

# Application for Improvement Location Permit to Set Single Wide Manufactured Dwelling

325 S Oak Street, Suite 204, Winchester, IN 47394 765-8-584-8610

Randolph County APC

Fee: \$10.00/New or Replacement \$5.00/Extension or Addition

Date Filed \_\_\_\_\_ Permit Number \_\_\_\_\_

### MANUFACTURED DWELLING OWNER INFORMATION

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

### LANDOWNER INFORMATION

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

### LOCATION OF PLACEMENT OF MANUFACTURED DWELLING

Town/City \_\_\_\_\_ Street No. \_\_\_\_\_

Sub-Division \_\_\_\_\_ Covenant: yes \_\_\_\_\_ no \_\_\_\_\_  
(if applicable) (if in Sub-Division)

Township \_\_\_\_\_ Zoning Classification \_\_\_\_\_ Parcel Number \_\_\_\_\_

### INFORMATION ABOUT MANUFACTURED DWELLING

New Installation  Replace Existing  Extension of Existing

Size of Dwelling: \_\_\_\_\_ Width \_\_\_\_\_ Length \_\_\_\_\_

Overall trailer length (Including tongue) \_\_\_\_\_ (Length in feet) Year Manufactured \_\_\_\_\_

Additional Room : \_\_\_\_\_ x \_\_\_\_\_ Total square feet of living area (Box plus additional room) \_\_\_\_\_

Contractor: \_\_\_\_\_ Cost \$ \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_ Receipt # \_\_\_\_\_

I, the undersigned do hereby swear that I am complying with the restrictions, conditions, and limitations of the zoning district my land is located in.

I have submitted information by way of drawings and/or description the size, shape and intended location and drawn that to the best of my ability on the GIS Map that was provided to me by the Area Planning Office.

I further state that I will notify the Area Planning Office of any changes to this project in either size or location after the Improvement Location Permit has been issued and prior to starting the construction as first was approved using the attached GIS map and building plans or drawings.

\_\_\_\_\_  
OWNER-SIGNATURE

\_\_\_\_\_  
AGENT-SIGNATURE

\_\_\_\_\_  
ACCEPTED BY AREA PLANNING (Office use only)

\_\_\_\_\_  
DATE (Office use only)