

Mobile Home Permit Worksheet

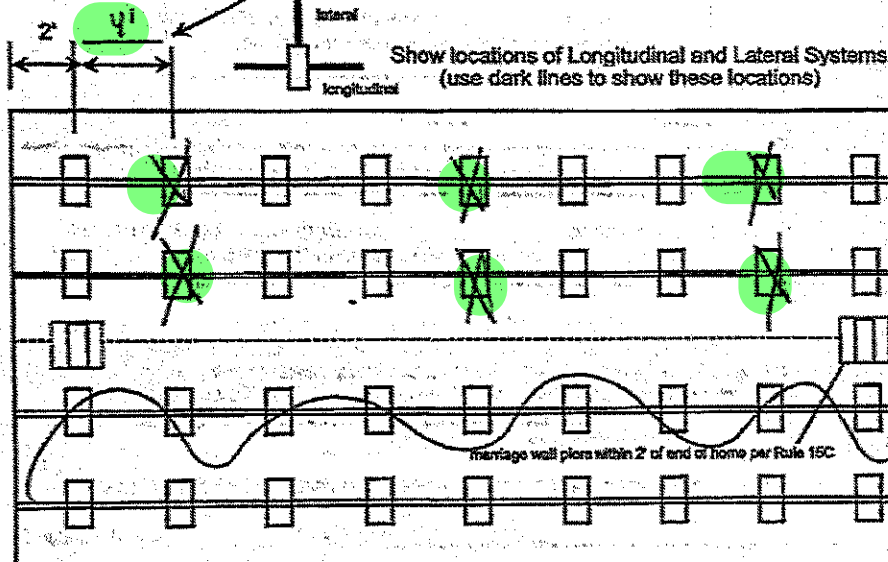
Customer - Danlie
U2

Installer: DANIELA HALL License # 1144605
Address of home being installed: 1334 SW NEWARK Dr.
Fort White, FL
Manufacturer: Fleetwood Length x width: 66x16

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: DAH

Typical pier spacing



lg systems



Application Number: _____ Date: _____

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 # 108699
Triple/Quad ☐ Serial # FLE260GA-2469970A

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 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size: 17.5 x 22.5
Perimeter pier pad size: 16 x 16
Other pier pad sizes (required by the mfg.): _____

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 _____

N/A

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer: OLIVER TECH
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer: OLIVER TECH

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	448
24 x 24	576
26 x 26	676

ANCHORS

4 ft 30 5 ft 0

FRAME TIES

within 2' of end of home spaced at 5' 4" oc 0

OTHER TIES

Number
Sidewall 30
Longitudinal 11
Marriage wall 11
Shearwall 11

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Application Number: _____ Date: _____

POCKET PENETROMETER TEST

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

X _____ 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 350 inch pounds or check here if you are declaring 5" anchors without testing _____. 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.

DAK Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name DANIEL A. HAW

Date Tested 12-3-24

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. 65

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 69

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 69

Site Preparation

Debris and organic material removed yes
Water drainage: Natural _____ Swale _____ Pad ☒ Other _____

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: N/A Length: N/A Spacing: N/A
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: _____
Pg. N/A Between Floors Yes _____
16 x 66 Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

The bottomboard will be repaired and/or taped. Yes Pg. 112
Siding on units is installed to manufacturer's specifications. Yes
Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

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
Other: N/A

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature Daniel Haw Date 12-3-24

Order #: 6153	Label #: 108699	Manufacturer: FLEETWOOD	(Check Size of Home)
Homeowner: LIZ BAILLIE	Year Model: 2025	Single ☒	
Address: 1334 SW NEWARK DR	Length & Width: 66 X 16	Double ☐	
City/State/Zip: FORT WHITE FL	Type Longitudinal System: OLIVER TECH	Triple ☐	
Phone #:	Type Lateral Arm System: OLIVER TECH	HUD Label #:	
Date Installed:	New Home: ☒ Used Home: ☐	Soil Bearing / PSF:	
Installed Wind Zone: II	Data Plate Wind Zone: II	Torque Probe / in-lbs:	
Note:		Permit #:	

SERIAL# FLE2606A2469970A



**STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL**

108699

LABEL #	DATE OF INSTALLATION
DANIEL A HALL	
NAME	
IH / 1144605 / 1	6153
LICENSE #	ORDER #

**CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.**

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

I, DANIEL A. HALL (license holder name), licensed qualifier
for HALLS TRANSPORT (company name), do certify that

the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>TREEA Foster</u>	1. <u>[Signature]</u>
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

[Signature]
License Holders Signature (Notarized)

1144605
License Number

12-3-24
Date

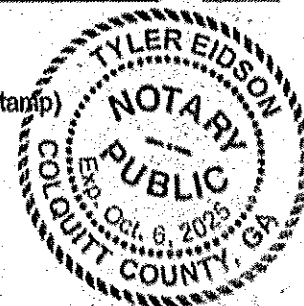
NOTARY INFORMATION:

STATE OF: Georgia COUNTY OF: Colquitt

The above license holder, whose name is _____
personally appeared before me and is known by me or has produced identification
(type of I.D.) license on this 3 day of December, 2024.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

*Use to authorize
Agent to pull
permit on Installers
behalf.

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, DANIEL A. HALL, give this authority and I do certify that the below
Installers Name

referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
TREER Foster	<i>Treer Foster</i>	Daniel Hall MH Setup

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license
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.

Daniel Hall License Holders Signature (Notarized) 1144605 License Number 12-3-24 Date

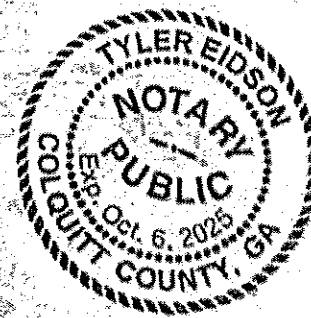
NOTARY INFORMATION:

STATE OF: Georgia COUNTY OF: Colquitt

The above license holder, whose name is Tyler Eidson,
personally appeared before me and is known by me or has produced identification
(type of I.D.) License on this 3 day of December, 2024.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)





COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

I, DANIEL A. HALL (license holder name), licensed qualifier
for HALLS TRANSPORT (company name), do certify that
the below referenced person(s) listed on this form is/are employed by me directly or through an
employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and
control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. TEEA Foster	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
must notify this department in writing of the changes and submit a new letter of authorization
form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
use your name and/or license number to obtain permits.

Daniel A. Hall License Holders Signature (Notarized) 1144605 License Number 12-3-24 Date

NOTARY INFORMATION:

STATE OF: Georgia COUNTY OF: Colquitt

The above license holder, whose name is _____
personally appeared before me and is known by me or has produced identification
(type of I.D.) license on this 3 day of December, 20 24.

NOTARY'S SIGNATURE

(Seal/Stamp)

