

11/25/2019 DATE PRINTED

3/1/2022

3/16"=1'

PLAN N.

CE-S010-76-3

99.5FRAME

PIERS

SU-1.

1

SHEET N.

SHEETNILE

SCALE

- TABLES 7 AND 76 IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT REQUIRE PERIMETER BLOCKING, REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS. 2. REFER TO TABLE 9 FOR PIER CONFIGURATION AND
- MAXIMUM ALLOWABLE HEIGHTS. CROSS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 18, 19, AND 20). 3.
- THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 8" LBEAMS IS 8 FEET, 10" & 12" LBEAMS IS 10 FEET. SERVICE DROP LOCATIONS IDENTIFIED ARE 4
- APPROXIMATE.
- FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY. 5, CONTACT THE MFG FACILITY FOR SPECIFICATIONS OF OPTIONS ORDERED.

	Mobile H	lome Perm	it Worksł	neet			Application Numbe	r:			Date:	
Installer : Dale			_License #	1411332	71				Used Home anufacturer's In: ordance with Ru		nual	B
Address of home being installed Manufacturer	lavton		Length x width	120	x76		Single wide Double wide		Wind Zone II Installation De	cal # <u>18</u>	Wind Zone III 853	
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 understand Lateral Arm Systems cannot be used on any home (new or used)					Triple/Quad Serial # <u>UHCO2935664</u> PIER SPACING TABLE FOR USED HOMES							
where the side Typical pier space $2^{\circ} - \frac{b^{1/2}}{2}$	wall ties exceed	5 ft 4 in. _{Irat}	Installer's initia	als <u>) H</u>			Load Footer bearing size capacity (sq in)	16" x 16" (256) <u>3'</u>	18 1/2" x 18 1/2" (342) 4"	20" x 20" (400) 51	22" x 22" 24" X (484)* (570	6)* (676) * 8'
			tions of Longit dark lines to sl		Lateral System locations)	s	1500 psf 2000 psf 2500 psf 3000 psf 3500 psf	4' 6' 6' 7' 6' 8' 8'	6' 8' 8' 8' 8'	7' 8' 8' 8' 8'	8' 8 8' 8 8' 8 8' 8 8' 8	' <u>8</u> ' '8' '8'
		-0 ₽					* interpolated from		D SIZES			PAD SIZES
		-0 -0		-0-	<u>– – – – – – – – – – – – – – – – – – – </u>		I-beam pier pao Perimeter pier		<u>23 x</u> 16×1		Pad Siz 16 x 10 16 x 10	6 <u>256</u> 8 288
							Other pier pad (required by th				18.5 x 10 16 x 22 17 x 2 13 1/4 x 20	.5 360 2 374 5 1/4 348
			dage wall plers within	n 2' of end of hor	ne per Rule 15C		wallop	enings 4	timate locations foot or greater. the piers.		20 x 20 17 3/16 x 2 17 1/2 x 2 24 x 2	5 3/16 441 5 1/2 446 4 576
							List all marriag and their pier p		enings greater t below.	than 4 foot	26 x 2	6 676 HORS
	- Ju	Attached	Print				Opening		Pier pad si:	Z8		5 ft METIES
									· · · · · · · · · · · · · · · · · · ·		within 2' of e spaced at 5'	nd of home 4" oc
								· 1	COMPONENTS			R TIES Number
							Manufacturer	بہ¦، ¦∂ Stabilizir	ig Device w/ La	-	Sidewali Longitudinal Marriage wa Shearwali	

Mobile Home Permit Worksheet

	· · · · · · · · · · · · · · · · · · ·		Application Number:	Date:			
			Sht	Preparation			
The pocket or check he	POCKET PENETROMETER penetrometer tests are rounded down to re to declare 1000 lb. soil X witho		Debris and organic material removed Water drainage: Natural Swa	lePadOther			
	7-		Fastenin	g multi wide units			
	X X POCKET PENETROMETER TEST 1. Test the perimeter of the home at 2. Take the reading at the depth of t	t 6 locations.	will be centered over the pa	Length: Length: Length: Length: Spacing: gauge, 8" wide, galvanized metal strip eak of the roof and fastened with galv. r on both sides of the centerline.			
Artor			Gasket (weatherproofing requirement)				
	3. Using 500 lb. increments, take the reading and round down to that in X X	ncrement.	I understand a property 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 poorty installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.				
here if you	of the torque probe test is are declaring 5' anchors without testing 5 inch pounds or less will require 5 foot a	ST		Installer's initials Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes			
			Wei	atherproofing			
anc anc rea	tate approved lateral arm system is being hors are allowed at the sidewall locations hors are required at all centerline tie poir ding is 275 or less and where the mobile uires anchors with 4000 lb holding capac	s. I understand 5 ft hts where the torque test home manufacturer may	The bottomboard will be repaired and Siding on units is installed to manufac Fireplace chimney installed so as not	l/or taped. Tes Pg. 112 cturer's specifications. Tes to allow intrusion of rain water. Tes			
	the inst	taller's initials	M	scellaneous			
ALL T Installer Name Date Tested	ESTS MUST BE PERFORMED BY A LI Dale Houte	CENSED INSTALLER	Skirting to be installed Yes Dryer vent installed outside of skirting Range downflow vent installed outsid Drain lines supported at 4 foot interver Electrical crossovers protected. Yes Other :	e of skirting. Yes N/A Ils. Yes			
	Electrical						
Connect electric source. This inc	cal conductors between multi-wide units, ludes the bonding wire between mult-wid	but not to the main power le units. Pg. 95		on given with this permit worksheet			
Connect all sew	Plumbing er drains to an existing sewer tap or sept	ic tank. Pg. 69		nd true based on the instructions and or Rule 15C-1 & 2			
Connect all pota independent wa	ble water supply piping to an existing water supply systems. Pg. 98	ter meter, water tap, or other	Installer Signature Dale Hon	to Date 5/22/27			

Application Number:

Walker

Order #: 5768 Label #: 98853		Manufacturer:	(Check Size of Home)	
Homeowner:		Year Model:	Single	
Address:	·····	Leogth & Width:	Double	
			Triple	
City/State/Zip:		Type Longitudinal System:	HUD Label #	
Phone #:	An and a second s	Type Lateral Arm System:	Soil Bearing / PSF:	
Date Installed:		New Home: Used Home:	Torque Probe / in-lbs:	
Installed Wind Zone:	ere i presta en presente en el compositione de la composition de la composition de la composition de la composi	Data Plate Wind Zone:	Permit #:	



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.