

- Tropical Storm DEBBY -
CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 8/7 BY 9 IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
OWNERS NAME JEFF RUSSELL PHONE _____ CELL 965-5687
ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION SRS ACRES - Unit 3
DRIVING DIRECTIONS TO MOBILE HOME 44th TO TAMMY LN TR TO COLVIN AVENUE
TL AND IT'S THE LAST PROPERTY ON L

MOBILE HOME INSTALLER FERNON JONES PHONE _____ CELL 965-5687

MOBILE HOME INFORMATION

MAKE SPRI YEAR 1988 SIZE 24 X 48 COLOR BEIGE

SERIAL No. GB1C520931A

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

NO CHARGE
= 1208-23

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 Jeff Russell ID NUMBER 304 DATE 8-8-12