MOBILE HOME APPLICATION
INDIVIDUAL LOT
DEVELOPMENT ORDER APPLICATION

All items listed below must be submitted when building permit is applied for. Incomplete submittals will not be reviewed.

1. ____ Three complete sets of plans including:
   A site plan with square feet of living space, total square feet of structure, all impervious surface, and setbacks
   Floor plan indicating all bearing walls, number of water fixtures and exterior hose bibs.

2. ____ New address letter from Bay County if applicable

3. ____ Completed water/sewer allocation application

4. ____ A perimeter, foundation, and final survey of lot or recorded plat plan

5. ____ Completed driveway permit application

6. ____ Copy of a deed or other proof of ownership, rental agreement, or lease

7. ____ Completed transportation impact fee worksheet

<table>
<thead>
<tr>
<th>Applicant</th>
<th>Phone</th>
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Project address | Date |
---------------|------|

<table>
<thead>
<tr>
<th>Elevation</th>
<th>Land Use District</th>
<th>Flood Zone</th>
<th>Total Square Feet</th>
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<tr>
<th>Connection fees</th>
<th>Set Meter fee</th>
<th>Account Deposit fee</th>
<th>C.A. fee</th>
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<tr>
<th>Driveway Permit fee</th>
<th>Water</th>
<th>Sewer</th>
<th>Transportation Impact fee</th>
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<tr>
<th>First Check</th>
<th>Second Check</th>
<th>Total Impact fees</th>
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Reviewed by __________________________ Date __________________________

January 15, 2019
### Old Mobile Home

(If applicable)

<table>
<thead>
<tr>
<th>Bathroom fixtures</th>
<th>Kitchen fixtures</th>
<th>Misc. Fixtures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sinks</td>
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<td>Washing machine</td>
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<td>Toilets</td>
<td>Dishwasher</td>
<td>Hose hookups</td>
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<td>Ice Maker</td>
<td>Service sink</td>
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<td>Tubs</td>
<td>Other</td>
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</table>

Make/model: __________________________ Single wide: _____ Double wide: _____

Number of bedrooms: ______

### New Mobile Home

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</tbody>
</table>

Make/model: __________________________ Single wide: _____ Double wide: _____

Number of bedrooms: ______

Lot square footage: ____________ Dwelling square footage: ____________

Driveway square footage: ________ Accessory building square footage: ________

Pool square footage: ____________ Patio/Deck square footage: ____________

### Setbacks

*(The distance between the property line and the building, not including overhang)*

Front: ________________ (20’ minimum)      Left side: __________ (5’ minimum)

Right side: ________________ (5’ minimum)    Rear: ________________ (15’ minimum or 20’ if abutting a street)

Corner: ________________ (10’ minimum on the side abutting the street)

Building height in feet: ____________ Floor area ratio: ____________

Lot coverage: ________________ Impervious surface: ________________

Landscape buffers: (h X w): ____________ Elevation: ____________

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**Note:** City of Callaway Ordinance 939 requires all mobile homes and/or manufactured homes to have skirting.

January 15, 2019
APPLICATION FOR WATER/SEWER ALLOCATION

( ) Water Only                  ( ) Residential
( ) Sewer Only                  ( ) Commercial
( ) Water/Sewer                 ( ) Irrigation Meter

Date: _______________________

Name: _________________________

Address: _______________________

Phone: ________________________

Project Information

Project address: ____________________________ (If different from above address)

Is this project located within the city limits of Callaway? ( ) YES ( ) NO

Additional Information Required:

** A complete set of blue prints or working drawings indicating all water fixtures within or outside the building. This includes dishwasher, hose bibs, and icemakers.
** A site plan.
** Additional certifications, plans and permits maybe required for construction in specific areas.

