



DEPARTMENT OF PLANNING, DEVELOPMENT & CODES

SETTING UP A MANUFACTURED (CLASS A) HOME IN HIGH SPRINGS

GENERAL REQUIREMENTS

- Check zoning: Must be R1 or R3 and have an approved Special Use Application.
- Must meet the City of High Springs Class "A" requirements.
- If the property is a recent purchase, you will need to bring a copy of the recorded deed.
- If the property was created by a lot split, a new tax parcel number must be obtained from the Alachua County Property Appraiser's Office.
- If you are not the property owner, but own and will occupy the manufactured home, you will need a notarized letter from the owner giving you permission to set the home on the property.
- If you do not own the manufactured home or you will not be the occupant, or you are not a licensed mobile home installer, you cannot pull the manufactured home permit.

EFFECTIVE OCTOBER 1, 1999, AS PER FLORIDA ADMINISTRATIVE CODE, RULE 15 C-1 AND 15 C-2, BEFORE ISSUING PERMITS FOR MOBILE HOMES, GOVERNMENTAL JURISDICTIONS SHALL RECEIVE FOR THE RECORD A SCALE DRAWING OF ALL PIER BLOCK LOCATIONS AND DIMENSIONS, FOUNDATION OR FOOTING DIMENSIONS, SOIL LOAD BEARING CAPACITY AT THE INSTALLATION SITE AND TORQUE TEST RESULTS WHEN REQUIRED.

In order to be in compliance with this rule, manufactured home permit applicant shall provide all information required when applying. All information will be reviewed and **IF** all information is accurate and legible, the permit will be issued.

- Installation worksheet
- Mobile home installer *and* plumbing affidavit (if plumbing is to be connected by installer)
- Floor plan of model being installed showing:
 - location and size of piers and foundations
 - location and shear walls, columns and column loads
 - location of tie downs and size of anchors
 - location and results of soil bearing capacity tests
 - torque test results if necessary

If used manufactured home and original floor plan is not available—a generic dimensioned floor plan may be used giving information required in a. through e. according to Rule 15 C-2.

Energy audit form for new manufactured homes and for old manufactured homes if new air conditioning installed.

When the permit is issued, the **APPLICANT FOR PERMIT** will be responsible for placing the approved information on the job site with the manufactured home manual before calling for the inspection.

If well and septic tank are being used or installed, a copy of the *approved permit(s)* must be provided to our department to be placed in the mobile home permit file.

After local building departments have ascertained that all work has been performed, Certificates of Completion are to be issued for manufactured homes as per Rule 15C-20072. **THE APPLICANT FOR THE PERMIT** is responsible for picking up the Certificate of Completion.



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CLASS "A" MANUFACTURED HOME REQUIREMENTS CITY OF HIGH SPRINGS ZONING R-1 (WITH SPECIAL USE) & R-3

MANUFACTURED HOME: A mobile home constructed after July 1, 1986, meeting or exceeding the requirements of Florida Statutes Chapter 320. A structure classified as a mobile home shall retain that designation during the time of its existence and shall not be recognized as any other form of structure regardless of subsequent modification.

MANUFACTURED HOME CLASS "A": Manufactured home, Class A" means a multi-wide manufactured home certified as meeting or exceeding the Construction and Safety Standards promulgated by the U.S. Department of Housing and Urban Development and Florida Statutes Chapter 320, no older than five (5) years, **like new quality - subject to inspection**, and providing each of the following:

Class A manufactured homes are those new single-family dwellings whose original design and construction have been determined, by the standards prescribed below, to be similar in design and appearance to site-built housing at current construction standards:

A. Dimensions. Is comprised of at least two fully enclosed parallel sections each of not less than twelve feet wide by thirty-six feet long.

B. Roof Construction.

1. The pitch of the home's roof has a minimum vertical rise of three- and one-half feet for each twelve feet of horizontal run.

2. The roof is finished with a type of shingle that is commonly used in standard residential construction, such as a composition or wood shake or shingle, metal, or similar material.

C. Exterior Finish. The exterior siding consists of wood, hardboard, cement or other siding material (covered or painted, but in no case exceeding the reflectivity of gloss white paint), plastic, steel (or other siding materials) comparable in composition, appearance, and durability to the exterior siding commonly used on conventional site-built single-family residences.

D. Foundation. A continuous, permanent masonry/concrete foundation, unpierced except for required ventilation and access, is installed under the home.

E. Insulation. Is thermally equivalent to the Florida Building Code, Energy Conservation Code.

F. Be certified as Wind Zone 2 or 3.

*****Any structure modification voids certification pursuant to 61-41.011*****

G. Towing Apparatus Removed. The tongue, axles, transporting lights, and removable towing apparatus are removed after placement on the lot and before occupancy.

