PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

| | | | Building Official | |
|------------------------------------|-------------------------------|--|---|--|
| | | | ByPermit # | |
| | | | Land Use Plan Map Cat | AND STREET, ST |
| FEMA Map# | Elevation | Finished Floor | RiverIn Floody | vay |
| ☐ Recorded Deed | or Property Appraiser | PO 🗆 Site Plan 🗆 E | H# □ Wel | l letter OR |
| X Existing well | ☐ Land Owner Affidavit | ☐ Installer Authoriza | tion FW Comp. letter App | Fee Paid |
| □ DOT Approval | □ Parent Parcel # | =, ST | UP-MH | □ 911 App |
| ☐ Ellisville Water | Sys Assessment | Out Cou | unty 🗆 In County 🗆 Sub VF Fo | rm |
| Property ID # 00 | -00-00-00865-069 | Subdivision | Three Rivers Estates | Lot# <u>69 &</u> 7 |
| New Mobile H | omeXUse | d Mobile Home | MH Size 32 X 60 Y | ear_2020 |
| ApplicantF | Robert Minnella | | Phone # 352-472-6010 | |
| Address 257 | 43 SW 22 Place, Newberr | y, FL 32669 | | |
| Name of Prop | erty Owner Michael | Gendreau | Phone# 386-266-858 | 9 |
| | 756 SW Pleasant Terr, F | | | |
| | | | Light - Clay Electric | |
| | (Circle One) - | Suwannee Valley | Electric - Duke Energy | |
| | | | | |
| | | | Phone # | *************************************** |
| Address | | | | |
| Relationship | to Property OwnerS | Same | | |
| Current Numb | er of Dwellings on Pro | perty 1 camper to | be unhooked. | |
| Lot Size 400 | X 157 X 230 X 275 | Total Acre | eage1.41 | |
| Do you : Have | Existing Drive or Priva (Blue | ate Drive or need Ct Road Sign) (Po | ulvert Permit or Culvert Waive (Not existing but do | er (Circle one) not need a Culvert) |
| Is this Mobile | Home Replacing an Ex | isting Mobile Home | Replacing a camper | |
| Driving Direct | ions to the Property SF | R 47 S to US 27 (R)Go | to first road to left (L), curve to the | e right onto |
| Wilson Springs | Rd and follow all the way | to the stop sign @ SV | Neward Dr.(R) Go 1/10 mile to the | ne next left |
| onto SW Pleasa | ant Terr (L) Go 7/10 mile (| TL) to 1st driveway on | right. Driveway on right at corner | of SW Ohio PI |
| Name of Lice | nsed Dealer/Installer_E | rnest S Johnson | Phone #_ 352-49- | 4-8099 |
| Installers Add | Iress 22204 SE US Hwy | 301, Hawthorne, FL 3 | | |
| License Num! | perIH 1025243 | In | stallation Decal # 66278 | |

| Y 009945 WELL/SEPT 00 | LAND DESC ZONE AE CODE TOPO Y 000700 MISC RES 00 | RSTR RUNTS RCVR C-WAS RCVR C-WAS RCVR C-WAS RCVR C-WAS RCVR C-WAS C-WAS RCVR C-WAS RCVR C-WAS HGHT PMTR FLOR ECTVS ECON FUNC A/C SPCD SPCD SPCD SPCD SPCD SPCD SPCD SPC | BUSE BATH MOD FIXT EXW FIXT | RDROT |
|-----------------------|--|--|--|--|
| | ONE ROAD (UD1 (UD3 OPO UTIL (UD2 (UD4 | TEN WID HGHT | AE? | GEN 756 |
| 1.00 | FRONT DEPTH BACK DT 1 | CK: 756 PLE 757 QL | HTD AREA EFF AREA RCN %GOOD | DREAU MICHAEL J SW PLEASANT TERR T WHITE, FL 32038 |
| 1.00 1.00 1.00 | FIELD CK: ADJUSTMENTS .00 1.00 .60 1.00 | W FT WHITE CK: UNITS 1.000 | .000 INDEX 1000 E-RATE BLDG VAL | 00-00-00-00865-069 |
| 1.000 UT | UNITS UT | # # # # # # # # # # # # # # # # # # # | 000.12 THREE R .000 INDX AYB EYB | PNTE I |
| 3250.000 | PRICE 6000.000 | JUNION TEE | RIV STR 36- 6S- MKT AREA 02 (PUD1 | 04/2020 05/2016 |
| 3250.00 | ADJ UT PR 3600.00 | TRAVEL TR | JSE 000700 15 | Columbia County 202 CARD CARD 14:43 BY |
| 3,250 | LAND VALUE 7,200 | 10,450 LAND 0 CLAS 0 WATUSE 10,850 JUST 10,850 JUST 10,850 APPR 0 SOHD 0 ASSD 0 EXPT 0 COTXBL (SE | 00 E | 2020 R ARD 001 of 001 BY JEFF |

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

| | Permit Application Number |
|--|-------------------------------|
| Michael Gendreau 00-00-00-00865-069 | PART II - SITE PLAN |
| | 157.44' 18' Lot 170 Rd Lot 70 |
| *, | |
| s* | 150 swell SW. Pleasant Ter. |
| à | 7 5 John Pl. |
| | |

| Notes: Modify DF to accommod | ate a 2 bedroom sized home. | No pertinate offsite featurres. | - |
|---|---------------------------------------|---------------------------------|-----|
| (66) 22) | | | |
| Site Plan submitted by: Robert Plan Robert Minr | Vinnella Date: 0 | 06-05 20 Agent V | |
| Plan Approved | Not Approved | Date | |
| Ву | · · · · · · · · · · · · · · · · · · · | County Health Departm | ent |

