

DATE \_\_\_\_\_

PERMIT # MH21- \_\_\_\_\_

**Calhoun County Building Department**

**MOBILE HOME BUILDING PERMIT APPLICATION**

**PERMIT EXPIRES 6 MONTHS FROM DATE OF ISSUE**

(A) OWNERS NAME: \_\_\_\_\_

(B) OWNER'S MAILING ADDRESS: \_\_\_\_\_

(C) OWNER'S PHONE NUMBER \_\_\_\_\_ CELL# \_\_\_\_\_

(D) OWNER'S EMAIL: \_\_\_\_\_

(E) SITE 911 ADDRESS: \_\_\_\_\_

(F) PARCEL ID #: \_\_\_\_\_

(G) CONTRACTOR'S NAME: \_\_\_\_\_

(H) CONTRACTOR'S MAILING ADDRESS: \_\_\_\_\_

(I) CONTRACTOR'S PHONE NUMBER: \_\_\_\_\_

(J) CONTRACTOR'S FLORIDA LICENSE NUMBER: \_\_\_\_\_

(K) CONTRACTOR'S EMAIL ADDRESS: \_\_\_\_\_

(L) ENVIROMENTAL HEALTH PERMIT #: \_\_\_\_\_

(M) COPY OF PAID SEWER/WATER TAP RECEIPT:

(N) PROPERTY FLOOD ZONE: ( ) X-ZONE, ( ) A-ZONE, ( ) AE\_\_\_ ZONE, ( ) VE\_\_\_ ZONE.

If construction property is in a FEMA flood zone, then a Flood statement letter or a Elevation certificate must be provided with this application.

(O) MOBILE HOME IDENTIFICATION:

MAKE OF HOME: \_\_\_\_\_

YEAR OF HOME: \_\_\_\_\_

SIZE OF HOME: \_\_\_\_\_ SQUARE FOOTAGE; \_\_\_\_\_

MODEL # OF HOME: \_\_\_\_\_

SERIAL # OF HOME: \_\_\_\_\_

DECAL #: \_\_\_\_\_