H. In addition to subsections A through F of this section, siting of manufactured homes as a permanent dwelling unit on any residential lot which is not within a Manufactured Home, Residential overlay zone is subject to review to assure that it is in harmony with the surrounding residential uses and preserves the general character and integrity of the neighborhood. Review criteria includes, but is not limited to:

1. Architectural similarity and compatibility for the purpose of blending into the existing neighborhood;
2. Compliance with all local design standards applicable to all other homes within the neighborhood in which the manufactured home is to be located.

City of High Springs
23666 NW 185th Road
High Springs, Florida 32643



Telephone (386) 454-7322
Facsimile: (386) 454-2126
Web: www.highsprings.us

DEPARTMENT OF PLANNING, DEVELOPMENT & CODES

MOBILE HOME PERMIT APPLICATION

Date: _____ Applicant Telephone #: _____
Property Owner's Name: _____
Owner's Address: _____
Job Site Address: _____
Licensed Installer: _____ License# _____
Installation Decal Number: _____
Mobile Home Manufacturer Name: _____
Year Model _____ #Bedrooms: _____ #Bathrooms: _____
Wind Zone _____ Roof Zone _____ No. of Sections _____ Width _____ Length _____
Installation Standard Used: (Check one) Manual _____ 15C-1 _____
Soil: _____ Load Bearing Capacity _____ or Assumed 1000 PSF _____
Footing Type: Poured in Place _____ Portable _____ Size and Thickness _____
Anchors: _____ Type 3150 Working Load _____ Type 4000 Working Load _____
Ties: _____ Number of Frame Ties _____ Spacing OC _____ No. of Wall Ties _____
Number of Lateral Ties _____ Number and Type of Lateral Stabilizers _____

Permit Fee: \$250 + \$7.50 State Surcharge + 2 Inspections@\$70.00each = \$397.50

Electrical and Mechanical Permits issued separately.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work shall be complied with whether specified herein or not.

Contractor/Agent _____

MOBILE HOME PERMIT # _____

ELECTRICAL PERMIT # _____

MECHANICAL PERMIT# _____

APPROVAL: _____

Signature

Date

City of High Springs
110 NW 1st Avenue
High Springs, Florida 32643

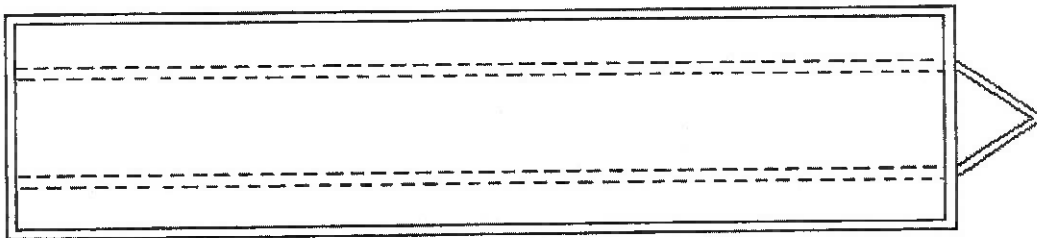


Telephone (386) 454-1416 Ext. 7230
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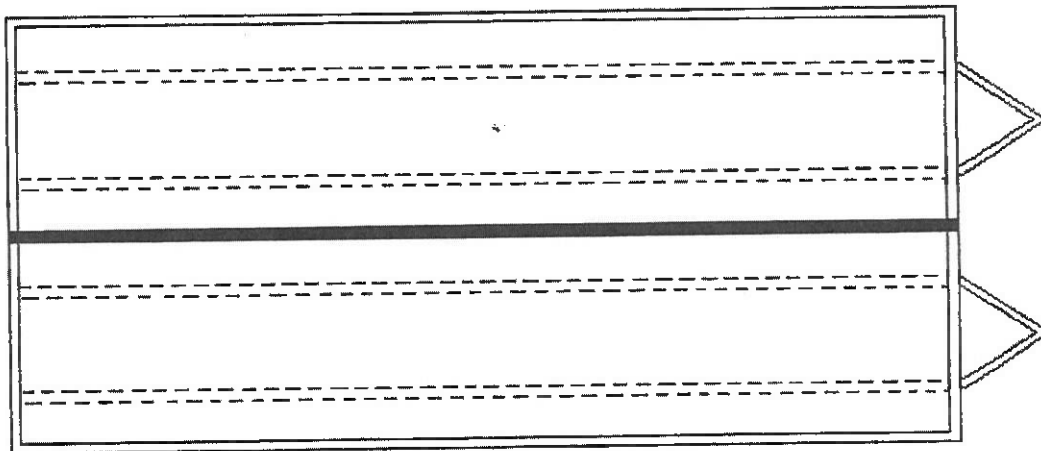
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Applicant shall provide layout from manufacturer specific to the model installed. This form may be used if the layout from the manufacturer is not available.