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

District No. 1 - Ronald Williams District No. 2 - Rocky Ford District No. 3 - Bucky Nash District No. 4 - Toby Witt District No. 5 - Tim Murphy



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:

11/18/2019 7:02:33 PM

Address:

756 SW PLEASANT Ter

City:

FORT WHITE

State:

FL

Zip Code

32038

Parcel ID

00865-069

REMARKS: Address Verification.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED. THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By:

Signed:/ Matt Crews

Columbia County GIS/911 Addressing Coordinator

COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125 Email: gis@columbiacountyfla.com

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUM | MBER | _ CONTRACTOR _ | Ernest S. J | ohnson | PHONE_(352)494-809 |
|--|--|--|---|---|--|
| | | | | | |
| | THIS FORM MUST | BE SUBMITTED PRIC | R TO THE ISSUAN | CE OF A PERMIT | |
| | | | | | |
| ecords of the s ordinance 89-6 | ounty one permit will cover all to subcontractors who actually did 5, a contractor shall require all s | d the trade speci subcontractors to | fic work under to provide evide | the permit. Pence of worker | er Florida Statute 440 and rs' compensation or |
| xemption, ger | neral liability insurance and a va | alid Certificate of | Competency li | cense in Colu | mbia County. |
| Any changes, t | neral liability insurance and a value of the permitted contractor is respublication and work the permitted contractor beginning any wo | onsible for the o | corrected form | being submit | ted to this office prior to the |
| Any changes, t tart of that su | the permitted contractor is resp | oonsible for the o | corrected form Il result in stop | being submit | ted to this office prior to the and/or fines. |
| any changes, t tart of that su | the permitted contractor is resp abcontractor beginning any wo | oonsible for the o | corrected form Ill result in stop Signature | being submit work orders | ted to this office prior to the and/or fines. |
| Any changes, t | the permitted contractor is respondent to the permitted contractor is respondent to the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor is respondent to the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor beginning and the permitted contra | oonsible for the o | Corrected form Il result in stop Signature Phone #: | being submit work orders Robert / | ted to this office prior to the and/or fines. |
| Any changes, t tart of that su | the permitted contractor is respondent to the permitted contractor is respondent to the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor is respondent to the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor beginning and the permitted contra | nonsible for the ork. Violations wi | Corrected form Il result in stop Signature Phone #: | being submit work orders Robert 1/ (386)972-17 | ted to this office prior to the and/or fines. |
| any changes, t tart of that su LECTRICAL | the permitted contractor is respondent of the permitted contractor is respondent of the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor is respondent of the permitted contractor beginning any work of the permitted contractor beginning any work of the permitted contractor beginning and the permitted contract | nonsible for the ork. Violations wi | Signature Phone #: | being submit work orders Robert 1 (386)972-17 | ted to this office prior to the and/or fines. Jumella 00 |

Qualifier Forms cannot be submitted for any Specialty License.

| Specialty License | License Number | Sub-Contractors Printed Name | Sub-Contractors Signature |
|-------------------|----------------|------------------------------|---------------------------|
| MASON | | | |
| CONCRETE FINISHER | | | |

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

| 1. Dlean Whiteriston | (license holder name), licensed qualifier |
|---|--|
| for Whittington Electric d | |
| | |
| the below referenced person(s) listed on this for holder, or is/are employed by me directly or thro officer of the corporation; or, partner as defined person(s) is/are under my direct supervision and sign permits; call for inspections and sign subco | ugh an employee leasing arrangement, or, is air in Florida Statutes Chapter 468, and the said I control and is/are authorized to purchase and |
| Printed Name of Person Authorized | Signature of Authorized Person |
| 1. Robert Minnella | 1. Runting |
| 2. Nancy & Phelps | 2. Juny Duy |
| 3. | 3. |
| | 4. |
| 4. | |
| 5. | 5. |
| authority to discipline a license holder for violatic officers, or employees and that I have full respondent and ordinances inherent in the privilege granted officer(s), you must notify this department in write authorization form, which will supersede all prey unauthorized persons to use your name and/or Licensed Qualifiers Signature (Notarized) | is/are no longer agents, employee(s), or ling of the changes land submit a new letter of license number to obtain permits. EC 13002957 11-2-15 License Number Date |
| NOTARY INFORMATION: STATE OF: DICIO COUNTY OF | tutna m |
| The above license holder, whose name is personally appeared before me and is known by (type of I.D.) On NOTARYS SIGNATURE | enn Withinston me or has produced identification this and day of Nember, 2015 (Seal/Stamp) |
| Notary ! | GELA WILKINSON Public - State of Florida Mission # FF 210682 |

