



## APPLICATION FOR MANUFACTURED HOME INSTALLATION PERMIT

It may be necessary to obtain a installation permit through the local building department. If the installation is outside a local building jurisdiction, it must be permitted through DOPL, formerly DBS. Consult your local building authority to see if an installation permit is required in the local area. Fees for the permits are set by the jurisdiction having authority.

The homeowner or installation company of a manufactured home must purchase an installation permit from the Division of Occupational and Professional License (DOPL), formerly Division of Building Safety (DBS) prior to the installation and occupancy of a manufactured home in areas where there is not an DOPL-approved local building program.

The licensed manufactured home installer must sign off on the completed installation checklist before an actual inspection can be scheduled with the jurisdiction having authority, which would be either the local building department or DOPL.

The installer must provide a completed & signed Manufactured Home Installation Inspection Checklist to the homeowner and to the local building department or DBS. *See Idaho Code § 44-2202 (5).*



STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES

1090 East Watertower Street, Suite 150 Meridian, Idaho 83642 Ph: 1-800-955-3044 Fax 1-877-810-2840

APPLICATION FOR MANUFACTURED HOME INSTALLATION PERMIT

Please fill out this application completely and submit with payment. If you have questions or need assistance completing the application, please call the Division of Occupational and Professional Licenses, formerly the Division of Building Safety. Please note: permit fees are non-refundable and non-transferrable.

WHO IS PURCHASING THE PERMIT? (CHECK ONE): [ ] HOMEOWNER [ ] INSTALLATION COMPANY

HOMEOWNER'S NAME: \_\_\_\_\_

INSTALLER COMPANY NAME: \_\_\_\_\_

INSTALLER DBS LICENSE #: \_\_\_\_\_

HUD LABEL NUMBER(S) (Red metal plate attached on the exterior of each transportable section) List all labels below:

\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_

GPS COORDINATES (If required to locate jobsite): LONGITUDE: \_\_\_\_\_ LATITUDE: \_\_\_\_\_

WILL THIS UNIT BE PLACED ON A PERMANENT FOUNDATION? YES [ ] NO [ ] (Standard Set - Piers and Footings)

IF YES, you must obtain a foundation permit from the local building department or the Division of Occupational and Professional Licenses, formerly Division of Building Safety (whichever has jurisdiction) and have received a passing final inspection prior to the issuance of your installation permit. Please provide foundation permit information below:

Building Dept: \_\_\_\_\_ Permit #: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

Fees:

Single Section \$150.00 [ ] Double Section Unit \$200.00 [ ] Triple Section or more \$250.00 [ ]

THIS PERMIT APPLICATION IS NOT AN INSPECTION REQUEST: Please call 1-800-839-9239 or go to dbs.idaho.gov to schedule your inspection.

SELECT THE METHOD YOU WISH TO RECEIVE YOUR PERMIT: EMAIL \_\_\_\_\_ MAIL \_\_\_\_\_ FAX \_\_\_\_\_ (FAX # \_\_\_\_\_)

Table with 2 columns: Payment methods (We Accept: cash, check, money order, Visa and MasterCard Make checks payable to the Division of Occupational and Professional Licenses or DOPL) and TOTAL FEES: [ ]

PUBLIC RECORDS NOTICE - Business information such as your company address and phone number is considered public information under the Idaho Public Records Act. Your business address and phone number may be provided to a third party upon written request.

PURCHASER'S SIGNATURE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_ DATE: \_\_\_\_\_



# MANUFACTURED HOME CHECKLIST

1090 East Watertower Street, Suite 150  
 Meridian, Idaho 83642  
 Ph: 1-800-955-3044  
 Fax 1-877-810-2840

HOMEOWNER'S NAME: \_\_\_\_\_ ADDRESS OF HOME: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

INSTALLER NAME: \_\_\_\_\_ ADDRESS OF BUSINESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

INSPECTOR NAME: \_\_\_\_\_

### PERMIT VERIFICATIONS

<b>Permanent Foundation Permit #</b>	AHJ	Date Finaled	
Notes:			N/A
<b>Installation Permit #</b>	AHJ	Date Finaled	
Notes:			
<b>Electrical Permit #</b>	AHJ	Date Finaled	
Notes:			N/A
<b>Mechanical Permit #</b>	AHJ	Date Finaled	
Notes:			N/A
<b>Plumbing Permit #</b>	AHJ	Date Finaled	
Notes:			N/A

### BUILDING INSPECTOR VERIFICATIONS

Minimum two separate exits w/ approved landings, steps and rails	PASS		FAIL		N/A	
Exterior lights at both exits	PASS		FAIL		N/A	
Sleeping room windows sized for emergency egress and in working condition	PASS		FAIL		N/A	
Smoke detectors in sleeping rooms and hallways - tested	PASS		FAIL		N/A	
CO detectors in hallways - tested	PASS		FAIL		N/A	
Address posted and clearly visible from street	PASS		FAIL		N/A	
Fire separation from attached garage, if applicable	PASS		FAIL		N/A	
Pier and Footing inspection incl. anchorage	PASS		FAIL		N/A	
Site preparation incl. drainage and grading	PASS		FAIL		N/A	
HUD Label Number(s)						
Owner or agent present during inspection	YES		NO			

**INSTALLER VERIFICATIONS**

HUD Installation tag obtained from Division of Occupational & Professional Licenses, formerly Building Safety (new home only)	YES		TAG #			
Zoning approval from Local Authority Having Jurisdiction	YES		NO		N/A	
Site Conditions - Grading, Drainage, Access and Flood hazard	PASS		FAIL		N/A	
Permanent foundation permitted and inspected	YES		NO		N/A	
Standard Set / Piers and Footings inspected	YES		NO		N/A	
Anchorage and tie-downs - Location, spacing, attachment, embedment	PASS		FAIL		N/A	
Longitudinal tie downs installed	PASS		FAIL		N/A	
Stabilizer plates installed	PASS		FAIL		N/A	
Structural connections - Roof, eaves, endwalls, floors and gasketing	PASS		FAIL		N/A	
All shipping blocks and straps removed	PASS		FAIL		N/A	
Optional features installed - skirting, stairs, patio covers, etc.	PASS		FAIL		N/A	
Completion of operational checks and adjustments - Ductwork, Plumbing, Electrical, Fuel Supply	PASS		FAIL		N/A	
Roofing: flashings and roof jacks in place, any damage (if applicable) repaired	PASS		FAIL		N/A	

**Installer Certification:**

I hereby certify, in accordance with Idaho Statute, that the manufactured home identified above has been installed in accordance with an installation design and instructions that have been provided by the manufacturer and approved by DAPIA if a new home, or in accordance with the Idaho Manufactured Home Installation Standard if a used home.

It is a crime to knowingly make false statements and/or certifications in any matter within the jurisdiction of the US such as the certification on this or any similar form.

Installer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Inspector:**

I have performed a visual inspection in accordance with Idaho Statute and/or the Idaho Manufactured Home Installation Standards of the manufactured home installation identified above. I have inspected the home for life safety issues to include but not limited to the items listed under "Building Inspector Verifications" above. I hereby certify that the subject home is approved for occupancy on the date of my signature below.

Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Inspector Notes:**

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