

107 - 5th Street, Gold Bar, WA 98251

MANUFACTURED HOME SITING APPLICATION AND INSTRUCTIONS

This checklist is provided as a guide for the items required to be submitted for permitting the types of projects listed. Please be aware the city staff, planners or inspectors may require additional information beyond the items list below.

All information BELOW is required for this type of project. Applications submitted with missing or incomplete information will not be accepted.

•	71 1 7 11		0 1					
Mobile Home Siting								
Completed Application	MANUFACTUR	ED STRUCTURE:						
2 Copies of Site Plan								
Including existing structures, existing septic, drainfield,	Owners Est. of Job Valuation: Revised							
reserve, raindrain location and	I	ront)			
addition location. Include dimensions from all property) (Side						
lines, structures and septic		GHT:						
system.		OR ELEVATION: _			A FOR PARKS)			
Setbacks (Site must be stacked). 2 Copies of Mobile Floor		S:						
Plan.		STRUCTION:			_			
2 Copies of approved	#OF DWELLING	G UNITS:						
septic/drainfield plan. (Parks exempt)	TYPE OF HEATING SYSTEM:							
Copy of Valid Installer's	INDOOR AIR SYSTEM:							
License Copy of Valid	LOT DIMENSIONS:							
Contractor's License.	BUILDING DIMENSIONS:							
The City of Gold Bar Municipal adopted the Washington State Code and Uniform Mechanical SNOW LOAD: 25 lbs.	Building Code, U Code. The follow	niform Building C ving are design m	Code, Uniform P inimums for the	lumbing Co City of Gol	de, Uniform Fi d Bar:			
Site Address or Property								
Size of Site (acre/square f	eet):	Area Zon	ed: Commerc	al Res	idential			
Snohomish County Asses	ssor's Tax Parc	el Number (14 d	ligits)					
Septic Approval Date (if red	quired)							
PAGE Application Co	omplete	Official Use Only	Date Received					

Manufactured Home CONTRACTOR, OWNER INFORMATION

Plan Check Fee \$

PAGE 2 OF 2 **Building Inspector**





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Received By:

Accepted/Denied

Applicant / Contractor:		Contractor Lic. #:				
		Printed Name:				
Mailing Address:						
City:						
Phone:	Fax:	Em	ail:			
Property Owner:						
		Printed Name:				
Mailing Address:						
City:						
Phone:	Fax:	Em	ail:			
2nd Property Owner:**Signature						
Mailing Address:						
City:						
Phone:						
* Applicant / Agent: By your true and correct and that you	signature above, you	herby certify that th	e information submitte	ed on this applicantion is		
* Applicant / Agent: By your	signature above, you u are authorized by th r signature above, you	herby certify that the ne property owner(s) u herby certify that y	e information submitte to take action on the	ed on this applicantion is ir behalf.		
* Applicant / Agent: By your true and correct and that you ** Property Owners: By your agent to make applications o	signature above, you u are authorized by the r signature above, you on behalf for this application in conformance with laws, and permit applicant, not to oplicable codes have been	therby certify that the property owner(s) to herby certify that y lication. BE COMPLETED Elling Department and ensist, rules and regulations of the City. The approval of met. All plans submitted	e information submitted to take action on the sou have authorized the sure that the required inspert the City of Gold Bar. The f construction plans and sou to the City become publication to the City become publication.	ed on this applicantion is ir behalf. The above applicant and/or applicant and/or applicant and/or applicant and/or applicant and/or applicant and are available for ir behalf applicant and/or applicant app		

Receipt#:

Date