



Manufactured Dwelling Placement Application

Transportation & Development
Building Codes

800 Exchange St Ste 100 Astoria, OR 97103
Ph: (503) 338-3697, Fax: (503) 338-3666
Web: co.clatsop.or.us
Inspection Request Line: (503) 338-3698

DEPARTMENT USE ONLY	
Permit no.:	
Issued By:	
Date:	
Zoning approval verified:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property is within flood plain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sanitation approval verified:	<input type="checkbox"/> Yes <input type="checkbox"/> No

This permit is issued under OARs 918-500-0105 and 918-525-0370. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

JOB SITE INFORMATION AND LOCATION	
PROPERTY OWNER:	
Job site Address:	
City:	State:
State:	Zip:
Directions to job site:	In Park? Space #
Map/Legal Description:	
Subdivision:	
DESCRIPTON OF WORK	
PROPERTY OWNER INSTALLATION	
Name:	
Address:	
City/State/Zip:	
Email:	
Phone: ()	
This installation is being made on residential or farm property owned by me or a member of my immediate family.	
Owner's Signature:	
CONTRACTOR INSTALLATION	
Business name:	
Address:	
City/State/Zip:	
Email:	
Ph: ()	Fax:()
CCB no:	MDI no.:
Contractor's Signature:	
Notice: Manufactured dwelling installers must have an Oregon MDI and Construction Contractors Board license under provision 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 for the following reason:	

MANUFACTURED HOME INFORMATION			
Concrete stringers/slab under home: <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple			
Additional Separate permits (If required)			
<input type="checkbox"/> Foundation <input type="checkbox"/> Garage <input type="checkbox"/> Decks <input type="checkbox"/> Carport <input type="checkbox"/> Electrical			
<input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical			
FEE SCHEDULE			
Description	Cost ea.	Qty	Total
1. Manufactured Dwelling			
(a) Placement (includes placement, electrical feeder, connection for water/sewer):	\$160.00		
(b) Re-inspection (per inspection):	\$61.50		
2. Total Fees			
(c) Surcharge, 12 percent (.12 x total fees):			
(d) Administrative fee for item (1) only:	\$30.00	1	\$30.00
TOTAL MH FEES:			
Placement permit to be obtained only by homeowner or Oregon-Licensed Manufactured Dwelling installer.			

Make check or money order payable to **CLATSOP COUNTY BUILDING CODES**. If paying by credit card, applicant must sign credit card information box. Do **not** send cash.

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	Phone: ()
Credit card number		Expiration
Name of cardholder as shown on credit card		
Cardholder signature		\$ Amount

If paying by credit card, please provide mailing address where you receive your credit card statement:
ADDRESS:
CITY/ZIP

Dept Use Only