



**Brevard County Planning and Development
Development Services**

2725 Judge Fran Jamieson Way, A114

Viera, FL 32940

Phone: 321-633-2187

Email: Building.Licensing@BrevardFL.gov

Manufactured Home Installation Information

Permit Number: _____

Date: _____

Site Address

Street Address: _____ City: _____ State: _____ Zip: _____

Manufacturer's Name: _____ Date Manufactured: _____

Model: _____ Year: _____ Serial Number: _____

Wind Zone: _____ Number of Sections: _____ Width: _____ Length: _____

Site Preparation

Please list page number reference to manufacturing manual in each section.

Debris and organic material removal ☐ Compacted fill ☐ page: _____

Water Drainage: Natural ☐ Swale ☐ Pad ☐ Other ☐ page: _____

Foundation

Load bearing soil capacity _____ or assumed 1000 pounds/square foot page: _____

Footing type: Poured in place ☐ Portable ☐ page: _____

Footing size and thickness: _____ page: _____

I-beam or main rail piers: Single tiered ☐ Double interlocked ☐ page: _____

Size of piers: _____ Placement off center _____ page: _____

Perimeter pier blocking: Size: _____ Number: _____ page: _____

Ridge beam/center line support blocking Size: _____ Number: _____ page: _____

Ridge beam support footer: Size: _____ Number: _____ page: _____

Special pier blocking required: (fireplace, bay window, etc.) Yes ☐ No ☐ page: _____

Mating of multiple units: Mating gasket ☐ Type used: _____ page: _____

Fasteners: Roof type/size: _____ Spacing _____ off center page: _____

End walls, type and size: _____ Spacing _____ off center page: _____

Floors, type and size: _____ Spacing: _____ off center page: _____

Anchors: Type: 4725 ultimate load ☐ 6000 ultimate load ☐ page: _____

Test probe torque value _____ (275 in. lbs. or less = 5 ft. anchor) page: _____

Height of unit: (top of foundation or footer to bottom of frame) _____ page: _____

Number of frame ties: _____ Spacing: _____ off center page: _____

Angle of strap for frame ties: _____ degrees

Number of over the roof ties: (if required) _____ page: _____

Number of sidewall anchors: _____ Zone II _____ Zone III _____ page: _____

Number of centerline anchors: _____ Number of stabilizer devices: _____ page: _____

Number of end wall anchors: _____ page: _____

Vents required for underpinning number: _____ page: _____

(1 square foot per 150 square foot of floor area)

The information provided above meets the requirements of 15C-1

Licensed Installer or Dealer Name: _____

License Number: _____