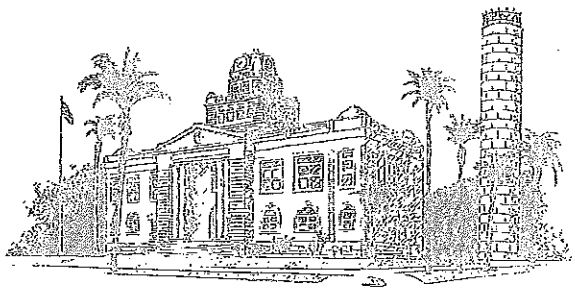
Board of County Commissioners
Madison County, Florida



Madison County is an Equal Opportunity Employer

MADISON COUNTY BUILDING DEPARTMENT
Phone 850-973-6785 • Fax 850-973-6727
bldgadmin@madisoncountyfl.com
www.madisoncountyfl.com

MOBILE HOME PERMIT CHECKLIST

Customer:_____Square Footage:_____

- Copy of Recorded Deed / Permission to Park
- Zoning Compliance Form
- Building Application
- Sales Contract / Title / Registration
- 911 Addressing Application
- Driveway Permit
- Septic Permit
- Declaration of Construction Debris Disposal Form
- Setup Certification / Blocking Diagram
- Mobile Home Installer Affidavit
- Suwannee River Water Management Permit (For Properties on the River)

For used mobile homes you must be able to provide the following at the time of permitting:

1. Data Plate Serial Number
2. Hud Label Number
3. Wind Zone (must be Wind Zone II or Wind Zone III)
    a. For wind zone verification, if not found in the mobile home contact the following:
        i. Florida Manufactured Homes: Department of Highway Safety Motor Vehicles (850) 617-2808
        ii. Georgia Manufactured Homes: Manufactured Housing Division (404) 656-3687

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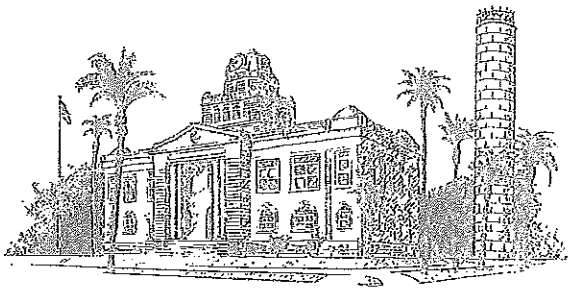

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Mobile Home Inspections

1ST the pre-inspection if it is a used mobile home.

2nd will be a pad inspection --- This is where the dirt under the mobile home is checked to make sure that the run off of rain water does not just sit under the mobile home and molds/ turns stagnant.

3rd is a mobile home set – up inspections where the blocking, tie downs, plumbing, electrical connections, and mechanical are all checked.

4th is the final inspection. This is where the steps, skirting, and all is ready for move in.

These 4 inspections are a **must!**

If a Pad inspection is not called in your installer will have to remove the tie downs and move the trailer off the pad for inspection. This will cost you a fine and also the installer will charge you for the move.

Madison County Building Department
229 S.W. Pinckney Street • Room 219
Madison, Florida 32340

Mobile/Manufactured Home Move-On Disclosure Application/Affidavit

Homeowner_____Phone_____

Mailing Address_____

Site Address_____

Parcel ID#_____

Lot_____Block_____Subdivision_____

Flood Zone_____Finished Floor Elevation_____

Home Dimensions _____x_____ Single__Double___Triple___Quad____Other____

Landowner_____Phone_____

Mailing Address_____

Mobile Home Installer_____

Phone_____License Number_____

I certify that the foregoing information is accurate to the best of my knowledge. I understand that separate permits must be obtained for air conditioning and any other type work that is not a part of the mobile home installation. I understand that according to Florida Statute 320.8249 a license from the Department of Highway Safety Motor Vehicles is required to receive a permit to install a mobile home. Therefore, I authorize the above referenced installer to obtain necessary permits from applicable state and local agencies to fulfill this mobile home installation. I further understand that the County will not issue permits to unlicensed contractors.

_____ _____
Printed Name of Mobile Home Owner Date

_____
Signature of Mobile Home Owner

_____ _____
Notary or Building Department Staff Date

Madison County Public Works
2060 NE Rock Ford Road (CR 591)
Phone: 850-973-2156 Fax: 850-973-2641

To obtain a driveway permit or waiver for a county maintained road, please contact the Madison County Road Department.

No building permit can be issued without the proper waiver or driveway permit being issued.

Fees: **$15.00** for an existing driveway
$50.00 for a new driveway

Please make checks payable to the Madison County Board of County Commissioners.

