



**Building Division**  
 525 N 3<sup>rd</sup> Ave, Pasco, WA 99301  
 P: 509.543.5726  
[www.pasco-wa.gov](http://www.pasco-wa.gov) | [permittech@pasco-wa.gov](mailto:permittech@pasco-wa.gov)

<b>FOR STAFF USE ONLY</b>	
<b>PERMIT#</b>	

## Manufactured Home Installation Permit Application

<b>Site Address:</b>			<b>Parcel Number:</b>		
Set up Costs: \$		Home Cost:\$		<b>TOTAL Cost of Project: \$</b>	
<b>Applicant is</b> (check one): <input type="checkbox"/> <b>Owner</b> <input type="checkbox"/> <b>Installer</b> <input type="checkbox"/> <b>Other:</b> _____					
<b>Legal Property Owner:</b>				Phone No.:	
Address:				Email:	
<b>Installer:</b>				Phone No.:	
Address:				Email:	
WAINS #:				Pasco Business License #:	
MFH Manufacturer		Model Name		Model Year	
Serial Number					
# of Bedrooms		# of Bathrooms		Square Footage	
		Length x Width			
<u>HOMES BUILT BEFORE JUNE 15, 1976</u>  Required for submittal of this application:  <input type="checkbox"/> Completed application <input type="checkbox"/> Site Plan <input type="checkbox"/> Authorization from Park <input type="checkbox"/> Copy of Title proving ownership <input type="checkbox"/> Life/Safety Certification - Labor & Industries			<u>HOMES BUILT AFTER JUNE 15, 1976</u>  Required for submittal of this application:  <input type="checkbox"/> Completed application <input type="checkbox"/> Site Plan <input type="checkbox"/> Authorization from Park <input type="checkbox"/> Copy of Title proving ownership		

I certify the information furnished by me is true and correct and that I am the owner of the subject property or I have been given express permission by the owner of the subject property, to submit this application for permit. I will comply with all provisions of law, code and ordinances governing this type of construction work, including state contractor registration laws. I understand that, once accepted, this permit application is valid for 30 days. If the permit is not obtained within 30 days, the permit application and all submitted building and site plans will be destroyed.

Applicant Name (Please Print) \_\_\_\_\_

Applicant Name Signature \_\_\_\_\_ Date \_\_\_\_\_