If Irrigation Meter Is To Be Installed:

** Number of rotating sprinkler heads: _________
** Number of non-rotating sprinkler heads: _________
** Number of hose bibs: _______ Size: _________

** Unless otherwise specified, a ¾” irrigation meter will be used for estimating price.

January 16, 2019
Applicant acknowledges receipt of this application or any of the attached documents by the City of Callaway does not constitute a grant or reservation of sewer allocation or the approval of the application by the City.
Applicant acknowledges responsibility to pay all costs and expenses incident to the installation and connection of the building water/sewer. Applicant shall indemnify the City from any loss or damage that may directly or indirectly be occasioned by the installation of the building utility. Fees may include, but shall not be limited to labor, equipment, material, engineering, permitting, connection, and deposit and impact fees. I understand the connection fees are **NON-REFUNDABLE**.

For any application outside the city limits, a 25% surcharge will be added to the total connection/impact fees for service.

Note: If other governmental permits are required additional time and cost may be incurred to obtain these permits.

All impact fees incurred must be paid at the time of the connection fees.

I have read and understand the information described in this application.

Applicant's signature: __________________________ Date: ________________

January 16, 2019
To apply for water/sewer/solid waste service this application must be completed and notarized. The original notarized form must be submitted with a personal check, cashier's check, cash or money order in the amount of ($260) to cover the two-hundred fifty dollar deposit and ten dollar non-refundable account charge along with a legible copy of applicant's photo id and lease or buyer's agreement for service address. An additional deposit of ($40.00) is required for standard irrigation meters. We can connect your water service every day except, week-ends, and holidays.

PLEASE PRINT OR TYPE

Primary Account Name ____________________________________________

Last         First                Middle

Secondary Account Name ____________________________________________

Last         First                Middle

Service Address: ________________________________________________

Mailing Address: ________________________________________________

(If different) City          State          Zip Code

Drivers License: _______________________________________________

State       Number

Date of Birth: ____________________________ Phone ________________

Cell Phone ____________________________ Work Phone ________________

Employment: __________________________________________________

Date for Service to Begin: ____________________________

Check one (1) box below: You must select one of the options.

☐ Unlock Meter Only OR ☐ Turn on Meter

Read statement below, sign and date application

I, the undersigned applicant, for water/sewer/solid waste service state that the information provided on this application is true and correct to the best of my knowledge. I understand that all charges are due as billed and accept total responsibility for payment of all charges incurred for the services provided, including reasonable attorney's fees and costs incurred for collection of the unpaid balance. Both primary account holder and secondary account holder (if applicable) will be equally responsible for any unpaid balance sent to collections. I am also responsible for any damages done to any meters at this location by me or anyone else. I consent that water services provided at the service location may be turned on without applicant or applicant's representatives present. Applicant further agrees to hold the City of Callaway and its employees HARMLESS of authorizations made on behalf of secondary account holder and/or should the property, building(s) or premises incur damage as a result of water connection.

DATE: _______________ APPLICANTS' SIGNATURE: ____________________________

DATE: _______________ SECONDARY APPLICANTS' SIGNATURE: ____________________________

***Attached hereto is my (check one) proof of ownership, lease agreement, sales agreement, signed Realtor's listing.
Also attached is a legible copy of valid id (check one) driver's license, military id, state id. ***

Sworn to and subscribed before me this ______ day of ______________ 20__, by ________________________, who is personally known to me or who has produced ______________________ as identification and who did/did not take an oath.

NOTARY PUBLIC: ____________________________
PRINT NAME: ____________________________
MY COMMISSION EXPIRES: ____________________________

OFFICE USE ONLY

METER #: ____________________________ READ ____________________________

TECH ______________________ DATE ______________________ TIME ______________________

COMMENTS ____________________________

January 20, 2016
DRIVEWAY AND PIPING PERMIT

I, ____________________________________________________________, of (address) ____________________________________________________________, request permission for the construction of the following on the City of Callaway right-of-way at: ____________________________________________________________ Phone: ____________________________________________________________

Address of project

- Copy of deed or other proof of ownership is required

Description of project:

☐ New Residential
☐ Existing Residential
☐ Driveway Only
☐ Storm water Pipe

Will you be purchasing sod? YES: _____ NO: _____.

