



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: MCC43-81

COUNTY: Curry

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

1. Address of Proposed Mobile Home Installation: <u>Harbor Hills MHP</u>		City	County <u>Curry</u>	Zip <u>97545</u>
2. Directions to Mobile Home Installation: <u>Space 8</u>		Legal Description if on Private Property 2a. <u>41-13-9D TL 2200</u>		
3. Is Mobile Home W/In City Limits <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4. On Private Property <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. In a Mobile Home Park <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6. Owner <u>Paul E Herzog</u>	Address <u>15765 Hwy 101 So</u>	City <u>SP12A</u>	Phone No.	Bldr. Bd. Reg. No. <u>Brookings</u>
7. Dealer-Installer	Address	City	Phone No.	Bldr. Bd. Reg. No.
8. Accessory-Installer	Address	City	Phone No.	Bldr. Bd. Reg. No.
9. Describe Work: Install Mobile Home <input checked="" type="checkbox"/>	10. Install Awning or Carport <input type="checkbox"/>	11. Install Cabana <input type="checkbox"/>		
* Date Inspection Is Requested	Manufacturer of Mobile Home	Size of Mobile Home <u>14 X 52</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.				
Signature of Owner <u>Paul E. Herzog</u> (Date)		Signature of Dealer-Installer or (Accessory-Installer) (Date)		

APPLICANT PLEASE DO NOT WRITE BELOW THIS LINE:

ZONING APPROVAL:	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Received	Date
SANITATION APPROVAL:	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Received	Date
PARK LICENSE NUMBER	NUMBER OF APPROVED PARK SPACES	SPACE WHERE MH WILL BE LOCATED	
* CALL FOR INSPECTION: PHONE NO.	TIEDOWNS REQUIRED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

SPECIAL CONDITIONS:

1. <input checked="" type="checkbox"/> SINGLE WIDE (Inc. Tip-Out)	\$25	5. <input type="checkbox"/> AWNING OR CARPORT	\$5
2. <input type="checkbox"/> DOUBLE WIDE	\$40	6. <input checked="" type="checkbox"/> ELECTRICAL	<u>10.00</u>
3. <input type="checkbox"/> EACH ADDITIONAL WIDTH	\$15	7. <input checked="" type="checkbox"/> PLUMBING	<u>15.00</u>
4. <input type="checkbox"/> CABANA (Factory Built)	\$15	8. <input type="checkbox"/> MECHANICAL	
TOTAL		<input checked="" type="radio"/> CASH	M.O. \$ <u>50.00</u>

APPLICATION APPROVED BY: Panel DATE PERMIT ISSUED: 5/8/81