SINGLE WIDE MANUFACTURED HOME



DOUBLE WIDE MANUFACTURED HOME



ANCHOR



PIER



PIER FOOTING

Show all pier (with size of piers & pads) and anchor location, with maximum spacing and distance from end walls, as required in the manufacturer's specifications. Any special pier footing required (over 16 x 16 inches) shall be noted separately with required dimensions per the manufacturer's specifications. To determine footing size and spacing, a soil bearing capacity test shall be used. Pier footings to be poured-in-place, whether required by manufacturer's specifications or by preference, must be inspected by the Building Department prior to pouring.

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MANUFACTURED HOME INSTALLATION WORKSHEET

This worksheet is to be filled out by the installer of the manufactured home and becomes part of the Building Permit information. The permit, this worksheet, the manufacturer's installation booklet and the subcontractor form must be on the job site for the manufactured home inspection.

Permit #: _____
Applicant: _____ Address: _____
Name of Licensed Dealer/Installer: _____
License Number: _____ Installation Decal #: _____
Manufacturer's Name: _____ Model Name: _____
Roof Zone: _____ Wind Zone: _____
Number of Sections: _____ WIDTH: _____ LENGTH: _____ YEAR: _____ SERIAL#: _____
Installation Standard Used: (Check one) MANUFACTURER'S MANUAL: ☐ 15C-1: ☐

SITE PREPARATION:

Debris and Organic Material Removal: _____ Compacted Fill: _____ Page# _____
Water Drainage: Natural: ☐ Swale: ☐ Pad: ☐ Other: ☐ Page# _____

FOUNDATION:

Tested 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: 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 (1 ST/150 SF of Floor Area) Number: _____ Page # _____

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MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installers license from the bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each license shall pay a fee of \$150.

I, _____, license number # _____ do hereby
state that the installation of the manufactured home at
_____ will be done under my supervision.

Affiant

(signature) _____

STATE OF FLORIDA

COUNTY OF _____
2 _____

SWORN AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____,

BY _____

WHO IS/ARE PERSONALLY KNOWN TO ME OR HAS/HAVE
PRODUCED AS IDENTIFICATION

(Type identification) _____ of

(SEAL ABOVE)

Notary

Public,

Commission

No.: _____

(Name of Notary typed, printed or stamped)

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PLUMBING CONTRACTOR AFFIDAVIT

(This form to be used only when licensed mobile home installer is performing the plumbing connections.)

I, _____ of
(PLEASE PRINT NAME) (PLEASE PRINT NAME OF COMPANY, IF OWNER WRITE "OWNER")
license number _____ do hereby state that I will be doing the plumbing
(PLEASE PRINT)
work for the manufactured home located at

(911 Address)

Affiant
(signature) _____

STATE OF FLORIDA
COUNTY OF _____
2 _____

SWORN AND SUBSCRIBED BEFORE ME
THIS _____ DAY OF _____,

BY _____
WHO IS/ARE PERSONALLY KNOWN TO ME OR HAS/HAVE
PRODUCED AS IDENTIFICATION
(Type _____ of
identification) _____

(SEAL ABOVE)

No.: _____

Notary Public, Commission
(Name of Notary typed, printed or stamped)

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NOTICE OF COMMENCEMENT

This Instrument Prepared By:

Name: _____

Address: _____

Permit No: _____

Tax Parcel No _____

STATE OF: _____

COUNTY OF: _____

THE UNDERSIGNED HEREBY gives notice that improvement(s) will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. **DESCRIPTION OF PROPERTY:** Street Address: _____

Legal Description: _____

2. **GENERAL DESCRIPTION OF IMPROVEMENT(S):** _____

3. **OWNER INFORMATION:** a) Name _____ Address _____

b) Interest in Property _____

c) Fee Simple Titleholder (if other than owner) Name _____ Address _____

4. **CONTRACTOR:** a) Name _____ Address _____ b) Phone _____

5. **SURETY:** a) Name _____ Address _____

b) Amount of bond \$ _____ c) Phone _____

6. **LENDER:** a) Name _____ Address _____ c) Phone _____

7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7, Florida Statutes:**

a) Name _____ Address _____ b) Phone _____

8. **In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.**

a) Name _____ Address _____ b) Phone _____

9. **Expiration date of notice of commencement (the expiration is one (1) year from the date of recording unless a different date is specified)** _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDOR OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Mgr.

Signatory's Title/Office

The foregoing instrument was acknowledged before me this _____ day of _____, _____ (year) by _____ (name of person) as _____ (type of authority, e.g. officer, trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed).

Commission Number: _____

Personally Known _____ Produced Identification _____

Signature of Notary Public – State of Florida
Print, Type or Stamp Commissioned Name of Notary Public

Verification Pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing Above