



CITY OF EDGEWOOD
 2224 104th Avenue East
 Edgewood, WA 98372-1513
 (253) 952-3299 Fax (253) 952-3537

Project #: _____
Tracking #: _____

MANUFACTURED/MOBILE HOME DEMO/REMOVAL PERMIT APPLICATION

All sections of this application and plans must be complete in order to be accepted for plan review.
 Applications will not be accepted through the mail or facsimile.

Project Name/Occupant:	Value of Construction:
Site Address: _____ City, State & Zip _____	Parcel Number: _____
Property Owner:	Phone: _____
Street Address: _____ City, State & Zip _____	Fax: _____
Contractor:	Phone: _____
Street Address: _____ City, State & Zip _____	Fax: _____
Contact Person:	Phone: _____
Street Address: _____ City, State & Zip _____	Fax: _____

All information in this section must be provided.

Description of Work: _____

Make: _____ Model: _____ Year Built: _____

VIN or Serial Number: _____ Length: _____ Width: _____

Building Owner/Authorized Agent: If the applicant is other than the owner, registered architect/engineer, or contractor licensed by the state of Washington, a notarized letter from the property owner authorizing the agent to submit this permit application and obtain the permit will be required as a part of this submittal.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE UNDER PENALTY OF PERJURY BY THE LAWS OF THE STATE OF WASHINGTON, AND I AM AUTHORIZED TO APPLY FOR THIS PERMIT.	
Signature: _____	Date: _____
Print Name: _____	Phone: () _____

Expiration of Application: Applications for which no permit is issued within 180 days following the date of application shall expire by limitation. Prior to expiration, the building official may grant an extension for a period not exceeding 180 days upon written request by the applicant as defined in Chapter 15.05.050/15.05.60 Edgewood Municipal Code. No application shall be extended more than once.

STAFF USE ONLY:
 Date Application Accepted: _____ Date Application Expires: _____

**ALL MANUFACTURED/MOBILE HOME DEMO/REMOVAL APPLICATIONS
MUST BE SUBMITTED WITH THE FOLLOWING:**

- THREE (3) COMPLETE SETS OF PLANS.
- ALL DRAWINGS SHALL BE AT A LEGIBLE (1=20/30) SCALE AND NEATLY DRAWN.
- PUGET SOUND CLEAN AIR NOTICE OF INTENT. CALL (253) 596-3800 OR www.pscleanair.org FOR INFORMATION.
- PROVIDE VERIFICATION THAT PROPERTY TAXES HAVE BEEN PAID IN FULL. CONTACT PIERCE COUNTY ASSESSOR TREASURER'S OFFICE AT (253) 798-7126 OR www.piercecounty.org/atr.