

Compliance Inspection Report

U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

OMB No. 2502-0189
(exp. 12/31/2007)

Note: Reports of Final and Repair Compliance Inspections left at site always require reviewer's signature to be Official. Consult mortgagee for official reports.

Builder's Name and Address Lennar Homes 4482 Creekside Drive Mulberry, FL 33860	a. <input checked="" type="checkbox"/> Report not left at site. b. <input type="checkbox"/> Report not official without reviewer's signature.	FHA Case Number 000-0112298-703 <hr/> Date of Inspection (mm/dd/yyyy) 10/22/2010
Mortgagee's Name and Address Will Sample 6123 Weather Street Rego Park, NY 11374	Property Address 4123 Main Creek Mulberry, FL 33860	

I. Inspection of On-Site Improvements Reveals

- | | |
|--|---|
| 1. Construction <input type="checkbox"/> was, <input type="checkbox"/> was not begun prior to the date of mortgage insurance approval shown on the commitment, statement of appraised value or "Early Start" letter. (Applies to the initial report on new construction)
2. <input type="checkbox"/> Builder other than named in application
3. <input type="checkbox"/> Unable to make inspection. (Explain below)
4. <input type="checkbox"/> Accepted construction exhibits not available at site
5. <input type="checkbox"/> Individual Sewage disposal system; <input type="checkbox"/> Individual Water supply system
<input type="checkbox"/> No noncompliance. <input type="checkbox"/> Correction essential as explained below.
<input type="checkbox"/> Submit Health Department letter
6. <input type="checkbox"/> Correction req'd. by rppt. dated _____ not acceptably completed
7. <input type="checkbox"/> Repairs required by form HUD-92800.5B not acceptably completed
8. <input type="checkbox"/> Correction essential as explained below
<input type="checkbox"/> a. Will examine at next inspection
<input type="checkbox"/> b. Do not conceal until reinspected
9. <input checked="" type="checkbox"/> No noncompliance observed | 10. <input type="checkbox"/> Acceptable variations as described below (Request for Change, form HUD-92577, may be submitted).
11. <input type="checkbox"/> Extensive noncompliance as explained below (see IV.A below)
12. <input type="checkbox"/> On-site improvements acceptably completed subject to receipt of certification that mortgagee's inspection reveals satisfactory completion of all items listed below.
13. <input type="checkbox"/> On-site improvements acceptably completed except items listed below, completion of which is delayed by conditions beyond control of the builder (see IV.B below).
14. <input type="checkbox"/> On-site improvements acceptably completed
15. <input type="checkbox"/> Off-site improvements
<input type="checkbox"/> a. Correction/Completion essential as explained below
<input type="checkbox"/> b. Completion assured by escrow agreement or governing authority
<input type="checkbox"/> c. Acceptably completed |
|--|---|

II. Explanation of statements checked in Parts I and III

<input type="checkbox"/> Initial Inspection <input type="checkbox"/> Framing Inspection <input checked="" type="checkbox"/> Final Inspection <input type="checkbox"/> Other (explain) <input type="checkbox"/> Repair Inspection	Inspection Number 10221002
No.	No.

Certification: I certify that I have carefully inspected this property on this date. I have no personal interest, present or prospective, in the property, applicant, or proceeds of the mortgage. To the best of my knowledge I have reported all noncompliance, work requiring correction, and unacceptable work.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature	Date (mm/dd/yyyy)	<input checked="" type="checkbox"/> Fee Inspector <input type="checkbox"/> Appraiser <input type="checkbox"/> DE Staff Inspector <input type="checkbox"/> HUD Inspector	ID Number
	10/22/2010		N854

III. Specific Conditions Required by the HUD-92800.5B, Not Requiring Field Inspection

16. Submit items or resubmit incomplete items as noted above.
 17. Acceptable Compliance with all specific conditions not requiring field inspection.
 18. Submit Termite Soil Treatment Guarantee.
 None

Approved	Signature	Date (mm/dd/yyyy)	<input type="checkbox"/> Direct Endorsement Underwriter <input type="checkbox"/> Chief Architect <input type="checkbox"/> Deputy	ID Number
<input type="checkbox"/> as modified by me				

IV. To Mortgagee: When signed below, refer to the statement on the back corresponding to the designation checked.

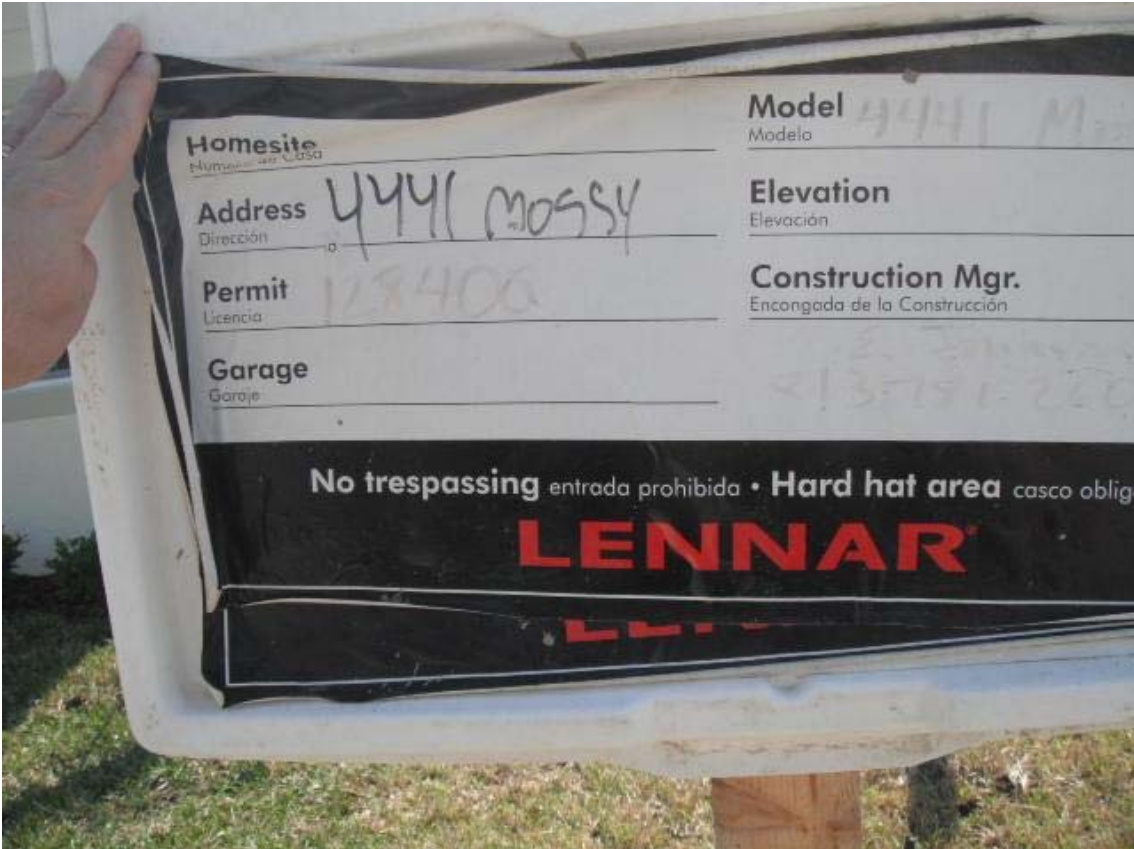
<input type="checkbox"/> A. Noncompliance <input type="checkbox"/> (a) Variations from exhibits. <input type="checkbox"/> (b) Unacceptable construction. <input type="checkbox"/> (c) Premature construction.	<input type="checkbox"/> B. Compliance -- Incomplete Items. "Mortgagee's Assurance of Completion", HUD-92300, may be submitted. for completion \$ _____ not later than:(mm/dd/yyyy)	<input type="checkbox"/> C. Final Acceptance. Closing papers may be submitted provided mortgage credit analysis is acceptable
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Signature	Date (mm/dd/yyyy)	<input type="checkbox"/> Direct Endorsement Underwriter <input type="checkbox"/> Director of Housing Development <input type="checkbox"/> Deputy	ID Number