PERMIT NUMBER

| Longitudinal Stabili Manufacturer Longitudinal Stabili Manufacturer Olivi | |
|---|--|
| TIEDON | |
| For spacing | |
| Opening Please See | Using Oliver 1055-11 at Doors, Windows w/a and Shearwalls Using Oliver 1101V Systems () 4 & 5 Anchors |
| and their pier pad siz | |
| List all marriage wall | Oct serve and entrol to find an 2 units select term edemand. |
| wall openings symbol to sh | |
| Draw the apr | |
| Other pier pad sizes (required by the mfg. | Please see Pier Load Diagram for Wts. and Distances |
| Perimeter pier pad si | |
| l-beam pier pad size | |
| PIER | |
| 3500 psi 8 | |
| | longitudinal (use dark lines to show these locations) |
| | 2' 6'-6" Show locations of Longitudinal and Lateral Systems |
| 2 00 | vacing > |
| Load Footer | where the sidewall ties exceed 3 it 4 iii. Installer's initials |
| PIE | I understand Lateral Arm Systems cannot be used on any home (new or used) |
| Triple/Quad | 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 |
| Double wide | Manufacturer Live Oak Homes Length x width 32' x 60' |
| Single wide | Ft. White, Fl. 32038 |
| Home is installed in | Address of home 756 SW Pleasant Terrace |
| Home installed to th | LIVE OF COMMENTS OF THE PROPERTY OF THE PROPER |
| New Home | Installer Ernest S. Johnson license # IH-1025249 |

ne Manufacturer's Installation Manual accordance with Rule 15-C Serial # Installation Decal # Wind Zone II Used Home 21934280 \boxtimes 66278 Wind Zone III AY \boxtimes 0

R SPACING TABLE FOR USED HOMES

| SIZES | POPULAR PAU SIZES | POPC | | SIZES | PIER PAD SIZES | 7 | |
|--------------------|---------------------|---------------------|--------------------|---|--------------------|---------------------------|-------------------------|
| | | 200 | | iterpolated from Rule 15C-1 pier spacing table. | Rule 15C-1 | ated from F | terpola |
| ထ္ | 82 | 00 | œ | 8 | œ | psf | 3500 |
| œ | 8 | α. | ထ္ | හු | 00 | psf | 3000 |
| œ | 8 | 82 | တ္ | æ | 7' 6" | psf | 2500 |
| œ | 8 | œ | œ | 8 | <u>ගු</u> | psf | 2000 |
| œ. | æ, | œ | 7' | තු | 4'6" | psf | 1500 |
| 02 | 7 | රු | Q | 4' | ယ | psf | 1000 |
| 26" × 26" (676) | 24" X 24" (576)" | 22" x 22" (484)* | 20" x 20" (400) | 18 1/2" x 18 1/2" (342) | 16" × 16" (256) | Footer size (sq in) | oad saring pacity |
| | 0 | D HOMES | 100000 | TEN OF ACING TABLE TON OSED HOMES | יובו מין | | |

proximate locations of marriage s 4 foot or greater. Use this low the piers. 17.5" x 25.5" 23" x 31" Centerline n/a

openings greater than 4 foot zes below.

Pier pad size

Pier Load Diagram

g of Piers

izing Device (LSD)

WN COMPONENTS

izing Device w/ Lateral Arms er Technologies

| 676 | 38 v 38 |
|------|-------------------|
| 576 | 24 x 24 |
| 446 | 17 1/2 x 25 1/2 |
| 441 | 17 3/16 x 25 3/16 |
| 400 | 20 x 20 |
| 348 | 13 1/4 × 26 1/4 |
| 374 | 17 × 22 |
| 360 | 16 x 22.5 |
| 342 | 18.5 x 18.5 |
| 288 | 16 x 18 |
| 256 | 16 × 16 |
| Sqin | Pad Size |

ANCHORS

4 ft < 5 tt < <

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

Longitudinal Marriage wall Shearwall Sidewall

OTHER TIES



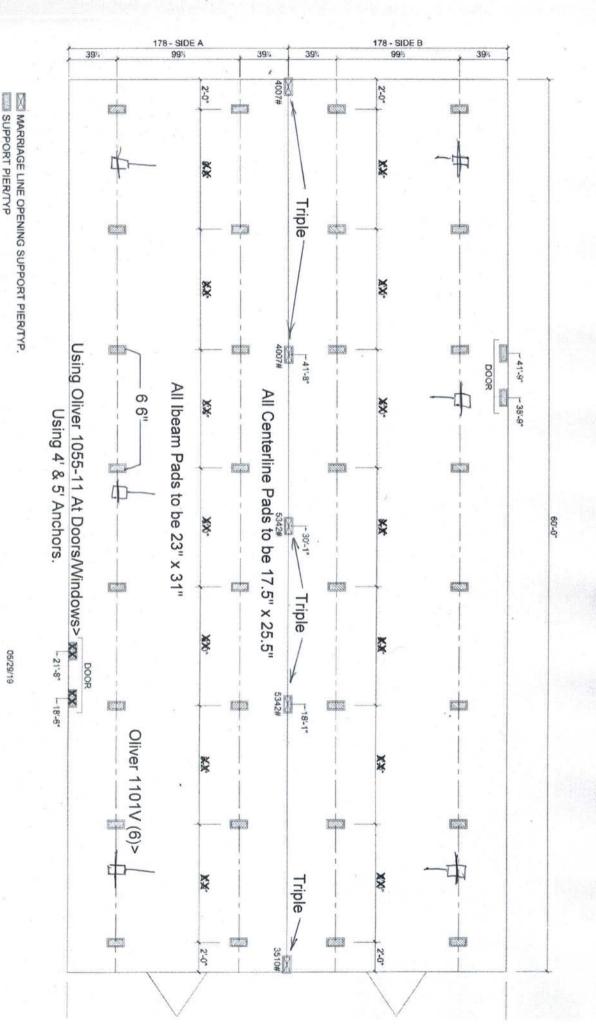
| manufacturer's inetallation instructions and or Dule 450-4 8 | |
|--|---|
| is accurate and true based on the | Plumbing |
| Installer verifies all information given with this permit workshe | Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 45-47 |
| | Electrical |
| Skirting to be installed. Yes Dryer vent installed outside of skirting. Yes Range downflow vent installed outside of skirting. Yes Drain lines supported at 4 foot intervals. Yes Electrical crossovers protected. Yes Other: | Installer Name Date Tested |
| M. | ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER |
| The bottomboard will be repaired and/or taped. Yes Siding on units is installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow intrusion of rain water. Yes | reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 jb holding capacity. Assume 1000 |
| Weatherproofing | Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft |
| Type gasket Factory Foam Installed: Pg. sudw 2.1 Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes | TORQUE PROBE TEST The results of the torque probe test is here if you are declaring 5' anchors without testing . A test showing 275 inch pounds or less will require 5 foot anchors. |
| of tape will not serve as a gasket. | X X |
| I understand a properly 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 poorly installed or no gasket being installed. I understand a strip | reading and round down to that increment. |
| Gasket (weatherproofing requirement) | |
| Length: 5" Spacing: Length: 5" Spacing: 1. 30 gauge, 8" wide, galvanized multiple peak of the roof and fastened with the centerling space. | Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. |
| Type Fastener: Lag Length: 5" | × |
| Fastaning midfi wide inits | or check here to declare (000 lb. soll without lesting. |
| Debris and organic material removed Water drainage: Natural X Swale Pad X Other | unded do |
| Site Preparation | |
| | |

