



Bradford County ~ City of Starke
Building, Zoning & Planning
P.O. Box 1148 ~ 945-F North Temple Ave.
Starke, FL 32091
Phone: 904-966-6213 / 904-966-6223
Fax: 904-966-6220



MOBILE HOME PERMIT INFORMATION

1. You must PROVIDE a parcel number (this number identifies the property in which the Mobile home will be placed.) This can be found on your tax bill.
2. **The Bradford County Building & Zoning Department** will issue the zoning certification are on the property the fee will be \$25.00 and issue a Flood Zone Designation Map the fee will be \$ 25.00. These fees will be collected at the issuance of the permit.
3. If not connected to municipal water and sewer, a septic tank permit must be obtained from the **Bradford County Environmental Health Department, 904-964-7732**. The Health Department **MUST** initial by septic number on application form before move-on permit will be issued.
4. If you are not the property owner, then you must have a notarized letter of authorization from the property owner authorizing you to place the mobile home on their property. (see attached affidavit.)
5. Road Department **MUST** initial by culvert number on application form before building permit will be issued. (904) 966-6243.
6. **DOCUMENTS REQUIRED IN ORDER TO BE ISSUED A MOVE-ON PERMIT:**
 - **Completed Mobile Home Application:**
 - **Completed Mobile home affidavit & installation worksheet:**
 - **Survey showing flood zone verification and site plan-showing setbacks from property line:**
 - **Warranty deed:**
 - **Must have a 911 address at time of permitting; call 904-966-6179: ADDRESS MUST BE POSTED AT TIME OF FINAL INSPECTION.**
 - **The permit fee is \$150.00 (Singlewide) \$250.00 (Doublewide)\$100.00 fee for each section thereafter:**
 - **The electrical permit fee is determined by contract value:**
 - **Prior to permit issuance the prorated portion of the solid waste fee must be paid:**
 - **If in a Flood Zone A or AE, a Floodplain Development Permit Application will need to be submitted with construction application.**
 - **Survey Stakes must be in place and visible prior to first inspection:**
6. For new electrical service, or transfer of electrical service you must submit an application to your ELECTRICAL POWER SERVICE PROVIDER: this could take up to three weeks.
FPL: 1-800-462-0561 CLAY: 352-473-8000 EXT 356 CITY OF STARKE: 904-964-5027
7. Installer's decal must be on home at time of inspection and step(s) with handrails at all doors.
Mobile home must be skirted within 30 days after power is released:

IF NO INSPECTION WITHIN 3 MONTHS OF ISSUANCE THIS PERMIT WILL BECOME NULL & VOID.

**BRADFORD COUNTY, FLORIDA
BUILDING AND ZONING DEPARTMENT**

TIME LIMITATIONS FOR BUILDING PERMITS

The following is the policy of Bradford County, Florida concerning the time limits for construction after a building permit is issued by the Bradford County Building and Zoning Department. This policy applies to building permits issued for properties within unincorporated Bradford County as well as for properties within municipalities for which the Bradford County Building Department is responsible for issuing building permits.

1. Florida Building Code Section 104.5 Conditions of the permit states that every permit issued shall become invalid unless the work authorized by such permit is commenced within 6 months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 6 months after the time the work is commenced.
2. Work shall be considered to be in active progress when the permit has received and improved inspection within 6 months from issuance of permit and an extension will be given for an additional 6 months from each inspection.
3. If no inspection is requested and given within three (3) months of the issuance of a building permit or three (3) months from a prior inspection by the Building Department, then the Building Department may allow up to four (4) extensions of the three (3) months each, provided that the contractor contacts the Building Department by telephone or by U.S. Mail to request the extension prior to the expiration date of the current permit.
4. If a building permit expires and no extension has been requested and granted, then the contractor will be required to reapply for the building, electrical, mechanical, and plumbing permits that were issued prior to the expiration. The contractor will be charged a re-permit fee of \$50.00 per permit.
5. The County Manager, upon a showing of good cause, may wave the reapplication fee described above or otherwise reimburse any such fees previously paid.

BRADFORD COUNTY

**MOBILE HOME PERMIT
APPLICATION**

OWNER'S INFORMATION

NAME OF PROPERTY OWNER: _____

PROPERTY OWNERS MAILING ADDRESS: _____

TELEPHONE #: _____ CELL #: _____

911 ADDRESS: _____

NAME OF POWER SERVICE PROVIDER: _____

SEPTIC NUMBER: _____ FEMA FLOOD ZONE: _____

CULVERT NUMBER: _____

DIRECTIONS TO JOB-SITE: _____

PLEASE CIRCLE ONE: _____ SINGLE WIDE / DOUBLE WIDE / ADDITIONAL SECTIONS
YEAR: _____ WIDTH: _____ LENGTH: _____

I hereby state that I have received the Time Limitations For Building Permits sheet in the Residential Packet.

