



**GULF COUNTY, FLORIDA  
BUILDING DEPARTMENT**

1000 CECIL G. COSTIN, SR, BLVD., ROOM 305 \* PORT ST. JOE, FLORIDA 32456 \* PHONE (850) 229-8944 \* FAX (850) 229-7873

**MOBILE & MODULAR HOME PERMIT APPLICATION**

**IMPORTANT NOTES:**

- **ONLY APPROVED ZONE III MOBILE HOMES CAN BE INSTALLED IN GULF COUNTY, FLORIDA.**
- **NO MOBILE HOMES IN “V” FLOOD ZONES.**
- **IF INSTALLING A MOBILE HOME IN AN EXPOSURE “D” ZONE, THE MOBILE HOME MUST BE AN APPROVED ZONE III EXPOSURE “D” TYPE MOBILE HOME. AN EXPOSURE “D” ZONE IS MEASURED FROM THE MEAN HIGH WATER LINE TO 1500 FEET.**
- **A PRELIMINARY MOBILE HOME PERMIT IS REQUIRED FOR MOBILE HOMES OLDER THAN THREE (3) YEARS. COSTS: (A) IN COUNTY: \$50.00, (B) OUT OF COUNTY: \$25.00 PLUS \$1.00 PER MILE TO AND FROM SITE.**

1. OWNER’S NAME: \_\_\_\_\_
2. OWNER’S MAILING ADDRESS: \_\_\_\_\_
3. OWNER’S PHONE NUMBER: \_\_\_\_\_ CELL#: \_\_\_\_\_
4. PROPERTY ADDRESS OF CONSTRUCTION: \_\_\_\_\_
5. PROPERTY TAX IDENTIFICATION NUMBER: \_\_\_\_\_
6. JURISDICTION: ( ) GULF COUNTY ( ) CITY OF WEWAHITCHKA/(850) 639-2606
7. APPROVAL LETTER FROM THE CITY MANAGER (CITY OF WEWAHITCHKA ONLY).
8. CONTRACTOR’S (MOVER) NAME: \_\_\_\_\_
9. CONTRACTOR’S (MOVER) MAILING ADDRESS: \_\_\_\_\_
10. CONTRACTOR’S (MOVER) PHONE NUMBER: \_\_\_\_\_ CELL#: \_\_\_\_\_

11. CONTRACTOR'S (MOVER) FLORIDA LICENSE NUMBER: \_\_\_\_\_

12. CONTRACTOR'S (MOVER) FLORIDA LICENSE EXPIRATION DATE: \_\_\_\_\_

13. MOBILE/MODULAR HOME IDENTIFICATION.

a. MAKE OF HOME: \_\_\_\_\_

b. YEAR OF HOME: \_\_\_\_\_

c. SIZE OF HOME: \_\_\_\_\_

d. MODEL NUMBER OF MOBILE HOME: \_\_\_\_\_

e. SERIAL NUMBER OF MOBILE HOME: \_\_\_\_\_

14. PROVIDE ZONE III SPECIFICATIONS FROM THE MANUFACTURE.

15. ENVIRONMENTAL HEALTH PERMIT NUMBER: \_\_\_\_\_

a. Department of Environmental Health phone number: (850) 227-1276  
(ext: 125)

16. FLOOD ZONE DESIGNATION: ( ) X ( ) A ( ) AE ELEVATION: \_\_\_\_\_  
VE ELEVATION: \_\_\_\_\_

17. IF THE MOBILE HOME IS TO BE LOCATED IN AN APPROVED FLOOD ZONE:

- a. THE BUILDING DEPARTMENT **MUST** HAVE A SEALED ELEVATION CERTIFICATE.
- b. THE CERTIFICATE **MUST** INCLUDE AN ELEVATION FOR THE LOWEST MACHINERY LEVEL. (THE LETTER "E" ON THE CERTIFICATE). **"N/A" ON THE ELEVATION CERTIFICATE WILL NOT BE ACCEPTED.**

18. IF LOCATED IN A FLOOD ZONE, A FLOOD STATEMENT LETTER OR ELEVATION CERTIFICATE **MUST** BE PROVIDED WITH THE PERMIT APPLICATION.

19. PRE-SURVEY IF THE PROPERTY WHERE THE MOBILE OR MODULAR HOME IS MOVED TO IS LESS THAN ONE (1) ACRE.

20. SITE PLAN INDICATING PLACEMENT OF MOBILE OR MODULAR HOME, SEPTIC TANK, WATER WELL, SHEDS, ETC. ALL PROPERTY LINE SETBACKS **TO INCLUDE ALL OTHER STRUCTURES WITHIN THE MOBILE HOME PLACEMENT AREA.**

a. **GULF COUNTY, FLORIDA SETBACKS: VALIDATE ALL SETBACKS WITH THE GULF COUNTY PLANNING DEPARTMENT.**

21. PROVIDE A BLOCKING PLAN.

22. PROVIDE A FLOOR PLAN.

- a. **MODULAR HOMES: MUST** have wind loads of 140 3-second gust/120 sustained on the plans. If north of the Intracoastal Canal then 130 3-second gust/110 sustained.

23. **MODULAR HOMES: MUST HAVE WIND LOADS OF 140 3-SECOND GUST/120 SUSTAINED ON THE PLANS. IF NORTH OF THE INTRACOASTAL CANAL THEN 130 3-SECOND GUST/110 SUSTAINED.**

24. UPON CONSTRUCTION COMPLETION: PROVIDE A RAISED STAMPED POST-CONSTRUCTION SURVEY.

- a. The survey **MUST** identify the exact property lines.

NOTE: THE DEPARTMENT OF ENVIRONMENTAL HEALTH FINAL INSPECTION **MUST BE COMPLETED BEFORE THE SCHEDULING OF A FINAL INSPECTION.**

**BUILDING DEPARTMENT DAYS AND TIMES OF OPERATION**

**MONDAY THRU THURSDAY - 7:00 a.m. - 5:30 p.m. EASTERN TIME**