



# MANUFACTURED HOME SUBMITTAL REQUIREMENT CHECKLIST

## CROOK COUNTY COMMUNITY DEVELOPMENT

300 NE 3<sup>RD</sup> Street, Room 12, Prineville, OR 97754

Phone: (541) 447-3211 - Fax: (541) 416-2139 - [www.co.crook.or.us](http://www.co.crook.or.us) - [BLD@co.crook.or.us](mailto:BLD@co.crook.or.us)

**Use the following checklists to ensure all necessary information has been provided. Failure to submit all requirements will result in plan review delays for your project and your application for plan review may be denied. Check each applicable box.**

**Contact Name:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Site Address:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

### Staff      Applicant

- Completed application;** All information must be entered if applicable.
- Site map;** Must include the distance in feet (ft) for the following:
  - Water line from proposed structure to source.
  - Sewer line from proposed structure to source.
  - Electrical source and disconnect.
  - Gas line from proposed structure to source.
  - Setback from structure to property lines.
  - From proposed structure to any other structures on property
    - If placed in a MH Park, check with staff for setback requirements.
  - Length and width of proposed structure.

- Floor plan for structure:**
  - Identify all rooms, electrical panel, water/sewer line hook up locations

### ADDITIONAL APPLICATIONS REQUIRED, IF APPLICABLE:

- Electrical application is required:**
  - For electrical service to the property
  - If existing power to property has been disconnected previously.
  - If electrical service to property is over 30ft from the proposed structure.
- Plumbing application:** Required if water or sewer source is over 30ft from the proposed structure.
- Mechanical application:** Required for any gas hook-ups and any exterior fixtures (e.g., A/C unit, Heat pump, etc.)
- If property is in a flood plain, an initial flood elevation must be submitted.**
- Address application:** Required for new development within city limits.

The following applicant or agent has reviewed and completed this application packet and affirms all requirements have been met for application submittal.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Verified by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Staff Signature)



**MANUFACTURED HOME APPLICATION**  
**CROOK COUNTY COMMUNITY DEVELOPMENT**  
 300 NE THIRD STREET RM 12 PRINEVILLE, OR 97754  
 PH: (541) 447-3211 EMAIL: bld@co.crook.or.us  
**Permits expire if work is not started within 180 days of  
 issuance or if work is suspended for 180 days**

**Application Submittal Date**  
*OFFICE USE ONLY*

**FOR OFFICE USE ONLY**

Planning Approval #:	Septic Permit #:	
SDCs / Parks & Rec: Yes / No	Flood Zone: Yes / No	Flood Certificate required: Yes / No
Permit #: <b>217-</b>		

**JOBSITE INFORMATION**

Address (include Spc #):	City:	St:	Zip:
	Tax/Map #:		
Subdivision:	Are fire sprinklers required in your subdivision?		
Property Owner:	Phone:		
Mailing Address:	<b>If in a MH park:</b>		
	Park owner name:		
E-mail:	Phone # for park contact		

**APPLICANT INFORMATION**

Name:	Phone #:
Address:	E-mail:

**MANUFACTURED HOME DESCRIPTION AND INFORMATION**

Make:	Dimensions:	Year:
Model:	# of yard hydrants?	Backflow device? Yes / No
Type of foundation (e.g., Runners, slab, footing, etc.):		
Water line length (from source to home in ft.):	Is propane or natural gas required? Yes / No	
Water source (City, well, etc.)?	<input type="checkbox"/> Propane (LPG) <input type="checkbox"/> Natural Gas (CNG)	
Sewer line length (from home to connection in ft.):	Distance from electrical service to home in ft.:	
Purchase Price of home:	Is this home for sale/lease/rent <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If the answer to the question above is yes, you cannot be your own contractor per ORS 479.540</b>		

**CONTRACTOR INFORMATION**

General Contractor:	CCB #:
Address:	Phone #:
E-mail:	

**SUB-CONTRACTOR INFORMATION**

<b>Manufactured Dwelling Installer:</b>	<b>MDI #:</b>
<b>Address:</b>	<b>Phone #:</b>
<b>E-mail:</b>	
<b>Plumbing Contractor:</b>	<b>CCB #:</b>
<b>Address:</b>	<b>BCD #:</b>
<b>E-mail:</b>	
<b>Electrical Contractor:</b>	<b>CCB #:</b>
<b>Address:</b>	<b>BCD #:</b>
<b>E-mail:</b>	
<b>Signing Supervisor:</b>	<b>License #:</b>
<b>Mechanical Contractor:</b>	<b>CCB #:</b>
<b>Address:</b>	
<b>E-mail:</b>	
<b>Propane (LPG) installation must be done by a certified installer.</b>	
<b>LPG Installer:</b>	<b>LPG License #:</b>

**AUTHORIZING SIGNATURE**

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction shall conform to the regulations in the Building Code, the Zoning Ordinance, and all other codes and regulations or private building restrictions, if any, which may be imposed on the above property by deed. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. I understand that the Building Official reserves the right to enter the construction premises at will during reasonable working hours. Furthermore, I understand that should I decide to withdraw my application prior to issuance of a permit, I will be charged any applicable administrative fees.

<b>Applicant's Printed Name:</b>	
<b>Applicant's Signature:</b>	<b>Date:</b>

**CONTACT FOR ISSUANCE IF DIFFERENT FROM ABOVE**

<b>Name:</b>	<b>Phone #:</b>
<b>Email:</b>	



# Information Notice to Owners About Construction Responsibilities

(ORS 701.325 (3))

Homeowners acting as their own general contractors to construct a new home or make a substantial improvement to an existing structure, can prevent many problems by being aware of the following responsibilities:

- Homeowners who use labor provided by workers not licensed by the Construction Contractors Board, may be considered an employer, and the workers who provide the labor may be considered employees. **As an employer, you must comply with the following:**
- **Oregon's Withholding Tax Law:** Employers must withhold income taxes from employee wages at the time employees are paid. You will be liable for the tax payments even if you don't actually withhold the tax from your employees. For more information, call the Department of Revenue at 503-378-4988.
- **Unemployment Insurance Tax:** Employers are required to pay a tax for unemployment insurance purposes on the wages of all employees. For more information, call the Oregon Employment Department at 503-947-1488.
- **Oregon's Business Identification Number (BIN):** is a combined number for both Oregon Withholding and Unemployment Insurance Tax. To file for a BIN, go online to the Oregon Business Registry. For questions, call 503-945-8091.
- **Workers Compensation Insurance:** Employers are subject to the Oregon Workers Compensation Law, and must obtain Workers Compensation Insurance for their employees. If you fail to obtain Workers Compensation Insurance, you could be subject to penalties and be liable for all claim costs if one of your workers is injured on the job. For more information, call the Workers Compensation Division at the Department of Consumer and Business Services at 800-452-0288.
- **Tax Withholding:** Employers must withhold Social Security Tax and Federal Income Tax from employee wages. You may be liable for the tax payment, even if you didn't actually withhold the tax. For a Federal EIN number, go online to [www.irs.gov](http://www.irs.gov).

## Other Responsibilities of Homeowners:

- **Code Compliance:** As the permit holder for a construction project, the homeowner is responsible for notifying building officials at the appropriate times, so that the required inspections can be performed. Homeowners are also responsible for resolving any failure to meet code requirements that may be found through inspections.
- **Property Damage and Liability Insurance:** Homeowners acting as their own contractors should contact their insurance agent to ensure adequate insurance coverage for accidents and omissions, such as falling tools, paint overspray, water damage from pipe punctures, fire, or work that must be redone. Liability Insurance must be sufficient to cover injuries to persons on the job site who are not otherwise covered as employees by Workers Compensation Insurance.
- **Expertise:** Homeowners should make sure they have the skills to act as their own general contractor, and the expertise required to coordinate the work of both rough-in and finish trades.

**CONSTRUCTION CONTRACTORS BOARD**

PO Box 14140, Salem, OR 97309-5052

Telephone: 503-378-4621 – Fax: 503-373-2007

Website Address: [www.oregon.gov/ccb](http://www.oregon.gov/ccb)

# Property Owner Statement Regarding Construction Responsibilities

Oregon Law requires residential construction permit applicants who are not licensed with the Construction Contractors Board to sign the following statement before a building permit can be issued. (ORS 701.325 (2))

**This statement is required for residential building, electrical, mechanical, and plumbing permits. Licensed architect and engineer applicants, exempt from licensing under ORS 701.010 (7), need not submit this statement. This statement will be filed with the permit.**

Please check the appropriate box:

I own, reside in, or will reside in the completed structure and my general contractor is:

\_\_\_\_\_

Name

\_\_\_\_\_

CCB#

\_\_\_\_\_

Expiration Date

I will inform my general contractor that all subcontractors who work on the structure must be licensed with the Construction Contractors Board.

or

I will be performing work on property I own, a residence that I reside in, or a residence that I will reside in. If I hire subcontractors, I will hire only subcontractors licensed with the Construction Contractors Board. If I change my mind and hire a general contractor, I will select a contractor who is licensed with the CCB and will immediately give the name of the contractor to the office issuing this Building Permit.

**I have read and understand the Information Notice to Homeowners About Construction Responsibilities, and I hereby certify that the information on this homeowner statement is true and accurate.**

\_\_\_\_\_  
Print Name of Permit Applicant

\_\_\_\_\_  
Signature of Permit Applicant

\_\_\_\_\_  
Date

Permit #: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Issued by: \_\_\_\_\_ Date: \_\_\_\_\_





**Community Development - Building Department**

300 NE 3rd Street, Prineville, OR 97754

Phone: (541) 447-3211 Fax: (541) 416-2139

Email: bld@co.crook.or.us Website: www.co.crook.or.us

**AUTHORIZATION FORM**

Let it be known that \_\_\_\_\_  
(Print name clearly)

has been retained to act as my authorized agent to perform all acts for development on my property noted below. These acts include: Pre-application conference, filing applications, and/or other required documents relative to all permit applications in regards to this project.

