	Mobile Home Permit Worksheet				Application Number:			Date:			
	0	•				New Home	9	Used Home			
Installer :	Kustal	- Kusa	Licens	se #	107828			anufacturer's Ins ordance with Ru		inual	Ħ
Address of home being installed				Single wide		Wind Zone II		Wind Zone III			
		·	Waser	t 1 1	32X60	Double wide	1	Installation De	cal #	119/14	
Manufacturer .	JACOS		Length >			Triple/Quad		Serial #	orden	2	
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)						PIER SI	PACING TABLE	FOR USE	D HOMES		
where the sid Typical pier spa	dewall ties exce		Installer	s initials	<u> Luc</u>	Load Footer bearing size capacity (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)		X 24" 26" x 26" 76)* (676)
2' . <u>'</u>		lateral				1000 psf	3'	4'	5'	6'	7' 8'
$\longleftrightarrow \longleftrightarrow$	1 —	Sho		Longitudinal a s to show the	and Lateral Systems se locations)	1500 psf 2000 psf	4' 6" 6'	6' 8'	8'	8'	8' 8' 8' 8'
_		- iongitudinai				2500 psf 3000 psf	7' 6" 8'	8' 8'	8' 8'	8'	8' 8' 8' 8'
		П		- п		3500 psf * interpolated from	8' Rule 15C-	8' 1 pier spacing tab	8' ble.	8'	8' 8'
	 		₩Т		7 0		er cale state of signal	D SIZES		POPULA	R PAD SIZES
	h n		<u> </u>		4 -	l-beam pier pa	d size	247	24	Pad S	
		一日			- Ш- П-	Perimeter pier	pad size	-16	×16	16 x	18 288
····[T]					/ -	Other pier pad		16	Lle	16 x 2	2.5 360
Ш					_ }_	(required by the	e mfg.)			17 x 2 13 1/4 x 2	26 1/4 348
	\mathbf{R}				$-\Pi/\Pi$			mate locations of oot or greater.		20 x 3	
	T -		narriage wall pi	ers within 2' of end o	f home per Rule 15C		to show t			17 1/2 x 2 24 x 2	
			Д	1		List all marriag		enings greater th	nan 4 foot	26 x	
							78U SIZES I		_	AN	CHORS
						Opening		Pier pad siz	E	4 ft (15 ft
						Se	e -	un	_		AME TIES
							<i>D: #7</i>			within 2' of spaced at 5	end of home 5' 4" oc
							TEDOWN (COMPONENTS		ОТН	ER TIES Number
						Manufacturer	Stabilizin	g Device (LSD) g Device w/ La		Sidewall Longitudina Marriage w Shearwall	20

Mobile Home Permit Worksheet

· · · · ·			,=	
[P	OCKET PENETROMET	ER TEST	
The pocket p or check here	enetrometer e to declare 1	tests are rounded down 000 lb. soil with	to) psf psf pout testing.	
_	xx	x	x	
	POCKET	PENETROMETER TES	STING METHOD	
	1. Test the	e perimeter of the home	at 6 locations.	
	2. Take th	e reading at the depth o	f the footer.	
		600 lb. increments, take t g and round down to that		
	x	x	x	
		TORQUE PROBE T	EST	
here if you a showing 275 Note: A sta anch anch readi	re declaring s inch pounds ite approved l ors are allow ors are requi ing Is 275 or I	probe test is 100 or less will require 5 foo lateral arm system is being at the sidewall location red at all centerline tie poess and where the mobil with 4000 lb holding capaling.	a A test it anchors. Ing used and 4 ft. Ins. I understand 5 ft Ins. where the torquite I home manufacture	e test
ALL TE		BE PERFORMED BY A	_	.ER
Installer Name		Lusty L. Kno	ul	
Date Tested		5.16-25		
		Electrical		
Connect electrica source. This incli	al conductors udes the bond	between multi-wide unit- ding wire between mult-v		power
		Plumbing		
Connect all sewer	r drains to an	existing sewer tap or se	ptic tank. Pg/_	<u>_</u>

