

DATE 06/21/2010

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028678

APPLICANT MICHAEL CHILDERS PHONE 352 474-9605
ADDRESS 210 SE HARDIN CT HIGH SPRINGS FL 32643
OWNER MICHAEL CHILDERS PHONE 352 474-9605
ADDRESS 210 SE HARDIN CT HIGH SPRINGS FL 32643
CONTRACTOR VIC ETHERIDGE PHONE 386 462-7554
LOCATION OF PROPERTY 441S, TL CLEMAN LANE, TR HARDIN CT., 3RD PROPERTY
ON RIGHT
TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 15-7S-17-09996-009 SUBDIVISION GILBERT PARK
LOT 2 BLOCK PHASE UNIT TOTAL ACRES 1.07

IH0000144
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 10-191 BK HD
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REPLACING EXISTING MH, ONE FOOT ABOVE THE ROAD

Check # or Cash 2153

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Insulation date/app. by
Rough-in plumbing above slab and below wood floor date/app. by Electrical rough-in date/app. by
Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 325.00
INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

#120

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

CHK# 2153

For Office Use Only (Revised 1-10-08) Zoning Official BLK 26-04-10 Building Official NO 4-22-10

AP# 1004-34 Date Received 4/26/10 By GF Permit # 28678

Flood Zone X Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3

Comments Replacing existing MH

FEMA Map# N/A Elevation N/A Finished Floor 10-191 in Folder River N/A In Floodway N/A

☒ Site Plan with Setbacks Shown AT EN# ☐ EH Release ☐ Well letter ☐ Existing well

☐ Recorded Deed or Affidavit from land owner ☒ Letter of Auth. from installer ☐ State Road Access

☐ Parent Parcel # _____ ☐ STUP-MH _____ ☐ F W Comp. letter _____

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL _____ Impact Fees Suspended March 2009 IVOL

sent 6/21/10
updates (all)

Property ID # 15-75-17-09996-009 Subdivision Gilbert Park Lot 2

- New Mobile Home _____ Used Mobile Home C MH Size 14 x 76 Year 1993
- Applicant Michael M. Childers Phone # 352-474-9605
- Address 210 SE Hardin Ct., High Springs, FL, 32643
- Name of Property Owner SAME Phone# SAME
- 911 Address SAME
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy

- Name of Owner of Mobile Home SAME Phone # SAME
- Address SAME
- Relationship to Property Owner SAME
- Current Number of Dwellings on Property 1
- Lot Size X Total Acreage 1.07 ac

- 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 Yes (Pd)
- Driving Directions to the Property 441 South. Turn East on Coleman Dr.
as 12 mi + Turn south on SE Hardin Ct., 3rd property
on right when counting house on corner
(See # on mailbox)

- Name of Licensed Dealer/Installer Vic Ethendige Phone # 386 4627554
- Installers Address PO Box 3266 High Springs, FL 32655
- License Number IH 1025185/1 New Installation Decal # 305978

I H 0000 144 000

Spoke to Mike
4/26/10

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 Vic E. Schneider License # 1410251851

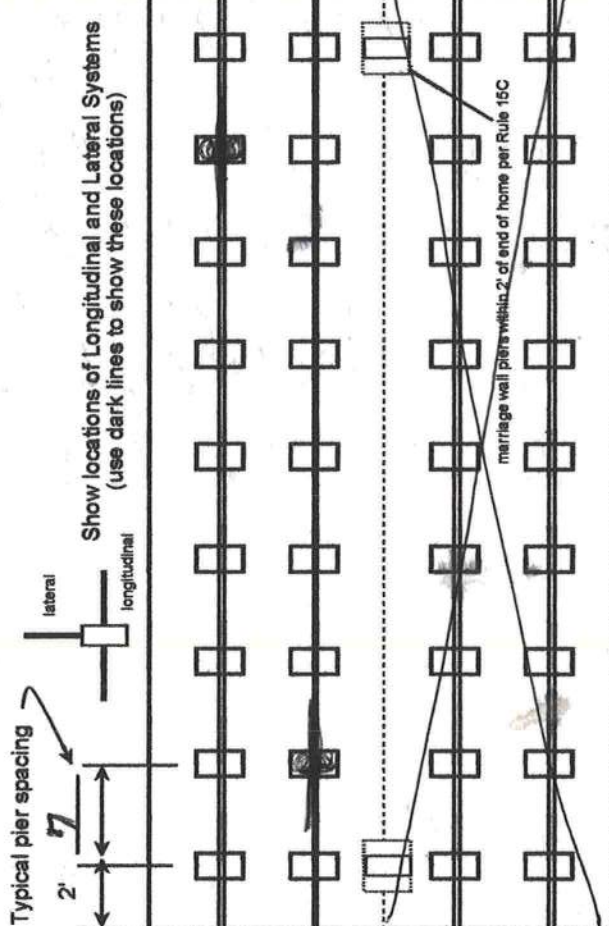
911 Address where home is being installed. _____

