



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, Ronald Ryan Norris, give this authority for the job address show below
Installer License Holder Name

only, 261 NW Wilson St, and I do certify that
Job Address

the below 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	Authorized Person is... (Check one)
Sonja North	Sonja North	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

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.

[Signature]
License Holders Signature (Notarized)

JH1135009

License Number

11/14/23
Date

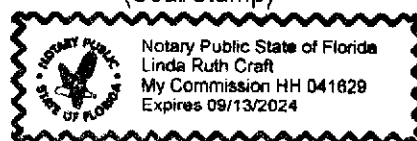
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronald Ryan Norris, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 14th day of November, 2023.

Linda Ruth Craft
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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, [Signature], give this authority and I do certify that the below
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
Sony North	Sony North	

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.

[Signature]

License Holders Signature (Notarized)

TH135009

License Number

11/14/23

Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Ronald Ryan Norris,
personally appeared before me and is known by me or has produced identification
(type of I.D.) 14th on this November, 20 23.

Linda Ruth Craft

NOTARY'S SIGNATURE

(Seal/Stamp)





Institute for Building Technology
and Safety (IBTS)

MANUFACTURED HOME PERFORMANCE VERIFICATION CERTIFICATE®

Order#:	LVDP478107	Issue Date:	11/14/2023
Reference No:	N/A		
Verification:	IBTS's Manufactured Home Data Verification Team has researched regulatory records on the Pioneer Housing Systems #2, Fitzgerald, GA , manufactured home having the serial number(s) and date of manufacture identified below. Based on shipment records maintained by IBTS, as required by the U.S. Department of Housing and Urban Development, provided by the home manufacturer and pursuant to 24 CFR 3282.552, IBTS verifies the following home performance information listed below corresponds to the home's initial destination and the construction standards set forth in 24 CFR 3280 at the time the home was labeled.		

Serial Number(s):	PH2407GA2872	Manufacture Date:	06-04-1997
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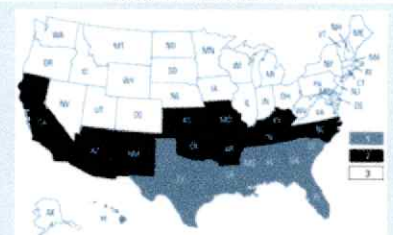
Wind Zone: Zone II



Roof Load Zone: South



Thermal Zone: Zone 1



Verification Provided by the Institute for Building Technology and Safety

Abd. L. Gornani
President

DISCLAIMER: This information is applicable only to the home having serial numbering and date of manufacture noted above. IBTS provides this verification based on the production reports provided by the home manufacturer and the zone requirements in effect at the time the home was labeled by the home manufacturer. IBTS makes no representations beyond those set forth herein and is not liable for modifications to the home's construction or subsequent home moves that may affect the home performance information verified above.

The Institute for Building Technology and Safety
(a nonprofit organization)

45207 Research Place, Ashburn VA 20147 | 866-482-8868 | www.ibts.org

IBTS Verification Seal



Mobile Home Permit Worksheet

Installer: Ronald Ryan Davis License # 1H1135009

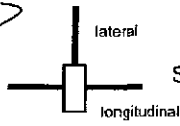
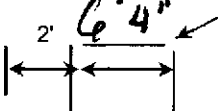
Address of home being installed 261 NW Wilson St

Manufacturer _____ Length x width _____

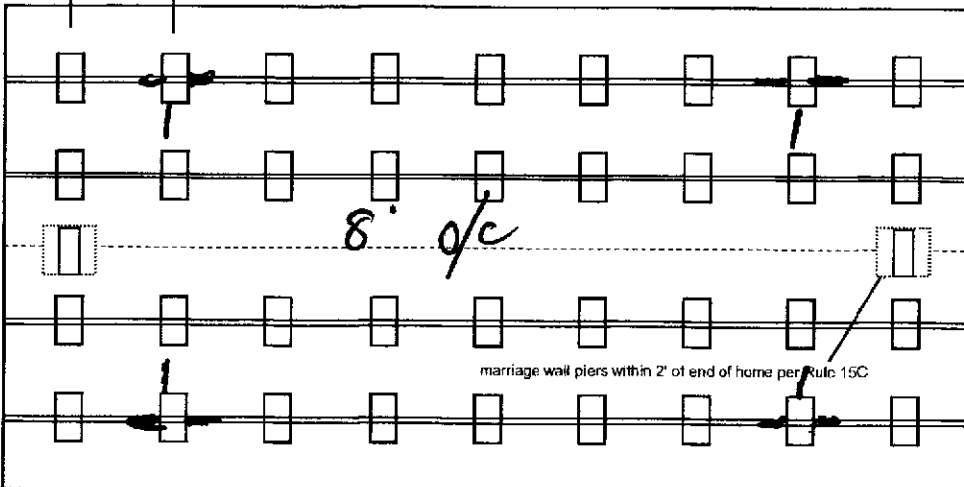
NOTE: If home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials RD

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



marriage wall piers within 2' of end of home per Rule 15C

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 # 104583

Triple/Quad ☐ Serial # PH2407GA2872

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 24 x 24

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 8' o/c Pier pad size 16 x 16

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer 1101 V 3T1

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer 1101 V 3T1

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	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft ☒ 5 ft

FRAME TIES

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

OTHER TIES

Number 28
Sidewall _____
Longitudinal 4
Marriage wall _____
Shearwall _____

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

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

x 1000 x 1000 x 1000

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 1000 x 1000 x 1000

TORQUE PROBE TEST

The results of the torque probe test is 285 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 requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Ronald Ryan Norris

Date Tested

11-14-2023

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. 15/c

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15/c

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15/c

Application Number: _____

Date: _____

Site Preparation

Debris and organic material removed _____

Water drainage: Natural Swale Pad ✓ Other _____

Fastening multi wide units

Floor: Type Fastener: metal Length: 6" Spacing: 16" o/c
Walls: Type Fastener: metal Length: 4" Spacing: end to end
Roof: Type Fastener: metal Length: _____ Spacing: end to end
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galy 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: foam
Pg. 15/c

Installed:

Between Floors Yes ✓

Between Walls Yes ✓

Bottom of ridgebeam Yes ✓

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓ Pg. 15/c
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

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: _____

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

Date

11-14-2023

License Number: IH / 1135009 / 1 Name: RONALD "RYAN" NORRIS

Order #: 5988	Label #: 104583	Manufacturer:	(Check Size of Home)
Homeowner:		Year Model:	Single _____
Address:		Length & Width:	Double _____
			Triple _____
City/State/Zip:		Type Longitudinal System:	HUD Label #:
Phone #:		Type Lateral Arm System:	Soil Bearing / PSF:
Date Installed:		New Home: _____ Used Home: _____	Torque Probe / in-lbs:
Installed Wind Zone:		Data Plate Wind Zone:	Permit #:
Note:			

OTIS

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL
104583

LABEL #	DATE OF INSTALLATION
RONALD "RYAN" NORRIS	
NAME	
IH / 1135009 / 1	5988
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 REQUESTED.