

I agree _____

CITY OF NEWPORT

Community Development Dept. 169 SW Coast Hwy Newport, OR 97365 (541) 574-0629 (541)574-0644 Fax

Office Use Only

Permit #:

INSP: BuildingPermits.Oregon.gov or phone: 1-888-299-2821

MANUFACTURED HOME PERMIT APPLICATION

Applications may be obtained online at:

vww.newportoregon.gov/business/formsAppsPermits.asp	CATEGORY OF CONSTRUCTION			
. Job Information (where work is taking place)	Manufactured Dwelling New			
Job Site Address:	OTHER TYPES OF WORK			
Subdivision/Park Name:	For work defined as addition, alteration, or repair, see the			
. Owner's Name:	Residential Building Permit Application. REQUIRED DATA			
Full Mailing Address:	Manufactured Home permit: One single permit is assessed to cover the placement of the manufactured dwelling, earthquake			
City/State/Zip:				
Phone #" Email:	resistant bracing systems, plumbing connection including 3			
. Applicant Information (owner or authorized agent)	feet each of sewer & water lines, electrical feeder connection and mechanical connection.			
O Mark if same as owner O Mark if same as contractor				
N. CA. B	Associated Permits: The manufactured home permit does not include an electrical service. Garages/carports: fees for thes			
Name of Applicant:	accessory structures are based on the value of the wor			
Full Mailing Address:	performed. A separate structural permit is required for garages/carports associated with manufactured homes.			
City/State/Zip:	88,			
Phone #: Email:	JOB VALUATION:			
. Contractor Information (person/company performing the work)	Placement is:Inside Park Outside Park			
Name of Contractor:				
Full Mailing Address:	Type of Construction:			
City/State/Zip:	Square Footage:			
Phone #: Email:				
OR CCB # (Req'd):				
City Business License # (Req'd):				
. Contact Person (receives building permit correspondence)	NOTICE			
same as: O owner O contractor O applicant	EXPIRATION OF APPLICATION: This application expires if			
	permit is not obtained within 180 days after it has bee accepted as complete, and a permit becomes null & void if th			
Name of Person:	authorized work is suspended for a period of 180 days at ar			
Full Mailing Address:	time after work is commenced.			
City/State/Zip:				
Phone #: Email:				
Project Description:				

Copyright Release: I hereby grant permission to the City of Newport to replicate, scan and post to the internet, in whole or part, drawings & all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the City's regulatory, administrative,

By attaching my signature below, I certify herein that I have read, understood, and confirm all the statements listed above & throughout the application form.

and legal functions, including sharing of information with other governmental entities and members of the general public.

Authorized Signature:

[Page 1 of 2]

Date: _____

		THE FOLLOWING ITEMS ARE REQUIRED FOR PLAN REVIEW	Yes	No	N/A
1.		Two (2) copies of plot plan drawn to scale on minimum size of 11" x 17" which includes the following:			
	A.	Building footprint & roof line, decks, and landings			
	В.	North arrow, scale, lot dimensions, setbacks, & all public &/or all private easements			
	C.	Ground slope direction(s), elevations at all property corners & building corners, finish floor elevation, & elevation of			
		top of curb or edge of pavement at frontage corners. May not apply to parks.			
	D.	Location, size, material & minimum slope of rain drains & underfloor/footing drain			
	E.	Existing public & private utilities located on property, such as water meter, electric meter pedestal, sanitary services,			
		manholes, water valves, ditches, etc.			
	F.	Driveway & sidewalk location & layout, including maximum driveway slope			
GARAGE/CARPORT: Provide two (2) copies of all information in this section:					
2.		Foundation/floor framing plan each floor (slab, post & beam, or joists w/size & spacing)			
3.		Ceiling/roof framing plan or truss layout with reactions			
4.		Mfd. Home manufacturer's cut sheet for garage roof attachment			
	A.	If plans are deferred, must be noted in the submittal package			
5.		Floor plan with room IDs to include location & size of underfloor & attic access			
6.		Window sizes, header sizes			
7.		Electric layout			
8.		Complete building sections – special sections			
9.		Construction details (i.e.: structural members, sheathing, roofing, bracing, dimensions, etc.)			
10.		Engineering for special conditions (building designs) to be transferred to plans			
MANUFACTURED HOME: Provide two (2) copies of all information in this section:					
11.		Footing & construction details for exterior porches, decks, roofs			
12.		Floor plan with options indicated			
13.		Gas appliances? (Mechanical permit required)			
14.		Skirting detail – skirting material to be used			
15.		Foundation: runners, slab, pier block detail plan			
FEE CHART					
Manufactured Dwelling Placement Permit Fee (includes plan review)					\$ 160.00
Earthquake-Resistant Bracing System Installation Permit Fee (if applicable = \$110.00)					
Manufactured Dwelling & Cabana Fee (req'd by State of OR)					\$ 30.00
State Surcharge (12% of placement permit fee, also req'd by State of OR)					\$ 19.20
	Total Permit Fees				