Attachment A

T25CCR, section 1002(f)(8)(F), Application For Permit To Operate, HCD 500- Current Form 7/04

| | STATE OF CALIFORNIA USINESS, TRANSPORTATION AND HOUSING AGENCY RTMENT OF HOUSING AND COMMUNITY DEVELOPMENT | |
|--|---|--|
| DEPAR | DIVISION OF CODES AND STANDARDS MOBILEHOME PARKS PROGRAM | |
| APPLICATION FOR PERMIT TO C | OPERATE MOBILEHOME PARK OR SPEC ee Reverse Side for Instructions on Completing this Form) | DEPARTMENT USE ONLY |
| SECTION 1. TYPE OF PERMIT REQUES | STED (Check appropriate boxes) | Collection No. |
| Park ID No: Type of Amendment | ☐ Original ☐ Amended (choose type belo | DatePTO Fee |
| ☐ Transfer of Owner/Operator | - | Stato ee |
| ☐ Change in Number of Lots (Addit | ition <u>additional</u> of lots requires local approvals <u>and ins</u> | pection v4 Lot Fee \$ |
| Type of Park: | Occupancy Park | y Fark Amended PTÖ Fee \$ |
| SECTION 2. LOT INFORMATION | | Permit to Const.# |
| Number of Lots | Conditional Uses | TOTAL |
| Mobilehome Lots: | Number of lots with an electrical system | n designed exclusively for: |
| Special Occupancy Lots With Drains: | □ 50 amperes | |
| Special Occupancy Lots Without Drains: | ☐ 30 amperes | |
| Total Lots: | \ | |
| SECTION 3. PARK INFORMATION. (All fiel | lds in this section MUST by completed) | |
| Park Name: | \ / / |) |
| | | |
| Location(Street Address - DO NOT use P.O. Box | . X | |
| City | State County | Zip |
| ☐ Incorporated City ☐ Unincorpo | orated Area | |
| Owner's /operator's Name | | Telephone No. (|
| Email address | | |
| Mailing Address | | |
| Mailing Address(Street or P.O. Box | (City) | (State) (Z(o |
| SECTION 4. MANAGER INFORMATION | (The Information in this section is optional) | |
| On-site Property Manager Name | Telliphon | ne Number() |
| Email address | \ | |
| Mailing Address(Street out 0.0. Box) | (Ciby) | (State) (Zip |
| | 122 | |
| SECTION 5. OWNER CERTIFICATION | | |
| | | |
| park shall be operated and maintained in accordar | | \ |
| park shall be operated and maintained in accordal provisions of Chapters 2 and/or 2.2 of the Californ | | n this application it true and correct |
| park shall be operated and maintained in accordar provisions of Chapters 2 and/or 2.2 of the Californ I certify under penalty of perjury under the laws of | nia Code of Regulations. | n this application is true and correct |
| park shall be operated and maintained in accordal provisions of Chapters 2 and/or 2.2 of the Californ I certify under penalty of perjury under the laws of Executed on/ at | nia Code of Regulations. The State of California, that the information provided in | |
| Executed on / / at | nia Code of Regulations. f the State of California, that the information provided in (Only) Printed Name: | |
| park shall be operated and maintained in accordal provisions of Chapters 2 and/or 2.2 of the Californ I certify under penalty of perjury under the laws of Executed on/ at | nia Code of Regulations. The State of California, that the information provided in | (State) |

complete sections 1 through 5. Submit all copies of this application with the appropriate fees as specified in the Health and Safety de, Division 13, Parts 2.1 or 2.3 and the California Code of Regulations, Title 25, Chapter 2 or 2.2 to the appropriate area office:

Southern Area Northern Area

Departi ent of Housing and Community Development

pment Department of Housing and Community Deve

Northern A a Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95828 (916) 255-2501

Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501-3337 (951) 782-4420

Section 1. Type of Permit Requested

Enter the park ident cation number issued by this Department.

his box if this is the original request (newly constructed park) for s Original: ermit to Operate this park.

pox if this is a request for an amended Permit to Operate Amended: Check this

nd indicate the type of change that is the total number of lots in the space d. When there is a change in the number of lots, enter being report provided. The addition of lots to an existing park requires local approvals in accordance with sections 1032.

or 2032 of Title \$5 of the California Code of Regulations.

parks, more than one box may be checked. perate is being requested. For combination

Section 2. Lot Information

Number of Lots -

Provide the total number of los within the park for each category listed. If a category does not apply, leave it blank. Enter a total of all lots in the space provided. This is the number of lots that will be shown on the Permit to Operate. DO NOT add has or change existing categories without submitting approvals from the 1032 or 2032 of Title 25 of the California Code of Regulations. local jurisdiction in accordance with ection

Conditional Uses -Check the appropriate box to indicate conditional uses. For lots constructed with electrical systems

mperes (California Code of Regulations, Section 1142). These designed exclusively for units of 50, g lot numbers will appear on the Perg to Op rate. Enter any other conditions on the use of the park as

205, 18300.1, 18862.13 and 18865.1. defined in Health and Safety Cod Sections

Section 3. Park Information (This section must be filled out completely)

Enter the name of the park as it should appear on the Permit to Operate

Enter the park telephone number, including the area code.

