



APPLICATION FOR:

USED – MANUFACTURED HOME PERMIT

Mail: City of Lake City - 205 North Marion Ave. - Lake City, FL 32055
Phone: 386.719.5750 ofc. – e-mail: growthmanagement@lcfla.com

- **NOTE: All housing is subject to a 2-part application and review process. It must first go through zoning review and approval prior to submission of this permit application.**

Date Stamp: _____

Received by: _____

The Growth Management Director/Building Official shall receive this request for a Housing Assessment Report for the subject property. After the assessment is complete, you will be provided with the Housing Zoning Review Application and instructions. Do not purchase property or a home before it has been approved for zoning related standards.

Prior to any manufactured home permits being issued by the City of Lake City, the following will be required from Owner, Manufactured Home Dealer or Set up Contractor.

1. Owners Name
2. Owners Address
3. Job Site Address – If a vacant lot, the City will assign a 911 address.
4. Legal Description
5. Make of Manufactured Home
6. Year Manufactured Home Constructed
7. Model Number of Manufactured Home
8. Serial Number of Manufactured Home
9. Paper Survey of Property
10. Elevation Certificate, if Located in Flood Zone (check with Growth Management)
11. Set Up Contractors Name
12. Set Up Contractors Address
13. Set Up Contractors License Number
14. Completed Plat Plan Showing Lot Dimensions, Manufactured Home Size and Proposed Setbacks of Home to Property Lines
15. Street Name(s) that Lot Faces (lot must have access to a public street)
16. If no City-sewer is available – contact Growth Management to determine if location is allowed by local code to have a septic system. If yes, a Septic Tank Permit will be needed.
17. Copy of Deed Showing Property Ownership.
18. If Property is not owned by Applicant, notarized letter from owner allowing placement of manufactured home will be required.

Blank Forms are furnished by the Building Department, but it is the Owner, Dealer or Set up Contractors' responsibility to furnish all required information.

PLEASE PRINT all information so as to be legible.

MANUFACTURED HOME DEALER OR SET-UP CONTRACTOR IS REQUIRED TO ALSO SIGN PERMIT APPLICATION.

1. OWNER: _____
2. ADDRESS: _____
3. JOB SITE ADDRESS: _____
4. LEGAL DESCRIPTION: _____

5. MAKE AND YEAR OF MANUFACTURED HOME: _____
6. MODEL NUMBER OF MANUFACTURED HOME: _____
7. SERIAL NUMBER OF MANUFACTURED HOME: _____
8. CURRENT SURVEY SUBMITTED? YES ___ NO ___ BOUNDARY MARKED YES? ___ NO ___
9. SEPTIC TANK (if allowed) PERMIT SUBMITTED? YES _____ NO _____
10. IS PROPERTY LOCATED IN FLOOD ZONE? YES _____ NO _____
11. CONTRACTOR: _____
ADDRESS: _____
12. CONTRACTOR'S LICENSE NUMBER: _____
13. VALUATION: _____ NATURE OF WORK: _____
14. STREET NAME or PROPERTY FRONTAGE: _____
15. PERMIT NUMBER: _____ APPROVED: YES _____ NO _____
16. REMARKS: _____
17. ZONING: _____

YARD SETBACKS: FRONT: _____
SIDE: _____
REAR: _____

of OFF STREET PARKING SPACES: _____

NOTE: STEPS AND PORCHES, etc. may not encroach in REQUIRED YARD. (All tongues must be removed.)

SITE PLAN – A certified survey and corners of the property flagged is now required for all housing permits.

You will use the survey page as your site plan, showing where you propose to locate the home.

Improved driveways and approved street-access is also required for all housing permits.

The site plan and driveway review is part of the required zoning review process, and once approved, will be included with this application.

