



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

Project #: _____
Tracking #: _____

MANUFACTURED HOME 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	Work:
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: _____

 bedroom
 Make: _____ Model: _____ Year Built: _____
 VIN or Serial Number: _____ Length: _____ Width: _____
 # of Bedrooms _____ # of Baths _____ # of Fire Places _____ Type of Heat _____

Building Owner/Authorized Agent: If the applicant is other than the owner, registered architect/engineer, or contractor licensed by the Washington State, 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 RESIDENTIAL BUILDING PERMIT APPLICATIONS MUST BE SUBMITTED WITH THE FOLLOWING:

- TWO (2) COMPLETE SETS OF PLANS.
- DRAWINGS PREPARED BY A REGISTERED ARCHITECT OR PROFESSIONAL ENGINEER MAY BE REQUIRED BY THE BUILDING OFFICIAL.
- ALL DRAWINGS SHALL BE AT A LEGIBLE SCALE AND NEATLY DRAWN.
- BUILDING SITE PLANS AND UTILITY PLANS ARE TO BE COMBINED.

PLEASE COMPLETE THE FOLLOWING CHECKLIST:

N/A SUBMITTED

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Copy of recorded Legal Description from Pierce County. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3 Site Plans Containing: <ol style="list-style-type: none">1. North arrow and scale.2. Property lines, dimensions, setbacks, names of adjacent roads, any proposed or existing easements.3. Proposed access road.4. Driveway location - driveway shall be 15' wide minimum and must have an unobstructed vertical clearance of 13 feet 6 inches minimum. If driveway is over 150' long, it must have an approved emergency vehicle turnaround.5. Existing fire hydrant location.6. Estimated/proposed topography at 2' intervals and proposed elevation of lowest floor level.7. Identify location of sensitive areas; slopes 20% or greater, wetlands, watercourses and their buffers. |
| <input type="checkbox"/> | <input type="checkbox"/> | Certificate of water/fire flow availability. |
| <input type="checkbox"/> | <input type="checkbox"/> | Tacoma-Pierce County Health Department approval for septic system. |
| <input type="checkbox"/> | <input type="checkbox"/> | Foundation plan and details. |
| <input type="checkbox"/> | <input type="checkbox"/> | Floor plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | Roof plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | Building elevations (all views). |
| <input type="checkbox"/> | <input type="checkbox"/> | Building height. |
| <input type="checkbox"/> | <input type="checkbox"/> | Building cross-section. |
| <input type="checkbox"/> | <input type="checkbox"/> | Washington State Residential Energy Code Data (Gas/Electric/Oil/Propane/Heat Pump). |
| <input type="checkbox"/> | <input type="checkbox"/> | A copy of Washington State Department of Labor and Industries Valid Contractor's License. If no contractor has been selected at the time of application, a copy of this license OR an "Affidavit in Lieu of Contractor Registration" form will be required before the permit is issued. |