Enter the location of the park. This is the physical address, do not use a P.O. box or route number.

Check the appropriate box to indicate if the park is located in an incorporated city or nincorporated area.

Enter the name, telephone umber, and mailing address of the park owner.

Section 4. Manager Information (This section is optional, but recommended.)

Enter the park manage er's name , phone number and mailing address.

Section 4. Owner Certifig ation

The signature the park owner is required along with the owner's printed name. Also enter the date and place the form is signed.

HCD 500 Side 2 (Rev 7/04) Distribution: White - Park Yellow - Department Pink - Inspector Goldenrod - Area Office T25CCR, section 1002(f)(8)(L), Permit to Operate (local enforcement agency), HCD $500A-Current\ Form\ 7/04$

| _ | ENFORCEMENT AGENCY | |
|--|--|---|
| | CATION FOR PERMIT TO OPERATE | / |
| (See F | Reverse Side for Instructions on Completing this Form) | DEPARTMENT USE NLY |
| SECTION 1. TYPE OF PERMIT REQUESTI | ED (Check appropriate boxes) | Collection No. |
| Park ID No: | ☐ Original ☐ Amended | Date |
| | _ • - | PTO Fee \$ |
| ☐ Transfet of Owner/Operator | | State Fer |
| ☐ Change in Number of Lots (Addition | n of lots requires local approvals) | MH Jot Fee \$ |
| Type of Park: Mobilehome Park Special Oc | ccupancy Park | ncy Park |
| | | Amended PTO Fee \$ |
| SECTION 2. LOT INFORMATION | | Permit to Const.# |
| Number of Lots | Conditional Uses | minal |
| Mobilehome Lots: | Number of lots with an electrical syst | em designed exclusively for: |
| Special Occupancy Lots With Drains: | 50 amperes | |
| Special Occupancy Lots Without Drains: Total Lots: | Other | |
| SECTION 3. PARK INFORMATION. (All fields | - / | |
| Park Name: | Telephone No: | |
| _ocation | | |
| (Street Address – DO NOT use P.O. Box) | a.X a | Zip |
| ☐ Incorporated City ☐ Unincorpora | | Zip |
| Owner's Name | / \ | - |
| <u> </u> | | |
| Mailing Address(Street or P.O. Box) | (City) | (State) (Zlp) |
| SECTION 4. MANAGER INFORMATION | he Information in this section is optional) | |
| <i></i> | Telephone Namber | r () |
| Mailing Address | | |
| (Street or P.O. Bo) | (City) | (State) (Zi) |
| SECTION 5. OWNER CERTIFICATION | | |
| As owner of the park described allove, I agree to all park shall be operated and maintained in accordance | | |
| provisions of Chapters 2 and or 2.2 of the California | | art 2.1 amoor Part 2.3 the applicable |
| certify under penalty of perjury under the laws of the | e State of California, that the information provide | d in this application is true and correct |
| Executed on/ at | (City) | (State |
| / | Printed Name: | |
| Paguired Signature: | Printed Name: | $\overline{}$ |
| Required Signature: | DEPARTMENT USE ONLY | ` |
| | DEPARTMENT USE ONLY | te: |
| Required Signature: Signature of Inspector: | DEPARTMENT USE ONLY Da | te: |

Implete sections 1 through 5. Submit all copies of this application with the appropriate fees as specified in the Health and Safety , Division 13, Parts 2 1 or 2 3 and the Cal fornia Code of Regulations. Title 25, Chapter 2 or 2.2 to the LOCAL ENFORCEMENT NCY for your park. This is usually identified on the park's Permit To Operate.

Typeof Permit Re gested Section 1

e park identification number Enter

Check this box if this is the original request (newly constructed park) for a Permit to Open Original:

Check this box if this is a request for an amended Permit to Operate and indicate to Amended: type of change that is peing reported. When there is a change in the number of lots, enter the total null management er of lots in the space pivided. The addition of lots to an existing park requires local approvals in a rdance with sections 103 22 of Title 25 of the California Code of Regulations

Check the appropriate buto indicate the type of park for which the permit to operate is being requested. For combination parks, more than one box ay be checked.

Section 2. Lot Information

Number of Lats -

Provide the to the number of lots within the park for each category disted. If a category does not apply, leave it blank. Enter a total of all lots in the space provided. This is a number of lots that will be shown on the Permit to Operate. In NOT add lots or change existing case mes without submitting approvals from the local jurisdiction in a cordance with Sections 1032 or 203 of Title 25 of the California Code of Regulations.

Conditional Uses -Check the appropriate bo indicate any conditions s. For lots constructed with electrical systems

designed exclusively for un loof 50, or 30 ampere sucal fornia Code of Regulations, Section 1142), indicate the lot number(s) in the spa deproided. These bounders will appear on the Permit to Operate. Enter any other conditions on the use of the park as defined in Health and Safety Code, Sections 18205, 18300.1,

18862.13 and 18865.1.

Section 3. Park Information (This section must be filled out con elv)

> Enter the name of the park as it should appear on the it o Operate

Enter the park telephone number, including the ar a code.

