

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 8-23-05) Zoning Official 26.05.06 Building Official OK JH 5-22-06
 AP# D6005-80 Date Received 5-22-06 By LH Permit # 24604
 Flood Zone A Development Permit N/A Zoning A-3 Land Use Plan Map Category A-3
 Comments #8 1st Floor to be 2' above Graded Rd.

~~(- NEED IN-COUNTRY PERMIT - PER J.D.P.)~~

FEMA Map# _____ Elevation _____ Finished Floor _____ River _____ In Floodway _____

- ☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☐ EH Release ☐ Well letter ☒ Existing well
☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from Installer

Property Appraise sheet.

- Property ID # R13-65-17-09660-001 Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home ☒ Year 1992
- Applicant Carol Mattox Phone # 352-317-1326
- Address 6801 NW 214th St Alachua FL 32615
- Name of Property Owner Carol Mattox Phone# 352-317-1326
- 911 Address 2989 SE October Road Lake City 32025
- Circle the correct power company - FL Power & Light - Clay Electric
 (Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Carol Mattox Phone # 352-317-1326
 Address 6801 NW 214th St Alachua FL 32615
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 511 x 211 Total Acreage 1.3 acres
- Do you : Have an Existing Drive or need a Culvert Permit or a Culvert Waiver (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home no
- Driving Directions to the Property S on Hwy 41, T/L onto SR 238, go 1/4 mile to SE October Rd + T/R. Go S past I-75 west area, about 1 1/2 miles to property on the left across from 2960 SE Oct. Rd.
- Name of Licensed Dealer/Installer Bonnie Norris Phone # 386-752-3871
- Installers Address 1004 SW Charles Terr, Lake City, FL 32024
- License Number IH0000049 Installation Decal # 266885

JW - JH 5-26-06 Carol 5-26-06

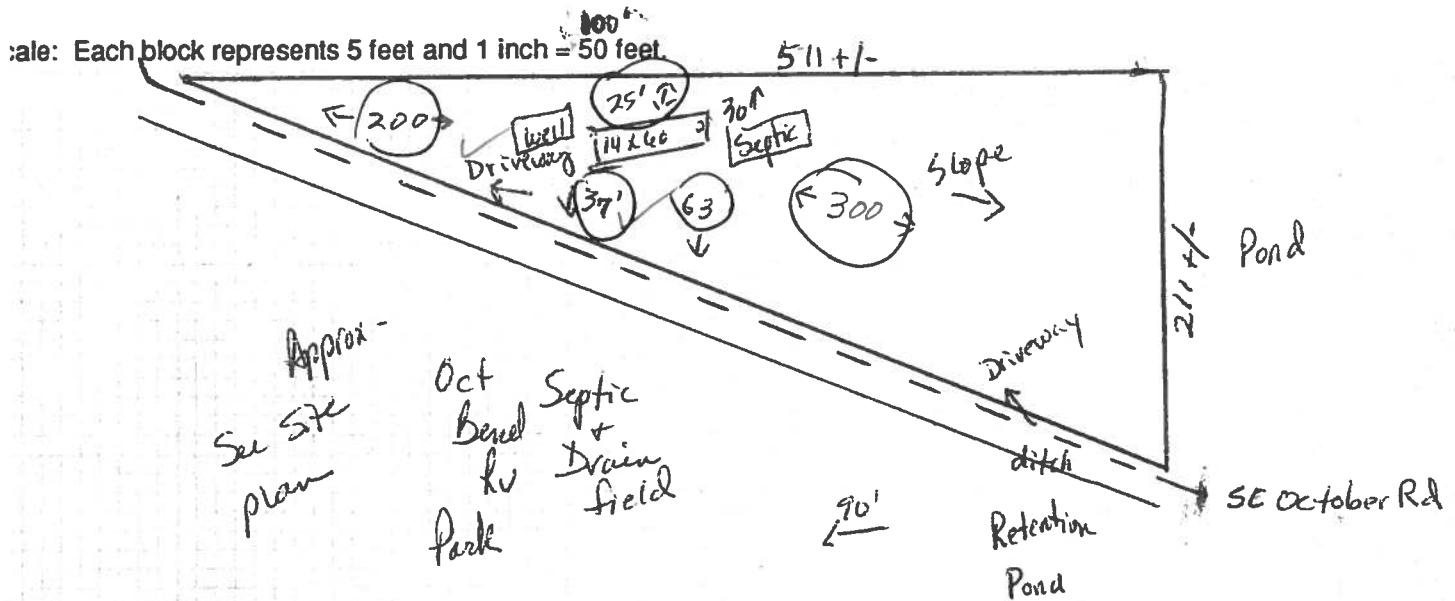


STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN



Notes: Owner owns property across road from proposed site -
October Bend RV Park has been zoned, permitted for retention pond
+ septic / drain field system. Public well is permitted, but is
farther west. See attached survey of both parcels + Oct Bend RV Park
site plan.

Site Plan submitted by: _____ Signature _____ Title _____

Plan Approved _____ Not Approved _____ Date _____

by _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

@ CAM112M01 S CamaUSA Appraisal System
 5/09/2006 14:12 Legal Description Maintenance
 Year T Property Sel
 2006 R 13-6S-17-09660-001

Columbia County
 1250 Land 001
 26918 AG 002
 Bldg 000
 500 Xfea 001
 28668 TOTAL B:

MATTOX CAROL LYNN

| | | | |
|----|------------------------------------|-----------------------------------|----|
| 1 | W1/2 OF W1/2 OF NE1/4 & 6 AC . . | OFF E SIDE OF NE1/4 OF NW1/4 & | 2 |
| 3 | E1/2 OF SE1/4 OF NW1/4 & 5 AC . | IN NE COR OF NE1/4 OF SW1/4 & | 4 |
| 5 | W1/2 OF SE1/4 & THAT PORTION . . | OF W1/2 OF SW1/4 E OF I-75. . . . | 6 |
| 7 | ORB 375-227,, 640-637-38,, | 818-1655 (ASSESSING ONLY THAT . | 8 |
| 9 | PORTION LYING IN COLUMBIA | COUNTY PER DEED RECORDED IN . . . | 10 |
| 11 | COLUMBIA COUNTY) | | 12 |
| 13 | | | 14 |
| 15 | | | 16 |
| 17 | | | 18 |
| 19 | | | 20 |
| 21 | | | 22 |
| 23 | | | 24 |
| 25 | | | 26 |
| 27 | | | 28 |

Mnt 1/15/2003 TERRY

F1=Task F3=Exit F4=Prompt F10=GoTo PgUp/PgDn F24=More

CODE ENFORCEMENT DEPARTMENT
COLUMBIA COUNTY, FLORIDA
OUT OF COUNTY MOBILE HOME INSPECTION REPORT

COUNTY THE MOBILE HOME IS BEING MOVED FROM Alachua
OWNERS NAME Carol Mattox PHONE 352-317-1326 BELL
INSTALLER Ronnie Norris PHONE 752 3871 CELL 961 6419
INSTALLERS ADDRESS 1004 SW ~~inter~~ Chavara Ter.

MOBILE HOME INFORMATION

MAKE Destiny YEAR 92 SIZE 14 X 60
COLOR SERIAL No. 028522
WIND ZONE II SMOKE DETECTOR

INTERIOR:
FLOORS OK
DOORS OK
WALLS OK Draw wall.
CABINETS OK
ELECTRICAL (FIXTURES/OUTLETS) OK

EXTERIOR:
WALLS / SIDING Ulline OK.
WINDOWS OK
DOORS OK
STATUS:
APPROVED ✓ NOT APPROVED

NOTES:

INSTALLER OR INSPECTORS PRINTED NAME Ronnie Norris

Installer/Inspector Signature Ronnie Norris License No. IH0000041 Date 5/19/06

ONLY THE ACTUAL LICENSE HOLDER OR A BUILDING INSPECTOR CAN SIGN THIS FORM.

NO WIND ZONE ONE MOBILE HOMES WILL BE PERMITTED. MOBILE HOMES PRIOR TO 1977 ARE PRE-HUD AND THE WIND ZONE MUST BE PROVEN TO BE PERMITTED.

BEFORE THE MOBILE HOME CAN BE MOVED INTO COLUMBIA COUNTY THIS FORM MUST BE COMPLETED AND RETURNED TO THE COLUMBIA COUNTY BUILDING DEPARTMENT.

ONCE MOVED INTO COLUMBIA COUNTY AN INSPECTOR MUST COMPLETE A PRELIMINARY INSPECTION ON THE MOBILE HOME. CALL 386-719-2038 TO SET UP THIS INSPECTION. NO PERMIT WILL BE ISSUED BEFORE THIS IS DONE.

LETTER OF AUTHORIZATION TO PULL PERMITS

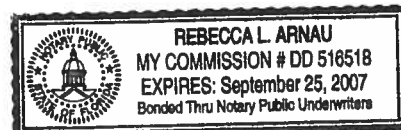
I, Ronnie Norris, DO HEREBY GRANT
Carol Mattox, AUTHORIZATION TO PULL THE NECESSARY
PERMITS REQUIRED FOR THE DELIVERY AND SET OF A MANUFACTURED
HOME IN Columbia COUNTY, FLORIDA.

Ronnie Norris
Signature

THIS FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS
19 DAY OF May, 2006, BY Ronnie
Norris, WHO IS PERSONALLY KNOWN TO ME.

STATE OF FLORIDA
COUNTY OF Columbia

Rebecca L. Arnau
NOTARY PUBLIC



(STAMP)

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home Installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.00.

I, Rowan Norris, license number III 0000049
Please Print

Do hereby state that the installation of the manufactured home for:

Carol mattox at 2989 SE October Rd Lake City, FL
Applicant 911 Address

will be done under my supervision.

[Signature]
Signature

Sworn to and subscribed before me this 19 day of may
2006.

