



DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
Building Permits Division

1010 10th St., Suite 3400
 Modesto, CA 95354-0868
 (209) 525-6557, Fax (209) 525-7759

WRITE LEGIBLY, SEE OTHER SIDE FOR ADDITIONAL DOCUMENTATION NEEDED

INSTALLATION OF MANUFACTURED HOMES ON PRIVATE PROPERTY

JOB SITE ADDRESS: _____ CITY, STATE: _____ ZIP _____	NEAREST CROSS STREET: _____ APN: _____ - _____ - _____
OWNER'S NAME: _____ MAILING ADDRESS: _____ CITY, STATE: _____ ZIP _____ PHONE #: (____) _____	CONTRACTOR'S NAME: _____ MAILING ADDRESS: _____ CITY, STATE: _____ ZIP _____ PHONE #: (____) _____
Choose one of the following services: CONTACT PERSON/ APPLICANT NAME _____ MAILING ADDRESS _____ CITY, STATE: _____ ZIP _____ PHONE # (____) _____	CONTRACTOR LICENSE #: _____ CLASS: _____ WORKERS COMP <input type="checkbox"/> YES <input type="checkbox"/> EXEMPT
MOBILE HOME DATA: Manufacturer: _____ Year: _____ Model: _____ Expando: _____ Size: _____ AREA-SQ FT _____ # of bedrooms: _____ STATE INSIGNIA # SERIAL# Unit 1: _____ Unit 2: _____ Unit 3: _____	FOR INTERNAL USE: FOUNDATION PIERS MOBILE HOME INFO: _____
BY SIGNING & DATING APPLICATION, APPLICANT ACKNOWLEDGES 1. PERMIT AND APPLICATION FEES ARE NON REFUNDABLE BEGINNING 180 DAYS AFTER FEE PAYMENT 2. ONLY A PROPERTY OWNER (NOT A TENANT OR LESSEE) OR LICENSED CONTRACTOR MAY BE ISSUED A BUILDING PERMIT APPLICANT'S SIGNATURE: _____ DATE: _____ <p align="center">*THIS APPLICATION SHALL EXPIRE 180 DAYS FROM THE APPLICATION DATE*</p>	Are there any existing dwellings on property? If yes, how many? _____ Property In Williamson Act? Are there accessory structures? Is mobile home a replacement? Relocation on property?
PERMIT #: BLD20 - _____ PC FEE \$ _____ DATE: _____ REC'D BY: _____	

Manufactured Home Application Checklist

This checklist is to provide you with a guide to the documents and quantities of documents, which will be needed to process your application. This list may not be all-inclusive as each project is unique within itself.

If you have any questions or would like assistance with this form, please call (209) 525-6557 Monday through Friday between the hours of 8:00 a.m. and 5:00 p.m.

All plans are to be on minimum 11" x 17" unlined paper.

Scaled Plot Plan – Show dimension, setbacks from property lines and other structures. Show septic system or proposed septic system and the North direction – **(3 Sets)**

Scaled Floor Plan **(3 Sets)**

Engineered Tie-Down System Details **(2 sets)**

Marriage Line Details For Multiple Unit Setups **(2 sets)**

Elevations – Front, Side, Back **(2 sets)**

Copy of Grant Deed

For Replacement Permits, provide a copy of Assessor Records of Property.

For Permanent Foundation Systems, complete Assessor Statement Of Status and Forms 433 A / B.



PROPERTY OWNER'S PACKAGE

Disclosures & Forms for Owner-Builders Applying for Construction Permits

IMPORTANT! NOTICE TO PROPERTY OWNER

Dear Property Owner:

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified at _____.

We are providing you with an Owner-Builder Acknowledgment and Information Verification Form to make you aware of your responsibilities and possible risk you may incur by having this permit issued in your name as the Owner-Builder. **We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned this form to us at our official address indicated.** An agent of the owner cannot execute this notice unless you, the property owner, obtain the prior approval of the permitting authority.

OWNER'S ACKNOWLEDGMENT AND VERIFICATION OF INFORMATION

DIRECTIONS: Read and initial each statement below to signify you understand or verify this information.

