

# Application for Manufactured Home Permit

Village of Wellsville

Code Enforcement Office

156 North Main Street P.O. Box 591

Wellsville, NY 14895

Ph: (585) 596-1755 FAX: (585) 593-7260



- A.) This application must be printed and submitted to the Village of Wellsville Code Enforcement Office. Incomplete applications will not be accepted.
- B.) This application must be accompanied with:
- i. Statement that manufactured home bears required HUD and NYS seals, including certification numbers.
  - ii. A copy of manufacturer's installation instructions and specifications, demonstrating compliance with Appendix "E" of the ICC Residential Code and applicable amendments from the NYS Supplement.
  - iii. Letter of acceptance from New York State.
  - iv. Pier layout that shows tie-down equipment and layout
  - v. Site plan showing location of manufactured home (setbacks) and location of units on adjacent lots.
- C.) Applicant shall provide certificates of insurance for **Workmen's Compensation** (C105.2, U-26.3, CE-200), and **Disability**(DB-120.1, CE-200).
- D.) No person may manufacture, sell, install, or service a manufactured home unless **certified and a certified individual** is on site during all work operations.
- E.) The application fee shall be based on the Schedule of Fees available from the Code Enforcement Office and shall be submitted upon approval of application.

Address of Job Site \_\_\_\_\_ Install Start Date \_\_\_\_\_

Name of Manufacturer \_\_\_\_\_ Estimated End Date \_\_\_\_\_

Model Designation \_\_\_\_\_ Proposed Cost \_\_\_\_\_

Manufacturer Serial # \_\_\_\_\_

Is the property located in the floodplain?   y   n If yes, a Floodplain Development Permit will be required. Contact the CEO for the required application and additional information.

Included is an application for:  Shed  Garage  Carport  Solid Fuel Appliance  
(separate app required)

Resident Owner \_\_\_\_\_ Phone Number \_\_\_\_\_

Resident Owner Address \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Installer Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Installer Address \_\_\_\_\_ Certification # \_\_\_\_\_

*Acceptance does not relieve the agent, applicant, architect, builder, engineer, or owner from complying with any of the provisions of the NYS Building Code, Energy Conservation Construction Code, SEQRA Act, Local Zoning, etc., whether stated, implied, or omitted in the plans and specifications submitted for the building permit. Incorrect information may result in revocation of permit.*

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only**

Site review by \_\_\_\_\_ Unit Inspection \_\_\_\_\_

Approved/Denied by \_\_\_\_\_ Accessory Structure:  Garage  Carport   
Fireplace  Solid Fuel Burning Appliance

Permit Fee \_\_\_\_\_ Receipt # \_\_\_\_\_ Permit # \_\_\_\_\_ Date Issued \_\_\_\_\_