

SHIRLEY

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

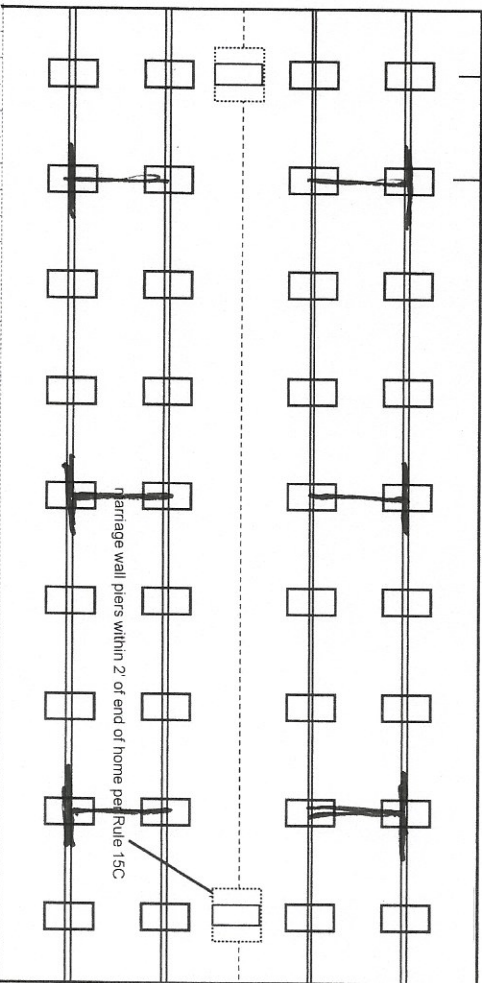
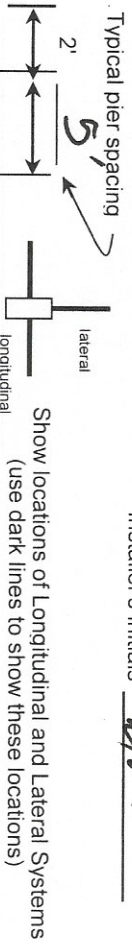
Installer: DAVID ALBRIGHT License # 1H-1129420

Address of home being installed TBD SW Rizzo Glen
LAKE CITY, FL 32660

Manufacturer Like Oak Length x width 32x72

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 DAV



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 # 69294

Triple/Quad ☐ Serial # LOH6A 219 34951 A/B

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

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

PIER PAD SIZES

I-beam pier pad size 17x25
Perimeter pier pad size 16x16
Other pier pad sizes (required by the mfg.) 23x31

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

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.

ANCHORS

Opening Pier pad size
SEE Factory Diagram

FRAME TIES

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

TIEDOWN COMPONENTS

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

OTHER TIES

Sidewall _____
Longitudinal _____
Marriage wall _____
Shearwall _____

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POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

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. 1 understrand 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 anchoring capacity.

Installer's initials DAH

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

DAVID ALBAICHT

Date Tested

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. 73-77

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 79-80

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 78-79

Site Preparation

Debris and organic material removed ☒ Swale ☐ Pad ☒ Other ☐

Fastening multi wide units

Floor: Type Fastener: 1/4" x 5" Length: 6" Spacing: 2'
Walls: Type Fastener: 1/4" x 5" Length: 3" Spacing: 12"
Roof: Type Fastener: 1/4" x 5" Length: 6" 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 installation or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials DAH

Type gasket: Factory

Pg. 79

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ☒ Pg. 124
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

David Albacht

Date



 SUPPORT PLIERTYP

FOUNDATION NOTES:

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND ITS 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.

(A) MAIN ELECTRICAL CROSSOVER	(G) DUCT CROSSOVER
(B) ELECTRICAL CROSSOVER	(H) SEWER DROPS
(C) WATER INLET	(I) RETURN AIR (W/OPT. HEAT PUMP ON DUCT)
(D) WATER CROSSOVER (IF ANY)	(J) SUPPLY AIR (W/OPT. HEAT PUMP ON DUCT)
(E) GAS INLET (IF ANY)	
(F) GAS CROSSOVER (IF ANY)	

License Number: IH / 1129420 / 1 Name: DAVID E ALBRIGHT

Order #: 4321	Label #: 69294	Manufacturer: LIVE OAK	(Check Size of Home)
Homeowner: SHIRLEY		Year Model: 2020	Single _____
Address: SW 12220 GLEN		Length & Width: 72x32	Double <input checked="" type="checkbox"/> _____
City/State/Zip: LAKELAND FL 32060		Type Longitudinal System: OTI	Triple _____
Phone #:		Type Lateral Arm System: OTI	HUD Label #:
Date Installed:		New Home: <input checked="" type="checkbox"/> Used Home: _____	Soil Bearing / PSF:
Installed Wind Zone: II		Data Plate Wind Zone: II	Torque Probe / in-lbs:
			Permit #:
Note:			

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

69294

LABEL #

DATE OF INSTALLATION

DAVID E ALBRIGHT

NAME

IH / 1129420 / 1

4321

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.