



Manufactured Dwelling Permit Application

City of Wood Village

2055 NE 238th Dr., Wood Village OR 97060

Permit Specialist 503.489.6861 or 503.489.6859

| | |
|-----------------|-------------|
| Application No. | Permit No. |
| Date Received | Date Issued |
| Received By | Issued By |
| Receipt No. | Receipt No. |

Inspection requests: Phone: 503.489.6860 Fax: 503.669.8723 E-mail: city@ci.wood-village.or.us

| TYPE OF PERMIT | | | |
|---|---|---|---|
| <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 |
| JOB SITE INFORMATION | | | |
| Job address: | | | Space no.: |
| Manufactured dwelling park: | | Address: | |
| City: Wood Village | State: Oregon | | Zip: 97060 |
| Tax map/tax lot no./account no.: | Lot: | Block: | Subdivision: |
| Base flood elevation: | Elevation certificate: | | |
| Description of work on premises: | | | |
| OWNER | | 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: | |
| Phone: | Fax: | | |
| Owner representative: | | Valuation \$ _____ Square Feet _____ | |
| Phone: | Fax: | | |
| SET UP/INSTALLATION CONTRACTOR | | ADDITIONAL PERMITS (if required) | |
| Name: | | <input type="checkbox"/> Mechanical | Permit no.: _____ |
| Address: | | <input type="checkbox"/> Plumbing | Permit no.: _____ |
| City: | State: | Zip: | <input type="checkbox"/> Electrical |
| Phone: | Fax: | | |
| CCB License no.: | City/Metro license no.: | | |
| MDI license no. | <input type="checkbox"/> Foundation | Permit no.: _____ | |
| SKIRTING CONTRACTOR | | <input type="checkbox"/> Garage | Permit no.: _____ |
| Name: | | <input type="checkbox"/> Carport | Permit no.: _____ |
| Address: | | <input type="checkbox"/> Cabana | Permit no.: _____ |
| City: | State: | Zip: | <input type="checkbox"/> Ramada |
| Contact person: | Phone: | | |
| CCB License no.: | City/Metro license no.: | | |
| Skirting license no.: | MDI/LSI license no. | | |
| APPLICANT | | DEPARTMENT APPROVAL - INITIAL & DATE | |
| Name: | | Building Dept.: | |
| Address: | | Planning Dept.: | |
| City: | State: | Zip: | 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 for the following reason: _____ |
| 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 herein or not. | | | |
| Applicant's signature | | Date | |
| This permit application expires if a permit is not obtained within 180-days after it has been accepted as complete. Permits are non-transferable and expire 180-days from issuance or last inspection. | | | |
| Manufactured Home Permit Fees | | | |
| | | Set up fee | \$ 320.00 |
| | | 12% State surcharge | \$ 38.40 |
| | | State fee | \$ 30.00 |
| | | Deposit | \$ |
| | | Total | \$ 388.40 |

