

### CHECK LIST – MOBILEHOME PERMANENT FOUNDATION BUILDING PERMIT SAN JOAQUIN COUNTY COMMUNITY DEVELOPMENT DEPARTMENT 1810 E. HAZELTON AVENUE, STOCKTON CA 95205 BUSINESS PHONE: (209) 468-3121 INSPECTION REQUEST-24 HOUR RECORDER: (209) 468-3165

| CHECKLIST |  |               |  |  |
|-----------|--|---------------|--|--|
|           | THE FOLLOWING INFORMATION AND DOCUMENTATION MUST BE SUBMITTED TO<br>DEVELOPMENT SERVICES BEFORE YOUR APPLICATION CAN BE PROCESSED.   | Check<br>-off |  |  |
| 1.        | One completed application, begin the process at the Planning Division Counter.   |               |  |  |
| 2.        | Two complete sets of state approved foundation system drawings or construction drawings, drawn to scale, <u>wet</u> signed by the licensed designer (18" x 24" size paper) to include:   |               |  |  |
| ;         | a. Site plan drawn to scale showing property lines, north arrow, easements, well, septic tank, leach<br>field, all existing and proposed structures with distances to property lines and between<br>structures.  |               |  |  |
|           | b. Installation manual with department approvals.  |               |  |  |
| (         | c. 433A, 433B, 513c (attached).  |               |  |  |
| (         | <ul> <li>Proof of property ownership with legal description (recorded deed) or 35 year transferable<br/>lease.</li> </ul>  |               |  |  |
| (         | e. Proof of manufactured home ownership, HCD Certificate of Title or DMV Pink Slip   |               |  |  |
| 1         | f. Floor plan.   |               |  |  |
| 9         | g. Marriage line drawing and calculations.   |               |  |  |
|           | h. Skirting Detail.  |               |  |  |
| 3.        | Structures located within flood or fire hazard zones shall be designed in accordance with San Joaquin County ordinances.   |               |  |  |
|           | Section 72 of the Revenue and Taxation Code now requires a copy of a complete floor plan of the proposed work to be given to the County Assessor. Therefore, an <b>additional floor plan</b> shall be submitted with all the standard plan submittal requirements.                               |               |  |  |
| 5.        | Public Works Department counter may require the following: (468-3000)  |               |  |  |
|           | <ul> <li>a. One <u>partial</u> set of legible construction drawings prepared by a licensed California architect<br/>or engineer to include <u>only</u> the following: a site plan, civil drawings &amp; erosion control plan.<br/>(Submit retention pond calculations if applicable.)</li> </ul> |               |  |  |
|           | b. State of California Notice of Intent (NOI) and Waste Discharge Identification (WDID) number if applicable.  |               |  |  |
|           | c. Specifications, Maintenance Instruction, & Maintenance Agreement for storm water filtration system if applicable.   |               |  |  |
|           | e. Preliminary flood elevation certificate if applicable (call 468-3060 for determination).  |               |  |  |
| 6.        | Permit Deposit, (Credit cards <b>NOT</b> accepted)   |               |  |  |