Installer verifies all information given with this permit worksheet Installer Signature west manufacturer's installation instructions and or Rule 15C-1 & 2 is accurate and true based on the Date 6-5-1020

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 4

Connect all sewer drains to an existing sewer tap or septic tank.

Pg. 42



Live Oak Homes MODEL: V-3603M - 32 X 64 3-BEDROOM / 2-BATH

FOUNDATION NOTES:

THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S 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.

| | PORTING OPE | NING STUDS | IN SOUTH (2 | 0 PSF) ROOF | LIVE LOAD | A STATUTE OF SERVICE AND ADDRESS OF SERVICE AND |
|--|--|---|--|--|---|---|
| PENING WIDTH | * | | THE RESERVE OF THE PARTY OF THE | NG SIZE | | |
| (CLEAR SPAN) | 26 | FEET WIDE | 156" FLOOR | WIDTH MAX | DOUBLEWID | E |
| | PIER LOAD | MIN FOO | TING AREA | SQ. INL) FOR | SOIL PRESSU | RE LISTED |
| | (LBS) | 1000 PSF | 1500 PSF | 2000 PSF | 2500 PSF | 3000 PS |
| 4FI. | 780 Lbs. | 174 | 112 | . 83 | 65 | 54 |
| 6FT. | 1170 Lbs. | 238 | 152 | 112 | 89 | 74 |
| 8 FT. | 1560 Lbs. | 298 | 292 | 142 | 112 | 93 |
| 10 FT. | 1950 Lbs. | 360 | 232 | 171 | 136 | 112 |
| 12 FT. | 2340 Lbs. | 423 | 272 | 201 | 159 | 132 |
| 14 FT. | 2730 Lbs. | 485 | 312 | 230 | 183 | 151 |
| 16 FT. | 3120 Lbs. | 547 | 352 | 259 | 206 | 170 |
| 18 FT. | 3510 Lbs. | 610 | 393 | 289 | 229 | 190 |
| 20 FT. | 3900 Lbs. | 673 | 432 | 318 | 253 | 209 |
| 22 FT. | 4290 Lbs. | 735 | 473 | 348 | 276 | 228 |
| 24 FT. | 4680 Lbs. | 797 | 513 | 378 | 299 | 248 |
| 26 FT. | 5070 Lbs. | 859 | 553 | 408 | 322 | 267 |
| 28 FT. | 5460 Lbs. | 922 | 593 | 437 | 346 | 286 |
| 30 FT. | 5850 Lbs. | 985 | 633 | 467 | 369 | 306 |
| 32 FT. | 6240 Lbs. | 1047 | 673 | 496 | 393 | 325 |
| 34 FT. | 6630 Lbs. | 1109 | 713 | 526 | 416 | 345 |
| 36 FT. | 7020 Lbs. | 1172 | 754 | 555 | 440 | 364 |
| 00111 | | | | | | |
| 38 FT. | 7410 Lbs. | 1234 | 793 | 585 | 463 | 383 |
| 38 FT 40 FT 38 | 7800 Lbs. | 1296 | 834 | 614 | 487 | 403. |
| 38 Ft 40 FT | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIS OGETHER B | 834 R COLUMNS IT ON BOTH : EFORE SELE | 614 WITH A CLEA SIDES OF THE ECTING THE F | 487 R SPAN ON O E COLUMN, AE PROPER FOOT | 403. NE SIDE OF DD THE ING SIZE, |
| 38 FT. 46 FT. TE: PIER LOADS COLUMN ONLY. LUMN LOADS FOR | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIS OGETHER B | 834 R COLUMNS IT ON BOTH : EFORE SELE | 614 WITH A CLEA SIDES OF THE ECTING THE F | 487 R SPAN ON O E COLUMN, AE PROPER FOOT | 403. NE SIDE OF DD THE ING SIZE, |
| 38 FT. 46 FT. TE: PIER LOADS COLUMN ONLY. LUMN LOADS FOR | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIST OGETHER BODES FOR THE | 834 R COLUMNS IT ON BOTH : EFORE SELE IE FOOTING | 614 WITH A CLEASIDES OF THE CTING THE F | 487 R SPAN ON O E COLUMN, AE PROPER FOOT | 403. NE SIDE OF DO THE ING SIZE, |
| 38 FT | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIST OGETHER BODES FOR THE | 834 R COLUMNS IT ON BOTH : EFORE SELE IE FOOTING | 614 WITH A CLEASIDES OF THE CTING THE F | R SPAN ON OF E COLUMN, ALPROPER FOOT | 403. NE SIDE OF DD THE ING SIZE, |
| 38 FT. 46 FT. TE: PIER LOADS COLUMN ONLY. LUMN LOADS FOR | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIST OGETHER BODES FOR THE | 834 R COLUMNS IT ON BOTH : EFORE SELE IE FOOTING | 614 WITH A CLEASIDES OF THE CTING THE F | 487 R SPAN ON O E COLUMN, AE PROPER FOOT | 403. NE SIDE OF DD THE ING SIZE, |
| 38 FT. 46 FT. TE: PIER LOADS COLUMN ONLY. LUMN LOADS FOR | 7800 Lbs. SPECIFIED ABO WHEN CLEAR REACH SPAN T | 1296 OVE ARE FOR SPANS EXIST OGETHER BODES FOR THE | 834 R COLUMNS IT ON BOTH : EFORE SELE IE FOOTING | 614 WITH A CLEASIDES OF THE CTING THE F | R SPAN ON OF E COLUMN, ALPROPER FOOT | 403. NE SIDE OF DD THE ING SIZE, |

REF. CALC#2- JUNE 25 2008

REF. CALC#1-7/26/07



| | STEEL BEAM P | YER LOAD | S AND FOO | TING ARE | AS (ROOF | ZONE=SOL | THI |
|--------------|--------------|----------|-----------|-------------|----------|----------|--------------|
| | PIER | MIN FOO | TING ARE | A (SQ. IN.) | FOR SOIL | PRESSURE | |
| PIER SPACING | LOAD | 1000 PSF | 1500 PSF | 2000 PSF | 2500 PSF | 3000 PSF | and the same |
| 4FT. | 2408 Lbs. | 434 | 279 | 206 | 163 | 135 | |
| 5FT. | 3009 Lbs. | 530 | 341 | 251 | 199 | 165 | |
| 6 FT. | 3611 Lbs. | 626 | 402 | 297 | 235 | 195 | |
| 7 FT. | 4213 Lbs. | 723 | 464 | 343 | .271 | 225 | |
| 8FT. | 4815 Lbs. | 819 | 527 | 388 | 308 | 255 | |
| 9FT. | 5417 Lbs. | 915 | 589 | 434 | 343 | 284 | |
| 10 FT. | 6019 Lbs. | 1012 | 651 | 479 | 380 | 314 | |

| SIDE | EWALL OPENIN | | | 1 10" E/ | | OOF ZONE |
|------------|--------------|----------|----------|-------------|----------|----------|
| | PIER | MIN FOO | TING ARE | A (SQ. IN.) | FOR SOIL | PRESSUR |
| CLEAR SPAN | LOAD | 1000 PSF | 1500 PSF | 2000 PSF | 2500 PSF | 3000 PSF |
| 4FT. | 440 Lbs. | 119 | 77. | 56 | 45 | 38 |
| 6 FT. | 660 Lbs. | 154 | 99 | 73 | 58 | 48 |
| 8 FT. | 880 Lbs. | 189 | 122 | 90 | 71 | 59 |
| 10 FT. | 1099 Lbs. | 225 | 144 | 107 | 85 | 70 |
| 12 FT. | 1319 Lbs. | 259 | 167 | 124 | 97 | 81 |
| 14 FT. | 1539 Lbs. | 295 | 190 | 139 | 111 | 92 |
| 16 FT. | 1759 Lbs. | 330 | 213 | 156 | 124 | 103 |

NOTE: CHECK LOCAL BUILDING CODES FOR THE FOOTING THICKNESS REQUIRED IN YOUR AREA.

NOTE: TABLES APPLY TO SOUTH (20 PSF) ROOF LIVE LOAD

APPROVED BY

FEDERAL MANUFACTURED HOME CONSTRUCTION AND SAFETY STANDARDS

STATE OF CONTRACT OF CONTRACT

REF. CALC #2-JUNE 25 2008 REF. CALC #1-7/26/07



State of Florida DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

TALLAHASSEE, FLORIDA 32399-0500

FREU O. DICKINSON, III

October 27, 1999

Mr. Lon Larson, General Manager Manufactured Housing Foundation Systems A Division of Oliver Technologies 562 Glenhenther Drive San Marcos, California 92069

Dear Mr. Larson:

We wish to acknowledge receipt of your print specifications and test results certifying your Adjustable Outrigger listed below complies with the Federal Manufactured Construction and Safety Standards, § 3280.305 and § 3280.401 and with the rules and regulations set forth by the Department of Highway Safety and Motor Vehicles, Florida Administrative Rule Code 15C-1.01105.

Based on the information submitted to the bureau, the following product is listed for use in Florida when the installation instructions showing the way the outrigger was tested, are provided.

| MODEL # | INDENTIFICATION | DESCRIPTION |
|---------|---------------------|-----------------------------------|
| 1055-17 | Adjustable Outdeget | Bracket, Pipe, & Screw Adjustment |

NOTE: The outrigger was tested on September 19, 1999, for an allowable load of 1700 pounds.

