



Florida Mobile Masters Inc.
Over 40 Years of Mobile Home Experience

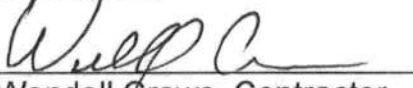
4650 NE 35th Street
Ocala, FL 34479
352-351-6100 (office)
352-351-6103 (fax)
mobilemastersinc@gmail.com

May 26th, 2022

Columbia County Building Department

As the Contractor of record for Permit # 43940. We would like to be removed from this permit effective May 26th, 2022.

Thank you,


Wendell Crews, Contractor
License IH1025316

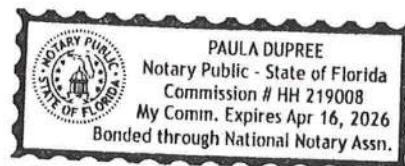
State of Florida
County of Marion

Signed before me this 26th day of May, 2022 by Wendell Crews who is personally known to me and who did not take an oath.



Notary Signature

Notary Stamp



Pinder

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 7-1-15)		Zoning Official _____	Building Official _____
AP# _____	Date Received _____	By _____	Permit # _____
Flood Zone _____	Development Permit _____	Zoning _____	Land Use Plan Map Category _____
Comments _____			
FEMA Map# _____	Elevation _____	Finished Floor _____	River _____ In Floodway _____
<input type="checkbox"/> Recorded Deed or <input checked="" type="checkbox"/> Property Appraiser PO	<input type="checkbox"/> Site Plan	<input type="checkbox"/> EH# _____	<input type="checkbox"/> Well Letter OR
<input type="checkbox"/> Existing well	<input type="checkbox"/> Land Owner Affidavit	<input checked="" type="checkbox"/> Installer Authorization	<input type="checkbox"/> EW Comp. letter <input checked="" type="checkbox"/> App Fee Paid
<input type="checkbox"/> DOT Approval	<input type="checkbox"/> Parent Parcel # _____	<input type="checkbox"/> STUP-MH _____	<input checked="" type="checkbox"/> 911 App
<input type="checkbox"/> Ellaville Water Sys	<input checked="" type="checkbox"/> Assessment <u>paid</u>	<input type="checkbox"/> Out-County	<input type="checkbox"/> In-County <input checked="" type="checkbox"/> Sub VF Form

Property ID # _____ Subdivision _____ Lot# _____

- New Mobile Home ☒ Used Mobile Home _____ MH Size 32x16 Year _____
- Applicant Brian Pinder Phone # 954-275-3815
- Address 5111 SW CR 18, Fort White, FL 32038
- Name of Property Owner Brian & Nancy Pinder Phone# 954-275-3815
- 911 Address 5111 SW CR 18, Fort White, FL 32038
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Brian & Nancy Pinder Phone # 954-275-3815
Address 5111 SW CR 18, Fort White, FL 32038
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size _____ Total Acreage _____
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home _____
- Driving Directions to the Property _____
- Name of Licensed Dealer/Installer Dale Houston Phone # 386-623-6522
- Installers Address 136 SW Barrs Glen Lake City, FL 32024
- License Number IH1133271 Installation Decal # 85382

License Number: IH / 1133271 / 1 Name: DALE HOUSTON

Order #: 5146	Label #: 85382	Manufacturer: <u>Deotung</u>	(Check Size of Home)
Homeowner: <u>Brian Pinder</u>	Year Model: <u>2022</u>	Single <u> </u>	Double <u>X</u>
Address: <u>5115 W CR 18</u>	Length & Width: <u>32 x 76</u>	Triple <u> </u>	HUD Label #: <u> </u>
City/State/Zip: <u>Ft. White, FL 32038</u>	Type Longitudinal System: <u>Drive</u>	Soil Bearing / PSF: <u>1000</u>	Torque Probe / in-lbs: <u>N/A</u>
Phone #: <u>954-275-3815</u>	Type Lateral Arm System: <u>Drive</u>	Permit #: <u>43940</u>	
Date Installed: <u> </u>	New Home: <u>X</u> Used Home: <u> </u>		
Installed Wind Zone: <u>11</u>	Data Plate Wind Zone: <u>11</u>		
Note: <u> </u>			

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

85382

LABEL #

DATE OF INSTALLATION
5/12/22

DALE HOUSTON

NAME

IH / 1133271 / 1

5146

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.

