

Parcel:

28-4S-17-08815-000 (32623)

Owner & Property Info

Result: 15 of 48

Owner	STRICKLAND BRENT MATHEW 5233 NW FALLING CREEK RD WHITE SPRINGS, FL 32095	
Site	172 DAYLILY GLN, LAKE CITY	174 SW CR 242A Lot 5
Description*	LOT 1 BLK 4 FLORA CREST FARMS UNIT A, EX .55 AC DESC IN ORB 942-586 & EX 1.33 AC DESC IN ORB 1039-600. 360-687, 719-424, 750-572, 523 -2325, TD 1371-440, TD 1372- 1726, QC 1396-2203,	
Area	1.75 AC	S/T/R 28-4S-17
Use Code**	MH PARK (2802)	Tax District 2

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Brent Strickland PHONE 386-365-7043

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Strickland Lot 5

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Brent Strickland</u>	Signature <u>Brent Strickland</u>
	License #: <u>Owner</u>	Phone #: <u>386-365-7043</u>
	Qualifier Form Attached <input type="checkbox"/>	
MECHANICAL/ A/C _____	Print Name <u>Brent Strickland</u>	Signature <u>Brent Strickland</u>
	License #: <u>Owner</u>	Phone #: <u>386-365-7043</u>
	Qualifier Form Attached <input type="checkbox"/>	

