William Birry 16. 3-13-18

de# 1152

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	TERMIT AT LIGATION MANOT ACTORED HOME INSTALLATION AT PERCATION
For Off	Te Use Only (Revised 7-1-15) Zoning Official By Building Official 7.6. 3-13-18 1803-26 Date Received 3/12 By Permit # 2570/36463
100000000000000000000000000000000000000	ne Zoning A3 Land Use Plan Map Category A
Comme	
	coting LOAC to this mytt - 2nd unit on Property
	p# Elevation Finished Floor River In Floodway
□ Reco	ed Deed or Property Appraiser PO Site Plan PH # 18-20 4 Well letter OR
	g well Fand Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid
	oproval Parent Parcel # STUP-MH STUP-MH
□ Ellisv	e Water Sys 🗆 Assessment tout County of In County to Sub VF Form
L	(Set upfin3-19-18) pissed
	D# <u>OQ - 4S - 15 - 06 330 - 001</u> Subdivision Lot#
New	Mobile Home Used Mobile Home MH Size 28 × 50 Year 2002
	cant Thomas Stinson Phone # 386-623-5281
Addı	ss 2397 sw thoonville are Lathe Cty, F1 32024
	of Property Owner Emma Low Miller Phone# 386-752-5786
• 911 /	ddress 26921 Sw hoonville Ave, Lake City FL 32024
	the correct power company - FL Power & Light - Clay Electric
	(Circle One) - Suwannee Valley Electric - Duke Energy
	(Father-Incol to Shomes Stysen)
Nam	of Owner of Mobile Home Phillip Carter Phone # 386-984-0899
Addı	ss 2397 SW KOONVILLE NIZ (NEC) SI 32024
-	
 Rela 	onship to Property Owner w GRAND OO
• Curr	nt Number of Dwellings on Property
Lot \$	ze50,39
Do y	u : Have Existing Drive or Private Drive or need Culvert Permit (Putting in a Culvert) (Blue Road Sign) (Blue Road Sign) (Currently upins) (Putting in a Culvert)
• is thi	Mobile Home Replacing an Existing Mobile Home NO
Drivi	g Directions to the Property 90 west to the onville ave, turn Left
	boonville are go 3 miles it will be the Lest house on the right
	Q
-	
■ Nam	of Licensed Dealer/Installer William Price Phone # 386 931 9678
	ers Address 3360 150 th place Lake City F1, 32024
	se Number <u>TH 104 1936</u> Installation Decal # <u>48 721</u>
\mathcal{I}_{T}	NSON IS AWARE OF WHAT'S needed 3.12.13 N Spoke Thomas 3.15.18 LH on 3-19-18 \$651.36
J	V Spoke Thomas 3.15.18 ct on 3-19-18 \$651,36
•	150

Typical pier spacing Address of home being installed Manufacturer nstaller: 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. WY:II'M **Mobile Home Permit Worksheet** 80HB lake lateral DY F longitudinal K Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) 0 City (f) placking marriage wall piers within 2' of end of home Koon Villa Installer's initials Length x width License # 22055 PE SINGHT ave per Rule 15C Manufacturer Longitudinal Stabilizing Device (LSD) and their pier pad sizes below. Other pier pad sizes (required by the mfg.) capacity bearing Perimeter pier pad size l-beam pier pad size Load Double wide 1500 psf 1500 psf 2500 psf 3500 psf 3500 psf Triple/Quad Single wide New Home large Opening wall openings 4 foot or greater. symbol to show the piers. (sq in) Footer size TIEDOWN COMPONENTS 16" x 16" PIER PAD SIZES X OĮ Serial # **Used Home** 18 1/2" x 18 1/2" (342)

