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-1416-79

COUNTY: CURRY

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

Address of Proposed Mobile Home Installation: | City | County | Zip

1.

2. Directions to Mobile Home Installation: ON TOP 2ND ON LEFT HUNTER CRK HTS (JUST PAST CLAY) | Legal Description if on Private Property 2a. 37-14-18 TL 2309

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: IDA WINNINGHAM | Address: Box 476C, RT 1 | City: GOLD Beach, Or | Phone No. 247-7480

7. Dealer-Installer: KARL'S M.H. | Address: GOLD Beach | City | Phone No. | Bldr. Bd. Reg. No.

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 | Manufacturer of Mobile Home: FLEETWOOD | Size of Mobile Home: 24 X 42

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.

☒ Ida Winningham or ☐ _____
Signature of Owner (Date) — 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	
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:

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	15
4. ☐ CABANA (Factory Built)	$15	8. ☐ MECHANICAL	
		TOTAL (CK) CASH M.O.	$ 55

APPLICATION APPROVED BY: [signature] DATE PERMIT ISSUED: 7-11-79

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

SP*79511-814

STATE OF OREGON
DEPARTMENT OF COMMERCE
BUILDING CODES DIVISION

7-18-79 Rod OK

MOBILE HOME/MOBILE HOME ACCESSORY STRUCTURE INSTALLATION PERMIT APPLICATION

WHEN APPROVED THIS APPLICATION IS YOUR PERMIT

PERMIT NO: MCC-1446-79

COUNTY: CURRY

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

Address of Proposed Mobile Home Installation: City County Zip

1.

Directions to Mobile Home Installation: ON TOP 2ND ON LEFT
2. HUNTER CK HTS (JUST PAST CLAY)

Legal Description if on Private Property
2a. 37-14-18 TL 2309

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: IDA WINNINGHAM, Address: Rt 1 Box 447C, City: GOLD Beach, Phone No. 247-7480

7. Dealer-Installer: KARL'S M.H., Address: GOLD Beach, City: , Phone No. , Bldr. Bd. Reg. No.

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: Manufacturer of Mobile Home: FUQUA; Size of Mobile Home: 24 X 42

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.

☒ Ida Winningham (Date) Signature of Owner or ☐ _____ (Date) Signature of Dealer-Installer or (Accessory-Installer)

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:

1. ☐ SINGLE WIDE (Inc. Tip-Out)	$25	5. ☐ AWNING OR CARPORT	$5
2. ☒ DOUBLE WIDE	$40	6. ☐ ELECTRICAL	
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4. ☐ CABANA (Factory Built)	$15	8. ☐ MECHANICAL	
		TOTAL (CK) CASH M.O.	$ 55

APPLICATION APPROVED BY: R. Ramsey

DATE PERMIT ISSUED: 7-11-79

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

SP*79511-814