Notary Public: Rebecca L. Arnau
Signature

My Commission Expires:



AFFIDAVIT

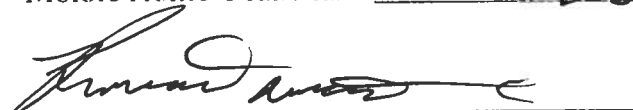
I Certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer Name: Carol Mattox

Property ID: Sec: _____ Twp: _____ Rge: _____ Tax Parcel No: R13-65-17-09660-00

Lot: _____ Block _____ Subdivision: _____

Moible Home Year/Make: 1992 Destiny Size: 14x60



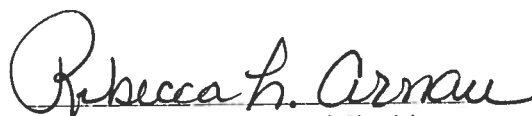
Signature of Mobile Home Installer

Sworn to and subscribed before me this 19 day of May, 20 06

By Ronnie Norris

Notary's name





Notary Public, State of Florida

Commission No. DD516518

Personally Known: ✓

Id Produced (type) _____

PERMIT NUMBER

Installer

Donna Roth

License #

IH000049

Address of home being installed

Manufacturer

Destiny

Length x width

14 x 60

NOTE:

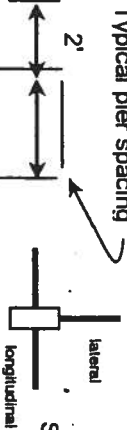
if home is a single wide fill out one half of the blocking plan
if home is a triple or quad wide sketch in remainder of home

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

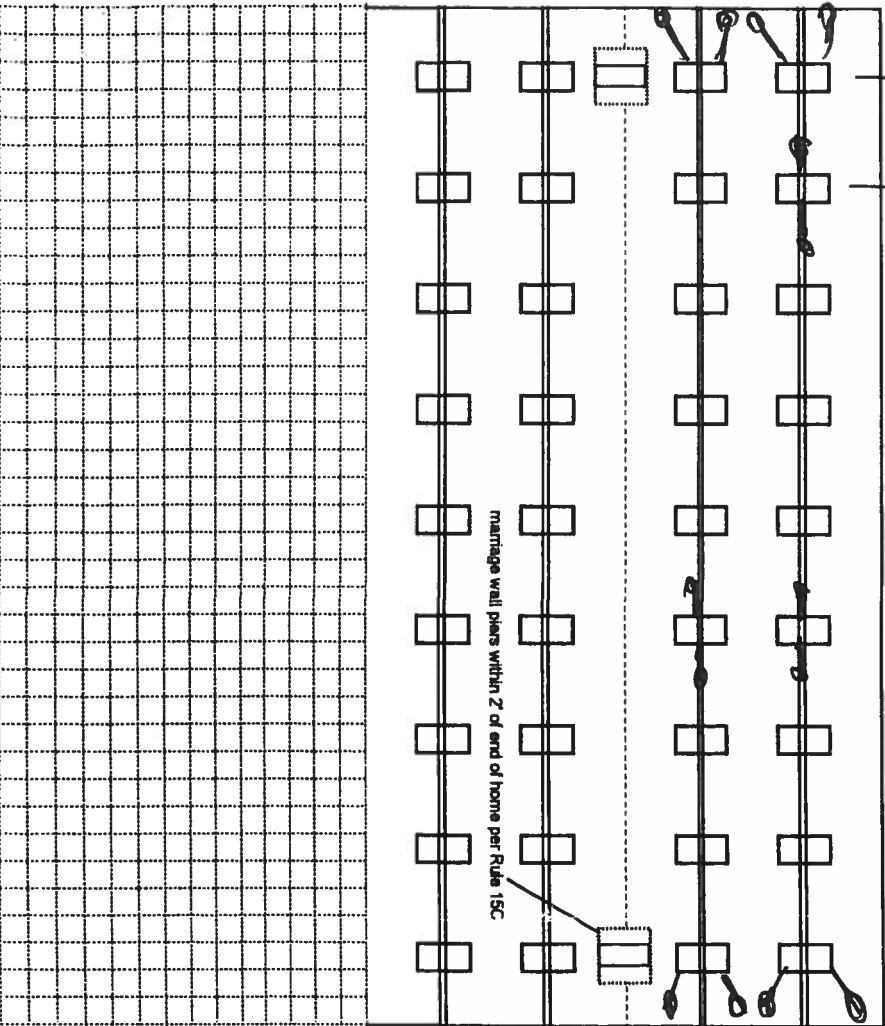
RV

Typical pier spacing



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

marriage wall piers within 2' of end of home per Rule 15C



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 #

266885

Triple/Quad

☐

Serial #

088522

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' 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

17x24

Perimeter pier pad size

18

Other pier pad sizes (required by the mfg.)

18

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

5'4"

ANCHORS

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

Number

Sidewall

Longitudinal

Marriage wall

Shearwall

32

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

x1500 x1600 x1500

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.

x1600 x1500 x1600

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 4. A test showing 275 inch pounds or less will require 4 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.