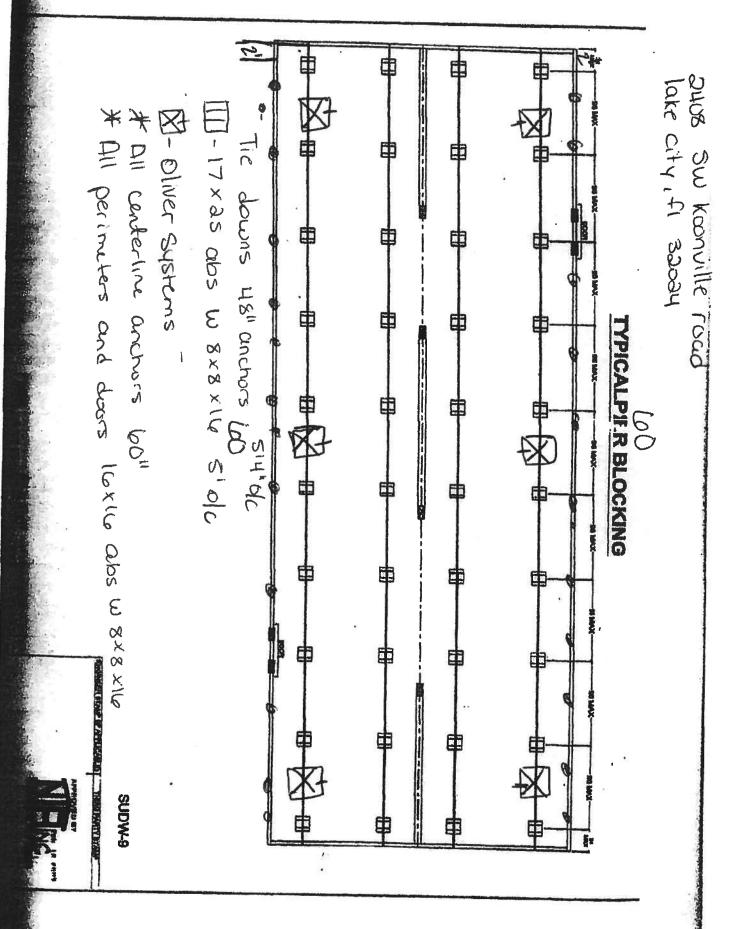
Mobile Home Permit Worksheet

	Connect all sewer drains to an existing sewer tap or septic tank. Pg.
	Plumbing
	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg
	Électrical
	Date Tested 3-7-18
Ran	ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name William Tile
Fine	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 holding capacity. Installer's initials
 	The results of the torque probe test is <u>\(\infty\)EQ</u> inch pounds or check here if you are declaring 5' anchors without testing
Typ	TORQUE PROBE TEST
2 20 20 20 20 20 20 20 20 20 20 20 20 20 2	x 1500 x 1500 x 1500
h =	Using 500 lb. increments, take the lowest reading and round down to that increment.
	2. Take the reading at the depth of the footer.
	1. Test the perimeter of the home at 6 locations.
Roc	POCKET PENETROMETER TESTING METHOD
핅	x iso x iso x iso
Wag	The pocket penetrometer tests are rounded down to \$\frac{1500}{2500}\$ psf or check here to declare 1000 lb. soilwithout testing.
	POCKET PENETROMETER TEST

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 Other: Installer verifles all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2	Weatherproofing The bottomboard will be repaired and/or taped. Yes Pg Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes Niscellaneous	I understand a property installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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 /// Installed: Pg. 111 Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes	Fastening multi wide units Floor: Type Fastener: Mulcul Walls: Type Fastener: Surfay Type Fastener: Logy Roof: Type Fastener: Logy Length: Spacing: 8 pacing: 8 pacin	Sits Preparation Sits Preparation Debris and organic material removed 465 90× Water drainage: Natural Swale Pad X Other
--	--	--	--	---

