CODE ENFORCEMENT ω is the m/h on the property where the permit will be issued? NOPHONE 352-470-1146 CELL SAME OWNERS NAME JAMES LARSON ADDRESS 239 SW MUFFIN CT LAKE City FL 32024 MOBILE HOME PARK SUBDIVISION DRIVING DIRECTIONS TO MOBILE HOME CONNIE NOMIZ MOBILE HOME INFORMATION YEAR 1988 SIZE 14 x 52 COLOR GROY MAKE Fleetwood FL ABIAH 2500 AE 1402-21 Must be wind zone II or higher NO WIND ZONE I ALLOWED WIND ZONE **INSPECTION STANDARDS** INTERIOR: (Porf) - P= PASS F= FAILED SMOKE DETECTOR () OPERATIONAL () MISSING FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION / 100 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 WALLS / SIDDING () 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

SIGNATURE Sug C ID NUMBER 306 DATE 2-14-14