| SITE PLAN CHECKLIST   |                  |                |                      |
|---|------------------|----------------|----------------------|
| The following information must be shown on your site plan before our department can beg   | in processing    | your applica   | tion.                |
| INFORMATION NEEDED FOR COMPLETE MAP   | ITEM<br>COMPLETE | ITEM<br>NEEDED | ITEM NOT<br>REQUIRED |
| Size: The Site Plan must be drawn on minimum 18"x 24" material.   |                  |                |                      |
| North Arrow, Date and Scale: Use an engineer's scale (i.e., 1" to 20' or 1" to 40',   |                  |                |                      |
| preferred). The direction of "north" should be pointing towards the top of the page.<br>Streets and Easements: Location and names of all streets and easements bordering on   |                  |                |                      |
| the property with access details.   |                  |                |                      |
| Property Lines: All property lines or boundary lines of the parcel with dimensions.   |                  |                |                      |
| Vicinity Map: A vicinity map showing the location of the property in relation to  |                  |                |                      |
| surrounding streets.  |                  |                |                      |
| Existing and Proposed Development: All existing structures (labeled 'existing') and any proposed structures (labeled 'proposed') with dimensions, square footage and          |                  |                |                      |
| distances from other structures and property lines. Any existing structures planned   |                  |                |                      |
| for removal should be shown with dashed lines. The use and number of floors   |                  |                |                      |
| should be labeled on each structure.  |                  |                |                      |
| Parking and Driveways: The location, dimensions and surface material of all existing  |                  |                |                      |
| and proposed parking and driveways. Calculations indicating the number of required spaces must be shown. (Refer to 'County Parking Lot Standards').                           |                  |                |                      |
| Water Wells: The location of existing and proposed water wells on-site and any off-site   |                  |                |                      |
| wells within 150' of the proposed development. Wells must be meet the following   |                  |                |                      |
| setbacks:   |                  |                |                      |
| <ul> <li>5' from structures;</li> <li>50' from septic tanks;</li> </ul>   |                  |                |                      |
| - 100' from leach lines;  |                  |                |                      |
| - 150' from sumps or seepage pits; and  |                  |                |                      |
| - 10' from property lines.  |                  |                |                      |
| If public water will be utilized, a "will-serve" letter must be submitted from the service provider   |                  |                |                      |
| Sewers and Septic Tanks: The location of the sewer outlet, public sewer hook-up, or   |                  |                |                      |
| existing and proposed sewage disposal systems and any off-site sewage disposal  |                  |                |                      |
| systems within 150' of the property. Septic tanks must meet the following setbacks:<br>5' from property lines, structures, driveways and swimming pools;                      |                  |                |                      |
| - 50' from water wells.   |                  |                |                      |
| Leach lines must meet the following setbacks:   |                  |                |                      |
| <ul> <li>10' from structures, driveways and swimming pools;</li> </ul>  |                  |                |                      |
| - 100' from wells, streams and waterways.   |                  |                |                      |
| <ul> <li>5' to 75' from property lines depending on zoning or the location of septic<br/>systems on adjoining</li> </ul>  |                  |                |                      |
| properties (this requirement also applies to seepage pits).   |                  |                |                      |
| If public sewage disposal will be utilized, a "will-serve" letter must be submitted from the  |                  |                |                      |
| service provider.   |                  |                |                      |
| Storm Drainage: The location of existing and proposed storm drainage facilities(check   |                  |                |                      |
| with Engineering staff regarding design criteria). If subject to flooding, the 100-year flood elevations must be shown. Indicate any unusual topographic features of the site |                  |                |                      |
| (e.g. steep slopes, or drainage courses).   |                  |                |                      |
| Landscaping: The location of existing and proposed landscaping and trees 6" or greater  |                  |                |                      |
| in diameter (note any trees to be removed). Calculation indicating the percentage of the  |                  |                |                      |
| net site area to be landscaped must be shown. (Refer to County Landscaping  |                  |                |                      |
| Standards).<br>Signs, Fences, Storage and Trash Enclosures: The location of and height of all existing  |                  |                |                      |
| and proposed signs and fences and the location and dimensions of all open and/or  |                  |                |                      |
| enclosed storage and trash receptacles.   |                  |                |                      |
| Grading and Contours need to be shown.  |                  |                |                      |
| SITE PLANS MUST BE COMPLETE AND LEGIBLE   |                  |                |                      |
| Before applying, check your Site Plan to make sure that it contains all of the information  |                  |                |                      |
| cited above. You are encouraged to have one of our counter staff review your draft Site   |                  |                |                      |
| Plan prior to having copies run.<br>Faint prints and light blue lines cannot be accepted because they cannot be reproduced  |                  |                |                      |
| or microfilmed  |                  |                |                      |

| RECORDING REQUESTED BY:    |   |
|----------------------------|---|
| AND WHEN RECORDED MAIL TO: |   |
| NAME                       |   |
| STREET<br>ADDRESS          |   |
| CITY,<br>STATE<br>and ZIP  | SPACE ABOVE THIS LINE FOR RECORDER USE ONLY |

