

Manufactured Home Application

23335 NE Halsey St Wood Village, OR 97060
 Phone: 503-489-6861 or 503 489-6859 Fax: 503-669-8723
www.woodvillageor.gov
 Email: Building@woodvillageor.gov

FOR OFFICE USE ONLY	
Application #:	Issued Permit #
Receipt #	Receipt #
Date:	Date Issued:
Received by:	Issued by:

JOB SITE INFORMATION

Site Address		Space	
Manufactured Dwelling Park		Address	
City		State	
Tax Account/State ID No.		Lot	Block
		Subdivision	
Description of Work on Premises			

TYPE OF APPLICATION

<input type="checkbox"/> Owner Installed	<input type="checkbox"/> Contractor Installed	<input type="checkbox"/> Repair		
<input type="checkbox"/> New	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> Replacement: Same Location	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT	MANUFACTURED HOME INFORMATION		

Name	Concrete Stringers/Slab Under Home	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Address	<input type="checkbox"/> Single	<input type="checkbox"/> Double	<input type="checkbox"/> Triple
City/State/Zip	Valuation	\$	Square Feet
Phone	Fax	(Dwelling and Set Up Only. Does Not Include Other Permits)	

SET UP CONTRACTOR

Contractor		<input type="checkbox"/> Mechanical	NOTES
Contact Name		<input type="checkbox"/> Plumbing	
Address		<input type="checkbox"/> Electrical	
City/State/Zip		<input type="checkbox"/> Foundation	
Phone	Fax	<input type="checkbox"/> Steps	
MDI License No.	CCB License No.	<input type="checkbox"/> Shed	
		<input type="checkbox"/> Carport	

ADDITIONAL PERMITS

Contractor		<input type="checkbox"/> Garage	NOTES
Contact Name		<input type="checkbox"/> Alterations	
Address		<input type="checkbox"/> Other	
City/State/Zip			
Phone	Fax		
CCB License No.			
Skirting License No.		MDI/LSI License No.	

SKIRTING CONTRACTOR

Contractor			NOTES
Contact Name			
Address			
City/State/Zip			
Phone	Fax		
CCB License No.			
Skirting License No.		MDI/LSI License No.	

APPLICANT

Name			NOTES
Address			
City/State/Zip			
Phone	Fax		

I hereby certify 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 here in or not.

Notice: Manufactured dwelling installers must have an Oregon MDI and Construction Contractors Board license under provisions of ORS 701 and may be required to be licensed in the jurisdiction where work is being performed, or the applicant is exempt from licensing as noted:

Applicant Signature	Date
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PERMIT FEES (OFFICE USE ONLY)

Set Up Fee	\$	
12% State Surcharge	\$	
State Fee	\$	
	\$	
Total Fee	\$	