

Community Development Department Manufactured Home Placement Application

PO Box 777 • 323 N.E. First Street

Winlock, WA 98596-0777 360.785.3811 • fax 360.785.4378 winplan@cityofwinlock.com

MUST BE FILLED OUT COMPLETELY - INCOMPLETE APPLICATIONS WILL BE NOT BE ACCEPTED

Parcel #:
City/St/Zip:
Contractor Authorized Agent
City/St/Zip:
quired) 🗆 Owner 🗆 Contractor
Phone #:
Expiration Date :
Expiration Date:
Other: lel:Year: e: \$ # of Bedrooms:

I/we certify that all plans, specifications, and other submissions required in support of this application conform to the requirements of all federal/state, and local codes and applicable laws and ordinances; and I certify that I am either the current legal owner of this property or their authorized representative. With this document, I take full responsibility for the lawful action that this document allows.

I certify that I have read and understand the limitations and conditions of the Winlock Code and agree to comply with all conditions of approval. I understand that any permits issued by the City of Winlock, consistent with the attached site plan, are valid ONLY if construction is in accordance to this plan and all other conditions of the permit are followed. By my signature below, I affirm that all the information and documents provided with this application are true and accurate to the best of my knowledge.

Signature

Date

FOR OFFICIAL USE ONLY

Minimum Requiremen	ts	Date Req'd	Initial	Additional Applications		Date Req'd	Initial
			Rec				Rec
Completed Application				Building Permit (for decks/porches)			
PTE Form				Fire Permit (propane tank, firework display/stands)			
Assessor's Map	ssessor's Map		Flood Permit (JARPA)				
Site Plan				Grading Permit (50+ cf fill/grade)			
Engineer Plans (2 complete sets)				Shoreline Permit (exemption or substantial development)			
Utility Service Application				Other:			
Planning Review							
L&I Safety Inspection							
Cross Connection Compliance							
Zoning:			Zoning Comme	ents:			
In Urban Growth Area (UGA):		□ Yes	🗆 No				
SEWER	WATER			BUILDING FEES	AMOUNT		
Required: Yes 🗆 No 🗆 🛛 Re		Required:	quired: Yes 🗆 No 🗆		Building Permit	\$	
Hookup Fee: \$		Hookup Fe	ookup Fee: \$		Plan Review	\$	
Facility Imp Fee: \$ F		Facility Im	Facility Imp Fee: \$		TOTAL BUILDING FEE:	\$	
Date Issued:		Date Issue	d:				
Permit #:		Water Syst	Water System ID #:		SPECIAL CONDITIONS:		
TOTAL HOOKUP FEE:		TOTAL HO	TOTAL HOOK UP FEE:				
Facility Imp Fee: \$		Facility Im	p Fee: \$				
OTHER PERMIT FEES	AMOUN	T					
application fee	\$						
grading permit	\$						
meter fee	\$						
water deposit	\$						
flood permit	\$						
shoreline permit	\$						
other permit fees	\$						
TOTAL OTHER FEES:	\$						

Date Received:	
Received By:	
Date Approved:	
Permit #:	
TOTAL Fees Due:	
Date Paid:	
Rct #:	

City Official Signature: _____