



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-132-79
COUNTY: Curry

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

1. Address of Proposed Mobile Home Installation: <u>4 1/2 mile off Floras Mc road • Sandlois • Curry</u> City <u>Curry</u> County <u>Curry</u> Zip <u>97450</u>	
2. Directions to Mobile Home Installation: <u>End of Woodcuff Lane</u>	
Legal Description if on Private Property 2a. <u>T31S • R15W Sec 8 Part of tax lot 100</u>	
3. Is Mobile Home W/In City Limits <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4. On Private Property <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. In a Mobile Home Park <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
6. Owner <u>Joe Miller Kemp</u> Address <u>PO Box 621</u> City <u>Port Orford</u> Phone No. <u>332-2965</u>	
7. Dealer-Installer <u>Len's Home Sales</u> Address <u>Coos Bay</u> City <u>Coos Bay</u> Phone No. <u>269-1014</u>	
8. Accessory-Installer _____ Address _____ City _____ Phone No. _____ Bldr. Bd. Reg. No. _____	
9. Describe Work: Install Mobile Home <input checked="" type="checkbox"/> * Date Inspection Is Requested _____	10. Install Awning or Carport <input type="checkbox"/> Manufacturer of Mobile Home <u>Bendix</u>
	11. Install Cabana <input type="checkbox"/> Size of Mobile Home <u>24 x 56</u>
12. 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.	
13. <u>Joe Miller Kemp</u> <u>6/22/79</u> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Received <u>OK</u> Date _____
SANITATION APPROVAL: Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Received <u>OK</u> Date _____
PARK LICENSE NUMBER _____	NUMBER OF APPROVED PARK SPACES _____
SPACE WHERE MH WILL BE LOCATED _____	
* CALL FOR INSPECTION: PHONE NO. _____	TIEDOWNS REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No

SPECIAL CONDITIONS:

1. <input type="checkbox"/> SINGLE WIDE (Inc. Tip-Out) \$25	5. <input type="checkbox"/> AWNING OR CARPORT \$5
2. <input checked="" type="checkbox"/> DOUBLE WIDE <u>\$40</u>	6. <input type="checkbox"/> ELECTRICAL _____
3. <input type="checkbox"/> EACH ADDITIONAL WIDTH \$15	7. <input checked="" type="checkbox"/> PLUMBING <u>15</u>
4. <input type="checkbox"/> CABANA (Factory Built) \$15	8. <input type="checkbox"/> MECHANICAL _____
TOTAL <u>CK</u> CASH M.O. \$ <u>55</u>	

APPLICATION APPROVED BY: E. Braids - Secretary DATE PERMIT ISSUED: 6-22-79



Mack Arch

COUNTY OF CURRY

DEPT. OF ENVIRONMENTAL
SANITATION
CURRY COUNTY BOARD OF HEALTH
POST OFFICE BOX 1277
GOLD BEACH, OREGON 97444

June 11, 1979

Joe M. Kemp
Box 621
Port Orford, Oregon 97465

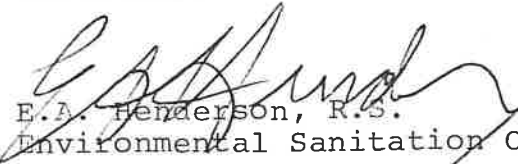
Dear Mr. Kemp,

An on-site investigation of the proposed mobile home site at the end of the Floras Lake road has shown that the existing system is satisfactory to hook up to the new mobile home.

However, it will be necessary that a mobile home set-up permit be secured prior to locating the mobile home on the property.

If you have any further questions, do not hesitate to contact us.

Cordially,


E.A. Henderson, R.S.
Environmental Sanitation Office

EAH:sll
file