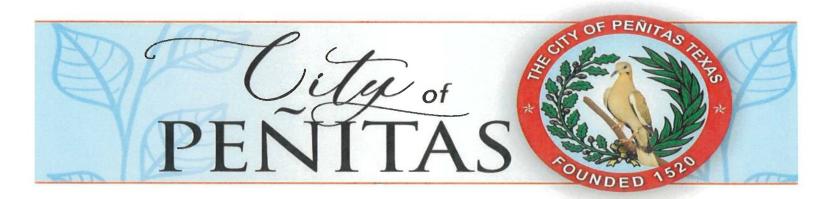
ORDINANCE 2019-___ EXHIBIT "C"

MOBILE HOME and FRAME HOME PERMIT APPLICATION REQUIREMENTS

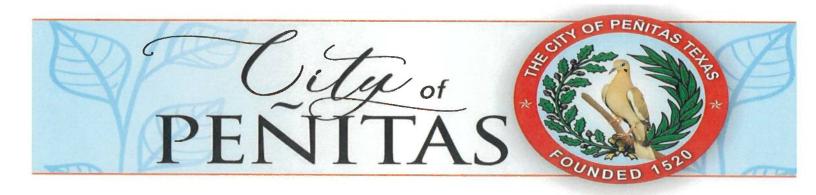
- 1. Mobile Home or Frame Home must be inspected prior to moving into City Limits
- 2. Mobile Home may not be older than 10 years as of date of application.
- 3. Mobile Homes older than 10 years will not be permitted to obtain a remodel permit
- Prior to issuance of permit property owner must present a copy of warranty deed to ensure no further restrictions are provided that would prevent installation.
- 5. If a Home Owner's Association is established then property owner must then obtain permission from association prior to installation.
- Mobile Home or Frame Home must have been constructed in accordance with any/all
 applicable HUD codes. Property owner must provide proof that said Mobile home or
 Frame are built to HUD code minimums.
- 7. Movers must be registered with the City of Penitas, have Contractor License, Valid Driver's License in compliance with TXDOT, Insurance, and as well as a permit from TXDOT allowing transport along state roadway, street, and highways.
- 8. Movers must contact Penitas Police department prior to entering city limits to prevent any traffic hazards or public nuisances.
- Permits for connection of utilities must follow same permit process as Residential Building Permit Fee Schedule.
- 10. Driveway is required on property to provide space for 2 off-street parking (10ft wide recommended minimum.
- 11. When unit is placed on lot, following items are required:
 - (a) Wheels and Axels removed
 - (b) Hitch removed
 - (c) Unit anchored as per code
 - (d) Skirting on entire unit required with access panel to Plumbing and Electrical.



PERMIT APPLICATION FOR A MOVERS

PFRMIT#

	-131411111			
PLEASE INDICATE LOCATION WHERE STRUCTURE IS GOING TO BE MO	VED TO:			
PHYSICAL ADDRESS LOT	r			
PROVIDE THE LOCATION WHERE STRUCTURE IS CURRENTLY PLACE	CED:			
, TX OR ADDRESS IF WITHIN CITY				
CITY ZIPCODE THE PHYSICAL ADDRE	SS			
MOVING PERMIT CLASSIFICATION				
MOVE IN () MOVE OUT ()			
PLEASE SPECIFY THE TYPE OF STRUCTURE TO BE MOVED INTO PRO	PERTY			
MOBILE HOMEFRAME HOME OTHER (PLEASE DESCRIBE)				
SIZE OF MOVING UNIT X TOTAL AREA SQ FT MATERIAL:				
YEAR & MODEL: TOTAL HEIGHT OF UNIT:	FT			
NAME OF PROPERTY OWNER ADDRESS PHONE				
MOVER'S NAME ADDRESS PHONE				
SIGNATURE OF APPLICANT: DATE:				
All movable units proposed to be moved inside city, must be inspected and must have passed inspection prior to moving into property. **Upon approval, structure must comply with city requirements which are the following:* Hire a Master Plumber & Master Electrician to obtain their permits for service hook-ups that will be needed. Structure shall have a concrete or asphalt driveway entrance from street to the needed length to have two (2) off-street parking areas. Driveway must be at least 10ft wide.				
Building Official: Approved Rejected Date:				



