

Mobile Home Permit Worksheet

Application Number: KY-01

Date: 10/16

Installer: James Foley License # IA 1075536

Address of home being installed: 305 NW Bardenhill Lane
Lake City, FL

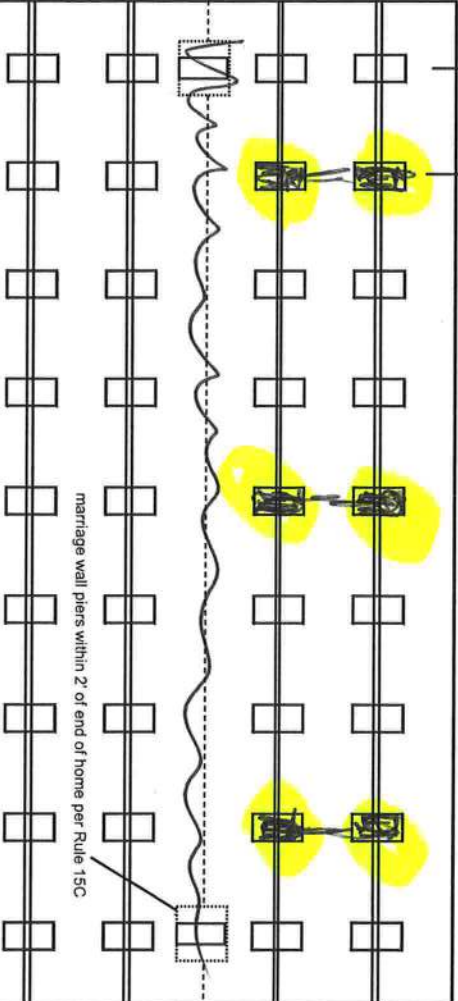
Manufacturer: Copier Length x width: 68' x 26'

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: JS

Typical pier spacing: 2'

Show locations of Longitudinal and Lateral Systems
(use dark lines to show these locations)



Anthony H. Hines
10-11-2021

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 # 77104
Triple/Quad ☐ Serial # 680542057

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: 17 1/2 x 22 1/2
Perimeter pier pad size: 16 x 16
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.

Opening: _____ Pier pad size: _____

4 ft

5 ft

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 Marriage wall Shearwall
Nun per: 60

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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 0. 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 requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name James Foster

Date Tested 8-29-21

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. 8

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 2

Site Preparation

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

Fastening multi wide units

Floor: _____ Length: _____ Spacing: _____
Walls: _____ Length: _____ Spacing: _____
Roof: _____ Length: _____ Spacing: _____
Type Fastener: SV
Type Fastener: _____
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 Pg. SV 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 8-29-21

16116 8707

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

Order #: 4743	Label #: 77084	Manufacturer: 1	(Check Size of Home)
Homeowner:		Year Model:	Single _____
Address:		Length & Width: 11	Double _____
City/State/Zip		Type Longitudinal System:	Triple _____
Phone #:		Type Lateral Arm System:	HUD Label #:
Date Installed:		New Home: _____ Used Home: _____	Soil Bearing / PSF: _____
Installed Wind Zone:		Data Plate Wind Zone:	Torque Probe / in-lbs. _____
Note:		Permit #: _____	

14X56

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL	
77084	
LABEL #	DATE OF INSTALLATION
JAMES FOLEY	
NAME	
IH / 1078536 / 1	4743
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.

mich Deacon or Rachel

1979 MANA

Ad 11396-202-2 street Osborne Fl