If your driveway turns on or off a state maintained road contact:

Florida Department of Transportation (Perry, Florida)
Attn: Cynthia Nelson
850-838-5802
850-838-5800
cynthia.nelson@dot.state.fl.us

List of State Roads:
SR 6
SR 145
SR 14 (north of I-10)
SR 53 (north of I-10)
US 90
US 221

Description/Location of property. Please be specific:

_____

_____

_____

Name (owner): _____

Address: _____

Closest Address: _____

Phone No. _____ **Cell Phone No.** _____

DECLARATION OF CONSTRUCTION DEBRIS DISPOSAL

DATE: _____ PROPERTY ID#: _____

NAME: _____

ADDRESS: _____

_____

BUSINESS NAME: _____

ANY CONSTRUCTION RELATED DEBRIS GENERATED DURING THE SCOPE OF THIS PROJECT WILL BE DISPOSED OF AS FOLLOWS (PLEASE CHECK THE APPROPRIATE METHOD YOU PLAN TO USE):

( ) COUNTY SUPPLIED TILT DUMPSTER

( ) PRIVATE SUPPLIED TILT DUMPSTER

COMPANY: _____ PHONE: _____

( ) HAULED BY PROPERTY OWNER TO LANDFILL

( ) HAULED BY CONTRACTOR TO LANDFILL

( ) NO DEBRIS

_____
Print Name

_____
Signature

_____
Date

COUNTY ORDINANCES NO. 93-56, NO. 96-56 AND NO. 99-98 PROHIBITS THE DISPOSING OF CONSTRUCTION RELATED DEBRIS IN THE COUNTY MAINTAINED GREEN BOX PUBLIC GARBAGE COLLECTION SITES.

WE APPRECIATE YOUR COOPERATION IN ASSISTING US TO ASSURE COMPLIANCE WITH THESE ORDINANCEs FOR THE BENEFIT OF THE CITIZENS OF MADISON COUNTY.

ZONING/LAND USE COMPLIANCE
FOR DEVELOPMENT PERMIT

PROPERTY OWNER: _____
PARCEL ID#_____ #OF ACRES:_____
SUBDIVISION:_____ LOT #:_____
PROPERTY ADDRESS: _____
_____

PURPOSE OF DEVELOPMENT PERMIT:

_____

OF EXISTING RESIDENCES ON PROPERTY: _____

OWNER/or OWNER'S AGENT SIGNATURE:_____

CONTACT PHONE #_____

THIS SECTION IS TO BE COMPLETED BY STAFF ONLY

LAND USE CATEGORY: _____

FLOOD ZONE: _____FEMA MAP NUMBER: 120149 12079C _____C
ELEVATION CERTIFICATION REQUIRED _____YES _____NO
SURVEY or SITE PLAN REQUIRED: _____YES _____NO
ADDITIONAL COMMENTS / INFO REQUESTED OR PROVIDED:

_____

_____

DEVELOPMENT FEE: ___$200 ___$150 or ___NA
PAYMENT TYPE:___ CHECK __ CASH___CREDIT CARD

AUTHORIZED SIGNATURE: _____ DATE: _____

DISCLAIMER;

THIS IS TO ADVISE YOU THAT THE ABOVE NAMED PROPERTY OWNER IS IN COMPLIANCE WITH THE DENSITY REQUIREMENTS OF MADISON COUNTY COMPREHENSIVE LAND USE REGULATIONS AS OF DATE ABOVE.
PLEASE NOTE: ALL OTHER PERMITS REQUIRED MUST STILL BE OBTAINED.

DEVELOPMENT	
PERMIT NUMBER:	
RECEIPT NUMBER:	

REVISED 3/27/17 JB

GIS 911 Addressing Office

229 SW Pinckney St. Rm. 210 * Courthouse Annex * Madison Fl 32340
Phone (850) 973-1454 • Fax (850) 973-3659

In accordance with the county wide addressing policy, an application for a new address must be filed with each building permit. This will help to establish a standard for assigning numbers to all dwellings, principal buildings, businesses and industries. The addressing assists Emergency Service agencies, the United States Postal Services and the public in the timely and efficient provision of services, to all Madison County residents and businesses.

Date: _____ **New 911 Address:** _____

Owner Name: _____
(as it appears on the Deed)

Contact Name: _____ **Phone:** _____

Parcel ID Number: _____

Will this be used as a mailing address (USPS)? _____

Power Service Provider: _____

Address Point: _____ Town: _____
Zip: _____

Comments: (for office use only)

Date Completed: _____ **Completed by:** _____

Attention: 911 Address numbers **MUST** be posted at the driveway entrance to the structure **BEFORE** the final building inspection!

* Address numbers should be 4" or larger, be displayed by the driveway entrance and be visable in **BOTH DIRECTIONS**.

** Commercial numbers should be 10" or larger.

*** Address numbers should also be posted on any and all addressed structures on the property.

**** In the case of waterfront property, on the rivers, the address should be visibly posted on the dock, or in the absence of a dock, above the approximate 100 year flood mark. On lakes, above the approximate historic high water line.