PERMIT APPLICATION / MANUFACTURED HOME INSTALLED

Applicant _____ Name of Licensed Dealer/Installer _____

Address _____ License Number _____

_____ Installation Decal # _____

Manufacturers Name _____

Roof Zone _____ Wind Zone _____

Number of Sections _____ Width _____ Length _____ Year _____ Serial # _____

Installation Standard Used: (Check One) Manufacturers Manual _____ 15C-1 _____

SITE PREPARATION:

Debris and Organic Material Removal _____ Compacted Fill _____ PAGE _____

Water Drainage: Natural _____ Swale _____ Pad _____ other _____ PAGE _____

FOUNDATION:

Load Bearing Soil Capacity _____ or Assumed 1000 PSF _____ PAGE _____

Footing Type: Poured in Place _____ Portable _____ Size and Thickness _____ PAGE _____

I-Beam or Mainrail Piers: Single Tiered _____ Double Interlocked _____ PAGE _____

Size of Piers _____ Placement O/C _____ PAGE _____

Perimeter Pier Blocking: Size _____ Placement O/C _____ PAGE _____

Ridge Beam Support Blocking: Size _____ Number _____ Location(s) _____ PAGE _____

Ridge Beam Support Footer: Size _____ NUMBER _____ Location(s) _____ PAGE _____

Center Line Blocking: Size _____ Number _____ Location(s) _____ PAGE _____

Special Pier Blocking Required: (Fireplace, Bay Window, Etc.) Yes _____ No _____ PAGE _____

Mating of Multiple Units: Mating Gasket _____ Type Used _____ PAGE _____

Fasteners: Roofs Type and Size _____ Spacing _____ O/C PAGE _____

Endwalls Type and Size _____ Spacing _____ O/C PAGE _____

Floors Type and Size _____ Spacing _____ O/C PAGE _____

ANCHORS:

Type 3150 Working Load _____ 4000 Working Load _____ PAGE _____

Height of Unit: (Top of Foundation or Footer to Bottom of Frame) _____ PAGE _____

Number of Frame Ties: _____ Spacing _____ O/C Angle of Strap _____ Degrees PAGE _____

Number of Over Roof Ties: (If Required) _____ PAGE _____

Number of Sidewall Anchors _____ Zone II _____ Zone III PAGE _____

Number of Centerline Anchors _____ Number of Stabilizer Devices _____ PAGE _____

Vents Required for Underpinning (1SF/150 SF of Floor Area) Number _____ PAGE _____

MINIMUM REQUIREMENTS

- ❖ Besides the Housing Standards as found in the Land Development Regulations (see Growth Management for details), **USED** manufactured homes are **also** required to have been found to meet minimum standards and requirements.
- ❖ If the home is currently located **outside** the city limits of Lake City, Florida, this inspection report must be completed by the licensed dealer and state certified / licensed installer.
- ❖ If the home is currently located **inside** the city limits of Lake City, Florida, this inspection report must be completed by the Growth Management Director/Building Official.
- ❖ A move-on permit issued by the City of Lake City, for a home brought in from **outside** the city limits, based on an inspection report submitted to the Building Official, does not constitute final approval for these standards by the Building Official, who retains final authority in these matters.
- ❖ The City retains the right to revoke or otherwise deny any permit for a manufactured home which is subsequently determined by the Building Official to not meet the minimum standards and requirements of the Lake City Land Development Regulations.
- ❖ No manufactured home, whether located inside or outside the city limits, which is determined by the Building Official to not meet the minimum standards and requirements, can be in any manner established, re-established, located or moved to or within the city limits.
- ❖ Ones found to be moved into the city limits prior to the required inspections, reports and permitting, shall be required to be moved back outside the city limits, and the proper process begun, as required by local and state code and laws.
- ❖ No such home which fails the Building Official's inspections for minimum standards and requirements is eligible to be established, re-established, located or moved to or within the city limits. At the discretion of the Building Official, certain repairs or replacements may be made to bring the home up to standards; however, deficiencies comprehensive in nature which are structural in nature and/or which compromise the integrity of the home shall not be considered for permit application unless and until it is returned to the factory which originally made it, so that necessary repairs, and re-inspections and re-certification can be obtained by certified factory inspectors, according to HUD construction standards and guidelines, and also to address any minimum requirement deficiencies as were noted by the Building Official as part of the inspection(s).

Section 5: Minimum requirements

(a) The minimum requirements for used manufactured homes shall be as set forth in this section.

(b) Fire safety.

_____ (1) All manufactured homes manufactured after January of 1968 shall have an approved smoke detector(s) properly located outside of each sleeping area of the manufactured home.

