



City of Clatskanie

APPLICATION FOR MOBILE HOME/MANUFACTURED HOME INSTALLATION

For Inspections Call 541-484-9043 or 800-358-8034

Permit #

| JOB SITE INFORMATION | |
|----------------------|----------|
| Address: | |
| City: | |
| Name of Park: | Space #: |
| Lot: | |
| Block: | |
| Subdivision: | |

| OWNER INFORMATION |
|-------------------|
| Name: |
| Email: |
| Address: |
| City, State, Zip: |
| Phone: |
| Fax: |

| LOCAL GOVERNMENT APPROVALS | | |
|--|---|---|
| Zoning/City Checked by: Information verified? ___ YES ___ NO Signature: | Flood Plain ___ YES ___ NO Req. Elev. ___ Signature: | Sanitation Information verified? ___ YES ___ NO Signature: |

| APPLICATION REQUIREMENTS | | |
|--|--------------------------|--------------------------|
| 1. Provide site plan drawn to scale, indicating: | Provided | Prior to 1st Inspection |
| Property lines, easements, and elevations. Provide contour lines @ 2' o.c.. if > 12" elev. change. | <input type="checkbox"/> | <input type="checkbox"/> |
| All accessory buildings or structures (existing or proposed.) | <input type="checkbox"/> | <input type="checkbox"/> |
| All utilities including storm water drainage, septic and leach lines, wells and natural waterways. | <input type="checkbox"/> | <input type="checkbox"/> |
| Proposed decks, steps, walkways, and driveways etc. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Provide a floor plan. | <input type="checkbox"/> | <input type="checkbox"/> |

| FEES | |
|---|-----------|
| 1. Set Up Permit | \$ 400.00 |
| 2. Permanent Steps or Decks | |
| 3. Plumbing Permit (over 30 lineal ft.) | |
| Sewer Permit (over 30 lineal ft.) | |
| Storm Permit (over 30 lineal ft.) | |
| 4. Electrical Permit | |
| 5. State MH Fee | \$ 30.00 |
| 6. State Surcharge (12% of #1 - 4) | |
| City Systems Charge | |
| Total | |
| Approved for Issuance By: | Date: |

| NOTICE |
|--|
| <p>I agree to install the Manufactured Home in accordance with Oregon Revised Statutes 446.003 to 446.280 and 446.990. Oregon Administrative Rules 918-515-0005 through 918-515-0490, and the installation instructions as supplied by the manufacturer. I will provide a copy of the manufacturer's installation instructions for inspector's use at the time of required installation inspection. If no instructions are provided, inspection will be based on minimum Oregon State installation requirements. The inspecting authority takes no responsibility for the accuracy of Oregon Building Codes Agency Rules or manufacturer's instructions.</p> <p>I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.</p> <p>I have read and reviewed the local ordinances and laws pertaining to the installation of manufactured homes and mobile homes in this jurisdiction. I agree to install this home according to these specifications.</p> |

| INSTALLER INFORMATION | |
|--------------------------|--|
| <input type="checkbox"/> | I am the property owner doing my own work. |
| <input type="checkbox"/> | I am licensed with the Building Codes Division. License No.: _____ Expires: _____ |
| <input type="checkbox"/> | I am registered with the Construction Contractor's Board. Registration No.: _____ Expires: _____ |
| Contractor Name: | Phone: |
| Contractor Address: | Email: |
| Signature: | Date: |