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

plication Number:	Date:
	Site Preparation
Debris and organic mater Water drainage: Natural	rial removed
	Fastening multi wide units
will be centered	Length: 4 Spacing: 8 Spacing: Length: 4 Spacing: 8 Spac
	Gasket (weatherproofing requirement)
homes and that condens	Installer's initials
	Weatherproofing
Siding on units is installe	repaired and/or taped. Yes Pg. 15c/ d to manufacturer's specifications. Yes ed so as not to allow intrusion of rain water. Yes
	Miscellaneous
Skirting to be installed. \\ Dryer vent installed outsi Range downflow vent ins Drain lines supported at a Electrical crossovers pro Other:	de of skirting. Yes N/A stalled outside of skirting. Yes N/A 4 foot intervals. Yes
is a	Il information given with this permit worksheet accurate and true based on the astallation instructions and or Rule 15C-1 & 2
Installer Signature	Date 5 /6 25

N18 = SGE NOTE 16. Harrin TO BU 91-5666 FOR AUDITIONAL PAIN REQUIREMENT COLUMN INFO. TABLE ٦ $\widehat{\blacksquare}$ (m) HENRICH PIER PAD SEZE (aq.in.) 0 39A2 į 4 ä ď q ę ę Q q 9 132_875 eq. 3**42-25 s**q. in. MICONT THE 256 44 7 396 sq. in. 400 sq. in **276 84**, 676 aq. in. 5 È Ì 1376 3 0 PO BOX 368, 600 PACKARD CT. 0 0 0 0 ø SAFETY HARBOR, FLORIDA 34695 5 **JACOBSEN** I, EMPETY HAMBON, PLORDA, ALL FRONTS BESTERVES www.jachomes.com 18 끏 2 ĝ 0 COLUMN PAD - MIN. SIZES (sq. in.) 27.00 0 ٥ ¥ ۵ 0 ø Ţ Ò ¥ Б (727) 726-1138 168 188 712 8 킀 4 ğ ğ 0 LEEAS PIER SPACES 0 • 0 0 불등 5 2 8 18 2 S 8 5 8 5 ž Š 百年 ğ 3 4 ø 0 0 ۰ 0 0 1 3 # Z HOMES K Ī ä Ŷ 0 0 를 養養 투종 3 į, 0 0 0 • ₹ 3 Ē ă ¥ Ŧ 0 章 寶 1 8 ₹ 5 • • 0 ø 野 3 총 3 3 書き Š ij Ī 蒙 0 0 # **#** 2 **3** 3 8 • . 0 0 # E 3 3 ₹ 품 ま言 層 INSTALLING A MANUFACTURED STRUCTUREBUILDING CAN BE EXTREMELY DANGEROUS. ONLY DANLING PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURESULDING. IMPROPER PROCEDURES ANDIOR TECHNIQUES COULD RESULT IN SECHOLIS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, SPROPER SETUPRISTALLATION COULD RESULT IN EXTENSIVE/OFF DANGER TO THE BUILDINGSTRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED ANDIOR DO NOT HAVE THE PROPER TOOLS ANDIOR EQUIPMENT. MANUFACTURED BUILDINGBRITHUCTURES CAN WEIGH SEVERAL TORS. IT 80 VERY SEPORTART
THAT ALL PERSONNEL, ON THE JOS SITE, SE GUALFIED AND PROPERLY/ADEQUATELY TRANSD.
A STATE LICENSED SERIE CONTRACTOR IS RECURRED TO SE RESPONSELE FOR ALL SAFETY
INITIATYES, PROGRAM, POLICIES, AND/OR PROCEDIFIES THAT MAY BE SEAUCHTED BY ORK
AND/OR ANY OTHER LOCAL, STATE, AND/OR RECEIVAL CODES AND/OR REQUIRESHITS. THE 8 CONTRACTOR SHALL MOUREMEDURAL THAT SAFE AND PROPER TECHNIQUES ARE UTIL DED WARNING: 8 8 MICS 2 8 8 8 ß BLD WIND SCHOOLING CATHOORY - C BLD WIND STATE - B MATTERS LINE PERM SPACING RAMEN VOLTHE AMBRONIUM DE COM EL AN EVEN ENERGY CONTRAN LACIANTICAM, CONTRAN PRIME SHALL HE LECTURE AMBRONIUM ENERGY OF MARINE AND OF THE CONTRAN AMBRONIUM, PEURS DAY SE PROCESSO ALLONG THE MARINE LINE, MAE THE VETUP MARINE PERSONNE PERSONNEL. PERSON TO THE MODEL APPROVAL FOR PLAN SPECIFIC SPOR 擅 RT 74 LTON SELECT MINE WAS ASSESSED AND SELECT OF THE SECURIOR OF THE SECURIOR SELECT MARIE TO VOLUDA ON MARIEMENTALL VALIDORITORI VIID LIBOGRADI. PACIFICAD AND VIOLED STOCK STAN FOR SERVICION I LOCKTICAD AND LOADS. REAL TO SUCTED WATER VOICE OF THE STATE OF T REM TO THE LACCHMEN ROMED SETTE SEASON, AND ADDISONER FOR COMPLETE SETTE MANAL. 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 R 2 8 2 8 8 8 8 REMITTANA, AT TACHMENT SHALL HATE PERM NA, RECOMMENDATION WERD, TAME AREAS BALV LECTOMER ROUTH RETURN BREATH BURNEL, THE SPECIAL SHEET OF HE SELF RATE PORTING, THESE ADDITIONAL 8 8 8 8 8 2 8 ISTAND WATER LINE SCOOLING COMO CIENTO " COL 12" HORAM IN 12". 18 8 8 8 8 8 8 8 PERMITTER PIER SPACING 8 99156 8 2 8 8 8 2 8 8 8 8 8 8 ı PAGE 8 8 8 8 8 8 8 8 8 8 2 8 8 8