Installer Signature ___

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



MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

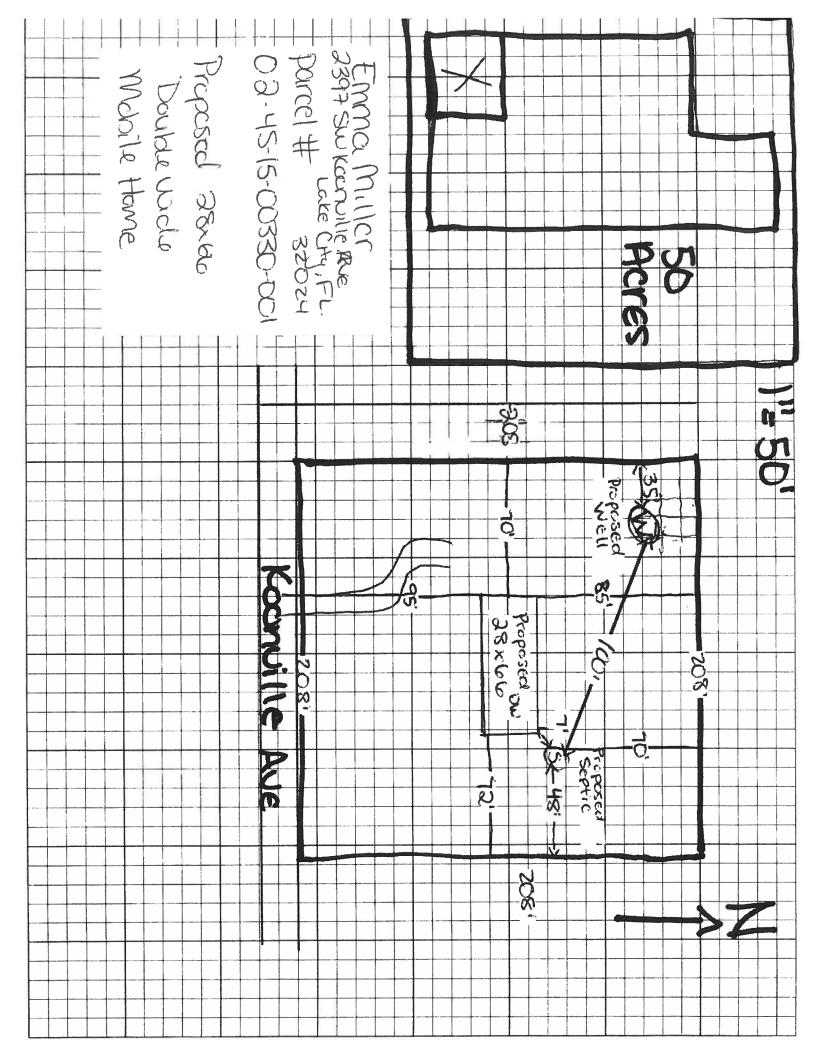
APPLICATION NUI	MBER 1803-26 CONTRACTOR Thomas Stinson PHONE 386 623.528
	THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT
records of the Ordinance 89-	ounty one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and 5, a contractor shall require all subcontractors to provide evidence of workers' compensation or neral liability insurance and a valid Certificate of Competency license in Columbia County.
	the permitted contractor is responsible for the corrected form being submitted to this office prior to the abcontractor beginning any work. Violations will result in stop work orders and/or fines.
ELECTRICAL	Print Name Thomas 3 finson Signature T. A. Signature 2386 623 5281 Qualifier Form Attached Qualifier Form Attached
MECHANICAL/	Print Name Thomas Stinson Signature 1. 1. Signature Phone #: 386 623-6281 Qualifier Form Attached

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.

1. Stinson - 386-623-5281

SITE PLAN CHECKLIST

1) Property Dimensions 2) Footprint of proposed and existing structures (including decks), label these with existing addresses 3) Distance from structures to all property lines 4) Location and size of easements 5) Driveway path and distance at the entrance to the nearest property line 6) Location and distance from any waters; sink holes; wetlands; and etc. 7) Show slopes and or drainage paths 8) Arrow showing North direction SITE PLAN EXAMPLE Revised 7/1/15 Show Your Road Name 809 120 Slope OTOS MOND ZOFO (My Property) Barn NOTE: 524 This site plan can be copied and used with 410 the 911 Addressing 325 470' Dept. application forms 60 **North** 328 North 211: MURRY Ly sodo +1 00 hl SCPHC 2 2 Slos Vines SUMOUNICE





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 AGENT AUTHORIZATION

I, William Price	give this authorit	y and I do certif	y that the below			
referenced person(s) listed on	this form is/are under my direct	supervision and	control and			
	ermits, call for inspections and					
Printed Name of Authorized	Signature of Authorized					
Person	Person	Agents Co	mpany Name			
Thomas Stinson	1 Stema	Owne	es C			
I, the license holder, realize that	t I am responsible for all permits	purchased an	d all work done			
under my license and I am fully	responsible for compliance with	all Florida Stat	utes Codes and			
Local Ordinances.			30,000,000			
I understand that the State Lice	nsing Board has the power and	authority to disc	rinline a license			
holder for violations committed by	by him/her or by his/her authoriz	ed person(s) th	rough this			
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.						
			•			
000.70						
License Holders Signature (Nota		41936	3-8-18			
•	arized) License f	Number	Date			
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: SUWANNE						
The above license holder, whose name is						
personally appeared before me and is known by me or has produced identification						
(-),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	on this <u>Oan</u> day	or march	, 20 <u>i8</u> .			
June 100	۸۸					
NOTARY'S SIGNATURE	X XX	(Seal/Stamp)				
V						
	opt printers large to					



Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
000100	SFR (MKT)	1.000 AC	1.00/1.00 1.00/1.00	\$10,420	\$10,420
005910	SWAMP/CYPR (AG)	2.000 AC	1.00/1.00 1.00/1.00	\$40	\$80
005600	TIMBER 3 (AG)	47.390 AC	1.00/1.00 1.00/1.00	\$232	\$10,994
009910	MKT.VAL.AG (MKT)	49.390 AC	1.00/1.00 1.00/1.00	\$0	\$183,279

Search Result: 21 of 64

© Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com



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, William Pi	give this authority f	or the job address show below
	bonville road.	and I do nortify that
	Job Address	, and I do certify that
	listed on this form is/are under my	
and is/are authorized to purcha	se permits, call for inspections and	d sign on my behalf.
Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is (Check one)
Thomas Stinson	AStima	Agent Officer Property Owner
		Agent Officer Property Owner
		Agent Officer Property Owner
under my license and I am fully	I am responsible for all permits puresponsible for compliance with a	
Local Ordinances.		
	nsing Board has the power and au	
	by him/her or by his/her authorized	
document and that I have full re	sponsibility for compliance granted	I by issuance of such permits.
Wells	THION	300
License Holders Signature (Nota	arized) License Nu	mber Date
NOTARY INFORMATION: STATE OF: <u>Florida</u>	COUNTY OF: SUWGENE	<u>L</u>
The above license holder, whose		
personally appeared before me (type of I.D.)	and is known by me or has produc on this 8th day o	red identification f March , 20 (8
Jangice Marc	o O	
NOTARY'S SIGNATURE	(S	eal/Stamp)
U		

JESS Notary Po My Comm Commis

JESSICA PRESCOTT
Notary Public, State of Florida

My Comm. Expires Oct. 1, 2019 Commission No. FF 923361 District No. 1 - Ronald Williams District No. 2 - Rusty DePratter District No. 3 - Bucky Nash District No. 4 - Everett Phillips District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:

3/12/2018 2:19:48 PM

Address:

2692 SW KOONVILLE Ave

City:

LAKE CITY

State:

FL

Zip Code

32024

Parcel ID

00330-001

REMARKS: Address for proposed structure on parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telepi Email: gis@columbiacountyfla.com

Telephone: (386) 758-1125



BUILDING DEPARTMENT Applica COLUMBIA COUNTY, FLORIDA OUT OF COUNTY MOBILE HOME INSPECTION REPORT

Application # 1803 26

COUNTY THE MOBILE HOME IS BEING MOVED FROMAbchua
OWNERS NAME THOMAS LEWIS STANSORHONE 386 623 5281 CELL 386 623-5281
INSTALLER WILLIAM R PTOP PHONE 407 4480963 CELIZIO 963-4298
INSTALLERS ADDRESS 3360 150th of Lake Coty FC 32024
MOBILE HOME INFORMATION
B
MAKE MI CO YEAR 2002 SIZE 38 X LOO 60 CONTROL OF THE SIZE 38 X
COLOR White SERIAL NO. H176106GL
WIND ZONE SMOKE DETECTOR
INTERIOR: FLOORS GOOD
DOORS gove
WALLS GOOD
CABINETS COUCL
ELECTRICAL (FIXTURES/OUTLETS) GOOD
EXTERIOR: WALLS / SIDDING
WINDOWS good .
DOORS GOOD
INSTALLER: APPROVED NOT APPROVED
INSTALLER OR INSPECTORS RRINTED NAME WILLIAM R PIECE
Mobile Home Installer Signature // License No TH-1041936 Date 3 to 18
NOTES:
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. <u>CALL 386-758-1008 TO SET UP THIS INSPECTION.</u> NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.
FOR OFFICE USE Building Inspectors Signature Date 3-13-18

2017 Tax Roll Year

updated: 3/7/2018

Parcel: << 02-4S-15-00330-001

	a ride.	7
- 7.		- 3
- 1	>:	> !
2		. 15

Owner & P	roperty Info	Resu	ilt: 21 of 64
Owner	MILLER EMMA LOU 2397 SW KOONVILLE A LAKE CITY, FL 32024	WE	
Site	2408 KOONVILLE AVE, LAKE CITY		
NW1/4 OF SW1/4 & BEG SW COR OF SW1/4 OF NW RUN N 240 FT, E 782.58 FT, N 221.39 FT, E 507.19 FT TO W R/W CR-252-A, RUN S 550.24 FT, W 1281.32 FT TO POB. ORB 316-190, 487-007, 717-247, 751-1104, 841-930, LIFE ESTATE & 1/2 UNDIV INT ORB 915-86 DC 1088-2more>>>			, E 507.19 FT W 1281.32 FT 7, 751-1104.
Area	50.39 AC	S/T/R	02-45-15
Use Code**	IMPROVED A (005000)	Tax District	3

