

Building Division 306 NE 6<sup>th</sup> Ave, Bldg B Gainesville, FL 32601

Ph: 352-334-5050 Email: <a href="mailto:building@gainesvillefl.gov">building@gainesvillefl.gov</a>

## **Manufactured Home Installation Worksheet**

PERMIT #:	MOBILE HOME PA	RK:	LOT #:
OB ADDRESS: PARCEL #:		#:	
INSTALLER'S NAME:		LICENSE	#:
MANUFACTURER'S NAI	ME:	MODEL #:	
INSTALLATION DECAL #	#:	ROOF ZONE:	WIND ZONE:
SERIAL #:	YEAR: WIDTH:	LENGTH: NUM	BER OF SECTIONS:
INSTALLATION STANDARD USED (CHECK ONE): MANUFACTURER'S MANUAL   OR CHAPTER 15C			
FOUNDATION			
Load Bearing Soil Dens	sity PSF OR	Assumed 1,000 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 #
	Size: Number: _		
Ridge Beam Support:	Size: Number: _	Location:	Page #
Center Line Blocking:	Size: Number: _	Location:	Page #
Special Pier Blocking: Required (Fireplace, Bay Window, Etc.) Yes \( \subseteq \text{No } \subseteq \)			Page #
Mating of Multiple un	its: Mating Gasket:	Type used:	Page #
Fasteners: Roof	Type: Spacing:	_O/C	Page #
Endwalls	Type: Spacing:	_O/C	Page #
Floors	Type: Spacing:	_O/C	Page #
ANCHORS			
Type 1: 3150 Working	Load: Type 2: 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			grees Page #
Number of Over Roof Ties (If Required):			Page #
Number of Sidewall Anchors: Spacing: O/C			Page #
Number of Centerline Anchors: Number of Stabilizer Devices:			Page #
Vents Required for Skirting (1 SF/150 SF of Floor Area) Number:			Page #

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