SC Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

James A. Burns

Date Tested

5-17-06

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 SC
Water drainage: Natural SC Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: SW 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

Installed:

Type gasket Pg.

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

James A. Burns

Date 5-16-06

DESTINY I.L.C.
DRAFTING SERVICES DEPT.
 208 N.W. BRYANT ROAD
 MOULTON, GEORGIA 31746
 PHONE: 1-866-782-8600

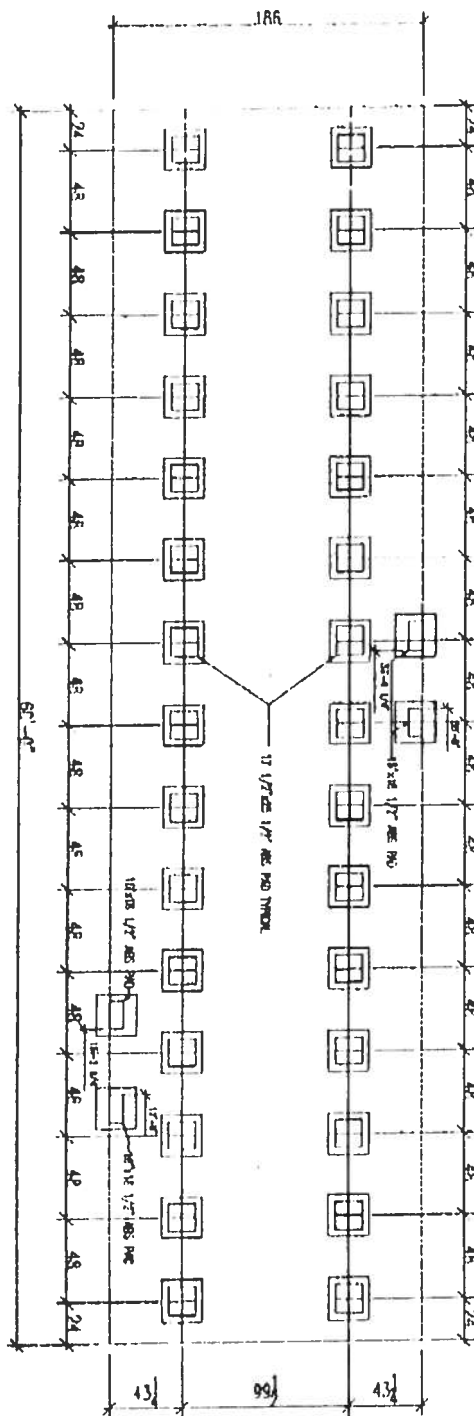
| DIM SPAN BETWEEN PIER UNDER L-BEAM (FEET) | | WOODEN CLEAR SPAN FOR BAYING LINE SUPPORTS (FEET) | |
|---|------------------|---|------------------|
| PAD SIZE (SQ. FT.) | BEAM WIDTH (IN.) | PAD SIZE (SQ. FT.) | BEAM WIDTH (IN.) |
| 12' x 12' | 12" | 12' x 12' | 12" |
| 12' x 15' | 15" | 12' x 15' | 15" |
| 12' x 18' | 18" | 12' x 18' | 18" |
| 12' x 21' | 21" | 12' x 21' | 21" |
| 12' x 24' | 24" | 12' x 24' | 24" |
| 12' x 27' | 27" | 12' x 27' | 27" |
| 12' x 30' | 30" | 12' x 30' | 30" |
| 12' x 33' | 33" | 12' x 33' | 33" |
| 12' x 36' | 36" | 12' x 36' | 36" |
| 12' x 39' | 39" | 12' x 39' | 39" |
| 12' x 42' | 42" | 12' x 42' | 42" |
| 12' x 45' | 45" | 12' x 45' | 45" |
| 12' x 48' | 48" | 12' x 48' | 48" |
| 12' x 51' | 51" | 12' x 51' | 51" |
| 12' x 54' | 54" | 12' x 54' | 54" |
| 12' x 57' | 57" | 12' x 57' | 57" |
| 12' x 60' | 60" | 12' x 60' | 60" |

| MAX. LOAD FOR 1000 PSF SOIL CAPACITY | | MAX. LOAD FOR 1500 PSF SOIL CAPACITY | | MAX. LOAD FOR 2000 PSF SOIL CAPACITY | |
|--------------------------------------|-----------------|--------------------------------------|-----------------|--------------------------------------|-----------------|
| PAD SIZE (SQ. FT.) | MAX. LOAD (KIP) | PAD SIZE (SQ. FT.) | MAX. LOAD (KIP) | PAD SIZE (SQ. FT.) | MAX. LOAD (KIP) |
| 12' x 12' | 120 | 12' x 12' | 180 | 12' x 12' | 240 |
| 12' x 15' | 180 | 12' x 15' | 270 | 12' x 15' | 360 |
| 12' x 18' | 216 | 12' x 18' | 324 | 12' x 18' | 432 |
| 12' x 21' | 252 | 12' x 21' | 378 | 12' x 21' | 504 |
| 12' x 24' | 288 | 12' x 24' | 432 | 12' x 24' | 576 |
| 12' x 27' | 324 | 12' x 27' | 486 | 12' x 27' | 648 |
| 12' x 30' | 360 | 12' x 30' | 540 | 12' x 30' | 720 |
| 12' x 33' | 396 | 12' x 33' | 594 | 12' x 33' | 792 |
| 12' x 36' | 432 | 12' x 36' | 648 | 12' x 36' | 864 |
| 12' x 39' | 468 | 12' x 39' | 702 | 12' x 39' | 936 |
| 12' x 42' | 504 | 12' x 42' | 756 | 12' x 42' | 1008 |
| 12' x 45' | 540 | 12' x 45' | 810 | 12' x 45' | 1080 |
| 12' x 48' | 576 | 12' x 48' | 864 | 12' x 48' | 1152 |
| 12' x 51' | 612 | 12' x 51' | 918 | 12' x 51' | 1224 |
| 12' x 54' | 648 | 12' x 54' | 972 | 12' x 54' | 1296 |
| 12' x 57' | 684 | 12' x 57' | 1026 | 12' x 57' | 1368 |
| 12' x 60' | 720 | 12' x 60' | 1080 | 12' x 60' | 1440 |

THIS LETTER SHALL CERTIFY THAT ABS FOUNDATION PADS MANUFACTURED BY OLIVER TECHNOLOGIES, INC. MAY BE USED IN THE LEO OF POURED CONCRETE FOOTINGS AS A SUPPORT FOR SINGLE & DOUBLE STACKED FOUNDATION.

THESE PROVIDED THE FOLLOWING CONDITIONS ARE MET:

1. THE ABS PADS MUST BE INSTALLED ACCORDING TO THE INSTALLATION INSTRUCTIONS.
2. THE PERMITS APPLIED TO THE ABS PADS MAY NOT EXCEED THE VALUES LISTED IN THE CHART BELOW.
3. THE ABS PADS MAY BE USED TO SUPPORT A CONTINUOUS FOUNDATION WALL. THE PADS MAY ONLY BE USED FOR REMOVAL FOUNDATION PIER.
4. THE ABS PADS MAY BE COMBINED TO COVER A LARGER AREA IN THE CASE THE MAX. ALLOWABLE LOADS WERE CONSIDERED AS WELL.
5. IF THE REQUIREMENTS OF DESTINY IIA INSTALLATION MANUAL, COMPACT WITH THE REQUIREMENTS OF THE OTHER RECORDS INSTALLED AT THE SAME TIME, SHALL BE USED.

