

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: 146-79

COUNTY: CURRY

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:					
Address of Proposed Mobile Home Installation:	City	County	Zip		
1,	=======================================	D. S. A. Daves A.			
2. HUNTER CRX HTS (JUST PAST CLAY)	Legal Description if 2a. 37	14-18 7	12309		
Is Mobile Home 3. W/In City Limits Yes No 4. Property	☐ Yes ☐ No 5	In a Mobile . Home Park	☐ Yes ☐ No		
Owner Address Box Cont 7C	P- Phone		0		
Dealer-Installer Address City	Phone	No. B	ldr. Bd. Reg. No.		
7. KAUS M. A. GOLD Beach Accessory-Installer Address City	Phone	No. B	ldr. Bd. Reg. No.		
8.					
	ning or Carport	11. Install Caba	ina 🔲		
* Date Inspection Is Requested Manufacture 12. Manufacture	er of Mobile Home	Size of /	Mobile Home		
7 4 4	UT				
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 o	f Dealer-Installer or (Acces	sory-Installer) (Date)		
/	WALLE DE AM TIME LINE				
APPLICANT PLEASE DO NOT					
ZONING APPROVAL: Required Yes No	Received		Date		
ZONING APPROVAL: Required Yes No SANITATION APPROVAL: Required Yes No	Received Received		Date		
ZONING APPROVAL: Required Yes No	Received Received APPROVED		Date ERE MH		
ZONING APPROVAL: Required Yes No SANITATION APPROVAL: Required Yes No PARK LICENSE NUMBER OF A	Received Received APPROVED ACES	SPACE WHE WILL BE LC	Date ERE MH		
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		PERMIT NO	ncc-146-79.	
Mod)		COUNTY:	CURRY	
APPLICANT TO COMPLETE NUMBERED SPACES ONLY				
Address of Proposed Mobile Home Installation:		City	County Zip	
Directions to Mobile Home Installation: CN FCP 2- 2. HINTER (KK HTS / JUST PA	ND ON PEFF	Legal Description if on Private 2a. 37 -/4/-	18. 72 230g	
Is Mobile Home O 3 W/In City Limits Yes No 4. Pr	on Private Y	es 🗆 No 5. Hom	Mobile e Park 🔲 Yes 🗍 No	
6. JAA WINNING LAM Rt 1	BUX GUD BY	och, OR-	77-7-180 Bldr. Bd. Reg. No.	
Dealer-Installer Address 7. KASI-S M. H. Goi-D B.	end-	Phone No.		
Accessory-Installer Address 8.	City	Phone No.	Bldr. Bd. Reg. No.	
9. Describe Work: Install Mobile Home	0. Install Awning o	or Carport 🔲 🔝 11.	Install Cabana 🗌	
* Date Inspection Is Requested	Manufacturer of Mol		Size of Mobile Home	
12.	FURNA		34 X42	
10	1 - 1 - 1 - 1			
I HEREBY CERTIFY THAT I HAVE READ AND CORRECT. ALL PROVISIONS OF LAW AND CONTROL OF ANY OTHER CANCEL THE PROVISIONS OF ANY OTHER	ordinances gover Granting of A P	NING THIS TYPE OF NERMIT DOES NOT GIV	VE AUTHORITY TO VIOLATE OR	
Signature of Owner (Date) Or Signature of Dealer-Installer or (Accessory-Installer) (Date) APPLICANT PLEASE DO NOT WRITE BELOW THIS LINE:				
ZONING APPROVAL: Required Yes	□ No	Received		
			Date	
SANITATION APPROVAL: Required Yes	□ No	Received	Date	
	□ No NUMBER OF APPROPARK SPACES	Received		
PARK LICENSE	NUMBER OF APPRO	Received	Date SPACE WHERE MH WILL BE LOCATED	
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PARK LICENSE NUMBER * CALL FOR INSPECTION: PHONE NO. SPECIAL CONDITIONS: 1. SINGLE WIDE (Inc. Tip-Out) 2. DOUBLE WIDE	NUMBER OF APPROPARK SPACES \$25 \$40 \$15 \$15	Received TIEDOWNS REQU 5. AWNING OR 6. ELECTRICAL 7. PLUMBING 8. MECHANICAL	Date SPACE WHERE MH WILL BE LOCATED JIRED Yes No CARPORT \$5	
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