## NOTICE OF MANUFACTURED HOME (MOBILEHOME) OR COMMERCIAL MODULAR INSTALLATION ON A FOUNDATION SYSTEM

Recording of this document at the request of the enforcement agency indicated is in accordance with California Health and Safely Code Section 18551(a). This document is evidence that the enforcement agency has issued a certificate of occupancy for installation of the unit described hereon, upon the real property described with certainty below, as of the date of recording. When recorded, this document shall be indexed by the county recorder to the named owner of the real property and shall be deemed to give constructive notice as to its contents to all persons thereafter dealing with the real property.

| YOWNER  |  |  | ENFORCEME   | NT AGENCY ISSUING PERM   | IT and CERTIFICATE C   | OF OCCUPANCY   |
|---|--|--|---|--|--|--|
|   |  |  |   |  |  |  |
| SS  |  |  | MAILING ADD   | RESS   |  |  |
| COUNTY  | STATE  | ZIP  | CITY  | COUNTY   | STATE  | ZI   |
|   |  |  | BUILDING PE   | RMIT NO  | TELEPHONE N  | UMBER  |
| MAILING ADDRESS, IF DIFFERENT                     |  |  | DOILDING  |  |  |  |
| COUNTY  | STATE  | ZIP  | SIGNATURE   | OF ENFORCEMENT AGENC   | Y OFFICIAL   | DATE   |
| UNIT OWNER (If also property owner, write "SAME") |  |  | DEALER NAME (If not a dealer sale, write "NONE")  |  |  |  |
| ESS   |  |  | DEALER LICE   | ENSE NO.   |  | ·····  |
| COUNTY  | STATE  | ZIP  |   |  |  |  |
| CRIPTION  |  |  |   |  |  |  |
| R'S NAME  |  | DATE OF MANUFACT   | URE   | МС   | DDEL NAME/NUMBER   |  |
| SERIAL NUMBER(S)                                  |  |  |   | IN   | SIGNIA/LABEL NUMBE   | R(S)   |
| ARCEL NUMBER                                      |  | HCD REGISTRATION   | DECAL NUMBER  | M  | CONUMBER   |  |
| TY LEGAL DESCRIPTION                              |  |  |   |  |  |  |
|   |  |  | <u></u>   |  |  |  |
|   |  |  |   |  |  |  |
|   | COUNTY MAILING ADDRESS, IF DIFFERENT COUNTY I also property owner, write "SAME") ESS COUNTY CRIPTION ER'S NAME R(S) ARCEL NUMBER | COUNTY STATE VAILING ADDRESS, IF DIFFERENT COUNTY STATE also property owner, write "SAME") ESS COUNTY STATE CRIPTION ER'S NAME R(S) ARCEL NUMBER | COUNTY STATE ZIP VAILING ADDRESS, IF DIFFERENT COUNTY STATE ZIP raiso property owner, write "SAME") ESS COUNTY STATE ZIP CRIPTION ER'S NAME DATE OF MANUFACTI R(S) LENGTH X WIDTH ARCEL NUMBER HCD REGISTRATION | INVITES     MAILING ADD       ISS     MAILING ADD       COUNTY     STATE       ZIP     CITY       MAILING ADDRESS, IF DIFFERENT     BUILDING PE       COUNTY     STATE       COUNTY     STATE       COUNTY     STATE       I also property owner, write "SAME")     DEALER NAM       ESS     DEALER NAM       COUNTY     STATE       COUNTY     STATE       COUNTY     STATE       ZIP     CRIPTION       ER'S NAME     DATE OF MANUFACTURE       R(S)     LENGTH X WIDTH       ARCEL NUMBER     HCD REGISTRATION DECAL NUMBER | INVILLY     STATE     MAILING ADDRESS       COUNTY     STATE     ZIP     CITY     COUNTY       MAILING ADDRESS, IF DIFFERENT     BUILDING PERMIT NO.       COUNTY     STATE     ZIP       COUNTY     STATE     ZIP       I also property owner, write "SAME")     DEALER NAME (If not a dealer sale, write       ESS     DEALER NAME (If not a dealer sale, write       COUNTY     STATE     ZIP       CRIPTION     DATE OF MANUFACTURE     MC       R(S)     LENGTH X WIDTH     IN       ARCEL NUMBER     HCD REGISTRATION DECAL NUMBER     MC | Image: SS     MAILING ADDRESS       COUNTY     STATE     ZIP     CITY     COUNTY     STATE       VAILING ADDRESS, IF DIFFERENT     BUILDING PERMIT NO.     TELEPHONE N       COUNTY     STATE     ZIP     SIGNATURE OF ENFORCEMENT AGENCY OFFICIAL       COUNTY     STATE     ZIP     DEALER NAME (If not a dealer sale, write "NONE")       ESS     DEALER LICENSE NO.     DEALER LICENSE NO.       COUNTY     STATE     ZIP       COUNTY     STATE     ZIP |



HCD FORM 433(A) Rev 3/2006

WHITE—County Recorder CANARY—HCD

PINK---Applicant GOLDENROD---Building Dept.

## MANUFACTURED HOME (MOBILEHOME) OR COMMERCIAL MODULAR INSTALLATION ON A FOUNDATION SYSTEM HCD FORM 433(A) Rev 3/2006

The original and three (3) copies of this form are to be completed with all available information at the time a building permit is issued for the installation of a manufactured home (mobilehome) or a commercial modular on a foundation system pursuant to Section 18551(a) of the Health and Safety Code. In addition, the enforcement agency may obtain a title search printout from the Department of Housing and Community Development's (HCD) Registration and Titling Program. The information on the title search should be compared to the information shown on the surrendered HCD Certificate of Title or DMV pink slip(s) and registration card(s). This will ensure that the most recent ownership and registration documents have been submitted to the enforcement agency and that the registered owner owns the manufactured home, mobilehome, or commercial modular free of any liens or encumbrances. Where the title search indicates a recorded legal owner or junior lienholder, or both, evidence should be provided to the enforcement agency that the legal owner or junior lienholder, or both, evidence should be provided to the attachment of the unit upon the satisfaction of their liens by the registered owner. For information on establishing a requestor account for obtaining title search printouts on-line, please call (916) 323-9229 or via the internet: <a href="http://www.hcd.ca.gov/codes/rtf">http://www.hcd.ca.gov/codes/rtf</a>.

After the installation has been approved, and on the same day the certificate of occupancy has been issued, the enforcement agency shall record this form (completed in full) with the county recorder's office.

Upon recordation, the enforcement agency shall transmit a recorded copy of this form, a copy of the certificate of occupancy, fees collected in the amount of \$11 per transportable section, and (if unit currently titled as personal property) all applicable titles, certificates, license plates or decals to:

Department of Housing and Community Development Division of Codes and Standards Manufactured Housing Section Post Office Box 31 Sacramento, CA 95812-0031 Call (916) 445-3338 for general information or questions.

#### NOTICE TO ASSESSOR HCD 433(B) 4/86

THIS FORM MUST BE COMPLETED BY THE OWNER OF A MANUFACTURED HOME MOBILEHOME OR COMMERCIAL COACH AND FORWARDED TO THE COUNTY ASSESSOR UPON COMPLETION OF THE INSTALLATION OF THE UNIT ON A FOUNDA-TION SYSTEM PURSUANT TO SECTION 18551 HEALTH AND SAFETY CODE.