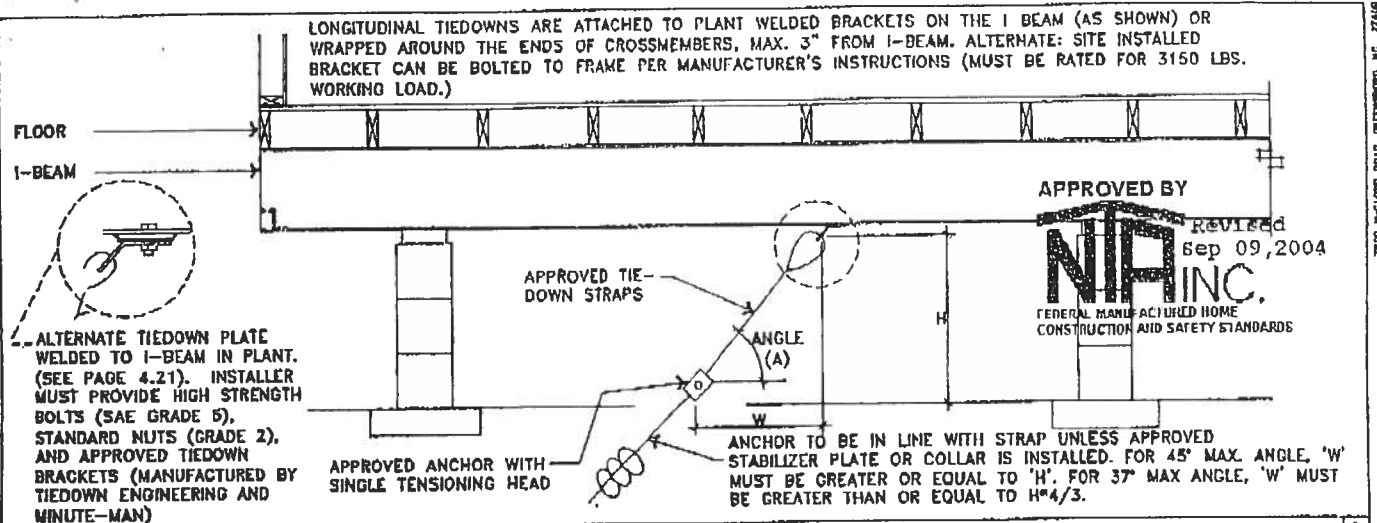


ABS PAD FOUNDATION PLAN

16064 2BR - 2BA

DRT

SOUTHERN PILES
 DATE: 3-30-2005
 SHEET: 1-C17
 MODEL NO.: 8042-25-08
 REV. NO.: 930



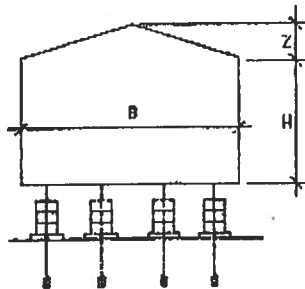
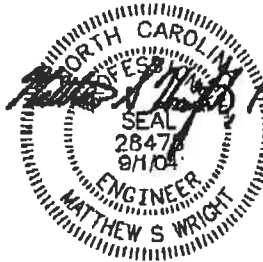
7800 INGLEWOOD ROAD, BUILDING 100, NC 27458

INSTALLATION OF LONGITUDINAL TIE DOWNS

A

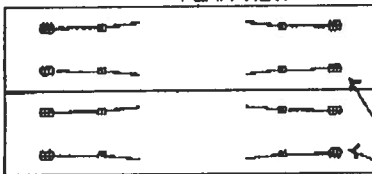
WIND ZONE 2 LONGITUDINAL TIEDOWN REQUIREMENTS

| HOME SIZE | MAX. HOME SIZE B | MAX. WALL HEIGHT H | MAX. VERTICAL PROJECTION (Z) | MAX. STRAP ANGLE A | NO. OF TIEDOWNS EACH END |
|------------------------|---------------------|-----------------------|---------------------------------|-----------------------|-----------------------------|
| 14 WIDE | 14'-0" | 7'-6" | 2'-6" | 45° | 2 |
| 16 WIDE | 15'-10" | 7'-6" | 2'-6" | 37° | 2 |
| 18 WIDE | 15'-10" | 8'-6" | 2'-6" | 45° | 3 |
| 18 WIDE | 17'-9" | 8'-7" | 5'-11" | 45° | 4 |
| 24 WIDE | 23'-8" | 7'-6" | 3'-6" | 45° | 4 |
| 28 WIDE | 27'-8" | 8'-0" | 4'-0" | 37° | 4 |
| 28 WIDE | 27'-8" | 8'-6" | 4'-0" | 45° | 5 |
| 32 WIDE | 30'-0" | 8'-0" | 4'-0" | 45° | 5 |
| 36 WIDE | 35'-0" | 7'-6" | 4'-0" | 45° | 7 |
| 24 WIDE W/ HINGED ROOF | 23'-4" | 8'-7" | 5'-10" | 45° | 5 |
| 28 WIDE W/ HINGED ROOF | 27'-8" | 8'-0" | 7'-8" | 45° | 6 |
| 32 WIDE W/ HINGED ROOF | 30'-0" | 8'-0" | 8'-4" | 45° | 7 |



SECTION

PLAN VIEW



WIND ZONE 3 LONGITUDINAL TIEDOWN REQUIREMENTS

| HOME SIZE | MAX. HOME SIZE B | MAX. WALL HEIGHT H | MAX. VERTICAL PROJECTION (Z) | MAX. STRAP ANGLE A | NO. OF TIEDOWNS EACH END |
|------------------------|---------------------|-----------------------|---------------------------------|-----------------------|-----------------------------|
| 14 WIDE | 14'-0" | 7'-6" | 2'-6" | 45° | 3 |
| 16 WIDE | 15'-10" | 7'-6" | 2'-6" | 45° | 3 |
| 18 WIDE | 17'-9" | 8'-7" | 5'-11" | 45° | 5 |
| 24 WIDE | 23'-8" | 7'-6" | 3'-6" | 45° | 5 |
| 28 WIDE | 27'-8" | 8'-0" | 4'-0" | 45° | 6 |
| 32 WIDE | 30'-0" | 8'-0" | 4'-0" | 45° | 6 |
| 36 WIDE | 35'-0" | 7'-6" | 4'-0" | 45° | 8 |
| 28 WIDE W/ HINGED ROOF | 27'-8" | 7'-6" | 6'-8" | 45° | 7 |

