



Town of Queensbury  
742 Bay Road, Queensbury, NY 12804  
P: 518-761-8256 [www.queensbury.net](http://www.queensbury.net)

# MANUFACTURED HOME Submission Requirements:

1. Completed Manufactured Home permit application (please print neatly or type)
2. Workers Compensation insurance information for **ALL** contractors involved in the project – this is REQUIRED EVEN FOR SOLE PROPRIETORS

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

3. Structural drawings, which may include:
  - 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 If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury.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 PERMIT APPLICATION

Office Use Only

Permit #: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_

Rec Fee: \$ \_\_\_\_\_

Invoice #: \_\_\_\_\_

Flood Zone?   Y   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 \_\_\_\_ Choose one, if yes: gas fp \_\_\_\_ woodstove \_\_\_\_ wood fp \_\_\_\_
9. Are there any other/existing buildings on the property? No \_\_\_\_ Yes \_\_\_\_; Explain: \_\_\_\_\_
10. What is the water source? PUBLIC \_\_\_\_ PRIVATE WELL \_\_\_\_
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: \_\_\_\_\_