APPLICATION FOR:

**USED – MANUFACTURED HOME PERMIT**

- **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.

See the City Development Manager in order to request 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 Live Oak, 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
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)
17. If no City-sewer is available – contact Development Manager to determine if location is allowed by local code to have a septic system. If yes, a Septic Tank Permit will be needed.
18. Copy of Deed Showing Property Ownership.
19. 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 ___________

City of Live Oak - USED - Manufactured Home Permit Application

Last Revised: 06/13/2016
MINIMUM REQUIREMENTS

- Besides the Housing Standards as found in the Land Development Regulations (see Development Manager for details), **USED** manufactured homes are also required by local ordinance, No. 1047, to have been found to meet minimum standards and requirements.

- If the home is currently located outside the city limits of Live Oak, 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 Live Oak, Florida, this inspection report must be completed by the City Building Official.

- A move-on permit issued by the City of Live Oak, 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 City 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 City Building Official and/or City Development Manager to not meet the minimum standards and requirements, including but not limited to, any standards enumerated in Ordinance No. 1047, and/or the Live Oak Land Development Regulations.

- No manufactured home, whether located inside or outside the city limits, which is determined by the City 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 City 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 City 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 City 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 ¾” 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.

 debunked deficiencies noted, according to the final authority of the City 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 Live Oak.

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

__________________________________________________________
Signature required

__________________________________________________________
Title

This manufactured home shall be located at ________________________________Live Oak, 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 Pier blocking 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 Live Oak will not accept incomplete applications.
PERMIT WORKSHEET

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 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewalk 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.

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 ________

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 ________________________  Date ________
POCKET PENETROMETER TEST

- Test the perimeter of the home at six (6) locations
- Take the reading at the depth of the footer
- Using 500 LB increment, take the lowest reading and round down to that increment.

Perimeter
Test Locations

This Site Rounded Down to _____ PSF

PIER SPACING TABLE

<table>
<thead>
<tr>
<th>Sell Load Bearing Capacity</th>
<th>Footer Size 16&quot; x 16&quot;</th>
<th>Footer Size 18 1/2&quot; X 18 1/2&quot;</th>
<th>Footer Size 20&quot; x 20&quot;</th>
<th>Footer Size 26&quot; x 26&quot;</th>
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<td>1000 psf</td>
<td>3'</td>
<td>4'</td>
<td>5'</td>
<td>8'</td>
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<td>1500 psf</td>
<td>4' 6&quot;</td>
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<td>7'</td>
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<td>3500 psf</td>
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Shaded areas are at the maximum eight feet spacing.
CITY OF LIVE OAK, FLORIDA
BUILDING DEPARTMENT

MANUFACTURED HOME PRE-INSPECTION STANDARDS / REQUIREMENTS

Owner’s Name

Owner’s Address

City, State, Zip Code

Owner’s Phone #

Year / Manufacturer

Type:

Width ___________ Length ___________ Single ___________ Double ___________

Roof / Siding: ________________________________________________________________

Skirting: _________________________ (Must meet housing standards)

Directions: ___________________________________________________________________________

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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 City Development Manager and 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