MAXIMUM PIER HEIGHTS NOT REQUIRING LONGITUDINAL TIEDOWNS IN WIND ZONE 1 *

| HOME SIZE | MAXIMUM HOME WIDTH B | MAXIMUM WALL HEIGHT H | MAXIMUM VERTICAL PROJECTION Z | SINGL. STACK PIER | | | | DDL. STACK PIER | |
|-----------|----------------------------|-----------------------------|-------------------------------------|---------------------|--------|--------|--------|-----------------|--------|
| | | | | MIN. UNIT LENGTH ** | | | | | |
| | | | | 64'-0" | 76'-0" | 64'-0" | 76'-0" | 64'-0" | 76'-0" |
| 14 WIDE | 14'-0" | 8'-7" | 4'-8" | N/A* | N/A* | 45 | 55 | | |
| 16 WIDE | 15'-10" | 9'-7" | 5'-2" | N/A* | N/A* | 38 | 47 | | |
| 18 WIDE | 17'-9" | 8'-7" | 5'-11" | N/A* | N/A* | 40 | 49 | | |
| 20 WIDE | 10'-0" | 8'-7" | 3'-4" | N/A* | 25 | 54 | 68 | | |
| 24 WIDE | 23'-8" | 8'-7" | 4'-0" | N/A* | 24 | 49 | 60 | | |
| 28 WIDE | 27'-8" | 9'-7" | 4'-7" | N/A* | N/A* | 41 | 50 | | |
| 32 WIDE | 30'-0" | 9'-1" | 5'-3" | N/A* | N/A* | 41 | 50 | | |
| 36 WIDE | 35'-0" | 8'-7" | 4'-0" | N/A* | N/A* | 43 | 54 | | |

* IF ANY PIER EXCEEDS THE MAXIMUM PIER HEIGHT, INSTALL 2 LONGITUDINAL TIEDOWNS AT EACH END OF EACH SECTION OF HOME.

** FOR ALL HOMES LESS THAN 64' IN LENGTH, INSTALL 2 LONGITUDINAL TIEDOWNS AT EACH END OF EACH SECTION OF HOME WITH MAXIMUM STRAP ANGLE OF 45°.

TOTAL NUMBER OF LONGITUDINAL TIEDOWNS AT EACH END OF HOME PER CHART.

B

LONGITUDINAL TIE DOWN REQUIREMENTS

NOTES:

- WIND ZONE 1 CHART ASSUMES SINGLE STACK PIERS 8" WITH A BLOCK WEIGHT OF 25 LBS. OR DOUBLE STACK PIERS 16" WIDE WITH A BLOCK WEIGHT OF 50 LBS. PIERS ARE AT 12'-0" O.C. MAXIMUM SPACING.
- FOR DOUBLEWIDES WITH HINGED ROOFS OR PARAPET WALLS IN WIND ZONE 1 (VERTICAL PROJECTION Z = 9'-1" MAX. FOR HINGED ROOF, 3'-6" MAX. FOR PARAPET WALL), ALWAYS INSTALL 2 LONGITUDINAL TIE DOWNS AT EACH END OF EACH SECTION (4 TOTAL EACH END OF HOME).
- REFER TO NOTES ON PAGE 4.12 FOR STRAPPING AND ANCHORING SPECS.

LONGITUDINAL TIEDOWN REQUIREMENTS

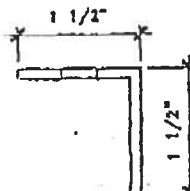
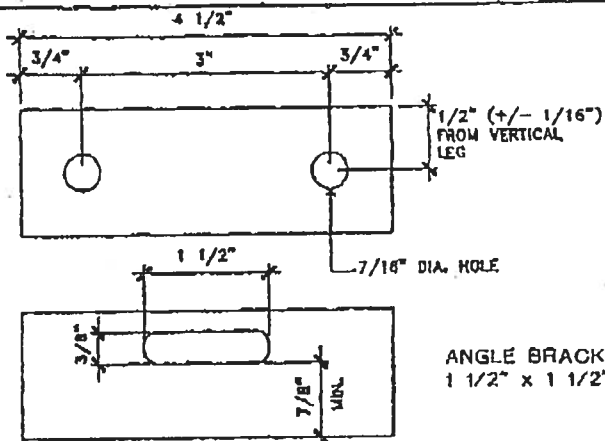
DRAWN BY: JBM

DATE: 11/30/98

REV: 9/1/04

DESTINY INDUSTRIES, LLC

1-4.19



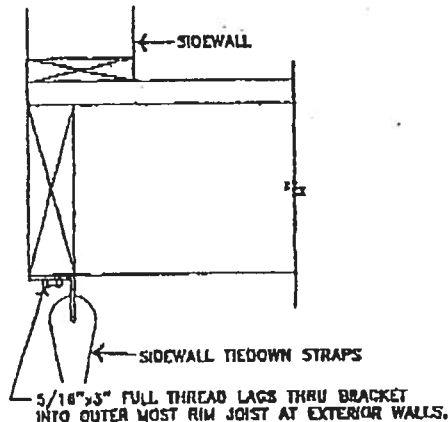
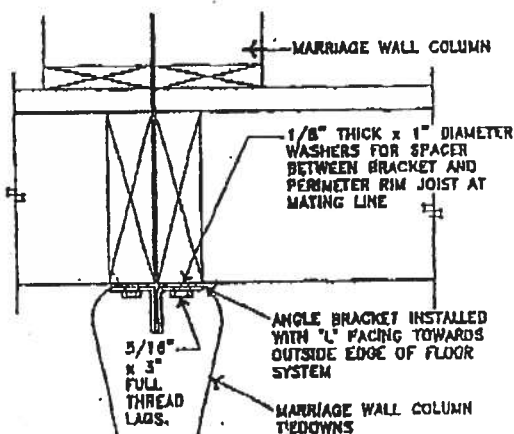
APPROVED BY

