

*** MUST HAVE APPOINTMENT TO SUBMIT ***



DEPARTMENT OF COMMUNITY DEVELOPMENT

621 Sheridan Street, Port Townsend, WA 98368
Tel: 360.379.4450 | Fax: 360.379.4451
Web: www.co.jefferson.wa.us/communitydevelopment
E-mail: dcd@co.jefferson.wa.us

**SUPPLEMENTAL APPLICATION
MOBILE OR MANUFACTURED HOME**

For Department Use Only	Receipt #:	Date:
Related Application #s:	Payment #:	

Required Submittal Documents

Permit Application, Supplemental Applications and Fees	Please submit 1 copy completed and signed.
Each building permit requires a separate application, signed and dated by property owner.	
Water	Please submit 1 copy.
Completed and signed permit application. You must provide all information necessary to prove potable water prior to submitting your building permit. Well: must include well logs and lab analysis at the time of application. Public Water: have a completed & signed Water Availability Notification from water purveyor.	
Septic	
Septic Permit Number _____ A septic permit application must be on file prior to submitting your building application.	
O&M Form	Please submit 1 copy.
Current professional O&M inspection required for a building permit.	
Site Plan	Please submit 2 copies.
We cannot accept a site plan larger than 11" x 17". See Site Plan checklist to ensure your site plan is complete at time of application.	
Floor Plan	Please submit 2 copies.
We cannot accept a floor plan larger than 11" x 17". All rooms to be labeled on the site plan; show any, including garage, which are unheated. If this is a remodel provide a before and after floor plan with all rooms labeled.	
Stormwater	Please submit 1 copy.
A stormwater calculation worksheet is required for all building applications. All stormwater plans must comply with the current Stormwater Management Manual for Western Washington: http://www.ecy.wa.gov/programs/wq/stormwater/manual.html	
Access	
Road Approach Permit Application. An approved access is required for all County roads if approach has not been previously approved. _____ Existing Permit Number : <u> </u> RAP _____ OR _____ Private Road (no permit required); OR _____ State Road (permit from WSDOT)	
Address	
Address Application required for all construction projects, if no address is currently assigned. _____ Existing Address & _____ Red fire sign showing your current address on site.	
Manufactured Home Set Up Manual; require one manual at time of submittal. Method of foundation and anchoring system MUST be flagged in the manual when submitting application. If foundation method is not found in the setup manual you must provide foundation and anchoring system plan stamped by engineer or architect licensed in the State of Washington.	
At time of all inspections, the required set-up manual must be on site with permit or no inspection will be performed, and a re-inspection fee assessed.	

BLDG PERMIT # _____

Assessor Information	
Home Data:	
Make: _____	Model: _____ Year: _____
Length _____	Width: _____ Serial #: _____
Your Purchase Price (Don't include sales tax): \$ _____	Purchase Date: _____
Previous Owner/Location of Home (if new move to question next question):	
From whom did you purchase your manufactured home: _____	
Address _____	
Was manufactured home assessed in Jefferson County last year: YES _____ NO _____	
If yes, Previous address of manufactured home: _____	
If no, what County was M/H assessed in last year: _____	
Where is the manufactured home to be located:	
Will the home be in a mobile home park? YES _____ NO _____	
If located in a mobile home park:	Name and address of park: _____
If not located in a mobile home park:	Name of land owner: _____
	Location address: _____
	Assessor tax parcel #: _____

Building Information	
Property Owner Name: _____	Assessor Tax Parcel #: _____
Type of Manufactured Home:	
Check One:	
New _____	Replacement _____ Moved _____ Demolition _____
Check One:	
Park _____	On a Lot _____ Temporary Construction Living Quarters _____
Proposed Building/Project:	
Square Footage: _____	Number of Bedrooms: _____
Type of Heating: _____	Number of Bathrooms: _____
Deck: _____ Sq/Ft: _____	Garage: _____ Sq/Ft: _____
Installer: _____	Address, City, State, Zip: _____
Phone: _____	Installer Email: _____
Contractor's License #: _____	

By signing this application form, the owner/agent attests that the information provided herein, and in any attachments, is true and correct to the best of his, her, or its knowledge. Any material falsehood or any omission of a material fact made by the owner/agent with respect to this application packet may result in making any issued permit null and void.

I further agree to that all activities I intend to undertake or complete associated with this permit will be performed in compliance with all applicable federal, state and county laws and regulations and I agree to provide access and right of entry to Jefferson County and its employees, representatives or agents for the sole purpose of application review and any required later inspections. Applicant may request notice of the County's intent to enter upon the property for visits related to this application and subsequent permit issuance.

Signature: _____ Print Name: _____ Date: _____

List existing buildings on property (i.e. house, garage, accessory dwelling unit, shed, barn, mobile home, other):

All Existing Buildings on Property	Use

Builders Statement		
The signer of this statement certifies that they are the Owners of the parcel referenced herein, that they are not licensed contractors and that they will be assuming the responsibility of the General Contractor for the proposed project.		
Signature: _____	Print Name: _____	Date: _____

By signing this application form, the owner/agent attests that the information provided herein, and in any attachments, is true and correct to the best of his, her, or its knowledge. Any material falsehood or any omission of a material fact made by the owner/agent with respect to this application packet may result in making any issued permit null and void.

Signature: _____ Print Name: _____ Date: _____

For Department Use Only

Building Permit Fees

Building Base (1-2 sections)	\$679.00
Additional Sections	\$48.50 each
Land Use Review	\$291.00
Septic Review	\$141.00
Potable Water	\$141.00
Technology/Scan	\$24.00

Other Fees

Shoreline Exemption	
Zoning _____	
Zoning _____	
Other _____	
New Address	\$288.00
Subtotal	
Technology Fee – 5% of Subtotal	
Total Fees	

Receipt #: _____ Date: _____ Cash/Check/CC: _____