

Building, Planning and Engineering Dept.
 Sedro-Woolley Municipal Building
 325 Metcalf Street
 Sedro-Woolley, WA 98284
 Phone (360) 855-0771
 Fax (360) 855-0733

MANUFACTURED HOME PERMIT APPLICATION

Date Stamp

APPLICATION No. _____

All Manufactured Home Permits must be accompanied by copies of the documents listed below. Failure to attach all the required submittal documents will result in an incomplete application and will not be accepted by City staff.

Manufactured Home-\$500.00 Modular Homes \$750 plus foundation and/or basement permit fee

THIS PAGE TO BE COMPLETED BY CITY STAFF AT THE TIME OF APPLICATION

Received	Required Submittals
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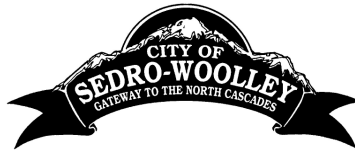
- 1 Completed Application Signed by Applicant
- 2 Two (2) copies: Manufacture’s installation manual that include complete sections detailing tie-down support instructions.
- 3 Two (2) copies: Scaled conceptual site plan showing the following elements along with their dimensions:
 - (a) proposed new manufactured home or addition;
 - (b) proposed decks and porches
 - (c) existing structures, utilities, easements and right-of-ways;
 - (d) existing and proposed street access;
 - (e) parking area(s);

IMPORTANT! Items (a)-(d) above must be **clearly marked** or the application cannot be accepted.
- 4 One (1) Copy: WAINS certification for each certified installer working on or supervising the installation of this manufactured home. Homeowners doing the work themselves and not paying someone to assist with the installation do not need to have certified installer present.
- 5 Application Fee Paid

Application Accepted? **YES / NO** City Official _____ Date: _____

If not accepted, list corrections required to make the application complete:

Correction Description	Correction approved	Date Received



MANUFACTURED HOME PERMIT APPLICATION

Fill out completely. Attach legal descriptions and supporting documents as necessary. Failure to complete all sections will result in an incomplete application and will not be accepted by City staff.

APPLICANT/CONTACT	OWNER <small>(if different from applicant)</small>	CONTRACTOR
Name: _____	Name: _____	Company: _____
Address _____	Address _____	Contact: _____
City: _____	City: _____	Address: _____
Zip Code: _____	Zip Code: _____	City: _____ Zip: _____
Day Phone: _____	Day Phone: _____	Day Phone: _____
Cell Phone: _____	Cell Phone: _____	Cell: _____ Fax: _____
Fax: _____	Fax: _____	Registration #: _____
		Expiration Date: _____
		City License # _____

PROJECT SITE IDENTIFICATION

Site Address: _____ Lot/Block#: _____ Lot Size: _____ acres/sq.ft.

Parcel I.D. #: _____ Section # _____ Township _____ Range: _____

MOBILE/MANUFACTURED HOME INFORMATION

Year Built: _____ Make: _____ Model: _____ Vehicle Identification # (VIN): _____ Size: _____ sq. ft. Valuation (Purchase Price & Installation) \$ _____	<p>A Certified manufactured home installer must be present for each phase of installation the entire time installation work is being performed. The certified installer is responsible for supervising all installation work being performed by all members of the installation crew. The certified installer MUST enter their WAINS number on the INSTALLER TAG for each element he/she is supervising. HOMEOWNERS DOING THE WORK THEMSELVES AND NOT PAYING SOMEONE TO ASSIST WITH THE INSTALLATION ARE EXEMPT FROM THIS REQUIREMENT.</p> <p><input type="checkbox"/> Exempt – No WAINS Certification Required</p> <p><input type="checkbox"/> Licensed Installer: _____</p> <p>Please attach copies of WAINS certification for each certified installer working or supervising the installation of this manufactured home.</p>
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PROJECT SITE INFORMATION	GRADING	NEW IMPERVIOUS SURFACES
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Current zoning: _____ Are there any existing structures on the property? Yes/No Will it be necessary to clear any trees or vegetation for this project? Yes/No Do you own adjoining pieces of land? Yes/No Is the property within 200 feet of a Critical Area? Yes/No	Cuts _____cy Fill _____cy Grading _____cy Total _____cy	Bldg _____sq. ft. Drive/Parking _____sq. ft. Sidewalk(s) _____sq. ft. Other _____sq. ft. Total Impervious _____sq. ft.
Total Percentage of Lot Coverage : _____%		

Application is hereby **MANUFACTURED HOME PERMIT**. I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the officials of the City of Sedro-Woolley the right to enter the above-described property to inspect the property as part of the permit application review and approval process and/or the proposed or completed work.

Signature (Required): _____ **Date:** _____