If you have any questions, please advise at (850) 413-7600.

Sincerely,

Phil Bergelt, Program Manager Bureau of Mobile Home and Recreational Vehicle Construction

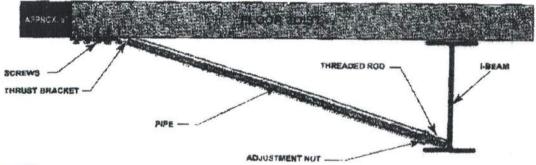
Division of Motor Vehicles

PB:bsc



OLIVER TECHNOLOGIES, INC. Adjustable Outrigger Installation Instructions MODEL # 1055-11

- 1. Locate the floor joist that requires support.
- 2. Mark the I-Beam directly under the floor joist to align the outrigger.
- 3. Adjust the nut on the threaded rod so it clears the frame flange for easy adjustment.
- 4. Set the threaded rod in the pipe and against the frame.
- 5. Set the notched end of the thrust bracket into the end of the pipe and secure it with 5 # 12 x 2" screws to the floor joist. The thrust bracket should be approximately 6" from the outside rim joist.
- 6. Bottom board and insulation should be between the bracket and the joist.
- 7 For minor adjustments align the door and window openings by tightening or loosening the adjustment nut. For all other adjustments use a hydraulic jack to raise the floor joist before installation of the outrigger.



NOTES:

"REMOVE OUTRIGGER WHEN HOME IS BEING TRANSPORTED
"SPECIFY WIGHT OF HOME WHEN ONDERING OUTRIGGER. PIPE MAY BE CUT TO FIT
"THE ADJUSTABLE OUTRIGCERS SHALL ONLY BE USED ON HOMES FOR OPENINGS UP TO:
B" ON 20 LB ROOF LOAD.

Listing # 1055-11 Patent # 6.334.279

4" ON 30 LB ROOF LOAD

3" ON 40 LB ROOF LOAD

"WHEN ADJUSTABLE OUTRIGGERS ARE USED FOR DOOR AND WINDOW SUPPORTS, THEY MUST BE INSTALLED ON THE CLOSEST FLOOR JOIST UP TO 16" FROM THE OUTSIDE EDGE OF THE OPENING

100 NOT INSTALL ADJUSTABLE OUTRIGGER AT LOCATIONS WHERE THE HOME MANUFACTURER INDICATES ALDAD IN EXCESS OF 1,700 LBS.
THE ADJUSTABLE OUTRIGGER MUST BE USED ON A MINIMUM 10' I-BEAM AND BE PLACED WITHIN 4' OF A MAIN FRAME SUPPORT PIER OR
FRAME CROSSMEMBER.

Revised 1/1/11

98/27/2918 15:47



Terry L. Rhodes Executive Director

2900 Apalachee Parkway Tallahassea, Florida 32399-0500 www.Dismv.gov

MEMORANDUM

TO:

All Steel Telescoping Lateral Arm Manufacturers

FROM:

Wayne Jordan, Operations Services Manager, Manufactured Housing Section

Florida Department of High Safety and Motor Vehicles

DATE:

August 6, 2018

SUBJECT:

Elimination of Requirement for Supplemental Frame Ties and Stabilizer Plates at All Steel

Telescoping Lateral Arm Locations

The Department has reviewed some concerns expressed by several of the steel telescoping lateral arm manufacturers regarding the Department's requirement to install supplemental frame ties and stabilizer plates on the steel telescoping lateral arm systems.

In an abundance of caution, the Department required supplemental frame ties /stabilizer plates at each lateral arm location in June of 2002. After researching data from storm reports, the Department has found no evidence of the need for these supplemental frame ties/stabilizer plates. With this information in mind, the Department will discontinue the requirement for the supplemental frame ties/stabilizer plates at each lateral arm location.

Manufacturers who wish to change their installation instructions to remove this requirement, must resubmit their last engineering report showing the whole house test without the use of supplemental frame ties/stabilizer plates. Upon receipt and review of the engineering report, the Department will remove the requirement for supplemental frame ties/stabilizer plates. Each manufacturer will be notified within two weeks of receipt of the engineering report. These reports must be sent to my attention at 5701 East Hillsborough Ave, Suite 2228, Tampa, Florida 33610.

If the need arises in the future, the Department may impose additional requirements to the steel telescoping lateral arm systems with a change to Florida Administrative Code Rule 15C-1.



OLIVER TECHNOLOGIES, INC.
FLORIDA INSTALLATION INSTRUCTIONS FOR THE
MODEL 1101 "V" SERIES ALL STEEL FOUNDATION SYSTEM

MODEL 1101"V" (Steps 1-14) LONGITUDINAL ONLY: Follow Steps 1-9 LATERAL ONLY: Follow Steps 1-3 and Steps 10-14

ENGINEERS STAMP

FOR CONCRETE APPLICATIONS: Follow Steps 15-18 ENGINEERS STAMP

- 1. SPECIAL CIRCUMSTANCES: If the following conditions occur STOP! Contact Oliver Technologies at 7-800-284-7437:
 - a) Pier height exceeds 48"
- c) Roof eaves exceed 16"
- e) Location is within 1500 feet of coast

- b) length of home exceeds 76'
- d) Sidewall height exceed 96"

INSTALLATION OF GROUND PAN

2. Remove weeds and debris in an approximate two foot square to expose firm soil for each ground pan (C).

1 50"

3. Place ground pan (C) directly below chassis I-beam. Press or drive pan firmly into soil until flush or below soil then install pier per manufacturer's instructions or per Florida Regs.

