

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

(Revised 12/2023)

Zoning Official _____ Building Official _____

AP# _____ Date Received _____ By _____ Permit # _____

Flood Zone _____ Development Permit _____ Zoning _____ Land Use Plan Map Category _____

Comments _____

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

Recorded Deed or Property Appraiser PO Site Plan EH # _____

Land Owner Affidavit Installer Authorization FW Comp. letter App Fee Paid 911 App

DOT Approval Parent Parcel # _____ STUP-MH _____

Ellisville Water Sys Assessment _____ In County Sub VF Form

***This page not required if Online Submission**

Property ID # 20-3S-17-05503-000 Subdivision Boulevard Park Lot# 3-8

▪ New Mobile Home _____ Used Mobile Home MH Size 14X66 Year 1986

▪ Applicant Brody Pack Phone # 503-689-6563

▪ Address 6470 147th Road Live Oak FL

▪ Name of Property Owner Brent Strickland Phone# 386-365-7043

▪ 911 Address _____

▪ Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Same as Above Phone # _____

Address _____

▪ Relationship to Property Owner _____

▪ Current Number of Dwellings on Property 1

▪ Lot Size _____ Total Acreage .89

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home Yes No

▪ Name of Licensed Dealer/Installer Brent Strickland Phone # 386-365-7043

▪ Installers Address 5233 NW Falling Creek Lake City, FL

▪ License Number: IH1104218 Installation Decal # 104730

Is the mobile home currently located in Columbia County? Yes No (Only required for used homes)

Applicant Email Address: nfpermitting@icloud.com

(This is where application updates will be sent)

HUD LABEL # FU301754
 MEH ID # HAJFL 358 511 34
 DATE MANUFACTURED 9-6-85
 MODEL # S-93 7014C320 YEAR 19 85
 MFR NAME Housing By Harrington, Inc.
 ADDRESS P.O. Box 931
Jasper, FL 32052

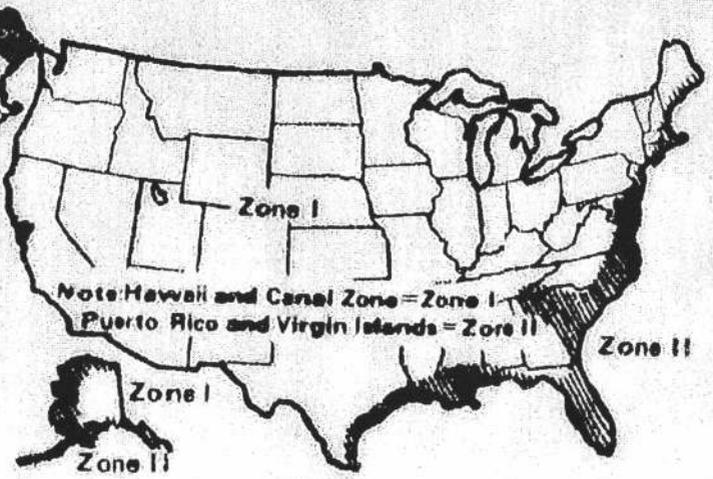
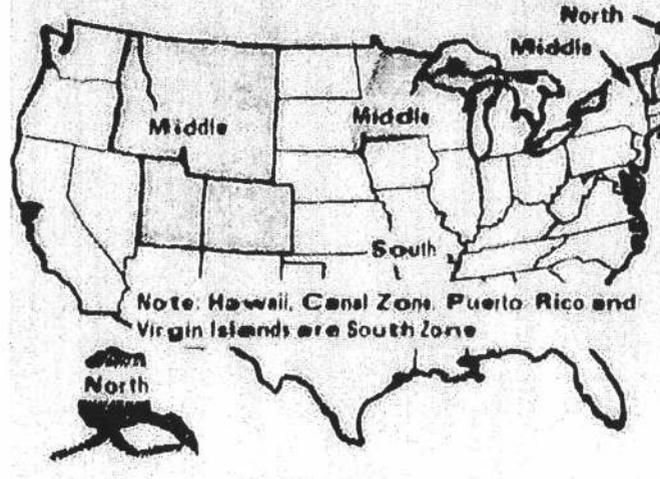
State of Florida
 Department of Highway Safety & Motor Vehicles
 Division of Motor Vehicle

Mail Kitman Building, 2800 Apalachee Parkway, (Room A 38) Tallahassee, FL 32301

DESTINATION (State) _____ Single Double Triple
 SIZE 14 X 70
 Unit A _____ Unit B _____ Unit C _____
 EXCLUDE HITCH INCLUDE HITCH

DEALERS NAME Metro of Pensacola (OPEN)
 ADDRESS _____
Pensacola, FL
 City State Zip
 DEALER NAME Hillborn, Werner, Carter, & A
 ADDRESS 1627 South Myrtle Ave.
Clearwater, FL 33516
 City State Zip

STRUCTURAL DESIGN BASIS CERTIFICATE



HEATING AND COOLING DESIGN BASIS CERTIFICATE



Roof Load North 40 PSF South 20 PSF Middle 30 PSF Other _____

Wind Load Zone I 15 PSF Horizontal & 9 PSF Uplift Zone II (Hurricane) 25 PSF Horizontal & 15 PSF Uplift Other _____

Design Winter Climate Zone
 This mobile home has been thermally insulated to conform with the requirements of the Federal Mobile Home Construction and Safety Standards for all locations within climatic:
 ZONE I ZONE II ZONE III

Equipment	Manufacturer	Model Designation	Equipment	Manufacturer	Model Designation
Air Conditioning 1 _____ BTU/hr			Clothes Washer		
Comfort Heating (36, 258 BTU/hr)	<u>COLEMAN</u>	<u>340-812</u>	Clothes Dryer		
Cooking Range	<u>BROWN</u>	<u>MEM 230-EW</u>	Dishwasher		
Built-in Oven			Food Waste		
Counter Top Cooking Unit			Water Heater	<u>MIR FLG</u>	<u>2HEFR 32512</u>
Refrigerator	<u>WHIRLPOOL</u>	<u>ET14JKXWZ2</u>	Smoke Detector	<u>TENEX</u>	<u>IL-910</u>

The heating equipment has the capacity to maintain an average 70° F temperature in this home at outdoor temperatures of -36 ° F
 To maximize furnace operating economy, and to conserve energy, it is recommended that this furnace be installed where the outdoor winter design temperature (97.12%) is not higher than -4 ° F
 The above information has been calculated assuming a maximum wind velocity of 15 MPH at standard atmospheric pressure
 The supply air distribution system installed in this home is sized
 Not designed for A/C A/C Ready A/C Installed

Manufacturer shall provide the minimum BTU requirements for heating and cooling on the "U" factors as designated below

Walls (without windows & doors) "U" <u>.118</u> Floors "U" <u>.086</u> Air ducts installed outside the home "U" _____
Ceilings & roofs of light color "U" <u>.090</u> Air ducts in floor "U" <u>.230</u> Heat transfer area to outside of home from air ducts
Ceilings & roofs of dark color "U" _____ Air ducts in ceiling "U" _____ Located Inside Home Sq Ft <u>600</u> Outside Home Sq Ft _____

This mobile home is designed to comply with the Federal Mobile Home Construction and Safety Standards in force at the time of manufacture.

"FOR TALLAHASSEE CENTRAL OFFICE USE ONLY"
 REG 120 # _____ DIS (REV) _____
 COMPLAINANT'S NAME _____
 ADDRESS _____ City _____ State _____ Zip _____
 EXISTENT _____

Sheila Gibson
 Type or Print Name

SHEILA GIBSON
 Type or Print Name

9-6-85
 Date