

BAKER COUNTY MOBILE HOME INSTALLATION PACKET

360 E Shuey Avenue, MACCLENNY FL 32063

OFFICE: (904) 259-2403

FAX: (904) 259-5057

INSPECTIONS: 259-4896

The Building Department issues Move-on Permits to the licensed installers only, unless the installer gives you a COMPLETED, signed, notarized, original authorization to pull the Permit.

These items are furnished by the INSTALLER:

1. A readable copy of the installers current State License
2. Current workers comp and liability insurance certificates, made out to Baker County.
3. A current Baker County Occupational License
4. Permit Worksheet Page 1 and 2; completely filled out by the Installer. This is attached, and includes a penetrometer test and blocking diagram showing tie-downs.
 - If any of this information is incomplete, A PERMIT CAN NOT BE ISSUED!

A septic system approval number from the Environmental Health Department, 408 Lowder Street, Macclenny. Phone number is (904) 259-3569.

New property requires a 911 address. Please call Emergency Addressing at 904-259-0243, and get a copy of your assigned number for the permit.

New property requires a \$35 Driveway Permit.

New property requires a copy of the newly recorded property deed, with the 18 digit tax I D number.

If you do not own the property, an authorization from the property owner (Attachment 3). This authorization must be notarized and filled out completely, with the Tax I D number.

A copy of the Mobile Home Contract, Sale Agreement, Form 500, Registration/Title, or a NOTARIZED Bill of Sale, showing ownership, serial number, make, model, size, etc.

INSPECTIONS: The 1st inspection is the tie-downs, with sewer, water, electrical lines and air conditioner connected. Everything should be hooked up before calling the Inspection Request line at 259-4896.

PLEASE NOTE: Do not install the skirting until after the first inspection has passed.

The 2nd inspection is 15 days after power is on and is for the skirting and the Certificate of Occupancy. The C.O. will be issued only after the skirting/final inspection has passed.

IF AN INSPECTIONS FAILS, THERE IS A REINSPECTION FEE OF \$29 that must be paid before the next inspection. Please call for all inspections.

Acceptable Skirting: Vinyl, aluminum, stucco, permitted block (mortar), natural durable wood (refer to Section 2304: Protection Against Decay and Termites, 1991 Southern Standard Building Code), pressure treated wood and/or lattice. Not Acceptable: Raw slabs (pine or cypress wood), or tin roofing materials.

PERMIT PRICES: SCHOOL IMPACT FEE FOR NEW PROPERTY: \$2,592.00

SINGLEWIDE: \$180.25 DOUBLEWIDE: \$206.00 TRIPLEWIDE: \$231.75

ELECTRICAL-\$54 DRIVEWAY-\$35 HEAT/AIR-\$54 PLUMBING -\$29

PERMIT NUMBER _____

Installer _____ License # _____

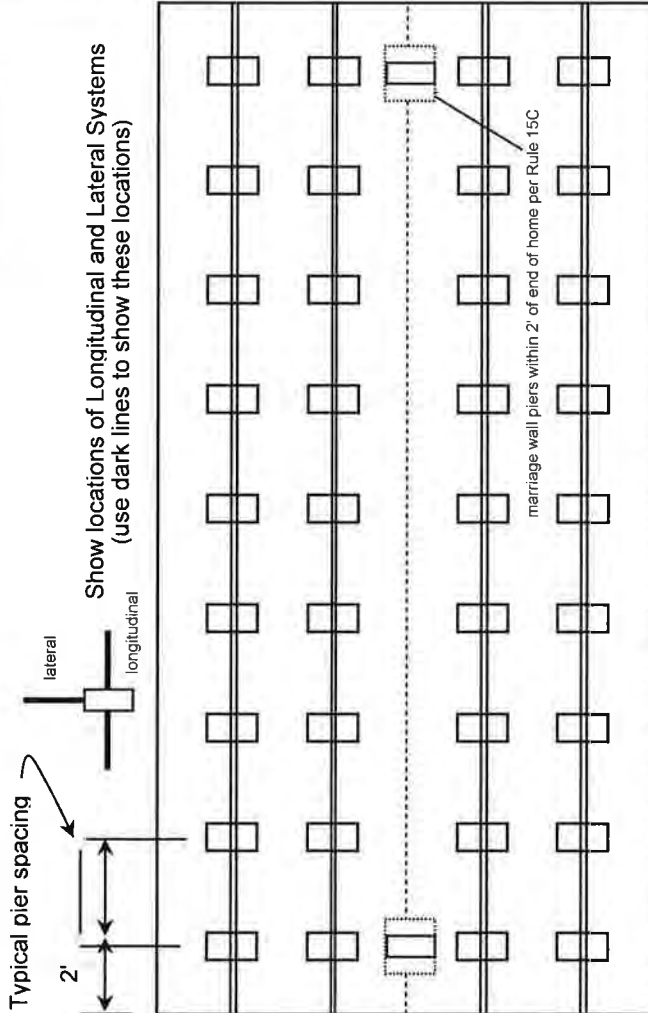
Address of home being installed _____

Manufacturer _____ Length x width _____

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 _____



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 # _____

Triple/Quad Serial # _____

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (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'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER 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 1/2 x 22 1/2	432
17 3/16 x 25 3/16	441
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

OTHER TIES

Number _____
 Sidewall _____
 Longitudinal _____
 Marriage wall _____
 Shearwall _____

TIEDOWN COMPONENTS

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

Opening _____ Pier pad size _____

PERMIT 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 _____ 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.

