



Building Department
207 W. 2nd St., Grandview, WA 98930
Ph (509) 882-9225 Fax (509) 882-9232

Manufactured Home Permit Application

Site Address: _____ Parcel # _____

Building Owner:		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	

Applicant:
Name:
Phone:

Contractor:		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
Contractor: Lic. No:	Exp. Date:	
Contractor's Bid Price:		

Valuation: _____ Dimensions or Sq. Ft of Home _____

Year of Home: _____ Manufacturer of Home: _____

Will the Manufactured Home be place in a park or on private property? _____

Signature of Owner/Authorized Agent

Date