

DEPARTMENT USE ONLY

Permit App. No. _____
Date Received _____
Date Forwarded _____
Date Returned _____

Date Issued _____
Zoning Approved by or N/A _____
Flood Plain Approved by or N/A _____
OMHC Seal Number _____

PERMIT APPLICATION FOR MANUFACTURED HOME INSTALLATION

SITE ADDRESS: _____ County: _____ Township: _____

LOT #: New Home? Used Home? Private Property? Park? Name: _____

ZONING DISTRICT APPROVAL: YES NO N/A FLOOD PLAIN ZONE: YES NO Map # _____

LAND OWNERS NAME: _____ TELEPHONE: _____

HOME OWNERS NAME: _____ TELEPHONE: _____

FOUNDATION WORK: _____ INSTALLER'S LICENSE NO. _____

NAME: _____ ADDRESS: _____

TELEPHONE: _____ FAX: _____ CELLULAR: _____

E-MAIL ADDRESS: _____

SET CREW WORK: _____ INSTALLER'S LICENSE NO. _____

NAME: _____ ADDRESS: _____

TELEPHONE: _____ FAX: _____ CELLULAR: _____

E-MAIL ADDRESS: _____

OTHER INSTALLERS OR CONTRACTORS: _____ SCOPE OF WORK: _____

INSTALLERS LICENSE OR CONTRACTOR(S) REGISTRATION No. _____

NAME: _____ ADDRESS: _____

TELEPHONE: _____ FAX: _____ CELLULAR: _____

E-MAIL ADDRESS: _____

APPLICANT: (circle) - retailer, park operator, home/land owner, installer, or other _____

NAME: _____ ADDRESS: _____

TELEPHONE: _____ FAX: _____ CELLULAR: _____

E-MAIL ADDRESS: _____

PURCHASED FROM: (circle) - retailer, park owner, private sale

NAME: _____ ADDRESS: _____

TELEPHONE: _____ FAX: _____ CELLULAR: _____

E-MAIL ADDRESS: _____

DESIGN PROFESSIONAL:

ARCHITECT ENGINEER _____ REGISTRATION No.: _____

NAME: _____

E-MAIL ADDRESS: _____

TELEPHONE: _____

BUILDING CONSTRUCTION AREA (List the square footage in the appropriate section below)

NOTE: OMHC is not the permitting agency for basements, garages, decks (greater than 9 sq. ft.), or for any other construction not included in the OMHC installation standards. You must contact the local authority having jurisdiction.

Total square feet of living area: _____ Crawl space: _____ Basement: _____ Garage/carport: _____ Decks/other: _____

BUILDING INFORMATION

OF ROOMS: _____ # OF BEDROOMS: _____ SECOND FLOOR? YES NO HINGED ROOF? YES NO

MANUFACTURED HOME DESIGN CRITERIA

- Home Dimensions _____ x _____
- Basement Dimensions _____ x _____
- Crawl Space Dimensions _____ x _____
- Footer Dimensions _____ x _____
- Block (max 3 courses, reinforced & grouted)
- Block ACI 318, BIA Eng. Brick Masonry

- Block NCMA TR-68A ACI/ASCE 530
- Poured Concrete (8" wide with footer)
- Poured Concrete (12" wide without footer)
- Anchor System Type: _____
- TRANSVERSE I-Beam Foundation
- Preimeter Load-Bearing Wall Foundation
- Slab or Runner Foundation
- Soil bearing capacity: _____ per square feet
Tested by: _____ Date: _____

- Manufacturer's Foundation Drawing with Footing Location and Sizes Indicated on the Drawing
OR
Manufacturer's Foundation Drawing with footing locations only and footing size indicated. Provide a copy from the OMHC Installation Standards.

- Ohio Design Professional's drawing with footing locations and sizes indicated. Ohio Architect's and Professional Engineer's may design slabs, runners, etc.

- Foundation drawing to scale with footing locations and footing size indicated. Provide a copy from the OMHC Installation Standards.

ELECTRICAL for manufactured homes;*(Inspections include only work related to installation)*Service on: HOME POLE Service size: _____ Service wire size: _____**MANUFACTURER:** *(possible verification at later date)*

Name: _____

HUD No.(s) _____

Serial No. _____

CERTIFICATION (Read all sections carefully before signing, and attach any drawings and/or supporting documents)

ALL PERMITS SHALL EXPIRE 180 DAYS FROM THE DATE OF ISSUE. 180 DAY EXTENSIONS MAY BE GRANTED IF REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED.

I FULLY UNDERSTAND THAT NO EXCAVATION, INSTALLATION, ELECTRICAL OR MECHANICAL INSTALLATION, OR ALTERATION OF THIS MANUFACTURED HOME, OR PART THEREOF SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE AUTHORITY HAVING JURISDICTION. I FURTHER UNDERSTAND THAT NO PERSON, FIRM OR CORPORATION SHALL INSTALL, OCCUPY, OR PERMIT OCCUPANCY OF THE ABOVE IN CONFLICT WITH OR IN VIOLATION WITH CHAPTER 4781 OF THE OMHC RULES.

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the OMHC certified inspector and ESI shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the OMHC Rule(s) applicable to such permit.

Governmental agencies, other than OMHC and utility companies have rules and policies regulating the placement of utility service lines in relation to the manufactured home. The issuance of permits and the performance of inspections do not constitute the placement of utility lines under such rules and policies. It is the sole responsibility of the owner and the owner's agent to determine and comply with applicable rules and policies of other governmental agencies and utility companies. For information, contact the appropriate utility company.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

SIGNATURE OF APPLICANT:

DATE:

PRINT NAME:

 HOLD/DATE: _____ INCOMPLETE COMPLETE

REASON:

 PARTIALLY APPROVED APPROVED DISAPPROVED

BUILDING OFFICIAL: _____ / /

PLANS EXAMINER: _____ / /