



# OTSEGO COUNTY CODE ENFORCEMENT

Mailing Address: 197 Main Street, Cooperstown, New York 13326  
(607) 547-4214 FAX (607) 547-7597  
[https://www.otsegocounty.com/departments/code\\_enforcement/index.php](https://www.otsegocounty.com/departments/code_enforcement/index.php)

## MANUFACTURED HOME PERMIT APPLICATION

**\*\*All application fees are non-refundable\*\***

1. **911 Address:** \_\_\_\_\_ Property Tax #: \_\_\_\_\_  
Park Name & Lot #: \_\_\_\_\_

2. **Town/Village for Proposed work:** \_\_\_\_\_

3. **Owner(s) Name:** \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

4. **Manufacturer:** \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_  
Please check one: Singlewide: \_\_\_\_\_ Doublewide: \_\_\_\_\_  
Please check one: Insulated Skirting: \_\_\_\_\_ Non-Insulated Skirting: \_\_\_\_\_  
New Home: Yes / No Relocation: Yes / No Installation Manual: Yes / No  
Size (Total Sq Ft.): \_\_\_\_\_ No. of Bedrooms: \_\_\_\_\_  
Type of Foundation: \_\_\_\_\_

5. **Retailer:**  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Certification Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

6. **Installer:**  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Certification Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

7. **Yes or No:**  
Garage: \_\_\_\_\_ Porch: \_\_\_\_\_ Deck: \_\_\_\_\_  
Septic New: \_\_\_\_\_ Septic Existing: \_\_\_\_\_  
Well New: \_\_\_\_\_ Well Existing: \_\_\_\_\_

If applicable:

8. Zoning or Land use Requirements have been met: \_\_\_\_\_  
9. Dept of Environmental Conservation (DEC) requirements have been met: \_\_\_\_\_  
10. NYS Health Department requirements have been met: \_\_\_\_\_  
11. Flood Plain and/or Subdivision requirements have been met: \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_