## **Pend Oreille County**



## **Community Development Department**

P. O. Box 5066 Newport, Washington 99156-5066 Phone: 509-447-4821

**Dennis Alliger**Senior **Building Inspector** 

# Manufactured Home Building Permit Application

JOB SITE INFORMATION									
Site Address:									
Parcel Number:									
BUILDING OWNER/APPLICANT									
Name:									
Address:									
City:				State:			Zip:		
Phone:			Email:						
			CONTRAC	TOR/INSTALLER	(if applicable	)			
Name:									
Address:									
City:				State:			Zip:		
Phone:			Email:						
Contractor Licens	se #:				Installer Co	ertification (W	/AINS) #:		
			Manu	FACTURED HOM	ME DETAILS				
Manufacturer:					Year:		Singl	e-wide	☐Double-wide
Dimensions:			Squ	are Footage:					
HUD Serial #:			Roo	f Snow Load:	psf (50	or greater re	quired)	Beds:	Baths:
Class of Work:	□New	Replacement	T	ype of Heating:	Electric	Gas			
				Notice					
A separate permit is required for electrical through State of Washington Department of Labor & Industries.  Per RCW 19.27.097, each applicant for a building permit of a building necessitating potable water shall provide evidence of an adequate water supply for the intended use of the building. Evidence may be in the form of a water right permit from the Department of Ecology, a letter from an approved water purveyor stating the ability to provide water, or another form sufficient to verify the existence of an adequate water supply. Each applicant applying for a building permit in which sewage or wastewater may originate, shall obtain an on-site sewage disposal permit from Tri-County Health District prior to issuance of a building permit for said building. Please attach a copy of your approved on-site sewage disposal permit from Tri-County Health District.									
PERMIT FEES* Fees are established by the Board of County Commissioners and are subject to change. The total fee for this application is \$554.50. Permits are valid for one year from issue date and may be renewed for \$55.00 per year for a total of four additional times (maximum five years). Payment is to be made payable to Pend Oreille County (POC). To pay by phone, contact the office at 509-447-4821. Applications maybe delivered to the Community Development Department at: 418 S. Scott Ave, Newport, WA 99156; or mailed to: P.O. Box 5066 Newport, WA 99156.									
I hereby certify that 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. The granting of a permit does <b>not</b> presume to give authority to violate or cancel the provisions of any other federal, state, or local law regulating construction or the performances of construction.									
Signature:						Date	e:		

### **Potable Water**

Per the Washington State Building Code (RCW 19.27.097), each applicant for a building permit of a building necessitating potable water shall provide evidence of an adequate water supply for the intended use of the building. Evidence may be in the form of:

- A water right from Washington Department of Ecology
- A letter from an approved water purveyor stating the ability to provide water
- A form sufficient to verify existence of an adequate water supply
  - A Well Log will satisfy this requirement

For **Public/Community Water Systems**, you will need to provide a letter or form from the water system owner or operator stating that their system is able and willing to supply potable water to your proposed building site and the location of the proposed building site has been reviewed. Please include the water system's identification number assigned by the Washington State Department of Health.

For **Private Wells**, potable water must be tested by a laboratory certified\* by the State of Washington and meet the following standards prior to issuance of a building permit:

Bacteria Test

Coliform Bacteria: None Present

Inorganic Test

Arsenic: Not more than .01 mg/L

• Lead: Not more than .015 mg/L

Nitrate: Not more than 10 mg/L

Uranium: Not more than 30 mg/L

### **Sewage Disposal**

Per Washington State Law RCW 19.27.031 (4), RCW 43.20.050, WAC 246-271-020, WAC 246-272-20501, all plumbing fixtures, drains, appurtenances, and appliances used to receive or discharge liquid wastes or sewage shall be connected to the building's drainage system.

-AND-

Prior to issuance of a building permit for a building in which sewage or wastewater may originate, the applicant shall obtain:

- A letter or form from an approved sewer system owner or operator stating that their system is able and willing to accept sewage and/or
  wastewater from said building. The letter or form shall also state the owner or operator has reviewed the location of the proposed
  structure; OR
- An approved on-site sewage disposal permits from the Northeast Tri-County Health District (509) 447-3131

### WILL I NEED OTHER PERMITS/APPROVALS?

Additional permits and/or approvals may be required prior to the issuance of a building permit. If the building is located within a Special Flood Hazard Area (SFHA), A Floodplain Development Permit (FDP) from the Community Development Department will be required. SFHA's are determined by Flood Insurance Rate Maps (FIRMs) produced by the Federal Emergency Management Agency (FEMA). A floodplain determination will be made by the application reviewer as part of the Site Evaluation Application review.

Work in/or around critical areas like wetlands, aquifer recharge areas, rivers/streams, or steep slopes will require review and approval by the Community Development Department and may require review by the Washington Department of Fish and Wildlife and/or other agencies.

