



## Directions for Completing the Application for Manufactured Home Building Permit

**Application directions** - Complete pages 2 & 3 of the application and attached worksheets as outlined below. All boxes 1 through 13 must be completed in full or the application will be returned. email the completed form along with all required documents in PDF format to Cincinnati Inspection Services at [manager@cincinnatiinspections.com](mailto:manager@cincinnatiinspections.com) or send by mail to PO Box 388, Trenton, OH 45067

1. **TYPE OF PROJECT** Check all the boxes that apply to the scope of work proposed in this project. Every scope of work checked must be accompanied with the appropriate fees. Without establishing the proper scope of work, the division will be unable to establish the inspection schedule for the project.
2. **PROPERTY LOCATION** Please provide complete information identifying the location of the property where the construction or renovation will occur.
3. **BRIEF DESCRIPTION OF THE SCOPE OF WORK COVERED UNDER THIS APPLICATION** Please provide a brief description of the scope of work. Please include the names of the areas or rooms affected by the construction when only a portion of building is covered under the permit application.
4. **PROPERTY OWNER INFORMATION** Please provide complete answers to each item. If the building is owned by a corporation, please provide the name of the corporation and identify a contact person in the "Attention" section.
5. **APPLICANT INFORMATION** Provide complete information. All project correspondences will be directed to the project applicant.
6. **DESIGNER INFORMATION** If applicable, the information of a design professional shall be provided including the design professional's Ohio registration number.
7. **INSTALLER INFORMATION** Pursuant to Section 4781 of the Ohio Administrative Code, if a manufactured home is to be installed in a manufactured home community, the installation must be completed by a licensed manufactured home installer.
8. **MANUFACTURER INFORMATION** The information of the manufacturer of the home including the model number, serial number and HUD number must be provided.
9. **MANUFACTURED HOME PARK INFORMATION** If the proposed manufactured home is to be installed in a manufactured home park, the park information including the name of the park operator, lot number and address must be provided.
10. **GENERAL BUILDING INFORMATION** Provide all necessary building information in this section. The information provided here will help in calculating the application fee and then be shown in the final certificate of occupancy. The application cannot be processed if this section is not complete.
11. **APPLICATION FEES** Choose one of the fees that is applicable according to the type of project shown in section 1 of this application and based off of the attached price list on page 2. All building floor area for calculation shall be based on every 100 square feet, and it shall be rounded up to the next 100s for calculation purpose. For example, if it is 103 square feet, it should be rounded up to 200 square feet for fee calculation.
12. **PAYMENT METHOD** The permit applicant must indicate one of the preferred payment methods for this permit application.
13. **CERTIFICATION** The permit applicant must identify, sign, and date this application in this section.
14. **OFFICE USE ONLY** This section is reserved for our office use only. Do not mark in this area.

Once the plans and permit application have been examined and approved, a permit will be issued to the installer. A copy must remain at the job site at all times during construction pursuant to Ohio Administrative Code 4781-7-09(I). Inspections may be obtained by calling Cincinnati Inspection Services at 513-696-9728 or by emailing [manager@cincinnatiinspections.com](mailto:manager@cincinnatiinspections.com). Once all inspections have been obtained, a final manufactured home inspection seal will be issued and placed on the home pursuant to OAC 4781-7-03(E)(5).

## Application for Manufactured Home Building Permit

<b>1</b>	<b>Type of Project</b>		
<input type="checkbox"/> New home (from manufacturer or dealer) <input type="checkbox"/> Used or relocated home <input type="checkbox"/> Addition to home <input type="checkbox"/> Alteration of home			
<b>2</b>	<b>Property Location</b>		
Street Address _____		Private Property <input type="checkbox"/> Yes <input type="checkbox"/> No	
City/Township _____		ZIP _____	County _____
Utility Company _____			
Directions _____			
<ul style="list-style-type: none"> <li>▪ Is this home installed in a manufactured home park? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></li> <li>▪ Is this project/building located within your local flood plain? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></li> <li>▪ Will the property owner reside in this manufactured home? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></li> </ul>			
<b>3</b>	<b>Brief Description of the Scope of Work Covered Under This Application</b>		
<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black;"></div>			
<b>4</b>	<b>Property Owner Information</b>		
Owner Name _____		Attention _____	
Street Address _____		City _____	State _____ ZIP _____
Phone Number _____		Fax _____	E-mail _____
<b>5</b>	<b>Applicant Information</b>		
Applicant _____		Attention _____	
Street Address _____		City _____	State _____ ZIP _____
Phone Number _____		Fax _____	E-mail _____
<b>6</b>	<b>Designer Information</b>		
		<input type="checkbox"/> Architect	<input type="checkbox"/> Engineer
		<input type="checkbox"/> Fire protection system designer	
Designer _____		Ohio Registration Number _____	
Street Address _____		City _____	State _____ ZIP _____
Phone Number _____		Fax _____	E-mail _____
<b>7</b>	<b>Installer Information (If applicable)</b>		
Installer _____		Ohio Registration Number _____	
Street Address _____		City _____	State _____ ZIP _____
Phone Number _____		Fax _____	E-mail _____
<b>8</b>	<b>Manufacturer Information</b>		
Company _____		Model Number _____	
Serial Number _____		HUD Number _____	

<b>9</b>	<b>Manufactured Home Park Information (If applicable)</b>	
Park Name _____		Park operator _____
Street Address _____		City _____
County _____	State _____	ZIP _____ Lot Number _____
Phone Number _____	Fax _____	E-mail _____
<b>10</b>	<b>General Building Information</b>	
<div style="margin-left: 20px;"> <b>▪ Building Foundation</b>  Type of building footer? _____ Standard Detail Number _____  Type of foundation wall? _____ Standard Detail Number _____  Type of building anchor? _____ Standard Detail Number _____  Special foundation designed by? _____ License Number _____ </div> <div style="margin-left: 20px; margin-top: 10px;"> <b>▪ Building Utility Systems</b>  Electrical service? _____ Permanent _____ Temporary      Furnace? _____ Gas _____ Electric _____  Sanitary Sewer? _____ City Sewer _____ Septic tank      Water heater? _____ Gas _____ Electric _____ </div>		
<b>11</b>	<b>Application Fees (For each new or relocated used manufactured home)</b>	
Plans Review, Permit, Seal _____ Footing Inspection _____ Final Inspection _____ Electrical Safety Inspection _____ Temporary Occupancy Permit, if applicable _____ <div style="text-align: right; margin-top: 20px;">Total fee (Sum of all applicable) \$ _____</div>		
<b>12</b>	<b>Method of Payment</b> _____ Check      _____ Credit Card      _____ Bank ACH	
<b>13</b>	<b>Certification: I certify that I am the</b> <div style="margin-left: 40px;"> _____ Owner      _____ Installer  _____ Dealer      _____ Park operator </div> <p>and all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence regarding this application should be sent to my attention at the address shown above.</p> <p>Signature _____</p> <p>Print Name _____ Date _____</p>	<b>14 THE AREA BELOW IS FOR OFFICIAL USE ONLY:</b> Date received _____ Check No. _____ Verification No. _____ Processed by _____ <div style="margin-top: 20px;"> _____ </div>

The maximum number of inspections included in the fees provided above will be three. Any additional inspection will be subject to a charge of up to \$175 per inspection.