Enter the location of the park. This is the phys cal address, do not se a P.O. Box or route number

Check the appropriate box to indicate if the ed city or unincorporated area. park is located in an incorpo

Enter the name, telephone number, and mailing address of the park owner

Section 4. Manager Information (This se is optional, but recommended.)

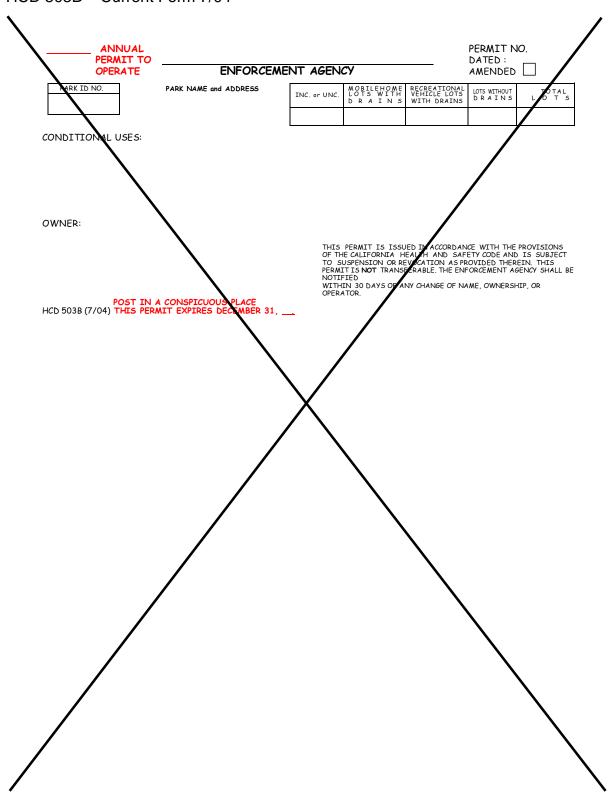
me number and mail rig address. Enter the park manager's name

Section 4. Owner Certification

mer is recuired along with the owner's printed name. Also The si gature of the ark ter the date and place the form is

Distribution: can't a formable? HCD 500 Side 2 (Rev 7/04)

T25CCR, section 1002(f)(8)(A), Annual Permit To Operate (local enforcement agency), HCD 503B – Current Form 7/04



T25CCR, section 1002(f)(8)(A), Local Enforcement Agency Annual Permit to Operate, HCD MP 503B-Proposed Form 03/24

LOCAL ENFORCEMENT AGENCY ANNUAL PERMIT TO OPERATE

| | <u>EN</u> | IFORCEMENT AGENCY | | |
|--|-----------------------------------|--|--------------------------------------|----------------|
| ANNU | IAL PERMIT TO OP | <u>ERATE</u> | | |
| PARK TYPE: | Mobilehome Park | Special Occupand | cy Park | |
| SPECIAL OCCUPANO | CY PARK DESIGNAT | ΓΙΟΝ (if applicable): | | |
| Temporary Spe | ecial Occupancy Par | k Incidental C | amping Area | Tent Camp |
| PERMIT NO | | | DATE | |
| | | | | AMENDED |
| PARK ID # | | | | |
| PARK NAME | | | | |
| PARK ADDRESS | | | | |
| | | | | |
| Incomposite d (I) or | Makilahassa Lata | D | 1 -4214 | |
| Incorporated. (I) or Unincorporated (U) | Mobilehome Lots with Drains | Recreational Vehicle Lots with Drains | <u>Lots without</u> <u>Drains</u> | Total Lots |
| | | | | |
| | | | | |
| CONDITIONAL USES | | | | |
| | | | | |
| OWNER NAME: | | | | |
| OWNER ADDRESS: | | | | |
| _ | | | | |
| SAFETY CODE AND THIS PERMIT IS NOT | IS SUBJECT TO SU TRANSFERABLE. | CE WITH THE PROVIS SPENSION OR REVOO THE ENFORCEMENT A VAME, OWNERSHIP, O | CATION AS PROV AGENCY SHALL | /IDED THEREIN. |
| | POST IN | A CONSPICOUS PLAC | <u>CE</u> | |

THIS PERMIT EXPIRES: DECEMBER 31,

HCD MP 503B (Rev. 03/24)

T25CCR, section 1002(f)(8)(N), Private Fire Hydrant Test And Certification Report, HCD MP 532 – Current Form 01/07