Physical address of property: \_\_\_\_\_ and described in the records of  
CROOK COUNTY, Oregon as map/tax number: \_\_\_\_\_

The costs of the above actions, which are not satisfied by the agent, are the responsibility of the undersigned property owner.

**PROPERTY OWNER**

(Please print clearly)

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

- Individual     Corporation     Limited Liability Corporation     Trust

**IMPORTANT NOTE:** If the property is owned by an entity, include the names of all the authorized signers.

If a Corporation: Provide the name of the President, or other authorized signor (s).

If a LLC: Provide the names of ALL members and managers.

If a Trust: Provide the name of the current Trustee (s).

**In addition,** if you are a corporation, you will need to include a copy of the bylaws, an operating agreement if you are an LLC, or Certificate of Trust if you are a trust that verifies authority to sign on behalf of the entity.

**APPROVED AGENT**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

Table 11-2.3 Minimum Setbacks and Fire Separation Inside Parks

	Manufactured Dwellings	Accessory Buildings	Accessory Structures
Property Line	5 ft.	5 ft.	5 ft.
Park Street	5 ft.	5 ft.	5 ft.
Park Sidewalk	2 ft.	2 ft.	0 ft.
Manufactured Dwelling on Same Lot	See Note (1) & (2)	3 ft.	0 ft.
Manufactured Dwelling on Adjacent Lot	10 ft.	6 ft.	6 ft.
Buildings on the Same Property	10 ft.	6 ft.	6 ft.
Accessory Buildings on Same Lot	3 ft.	3 ft.	0 ft.
Accessory Building on Adjacent Lot	6 ft.	6 ft.	6 ft.
Accessory Structures on Same Lot	0 ft.	0 ft.	0 ft.
Accessory Structures on Adjacent Lot	6 ft.	6 ft.	6 ft.

**NOTES:**

- (1) The building official may approve reduced setbacks and clearances than those dimensions in this table with the use of fire resistive construction according to the prescriptive requirements in the **Oregon Residential Specialty Code**.
- (2) Additional requirements in OAR 918-500-0530 may be applicable.
- (3) Setbacks from perimeter property lines and public streets may be greater than those dimensions shown in this table if the municipality adopted local amendments by ordinance.
- (4) Setbacks and clearances addressed in this table shall be measured to the exterior wall of the structure and shall not include the eave overhangs except for awnings and carports.

## **MANUFACTURE HOME "SETUP" INSPECTION:**

INCLUDES, BUT IS NOT LIMITED TO, VERIFICATION OF THE FOLLOWING PRIOR TO THE INSTALLATION OF SKIRTING.

- 1) ANCHORING – STRAPPING
- 2) PIER SUPPORTS
- 3) VAPOR BARRIOR
- 4) WATER AND SEWER PIPING (TESTED AND RUN TO HOME) AND UNDER HOME WITH A MINIMUM STUB OF 12" OUTSIDE UNDER FLOOR ENCLOSURE.
- 5) BOND JUMPER ON FRAME AND OTHER ELECTRICAL CROSSOVER CONNECTIONS.
- 6) ELECTRICAL FEEDER UNDER HOME
- 7) DRYER VENT STUBED TO OUTSIDE EDGE OF HOME
- 8) H.W.H. PRESSURE BLOW OFF PIPING STUBED TO OUTSIDE OF HOME
- 9) CONDENSATE LINE STUBED TO OUTSIDE EDGE OF HOME
- 10) CROSSOVER HEAT DUCT
- 11) ANY OTHER APPLICABLE INSTALLATIONS UNDER THE HOME

## **FINAL INSPECTION:**

FINAL INSPECTION SHALL BE MADE AFTER ALL WORK REQUIRED BY THE INSTALLATION PERMIT IS COMPLETED. FINAL INSPECTION INCLUDES BUT IS NOT LIMITED TO VERIFICATION OF THE FOLLOWING:

- 1) SKIRTING INSTALLATION
- 2) UNDER-FLOOR ACCESS
- 3) TEMPORARY STEP REMOVAL
- 4) PERMANENT STEP OR RAMP INSTALLED
- 5) PERMANENT LANDING, GUARDRAIL, AND HANDRAIL CONSTRUCTION
- 6) UNDER-FLOOR VENTILATION
- 7) SITE GRADING AND DRAINAGE
- 8) SIDEWALKS AND DRIVEWAYS
- 9) UNDER-FLOOR DRYER AND RANGE EXHAUST DUCT THROUGH SKIRTING OR PERIMETER
- 10) SMOKE ALARM LOCATION, INSTALLATION AND TEST
- 11) GROUND FAULT CIRCUIT INTERRUPTER (GFCI) TESTS
- 12) INSTALLERS CERTIFICATION TAG(S) ARE INSTALLED