_____(2) Smoke detectors shall be installed to the product manufacturer's installation instructions.

(c) Electrical.

_____(1) Every unit shall have a complete electrical system.

_____(2) Distribution panel boards shall be properly installed, complete with required breaker/fuses, with all unused openings properly covered. All connections are to be checked for tightness, and all panels shall be accessible. Distribution panel board may be located in a closet provided there is at least 6 inches of space between the panel board any easily ignitable materials.

_____(3) All electrical fixtures shall be properly, wired and supported. Aluminum conductors shall be connected to approve listed devices.

_____(4) All grounding conductors shall be secured to the proper locations and/or connector on the fixture or device.

(d) Plumbing.

_____(1) All plumbing fixtures shall be protected with approved and workable traps.

_____(2) Plumbing fixtures shall be properly vented and fixtures shall be in workable condition.

_____(3) Relief valve on water heater shall have sufficient room to operate, and shall have unthreaded $\frac{3}{4}$ " drain pipe extended beneath the manufactured home.

_____(4) Drainage piping shall be complete. Piping shall be supported properly and not constitute a hazard.

_____(5) Water piping shall not be bent or kinked so as to retard the flow of water. Each fixture shall be connected to water piping.

(e) Heating and air conditioning.

_____(1) All required cooking and heating appliances shall be properly anchored and connected in place.

_____(2) If the home has deleted heating system, drop-outs must be installed for connecting exterior system.

_____(3) All homes with central hearing and/or cooling shall have operable thermostat.

_____(4) Air registers shall be operable.

_____(5) Ducts shall be sealed at openings and shall not be crushed or missing.

_____(6) Gas furnace and water heating vents shall be properly installed and secured to

appliance.

- _____(7) There shall be proper return air to furnace, exterior heat/AC units and all rooms.
- _____(8) Range and bathroom ceiling vents shall be complete and vented to outside.
- _____(9) All gas appliances shall be connected with an approved shut-off valve, if building was manufactured after May of 1975.

(f) Construction.

- _____(1) Exterior exit doors, including sliding glass, shall be in good working order.
- _____(2) Exterior doors shall be operable locks.
- _____(3) All manufactured homes manufactured after January of 1975 shall have an exterior egress door or an operable egress window located in each sleeping room with an opening of 22" in its shortest measurement.
- _____(4) All windows and window operators shall be operable. Missing glass shall be replaced.
- _____(5) Screens shall be required on each window capable of being opened.
- _____(6) All holes in the floor and damaged flooring, and all broken decking and floor joists shall be repaired or replaced.
- _____(7) Missing interior paneling shall be replaced and bowed or loose paneling shall be secured.
- _____(8) Bottomboard shall be made rodent proof throughout and securely sealed. Missing insulation from exposed areas shall be replaced.
- _____(9) When visible structural damage caused by water leaks is apparent, repairs and corrections are to be completed to assure leaks have been corrected.
- _____(10) All over-the-roof tie-down straps shall be free of damage. Frame ties and blocking on all used single and double wide homes shall be as required in the amended Rules of the Division of Motor Vehicles, Chapter 15C-1, if the manufacture's setup requirements are not available. Splices of strap shall overlap at least 12" and be secured with 2 seals. All tie points shall be used.

❖ The City reserves the right to add additional deficiencies noted, according to the final authority of the Building Official.

INSPECTION / MOVE ON PERMIT

Inspector _____
(PRINT)

State License # _____ (attach copy)

I have inspected the above described manufactured home on _____
(Date)

This manufactured home **does** () **does not** () meet the standards set by the City of Lake City.

This manufactured home **does** () **does not** () meet the criteria for remodel or repair.

Signature required

Title

This manufactured home shall be located at _____ Lake City, Florida,
for residential use only.

