



Apache County Building Safety Department

P.O. Box 238
St. Johns, AZ 85936
(928) 337-7527

Permit # _____

MANUFACTURED HOME PERMIT APPLICATION

PROPERTY OWNER INFORMATION	
Owners Name:	Phone:
Mailing Address:	Parcel number:A.P.N.
City: State: Zip:	Construction Address:
E-mail Address:	Valuation: \$
MANUFACTURE HOME INFORMATION	
Unit Manufacturer:	Date of Manufacture:
Unit Serial Number A:	HUD Number:
Unit Serial Number B:	Septic Permit Number:
# of Bedrooms:	Snow Roof Load:
#of Bathrooms:	Areas within Apache County have specific Roof Snow load requirements. Homes which do not meet the standared will require an accessory "snow roof" construction over the home. Additional permitting will be required in these instances.
Length: _____ Width: _____	
INSTALLER INFORMATION	
Installer Name:	Installer Address:
Installer License Number:	Installer Phone Number:
City: State: Zip Code:	Email:
DEALER INFORMATION	
Dealers Name:	Dealers License Number:
Dealers Mailing Address:	Dealers E-mail Address:
Dealers Phone Number:	Dealers City: State: Zip Code:

Dealer Signature: _____

Date: _____

Building Official:

I hereby certify I have read and examined this application and the pertaining documents, and know same to be true and correct.

Building Official: _____

Date: _____



Permit # _____

Total Fee: \$ _____

MANUFACTURED HOME SUBMITTAL PLAN CHECKLIST

PLEASE CHECK EACH BOX BELOW TO INDICATE ITEMS INCLUDED IN YOUR SUBMITTAL PACKAGE.

NOTE: INCOMPLETED SUBMITTALS WILL RESULT IN A TIME DELAY FOR PROCESSING.

PROJECT INFORMATION

Submitted By:	Phone Number:
Site Address:	E-Mail:
Assessors Parcel Number (A.P.N.):	<input type="checkbox"/> Manufactured Home Application Submitted
Site Plan: Two (2) Copies of Site Plan Drawings	
<input type="checkbox"/> Project Location	<input type="checkbox"/> Setbacks with Dimensions
<input type="checkbox"/> Driveway Location	<input type="checkbox"/> Dimensions of Property Lines
<input type="checkbox"/> Septic System Location with Dimensions	<input type="checkbox"/> Distance from Adjacent Buildings
<input type="checkbox"/> North Arrow, Legend, & Scale	<input type="checkbox"/> Easements
	<input type="checkbox"/> Sq. Ft of Structures
Subcontractors: GAS:	ELECTRIC:
Additional Required Documents:	
<input type="checkbox"/> Title / Official Ownership to the home	<input type="checkbox"/> Documentation of Septic System
<input type="checkbox"/> Deed to Property if Recently Acquired	<input type="checkbox"/> Floor Plan (not required for Park Model)
<input type="checkbox"/> Electric Plan	<input type="checkbox"/> Roof Snow Load (not required for Park Model)

Applicant / Owner has verified that the subject submittal is in compliance with CC&R's, HOA, and/or POA or any deed restrictions.

TO BE COMPLETED BY APACHE COUNTY

Apache County Department Approval	Building Department Comments
<input type="checkbox"/> Verify ROC (Registrar of Contractor) License _____	_____
<input type="checkbox"/> Apache County Engineering Department _____	_____
<input type="checkbox"/> Apache County Flood Control _____	_____
<input type="checkbox"/> Apache County Planning & Zoning _____	_____
Reviewed By: _____	_____
Date Reviewed: _____	_____