STATE OF CALIFORNIA

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF ODDES AND STANDARDS PRIVATE FIRE HYDRANT TEST AND CERTIFICATION REPORT PARKS MUST RETURN THIS FORM TO THE ENFORCEMENT AGENCY FOR THE PARK (SEE THE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM) Part 1 - IDENTIFIC Park Name: Park Address: ZIP: City: Park Operator Name Phone Number Park Operator Address and City Part 2 - CERTIFICATION EXCEPTIONS ou do not need certification, but must complete this section if any of the following Hydrants are publicly owned and ... aintained - Water Company Name, No hydrants and park was built before eptember 1, 1968 - List Date of Construction: No hydrants and park has 14 or less total s - Enter Number of Lots: No private hydrants and park was built after 5 ptember 1, 1968. (Specific exception at the t re of construction.) Part 3 - Annual Fire Hydrant Operation Test (Initial veri ation in the appropriate column) (Standpipes are considered hydrants for these re curements) NO CORRECTED 1. Hydrant stems and valves operate fully, freely, and are properly lubricated. 2. All hydrant threads and caps are undamaged. 3. Where subject to vehicular damage, hydrants are physical 4. Around all hydrants is a minimum of 36 inches of unobstruct 5. All hydrants outlets are 14 inches to 24 inches above grade. (Standpipe outlets need not be a specific height, but must be readily a 6. Each hydrant is clearly identified or marked. 7. Each 1 1/2 -inch hydrant has an approved hose in a marked enclosed All "NO" answers are violations and will prohibit t issuar of the park Permit to Operate. I verify under penalty of perjury that either this park is exemp from testing requirements or the hydrant operation is in cor diance. Park owner or operator Part 4 - Five-YEAR FIRE HYDRANT WATER FLOW TEST authorized certifier DNLY To be complet Barrel Size Barrel Size Flow Pressure Flow Pressure (inches) (GPM) (PSI) (inches) (PSI)

FOR MORE THAN 5 HYDRANGS IN THE PARK, ATTACH AN ADDITIONAL LIST USING THE FORMAT ABOVA (GPM)-GALLONS OF MINUTE. (PSI) - RESIDUAL PRESSURE IN POUNDS PER SQUARE INCH.

5

6

Signature

HCD MP 532 Cky 1/071 Side c

Badge Numb

2

3

INSTRUCTIONS FOR COMPLETING HCD MP 532*

the completed form to the Area Office that issues your permit to operate with a copy to your local fire district Southern Area Office

orthern Area Office

2 Tech Center Drive, Suite 550 3737 Main Street, Suite 400 Saci mento, CA 95826 Riverside, CA 92501

PART 1 - IDENTI ICATION

Park ID# - Enter the park Identification Number as shown on the permit to operate.

Park Name - Enter th name of the park as shown on the permit to operate.

Park address - Enter th physical address of the park.

Enter Park Operator Nan e, phone number, and address.

XCEPTIONS - These certification requirements do not apply to: PART 2 - CERTIFICATION

- is regular hydrant Parks with public hydrants, w ere the local water district owns the water or hydrant system and perfo testing. List the name of the wa er company.
- ed prior to September 1, 1968. Parks, without hydrants, construct
- Parks, without hydrants, with 14 or ess total spaces.
- fter September 1, 1968. Parks, without hydrants, constructed

n tested and certified regardless of park size or All parks with hydrants must have the ate of construction. THE PARK OWNER/OPERA OR'S SIGNATURE VERIFYING AN EXCEPTION IS REQU ED IN PART 3.

PART 3 - ANNUAL FIRE HYDRANT OPER TION TEST **

Initial the appropriate column to indicate whether the hydrant(s):

- stems and valves fully operate, open and clo e freely, and have the proper lubric
- 2. caps, seals and threads are undamaged.
- which are subject to vehicular damage, are pr vided physical protection
- 4. has a minimum of 36 inches of clear space around all hydrants.
- not be a specific height, but must be readily outlets are between 14 & 24 inches above grade. S ndpipe outlets nee accessible.
- 6. is clearly identified or marked for easy location in an eme gency.
- an enclosed cabinet marked "FIRE HOSE" in 4that are 1 ½ inch, have a 75-foot hose on a rack, or reel co tained inch contrasting letters.

The operational test may be verified by a park owner/operator uring the four years between the five-year water flow certification. If the park performs the operational test, vner/operator's signature verifying compliance is g the required. During the five-year test, only the entity perform ater flow test may certify the operational test.

PART 4 - FIVE-YEAR FIRE HYDRANT WATER FLOW TEST () only be com eted every five years by a certified person) **

Barrel size - Enter the barrel or riser diameter measured

Flow - Enter the measured flow in gallons per minute.

Pressure – Enter the residual pressure measured in ounds per square inch.

PART 5 - CERTIFICATION OF TEST RESULTS

This section is to be completed by the fire agency sponsible for fire suppression in the ark, local water supplier, Licensed Fire actor witnessing and certifying the test in Protection Engineer, or C-16 Fire Protection Con ormation.

Certifier Name - Enter the name of the pers n, agency or entity certifying the test result

Contractor's classification and number Enter the California Contractors State License pard classification and license number or the license number for a Calif nia licensed fire protection engineer.

Address - Enter the address of the per on, agency, or entity certifying the test results.

telephone number. Telephone Number - Enter certifiers

E-Mail Address - Enter certifiers' mail address, if available.

Name - Print the name of the per on certifying the test.

Title - Enter the title of the peron certifying the test.

Signature - Required signatu e of person certifying test.

Date - Enter the date of the certification.

PART 6 - APPROVAL FOR ONTINUED USE OF EXISTING SYSTEM - COMPLETED BY LOCAL FIRE AGENCY ONLY. This section fire agency when a private fire hydrant cannot be repaired to meet these standards, be completed by a loc ven local conditions, and the f agency responsible for fire suppression in the park approves its continued use or use of all native fire protection met

*Refer to Title 2 , California Code of Regulations, Article 6, commencing with Section 1300 and/or 2300.

