

MANUFACTURED HOUSING PERMIT APPLICATION
(ALL INFORMATION MUST BE COMPLETE FOR PROCESSING)

DATE _____ SITE ADDRESS _____

Subdivision _____ Lot _____ Block _____

Sq. Ft. Lot _____ Sq. Ft. Livable _____

CONTRACTOR NAME _____ PHONE _____

Address _____ City _____ State _____ Zip _____

Subcontractors: ELECTRICAL _____
 MECHANICAL _____
 PLUMBING _____

Is A/C included? YES or NO If yes, give total value \$ _____

Is lawn sprinkler included? YES or NO If yes, give total value \$ _____

Owner Name _____ Phone () _____

Address _____ City _____ State _____ Zip _____

ATTACHMENTS:

Building Plans: (2 Sets) YES or NO

Site Plan (2 copies on 8 1/2 x 11) YES or NO

Signature _____ Print Name _____

PLEASE TURN TO REVERSE SIDE TO COMPLETE FORM

Office Use Only

Valuation \$ _____	Bldg Fee _____	Comm Park _____
Permit # _____	Sales Tax _____	Neigh Park _____
F & F # _____	Trans Fee _____	Other _____
Trans Zone _____	Drain Fee _____	Water-C Fee _____
Drain Basin _____	Plan Check _____	Sewer-C Fee _____
Park Zone _____	Fire/Rescue _____	Meter Fee _____
	Police Fee _____	
	Temp Elec _____	
	Linear Park _____	TOTAL \$ _____

(Linear Park & Trails fee & Park fee excludes
hotels/motels, nursing homes & assisted living)

BI _____ Eng _____ Fire _____ Plan _____ W&S _____ Issue Date _____

CONSTRUCTION VALUE WORKSHEET

DATE:		CONTRACTOR:	
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JOB ADDRESS:	
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Dwellings	Square Feet	Value (\$)
Purchase Price of Home		
Footing and Foundation		
Set-Up		
Air Conditioner/Central Air		
Lawn Sprinkler		
Garages	Square Feet	Value (\$)
Type: (ie; woodframe, brick, masonry) write below:		

TOTAL CONSTRUCTION VALUE \$ _____