

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

COUNTY: CURRY

APPL	ICANT TO COMPLETE NUMBERED SPACES ONLY:								
1.	Address of Proposed Mobile Home Installation: SUNSET VIEW MOBILE HOME PARK SH25	City HARBER	CURRY	77415					
	Directions to Mobile Home Installation:								
2.	SUNSET STRIP		l AAshile						
3.		Yes X No	In a Mobile 5. Home Park	∑ Yes □ No					
6.	Owner C: EDWARD DEMPSEY Phone No. 469-2396								
7.	C: EDWARD DEMPSEY Dealer-Installer HARDER MODE PARTIES COAST TRAILER TOWING 1647 HILLY 101 COOS			dr. Bd. Reg. No.					
8.	Accessory-Installer Address City	Pho	one No. Bl	dr. Bd. Reg. No.					
0.									
9.	9. Describe Work: Install Mobile Home 😥 10. Install Awning or Carport 🗌 11. Install Cabana 📋								
12.	* Date Inspection Is Requested (Manufacturer of Mobile Home (BARRINGTON (BARRINGTON 14X66								
13.	I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS CORRECT. ALL PROVISIONS OF LAW AND ORDINANCES GOV WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL OR Signature of Owner (Date)	VERNING THIS TA PERMIT DOES L LAW REGULAT	TYPE OF WORK WILL NOT GIVE AUTHORIT	BE COMPLIED WITH TY TO VIOLATE OR NSTALLATIONS. 7/9/79					
	APPLICANT PLEASE DO NOT WRIT	TE BELOW THIS LINE:	0						
10S	NING APPROVAL: Required Yes No	Received	D	Pate					
SAN	IITATION APPROVAL: Required Yes No	Received	D	Pate					
PARK LICENSE NUMBER OF NUMBER OF PARK				SPACE WHERE MH WILL BE LOCATED					
* C/	ALL FOR INSPECTION: PHONE NO.	TIEDOW	'NS REQUIRED	Yes 🗌 No					
SPE	CIAL CONDITIONS: 6 TIE do	wws per	Siele.						
1	SINGLE WIDE (Inc. Tip-Out)	5. 🗌 AWI	NING OR CARPORT ,	. \$5					
2	DOUBLE WIDE	6. 🗆 ELEC	TRICAL	¥ 2					
3.	. EACH ADDITIONAL WIDTH \$15	7. 🗌 PLUM	ABING	*					
4.	. 🗆 CABANA	8. MEC	HANICAL						
	TOTA	CK CA	ASH M.O	. \$ 2500					
	ROVED BY: BORENSES	DATE ISSUE	PERMIT 7/	0-79					
Part '	I – Office Copy—White Part 2—Applicant—Canary Part 3—Inspector—Blue	Part 4—Au	uditorGreen Part	5—Local Government—G-rod					

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MOBILE HOME/MOBILE HOME ACCESSORY STRUCTURE INSTALLATION PERMIT APPLICATION

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BUILDING CODES DIVISION

PERMIT NO: MCC-147-79

COUNTY: CURRY

841
02-11-12
KON NK

APPLI	CANT TO COMPLETE NUMBERED SPACES ONLY:						
	Address of Proposed Mobile Home Installation:		*5 .	City		County	Zip
1.	SCUISET VIEW MOBILE HOME I	ARK SI	425	HARBIR	CURR	×	97415
	Directions to Mobile Home Installation:						
2.	SUNSET STRIP						
2		On Private Property		Yes 🕱 No	In a Mobile 5. Home Park		⊠ Yes □ No
3.	W/In City Limits Yes No 4.	rroperry			ne No.		<u> </u>
6.	C. EDWARD DEMPSEY				-2396		
X		City	1 . r . f	Pho	one No.	/ Bldr B	Reg. No.
7.	COAST TRAILER TOWNE 1647/1	hy her c	. (() 1,	31TY 20	= / - {- (- / - (-		
	Accessory-Installer Address	City		Pho	ene No.	Blar. b	3d. Reg. No.
8.							
9.	Describe Work: Install Mobile Home 🔽	10. Install	Awning	or Carport] 11. Instail	Cabana	
	* Date Inspection Is Requested	Manufac	cturer of M	obile Home	FESTIVAS	ze of Mobil	e Home
12.	APTEL 7-16-19	CARLRING	-16/1/7	EVACES CL. 160	'v ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	4X	6.6
13.							
	I HEREBY CERTIFY THAT I HAVE READ AND						
	CORRECT. ALL PROVISIONS OF LAW AND						
	WHETHER SPECIFIED HEREIN OR NOT. THE						
	CANCEL THE PROVISIONS OF ANY OTHER	STATE OR	LOCAL	AW REGULAT	ING MOBILE HO	WE 11/01	ALLATIONS.
			or	n 1261	del -		7/9/75
	Signature of Owner (Date)		01	Signatúre	of Dealer-Installer or	(Accessory-	Installer) (Date)
		NY DIFACE DO N	IOT WRITE I	SELOW THIS LINE:	Į.		
701			OT WRITE	Received		Date	
	ING APPROVAL: Required ☐ Yes						
SAN	TATION APPROVAL: Required Yes	☐ No		Received		Date	
PARK LICENSE NUMBER O							
Ν	UMBER	PARK	SPACES				
* CALL FOR INSPECTION: PHONE NO. TIEDOWNS REQUIRED Yes No							
SPEC	IAL CONDITIONS:	1 -00	1/5	1.10 021	C /		
		0/12	don	105 page	>14+,		
	SINGLE WIDE (Inc. Tip-Out)	\$25)	5. □ AWN	ING OR CARPO	RT	\$5
2.	DOUBLE WIDE	' /	*		TRICAL	tan a	
2.	EACH ADDITIONAL WIDTH .	\$15			BING		
, J.		\$15			ANICAL		-
4.	CABANA	# # DIO				. 31 8	7500
			TOTAL	CK) CA	SH M.O.	¥ 96 9	\$
ΔDDI	ICATION 677			DATE	PERMIT		
	OVED BY: DICKTORS	77		ISSUE	S 1	10	-79
	* 7	0			2		5) (85)
20							
	-Office CopyWhite Part 2—Applicant-Canary	Part 3—Inspecto	s:Blue	Part 4—Auc	litor—Green	Part 5-Lo	cal Government-G-red