### WILL MY APPLICATION OR PERMIT EXPIRE?

Permits are valid for one year from issue date and may be renewed for \$55.00 per year for a total of four additional times (maximum five years). Permit fees, to be determined by the building inspector after plan review. The check is to be made payable to Pend Oreille County. Applications may be delivered to the Community Development Department in the lower level of the courthouse in Newport or mailed to P.O. Box 5066 Newport WA. 99156

### **Forest Practice Act**

Certain land use activity may require a Forest Practice Application/Notification (FPA/N) and a Notice of Conversion. Activities that may trigger Forest Practices regulations include:

- 1. Harvesting timber and selling for payment or trading for goods and services
- 2. Road construction (examples)> 600' in length
- 3. Crossing a stream within a Wetland or Riparian
- 4. Management Zone Road Maintenance (i.e., bridge or culvert replacement)

Contact WA DNR to see if a Forest Practice Application is required:

Washington Department of Natural Resources

Northeast Region

225 S. Silke Rd.

Colville, WA 99114

(509) 684-7474

## Pend Oreille County



## **Community Development Department**

P. O. Box 5066 Newport, Washington 99156-5066 Phone: 509-447-4821

## Manufactured Home Placement Checklist

#### WHAT IS THIS

The purpose of this checklist is to guide you through the process of obtaining a permit for the placement of a manufactured home. Information contained below is not intended to be a comprehensive list of information required for obtaining your permit as requirements for specific sites mayvary. It is intended to give you a general outline of the permitting process. Placement of a manufactured home in Pend Oreille County, Ione, Cusick, Usk, Metaline and Metaline Falls must conform to alladopted city, state, and federal codes, including but not limited to State of Washington Administrative Code (WAC) Chapter 296-150, International Residential Code, Uniform Plumbing Code.

### **DEFINITIONS**

A manufactured home is defined as a single family dwelling unit built according to the Department of Housing and Urban Development (HUD)Manufactured Home Construction and Safety Standards Act of 1976. Unit is portable in one or more sections on public streets and highways uponits own running gear which, when erected on-site, is utilized as a permanent dwelling unit. A mobile home is defined as a factory-built dwellingunit built prior to June 15, 1976, to standards other than the HUD Code.

### WHAT INFORMATION IS NEEDED

WHAT IN CHINATION IS NEEDED							
The following information must be provided. Should any of the following minimum information not be provided, the application may not be accepted nor processed. A complete application includes:							
	☐ Floor Plan						
Approved Site Evaluation Application (2 copies)	☐ Completed "Manufactured Home Building Permit Application"						
☐ Signed Landowner Consent Form (if applicant is not property owner)	☐ Documentation indicating #50 snow load on the roof						
Foundation Plans (2 copies, see checklist for requirements)	Septic, Water & Sewer Disposal Information						
PERMIT PROCESS							

Following submittal of a complete application, the application will be reviewed by the Community Development Department to ensure compliancewith adopted County standards. The applicant will be notified of any additional information needed for the project.

Upon completion of the review and approval process by the Community Development Department, the applicant will be notified that the permit isready for issuance. The applicant must then pay all applicable fees in order to have the permit released to them.

A permit **must** be obtained **before** moving a manufactured home into Pend Oreille County, Ione, Cusick, Usk, Metaline and Metaline Falls. If amanufactured home is moved into Pend Oreille County, Ione, Cusick, Usk, Metaline and Metaline Falls without first obtaining a permit, the ownerdoes so at his or her own risk. Possible consequences of such action could be penalty fees assessed by Pend Oreille County, citations by the PendOreille County Code Enforcement Officer, and removal of the manufactured home from Pend Oreille County, Ione, Cusick, Usk, Metaline andMetaline Falls at the owner's expense.

Moving permits are issued by the Treasurer's Office.

### STRUCTURAL PLAN SUBMITTALS

### A. Site Evaluation Plan

- 1. Minimum 8½"x 11" size paper
- 2. North Arrow
- 3. Geographic ID, or Property ID
- 4. Actual property configuration including dimensions
- 5. Adjacent street names
- Actual structural footprint of existing and proposed structures with dimensions identified, including all impervious surfaces (sidewalks, driveways, concrete patios, etc.)
- 7. Existing and proposed building setbacks to property lines including dimensions
- 8. Slopes in relations to buildings, including setbacks
- Distances (in feet) between existing and proposed primary and accessory structures.
- 10. Location and dimensions of utility easements
- 11. Location of sewer and potable water connection, including distances between the two
- 12. Location and dimension of driveway approach
- 13. Building footprint and square footage
- 14. Site address

## B. Foundation Plan - (Minimum 1/8 scale)

- 1. Footing size, location, and depth to finish grade level.
- 2. Crawlspace ventilation
- 3. Supporting wood cripple walls and skirting (required to be treated wood)
- 4. Horizontal and vertical reinforcement size and spacing
- 5. Concrete or masonry unit width
- 6. Anchor hold down type, size, and spacing

I hereby verify that I have read and examined this checklist and have submitted the information as noted on this checklist.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

APPLICANT SIGNATURE	DATE
PRINTED NAME	-
I MINITED MAINE	

## PEND OREILLE COUNTY

COMMUNITY DEVELOPMENT DEPARTMENT
418 S. Scott Avenue
P.O. Box 5066
Newport, WA 99156
(509) 447-4821
pendoreilleco.org



# LANDOWNER/AGENT CONSENT FORM

I (we), the undersigned owner(s) of record of <i>(geographic</i>	: ID or property ID)				
located at (physical address)		, consent to and authorize			
(agent name)	to a	to act on my behalf for the purposes			
of obtaining approval for (development type)		_			
submitted to Pend Oreille County.					
<ul> <li>I (we), as the landowner(s) of the above-described proper</li> <li>I (we) am/are the legal owner(s) of the subject financial and otherwise.</li> <li>I (we) am/are responsible for all activities occur</li> <li>That Pend Oreille County, its officers, and staff stactions of the above-named agent.</li> </ul>	property and may act on be	behalf of all interested parties,  ty to which an application is made.			
Owner Contact Information					
Property Owner(s):	Phone:				
Mailing Address:					
City:	State:	Zip:			
E-mail:					
Applicant Information					
Authorized Agent:	Phone:				
Mailing Address:					
City:	State:	Zip:			
E-mail:					
I certify that the information contained on this application understand that the information will be used by Pend Oreille C requ					
		DATE:			
AGENT/PR	IMARYCONTACT				
		DATE:			