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 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 _____
Water drainage: Natural _____ 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 _____

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

Installer Signature _____ Date _____

INSTRUCTIONS: FILL OUT THIS FORM WHEN A MOBILE HOME IS BEING PLACED ON PROPERTY NOT OWNED BY THE MOBILE HOME OWNER; I.E., RENTAL PROPERTY.

TO: **BAKER COUNTY BUILDING DEPARTMENT**

DATE: _____

RE: **AUTHORIZATION FOR THIS MOBILE HOME TO BE PLACED ON MY PROPERTY**

I, _____, grant authorization for _____

Property Owner Name's

Tenant's Name

To place herein described mobile home on my property, at Parcel I D # _____

(MUST BE FILLED OUT)

Description of Mobile Home:

Make _____ Model _____

Year _____ Size _____

Serial Number _____

I UNDERSTAND THAT I, AS PROPERTY OWNER, WILL BE HELD RESPONSIBLE FOR ANY INFRACTION TO THE BAKER COUNTY LAND DEVELOPMENT REGULATIONS AS MAY OCCUR AS A CONSEQUENCE OF THIS MOBILE HOME BEING ON MY PROPERTY.

Property Owner's Signature

STATE OF FLORIDA
COUNTY OF BAKER

The foregoing instrument was acknowledge before me this _____ day of _____, 20 _____.

NOTARY PUBLIC, STATE OF FLORIDA

Seal

_____ **Personally Known** _____ **Identification Produced** _____

MODULAR HOME PERMIT REQUIREMENTS
BAKER COUNTY

INSTRUCTIONS: PLEASE FURNISH THE FOLLOWING INFORMATION

1. Two sets of certified foundation plans
2. Baker County Permit Application, with all required documents
3. State Certified Contractors need to furnish:
 - A. Current State license
 - B. Liability insurance and workman's compensation made out to:
Baker County Building Department
360 East Shuey Avenue
Macclenny FL 32063
Phone: (904) 259-2403
Fax: (904) 259-5057
 - C. If exempt, Workman's Comp Exemption Form
 - D. Occupation license from Contractor's office
4. Registered Contractors need to fill out the form for "State Registered Contractors" and furnish all the listed information in order to get a Competency Card for \$100.00. This includes a BAKER COUNTY OCCUPATIONAL LICENSE.
5. If anyone other than the contractor is to pull the permit, an original, signed and notarized Power of Attorney /Authorization needs to be provided.

After submitting the required information, there is at least a ten day waiting/review period before the permit is issued.

6. FEES:
 - a. Building Permit fee - based on the square feet of the modular
 - b. School Impact Fee: \$2,592.00 (Transportation Fee is waived at this time)
7. Other permits needed for the Modular:
 1. Electrical permit \$54.00
 2. Mechanical permit \$54.00
 3. Plumbing permit \$29.00

If this modular is replacing an older home, the older home must be removed before a Certificate of Occupancy will be issued.

When all required inspections have passed, a Certificate of Occupancy will be given.

BAKER COUNTY "REGISTERED" CONTRACTORS APPLICATION

****CHECK YOUR LICENSE -- THIS FORM IS NOT FOR "CERTIFIED" CONTRACTORS!****

INSTRUCTIONS: PLEASE FILL OUT COMPLETELY AND RETURN ALL DOCUMENTS

Contractor's Individual Name _____ Date _____

Business Name (If any) _____

Address _____

Phone _____ Cell _____

I HEREBY MAKE APPLICATION for registration offered by the board based on meeting the Requirements established by state law and Baker County's Construction Trades Ordinance.

Signature

I have attached the following documents:

- A. Current Registered License
- B. Liability insurance and Workman's Comp, made out to:
Baker County Building Department,
360 E Shuey Avenue,
Macclenny FL 32063
Phone: (904) 259-2403
Fax: (904) 259-5057

Note: Please request the Insurance Company include the **Qualifying Agent's/Contractor's individual name** on the Certificate, *not just the Company's name*.

- C. OR, if exempt, a Worker's Comp **exemption** card
- D. Baker County Occupational License
- E. A letter from the sponsoring county with Applicant's examination prepared, proctored and graded by _____ (company), with a passing score of 75% or more, and the date the exam was given. (Baker County does not accept licenses that have been "Grandfathered in".)

When items A-E are turned in, I will be issued a Competency Card for \$100.00, and I will be able to pull permits in Baker County.

Comp cards are renewed each year, when current insurance certificates, Baker County Occupational License, and the \$100.00 fee is received.

NOTES TO THE CONTRACTOR:

- Please keep all credentials current
- When calling in to verify contractor's credentials, please give the **Contractor's Personal Name**.
- If anyone other than the CONTRACTOR is to purchase permits, we must have an original authorization/Power of Attorney, signed by the contractor, listing those persons authorized to pull permits.