

MANUFACTURED HOME INSTALLATION

Town of Saratoga 1120 Hwy 73 S WI RAPIDS, WI 54494 715-325-5204	TOWN OF SARATOGA PERMIT FOR <b style="color: red;">MANUFACTURED HOME INSTALLATION	Application No. Parcel No.
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Manufactured Home Owners Name:	Mailing Address:	Tel.
Manufactured Home Park Name:	Lic/Cert#:	Mailing Address: Tel.
Manufactured Home Installers Name:	Lic/Cert#:	Mailing Address: Tel.
Master Electricians Name:	Lic/Cert#:	Mailing Address: Tel.
Master Plumbers Name:	Lic/Cert#:	Mailing Address: Tel.
Manufactures Name:	Model:	Year Built: Serial #:

Building Address:	Lot No.	Block No.
Zoning District(s)	Zoning Permit No.	Setbacks: Front _____ ft. Rear _____ ft. Left _____ ft. Right _____ ft.

PROJECT DESCRIPTION

Home Width _____ Length _____

Permit Fees: Man. Home Install \$75.00; Plumbing – Electrical - and HVAC (hook-up to existing) and 3’X3’ exit landing with steps & rails included. (mechanicals @\$35.00 each-if done separately)	<b style="color: red;">PROJECT COST:
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I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. I expressly grant the building inspector, or the inspector’s authorized agent, and the assessor permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

APPLICANT’S SIGNATURE _____ **DATE SIGNED** _____

APPROVAL CONDITIONS: This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.

EXIT LANDINGS GREATER THAN 3’X3’ & ADDITIONS-SHEDS, CARPORT & GARAGES REQUIRE SEPARATE PERMITS.

CODE COMPLIANT EXITS, PLUMBING & ELECTRICAL SHALL BE COMPLETED BEFORE OCCUPANCY.

CALL FOR INSPECTIONS BEFORE SKIRTING.

CALL FOR INSPECTION BEFORE OCCUPANCY.

ISSUING JURISDICTION	X Town <input type="checkbox"/> Village <input type="checkbox"/> City <input type="checkbox"/> State of: Saratoga	Municipality Number of Dwelling Location
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FEES:	PERMIT(S) ISSUED	WIS PERMIT SEAL #	PERMIT ISSUED BY:
Inspection \$ _____	<input type="checkbox"/> Installation		NAME _____
Other \$ _____	<input type="checkbox"/> HVAC		DATE _____ TELEPHONE NO: _____
Total \$ _____	<input type="checkbox"/> Electrical		
	<input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion <input type="checkbox"/> Stairs/Landings		