ELECTRICAL PERMIT APPLICATION

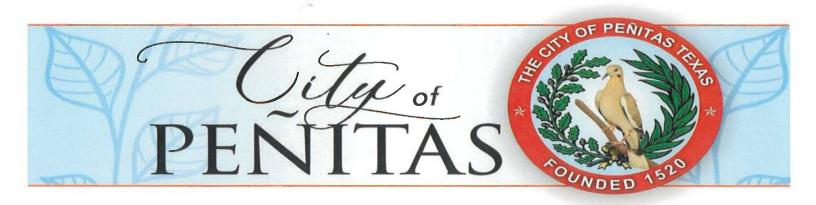
PHYSICAL ADDRESS:				
SUBDIVISION: LOT:			-	
DESCRIPTION OF WORK:				
SERVICE SERVICE AMOUNT (AMPS) SERVICE FEE AMOUNT				
() T-POLE () CHANGE/	UPGRADE/RELOCATE_	() WORK	ING CLEARANCE	
() ADDED CIRCUITS ()	RE- INSPECTION	_ PERMIT/ INS	PECTION	
TOTAL:				
IF OTHER PLEASE DESCRIBE				
MASTER ELECTRICAL NAME:	ADDRESS:	TELEPHONE		
BUILDING CLASSFICATION:	RESIDENTIAL ()		COMMERCIAL ()	
SIGNATURE:		DATE:		
MASTER LICENSE AND GENERAL LL	A DIT ITY INCI ID A NOTE (\$200.00	O) ARE REGUIRED	EOD AN ELECTRICAL DEPART	
MINITER ENGLISE MIN OLINERAL ED	ADIENT ENSURANCE (5500.00	O) ARE REQUIRED	FOR AN ELECTRICAL PERMIT	
CODE COMPLIANCE:	***************************************		DATE:	
	APPROVE	REJECT		
IF REJECTED, REASON FOR R	EJECTION:			



PLUMBING PERMIT APPLICATION

PERMIT#

PHYSICAL ADD	RESS WHERE WORK IS TO	D BE DONE:	
NAME OF SUBDIVISION:		LOT#	
Fixture/drain/ appliance= Number	er of fixtures/drain/ Applia	nce =	
[]Water piping	[] Gas Piping		
[] Sewer drain	[] Lawn Sprinkler system		
[] Excavation permit	[] Re- Inspection		
PROPERTY OWNER: TELEPHONE:			
MASTER PLUMBER NAME:	TELEPHONE:		
PROPERTY CLASSIFICATION:	RESIDENTIAL	COMMERCIAL	
SIGNATURE:	CEMERAL LIA DIL ETE INICIDI AICE AD	DATE:	
	GENERAL LIABILITY INSURANCE AR PLUMBING PERMIT WITH THE CITY		
Code Compliance:	Approved D	enied Date:	



MECHANICAL PERMIT APPLICATION

PHYSICAL ADDRESS WHERE WORK WILL BE DONE:				
LOT# NAM	E OF SUBDIVISION:			
LOT #	E OF SUBDIVISION:			
RESIDEN	TIAL OR	COMMI	ERCIAL	
[] Residential A/C area =			() Duct work	
[] Commercial A/C area (sq. f	(t) =		Number of Units	
[] Industrial walk – in cooler ((sq. ft) =		Total Tons	
[]Store walk- in cooler (sq ft)	=			
TECHNICIAN/CONTRACTOR NA	AME: LIC#		TELEPHONE:	
COMPANY'S NAME:	ADI	ORESS:	TELEPHONE:	
SIGNATURE:		DATE:		
	Approve Or	Denied		
Building Official:		Date:		
IF REJECTED REASON:				
IF REJECTED REASON.				

P.O. Box 204 | Peñitas, TX 78576 | (956) 581-3345 | Fax: (956)581-3346 | www.cityofpeñitas.com