SIGNATURE (OWNER/CONTRACTOR) _____

ZONING DEPARTMENT CERTIFICATION

PARCEL ID NUMBER: _____

SECTION: _____ TOWNSHIP: _____ RANGE: _____

LAND USE / ZONING CLASSIFICATION: _____

MINIMUM LOT SIZE REQUIREMENT: _____

MINIMUM LOT WIDTH: _____

MINIMUM PROPERTY SET-BACKS:

FRONT: _____ SIDES: _____ REAR: _____

AUTHORIZED ZONING SIGNATURE: _____

DATE: _____

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statues Section 320.8249 Mobile Home Installers License:

Any person who engages in Mobile Home installation 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 Licensee shall pay a fee of \$150.

I _____, license number _____
Please Print Name

I do hereby state that the installation of the manufactured home located at _____
911 Address

_____ will be done under my supervision.

Signature: _____

Sworn to and subscribed before me this _____ day of _____ A.D. 20 _____

Notary Public _____, my commission Expires _____
Date

ELECTRICAL CONTRACTOR AFFIDAVIT

All Electrical Contractors must have current license and Insurance with this office prior to issuance of permit.

Company Name: _____

Contract Value: _____

Signature: _____

Sworn to and subscribed before me this _____ day of _____ A.D. 20 _____

Notary Public _____, Commission:

MOBILE 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.

Applicant: _____ Address: _____

Name for Licensed Dealer/Installer: _____

License No: _____ Installation Decal: _____

Manufacturer's Name: _____

Roof Zone: _____ Wind Zone: _____ No of Sections: _____

WIDTH: _____ LENGTH: _____ YEAR: _____ SERIAL#: _____

Installation Standard Used:(check one) Manufacturer's Manual _____ 15C-1 _____

SITE PREPARATION:

Debris and Organic Removal _____ Compacted Fill _____

Water Drainage: Natural _____ Swale _____ Pad _____ Other _____

FOUNDATION:

Tested load Bearing Soil Capacity _____ or Assumed 1000 PSF _____

Footing Type: poured in place _____ Portable _____ Size and Thickness _____

I-Beam or Main-rail Piers: Single Tiered _____ Double Interlocked _____

Size of Piers _____ Placement O/C _____

Perimeter Pier Blocking: Size _____ Placement O/C _____

Ridge Beam Support Blocking: Size _____ Number _____ Location(s) _____

Ridge Beam Support Footer: Size _____ Number _____ Locations(s) _____

Center Line Blocking: Number _____ Size _____ Location(s) _____

Special Pier Blocking: Required (Fire Place, Bay Window, Etc.) Yes _____ No _____

Mating of Multiple Units: Mating Gasket _____ Type Used _____

Fasteners: ROOFS: Type and Size _____ Spacing _____ O/C _____

ENDWALLS: Type and Size _____ Spacing _____ O/C _____

FLOORS: Type and Size _____ Spacing _____ O/C _____

ANCHORS:

Type 3150 Working Load _____ 4000 Working Load _____

Height of Unit: (Top of Foundation or Footer to Bottom Frame) _____

Number of Frame: Ties _____ Spacing _____ O/C Angle of Strap _____ Degrees _____

Number of Over Roof Ties: (If Required) _____

Number of Sidewall Anchors _____ Zone II _____ Zone III _____

Number Of Centerline Anchors _____ Number of Stabilizer Devices _____

Torque Value: _____

INSTRUCTIONS: FILL OUT THIS FORM WHEN A MOBILE HOME IS BEING PLACED ON PROPERTY NOT OWNED BY THE MOBILE HOME OWNER, I.E., RENTAL PROPERTY.

TO: BRADFORD COUNTY BUILDING DEPARTMENT

DATE: _____

I, _____ do hereby authorize
(Property Owner's Name)

_____ to place the herein described mobile home on my property.
(Occupant's Name)

Parcel Number : _____ Sec. _____, Tsp. _____, Rng. _____

Description of Mobile Home: Make: _____ Model: _____

Year: _____ Size: _____ Serial Number: _____

I UNDERSTAND THAT I, AS PROPERTY OWNER, WILL BE HELD RESPONSIBLE FOR ANY INFRACTION TO THE BRADFORD COUNTY LAND DEVELOPMENT REGULATIONS AS MAY OCCUR AS A RESULT OF THIS MOBILE HOME BEING PLACED ON MY PROPERTY.

Property Owner's Signature

**STATE OF FLORIDA
COUNTY OF BRADFORD**

The foregoing instrument was acknowledged before me this _____ day of _____ 20____, by
_____. _____ Personally Known, _____ Identification Produced.

Notary Public-State of Florida

SEAL: