



# Clark County Department of Building & Fire Prevention

4701 West Russell Road, Las Vegas, NV 89118 ~ (702) 455-3000 ~ Fax (702) 221-0630

## Manufactured Housing Permit Application

Samuel D. Palmer, Acting Director/Building & Fire Official • Girard Page, Fire Marshal

ASSESSOR PARCEL#: \_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_

PARK/ESTATE NAME: \_\_\_\_\_

SPACE/LOT: \_\_\_\_\_ TENANT NAME: \_\_\_\_\_ SET UP BY: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTACT ADDRESS: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

APPLICATION NO.: \_\_\_\_\_

### DETAILED DESCRIPTION OF WORK

### PERMIT TYPE

- REPLACEMENT WITH EXISTING UTILITIES
- REPLACEMENT WITH NEW UTILITIES
- REPLACEMENT WITH NEW UTILITIES

- PARK
- ESTATE
- PRIVATE PROPERTY
- TEMPORARY USE DURING CONSTRUCTION

PERMANENT RESIDENT PERMIT NO: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

### CONTRACTOR'S DECLARATION

### DESCRIPTION OF MANUFACTURED BUILDING

I hereby certify that I am licensed under the provisions of N.R.S. 624.

ST. LIC. NO.: \_\_\_\_\_ CLASS: \_\_\_\_\_

BUSINESS LIC. #: \_\_\_\_\_ PHONE#: \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTRACTOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_

MODEL OR STYLE: \_\_\_\_\_

YEAR: \_\_\_\_\_ AMP: \_\_\_\_\_

SIZE: \_\_\_\_\_ SQ. FT.: \_\_\_\_\_

CONTRACTOR INFORMATION

APPLICANT

I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and state laws relating to building construction, and hereby authorize representatives of this county to enter upon the above mentioned property for inspection purposes.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

HUD/UBC CERTIFICATION/REGISTRATION NO: \_\_\_\_\_

### COMMENTS

### PERMIT FEES

Permit Fee: \$ \_\_\_\_\_

Park Tax: \$ \_\_\_\_\_

MSHCP: \$ \_\_\_\_\_

MSHCP Report: \$ \_\_\_\_\_

Transportation Tax: \$ \_\_\_\_\_

TOTAL FEE: \$ \_\_\_\_\_

Cash  Check No: \_\_\_\_\_

Issued By: \_\_\_\_\_ Date: \_\_\_\_\_

Civil Engineering Review By: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Review By: \_\_\_\_\_ Date: \_\_\_\_\_

Bldg Plan Review By: \_\_\_\_\_ Date: \_\_\_\_\_