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PERMIT APPLICATION FOR MANUFACTURED HOME INSTALLATION

Rev. 06/10/2016

SITE ADDRESS:		Lot No.
CITY:	ZIP CODE:	COUNTY:
NEAREST CROSSROADS/DIRECTIONS:		
New Home <input type="checkbox"/> Used Home <input type="checkbox"/> Private Property <input type="checkbox"/> Manufactured Home Park <input type="checkbox"/> Park Name:		
ZONING DISTRICT APPROVAL: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A FLOOD PLAIN ZONE: <input type="checkbox"/> YES <input type="checkbox"/> NO		
LAND OWNERS NAME:		TELEPHONE:
HOME OWNERS NAME:		TELEPHONE:
MAILING ADDRESS:		
CITY:	STATE:	ZIP:
APPLICANT : (circle) – retailer, park manager, home/land owner, installer, or other _____		
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
E-MAIL ADDRESS:		
FOUNDATION WORK:	NEW <input type="checkbox"/> EXISTING <input type="checkbox"/>	INSTALLER'S LICENSE NO.
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
E-MAIL ADDRESS:		
SET CREW WORK:	INSTALLER'S LICENSE NO.	
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
E-MAIL ADDRESS:		
ELECTRICAL:	ELECTRICAL SERVICE PROVIDER:	FAX NUMBER:
Service on: <input type="checkbox"/> HOME <input type="checkbox"/> POLE Service size: <input type="checkbox"/> 100 Amp <input type="checkbox"/> 200 Amp		
INSTALLERS LICENSE OR CONTRACTOR(S) REGISTRATION No.		
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
E-MAIL ADDRESS:		
PLUMBING:	INSTALLER'S LICENSE NO.	
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
E-MAIL ADDRESS:		
GAS:	INSTALLER'S LICENSE NO.	
NAME:		ADDRESS:
TELEPHONE:	FAX:	CELLULAR:
EMAIL ADDRESS:		

MANUFACTURED HOME DESIGN CRITERIA

- Home Dimensions _____ x _____ Frame Size _____
- Basement Dimensions _____ x _____
- Crawl Space Dimensions _____ x _____
- Footer Dimensions _____ x _____
- Block (max 3 courses, reinforced & grouted)
- Block ACI 318, BIA Eng. Brick Masonry
- Block NCMA TR-68A ACI/ASCE 530
- Poured Concrete (8" wide with footer)
- Poured Concrete (12" wide without footer)
- Anchor System Type: _____
- TRANSVERSE I-Beam Foundation
- Perimeter Load-Bearing Wall Foundation
- ABS pads
- Slab or Runner Foundation
- Soil bearing capacity: _____ per square feet.
Tested by: _____ Date: _____

- Manufacturer's Foundation Drawing with Footing Location and Sizes Indicated on the Drawing
OR
Manufacturer's Foundation Drawing with Footing Locations only and Footing Size Indicated by providing a Copy from the Installation Manual of the Appropriate Sizing Tables with the Size of the Footings Indicated
- OHIO Design Professional's Drawing with Footing Locations and Sizes Indicated. Ohio Architect's and Professional Engineer's may design slabs, runners, etc
- Foundation Drawing to Scale with Footing Locations And Footing Size Indicated by providing a Copy from The Ohio Installation Standards OAC4781 with the of the Appropriate Sizing Tables with the Size of the Footings Indicated

MANUFACTURER: (possible verification at later date)

Name: _____ Year: _____ Serial No.: _____	HUD No.(s) _____
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CERTIFICATION (Read all sections carefully before signing, and attach any drawings and/or supporting documents)

ALL PERMITS SHALL EXPIRE 180 DAYS FROM THE DATE OF ISSUE. 180 DAY EXTENTIONS MAY BE GRANTED IF REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED.

I FULLY UNDERSTAND THAT NO EXCAVATION, INSTALLATION,, ELECTRICAL OR MECHANICAL INSTALLATION, OR ALTERATION OF THIS MANUFACTURED HOME, OR PART THERE OF SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE AUTHORITY HAVING JURISDICTION. I FURTHER UNDERSTAND THAT NO PERSON, FIRM OR CORPORATION SHALL INSTALL, OCCUPY, OR PERMIT OCCUPANCY OF THE ABOVE IN CONFLICT WITH OR IN VIOLATION WITH CHAPTER 4781 OF THE OMHC RULES.

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the OMHC certified inspector and ESI shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the OMHC Rule(s) applicable to such permit.

Governmental agencies, other than OMHC and utility companies have rules and policies regulating the placement of utility service lines in the Manufactured home. The issuance of permits and the performance of inspection do not constitute the placement of utility lines under such policies. It is the sole responsibility of the owner and the owner's agent to determine and comply with applicable rules and policies of other governmental agencies and utility companies. For information, contact the appropriate utility company.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

SIGNATURE OF APPLICANT:	DATE:
PRINT NAME:	