The City of Callaway will lay the sod upon completion of all ground work for existing residential only. The purchase of sod is optional.

- The driveway shall be constructed in accordance with the City of Callaway specifications.
- For traffic access area installation shall be with Reinforced Concrete Pipe (RCP) only.
- For the remainder of the ditch not directly under the driveway path, High Density Polyethylene Pipe may be used instead of RCP.
- The City of Callaway, Public Works Department shall assign the diameter of the pipe.
- The property must have an address posted and the construction area must be flagged in order for pipe to be delivered.
- For a previously undeveloped lot, the FULL extent of the ditch must be piped in before the City will issue a Certificate of Acceptance.
- This permit will only be valid for 90 days from date of the application and a new permit will be required if the date is beyond 90 days from receipt.

The applicant shall save and keep the City of Callaway harmless from any and all damages, claims, or injuries that may occur by reason of this construction of said facility.

The applicant binds and obligates himself to conform to the above description and attached sketch and to abide by the driveway regulations stated above.

All driveway and piping permit fees shall be paid prior to the issuance of a Certificate of Acceptance and prior to the commencement of any work by the City of Callaway. Price of the material may be subject to change.

__________________________________________  Date

Signature of applicant  January 16, 2019
TO BE COMPLETED BY THE STREET SUPERINTENDENT

Permit fee:

Driveway $_________
Ditch $_________

Concrete Pipe:
Pipe diameter: ___________ inches at ___________ linear feet = $________________

HDPE Pipe:
Pipe diameter: ___________ inches at ___________ linear feet = $________________

SUBTOTAL $_________

Sod sq. ft.: ___________ Pallets: ___________
SOD $_________
TOTAL $_________

Signature of Street Supervisor: _______________________________ Date notified: _________________________
Notified by: _______________________________

January 16, 2019
INSPECTION REPORT
(Contractors Only)

Representative of contractor installing pipe. Name: ________________________________

Phone Number: ________________________________

COMMENTS: ________________________________

__________________________________________

Passed inspection: __________________________ Failed inspection: _______________________

___ Need a storm inlet
___ More dirt on the Right of Way
___ Pipe too high
___ Pipe too low
___ Pipe joints not sealed

Inspector signature and title: _______________________________________________________

**For a previously undeveloped lot, the FULL extent of the ditch must be piped in before the City will issue a Certificate of Acceptance.

**The City will not provide any equipment or material for work on the site. The City of Callaway must be called within 24 hours of work completion for a final inspection.

The applicant will save and keep the City of Callaway harmless from any and all damages, claims, or injuries that may occur by reason of this construction of said facility.

The applicant binds and obligates himself to conform to the above description and attached sketch and to abide by the driveway regulations stated above.

All driveway and piping permit fees must be paid prior to the issuance of a Certificate of Acceptance and prior to the commencement of any work by the City of Callaway. Price of the materials is subject to change.

Signature of applicant __________________ Date __________________

January 16, 2019
Residential Use
Transportation Impact Fee Worksheet
City of Callaway

Check which applies:

Property Address:

Applicant:

# of Unit(s):

Guests:

Mobile Home Park (per lot)

240

Attached Residential

230

Multi-Family Unit

220

Single Family Detached (includes Mobile Homes and Manufactured Homes on Single Family Lots)

210

IUE Code: Select Land Use Type:
APPLICATION FOR BUILDING PERMIT

DATE: ________________________ Permit # ________________________ Permit Fee ________________________

OWNER'S NAME: ________________________________________________________________

ADDRESS: _________________________________________________________________

CITY, STATE & ZIP CODE: ______________________ PHONE # ______________________

FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): __________________________________________

