

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 19 Oct. 2012 Building Official 7.10.19-12

AP# 1210-23 Date Received 10/10/12 By WT Permit # 30556

Flood Zone X Development Permit N/A Zoning A-1 Land Use Plan Map Category Public

Comments _____

FEMA Map# N/A Elevation N/A Finished Floor 1 above Rd River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # X12-096 ☒ EH Release Have Water System ☐ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☒ State Rd Access ☒ 911 Sheet *Based on Previous permit & lot*

☐ Parent Parcel # _____ ☒ STUP-MH ☒ F W Comp. letter ☒ App Fee Pd ☒ VF Form

IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Out County ☒ In County

Road/Code _____ School _____ = TOTAL _____ Suspended March 2009 ☒ Ellisville Water Sys

Property ID # 27-35-18-10308-001 Subdivision _____

▪ New Mobile Home _____ Used Mobile Home ☒ MH Size 42X12 Year 93

▪ Applicant Christopher R Kinem Phone # 352 256 8261

▪ Address 378 SE Guardian Glen Lake City FL 32025

▪ Name of Property Owner TIITF/Dept of Corrections Phone # 382

▪ 911 Address 378 SE Guardian Glen Lake City FL 32025

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home Christopher R Kinem Phone # 352 256 8261
Address 378 SE Guardian Glen Lake City FL 32025

▪ Relationship to Property Owner Employee

▪ Current Number of Dwellings on Property MH Park

▪ Lot Size Lot 8 Total Acreage 30.78

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home No-Yes

▪ Driving Directions to the Property 90 East, (R) Into Col. Correctional Inst., (C) Guardian Glen, Lot 8 on (R)

▪ Name of Licensed Dealer/Installer Dennis Riedel Phone # 904-982-3984

▪ Installers Address 11319 Simmons Rd Jax FL 32218

▪ License Number 1H1025162 Installation Decal # 12572

Jo Spore W/KW Hopka 10.19.12 -
" " " 10.23.12 - ref: PRE-MH - PASSED \$325.00 #1688

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Dennis Riedel License # 1H1025162

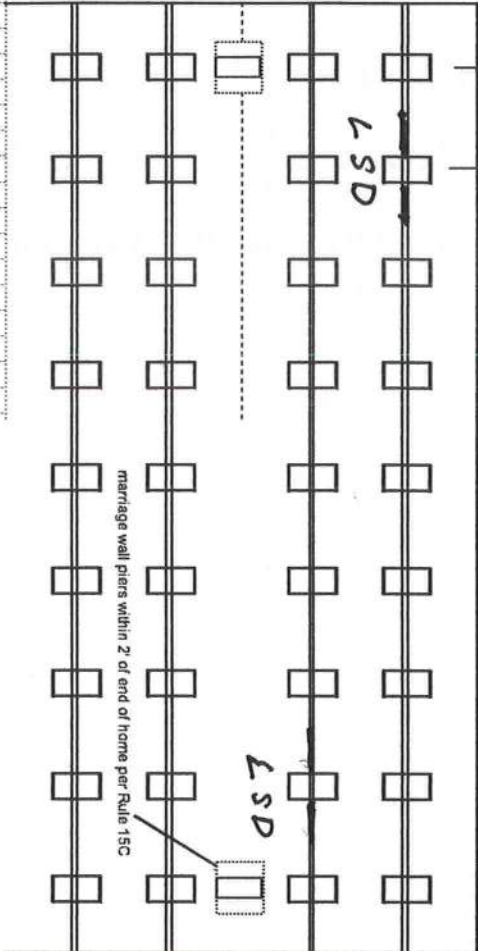
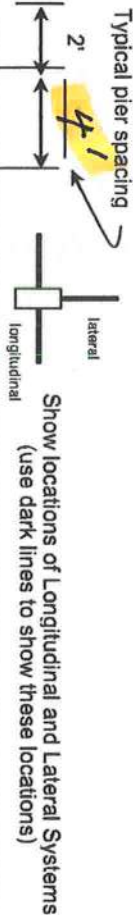
911 Address where home is being installed. _____

Manufacturer FLT Length x width 42 x 12

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 DR



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6" ✓	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 16x16
Perimeter pier pad size 16x16
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 _____

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms Manufacturer Q.I.

Number _____

Sidewall _____

Longitudinal _____

Shearwall _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

x1375 x1550 x1620

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.

x1500 x1650 x1650

TORQUE PROBE TEST

The results of the torque probe test is 345 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~~ psi holding capacity.

DSR Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Dennis Riedel

Date Tested

9-27-12

Electrical

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

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. DSR
Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.

Site Preparation

Debris and organic material removed X
Water drainage: Natural X Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:
For used homes 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, mildew 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

Type gasket

Pg.

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

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

Miscellaneous

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

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Dennis Riedel Date 9-27-12

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 120-23 CONTRACTOR Dennis Riedel PHONE 904-982-398

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.

<input checked="" type="checkbox"/> ELECTRICAL	Print Name <u>Christopher R Kinem</u> License #: <u>MH Owner</u>	Signature <u>Christopher R Kinem</u> Phone #:
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name <u>Christopher R Kinem</u> License #: <u>MH Owner</u>	Signature <u>Christopher R Kinem</u> Phone #:
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name <u>Dennis Riedel</u> License #: <u>1H1025162</u>	Signature <u>Dennis Riedel</u> Phone #: <u>904-982-3984</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors 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.

Contractor Forms: Subcontractor form: 1/11



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Dennis Riedel, give this authority for the job address show below
Installer License Holder Name

only, 3286E Guardian Gln Lake City FL 32025 and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control
and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Christopher R Kinney	<i>Christopher R Kinney</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

Dennis Riedel
License Holders Signature (Notarized)

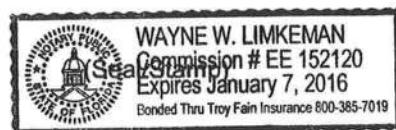
1H1025162 9-28-12
License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Alachua

The above license holder, whose name is Dennis Riedel,
personally appeared before me and is known by me or has produced identification
(type of I.D.) FL. Id. Sec on this 28 day of Oct, 2012.

Wayne W. Limkeman
NOTARY'S SIGNATURE



Columbia County Property Appraiser

CAMA updated: 8/2/2012

2011 Tax Year

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

Parcel: 27-3S-18-10308-001

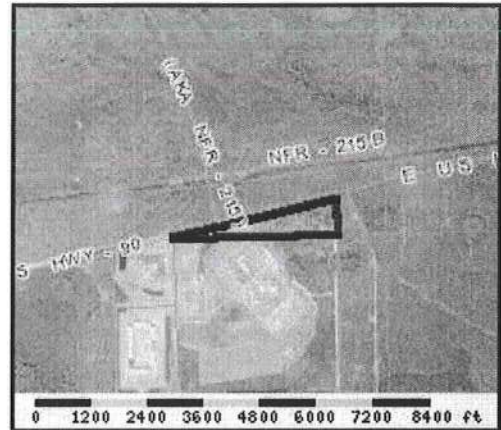
<< Next Lower Parcel

Next Higher Parcel >>

Search Result: 1 of 1

Owner & Property Info

Owner's Name	TIITF/DEPT OF CORRECTIONS		
Mailing Address	COLUMBIA CO. CORRECTIONAL SITE C/O DEP 3900 COMMONWEALTH BLVD TALLAHASSEE, FL 32301		
Site Address	136 SE CORRECTIONS WAY		
Use Desc. (code)	STATE (008700)		
Tax District	3 (County)	Neighborhood	1418
Land Area	30.780 ACRES	Market Area	05
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM SE COR OF SEC, RUN W 1000 FT FOR POB, RUN N 748.48 FT TO S R/W US-90, SW ALONG R/W 3514.03 FT, S 30.98 FT TO SEC LINE, E ALONG SEC LINE 3440 FT TO POB. ORB 725-041, 725-553,		



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$28,800.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$28,800.00
Just Value		\$28,800.00
Class Value		\$0.00
Assessed Value		\$28,800.00
Exempt Value	(code: 05)	\$28,800.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

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
NONE						

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
008700	STATE (MKT)	30.78 AC	1.00/1.00/1.00/1.00	\$936.00	\$28,810.00

Columbia County Property Appraiser

CAMA updated: 8/2/2012

1 of 1

DISCLAIMER

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

COMM SE COR OF SEC, RUN W 1000 FT FOR POB, RUN N 748.48 FT TO S R/W US-90, SW ALONG R/W
3514.03 FT, S 30.98 FT TO SEC LINE, E ALONG SEC LINE 3440 FT T

Name:	TIITF/DEPT OF CORRECTIONS	2011 Certified Values	
Site:	136 SE CORRECTIONS WAY	Land	\$28,800.00
Mail:	COLUMBIA CO. CORRECTIONAL SITE	Bldg	\$0.00
	C/O DEP	Assd	\$28,800.00
	3900 COMMONWEALTH BLVD	Exmpt	\$28,800.00
	TALLAHASSEE, FL 32301		Cnty: \$0
Sales Info	NONE	Taxbl	Other: \$0 Schl: \$0



Florida Mobile Home Installer License

LICENSEE: DENNIS E. RIEDEL
LICENSE NUMBER: IH/1025162
EFFECTIVE DATE: 09/20/2012

EXPIRATION DATE: 09/30/2013

THE LICENSEE IS HEREBY CERTIFIED UNDER THE PROVISIONS OF SECTION 320.8249,
FLORIDA STATUTES TO CONDUCT AND CARRY ON BUSINESS AS AN INSTALLER OF
MOBILE HOMES IN THE STATE OF FLORIDA

A handwritten signature in cursive script, reading "C. B. Walker".