Manufacturer Freedom Length x width 14 x 26

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 VS



New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 305978

Triple/Quad ☐ Serial # 20FLP75A 20215 W8

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (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 bsf	3'	4'	4'	5'	6'	7'	8'
1500 bsf	4' 6"	6'	6'	7'	8'	8'	8'
2000 bsf	6'	8'	8'	8'	8'	8'	8'
2500 bsf	7' 6"	8'	8'	8'	8'	8'	8'
3000 bsf	8'	8'	8'	8'	8'	8'	8'
3500 bsf	8'	8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 24 x 24

Perimeter pier pad size 41/4

Other pier pad sizes (required by the mfg.) 16 x 6

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 41/4

4 ft _____ 5 ft ☒

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____

Manufacturer Shelton Tech

Longitudinal Stabilizing Device w/ Lateral Arms _____

Manufacturer _____

OTHER TIES

Number _____

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

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

X 1000 X _____ X _____

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.

X _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 160 inch pounds or check here if you are declaring 5' anchors without testing 5'. 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 require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

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. NA

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. yes

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. NA

Site Preparation

Debris and organic material removed ☒
Water drainage: Natural ☒ 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 a min. 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

Installed:

Between Floors Yes

Between Walls Yes

Bottom of ridgebeam Yes

Weatherproofing

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

Miscellaneous

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

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

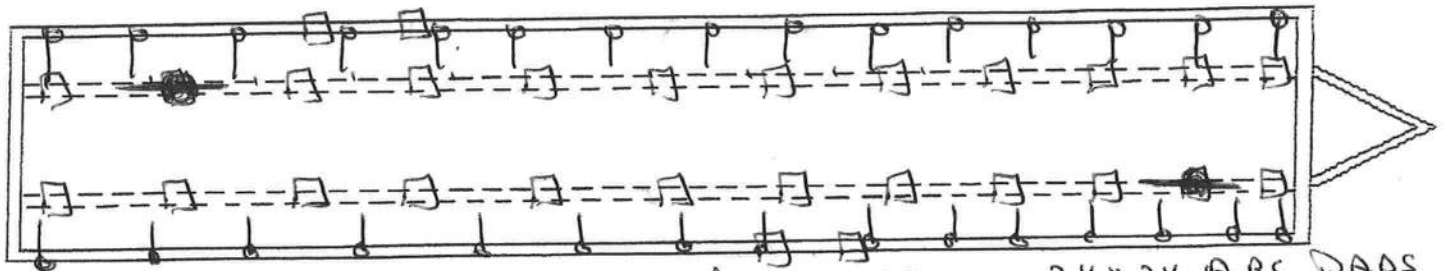
Installer Signature

Date

4-13-10

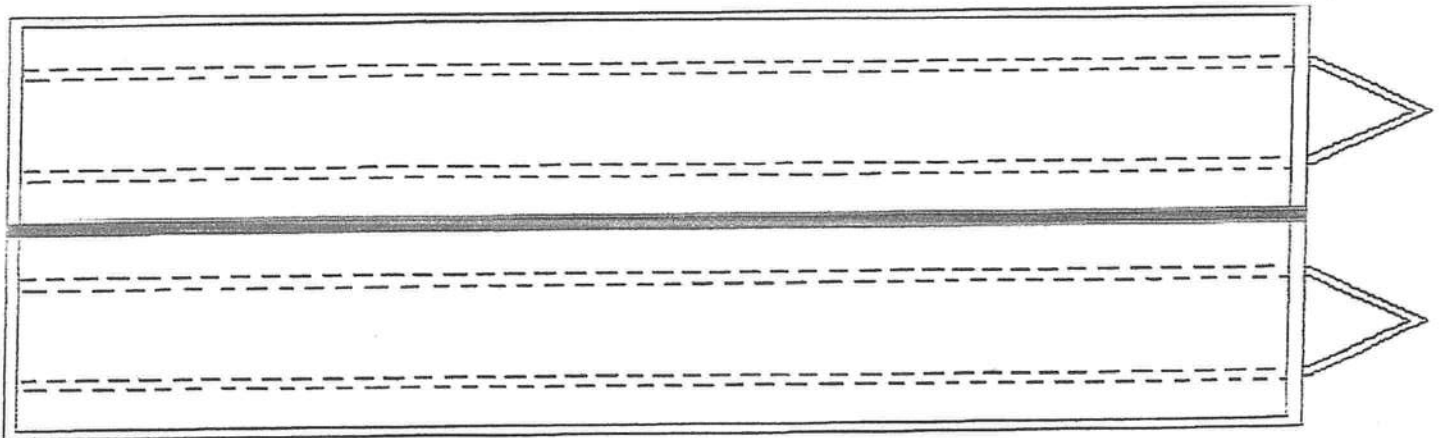
Applicant shall provide layout from manufacturer specific to the model installed. This form may be used the layout from the manufacturer is not available.