SPECIAL NOTE: The longitudinal "V" brace system may also serve as a pier under the home and should be loaded as any other pier. It is recommended that after leveling piers, and one-third inch (1/3") before home is lowered completely on to piers, complete steps 4 through 9 below then remove Jacks.

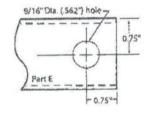
INSTALLATION OF LONGITUDINAL "V" BRACE SYSTEM (Model 1101 L "V")

NOTE: WHEN INSTALLING THE LONGITUDINAL SYSTEM ONLY, A MINIMUM OF 2 SYSTEMS PER FLOOR SECTION IS REQUIRED. SOIL TEST PROBE SHOULD BE USED TO DETERMINE CORRECT TYPE OF ANCHOR PER SOIL CLASSIFICATION. IF PROBE TEST READINGS ARE BETWEEN 175 & 275 A 5 FOOT ANCHOR MUST BE USED, IF PROBE TEST READINGS ARE BETWEEN 276 & 350 A 4 FOOT ANCHOR MAY BE USED. USE GROUND ANCHORS WITH DIAGONAL TIES AND STABILIZER PLATES EVERY 5'4". VERTICAL TIES ARE ALSO REQUIRED ON HOMES SUPPLIED WITH VERTICAL TIE CONNECTION POINTS (PER FLORIDA REG.).

4. Choose one of the approved longitudinal tube installations; either Diagram A or B. Then select the correct square tube (E) length from the diagram for appropriate pier height at support location or cut and drill 1.5" square tube to achieve appropriate length.

| | (40° Min 45° Max.) | Tube Length | Tube Length |
|---|---------------------|-------------|-------------|
| Γ | 7 3/4" to 25" | 22" | 18" |
| | 24 3/4" to 32 1 /4" | 32" . | 18" |
| ľ | 33" to 41" | 44" · | 18" |
| T | 40" to 48" | 54" | 18" |

40" to 48" 54 Diagram A



| Tube Length |
|---------------------------------------|
| 20" |
| 28" |
| 39" |
| 44" |
| 54" |
| ֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜ |

1.50"

PIER HEIGHT

Diagram B

- 5. Install (2) of the 1.50" square tubes (E) into the "U" bracket (J), insert carriage bolt and leave nut loose for final adjustment.
- 6. Place I-beam connector (F) loosely on the bottom flange of the I-beam.
- 7. (For Diagram A installation) Slide the selected 1.25" tube (E) into a 1.50" tube (E) and attach to I-beam connectors (F) and fasten loosely with bolt and nut. (For Diagram B installation) Attach the selected 1.5" tubes (E) to the I-beam connectors (F) and fasten loosely with bolts and nut.
- 8. Repeat steps 6 through 7 to create the "V" pattern of the square tubes loosely in place.
- 9. Using standard hand tools tighten all nuts and bolts. (For Diagram A Installation only, secure 1.25" and 1.50" tubes using four(4) 1./4"-14 x 3/4" self-tapping screws in pre-drilled holes.)

INSTALLATION OF LATERAL TELESCOPING TRANSVERSE ARM SYSTEM (Model 1101 T "V")

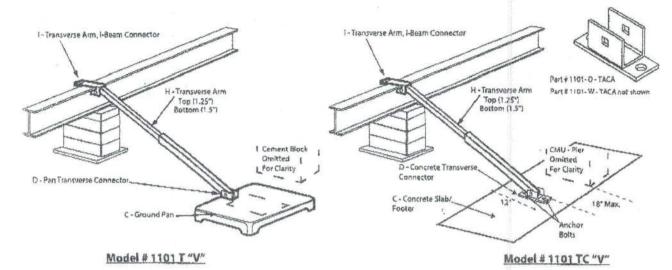
THE MODEL 1101 "V" (LONGITUDINAL & LATERAL PROTECTION) ELIMINATES THE NEED FOR STABILIZER PLATES & FRAME TIES.

NOTE: THE USE OF THIS SYSTEM REQUIRES VERTICAL TIES SPACED AT 5'4".

FOUR FOOT (4') GROUND ANCHOR MAY BE USED EXCEPT WHERE THE HOME MANUFACTURER SPECIFIES DIFFERENT.

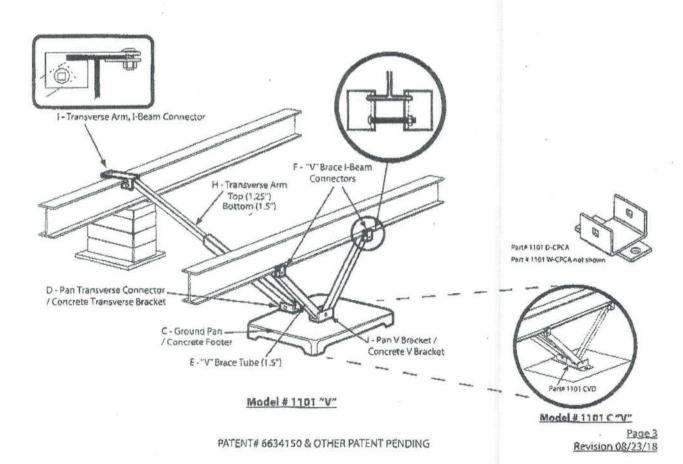
- 10. Install remaining vertical tie-down straps and 4' ground anchors per home manufacturer's instructions. NOTE: Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs. require a 5' anchor per Florida Code.
- 11. Select the correct square tube brace (H) length for set-up lateral transverse at support location. The lengths come in either 60" or 72" lengths. (With the 1.50" tube as the bottom tube, and the 1.25" tube as the inserted tube.)
- 12. Install the 1.50 transverse brace (H) to the ground pan connector (D) with bolt and nut.
- 13. Slide 1.25" transverse brace into the 1.50" brace and attach to adjacent l-beam connector (1) with bolt and nut.
- 14. Secure 1.50" transverse arm to 1.25" transverse arm using four (4) 1 /4" 14 x 3/4" self-tapping screws in pre-drilled holes.

