

Permit No. _____

Okeechobee County Planning and Development Department
1700 NW 9th Avenue Suite A; Okeechobee, FL 34972
(863) 763-5548 • FAX (863) 763-5276

Application for Pre-Tie Down Inspection

Permit applicant's name _____

Current location/address of unit _____

Directions to property _____

Year unit manufactured _____ Manufacturer/model _____

Width _____ length _____ total area _____ sq. ft.

Serial/ID numbers _____

Proposed location/address of unit _____

Subdivision _____ Block _____ Lot _____

Property owner _____

Contact person name _____ Phone _____

----- **Do Not Write Below This Line** -----

Inspector's Findings

Dimensions of unit: width _____ length _____ total area _____ sq. ft.

Roof overhang in inches: ends _____ sides _____

Roof pitch _____ Roof materials _____

Siding materials _____

Roofing materials _____

Standard housing code checklist prepared by inspector attached? (____ Y) (____ N)

Serial/ID numbers verified? (____ Y) (____ N) Comments _____

Overall condition of unit (____ Very Good) (____ Good) (____ Fair) (____ Poor)

Comments/summary description of unit _____

Inspected By _____ Date _____