



# Gilchrist County Building Department

209 SE 1<sup>st</sup> Street Trenton, FL 32693  
 Phone: (352) 463-3173 Fax: (352) 354-9113

Date Submitted: \_\_\_\_\_

## Mobile/Manufactured Home Permit Application New or Used Set-Up, Replacement, and Remodel Compliance

*Please print*

Owner/Applicant Information	
Owner Name:	
Address:	
City, State, & Zip:	
Phone:	Electric Company: <input type="checkbox"/> CFEC <input type="checkbox"/> Duke <input type="checkbox"/> Clay
Authorized Agent Name:	<input type="checkbox"/> Affidavit on File <input type="checkbox"/> Affidavit Attached
Agent Contact:	Phone: _____ Cell: _____ E-mail: _____
Project Address:	
Parcel ID:	Proof of Ownership:

Project Information	
Job Value: \$ _____	N.O.C. Required if \$2,500 and over in value

Mobile Home Dimensions: \_\_\_\_\_  New  Used (Must have pre-inspection)  Replacement Mobile Home  
 Compliance Permit  Windows/Doors/Siding  Framing  Electrical  Plumbing  Demo  Other:

Mobile/Manufactured Homes must be installed by a licensed Mobile Home installer. This application must be submitted with mobile home set-up worksheet and all other documents related to the establishment of a new, Used or Replaced home site.  
**Used Mobile Homes require a pre-inspection before permitting.**  
**Mobile Home Compliance Permit** – Compliance permits are used for the renovation of a mobile home, including framing, window/door/siding replacement, electrical, plumbing, and other repairs pertaining to mobile homes. The permit cannot be used for additions and roof-over systems. Those type of improvements must comply with Florida Building Code. See permit Clerk for permitting requirements.

CONTRACTOR INFORMATION				
TYPE	CONTRACTOR NAME	LICENSE #	ADDRESS	PHONE
M/H Installer				
Electrical				
Mechanical				
Building				
Plumbing				
Gas				

\_\_\_\_\_  
**Signature of Owner of Mobile Home**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name of Owner of Mobile Home**

STATE OF FLORIDA COUNTY OF Gilchrist County – The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
 by : \_\_\_\_\_

(Printed Name of Individual Acknowledging)  
 Individual identified by:  Personal Knowledge  Satisfactory Evidence: Type: \_\_\_\_\_  
 \_\_\_\_\_ Stamp:

\_\_\_\_\_  
 Signature of Notary Public - State of Florida

\_\_\_\_\_  
 Printed Name of Notary Public or Stamp

Approved or  Denied \_\_\_\_\_  
Building Official Date