Director, Division of Motorist Services
State of Florida - Department of Highway Safety and Motor Vehicles - Division of Motorist Services

Date: September 7, 2012

Bond No.: 104369963

Agent: Nielson, Mosholder & Associates
4380 St. Johns Pkwy #110
Sanford, FL 32771
407-688-9385

Principal: Dennis E Riedel
c/o Riedel Mobile Home Service
11319 Simmons Rd
Jacksonville, FL 32218

Obligee: State of Florida
Department of Highway Safety and Motor Vehicles
2900 Apalachee Parkway, Neil Kirkman Bldg, MS 66
Tallahassee, FL 32399-0640

Bond Amount: \$5,000. **Mobile Home Installer**

Term Dates: 10/1/12 to 09/30/13

Continuation Certificate

It is hereby agreed that the above captioned bond is continued in force in the above amount for the term stated above and is subject to all the covenants and conditions of said bond.

This continuation shall be deemed a part of the original bond, and not a new obligation no matter how long the bond has been in force or how many premiums are paid for the bond, unless otherwise provided for by statute or ordinance applicable.

In witness whereof Travelers Casualty & Surety Company of America has
caused its corporate seal to hereunto be affixed this 7th day of September, 2012.

Travelers Casualty & Surety Company of America, 2420 Lakemont Ave, 4th Floor, Orlando, FL 32814

Surety Company

By: 

Laura D. Mosholder, Attorney-in-Fact & FL Resident Agent



08-26-2011

JEFF ATWATER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

* * CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW * *
CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 08/26/2011 EXPIRATION DATE: 08/25/2013

PERSON: RIEDEL DENNIS

FEIN: 710954869

BUSINESS NAME AND ADDRESS:

RIEDEL MOBILE HOME SERVICE INC
11319 SIMMONS RD
JACKSONVILLE FL 32218

SCOPES OF BUSINESS OR TRADE:

1- MOBILE HOME TIE DOWN (6400)

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION
CONSTRUCTION INDUSTRY
CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA
WORKERS' COMPENSATION LAW



EFFECTIVE: 08/26/2011 EXPIRATION DATE: 08/25/2013

PERSON: DENNIS RIEDEL

FEIN: 710954869

BUSINESS NAME AND ADDRESS:

RIEDEL MOBILE HOME SERVICE INC
11319 SIMMONS RD
JACKSONVILLE, FL 32218

SCOPE OF BUSINESS OR TRADE:

1- MOBILE HOME TIE DOWN (6400)

IMPORTANT

F O L D Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

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E Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-160

CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

386 758 2160
Fax to: 386 758 1058CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

12/10-23

Duval

COUNTY THE MOBILE HOME IS BEING MOVED FROM 11865 Indus Ave Jax FL

OWNERS NAME Christopher P. Kinem PHONE 352-256-8261

INSTALLER Dennis Riedel PHONE 904-982-3984 CELL

INSTALLERS ADDRESS 11319 Simmons Rd Jax FL 32218

MOBILE HOME INFORMATION

MAKE FLT YEAR 93 SIZE 42 x 12

COLOR Brown SERIAL No. FLFLN79A10523GB

WIND ZONE II SMOKE DETECTOR yes

INTERIOR:

FLOORS yes OK

DOORS OK

WALLS OK

CABINETS OK

ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:

WALLS / SIDING OK

WINDOWS OK

DOORS OK

INSTALLER: APPROVED DSR NOT APPROVED

INSTALLER OR INSPECTORS PRINTED NAME Dennis Riedel

Installer/Inspector Signature Dennis Riedel License No. 1H1025162 Date 9-27-12

NOTES: Home in good condition

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 Ray A. Date 10-16-12

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 10/19 BY Jh IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? YES

OWNERS NAME Christopher R. Kinem PHONE CELL 352-256-8261

ADDRESS 378 SE Guardian Glen, Lake City FL 32025

MOBILE HOME PARK Columbia Correctional Inst. SUBDIVISION

DRIVING DIRECTIONS TO MOBILE HOME 90 East J. go into entrance of 'Col. Correctional Inst. then 1st Left, see lot #8 on the (R)

MOBILE HOME INSTALLER Dennis Riedel PHONE 904-982-3986

MOBILE HOME INFORMATION

MAKE FLT YEAR 93 SIZE 42 x 12 COLOR Brown

SERIAL No. FLFLN79A10523GB ✓

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

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 / SIDING () 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 Jh ID NUMBER 306 DATE 10-22-12

TROY:
* CALL KRIS before
for 50: 352.256.8261

1210-23