____1. I understand a frequent practice of unlicensed persons is to have the property owner obtain an "Owner-Builder" building permit that erroneously implies that the property owner is providing his or her own labor and material personally. I, as an Owner-Builder, may be held liable and subject to serious financial risk for any injuries sustained by an unlicensed person and his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an Owner-Builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

____2. I understand building permits are not required to be signed by property owners unless they are *responsible* for the construction and are not hiring a licensed Contractor to assume this responsibility.

____3. I understand as an "Owner-Builder" I am the responsible party of record on the permit. I understand that I may protect myself from potential financial risk by hiring a licensed Contractor and having the permit filed in his or her name instead of my own.

____4. I understand Contractors are required by law to be licensed and bonded in California and to list their license numbers on permits and contracts.

____5. I understand if I employ or otherwise engage any persons, other than California licensed Contractors, and the total value of my construction is at least five hundred dollars (\$500), including labor and materials, I may be considered an "employer" under state and federal law.

____6. I understand if I am considered an "employer" under state and federal law, I must register with the state and federal government, withhold payroll taxes, provide workers' compensation disability insurance, and contribute to unemployment compensation for each "employee." I also understand my failure to abide by these laws may subject me to serious financial risk.

____7. I understand under California Contractors' State License Law, an Owner-Builder who builds single-family residential structures cannot legally build them with the intent to offer them for sale, unless *all* work is performed by licensed subcontractors and the number of structures does not exceed four within any calendar year, or all of the work is performed under contract with a licensed general building Contractor.

___8. I understand as an Owner-Builder if I sell the property for which this permit is issued, I may be held liable for any financial or personal injuries sustained by any subsequent owner(s) that result from any latent construction defects in the workmanship or materials.

___9. I understand I may obtain more information regarding my obligations as an "employer" from the Internal Revenue Service, the United States Small Business Administration, the California Department of Benefit Payments, and the California Division of Industrial Accidents. I also understand I may contact the California Contractors' State License Board (CSLB) at 1-800-321-CSLB (2752) or www.cslb.ca.gov for more information about licensed contractors.

___10. I am aware of and consent to an Owner-Builder building permit applied for in my name, and understand that I am the party legally and financially responsible for proposed construction activity at the following address:

___11. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern Owner-Builders as well as employers.

___12. I agree to notify the issuer of this form immediately of any additions, deletions, or changes to any of the information I have provided on this form. Licensed contractors are regulated by laws designed to protect the public. If you contract with someone who does not have a license, the Contractors' State License Board may be unable to assist you with any financial loss you may sustain as a result of a complaint. Your only remedy against unlicensed Contractors may be in civil court. It is also important for you to understand that if an unlicensed Contractor or employee of that individual or firm is injured while working on your property, you may be held liable for damages. If you obtain a permit as Owner-Builder and wish to hire Contractors, you will be responsible for verifying whether or not those Contractors are properly licensed and the status of their workers' compensation insurance coverage.

Before a building permit can be issued, this form must be completed and signed by the property owner and returned to the agency responsible for issuing the permit. Note: A copy of the property owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

Signature of property owner _____ Date: _____

Note: The following Authorization Form is required to be completed by the property owner only when designating an agent of the property owner to apply for a construction permit for the Owner-Builder.

AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNER'S BEHALF

Excluding the Notice to Property Owner, the execution of which I understand is my personal responsibility, I hereby authorize the following person(s) to act as my agent(s) to apply for, sign, and file the documents necessary to obtain an Owner-Builder Permit for my project.

Scope of Construction Project (or Description of Work): _____

Project Location or Address: _____

Name of Authorized Agent: _____ Tel No _____

Address of Authorized Agent: _____

I declare under penalty of perjury that I am the property owner for the address listed above and I personally filled out the above information and certify its accuracy. *Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.*

Property Owner's Signature: _____ Date: _____



CONSTRUCTION PERMIT APPLICATION

#1 IDENTIFY YOUR BUILDING PROJECT

Property Location or Address: _____

This permit is to be issued in the name of the () Licensed Contractor or () the Property Owner as the permit holder of record who will be responsible and liable for the construction.

Property Owner Information: Name _____ Tel No _____

Mailing Address _____

Licensed Design Professional (Architect or engineer in charge of the project) Information:

Name _____ License No. _____ Tel No _____

Mailing Address _____

Description and valuation of work to be performed: _____

#2 IDENTIFY WHO WILL PERFORM THE WORK (Complete either 2a or 2b)

2a – CALIFORNIA LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

Contractor Name and Address: _____

License Class and No. _____ Contractor Signature _____

2b – OWNER-BUILDER'S DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

I, as owner of the property, or my employees with wages as their sole compensation, will do all of or portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.)