6/15

AS400 - ____
FAXED - ____
PDF - ____

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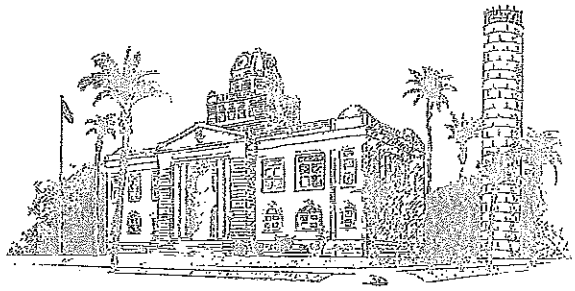
Madison County, Florida



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MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installer License:

- Any person who engages in mobile home installations shall obtain a mobile home installer's 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 IH_____ do
(Please Print Name) (License Number)

hereby state that the installation of the manufactured/mobile home for

_____ located at _____
(Applicant's Name) (Address)

will be done under my supervision.

_____ _____
Signature Date

_____ Notary Seal:
Notary Signature

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer _____ License # _____

Address of home being installed _____

_____

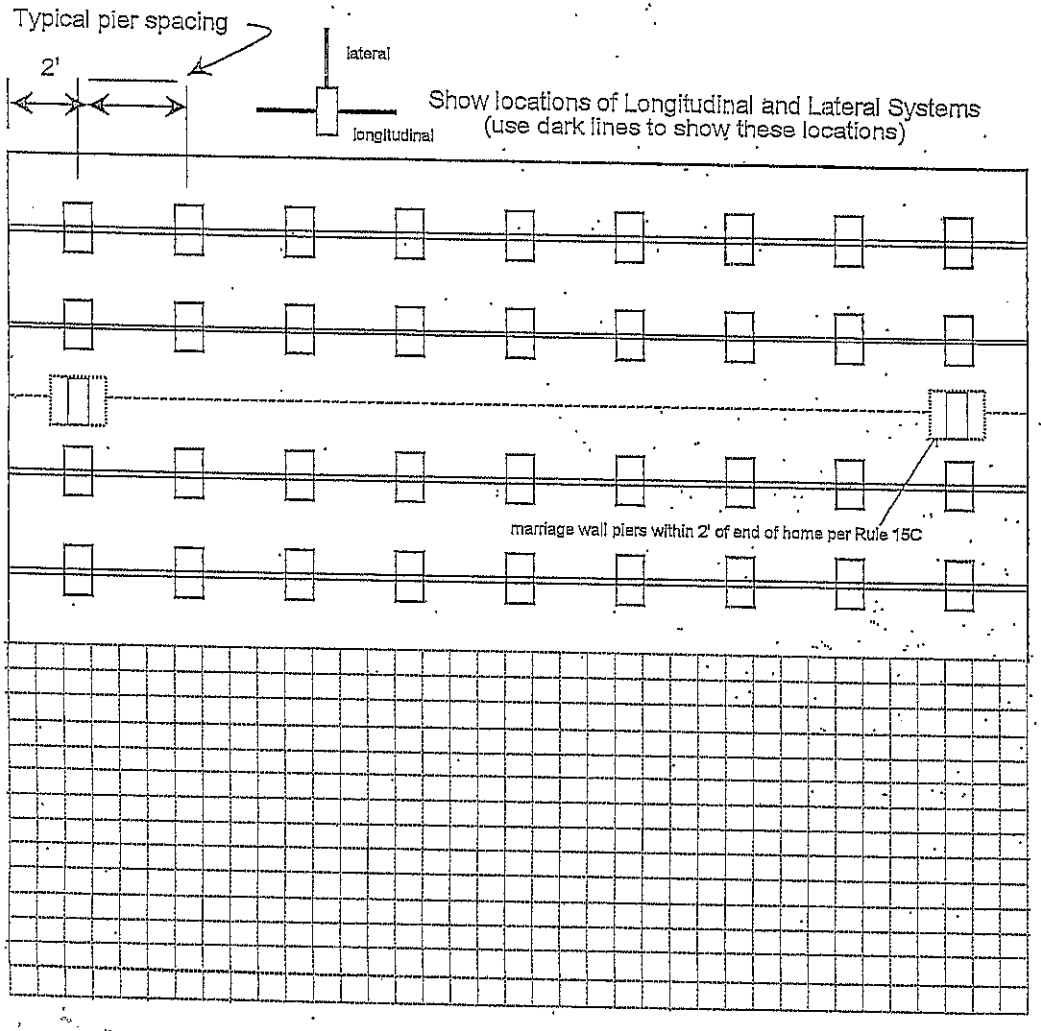
Manufacturer _____ Length x width _____

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 _____

Typical pier spacing



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'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size _____

Perimeter pier pad size _____

Other pier pad sizes (required by the mfg.) _____

☐ Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening	Pier pad size

POPULAR 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 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
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 _____

TIEDOWN COMPONENTS

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

OTHER TIES

	Number
Sidewall	
Longitudinal	
Marriage wall	
Shearwall	

PERMIT NUMBER _____

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 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 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 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, 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 _____
Pg. _____

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 manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature _____ Date _____