SINGLE WIDE MOBILE HOME



1000 lb Soil - Piers on 7' centers on 2x4 2x4 ABC pads
5' Anchors on 5'4" centers

~~OLIVER TECHNICAL~~ DOUBLE WIDE MOBILE HOME
94 longitudinal Stabilizer Devices



ANCHOR



PIER



PIER FOOTING

Show all pier (with size of piers & pads) and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.

My Road

(My Property)

809'

410'

524'

60'

Barn

110'

205'

M/H

325'

328'

470'

Addressing department if you include the distance from the driveway to the nearest property line.

East

drive 16' W

62'

76'

14'

50'

22'

old pump house

72'

35'

20'

12'

pottery shed

W.C. Storage
Garage
Shed

West

169'

91' L

91' L

171' →

A hand-drawn site plan on a grid background. The plan shows several rectangular structures representing buildings or sheds. Dimensions are written throughout the drawing, indicating distances between features and from the edges of the grid. Key dimensions include 50', 76', 14', 62', 22', 72', 35', 20', 12', and 169'. Some dimensions are circled in red. Labels include "East", "West", "drive 16' W", "old pump house", "pottery shed", "W.C. Storage", "Garage", and "Shed". Arrows indicate directions and specific measurements along the grid lines.

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installers license from the bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I Vic E. Newdow license number TH 1025 1851, do hereby state that the
(Please Print)

installation of the manufactured home at 210 SE Hardin Ct. will be done under my
(911 Address) High Springs, Fl. 32643
supervision.

[Signature]
Signature

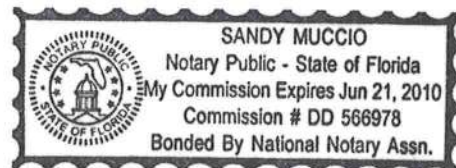
Sworn to and subscribed before me this 19 day of April A. D. 2010

Notary Public

[Signature]
Signature

My commission expires: _____

Date



LIMITED POWER OF ATTORNEY

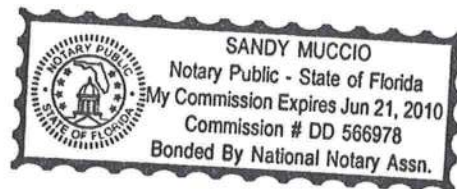
I, Vic Edmundo DO HEREBY AUTHORIZE Mike Childers
TO PULL MY PERMITS AND ACT ON MY BEHALF IN ALL ASPECTS OF APPLYING
FOR A MOBILE HOME PERMIT.


SIGNATURE

4-19-10
DATE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 19 DAY OF April, 2010.


NOTARY PUBLIC



MY COMMISSION EXPIRES: _____
COMMISSION NO. _____
PERSONALLY KNOWN: ☒ _____
PRODUCED ID (TYPE): _____

Columbia County Property Appraiser

DB Last Updated: 3/29/2010

2009 Tax Roll Year

Parcel: 15-7S-17-09996-009

<< Next Lower Parcel Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

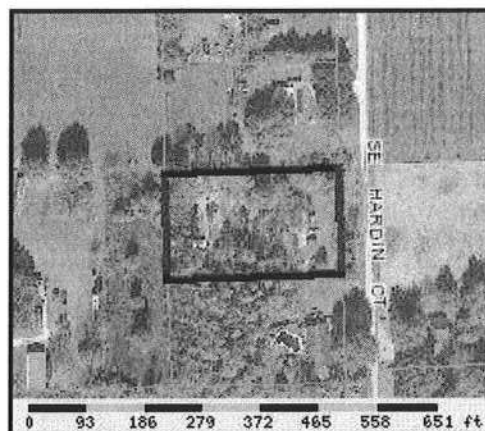
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	CHILDERS MICHAEL M &		
Mailing Address	KATHLEEN S 210 SE HARDIN CT HIGH SPRINGS, FL 32643		
Site Address	210 SE HARDIN CT		
Use Desc. (code)	MOBILE HOM (000200)		
Tax District	3 (County)	Neighborhood	15717
Land Area	1.070 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction. COMM NE COR OF SW1/4 OF NW1/4, RUN W 605.80 FT, S 509.30 FT FOR POB, RUN E 277.46 FT, S 170.30 FT, W 277.27 FT, N 170.30 FT TO POB. (AKA LOT 2 GILBERT PARK S/D) ORB 329-11, 802-2110.		