I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

Property Owner or Authorized Agent signature _____ Date _____

#3 IDENTIFY WORKERS' COMPENSTATION COVERAGE AND LENDING AGENCY

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No. _____

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy No _____ Expiration Date _____

Name of Agent _____ Tel No _____

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).

Lender's Name and Address _____

#4 DECLARATION BY CONSTRUCTION PERMIT APPLICANT

By my signature below, I certify to each of the following:

I am a California licensed contractor or the property owner* or authorized to act on the property owner's behalf**.

I have read this construction permit application and the information I have provided is correct.

I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

**requires separate verification form*

California Licensed Contractor, Property Owner* or Authorized Agent**: ***requires separate authorization form*

Signature _____

RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL TO:

NAME
STREET ADDRESS
CITY, STATE and ZIP

SPACE ABOVE THIS LINE FOR RECORDER USE ONLY

NOTICE OF MANUFACTURED HOME (MOBILEHOME) OR COMMERCIAL MODULAR INSTALLATION ON A FOUNDATION SYSTEM

Recording of this document at the request of the enforcement agency indicated is in accordance with California Health and Safety Code Section 18551(a). This document is evidence that the enforcement agency has issued a certificate of occupancy for installation of the unit described hereon, upon the real property described with certainty below, as of the date of recording. When recorded, this document shall be indexed by the county recorder to the named owner of the real property and shall be deemed to give constructive notice as to its contents to all persons thereafter dealing with the real property.

REAL PROPERTY OWNER

ENFORCEMENT AGENCY ISSUING PERMIT and CERTIFICATE OF OCCUPANCY

MAILING ADDRESS

MAILING ADDRESS

CITY COUNTY STATE ZIP

CITY COUNTY STATE ZIP

INSTALLATION MAILING ADDRESS, IF DIFFERENT

BUILDING PERMIT NO. TELEPHONE NUMBER

CITY COUNTY STATE ZIP

SIGNATURE OF ENFORCEMENT AGENCY OFFICIAL DATE

UNIT OWNER (If also property owner, write "SAME")

DEALER NAME (If not a dealer sale, write "NONE")

MAILING ADDRESS

DEALER LICENSE NO.

CITY COUNTY STATE ZIP

UNIT DESCRIPTION

MANUFACTURER'S NAME DATE OF MANUFACTURE MODEL NAME/NUMBER

SERIAL NUMBER(S) LENGTH X WIDTH INSIGNIA/LABEL NUMBER(S)

ASSESSOR'S PARCEL NUMBER HCD REGISTRATION DECAL NUMBER MCO NUMBER

REAL PROPERTY LEGAL DESCRIPTION

HCD FORM 433(A) Rev 3/2006



WHITE—County Recorder CANARY—HCD PINK—Applicant GOLDENROD—Building Dept.



STATE OF CALIFORNIA
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF CODES AND STANDARDS

NOTICE TO ASSESSOR

THIS FORM MUST BE COMPLETED BY THE OWNER OF A MANUFACTURED HOME, MOBILEHOME OR COMMERCIAL MODULAR AND FORWARDED TO THE COUNTY ASSESSOR UPON COMPLETION OF THE INSTALLATION OF THE UNIT ON A FOUNDATION SYSTEM PURSUANT TO SECTION 18551 HEALTH AND SAFETY CODE.

ORIGINAL PURCHASE PRICE FOR:

1. The Basic Unit	\$ _____	Type of Exterior Wall Covering: _____ (Metal, Wood, etc.)
2. Optional Equipment & Upgrades	\$ _____	Type of Roof Covering: _____ (Metal, Wood, Composition, etc.)
3. Subtotal	\$ _____	Heating Type: <input type="checkbox"/> Forced Air <input type="checkbox"/> Floor or Wall
4. Accessories & Accessory Structures	\$ _____	
5. Other (Specify) _____	\$ _____	
6. Delivery & Installation	\$ _____	Air Conditioning: <input type="checkbox"/> YES <input type="checkbox"/> NO Tons _____
		Evaporative Cooler: <input type="checkbox"/> YES <input type="checkbox"/> NO
		Built-in Cooktop: <input type="checkbox"/> YES <input type="checkbox"/> NO
		Built-in Oven: <input type="checkbox"/> YES <input type="checkbox"/> NO
		Built-in Dishwasher: <input type="checkbox"/> YES <input type="checkbox"/> NO
		Built-in Wet Bar: <input type="checkbox"/> YES <input type="checkbox"/> NO
		Refrigerator: <input type="checkbox"/> YES <input type="checkbox"/> NO
7. TOTAL SALES PRICE	\$ _____	Roof Overhang (Eaves): <input type="checkbox"/> YES <input type="checkbox"/> NO _____ inches
		Furniture Included: <input type="checkbox"/> YES <input type="checkbox"/> NO Value \$ _____

DOES THE BASIC PRICE INCLUDE:

The Towbar(s)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Tires & Wheels	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Wheelhubs & Axles	<input type="checkbox"/> YES	<input type="checkbox"/> NO

LIST NUMBER OF ROOMS:

Bedrooms	_____	Dining Room	_____
Baths	_____	Family Room	_____
Kitchen	_____	Utility Room	_____
Living Room	_____	Other Rooms	_____

Carpport:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ X _____
Awning:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ X _____
Porch:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ X _____
Garage:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ X _____
Storage Shed:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ X _____
Skirting:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	_____ LINEAL FEET

The sales price as shown does not include any amount for any in-place location.

The Assessor's Parcel Number of the installation site is

(Signature)

Address

Telephone

**MANUFACTURED HOME (MOBILEHOME) OR COMMERCIAL MODULAR
INSTALLATION ON A FOUNDATION SYSTEM**
HCD FORM 433(A) Rev 3/2006

The original and three (3) copies of this form are to be completed with all available information at the time a building permit is issued for the installation of a manufactured home (mobilehome) or a commercial modular on a foundation system pursuant to Section 18551(a) of the Health and Safety Code. In addition, the enforcement agency may obtain a title search printout from the Department of Housing and Community Development's (HCD) Registration and Titling Program. The information on the title search should be compared to the information shown on the surrendered HCD Certificate of Title or DMV pink slip(s) and registration card(s). This will ensure that the most recent ownership and registration documents have been submitted to the enforcement agency and that the registered owner owns the manufactured home, mobilehome, or commercial modular free of any liens or encumbrances. Where the title search indicates a recorded legal owner or junior lienholder, or both, evidence should be provided to the enforcement agency that the legal owner or junior lienholder, or both, have been paid in full or that the legal owner or junior lienholder consent to the attachment of the unit upon the satisfaction of their liens by the registered owner. For information on establishing a requestor account for obtaining title search printouts on-line, please call (916) 323-9229 or via the internet: <http://www.hcd.ca.gov/codes/rt/> .

After the installation has been approved, and on the same day the certificate of occupancy has been issued, the enforcement agency shall record this form (completed in full) with the county recorder's office.

Upon recordation, the enforcement agency shall transmit a recorded copy of this form, a copy of the certificate of occupancy, fees collected in the amount of \$11 per transportable section, and (if unit currently titled as personal property) all applicable titles, certificates, license plates or decals to:

Department of Housing and Community Development
Division of Codes and Standards
Manufactured Housing Section
Post Office Box 31
Sacramento, CA 95812-0031
Call (916) 445-3338 for general information or questions.



ASSESSOR'S OFFICE

Douglas Harms, Assessor

*Steve Yauch, Assistant Assessor – Valuation
Don Oppman, Assistant Assessor – Administration*

1010 Tenth St., Suite 2400 • Modesto, CA 95354
Phone: (209) 525-6461 • Fax: (209) 525-6586

STATEMENT OF STATUS FOR MANUFACTURED HOME

Manufactured Home Owner's Name: _____

Landowner's Name (if different from above): _____

Assessment Number: _____

Fee Parcel Number (if different from Assessment Number): _____

Location Address of Manufactured Home: _____

Mailing Address of Owner (If different from above): _____

Health and Safety Code, Division 13, Section 18551 provides that a manufactured home may be installed on an approved foundation system and be classified as real property or be classified as personal property subject to registration with the Department of Housing and Community Development (HCD).

Do you intend to register this manufactured home as personal property with HCD? Yes _____ No _____

If you do not register this manufactured home, then form HCD 433 must be completed.

Signature: _____ Date: _____

Phone Number(s): _____