

## 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-25-80

COUNTY:	au	ry
		/

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:								
Address of Proposed Mobile Home Installation:		City	County	Zip				
1. Colemans Cove Traver PAR	K SPACE 1	HAMBOR	Circi	ex 97415				
Directions to Mobile Home Installation:  Legal Description if on Private Property								
2. thiy 101		2a.						
10 11102110 1101110	On Private	Yes No	In a Mobile 5. Home Park					
	Tree feetings.							
6. O. H. ME FARLAND COLUMNS COME SPACE 1 HAMBOR 469-6197								
Dealer-Installer Address City Phone No. Bldr. Bd. Reg. No.								
Owner  6. O. H. M. FALLAVA  Colemans ave space I Hanson  Phone No.  Dealer-Installer  Address  City  Phone No.  Bldr. Bd. Reg. No.  7. CAL-ORE Hames RTIBOX 49 BROOKINGTORE 469-3611  Accessory-Installer  Address  City  Phone No.  Bldr. Bd. Reg. No.								
Accessory-Installer Address	City	Phon	e No. B	ldr. Bd. Reg. No.				
8. Steves M.H. Sin. Brokings of 461-5415								
			11. Install Caba					
* Date Inspection Is Requested	Manufacturer of I	Nobile Home	Size of /	Nobile Home				
12.	GUERDON	EMBASSY	24%	36				
13.								
I HEREBY CERTIFY THAT I HAVE READ AND	D EXAMINED THIS	APPLICATION AN	ND KNOW THE SAM	E TO BE TRUE AND				
CORRECT. ALL PROVISIONS OF LAW AND	ORDINANCES GOV	ERNING THIS TY	PE OF WORK WILL	BE COWPLIED WITH				
WHETHER SPECIFIED HEREIN OR NOT. THE CANCEL THE PROVISIONS OF ANY OTHER	CRANTING OF A	PERMIT DUES I	NOT GIVE AUTHORI	NSTALLATIONS.				
CANCEL THE PROVISIONS OF ANY OTHER	STATE OR LOCAL							
П	or		Bil Robert					
Signature of Owner (Date)		Signature	of Dealer-Installer or (Acces	ssory-Installer) (Date)				
APPLICA	NT PLEASE DO NOT WRITE	RELOW THIS LINE:						
ZONING APPROVAL: Required _ Yes		Received		Date				
SANITATION APPROVAL: Required [ Yes	No No	Received		Date				
PARK LICENSE	NUMBER OF APPE	ROVED	SPACE WHE					
NUMBER	PARK SPACE		WILL BE LC	CATED				
* CALL FOR INSPECTION: PHONE NO.		TIEDOWN	IS REQUIRED	Yes No				
SPECIAL CONDITIONS:								
1. SINGLE WIDE (Inc. Tip-Out)	\$25	5. 🗆 AWN	NG OR CARPORT	. \$5				
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2. DOUBLE WIDE	\$40	_	RICAL	. \$5				
2. DOUBLE WIDE	\$40 \$15	6.	RICAL	· · ·				
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