



Jackson County Building Department  
 4487 Lafayette St.  
 Marianna, FL 32448  
 850-482-9802, Fax 850-718-0029  
[permitting@earthlink.net](mailto:permitting@earthlink.net)

THIS SECTION FOR OFFICE USE ONLY  
 Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

JACKSON COUNTY  
 MOBILE HOME SET-UP / BLOCKING PLAN WORKSHEET

Home Owner: \_\_\_\_\_

Installer: \_\_\_\_\_

Location: \_\_\_\_\_

License #: \_\_\_\_\_

Install Decal #: \_\_\_\_\_

<input type="checkbox"/> New Home	<input type="checkbox"/> Used Home	Wind Zone: _____
<input type="checkbox"/> Home Installed as per the Manufacturer's Installation Manual		Year of Mobile Home: _____
<input type="checkbox"/> Home installed in accordance with Rule 15-C		Size of Home: _____
<input type="checkbox"/> Single Wide	<input type="checkbox"/> Double Wide	<input type="checkbox"/> Triple / Quad

**Soil**

**Driving Directions:** \_\_\_\_\_

Tested soil psf: \_\_\_\_\_

**Pier Pad Sizes**

l-beam pier pad size: \_\_\_\_\_

Perimeter pier pad size: \_\_\_\_\_

Other pier pad sizes (required by Mft.): \_\_\_\_\_

Spacing of piers: \_\_\_\_\_

**Anchors**

Spacing of Anchor \_\_\_\_\_ ft. O.C

Frame Ties # \_\_\_\_\_

Anchor Size \_\_\_\_\_

Block Spacing \_\_\_\_\_ ft. O.C

**Tie Down Components**

Longitudinal Stabilization Device (LSD) \_\_\_\_\_

Longitudinal Stabilization Device w/ Lateral Arms \_\_\_\_\_

**Torque Probe Test**

The results of the torque probe test are \_\_\_\_\_ inch pounds or initial if you are declaring 5' anchors without testing \_\_\_\_\_.

A test showing 275 inch pounds or less will require 4 ft. anchors.

**All tests must be preformed by a licensed installer. Date Tested:** \_\_\_\_\_

I certify that all information given with the permit worksheet is accurate and true based on the manufacturer's installation instructions and/or Rule 15C – 1 & 2.		
Installer Signature: _____	Date: _____	Mobile Home Set-up, Blocking Plan.doc