



CITY OF SAINT PETER-BUILDING DEPARTMENT

227 South Front Street, Saint Peter, MN 56082

Phone: (507) 934-0662 Fax: (507) 934-4917

MANUFACTURED HOME INSTALLATION APPLICATION

PERMIT # _____
START DATE _____
FINISH DATE _____

BUILDING SITE ADDRESS/PARK LOT NUMBER

_____ () _____
PARK NAME/MANAGER NAME ADDRESS PHONE

_____ () _____
INSTALLER & REGISTRATION # ADDRESS PHONE

_____ () _____
OWNER NAME ADDRESS PHONE

_____ _____
HOME MANUFACTURER YEAR BUILT MODEL

STATE CONSTRUCTION SEAL # / HUD SERIAL #

I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance with the ordinances and laws of the City of Saint Peter regulating manufactured home installation. If the person making this application is not registered as an Installer by the State of Minnesota, the applicant represents that the manufactured home for which this application is being submitted will be installed in accordance with Minnesota State Building Code, Chapter 1350 and will bear both a construction seal and installation seal upon completion. The approved manufactured home installation permit will be issued to the applicant. The permittee is responsible for required inspections and corrections to completion.

SIGNATURE OF: OWNER INSTALLER AUTHORIZED AGENT _____ DATE

MAKE THIS PERMIT APPLICATION AVAILABLE TO THE INSPECTOR WHEN INSPECTIONS ARE MADE

OFFICE USE ONLY

INSPECTION RECORD

- FOUNDATION AND SUPPORT SYSYEM _____
- ANCHORING EQUIPMENT _____
- SEWER/WATER CONNECTIONS _____
- ELECTRICAL CONNECTIONS _____
- FUEL-GAS PIPING _____

BUILDING PERMIT FEE	<u>\$135.00</u>
PLAN REVIEW FEE	<u>\$47.25</u>
STATE SURCHARGE	<u>\$1.00</u>
PUBLIC WORKS FEE	_____
TOTAL PERMIT FEE	_____
RECEIPT #	_____
ISSUED BY	_____

BUILDING DEPARTMENT APPROVAL _____ DATE _____ ZONING ADMINISTRATOR APPROVAL _____ DATE _____