Mobile Home Permit Worksheet

Installer : Brent Strickland License #IH1104218				
Address of home being installed	TBD Parcel 30-2S-17-04806-001			
Manufacturer Live	Oak Length x width 60X28			
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 Typical pier spacing 2' Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)				
├Ш - 田				
				
	marriage wall piers within 2' of end of home per Rule 15C			
Heli-				
	<u> </u>			

Application Number:Date:					
Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C					
ne III]				
PIER SPACING TABLE FOR USED HOMES					
24" X 24" (576)*	26" x 26" (676)				
7'	8'				
	8'				
	8'				
	8'				
	1 8				
ULARPA	D SIZES				
Pad Size	Sq In				
16 x 16	256				
16 x 18	288				
3.5 x 18.5	342				
6 x 22.5 17 x 22	360 374				
	S 24" X 24" (576)* 7' 8' 8' 8' 8' 8' 8' 6' ULAR PA Pad Size 16 x 16 16 x 18 3.5 x 18.5 6 x 22.5				

	11 11	16 x 16	256
Perimeter pier pad size		16 x 18	288
remme	tel piel pad 3120	18.5 x 18.5	342
Other pier pad sizes (required by the mfg.)		16 x 22.5	360
		17 x 22	374
		13 1/4 x 26 1/4	348
	Draw the approximate locations of marriage	20 x 20	400
wall openings 4 fo	wall openings 4 foot or greater. Use this	17 3/16 x 25 3/16	441
	symbol to show the piers.	17 1/2 x 25 1/2	446
	Syllibol to chow the prove	24 x 24	576
List all marriage wall openings greater than 4 foot and their pier pad sizes below.		26 x 26	676
		ANCHORS	7

Pier pad size Opening

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

4 ft 5 ft

FRAME TIES

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

OTHER TIES

Sidewall Longitudinal Marriage wall Shearwall

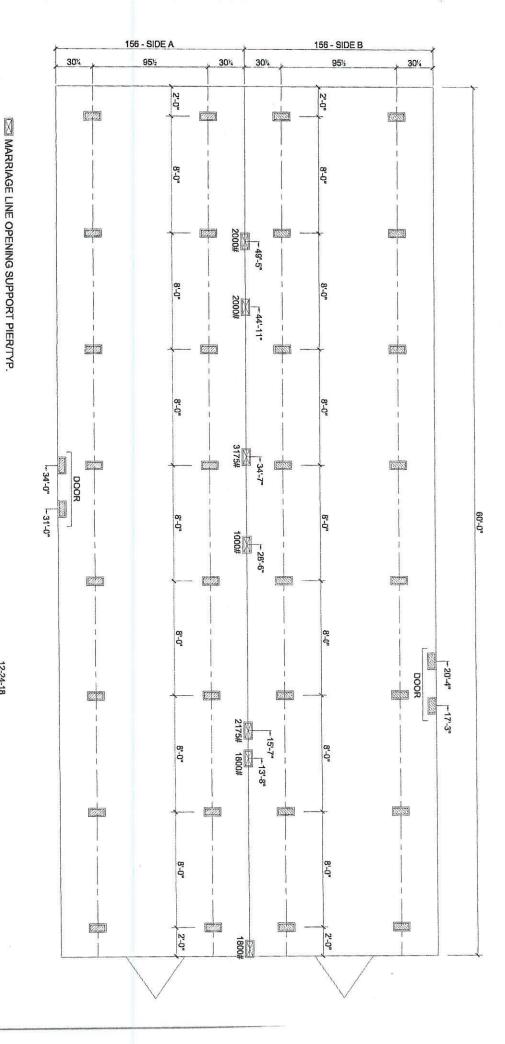
Mobile Home Permit Worksheet

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 29

	Site Preparation
The pocket penetrometer tests are rounded down to psf or check here to declare 1000 lb. soil without testing.	Debris and organic material removed Water drainage: Natural Swale Pad Other .
	Fastening multi wide units
x 1000 x 1000 x 1000 POCKET PENETROMETER TESTING METHOD 1. Test the perimeter of the home at 6 locations.	Floor: Type Fastener: (AGS Length: 5", Spacing: 16", Walls: Type Fastener: Screws Length: 4", Spacing: 16", Spacing: 16", Type Fastener: 1235 Length: 6", Spacing: 16", 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.
Take the reading at the depth of the footer.	Gasket (weatherproofing requirement)
3. Using 500 lb. increments, take the lowest reading and round down to that increment. X OOO	I understand a properly 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 B.S. Type gasket FOOM Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes
snowing 275 inch pourids of less will require 5 foot affectors.	Weatherproofing
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 4800 lb holding capacity.	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
Installer's initials	Miscellaneous
ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER Installer Name United Health Heal	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:
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. 29	Installer verifies all information given with this permit worksheet is accurate and true based on the
Plumbing	manufacturer's installation instructions and or Rule 15C-1 & 2
Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28	manuacturer a matanation manuactions and or real root of

Application Number:

Installer Signature



MODEL: L-2603G - 28 X 60 3-BEDROOM / 2-BATH Live Oak Homes

MAIN ELECTRICAL

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS.
- FOOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC.
- FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

12-24-18

FOUNDATION NOTES: SUPPORT PIER/TYP

ELECTRICAL CROSSOVER

(E)(G)

SEWER DROPS DUCT CROSSOVER

- WATER INLET

 - WATER CROSSOVER (IF ANY)
 - () RETURN AIR (WIOPT, HEAT PUMP OH DUCT)
 (J) SUPPLY AIR (WIOPT, HEAT PUMP OH DUCT)
 - GAS INLET (IF ANY)
- GAS CROSSOVER (IF ANY)

District No. 1 - Ronald Williams

District No. 2 - Rocky Ford

District No. 3 - Robby Hollingsworth

District No. 4 - Toby Witt

District No. 5 - Tim Murphy

BUILDING AND ZONING DEPARTMENT

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

MOBILE HOME INSTALLER **OBLIGATION LETTER**

I, Brent Strickand, of Strick	and Mobile Home Service, license number (Company Name)
IH 104218, do hereby agree to aff home as required by law and provide a copy	ix the installation decal onto this manufactured
	ecome available I must provide them to obtain any
further permits in Columbia County, Florida Signature – Licensed Mobile Home Installer	
<u>Job</u>	<u>Information</u>
Job Name:	
Location:	
Application or Permit #	

BOARD MEETS FIRST AND THIRD THURSDAY AT 5:30 P.M.



COLUMBIA COUNTY BUILDING DEPARTMENT

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

LICENSED QUALIFIER AUTHORIZATION

1, Brent Strickland	(license holder name), licensed qualifier			
for	(company name), do certify that			
the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or 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 and sign permits; call for inspections and sign subcontractor verification forms on my behalf.				
Printed Name of Person Authorized	Signature of Authorized Person			
1. Brody Pack	1. 1			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
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 agents, 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.				
Licensed Qualifiers Signature (Notarized)	## 1104218 4/28/22 Date/			
NOTARY INFORMATION: STATE OF: FORIAL COUNTY OF: Suwanne e				
The above license holder, whose name is personally appeared before me and is known (type of I.D.)	by me or has produced identification on this day of heri , 2022.			
NOTARY'S SIGNATURE	(Seal/Stamp)			
	LISA L PAUL Notary Public - State of Florida Commission # GG 344051 My Comm. Expires Jun 11, 2023 P Bonded through National Notary Assn.			