Page!



Florida approved 4' ground anchors may be used in all locations except where home manufacturers specifications for sidewall straps are in excess of 4,000 lbs. These locations require a 5' anchor. Per Florida code.

- C = GROUND PAN / CONCRETE FOOTER OR RUNNER
- D = GROUND PAN / CONCRETE U BRACKETS TRANSVERSE CONNECTOR (connects with grade 5 1/2" x 2" 1/2" carriage bolt and nut)
- € = TELESCOPING V BRACE TUBE ASSEMBLY (1.5" TUBE BOTTOM AND 1.25" TUBE INSERT) OR 1.5" TUBE
- F = "V" BRACE J-BEAM CONNECTOR ASSEMBLY
- H = TELESCOPING TRANSVERSE ARM ASSEMBLY
- 1 = TRANSVERSE ARM I-BEAM CONNECTOR (connects with grade 5 1/2" x 2" 1/2" carriage bolt and nut)
- J = V PAN BRACKET (connects with grade 5 1/2" x 2" 1/2" carriage bolt and nut)



467 Swan Ave. • Hohenwald, TN 38462 • (800) 284-7437 • www.ol:vertechnologies.com • Fax (931) 796-8811

INSTALLATION USING CONCRETE RUNNER/ FOOTER

15. A concrete runner, footer or slab may be used in place of the steel ground pan.

6785745700

- a) The concrete shall be minimum 2500 psi mix
- b) A concrete runner may be either longitudinal or transverse, and must be a minimum of 8" deep with a minimum width of 16 inches longitudinally or 18 inches transverse to allow proper distance between the concrete bolt and the edge of the concrete (see below).
- c) Footers must have minimum surface area of 441 sq. in. (i.e. 21" square), and must be a minimum of 8" deep.
- d) If a full slab is used, the depth must be a 4" minimum. Special inspection of the system bracket installation is not required. Footers must allow for at least 4" from the concrete bolt to the edge of the concrete.

NOTE: The bottom of all footings, pads, slabs and runners must be per local jurisdiction.

LONGITUDINAL: (Model 1101 LC "V")

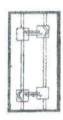
5. When using Part# 1101-W-CPCA (wetset) simply install the bracket in runner/footer OR When installing in cured concrete use Part# 101-D-CPCA (dryset). The 1101 (dryset) CA bracket is attached to the concrete using (2) 5/8"x3" concrete wedge bolts (Simpson part # \$162300H 5/8" X 3" or Powers equivalent). Place the CA bracket in desired location. Mark bolt hole locations, then using a 5/8" diameter masonry bit, drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the holes. Place wedge bolts into drilled noies, then place 1101 (dry set) CA bracket onto wedge bolts and start wedge bolt nuts. Take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt). The sleeve of concrete wedge bolt needs to be at or below the top of concrete. Complete by tightening nuts.

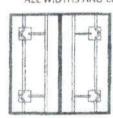
LATERAL: (Model 1101 TC "V")

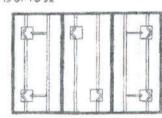
- 17. For wet set (part # 1101-W-TACA) installation simply install the anchor bolt into runner/footer. For dry set installation (part # 1101-D-TACA) mark bolt hole locations, then using a 5/8" diam. masonry bit. drill a hole to a minimum depth of 3". Make sure all dust and concrete is blown out of the hole. Place wedge bolts (Simpson part #5162300H 5/8" X 3" or Powers equivalent) into (D) concrete dry transverse connector and into drilled hole. If needed, take a hammer and lightly drive the wedge bolts down by hitting the nut (making sure not to hit the top of threads on bolt), then remove the nut. The sleeve of concrete wedge bolt needs to be at or below the top of concrete.
- 18. When using part# 1101 CVW (wetset) or 1101 CVD (dryset), install per steps 17 & 18.

- 1. LENGTH OF HOUSE IS THE ACTUAL BOX SIZE
- 2. LOCATION OF TRANSVERSE BRACING ONLY
- 3 C = LOCATION OF LONGITUDINAL BRACING ONLY
- 4. C- = TRANSVERSE AND LONGITUDINAL LOCATIONS

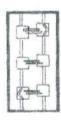
ALL WIDTHS AND LENGTHS UP TO 52"

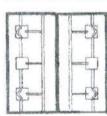


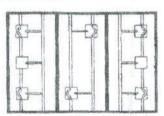












HOMES WITH 5/12 ROOF PITCH REQUIRE: PER FLORIDA REGULATIONS 6 systems for home lengths up to 52' and 8 systems for homes over 52' and up 80'.

PATENT# 6634150 & OTHER PATENT PENDING