



## APPLICATION FOR MANUFACTURED HOME INSTALLATION PERMIT

The owner or installer of a manufactured home must purchase an installation permit from the Division of Building Safety (DBS) prior to the installation of a manufactured home in areas where there is not approved local building program.

It may also be necessary for you to obtain a permit through the local building department in your area. If the installation is outside a local building jurisdiction, it must be permitted through 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 licensed manufactured home installer must sign off on the completed installation checklist before an actual inspection can be made by either the local building department or DBS.

The Manufactured Home Installation Inspection Checklist must be made available to the inspector at the time of inspection and a copy to the Division of Building Safety.



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 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'S COMPANY NAME: \_\_\_\_\_ License #: \_\_\_\_\_

HUD TAG OR SERIAL NUMBER: \_\_\_\_\_

IS THIS A NEW HOME YES \_\_\_ NO \_\_\_ IF YES, SEE INFORMATION SHEET REGARDING INSTALLATION TAG

HOMEOWNER'S MAILING ADDRESS: \_\_\_\_\_

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

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

JOB SITE ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTY: \_\_\_\_\_ GPS COORDINATES (If known); LONGITUDE: \_\_\_\_\_ LATITUDE: \_\_\_\_\_

WILL THIS UNIT BE PLACED ON A FOUNDATION? YES \_\_\_ NO \_\_\_ IF YES - You must request a foundation permit from the local building department or the Division of Building Safety (whichever has jurisdiction) and have received a passing final inspection before 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.

Table with 2 columns: Payment methods (We Accept: cash, check, money order, Visa and MasterCard; Make checks payable to the Division of Building Safety or DBS) and GRAND TOTAL FEES PAID\*.

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>Foundation Permit #</b>	AHJ	Date Finaled
Notes:		N/A
<b>Set Only Permit #</b>	AHJ	Date Finaled
Notes:		N/A
<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	PASS	FAIL	N/A
Owner or agent present during inspection	YES	No.	

**INSTALLER VERIFICATIONS**

HUD Installation tag obtained from Division of Building Safety	YES		#			
Zoning approval from Local Authority Having Jurisdiction	YES		No.		N/A	
Site Conditions - Grading, Drainage, Access and Flood hazard	PASS		FAIL		N/A	
Foundation permitted and 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	PASS		FAIL		N/A	
Roofing damage repaired, flashings and roof jacks in place	PASS		FAIL		N/A	

**REAL PROPERTY DESIGNATION (IF APPLIES) – BUILDING INSPECTOR**

Installed on concrete foundation in accordance with Idaho Manufactured Home Installation Standard 504.01 (a)	
Installed on block foundation in accordance with Idaho Manufactured Home Installation Standard 504.01 (b)	
Installed on pressure treated wood foundation in accordance with IMHIS 504.01 (c)	

**Installer Certification:**

I hereby certify, in accordance with the Idaho Manufactured Home Installation Standards, 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 or by an installation design and instructions that have been prepared and certified by a professional engineer or registered architect that have been approved by the manufacturer and the DAPIA as providing a level of protection for residents of the home that equals or exceeds the protection provided by the federal standards. 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 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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