MOBILE HOME INSTALLATION REQUIREMENTS

Make of Mobile Home: _____

Year: _____

Actual Date of Construction: _____

Model Number or Name: _____

Serial Number: _____

Width: _____ Length: _____

Soil Bearing Capacity: _____ P.S.F. (Test in six locations)

Torque Test: _____ Pounds per square inch

Dealer/Installer Name: _____

License Number _____

Type Footer: Poured _____ Portable _____ Size _____

Spacing of Main rail piers _____ ft. on centers

Perimeter Pierblocking required: Yes _____ No _____

Locations: _____

Ridge Beam Opening Length: _____ Ridge Beam Footer Size: _____

Center Line Blocking: Number _____ Spacing _____

Special Pier Blocking Required: Yes _____ No _____

Locations:

Mating Material: Gasket _____ Other _____

Fasteners: Roof, Type and Size _____ Spacing _____

Endwall, Type and Size _____ Spacing _____

Floor, Type and Size _____ Spacing _____

Anchors: 3150# Working Load _____ #4000 Working Load _____

Number of Frame Ties _____ Spacing _____ O/C

Number of Over Roof Ties _____ Spacing _____ O/C

If Soil Test and Torque Test are not performed, 1000# Bering Capacity is to be assumed and five foot, 4000# anchors are to be used, also all Tests will be verified by City Inspector.

Dealers/Installers are responsible for all of the above requirements. The City of Lake City will not accept incomplete applications.

PERMIT NUMBER _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000lb. 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 _____ inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A stale 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 poin where the torque test reading is 275 or less and where the mobile 11!>me manufacturer may requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED **BY A** LICENSED INSTALLER

Installer Name _____

Date Tested _____

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-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 waler supply systems. Pg. _____

Sit. Pre2.aratlon

Debris and organic material removed _____
Water drainage: Natural ____ Swale ____ Pad ____ other ____

Faailnlnl 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 .

G-kat | - | |oot | n9 requirement

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 of tape will not **serve as a** gasket.

Installer's initials _____

Type gasket _____ Ins talled:
 Pg. _____ Between Floors Yes _____
 Between Walls Yes _____
 Bottom of ridgebeam_Y_e_s _____

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 ____

Mlaccellaneous

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 ____
 Ele<;trical **crossovers** protected. Yes ____
 Other: _____

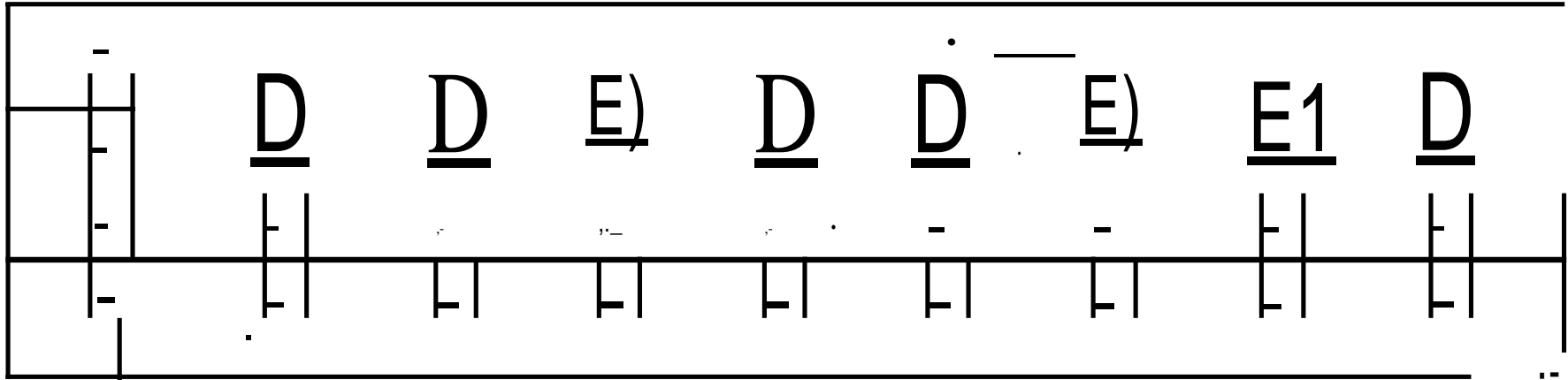
Installer verifies all Information given with this permit worksheet is accurate and true based on the **manufacturer's Installation instructions** and or Rule 1SC-1 & 2