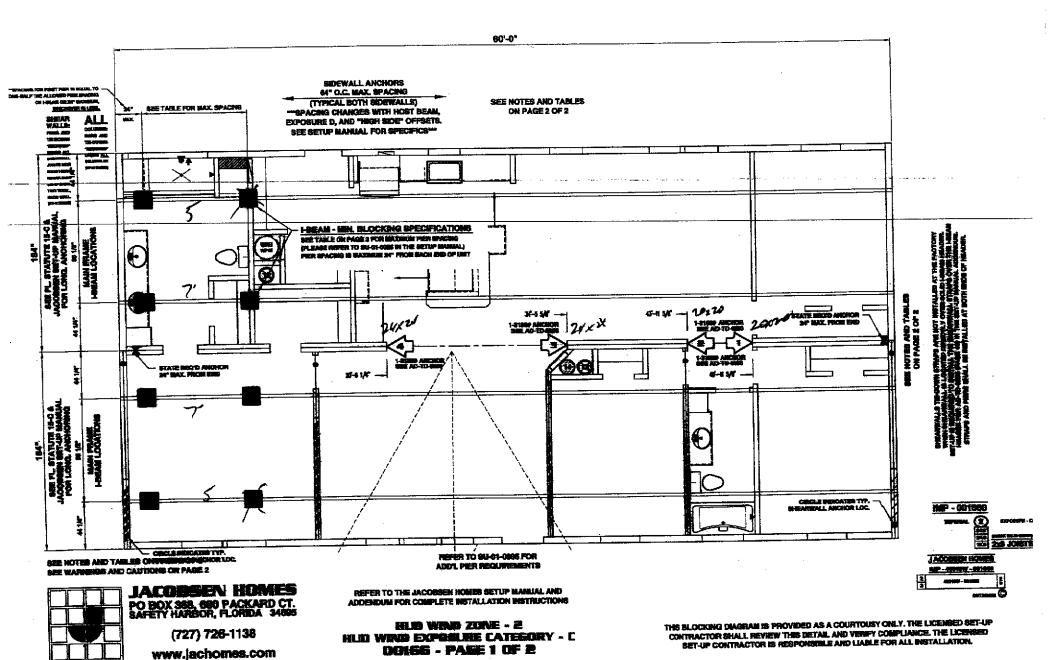
REFER TO SUL-DI-0020, SUGT-5021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DISSONED, NOR SYTEMBED, TO BE A STILT FOUNDATION)

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8 2

8 8 8 8

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REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DERIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

License Number: IH / 1038219 / 1 Name: F	RUSTY L. KNOWLES	
Order #: 6566 Label #: 119114	Maguifacturer:	(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:	:1	••

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL 119114

LABEL#	DATE OF INSTALL	ATIC	h
RUSTY L. KNOWLES			
NAME			[
IH / 1038219 / 1	6566		
IN ACCORDANCE WITH FL	ORDER # [ALLATION OF THIS MOBILE HO .ORIDA STATUTES 320, 8249, 320, WAY SAFETY AND MOTOR VEH	8325	

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.