

34

**CODE ENFORCEMENT DEPARTMENT**  
COLUMBIA COUNTY, FLORIDA  
**OUT OF COUNTY MOBILE HOME INSPECTION REPORT**

COUNTY THE MOBILE HOME IS BEING MOVED FROM Suwannee  
OWNERS NAME Tyler Kuhn PHONE \_\_\_\_\_ CELL 386-515-2240  
INSTALLER James Foley PHONE 386-249-3994 CELL \_\_\_\_\_  
INSTALLERS ADDRESS 7812 173<sup>rd</sup> Rd Live Oak, FL

**MOBILE HOME INFORMATION**

MAKE Champion YEAR 2014 SIZE 28 x 68  
COLOR Creme SERIAL No. FL 36100 PH 101243AB  
WIND ZONE 2 SMOKE DETECTOR yes

**INTERIOR:**

FLOORS good  
DOORS good  
WALLS good  
CABINETS good  
ELECTRICAL (FIXTURES/OUTLETS) good

**EXTERIOR:**

WALLS / SIDING Vinyl good  
WINDOWS good  
DOORS good  
INSTALLER: APPROVED ☒ NOT APPROVED \_\_\_\_\_

INSTALLER OR INSPECTORS PRINTED NAME \_\_\_\_\_

Installer/Inspector Signature [Signature] License No. TH1078536 Date 5-3-21

NOTES: \_\_\_\_\_

**ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.**

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

**BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.**

**ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-758-1008 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.**

Code Enforcement Approval Signature [Signature] Date 11-17-2021

**CODE ENFORCEMENT**  
**PRELIMINARY MOBILE HOME INSPECTION REPORT**

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_ IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? \_\_\_\_\_

OWNERS NAME Tyler Kuhn PHONE \_\_\_\_\_ CELL \_\_\_\_\_

ADDRESS 1196 SE Peacock Terrace Lake City, FL

MOBILE HOME PARK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

DRIVING DIRECTIONS TO MOBILE HOME Take 41 S 14 miles to ② onto CR 252 East  
go 3.4 miles turn ② go onto SE Peacock Terrace  
0.3 miles on ②

MOBILE HOME INSTALLER James Foley PHONE \_\_\_\_\_ CELL 386-249-3994

**MOBILE HOME INFORMATION**

MAKE Champion YEAR 2014 SIZE 28 x 68 COLOR \_\_\_\_\_

SERIAL No. FL361 00 Ph 101243AB

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

**INSPECTION STANDARDS**

**INTERIOR:**

(P or F) - P= PASS F= FAILED

\_\_\_\_\_ SMOKE DETECTOR ( ) OPERATIONAL ( ) MISSING

\_\_\_\_\_ FLOORS ( ) SOLID ( ) WEAK ( ) HOLES DAMAGED LOCATION \_\_\_\_\_

\_\_\_\_\_ DOORS ( ) OPERABLE ( ) DAMAGED

\_\_\_\_\_ WALLS ( ) SOLID ( ) STRUCTURALLY UNSOUND

\_\_\_\_\_ WINDOWS ( ) OPERABLE ( ) INOPERABLE

\_\_\_\_\_ PLUMBING FIXTURES ( ) OPERABLE ( ) INOPERABLE ( ) MISSING

\_\_\_\_\_ CEILING ( ) SOLID ( ) HOLES ( ) LEAKS APPARENT

\_\_\_\_\_ ELECTRICAL (FIXTURES/OUTLETS) ( ) OPERABLE ( ) EXPOSED WIRING ( ) OUTLET COVERS MISSING ( ) LIGHT  
FIXTURES MISSING

**EXTERIOR:**

\_\_\_\_\_ WALLS / SIDING ( ) LOOSE SIDING ( ) STRUCTURALLY UNSOUND ( ) NOT WEATHERTIGHT ( ) NEEDS CLEANING

\_\_\_\_\_ WINDOWS ( ) CRACKED/ BROKEN GLASS ( ) SCREENS MISSING ( ) WEATHERTIGHT

\_\_\_\_\_ ROOF ( ) APPEARS SOLID ( ) DAMAGED

**STATUS**

APPROVED \_\_\_\_\_ WITH CONDITIONS: \_\_\_\_\_

NOT APPROVED \_\_\_\_\_ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS \_\_\_\_\_

SIGNATURE \_\_\_\_\_ ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

License Number: IH / 1078536 / 1 Name: JAMES FOLEY

Order #: 4744

Label #: 77098

Homeowner: Tyler Kahn

Manufacturer: 2014 / Champion

(Check Size of Home)

Year Model: 2014

Single ☐

Address: 1196 Peacock Terrace

Length & Width: 28x68

Double ☒

Triple ☐

City/State/Zip: Laurel City, FL 32055

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: 2

Data Plate Wind Zone: 2

Permit #:

Note:

STATE OF FLORIDA  
INSTALLATION CERTIFICATION LABEL

77098

LABEL #

DATE OF INSTALLATION

JAMES FOLEY

NAME

IH / 1078536 / 1

4744

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 VEHICLE

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.