For HUD Use Only for concurrence of Direct Endorsement Processing of this Compliance Inspection Report. If signed, this final report is considered processed by HUD and, thereby, convertible to the Veterans Administration.	Signature of HUD Authorized Agent	Date (mm/dd/yyyy)



Front



Property Identification

POLK COUNTY BUILDING PERMIT

REGULATIONS DIVISION
 Drawer CS02
 P.O. Box 9005
 Bartow, FL 33811-9005
 PHONE: (863) 534-6000
 www.polkcountyfla.gov

THIS CARD TO BE POSTED ON STREET SIDE OF LOT BEFORE WORK IS STARTED
PERMIT VOID IF NO INSPECTION APPROVED IN ANY SIX-MONTH PERIOD

No. 128400 Issue Date _____
 Location 4441 MOSSY CREEK AVE Work _____
MULBERRY, FL 33860 Description sfr.lot#133
 Land Use _____
 Structure SINGLE FAMILY DWELLING District AGRICULTURAL/RESIDENTIAL F

Ext. Side _____ Ext. Rear _____ Int. Side RIGHT 7.0 Int. Rear 15.0

INSPECTIONS FOR INSPECTION REQUEST PHONE 534-6057
 THIS IS AN AUTOMATED ANSWERING SYSTEM. HAVE YOUR PERMIT NUMBER AND INSPECTION REQUEST CODE READY.

1 st PLUMBING ROUGHIN		ELECTRICAL ROUGHIN		MECH ROUGHIN	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE
2 nd PLUMBING ROUGHIN		ELECTRICAL FINAL		MECH FINAL	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE
PLUMBING FINAL		SEWER TAP OR SEPTIC TANK		DRIVEWAY	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE
MH SET UP		MH SHARING		INSULATION	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE
DRY DOWLING		ROOF COVERING		FINAL	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE
FM FIREWALL		FM HOOD SYSTEM		FM FINAL	
INSPECTOR	DATE	INSPECTOR	DATE	INSPECTOR	DATE

DO NOT COVER WORK UNTIL IT HAS BEEN INSPECTED AND APPROVED
 ELECTRICAL CONNECTION UNTIL DRIVEWAY AND SEPTIC TANK SYSTEMS ARE APPROVED
 TAG INDICATES REJECTION AND REINSPECTION FEE MUST BE PAID BEFORE FINAL INSPECTION
 NOTICE OF COMMENCEMENT (NOC) MUST BE SUBMITTED PRIOR TO FIRST INSPECTION

WARNING TO OWNER:
 FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR PERMITS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. IF THIS PERMIT WAS ISSUED SUBJECT TO A CONDITIONAL LETTER OF MAP REVISION (CLOMR) FROM THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) BEFORE THE ISSUANCE OF LETTER OF MAP REVISION (LOMR), THE OWNER IS RECORDING AT THEIR OWN RISK AND MUST RECEIVE A LOMR FROM FEMA BEFORE A CERTIFICATE OF COMPLETION (COC) WILL BE ISSUED BY POLK COUNTY.

Building Permit



Right Elevation



Left Elevation



Rear



AC Condenser - Working



General Interior



Kitchen



Lanudry



Range



Refrigerator



Dishwasher & sink



Main Electric Panel



Water Heater



Garage



Bathroom



Tub/Shower



Plumbing Fixtures



Master Shower



Garden Tub



Master Sinks



Fan Coil Unit - Working



INVOICE

Invoice Date: October 22, 2010

Client Information:

Attention: Sharron Hayston
IBERIABANK Mortgage Co.
3550 Buschwood Park Drive
Tampa, FL 33618

Loan # 10079602

Property Inspected:

William Joseph Mellas
4441 Mossy Creek Avenue
Mulberry, FL 33860

FHA Case # 093-7112298-703

Inspection Date:

October 22, 2010
01:00 PM

Inspection # 10221002

Inspections Services Rendered

FHA Compliance Inspection - Final

Inspector:

Joseph T. Burkeson
Cell: 813-335-6578

HUD # N854

Amount Due: \$300.00

Thank You



American Society of Home Inspectors