



Town of Queensbury
742 Bay Road, Queensbury, NY 12804
P: 518-761-8256 www.queensbury.net

MANUFACTURED HOME Submission Requirements:

1. Completed Manufactured Home permit application (please print neatly or type) – **ONE COPY**
2. Workers Compensation insurance information for **ALL** contractors involved in the project – this is **REQUIRED EVEN FOR SOLE PROPRIETORS** (To obtain a CE-200 Exemption please visit: <https://www.businessexpress.ny.gov/>)

THREE (3) COPIES [1 pdf & 2 paper (min. 11” x 17”) OR 3 paper (min. 11” x 17”)] OF THE FOLLOWING:

3. Structural drawings (which may include, if they are applicable):
 - a. Floor plan
 - b. Foundation plan (see 2015 IRC Appendix E Sect. AE502: foundation systems)
 - c. If the home is being placed on a private parcel (**not** in a manufactured home park or designated zone), you **MUST** provide **stamped engineered drawings** of the permanent foundation plan.
4. Plot plan, using a survey map, if possible, which includes:
 - a. Drawn to scale (i.e. 1 inch = 30 feet)
 - b. Indicate the proposed location with setbacks to the property lines
 - c. Include **all** structures on the property
 - d. Include the location of water supply (well or water lines)
 - e. Include the location & configuration of the septic system or sewer line

ADDITIONAL IMPORTANT INFORMATION:

1. Installer Warranty seal must be provided prior to issuing Certificate of Occupancy.
2. Any **changes to the approved plans prior to or during construction** will require the submittal of amended plans, additional reviews and re-approval.
3. If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury. After **1 year from the initial application date**, 100% of the fee is retained.



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MANUFACTURED HOME APPLICATION

Office Use Only

Permit #: _____

Permit Fee: \$ _____

Rec Fee: \$ _____

Invoice #: _____

Flood Zone? Y TYPE: _____; N

Reviewed By: _____

Project Location: _____

Tax Map ID #: _____

Name of Park (if applicable): _____

PROJECT INFORMATION:

1. Proposed Date of Placement: _____
2. Approximate Value of Home: \$ _____
3. Is the home NEW _____ or a REPLACEMENT _____?
4. Single-wide _____ or Double-wide _____; Size: _____ ft. X _____ ft. = _____ total square feet
5. Foundation support (choose one):

	<u>Size</u>	<u>Depth</u>
___ Piers:	_____	_____
___ Slab:	_____	_____
6. Is the home being placed on a private lot? No _____ Yes** _____
 (**if yes, you must provide stamped engineered drawings of the permanent foundation plan)
7. Total # of rooms (exclude bathrooms): _____; # of bedrooms: _____; # of bathrooms: _____
8. Additional heat source? No _____ Yes _____ If yes, choose one: gas fp* _____ woodstove* _____ wood fp* _____
***Separate fireplace applications are required**
9. Are there any other/existing buildings on the property? No _____ Yes _____; Explain: _____
10. What is the water source? PUBLIC _____ PRIVATE WELL _____ OTHER: _____
11. What type of wastewater system is on the parcel? SEWER _____ PRIVATE SEPTIC _____
12. Do you need a septic permit application? No _____ Yes _____ (if yes, please submit separate septic application)

MANUFACTURED HOME INFORMATION:

(INFORMATION FOUND ON THE PLATE OR STICKER LOCATED IN THE HOME):

Insignia serial #: _____

Name of Manufacturer: _____

Place approval #: _____

Model or component designation (New Home Only): _____

Date of manufacture: _____

CONTACT INFORMATION: PLEASE PRINT LEGIBLY OR TYPE, PLEASE INCLUDE AN EMAIL

• **Applicant:**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: (_____) _____ Land Line: (_____) _____
Email: _____

• **Primary Owner(s):**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: (_____) _____ Land Line: (_____) _____
Email: _____

Check if all work will be performed by the property owner only

• **Contractor(s):** (List all additional contractors on the back of this form)

Contact Name(s): _____
Contractor Trade: _____
Mailing Address, C/S/Z: _____
Cell Phone: (_____) _____ Land Line: (_____) _____
Email: _____

****Workers' Comp documentation must be submitted with this application****

Contact Person for Compliance in regards to this project: _____
Cell Phone: (_____) _____ Land Line: (_____) _____
Email: _____

DECLARATION:

I swear that, to the best of my knowledge and belief, the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises; and, that all provisions of the NYS Building Code, the Zoning Ordinance and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

I have read and agree to the above:

PRINT NAME: _____

SIGNATURE: _____ DATE: _____