INSTALLATION AND ATTACHMENT

MUST BE NEXT TO THE LABEL

PERMANENT INK PEN

FOR ONLY

INFORMATION

KEEP ON FILE

FOR A MINIMUM OF 2 YEARS

REQUIRED TO

BE PRESENT WHEN

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

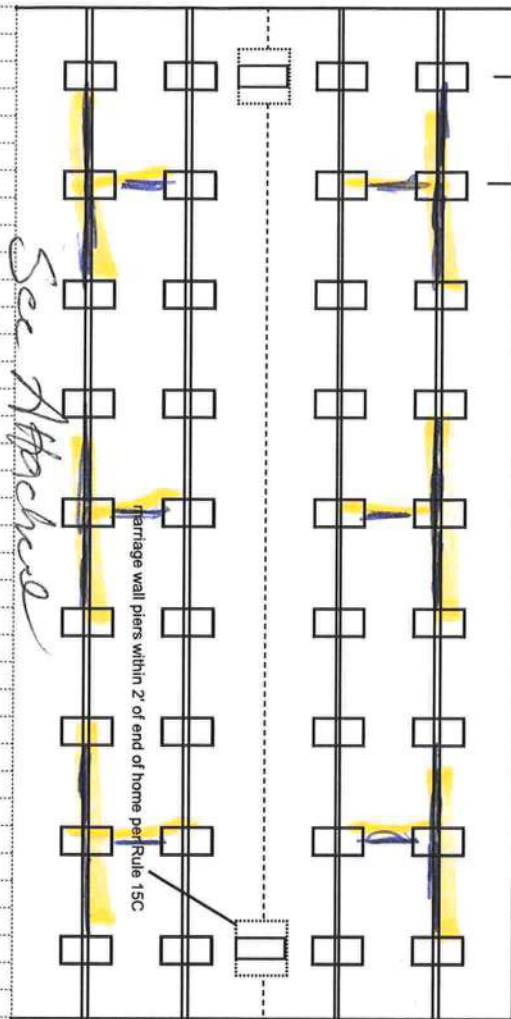
Installer: Dale Houston License # 141133271/1

Address of home being installed: _____

Manufacturer Destiny Length x width 32 x 76

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 DH



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 # 85382

Triple/Quad ☐ Serial # D15H114670AAB

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 23 x 31

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 _____

1.1 16 x 16

23, 45, 67 17 x 25

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 @ center 11'

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Longitudinal Stabilizing Device (LSD)
Manufacturer OLIV
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer 81m

Sidewall 5'4
Longitudinal 11'4
Marriage wall 8
Shearwall 21'4

Mobile Home Permit Worksheet

Application Number: _____

Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil X 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 12/4 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. 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 require anchors with 4000 lb holding capacity. 2/4 Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Dale Houston

Date Tested _____

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. 39

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 34

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 39

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: lag Length: 4" Spacing: 24"
Walls: Type Fastener: deck Length: 4.5" Spacing: 24"
Roof: Type Fastener: deck Length: 4.5" Spacing: 24"
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 DH

Type gasket Foam
Pg. 13

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 ✓ N/A _____
Electrical crossovers protected. Yes ✓ N/A _____
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 Dale Houston

Date 5/26/22

76-0



1. THE ASB PADS MUST BE INSTALLED PER OWNER TECHNOLOGIES INSTALLATION INSTRUCTIONS.
2. THE FIBER CABLES APPLIED TO THE ASB PADS MAY NOT EXCEED THE VALUES NOTED IN THE CHART BELOW.
3. THE ASB PADS MAY BE USED TO SUPPORT A CONCRETE FOUNDATION WALL. THE PADS MAY ONLY BE USED FOR MINOR WALL FOUNDATION PITS.
4. ASB PADS MAY BE COVERED TO COVER A LARGER AREA IN THIS CASE THE WALL ALLOWABLE LOADS HAVE REMAINED AS WELL.
5. IF THE REQUIREMENTS OR DESIGN FOR INSTALLATION INVOLVE CONTACT WITH THE REQUIREMENTS OF THE OWNER TECHNOLOGIES INSTALLATIONS THE MORE STRINGENT REQ. SHALL BE USED.

ADDRESS	TUBERLINE ELITE	WHEEL, INC.
PAID		E804-1180-108

227	AC-1000
-----	---------



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

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Dale Houston, give this authority and I do certify that the below
Installers Name

referenced person(s) listed on this form is/are under my direct supervision and control and
is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name
William "Bo" Royale	Wesley	Clayton Homes

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license
holder for violations committed by him/her or by his/her authorized person(s) through this
document and that I have full responsibility for compliance granted by issuance of such permits.

Dale Houston
License Holders Signature (Notarized) IH1133271 5/27/22
License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Dale Houston,
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 27th day of May, 2022.

Paula Dupree
NOTARY'S SIGNATURE

(Seal/Stamp)