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

WATER
PNEUMATIC

481.68

Pitcher Panel

30' SETBACK



170.4

Proposed Layout

STICKLAND

2845-77-08815-000

426.31

$$\underline{1'' = 60' + 22''}$$

2/15/21

North 

2092





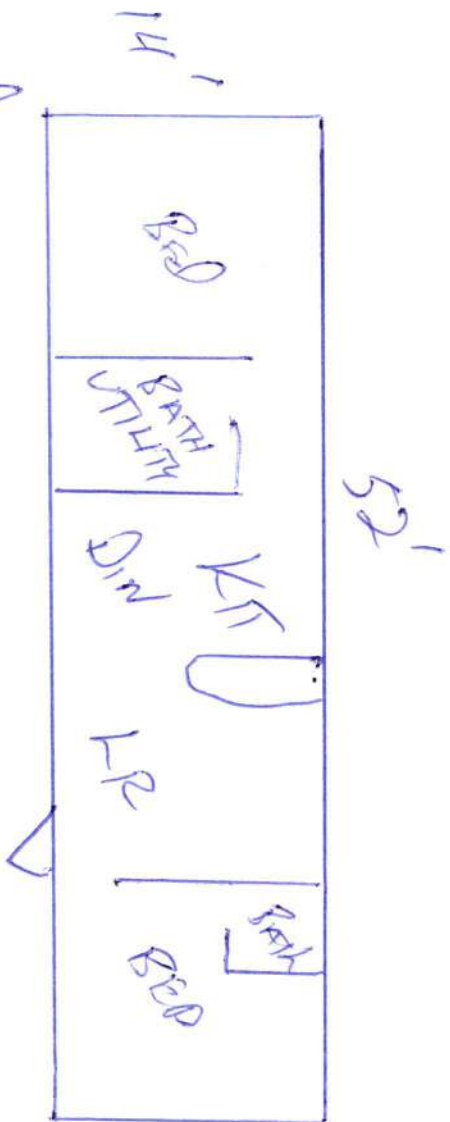
LOTS


2/15/21

Stuckland

2BR-12BR

No. 501/14



Proposed
128 SR

2/16/21

PERMIT WORKSHEET

PERMIT NUMBER

Installer Brent Strickland License # IH 1104218

Installer Mobile Phone # 386-365-7043

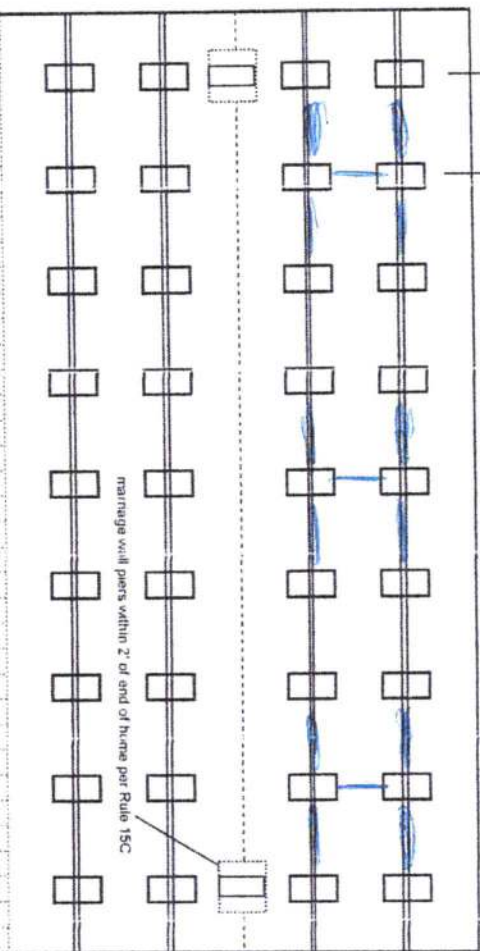
Address of home 174 SUCCE 242A LOT 5
being installed Atelung, FL 32024

Manufacturer SKYLINE Length x width 52x14

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 B.S.



New Home ☐ Used Home ☒

Home installed to the Manufacturer's Installation Manual ☐

Home is installed in accordance with Rule 15-C ☒

Single wide ☒ W nd Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 105783

Triple/Quad ☐ Serial # 0361-06922

Roof System: ☒ Typical ☐ Hinged

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (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'
1500 psf	4'	5'	6'	7'	8'	9'
2000 psf	5'	6'	7'	8'	9'	10'
2500 psf	6'	7'	8'	9'	10'	11'
3000 psf	7'	8'	9'	10'	11'	12'
3500 psf	8'	9'	10'	11'	12'	13'

* Interpolated from Rule 15C-1 pier spacing table

PIER PAD SIZES

I-beam pier pad size 10x10
Perimeter pier pad size 17x25
Other pier pad sizes (required by the mfg.) 10x10

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

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

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

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

Sidewall Longitudinal Marriage wall Shearwall
Number

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ 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 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 requires anchors with 4000 lb holding capacity.

B.S. Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Brent Strickland

Date Tested

2-16-21

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. _____

Plumbing

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

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

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: _____ Length: _____ Spacing: _____
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. _____

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

Brent Strickland Date 2-16-21

Manufacturer's Name and Address

SKYLINE CORPORATION
PO BOX 2648
OCALA, FL 32678

HUD No.

FLA 442420

UL-566266

Plant No.	Model Designation	Serial No.	Date of Mfg.
0535	52X14 RBL-4400	0361-0692Z	11/27/89

This mobile home is designed to comply with the Federal Mobile Home Construction and Safety Standard in force at the time of manufacture. Design Approval by Underwriters Laboratories, Inc.

Factory Installed Equipment Includes:

EQUIPMENT		MANUFACTURER	MODEL DESIGNATION	RATING OF FACTORY INSTALLED CIRCUIT (APPLIANCE NOT FACTORY INSTALLED)
Comfort Heating	1	Coleman	7956A-856	
Air Conditioning	2	none		
Cooking Range	3	Magic Chef	31FA7	
Built-in Oven	4	none		
Counter-top Cooking Unit	5	none		
Refrigerator	6	GE	TA14S	
Water Heater	7	STATE	SCI 201HMT6K	
Clothes Washer	8	none		
Clothes Dryer	9	none		
Dishwasher	10	none		
Food Waste	11	none		
Smoke Detector	12	BRK	2839WI	
Fireplace	13	none		
	14			

Instructions for all work to be performed in the field are located in the kitchen drawer.

The maps below define the design loads for each geographical area.
This mobile home has been designed for the roof and wind load zones as checked below:

ROOF LOAD

- ☐ North -- 40 psf
☐ Middle -- 30 psf
☒ South -- 20 psf
☐ Other _____

**WIND LOAD**

- ☐ Zone I -- 15 psf horizontal and 9 psf uplift
☒ Zone II (Hurricane) -- 25 psf horizontal and 15 psf uplift
☐ Other _____