**VIOLATION If any answers in Part III - Annual Fire Hydrant Operation Test are "No," and/or the Five-Year Fire Hydrant Flor Test of Part IV does not meet the minimum requirements, the park is in violation. The park operator/owner is responsibl for correction of violations. Failure to correct violations may result in the park not being eligible to renew its annual p rmit to operate.

HCD M 532 (Rev 1/07) Side 2 T25CCR, section 1002(f)(8)(L), Private Fire Hydrant Test and Certification Report, HCD MP 532- Proposed Form 10/25

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



| | EIC ATION I | DADK AND D | ARK OPERATO | | agency for th | e park. | |
|--|--|--|--|--|----------------------------|---|-------------------|
| ark Name Park | | PARK AND P | ARK OPERATO | JR | | ID# | |
| ark Address | | | | | | | |
| ity | | | | | | CA Zip | |
| ark Operator Na | ame | | | | | | |
| ark Operator Ad | ddress | | | | | | |
| elephone | | | Email | | | | |
| Hydrants are No hydrants A No hydrants A | wing applies— publicly owned AND park was AND park has | you do not need and maintained built before Se 14 or less total | ed certification, bu ed. Water Compa ptember 1, 1968. lots. Number of I | ny Name Date of Construots_ | ction | | |
| | | | er September 1, | 1968. (Specific e | exception at ti | me of construc | ction.) |
| art 3. ANNUA be completed ertifier: Initial y | by authorized | Certifier ONLY | Standpipes are | considered hydr | ants for certif | ication require | |
| | | CERTIFICA | TIONS | | YES | NO NO | & PASSED |
| 1. Hydrant ste | ems and valves | operate fully, fre | ely, and are propert | ly lubricated. | | | |
| 2. All hydrant | threads and ca | ps are undamag | ed. | | | | |
| 3. Where sub | ject to vehicular | damage, hydrar | nts are physically p | rotected. | | | |
| 4. Area aroun | d all hydrants h | as a minimum of | 36 inches of unob | structed access. | | | |
| | | nches to 24 inch | | | | | - |
| | | | eight, but must be r | readily accessible. | | _ | |
| | | | | | _ | _ | _ |
| 6. Each hydra | nch hydrant has | | se in a marked end | | | | -1 |
| 7, Each 1 1/2-i | | | s and will pronit | off the issuance | or the park's | s Permit to Of | perate. |
| 7, Each 1 1/2-ii Al erification: verify under per | II NO answers | that either this | park is exempt ation is in complia | ince. | Park | owner or opera | ator |
| 7, Each 1 1/2-i Al erification: verify under per om testing requi | II NO answers | that either this e hydrant opera | park is exempt | | Park | owner or opera | ator |
| 7, Each 1 1/2-i Al erification: verify under per om testing requi | II NO answers | that either this e hydrant opera | park is exempt ation is in complia | | Park (Barrel Size (inches) | Flow (GPM) | Pressure (PSI) |
| 7, Each 1 1/2-ii All erification: verify under per om testing requ art 4. FIVE-YE Hydrant Number | II NO answers halty of perjury irements or the EAR FIRE H Barrel Size | that either this e hydrant opera YDRANT WA | park is exempt ation is in complia TER FLOW TES | Hydrant Number | Barrel Size | | Pressure |
| 7, Each 1 1/2-i Al erification: verify under per om testing requ art 4. FIVE-YE Hydrant Number 1 2 | II NO answers halty of perjury irements or the EAR FIRE H Barrel Size | that either this e hydrant opera YDRANT WA | park is exempt ation is in complia TER FLOW TES | Hydrant Number 4 | Barrel Size | | Pressure |
| 7, Each 1 1/2-ii All erification: verify under per om testing requ art 4. FIVE-YE Hydrant Number | II NO answers nalty of perjury irements or th EAR FIRE H Barrel Size (inches) | that either this e hydrant open YDRANT WA' Flow (GPM) | park is exempt ation is in complia TER FLOW TES Pressure (PSI) | Hydrant Number 4 5 | Barrel Size (inches) | Flow (GPM) | Pressure (PSI) |
| 7, Each 1 1/2-i Al erification: verify under per om testing requ art 4. FIVE-YE Hydrant Number 1 2 | II NO answers nalty of perjury irements or th EAR FIRE H Barrel Size (inches) | that either this e hydrant open YDRANT WA' Flow (GPM) an 6 hydrants | park is exempt ation is in complia TER FLOW TES | Hydrant Number 4 5 6 | Barrel Size (inches) | Flow (GPM) | Pressure (PSI) |
| 7, Each 1 1/2-ii All erification: verify under per om testing requ art 4. FIVE-YE Hydrant Number 1 2 3 | alty of perjury irements or the EAR FIRE H' Barrel Size (inches) For more the (GPM) | that either this e hydrant opera YDRANT WA Flow (GPM) an 6 hydrants #=gallons per r | park is exempt ation is in complia TER FLOW TES Pressure (PSI) | Hydrant Number 4 5 6 och an additional ual pressure in p | Barrel Size (inches) | Flow (GPM) he format abo uare inch) | Pressure (PSI) |
| 7, Each 1 1/2-ii Perification: | alty of perjury irements or the EAR FIRE H' Barrel Size (inches) For more the (GPM) | that either this e hydrant opera YDRANT WA Flow (GPM) an 6 hydrants #=gallons per r | park is exempt ation is in complia TER FLOW TES Pressure (PSI) | Hydrant Number 4 5 6 och an additional ual pressure in p | Barrel Size (inches) | Flow (GPM) he format abo uare inch) | Pressure (PSI) |
| 7, Each 1 1/2-ii Perification: Verify under perior testing requirement 4. FIVE-YE Hydrant Number 1 2 3 Part 5. CERTIFIER Entifier Name | alty of perjury irements or the EAR FIRE H' Barrel Size (inches) For more the (GPM) | that either this e hydrant opera YDRANT WA Flow (GPM) an 6 hydrants #=gallons per r | park is exempt ation is in complia TER FLOW TES Pressure (PSI) | Hydrant Number 4 5 6 och an additional ual pressure in p | Barrel Size (inches) | Flow (GPM) he format abo uare inch) | Pressure (PSI) |
| 7, Each 1 1/2-ii Perification: | alty of perjury irements or the EAR FIRE H' Barrel Size (inches) For more the (GPM) | that either this e hydrant opera YDRANT WA Flow (GPM) an 6 hydrants #=gallons per r | park is exempt ation is in complia TER FLOW TES Pressure (PSI) | Hydrant Number 4 5 6 och an additional ual pressure in p | Barrel Size (inches) | Flow (GPM) he format abo uare inch) | Pressure (PSI) |

