



CANYON COUNTY DEVELOPMENT SERVICES DEPARTMENT

111 North 11th Avenue, #140 • Caldwell, Idaho • 83605

Phone (208) 454-7458 Fax: (208) 454-6633 • www.canyoncounty.org/dsd

MANUFACTURED HOME/MOBILE HOME BUILDING PERMIT APPLICATION

Date: _____

BP Number: _____

Name Company Name	Name
Mailing Address / Business Address	Mailing Address
City, State, Zip	City, State, Zip
Phone Fax email address	Phone Fax email address
Contractor Registration # Expiration Date	<u>Property Owner Signature</u> Date

Site Information

Site Address	City, Zip	Parcel #	# of acres	Flood Zone	Yes / No	
Subdivision Name if applicable	Lot	Block	Section	Township	Range	Quarter

Manufacturer Home Information

Home Manufacturer	Year Built	# of Transportable Sections	Width	Length	Sq Ft. of Living Space	Value
-------------------	------------	-----------------------------	-------	--------	------------------------	-------

Please check only those that apply:

- | | | |
|---|---|--|
| <input type="checkbox"/> New | <input type="checkbox"/> Move-On | <input type="checkbox"/> Used/Year _____ |
| <input type="checkbox"/> Rehabilitation Complete | <input type="checkbox"/> Standard Set (with skirting) | <input type="checkbox"/> Air Conditioner |
| <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Permanent Foundation | <input type="checkbox"/> Attached Garage/Carport |
| <input type="checkbox"/> Ad-Valorem | <input type="checkbox"/> Home to be declared as Real Property | <input type="checkbox"/> Additions/Type _____ |
| <input type="checkbox"/> Covered Porch/Patio | <input type="checkbox"/> Declare as Real Property | |
| <input type="checkbox"/> Basement (furnish construction drawings) | | |

****NOTE: MOBILE HOMES CONSTRUCTED PRIOR TO JUNE 15, 1976 REQUIRE MOBILE HOME REHABILITATION**

In lieu of the Property Owner Signature, the Applicant/Builder affirms that he/she is an appointed representative of the property owner for the sole intent of filing an application for this permit. Applicant/Builder agrees to indemnify, defend, and hold harmless Canyon County, its elected officials, offices, departments, employees and agents against all liability related to signing this form.

Signature: _____ Date: _____

All information provided within this application is correct to the best of my knowledge. I understand that the acceptance of this application does not guarantee that a Building Permit or Zoning Compliance Certificate will be issued and that this application will be used to help determine if the project complies with the Canyon County Zoning Ordinance and adopted Building Code.

- All required documents **must** be turned in at the same time as this application. **DSD will not accept/hold incomplete applications.** Building Permits do not start the approval process without all required documentation.
- You will receive a call from our office when your permit is ready for pick-up. You may do so between 8 a.m. and 4:30 p.m., Monday through Friday, excluding all legal holidays.

Applicant/Builder Signature: _____ Date: _____



CANYON COUNTY DEVELOPMENT SERVICES DEPARTMENT

111 North 11th Avenue, #140 • Caldwell, Idaho • 83605

Phone (208) 454-7458 Fax: (208) 454-6633 • www.canyoncounty.org/dsd

MANUFACTURED HOME/MOBILE HOME BUILDING PERMIT APPLICATION

REQUIRED INSPECTIONS

- Setback: for installations with Standard Set call for inspection after 4 corners are staked.
- Footing/Setback: for installations with Permanent Foundation Set (using concrete, masonry or pressure treated wood 24" below grade) call after forms are set.
- Final Inspection:
 1. House set and tie-downs installed or forms are set.
 2. Beam and marriage line supports installed
 3. Foundation vents installed
 4. Ground cover/vapor barrier installed. Black 6 mill (.006)
 5. Landing, steps and handrail installed
 6. Perimeter skirting installed (if applicable)
 7. Access to crawl space with cover installed
 8. Site grading away from foundation or skirting. Needs to drop 6 inches in the first 10 feet away from house and 2% after that.
 9. Heat tape and pipe installed
 10. Heating duct supported above ground – all elbows and joints sealed. R-8 insulation required
 11. Wood stove and gas fireplaces inspected if installed after leaving factory
 12. Two exits maintained from home.
 13. Attached 6" height address numbers in contrasting color to front of house
 14. Septic, water and electric service connected to house
 15. Electric and plumbing inspections approved and posted by State inspectors
 16. Dryer vent exhausted to outside with back-draft damper
 17. Condensation drains to terminate outside of crawl space
 18. Skirting (using metal, vinyl, cement or treated wood)

CALL 208-454-7460 BEFORE 3:30 P.M. DAILY TO SCHEDULE AN INSPECTION.