



DEPT. OF BUILDING & ELECTRICAL INSPECTION

3700 Coleman Road, Paducah, KY 42001

Phone 270.444-4724 / Fax 270.444-1369

MANUFACTURED HOME PERMIT APPLICATION

PROJECT INFORMATION

Site Address _____

Is Property Owned by Applicant: Yes _____ No _____

Owner Name (if not applicant) _____

Park Name (if applicable) _____

APPLICANT INFORMATION

Last Name _____ First _____

Address _____ City _____ State _____ Zip _____

Contact Name _____ Phone _____ Cell _____

PROPERTY INFORMATION

(If not in mobile home park)

Size and Description of Property _____

Home setback from property lines: _____
Front Rear L. Side R. Side

*List other structures on property _____

DESCRIPTION OF WORK

Dimensions of Home _____ Date Purchased _____

Electrical Contractor _____ CE# _____

Master Electrician _____ ME# _____

Power Company _____ Health Dept. Release # _____ B-1 Seal: Yes _____ No _____

Certified Installer _____ Date Installed _____

CERTIFICATION

I hereby certify that I am the owner of record 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 authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. I further testify that the above information is true and accurate.

Signature _____

Date _____

Departmental Approvals: Zoning _____

Date _____

McCracken County Tax Administrator
 PO Box 2658
 Paducah, KY 42002-2658
 270-444-4722/Fax 270-444-4737

Project Name _____
 Site Address _____
 Date Sent _____
 Date Approved _____

Permit will not be issued until Tax Administrator approves all Contractors and Subcontractors. Please fill in all addresses and phone numbers below. Thank you.

MANUFACTURED HOMES – CONTRACTOR & SUBS LIST

| Contractor & Subcontractor | Name | Address | Phone |
|---------------------------------------|-------------|----------------|--------------|
| General Contractor (mover) | | | |
| Heating & Air | | | |
| Electrical | | | |
| Masonry | | | |
| Footing | | | |
| Block | | | |
| Septic | | | |
| Plumbing | | | |

I certify these are the subcontractors that will be working on the project. If any changes are Made, I will notify the McCracken County Tax Administrator for approval the day of change.

Signed _____ Date _____