Installer **Signature** _____ Date _____

BLOCKING PLAN

Manufacturer _____

Length X Width _____



Spaces at
_____ OC
Typical

Soil Bearing Capacity _____

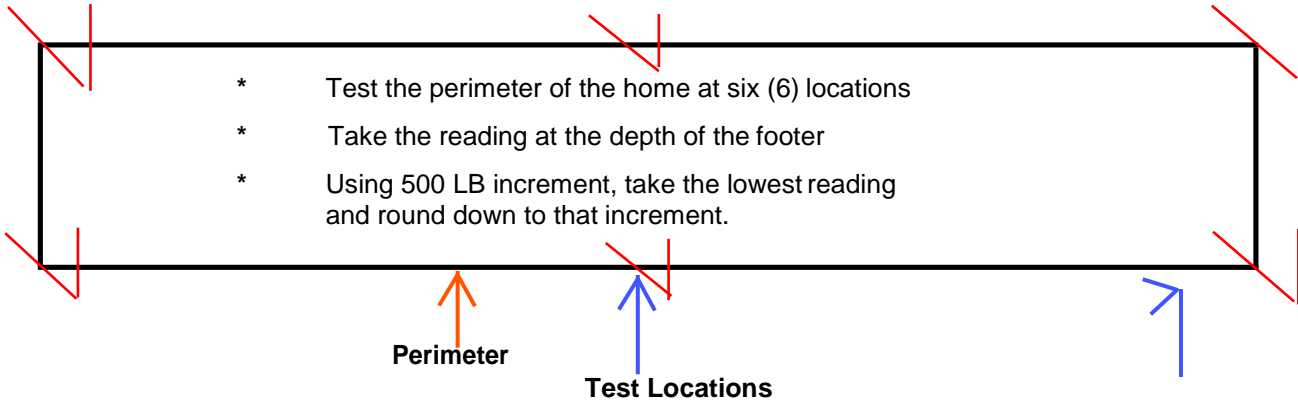
Probetest/ anchor length / _____

I-beam Pier Pad size _____

Perimeter Pier Pad size _____

Other information **needed**-----

POCKET PENETROMETER TEST



This Site Rounded Down to _____PSF

PIER SPACING TABLE

Sell Load Bearing Capacity	Footer Size 16" x 16"	Footer Size 18 1/2" X 18 1/2"	Footer Size 20" x 20"	Footer Size 26" x 26"
1000 psf	3'	4'	5'	8'
1500 psf	4' 6"	6'	7'	
2000 psf	6'			
2500 psf	7' 6"			
3000 psf				
3500 psf				

Shaded areas are at the maximum eight feet spacing.

**CITY OF LAKE CITY, FLORIDA
GROWTH MANAGEMENT DEPARTMENT**

MANUFACTURED HOME PRE-INSPECTION STANDARDS / REQUIREMENTS

Owner's Name _____

Owner's Phone # _____

Owner's Address _____

Year / Manufacturer _____

City, State, Zip Code _____

Type: _____

Width _____ Length _____ Single _____ Double _____

Roof / Siding: _____

Skirting: _____ (Must meet housing standards)

Directions: _____

PRE-INSPECTION CHECKLIST

1. Title, Registration and copy of Bill of Sale / Invoice
2. Data Plate Serial Number (in closet or kitchen cabinet)

3. HUD Label Number (metal plate riveted to side of trailer)

4. Wind Zone II Wind Zone III **(Wind Zone I not allowed)**
5. Copy of deed and a Notarized Permission to set-up Affidavit from property owner.
6. Name of Transporter and / or DOT Permit # _____.

NOTE: MUST HAVE ACCESS TO INTERIOR OF HOME FOR INSPECTION IF AND PERSONAL POSSESSIONS ARE INSIDE HOME, OWNER MUST BE PRESENT DURING INSPECTION.

I (we) do hereby certify that to the best of my (our) knowledge and belief, that all of the above information, statements and attachments contained in any papers or plans submitted herewith, are true and correct. I authorize the Growth Management Director/Building Official, or his designee to enter and inspect the premises, which are the subject of this application, for information gathering and inspections.

Applicant:

_____/_____
Printed Name / Signature Date

(If applicant is not owner, please also attach a notarized letter of authorization by the owner of record)

Manufactured Home Dealer of Set-Up Contractor

_____/_____
Printed Name / Signature Date