

MANUFACTURED HOME PERMIT APPLICATION

PERMIT # _____
(Office Use Only)

1) APPLICANT _____ PHONE # (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

2) PROPERTY OWNER _____ PHONE # (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

3) SITE LOCATION (ROAD NAME & CITY) _____

4) PARCEL NUMBER FOR PROPERTY _____ LOT SIZE _____

5) NAME OF SUBDIVISION (If Applicable) _____

6) CONTRACTOR _____ PHONE # (____) _____ CELL#(____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

7) INSTALLER _____ PHONE # (____) _____ CELL# (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

8) DEALER _____ PHONE# (____) _____ CELL# (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

9) TYPE OF FOUNDATION/SETUP: _____ NON-PERMANENT ON PRECAST PADS
_____ PERMANENT FOUNDATION
_____ NON-PERMANENT ON POURED CONCRETE PADS/RIBBONS/SLABS

10) SEPTIC PERMIT # _____

11) REPLACING ANOTHER MFH? _____ YES _____ NO IF YES, GIVE DATE OF REMOVAL OF EXISTING MFH _____

12) ARE THERE ANY OTHER DWELLINGS (HOUSES, SHOPS, ETC) ON THIS PARCEL? YES _____ NO _____

IF YES, EXPLAIN: _____

SIGNATURE OF OWNER _____ DATE _____

(PLANNING AND BUILDING SERVICES USE ONLY)

ZONE _____ LOT SIZE (ACTUAL) _____ LOT SIZE (MINIMUM) _____

SETBACKS (ACTUAL) FRONT _____ SIDE _____ / _____ REAR _____ (MINIMUM) FRONT _____ SIDE _____ REAR _____

FLOOD PLAIN DEVELOPMENT PERMIT REQUIRED? YES _____ NO _____ PERMIT # _____

EARTHQUAKE HAZARD: _____ FIRE HAZARD: _____

LANDSLIDE HAZARD: _____ FLOODPLAIN HAZARD: _____

COMMENTS: