieis <u> </u> | reisonally Known of | |
| Signature of Notary Pu | N N | otary Public State of Florida Alayna S Cade My Commission HH 432189 Expires 8/10/2027 | | | |
| • | istrator under part XII o ect under Florida Statu | | apter 468, Engine | eer under Florida Statute | !S |

 $1250 \; \text{S.}$ Pine Island Road Suite 500, Plantation, FL 33324

(954) 820-4874

| roject ID: | 46755 | |
|------------|-------|--|
|------------|-------|--|



PRIVATE PROVIDER INSPECTION REPORT

| Permit #: | 000053400 | | | | |
|--|---|--|--|--|--|
| Site Address: | 385 NW Horizon St Lake City, FL 32055 | | | | |
| Inspection Report #: | 110743 Inspection Date: 8/4/2025 | | | | |
| Owner Name: | MARK STUART & GAYATHRI M DUCHARME | | | | |
| Private Provider: | My Amelia, Inc DBA Inspected.com | | | | |
| Address: | 1250 S. Pine Island Rd Suite 500 Plantation, FL 33324 | | | | |
| Contractor: | Renewal By Andersen - Jacksonville | | | | |
| Address: | 997 W Kennedy Blvd Orlando, FL 32810 | | | | |
| Description: | Building Final | | | | |
| Inspection Result | X Passed Failed Canceled/NA | | | | |
| Comments: | | | | | |
| | | | | | |
| | | | | | |
| I hereby certify that the abov approved plans and the app | e-referenced inspection has been completed and is in conformance with the icable codes. | | | | |
| By: Gerald Leggett | License #: BN7543 | | | | |
| (Can) | | | | | |
| Certified: | | | | | |
| Inspector Line: 954-820-487 | 3 | | | | |