#### **ORIGINAL PURCHASE PRICE FOR:**

| 1. The Basic Unit                     | \$    | Type of Exterior Wall Cove | ring:(Metal      | , Wood, etc.)          |
|---------------------------------------|-------|----------------------------|------------------|------------------------|
| 2. Optional Equipment & Upgrades      | \$    | Type of Roof Covering      | (Metal, Wood, Co | mosition, etc.)        |
| 3. Subtotal                           | \$    |                            |                  | • • •                  |
| 4. Accessories & Accessory Structures | \$    | Heating Type: 🔄 Fo         | rced Air 🛄 Floo  | r or Wall              |
| 5. Other (Specify)                    | _ \$  | Air Conditioning:          |                  | Tons                   |
|                                       | •     | Evaporative Cooler:        | YES NO           |                        |
| 6. Delivery & Installation            | \$    | Built-in Cooktop:          | 🗌 YES 🗌 NO       |                        |
| 7. TOTAL SALES PRICE                  | \$    | Built-in Oven:             | 🗌 YES 🗌 NO       |                        |
|                                       |       | Built-in Dishwasher:       | 🗌 YES 🗌 NO       |                        |
| DOES THE BASIC PRICE INCLU            | JDE:  | Built-in Wet Bar:          | 🗌 YES 🗌 NO       |                        |
| The Towbar(s) YES NO                  |       | <b>Refrigerator:</b>       | 🗌 YES 🗌 NO       |                        |
| Tires & Wheels YES N                  |       | Roof Overhang (Eaves):     | 🗌 YES 🗌 NO       | inches                 |
| Wheelhubs & Axles YES N               |       | Furniture Included:        | 🗌 YES 🗌 NO       | Value \$               |
|                                       | -     |                            |                  | (LENGTH $	imes$ width) |
| LIST NUMBER OF ROOMS:                 |       | Carport:                   | 🗌 YES 🗌 NO       | ×                      |
|                                       |       | Awning:                    | 🗌 yes 🗌 no       | ×                      |
| Bedrooms Dining                       | Room  | Porch:                     | 🗌 yes 🗌 no       | ×                      |
|                                       |       | Garage:                    | 🗌 YES 📋 NO       | ×                      |
| Baths Family                          | Room  | Storage Shed:              | 🗌 YES 🗌 NO       | ×                      |
| Kitchen Utility                       | Room  | Skirting:                  | YES NO           | LINEAL<br>FEET         |
| Living Room Other                     | Rooms |                            |                  |                        |

The sales price as shown does not include any amount for any in-place location.

The Assessor's Parcel Number of the installation site is\_\_\_\_\_

(Signature)

Address

86 41568

Telephone

|                         | CERTIFICATE OF OCCUPANCY  |
|-------------------------|---|
|                         | Manufactured Home Commercial Coach has been affixed to the real property described above by in-<br>ion system pursuant to Health and Safety Code Section 18551. |
| Owner's name:           |   |
| Owner's address:        |   |
| INSIGNIA OR HUD NUMBER: | SERIAL NUMBER OR V.I.N  |
| MANUFACTURER'S NAME     | YEAR OF MANUFACTURE:<br>(Phone)   |
| HCD 513C 4/86           | WHITE—Owner GREEN—HCD BLUE—Building Dept. YELLOW—Applicant  |

# OWNER DECLARATION FOR RELOCATED MANUFACTURED HOME ON PERMANENT FOUNDATION

Please be advised that you, as owner, are responsible for repairing any damage incurred during the relocation of the manufactured home. You may also be responsible for correcting and/or obtaining State permits for structural modifications or plumbing, mechanical or electrical modifications. This will be determined by the inspector, once the manufactured home is brought onto the new location.

Owner/owner's authorized agent (print)

Owner/owner's authorized agent (signature)

Date