^{&#}x27;The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

^{*}The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & A	ssessment Valu	ies	
2017 Cer	tified Values	2018 Wo	rking Values
Mkt Land (1)	\$9,472	Mkt Land (1)	\$10,420
Ag Land (2)	\$11,074	Ag Land (2)	\$11,074
Building (1)	\$57,202	Building (1)	\$59,424
XFOB (3)	\$2,855	XFOB (3)	\$2,855
Just	\$236,146	Just	\$255,978
Class	\$80,603	Class	\$83,773
Appraised	\$80,603	Appraised	\$83,773
Assessed	\$80,603	Assessed	\$83,773
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$80,603 clty:\$80,603 other:\$80,603		county:\$83,773 city:\$83,773 other:\$83,773
	school:\$80,603	William Property and Control of C	school:\$83,773

© 2016 © 2013 © 201	Contract Con	© 2005 © 200	04 0 1999	Sales
+		02-4S-15-0033 MILLER EMM/ 2408 SW KOO	A LOU	EVANET
	<i>y</i> -	02/4S/15 (IMPI Txbl:\$83,773.0	ROVED A) 5	0.39AC
	,		,	

Google Maps

▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
3/23/2009	\$100	1170/2115	QC		U	11
12/1/2000	\$100	915/0866	WD		**************************************	03
5/28/1997	\$55,000	841/0930	WD		U	03

Aerial Viewer

Pictometery

Building Characteristics

Bldg Sketch Bldg Item		Bldg Desc* Year Blt		Base SF	Actual SF	Bldg Value	
Sketch	1	SINGLE FAM (000100)	1958	1697	1844	\$59,424	
A							

^{*}Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra Features & C	ut Buildings (Codes)
--------------------	----------------------

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	0	\$500.00	1.000	0 x 0 x 0	(000,00)
0166	CONC,PAVMT	2005	\$1,155.00	462.000	14 x 33 x 0	(000.00)
0190	FPLC PF	2016	\$1,200.00	1.000	0 x 0 x 0	(000.00)



Dedication 10 Ac to this M/H

STATE OF FLORIDA COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We),	Lou Miller
as the owner of the below described proper	ty:
Property tax Parcel ID number _02-49	1-15-00330-001
Subdivision (Name, lot, Block, Phase)	(20.71)
Subdivision (Name, lot. Block, Phase) Give my permission for	Lewis Stinson T to place a
Circle one Mobile Home Travel Trailer	
I (We) understand that the named person(s) permit on the property number I (we) have assessment for solid waste and fire protection	
Emma Son Miller	7/1/14
Owner Signature	Date
Owner Signature	Date
Owner Signature	Date
	day of <u>Jack</u> , 2018. This
	me or produced ID <u>Jersonally Known</u> . (Type) Leggy R. Corter Notary Printed Name
Notary Stamp/	

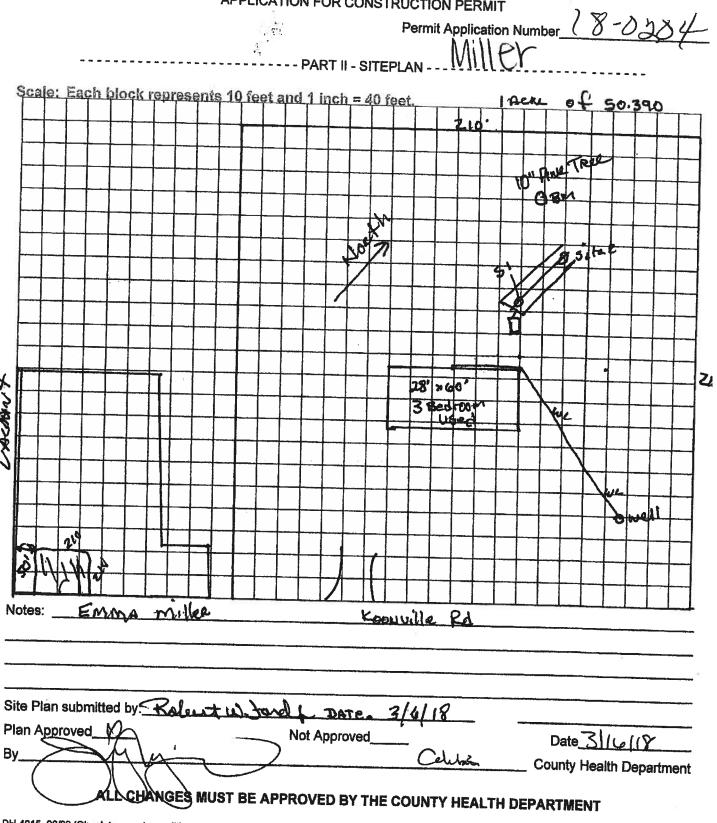
PEGGY B. CARTER
MY COMMISSION # FF 153373
EXPIRES: December 13, 2018
Bonded Thru Budget Notary Services

STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO.	18:0204
DATE PAID:	3/8/18
FER PAID:	310 114
RECRIPT #:	1332289

APPLICATION FOR CONSTRUCTION PERMIT	RECEIPT #: 133
APPLICATION FOR: [V] New System [] Existing System [] Holding Temporary [] Repair [] Abandonment [] Temporary APPLICANT:	Tank [] Innovative
AGENT: Robert Ford Jr. North Florida Septic Tank Inc;	200 755 0000
MAILING ADDRESS: 741 SE State Road 100 Lake City Fla 32025	TELEPHONE: 386-755-6372
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLOR APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRA	SYSTEMS MUST HE CONSTRUCTED IDA STATUTES. IT IS THE THE LOT WAS CREATED OR
PROPERTY INFORMATION	
LOT: BLOCK: SURDIVISION: MECTS 4 DO)	ds -
$\Lambda \Omega = \Lambda \Omega = \Lambda \Omega = \Lambda$	M OR EQUIVALENT: [Y N]
PROPERTY SIZE 0,390 ACRES WATER SUPPLY: [1] PRIVATE PUBLIC	
IS SKWED AVAILABLE AC DED COL CO.	
PROPERTY ADDRESS: 2408 SW KOONVILLE AVE	STANCE TO SEWER:FT
DIRECTIONS TO PROPERTY: Hay 90 w to Koonville	TL Follow Alma
to END ON RIGHT	TOTAL MALINE
BUILDING INFORMATION [V] RESIDENTIAL [] COMME	RCIAL
Unit Type of No. of Building Commercial/In No Establishment Redrooms Account Commercial/In	stitutional System Design
1 SMO FAMILY 3 28×60 Table 1, Chap	ter 64E-6, FAC
2 1680	
3	
4	
[] Floor/Equipment Drains [] Other (Specify)	
SIGNATURE: Robert W June	DATE: 3/0/18
DH 4015, 08/09 (Obsoletes previous editions which man not to	

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT





ANDREWS SITE PREP, INC. 8230 SW STATE ROAD 121 LAKE BUTLER, FL 32054 386-867-0572 WELL LIC # 2690

DATE: 3/16/18

TO: COLUMBIA COUNTY BUILDING DEPARTMENT

WE WILL BE DRILLING A 4" WELL FOR THOMAS STINSON LOCATED AT 2397 SW KOONVILLE AVE, LAKE CITY FL 32024 WHOES PARCEL # 02-4S-15-00330-001. THE WELL SHOULD GO APPROXIMATELY 180 FEET DEEP WITH A CASING DEPTH OF 120 FEET. WE WILL INSTALL A 1HP AERMOTOR SUBMERSIBLE PUMP AND A 32 GALLON CHALLENGER BLADDER TANK.

THANK YOU,

BART ANDREWS

Mobile Home

Applicant: THOMAS STINSON (386-984-0899) Application Date: 3/16/2018

Action -

1. GETTING STARTED	Completed Inspections					
	Add Inspection Re	elease Pow	ver			
2. JOB LOCATION	Schedule Inspection (ScheduleInspection.aspx?Id=37065)					
2 000/7040700	Inspection	Date	Ву	Notes		
3. CONTRACTOR	Passed: Mobile Home - In County Pre-Mobile Home before set-up	3/19/2018	TROY CREWS	×		
4. MOBILE HOME DETAILS						
5. APPLICANT	The completion date mu the public.	st be set To	release Cert	ifications to		
6. REVIEW	Permit Completion Date (Releases Occupancy an	d Completio	on Forms)			
7. FEES/PAYMENT						
0	Incomplete Requested Inspections					
8. DOCUMENTS/REPORTS	Inspection [Date	By No	tes		
9. NOTES/DIRECTIONS						
10. INSPECTIONS (1)						