Badge Number_

HCD MP 532 (Rev. 10/25)

Submit this form by email to: ParksPTO@hcd.ca.gov or by mail to:

HCD—Mobilehome Parks Program P.O. Box 278180 Sacramento, CA 95827-8180

Part 1. IDENTIFICATION—PARK AND PARK OPERATOR

Park Name and Park ID #: Enter the name of the park and park identification number as shown on the Permit to Operate.

Park Address: Enter the physical address of the park.

Park Operator: Enter the name, address, telephone number, and email address of the park operator.

Part 2. CERTIFICATION EXCEPTIONS

These certificate requirements do not apply to:

- Parks with public hydrants where the local water district owns the water or hydrant system and performs regular hydrant testing. List the name of the water company.
- Parks without hydrants constructed prior to September 1, 1968.
- Parks without hydrants with 14 or less total spaces.
- Parks without hydrants constructed after September 1, 1968.

All parks with hydrants must have them tested and certified regardless of park size or date of construction,

IF ANY OF THESE EXCEPTIONS APPLY TO YOUR PARK, YOU DO NOT NEED TO COMPLETE PARTS 3-5.

Part 3. ANNUAL FIRE HYDRANT OPERATION TEST:

Initial the appropriate column to indicate where the hydrant(s):

- . Stems and valves fully operate, open and close freely, and have the proper lubrication.
- Caps, seals, and threads are undamaged.
- Are provided physical protection if subject to vehicular damage.
- Has a minimum of 36 inches of clear space around hydrant(s).
- Outlets are between 14 and 24 inches above grade. Standpipe outlets need not be a specific height but must be readily
 accessible.
- Is clearly identified or marked for easy location in an emergency.
- That are 1 ½ inch, have a 75-foot hose on a rack, or reel contained in an enclosed cabinet marked "FIRE HOSE" in 4-inch
 contrasting letters.

THE PARK OWNER/OPERATOR'S SIGNATURE VERIFYING AN EXCEPTION IS REQUIRED IN PART 3.

Part 4. FIVE-YEAR FIRE HYDRANT WATER FLOW TEST* — to ONLY be completed every five years

Barrel size: Enter the barrel or riser diameter measured in inches.

Flow: Enter the measured flow in gallons per minute (GPM).

Pressure: Enter the residual pressure measure in pounds per square inch (PSI).

Part 5. CERTIFICATION OF TEST RESULTS

This section is to be completed by the fire agency responsible for fire suppression in the park, local water supplier, Licensed Fire Protection Engineer, or C-16 Fire Protection Contractor witnessing and certifying the test information.

Certifier Name: Enter the name of the person, agency, or entity certifying the test results.

Contractor's Classification and Number: Enter the California Contractors State License Board classification and license number or the license number for a California licensed fire protection engineer.

Address: Enter the address of the person, agency, or entity certifying the test results.

Telephone: Enter the telephone number of the person, agency, or entity certifying the test results.

Email: Enter the email address of the person, agency, or entity certifying the test results.

Printed Name: Print the name of the person certifying the test.

Title: Enter the title of the person certifying the test,

Signature: Required signature of person certifying the test.

Date: Enter the date of the certification.

Part 6. APPROVAL FOR CONTINUED USE OF EXISTING SYSTEM—COMPLETED BY LOCAL FIRE AGENCY ONLY

This section may only be completed by a local fire agency when a private fire hydrant cannot be repaired to meet these standards, given local conditions, and the fire agency responsible for fire suppression in the park approves its continued use or use of alternative fire protection methods.

For more information, refer to California Code of Regulations, title 25, commencing with section 1300 and/or 2300,

*VIOLATIONS: If any answers in Part 3, ANNUAL FIRE HYDRANT OPERATION TEST are NO, and/or Part 4, FIVE-YEAR FIRE HYDRANT WATER FLOW TEST does NOT meet the minimum requirements, the park is in violation. The park operator/owner is responsible for correction of violations. Failure to correct violations may result in the park not being eligible to renew its annual Permit to Operate.