Revised
Oct 24, 2000
NIA INC.
FEDERAL MANUFACTURED HOME
CONSTRUCTION AND SAFETY STANDARDS

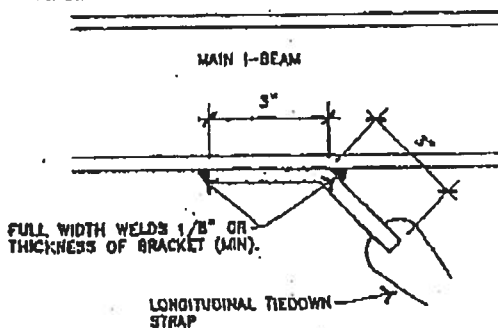
ANGLE BRACKET TO BE OF 11 GAGE STEEL
1 1/2" x 1 1/2" ANGLE MEMBER

SLOT NOT REQUIRED IF WASHERS ARE USED PER DETAIL BELOW

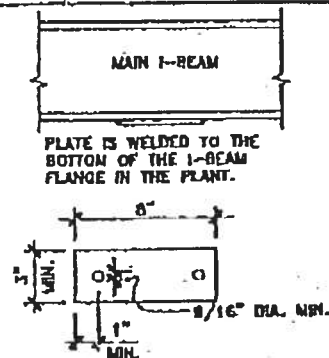
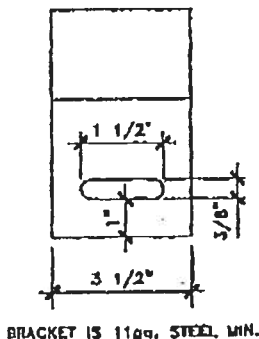
VERTICAL TIE STRAP CONNECTOR



PROFILE VIEW - BRACKET W/ WASHER APPLICATION



PROFILE VIEW - BRACKET W/ SLOT APPLICATION



LONGITUDINAL TIEDOWN BRACKET

NOTES

1. ALL BRACKETS ARE TO BE PAINTED IN THE PLANT OR ZINC COATED MIN. .30 oz. PSF.
2. WASHERS MAY BE PLACED BETWEEN ANGLE BRACKET AND MATING LINE RIM JOISTS AS A SPACER TO ALLOW AN ANCHOR STRAP TO BE LOOPED AROUND BRACKET.
3. SIDEWALL ANGLE BRACKETS MUST BE LOCATED WITHIN 8" OF A STUD.
4. USE A RADIUS CLIP FOR ALL BRACKET APPLICATIONS BY THREADING A PIECE OF STRAP THRU THE SLOT (OR OVER THE BRACKETS) BEFORE LOOPING THE TIEDOWN STRAP THROUGH (AROUND) THE BRACKET.

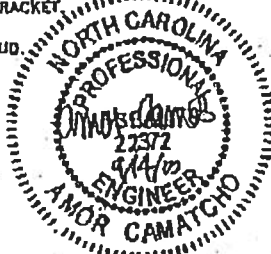


PLATE IS 11 GAGE MIN. THICKNESS

ALT. 4" x 8" x 3/16" PLATE THAT IS USED FOR DETACHABLE HITCH CAN ALSO BE USED FOR LONGITUDINAL TIEDOWNS. WASHERS MUST BE USED WITH HIGH STRENGTH BOLTS FOR THIS APPLICATION.

LONGITUDINAL TIEDOWN PLATE DETAILS

ANGLE BRACKET DETAILS

DRAWN BY JBM
DATE 12/1/98
REV 3/17/00

CODE ENFORCEMENT I
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 6/2/06 BY G IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? Yes
OWNERS NAME CAROL MATHEX PHONE _____ CELL _____
ADDRESS 2989 SE October Rd, Lake City
MOBILE HOME PARK _____ SUBDIVISION _____
DRIVING DIRECTIONS TO MOBILE HOME 415, TL on 238, TR October Rd,
PASS I-75, About 1 1/2 miles to property on left.

MOBILE HOME INSTALLER Ronnie Norris PHONE 752-3871 CELL _____

MOBILE HOME INFORMATION

MAKE Destiny YEAR 1992 SIZE 14 X 60 COLOR _____
SERIAL No. 028522
WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INTERIOR:

INSPECTION STANDARDS

(P or F) P= PASS F= FAILED

P SMOKE DETECTOR () OPERATIONAL () MISSING
P FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____
P DOORS () OPERABLE () DAMAGED
P WALLS () SOLID () STRUCTURALLY UNSOUND
P WINDOWS () OPERABLE () INOPERABLE
P PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING
P CEILING () SOLID () HOLES () LEAKS APPARENT
P ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

P WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING
P WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT
P ROOF () APPEARS SOLID () DAMAGED

STATUS:

APPROVED ✓ WITH CONDITIONS: _____

NOT APPROVED _____ NEED REINSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [Signature] ID NUMBER 307 DATE 6-5-06