Property & Assessment Values

2009 Certified Values		
Mkt Land Value	cnt: (0)	\$14,076.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (1)	\$3,157.00
XFOB Value	cnt: (1)	\$800.00
Total Appraised Value		\$18,033.00
Just Value		\$18,033.00
Class Value		\$0.00
Assessed Value		\$18,033.00
Exempt Value	(code: HX)	\$18,033.00
Total Taxable Value	Cnty: \$0 Other: \$0 Schl: \$0	

2010 Working Values

NOTE:

2010 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
3/10/1995	802/2110	WD	V	Q		\$5,000.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	MOBILE HME (000800)	1978	BELOW AVG. (03)	672	816	\$3,025.00
Note: All S.F. calculations are based on exterior building dimensions.						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	1993	\$800.00	0000001.000	12 x 17 x 0	(000.00)

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000200	MBL HM (MKT)	1.07 AC	1.00/1.00/1.00/1.00	\$10,157.40	\$10,868.00

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR

Vic EthendigePHONE 352 2831510

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.

ELECTRICAL	Print Name <u>Mike Childers</u> License #: <u>home owner</u>	Signature <u>Mike Childers</u> Phone #: <u>352-474-9605</u>
MECHANICAL/ A/C	Print Name <u>Mike Childers</u> License #: <u>home owner</u>	Signature <u>Mike Childers</u> Phone #: <u>352 4749605</u>
PLUMBING/ GAS	Print Name <u>Mike Childers</u> License #: <u>home owner</u>	Signature <u>Mike Childers</u> Phone #: <u>352 4749605</u>
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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.

**CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Alachua
 OWNERS NAME Michael Childers PHONE _____ CELL 352 474 9400
 INSTALLER Vic Estrada PHONE 352 283 1510 CELL 352 283 1510
 INSTALLERS ADDRESS P.O. Box 1266 Dean Springs, FL 32655

MOBILE HOME INFORMATION

MAKE Elwood YEAR 1993 SIZE 14x26 x 14x26
 COLOR Light Brown SERIAL NO. GAFL D7SA 20215 W2
 WIND ZONE II SMOKE DETECTOR Yes
 INTERIOR:
 FLOORS Good (This home is in)
 DOORS Good (Excellent shape)
 WALLS Good
 CABINETS Good
 ELECTRICAL (FIXTURES/OUTLETS) Good
 EXTERIOR:
 WALLS / SIDING Good
 WINDOWS Good
 DOORS Good
 STATUS:
 APPROVED ✓ NOT APPROVED _____

NOTES _____
 INSTALLER OR INSPECTORS PRINTED NAME Vic Estrada
 Installer/Inspector Signature [Signature] License No. 071025135/1 Date 4-15-10

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 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

Code Enforcement Approval Signature [Signature]

Date 4-22-10

**CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED 6/21/10 BY LS IS THE MOBILE HOME ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
 OWNERS NAME Michael Childers PHONE 352 474 9045 CELL
 ADDRESS 210 SE Hardin Ct., High Springs, FL 32643
 MOBILE HOME PARK N/A SUBDIVISION Gilbert Park, Lot 2
 DRIVING DIRECTIONS TO MOBILE HOME 4415, 1/2 Coleman Lane, TR
Hardin Ct., 3rd property on right
 MOBILE HOME INSTALLER Vic Ethendle PHONE 386 462-7554 CELL

MOBILE HOME INFORMATION

MAKE Fleetwood YEAR 1993 SIZE 14 x 76 COLOR Light Brown
 SERIAL No. GAF1075A 2021SWK
 WIND ZONE II Must be wind zone I or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P= PASS F= FAILED

\$50.00

☒ 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

Date of Payment: _____

Paid By: _____

Notes: _____

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: _____

SIGNATURE St. D. Paul ID NUMBER 402 DATE 6-21-10