# Mobile Home Permit Worksheet

Application Number: \_\_\_\_\_

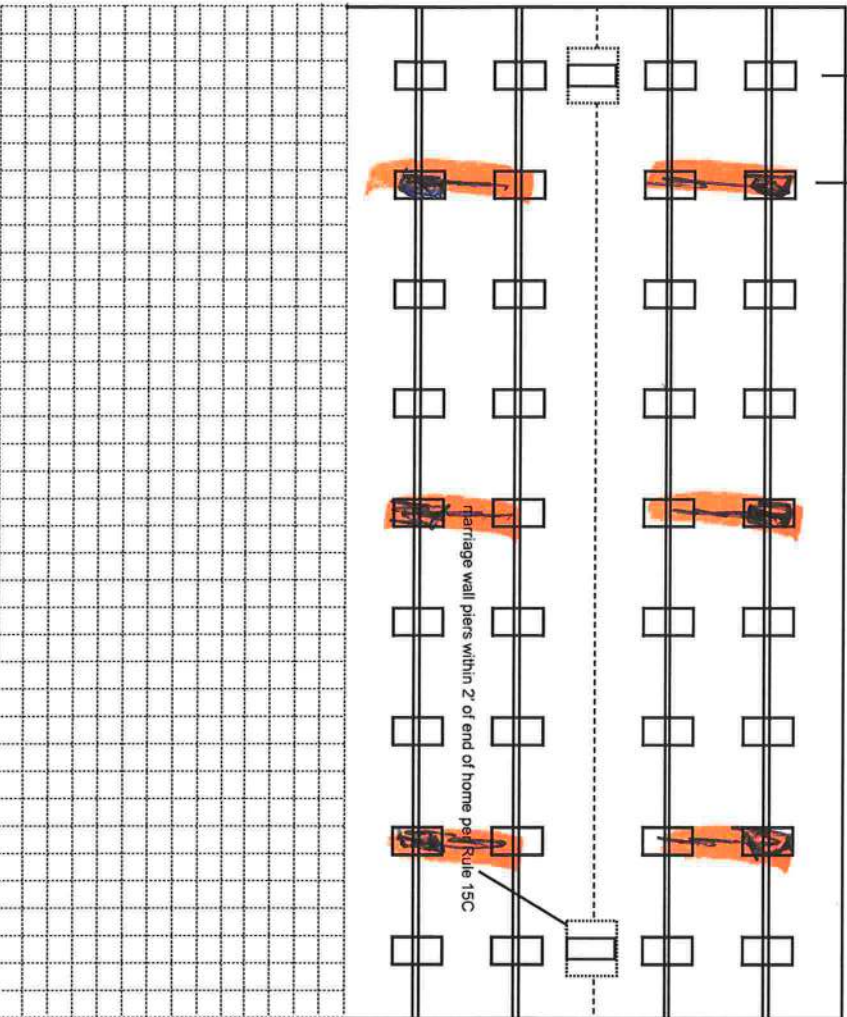
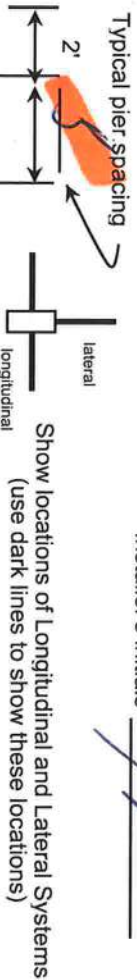
Date: \_\_\_\_\_

Installer: James Foley License # TH 1078536  
 Address of home being installed: 1196 SE Parcel Terrace

Manufacturer: Champion Length x width: 68 x 28

**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: CF



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 # 77098

Triple/Quad ☐ Serial # 1234AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 (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

Perimeter pier pad size

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.

## 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

Longitudinal Stabilizing Device (LSD)

Manufacturer

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer

Sidewall

Longitudinal

Marriage wall

Shearwall



# MOBILE HOME PERMIT WORKSHEET

Application Number: \_\_\_\_\_ Date: \_\_\_\_\_

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1000 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 07 inch pounds or check here if you are declaring 5" anchors without testing 4. 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.

\_\_\_\_\_  
Installer's initials

### ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

James Foley

Date Tested

8-3-21

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. 7

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 7

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 8

## Site Preparation

Debris and organic material removed \_\_\_\_\_  
Water drainage: Natural \_\_\_\_\_ Swale \_\_\_\_\_ Pad ✓ Other \_\_\_\_\_

### Fastening multi wide units

Floor: Type Fastener: SPS Length: 5" Spacing: 2"  
Walls: Type Fastener: SPS Length: 5" Spacing: 2"  
Roof: Type Fastener: SPS Length: 5" Spacing: 2"  
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 SPS  
Pg. 8

Installed: \_\_\_\_\_  
Between Floors Yes \_\_\_\_\_  
Between Walls Yes \_\_\_\_\_  
Bottom of ridgebeam Yes \_\_\_\_\_

## Weatherproofing

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 \_\_\_\_\_

### 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

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

*Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.*

ELECTRICAL	Print Name <u>Harold Sapp</u> Signature <u>Harold Sapp</u> License #: <u>EC 13006009</u> Phone #: <u>386-590-6567</u>
Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C	Print Name <u>Ronald E. Bonds Sr.</u> Signature <u>Ronald E. Bonds Sr.</u> License #: <u>CAC1817658</u> Phone #: <u>850-872-8339</u>
Qualifier Form Attached <input type="checkbox"/>	

**F. S. 440.103 Building permits; Identification of minimum premium policy.**—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

DRIVER'S LICENSE:  
BUYER:  
CO/BUYER:


 MİLLÎ EĞİTİM BAKANLIĞI  
 Ministry of National Education of the Republic of Turkey
 


 SAĞLIK BAKANLIĞI  
 Ministry of Health of the Republic of Turkey