



City of Umatilla

Building Division

700 6th St

Umatilla, OR 97882

epermitting@umatilla-city.org

(541) 922-3226 x114 Fax (541) 922-5758

MANUFACTURED HOME PERMIT APPLICATION	
DEPARTMENT USE ONLY	
Permit No:	
Date Issued:	By:

WORK SITE LOCATION:

STREET ADDRESS OF WORK SITE:
LOT NUMBER AND SUBDIVISION NAME:
TYPE OF WORK:
<input type="radio"/> New (separate residential permit application required for garage/carport) <input type="radio"/> Replacing
PROJECT DESCRIPTION:
PROJECT INFORMATION:
<input type="radio"/> Inside park <input type="radio"/> Outside park

FEES:

Permit fees (paid at issuance)	
A) Manufactured dwelling placement permit fee	\$400.00
B) Manufactured dwelling fee required by State	\$30.00
C) State Surcharge (12% of Line A)	\$48.00
D) Technology Fee (2% of Line A)	\$8.00
Total Fees \$	\$486.00

** Includes the concrete slab, runners or foundations that are prescriptive, electrical feeder and plumbing connections and all cross-over connections and up to 30 lineal feet of site utilities. Decks, other accessory structures, and foundations that are not prescriptive, utility connections beyond 30 lineal feet, new electrical services or additional branch circuits, and new plumbing - may require separate permits. All decks 30" above ground, carports, garages, porches, and patios are based on valuation and may also require separate permits.*

CREDIT CARD INFORMATION:	
<input type="radio"/> VISA <input type="radio"/> MASTERCARD	Amount\$
Credit Card number:	
Exp:	CCV:
Cardholder Name:	
Cardholder Signature:	
Billing address:	

PEOPLE INFORMATION:

APPLICANT:		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
PROPERTY OWNER:		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
CONTRACTOR INSTALLATION		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:		City Lic No.:
REQUIRED DOCUMENTS FOR APPLICATION		
I have downloaded and reviewed the plans and documents Checklist (Initials): _____		
SUBMITTAL METHOD FOR PLANS AND DOCS		
<input type="radio"/> Paper (2 copies) <input type="radio"/> Electronic <input type="radio"/> Not applicable		

Notices

Expiration of application: This application is valid for 180 days after it has been accepted as complete.

Inspections required: Approved city inspections must be completed before the work performed is enclosed.

Terms and conditions

Correct information: I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Copyright release for government entities: I hereby grant permission to the City of Umatilla to copy, in whole or part, drawings and 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, and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the City of Umatilla, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

Owner installation: This installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. OAR 479.540(1) and 479.560(1).

Owner permission: I have the legal right or permission from any property owner whose property is affected by the work covered under this permit to: 1) enter the property; 2) perform the work covered under this permit; 3) leave structures on or in the affected property. The issuance of this permit shall not be construed as permission or a grant of a legal right to enter upon or remain on any property affected by the work covered under this permit.

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

I agree (initials): _____

Authorized Signature: _____ **Print Name:** _____ **Date:** _____