

# Manufactured Dwelling and Park Trailer Installation Permit Application

## Jurisdiction: Lake County Building Department

Address: 513 Center Street, Lakeview, OR 97630

Phone: 541-947-6033

Fax: 541-947-2144

Land use approval:

OFFICE USE ONLY		
Date received:	Permit no.:	
Project/appl. no.:	Expire date:	
Date issued:	By:	Receipt no.:
Case file no.:	Payment type:	
Health dept.:	DEQ:	

### TYPE OF PERMIT

- Owner installed   
  Contractor installed   
  Repair  
 New   
  Addition/alteration   
  Replacement: Same location   
 Yes   
 No

### JOB SITE INFORMATION

Job address:		Space no.:	
Manufactured dwelling park:		Address:	
City:	State:	ZIP:	
Tax map/tax lot no./account no.:	Lot:	Block:	Subdivision:
Base flood elevation:		Elevation certificate:	
Description and location of work on premises:			

### OWNER

Name:		Address:	
City:		State:	ZIP:
Phone:	Fax:	E-mail:	
Owner's representative:			
Phone:	Fax:	E-mail:	

### SET UP/INSTALLATION

Name:		Address:	
City:		State:	ZIP:
Phone:	Fax:	E-mail:	
CCB license no.:	City/Metro license no.:	MDI license no.:	

### SKIRTING

Name:		Address:	
City:		State:	ZIP:
Contact person:	Phone:	E-mail:	
CCB license no.:	City/Metro license no.:		
Skirting license no.:	MDI/LSI license no.:		

### APPLICANT

Name:		Address:	
City:		State:	ZIP:
Phone:	Fax:	E-mail:	

### MANUFACTURED HOME INFORMATION

Concrete stringers/slab under home:  Yes   
 No   
 Single   
 Double   
 Triple   
 Valuation: \$  
 Square feet:

*(Dwelling and set up only, does not include other permits)*

**ADDITIONAL PERMITS** *(If required)*

<input type="checkbox"/> Mechanical	Permit no.:	<input type="checkbox"/> Plumbing	Permit no.:
<input type="checkbox"/> Electrical	Permit no.:	<input type="checkbox"/> Foundation	Permit no.:
<input type="checkbox"/> Garage	Permit no.:	<input type="checkbox"/> Carport	Permit no.:
<input type="checkbox"/> Cabana	Permit no.:	<input type="checkbox"/> Ramada	Permit no.:
<input type="checkbox"/> Awning	Permit no.:	<input type="checkbox"/> Alterations	Permit no.:
<input type="checkbox"/> Other			Permit no.:

I hereby certify I have read and examined this application and the attached checklist. All provisions of laws and ordinances governing this work will be complied with, whether specified herein or not.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Notice: This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.**

Set up fee:	_____	\$	_____
State surcharge (12%):	_____	\$	_____
State fee:	_____	\$	_____
<b>Total:</b>	_____	\$	_____