ADDRESS: _________________________________________________________________

CITY, STATE & ZIP CODE: ______________________ PHONE # ______________________

CONTRACTOR'S NAME: _________________________________________________________

ADDRESS: _________________________________________________________________

CITY, STATE & ZIP CODE: ______________________ PHONE # ______________________

STATE LICENSE NUMBER: ______________________ COMPETENCY CARD #: ________________

ADDRESS OF PROJECT: _________________________________________________________

PROPOSED USE OF SITE: _________________________________________________________

WILL THE STRUCTURE BE LOCATED AT LEAST 30 FEET FROM ANY BODY OF WATER? ___YES ___NO

PROPERTY PARCEL ID # _______________________________________________________

LEGAL DESCRIPTION OF PROPERTY: _____________________________________________

IF THE APPLICATION IS FOR A COMMERCIAL PROJECT PLEASE LIST THE NAME OF THE BUSINESS:

BONDING COMPANY: ___________________________________________________________

ADDRESS: ______________________ CITY, STATE & ZIP: ______________________

ARCHITECT'S/ENGINEER'S NAME: _______________________________________________

ADDRESS: ______________________ CITY, STATE & ZIP: ______________________

MORTGAGE LENDER'S NAME: ____________________________________________________

ADDRESS: ______________________ CITY, STATE & ZIP: ______________________

WATER SYSTEM PROVIDER: ______________________ SEWER SYSTEM PROVIDER: __________

PRIVATE WATER WELL: ______________________ SEPTIC TANK PERMIT NUMBER: _______}

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that NO WORK or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, roofing, pools, furnaces, boilers, heaters, tanks, and air conditioners, etc.
PURPOSE OF BUILDING:

___ Single Family  ___ Townhouse  ___ Commercial  ___ Industrial
___ Duplex  ___ Swimming Pool  ___ Storage  ___ Sign
___ Multi-Family  ___ Demolition  ___ Other
___ Addition, Alteration or Renovation to building.____________________

Distance from property lines:  Front ___________  Rear ___________  L. Side ___________
R. Side _______________________
Cost of Construction $ ______________________  Square Footage ______________________
EPI ______________________  Flood Zone ______________________  Lowest Floor Elevation ______________________
Area Heated/Cooled # Of Stories ___________  # Of Units ______________________
Type of Roof ______________________  Type of Walls ______________________  Type of Floor ______________________
Extreme Dimensions of:  Length ___________  Height ___________  Width ___________

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. For improvements to real property with a construction cost of $2,500 or more, a certified copy of the Notice of Commencement is required to be submitted to this Department when application is made for a permit or the applicant may submit a copy of the Notice of Commencement along with an affidavit attesting to its recording. A certified copy of the Notice of Commencement must be provided to this Department before the second or any subsequent inspection can be performed. Filing of the documents that have been certified may be done by mail, facsimile or hand delivery.

NOTICE:  EPCI: The Callaway Building Department does not have the authority to enforce DEED RESTRICTIONS or COVENANTS on properties.

OWNER’S AFFIDAVIT:  I hereby certify that the information contained in this application is true and correct to the best of my knowledge. And that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature of Owner or Agent ______________________  Signature of Contractor ______________________
Date: ______________________  Date: ______________________

Notary as to Owner or Agent ______________________  Notary as to Contractor ______________________
My Commission expires: ______________________  My Commission expires: ______________________

APPLICATION APPROVED BY: ______________________  BUILDING OFFICIAL.
EPCI
CALLAWAY BUILDING DEPARTMENT
6601 EAST HIGWAY 22
CALLAWAY, FLORIDA 32404
TELEPHONE: 850-874-9347 · FAX: 850-874-0880

PLAN REVIEW SUBMITTAL FORM FOR MOBILE HOMES
(Not for commercial use)

All items listed below must be submitted when applying for a mobile home permit:

INCOMPLETE SUBMITTALS WILL NOT BE REVIEWED

1. Site Plan showing dimensions for property and distance from property lines. Show all buildings and structures on property and locations of electrical service and mechanical equipment. SITE PLAN MUST BE POSTED ON JOB SITE; THIS INCLUDES MOBILE HOME PARKS.

2. Blocking Plan and Anchoring Plan must be submitted AND POSTED ON JOB SITE. The area beneath and around the home must be graded for proper drainage.

3. Legal description of property (private lot only).

__________________________________________________________
Address ____________________________ Lot # ________________

Installer’s Name __________________________ License # ________________

Installer’s Signature __________________________ Phone # ________________

Owner’s Name __________________________ Phone # ________________

Electrical Contractor __________________________ Phone # ________________

Mechanical Contractor __________________________ Phone # ________________

NOTE: Effective 10/1/96 F.S. 320.8249 requires permits for all manufactured/mobile home installations to be obtained by licensed contractors or dealers or their agent. A notarized letter of authorization is required for anyone other than the license holder to pull a permit. The homeowner will be allowed to obtain the permit only when he has a letter of authorization from the contractor. All new manufactured/mobile homes will have to be installed by the dealer or the installer/set-up contractor. Electrical and mechanical require a separate permit pulled by a licensed contractor. If performed by other than the licensed mobile home installer, water and sewer connections require permitting by a licensed plumber. Any additional or accessory structure will require a separate permit.
INSPECTION PROCEDURES

1. Only licensed installer or agent can pull permit and call for inspections when set-up and electrical is complete.
2. When approved, Gulf Power and City Hall will be notified for power and water connects. It is the owner's responsibility to set up accounts for power and water.
3. If the inspections fail, the problems must be corrected and re-inspected before we will authorize power or issue the Certificate of Occupancy.

FOR INSPECTIONS CALL: 874-9347 (OFFICE HOURS: 7:30 A.M.-4:00 closed for lunch 12:00-12:30)

It is required that the installer ensure that these items have been checked prior to the inspection by the Building Department.

REINSPECTION FEES ARE $50.00

Fire Safety/Electrical

- Smoke Detector: Is it installed and operable?
- Electrical System Checked: Is there exposed wiring?
- Distribution Panel: Is it missing or loose?
- Electrical Fixtures: Are any missing, improperly installed, or inoperable?
- Electrical Ground: Check the chassis, main panel, and gas pipe.

Construction

- Exit Doors: Front and back operable?
- Exit Door locks: Missing or inoperable?
- Egress Windows: Missing or inoperable?
- Windows: Broken glass or inoperable?
- Screen: Missing or damaged?
- Floor System: Joist, decking damaged or deteriorated?
- Interior Paneling: Missing, loose or damaged?
- Rodent Proofing: Bottom board, pipe openings sealed?
- Leaks Apparent: Ceiling, doors, floor or roof leaking?
- Vertical Tie-Down Straps: Missing, short or damaged?
- Structural: Are there structural modifications since manufactured?
- Walls: Structurally unsound, loose and weather tight?

Plumbing

- Trap: Missing or not connected?
- Leaks: Ceiling doors, floor or roof leaking?
- Relief Valve: Missing or inoperable?
- Drain Waste/Vent Pipe: Missing or unsupported?
Fittings:

Proper alignment?

Heating and Air-Conditioning

- Heating Appliances:
  - Missing or unconnected?
- Deleted Heating/AC system:
  - Not installed?
- Thermostat:
  - Missing or inoperable?
- Air Registers:
  - Missing or inoperable?
- Duct work:
  - Not sealed, missing or collapsed?
- Gas Furnace/Water Heater Vent:
  - Missing or loose?
- Return Air:
  - Flows to furnace, to A/C through rooms?
- Range:
  - Vent or hood installed?
- Gas Valve:
  - Accessible, installed properly?
- Gas Lines:
  - Not capped, not supported or kinked?