



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

N. of LOT 15' 40-14-15

PERMIT NO: MC-229-77

COUNTY: Curry

APPLICANT TO COMPLETE NUMBERED SPACES ONLY:

1. Address of Proposed Mobile Home Installation:		City	County	Zip
1. <i>South of Cape Ferrero Rd. 1/2 mile 101. Box 2741 Harbor Ave.</i>				
2. Directions to Mobile Home Installation:				
2.				
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
Owner		Phone No.		
6. <i>Manary (Wm.R)</i>				
Dealer-Installer Address		City	Phone No.	Bldr. Bd. Reg. No.
7. <i>Stones Mobile Service</i>				
Accessory-Installer Address		City	Phone No.	Bldr. Bd. Reg. No.
8.				
9. Describe Work: Install Mobile Home <input 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
12.				
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.				
<input checked="" type="checkbox"/> <i>Virginia J. Manary</i>		or		<input type="checkbox"/>
Signature of Owner (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 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 type="checkbox"/> PLUMBING
4. <input type="checkbox"/> CABANA \$15	8. <input type="checkbox"/> MECHANICAL
TOTAL <u>CK</u> CASH M.O. \$ <u>40⁰⁰</u>	

APPLICATION APPROVED BY: <i>Bob Hill</i>	DATE PERMIT ISSUED: <u>10/31/77</u>
--	-------------------------------------

PLUMBING PERMIT APPLICATION

Jurisdiction of Curry County

Applicant to complete numbered spaces only.

JOB ADDRESS
Rd. South of Cape Ferris Rd. 1/2 mile from 101

1 LEGAL DESCR. LOT NO. BLK TRACT
15 40-14-15 SEE ATTACHED SHEET

2 OWNER MAIL ADDRESS ZIP PHONE
Wm Manary

3 CONTRACTOR MAIL ADDRESS PHONE LICENSE NO.

4 ARCHITECT OR DESIGNER MAIL ADDRESS PHONE LICENSE NO.

5 ENGINEER MAIL ADDRESS PHONE LICENSE NO.

6 LENDER MAIL ADDRESS BRANCH

7 USE OF BUILDING

8 Class of work: NEW ADDITION ALTERATION REPAIR

9 Describe work: Connect mobile home to ~~septic~~ septic tank & connect water

JOB ADDRESS
OWNER
Wm. Manary
Rd. South of Cape Ferris Rd. 1/2 mi. from 101

MCC-55P-77

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY PLANS CHECKED BY APPROVED FOR ISSUANCE BY
Bob Hill

PERMIT FEES		
No.	Type of Fixture or Item	Fee
	WATER CLOSET (TOILET)	\$
	BATHTUB	
	LAVATORY (WASH BASIN)	
	SHOWER	
	KITCHEN SINK & DISP.	
	DISHWASHER	
	LAUNDRY TRAY	
	CLOTHES WASHER	
	WATER HEATER	
	URINAL	
	DRINKING FOUNTAIN	
	FLOOR--SINK OR DRAIN	
	SLOP SINK	
	GAS SYSTEMS: NO. OUTLETS	
/	WATER PIPING & TREATING EQUIP.	5 00
	WASTE INTERCEPTOR	
	VACUUM BREAKERS	
	LAWN SPRINKLER SYSTEM	
/	SEWER	10 00
	CESSPOOL	
	SEPTIC TANK & PIT	
	PERMIT	\$
	TOTAL FEE	\$15 00

NOTICE

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Virginia J. Manary
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)

SIGNATURE OF OWNER (IF OWNER BUILDER) (DATE)

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

INSPECTION REPORTS

DATE	ITEM	REMARKS	INSPECTOR

USE SPACE BELOW FOR NOTES, FOLLOW-UP, ETC.

NEW
 ADDITION
 ALTERATION
 REPAIR

Describe work: *General plumbing work to hot water tank + vent pipe*
 Date of work:

No.	Type of fixture or item	Permit Fee
	WATER CLOSET (TOILET)	
	BATHUB	
	LAVATORY (WASH BASIN)	
	SHOWER	
	KITCHEN SINK & DISH.	
	DISHWASHER	
	LAUNDRY TRAY	
	CLOTHES WASHER	
	WATER HEATER	
	URINAL	
	DRINKING FOUNTAIN	
	FLOOR SINK OR DRAIN	
	SLOP SINK	
	GAS SYSTEMS: NO. OUTLETS	
	WATER TRING & TREATING EQUIP.	
	WASTE INTERCEPTOR	
	VACUUM BREAKERS	
	LAWN SPRINKLER SYSTEM	
	SEWER	
	CESSPOOL	
	SEPTIC TANK & PIT	
	PERMIT	
	TOTAL FEE	

NOTICE
 I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE DRAWING OR A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER CODES, ORDINANCES, LAWS, OR CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Inspector: *[Signature]*
 Date:

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT
 PERMIT VALIDATION CASH M.O. CK M.O. CK M.O. CK