

Manufactured Home Building Permit Application

City of Wilsonville, Oregon

29799 SW Town Center Loop East, 503-682-4960 permits@ci.wilsonville.or.us

Type of work	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition/alteration/replacement
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other:
Category of construction	
<input type="checkbox"/> 1 & 2 family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Multifamily	<input type="checkbox"/> Master builder
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Other:
Job site information and location	
Job no.:	Job address:
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.
Tax map/parcel no .	
Description of work	
Provide RS Permit no.	
<input type="checkbox"/> Property owner <input type="checkbox"/> Tenant	
Name:	E-mail:
Address:	
City/State/ZIP:	
Phone:	FAX:
Owner installation: This installation is being made on property that I own, which is not intended for sale, lease, rent, or exchange.	
Owner signature:	Date:
Contractor	
Business name:	E-mail:
Address:	
City/State/ZIP:	
Phone:	FAX:
CCB lic. no.	
Authorized signature: _____	
Print name:	Date:
<input type="checkbox"/> Applicant <input type="checkbox"/> Contact Person	
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	FAX:
E-mail:	
Authorized signature: _____	
Print name:	Date:

Office Use Only
Permit no:
Date received:
By:

Required Data: One and Two Family Dwelling	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation:	
Number of bedrooms:	
Number of bathrooms:	
Total number of floors:	
New dwelling area:	square feet
Garage/carport area:	square feet
Covered porch area:	square feet
Deck area:	square feet
Other structure area:	square feet

Required Data: Commercial Use	
Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation:	
Existing building area:	square feet
New building area:	square feet
Number of stories:	
Type of construction:	
Occupancy groups	
Existing:	
New:	

Notice
All contractors and subcontractors are required to be licensed with the Oregon Construction Contractors Board under ORS 701 and may be required to be licensed in the jurisdiction in which work is being performed.

Statement of Fact: I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of fact (whether intentional or not) in this application or any other required document, as well as any misleading statement or omission, may be cause for revocation of permit and/or certificate of occupancy, regardless of how or when discovered.

I acknowledge that work related to this Building Permit Application may be subject to regulations governing the handling, removal and/or disposal of asbestos and/or lead-based paint. If the work is subject to regulations governing asbestos and/or lead-based paint, I will comply with all such regulations. _____ (initials)

Building Permit Fees*	
Please refer to fee schedule	
Fees due upon application	
Amount received	
Date received	

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

Disclaimer: By signing this application, the permit applicant acknowledges and agrees that they have obtained any required permission for the proposed work from the property owner. Refer to the policy of this jurisdiction if it discovers that a dispute regarding the proposed work exists between the applicant and the property owner or any other party with a legal interest in the property.