STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

MOBILE HOME/MOBILE HOME ACCESSORY STRUCTURE INSTALLATION PERMIT APPLICATION

WHEN APPROVED THIS APPLICATION IS YOUR PERMIT

PERMIT NO: MCC-147-79

COUNTY: CURRY

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

1. Address of Proposed Mobile Home Installation: SUNSET VIEW MOBILE HOME PARK SP#25 | City: HARBOR | County: CURRY | Zip: 97415

2. Directions to Mobile Home Installation: SUNSET STRIP

3. Is Mobile Home W/In City Limits ☐ Yes ☐ No | 4. On Private Property ☐ Yes ☒ No | 5. In a Mobile Home Park ☒ Yes ☐ No

6. Owner: C. EDWARD DEMPSEY | Phone No.: 469-2396

7. Dealer-Installer: (HARBOR MOBILE HOMES) | Address: 1647 HWY 101 | City: COOS BAY | Phone No.: 267-6626 | Bldr. Bd. Reg. No.: (HM) 0016954

8. Accessory-Installer | Address | City | Phone No. | Bldr. Bd. Reg. No.

9. Describe Work: Install Mobile Home ☒ | 10. Install Awning or Carport ☐ | 11. Install Cabana ☐

12. * Date Inspection Is Requested: AFTER 7-16-79 | Manufacturer of Mobile Home: (BARRINGTON HOMES OF WA.) FESTIVAL | Size of Mobile Home: 14X66

13. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAW AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING MOBILE HOME INSTALLATIONS.

☐ _____ Signature of Owner (Date) or ☐ _____ Signature of Dealer-Installer or (Accessory-Installer) 7/9/79 (Date)

APPLICANT PLEASE DO NOT WRITE BELOW THIS LINE:

ZONING APPROVAL:	Required ☐ Yes ☐ No	Received	Date	
SANITATION APPROVAL:	Required ☐ Yes ☐ No	Received	Date	
PARK LICENSE NUMBER	NUMBER OF APPROVED PARK SPACES	SPACE WHERE MH WILL BE LOCATED		
* CALL FOR INSPECTION:	PHONE NO.	TIEDOWNS REQUIRED	☒ Yes ☐ No	

SPECIAL CONDITIONS: 6 TIE downs per Side.

1. ☒ SINGLE WIDE (Inc. Tip-Out)	$25	5. ☐ AWNING OR CARPORT	$5
2. ☐ DOUBLE WIDE	$40	6. ☐ ELECTRICAL	
3. ☐ EACH ADDITIONAL WIDTH	$15	7. ☐ PLUMBING	
4. ☐ CABANA	$15	8. ☐ MECHANICAL	

TOTAL (CK) CASH M.O. $ 25.00

APPLICATION APPROVED BY: D Ramsey

DATE PERMIT ISSUED: 7-10-79

Part 1—Office Copy—White | Part 2—Applicant—Canary | Part 3—Inspector—Blue | Part 4—Auditor—Green | Part 5—Local Government—G-rod

SP*43880-814

STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

8-14-79
Rod OK

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6. Owner: C. EDWARD DEMPSEY | Phone No.: 469-2396

7. Dealer-Installer: HARBOR MOBILE Address: COAST TRAILER TOWING 164 TIMMY RD City: Coos Bay Phone No.: 267-6626 Bldr. Bd. Reg. No.: (illegible)

Accessory-Installer | Address | City | Phone No. | Bldr. Bd. Reg. No.

8.

9. Describe Work: Install Mobile Home ☑ 10. Install Awning or Carport ☐ 11. Install Cabana ☐

12. * Date Inspection Is Requested: AFTER 7-10-79 | Manufacturer of Mobile Home: (illegible) FESTIVAL | Size of Mobile Home: 14X66

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