HCD MP 532 (Rev. 10/25)

T25CCR, section 1002(f)(8)(B), Application For Alternate Approval, HCD 511 - Current Form 7/04

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento CA 95826 (916) 255-2501

State of California Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome and Special Occupancy Parks Program

Southern Area Office 3737 Main St., Suite 400 Riverside, CA 92501 (909) 782-4420



| (910) 235-2301 | Mobile forthe and Special Oc | ccupancy raiks riogiam | (909) 702-4420 | CALIFORN' |
|---|---|----------------------------|-------------------------|---------------------|
| | APPLICATION FOR | ALTERNATE APPRO | VAL | |
| and/or plans to the enfor accompanied by the app | on in triplicate, together with thre cement agency having jurisdiction propriate fee as specified in the Coor Chapter 2.2 section 2016. | on. Each application sha | ations, | DEP USE ONLY |
| Pursuant to provisions of approval of the following | Health and Safety Code, I here | eby make application for | an alternate | Rec'd |
| Name of Park: | | | Dat | e/_/ |
| Address/Location: | | | | |
| Owner: | | | / | |
| Address: | | | | 2 |
| Specific description of proc | luct, and/or installation, and use: | | | |
| | | | | |
| | | \times | | |
| | | $\overline{}$ | | |
| Applicant: Name | Title | Firm: | | |
| Address:Street | | State | Zip | Telephone No. |
| Evidence of local agency a | pprovals, if required: | Otare . | 7 IP | relephone 146. |
| Health and Safety Code | r for an alternate to be approved and related regulations in qualit life and heath as provided by H | v. strenath, effectivene | s, fire resistance, o | lurability, safety, |
| and that if approved, suc | with the understanding that the ch approval may be revoked or continuing data when considered n | conditions thereof modifie | ed for just cause. | Applicant agrees to |
| Signature of Applicant RETURN THIS FORM/WITH | THE REQUIRED FEES AND DOCUME | ENTATION TO THE ENFORC | Date EMENT AGENCY FO | P YOUR PARK. |
| WITH THE APPLICATION | AGENCIES ONLY — RETURN THIS I FEE, YOUR RECOMMENDATION, IE OF THE DIVISION OF CODES A Into, CA 95812-1407 | AND ALL SUPPORTING D | OCUMENTATION T | O THE |
| HZD 511 (Rev.7/04) | | | | |

T25CCR, section 1002(f)(8)(B), Application for Alternate Approval, HCD MP 511 – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356

Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356

State of California Business, Consumer Services and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome and Special Occupancy Parks Program



APPLICATION FOR ALTERNATE APPROVAL

| NOTE: Submit two copies of | the application, together | with two copies of | DEPT USE ONLY |
|--|--------------------------------|-------------------------------------|-------------------------------------|
| substantiating data and/or plans to the enforcement agency having jurisdiction. Each application shall be accompanied by the appropriate fee as specified in | | | A.A. # |
| | | | Park I.D. |
| the California Code of Regula | tions (CCR), title 25, Cha | apter 2—section 1016 or | Fee Rec'd |
| Chapter 2.2—section 2016. | | | <u>Date</u> |
| Pursuant to provisions of Hea following: | ilth and Safety Code, I he | ereby make application for a | n alternate approval of the |
| Name of Park: | | | |
| Park Address/Location: | | | |
| | Street | City | State Zip |
| Owner: | | | |
| Owner Address: | | | |
| | Street | City | State Zip |
| Applicant Name: | | Applicant Title: | |
| Firm: | | | |
| Applicant Address: | | | |
| Talankana | Street | City | State Zip |
| Telephone: | Email Ad | idress. | |
| Evidence of local agency app | rovals, if required: | | |
| I understand that in order for an Health and Safety Code and related the protection of life and health a | ated regulations in quality, s | strength, effectiveness, fire resis | stance, durability, safety, and for |
| This application is made with the that if approved, such approval radditional substantiating data when the substantial substant | may be revoked, or conditio | ons thereof modified for just cau | se. Applicant agrees to furnish |
| Signature of Applicant: | | | Date: |
| Return this form with the | required fees and docu | mentation to the enforcem | ent agency for your park. |

Neum this form with the required rees and documentation to the emore ment agency for your park.

LOCAL ENFORCEMENT AGENCIES ONLY—Return this form, pursuant to CCR, title 25, sections 1016 and 2016, with the application fee, your recommendation, and all supporting documentation to the Division of Codes and Standards, Mobilehome Parks Program, P.O. Box 278180, Sacramento, CA 95827-8180.

HCD MP 511 (Rev. 03/24)

T25CCR, section 1002(f)(8)(C), Application For Certification Of Manufactured Home Or Mobilehome Earthquake Resistant Bracing System, HCD 50 ERBSCERT - Current Form 7/04

State of California

Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome Parks Program APPLICATION FOR CERTIFICATION OF MANUFACTURED HOME OR MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM SECTION 1 PURPOSE OF APPLICATION AND TYPE OF CERTIFICATION REQUESTED Collection No. (CHECK APPROPRIATE BOX) INITIAL CERTIFICATION ☐ CERTIFICATION RENEWAL Date Date of Initial Listing Date of Listing Renewal / / Listing No. Listing No. **SECTION 2 - APPLICANT INFORMATION** Manufacturer's Name _ Change of Name/ Mailing Address Plan Approval Fee (First Hour) \$ Plant Address Other Telephone (TOTAL SECTION 3 - EARTHQUAKE RESISTANT BRACING SYSTEM INFORMATION Brand or Model Name _ Model No._ Testing or Listing Agency's Name_ Address Telephone (__ SECTION 4 - APPLICANT CERTIFICATION AND INFORMATION I hereby certify under penalty of perjury that the information provided herein is ue and correct. Typed or Printed Name _ Signature _ Date Executed at _ (City) NOTE: This application must be accompanied by three sets of plans and specifications and two sets of design calculations and test data when required to substantiate the design. Specifications shall be shown on the plan. Design calculations shall be submitted separately from the . This application shall also be accompanied by the fee in accordance with California Code of Regulations. Title 25, Division plan sheet 1. Chapte (3) File

(1) Original to Applicant

(2) Program Manager

HCD 50 ERBSCERT (Rev.7/04) Distribution:

T25CCR, section 1002(f)(8)(C), Application for Certification of Manufactured Home / Mobilehome Earthquake Resistant Bracing System, HCD MP 50 ERBS CERT – Proposed Form 03/24

State of California

Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



APPLICATION FOR CERTIFICATION OF MANUFACTURED HOME / MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM

| SECTION 1, Purpose of Ap | plication and Typ | e of Certification Requested |
|--|--|---|
| ☐ INITIAL CERTIFICATION | <u>v</u> | CERTIFICATION RENEWAL |
| Date of Initial Listing | | Date of Listing Renewal |
| Listing No. | | Listing No. |
| SECTION 2. Applicant Info | mation | |
| Manufacturer's Name | | |
| Mailing Address | | |
| Plan Address | | |
| Telephone | Email | |
| SECTION 3. Earthquake Re | sistant Bracing S | System Information |
| Brand or Model Name | | Model No. |
| Testing or Listing Agency's Nan | ne | |
| Address | | |
| Telephone | Email | |
| SECTION 4. Applicant Cert | ification and Info | rmation |
| I hereby certify under penalty or | f perjury that the info | ormation provided herein is true and correct. |
| Applicant Name | | Title |
| Signature | | Date |
| Executed at | | |
| | City | County |
| calculations and test data when re- calculations shall be submitted sep | quired to substantiate parately from the plan | sets of plans and specifications and two (2) sets of design the design. Specifications shall be shown on the plan. Design sheet(s). This application shall also be accompanied by the fee in division 1, chapter 2, section 1025. |
| | DEPARTA | MENT USE ONLY |
| Collection No. | | Change of Name / Ownership |
| Date | | Plan Approval Fee (first hour) |
| Application Fee | | Other |
| Renewal Fee | | TOTAL |
| | | |

HCD MP 50 ERBS CERT (Rev. 03/24)

T25CCR, section 1002(f)(8)(D), Application For Permit To Construct, HCD 50 – Current Form 7/04

| | Business, Transportation and Housing Agency Department of Housing and Community Development | |
|---|---|---|
| | Division of Codes and Standards Mobilehome and Special Occupancy Parks Programs APPLICATION FOR PERMIT TO CONSTRUCT | |
| NTRACTOR/OWNER BUILDER DECLARATIONS required or commercial modulars or Recreational Vehicles | RSE SIDE OF FORM FOR INSTRUCTIONS AND ADDITIONAL INFORMATION | DEPARTMENT USE ONLY |
| required for commercial modulars or Recreational Vehicles | SECTION 1 - OWNER/APPLICANT INFORMATION | |
| ICENSED CONTRACTORS DECLARATION hereby offirm independily of perjury that I am licensed ter provisions of the apendily of perjury that I am licensed let provisions of the apending I commencing with Section 7000) livision 3 of the Bubless and Professions Code, and my uses is in full force and effect. | Park Name | ID. No MP D AS MHI |
| ense ClassLic. NoExp. Date | CityCounty | Closed By |
| | | Date CUsed_ |
| WINER-BUILDER DECLARATION hereby affirm under penalty or sejury that I am exempt here of the penalty or sejury that I am exempt here Contractors License Law Tokthe following reason (Sec. I.S), Business and Professions Code, Any city or county hereupies a permit to construct, after, improve, demolish, or air any structure, prior to its issuance, do requires the licenal for such permit to file a signed at likement that he or is licensed pursuant to the provisions of the Contractors has Law (Prograph's (commencing with ado, but and or she empt therefrom and the bost for the alleged wemptlan, violation of Section 7031. 5 by any applicant for a permit ects the applicant to a civil penalty of not more than five dred adolaris (\$500): | ZipUnincorporatedIncorporated Park Owner | Ollection Information Ollection # |
| in the requires a permit to construct, after improve, demolish, or the requires a permit to construct, after improve, demolish, or the requires the | APPLICANT | Y |
| licant for such permit to file a signed storement that he or is licensed pursuant to the provisions of the Contractors ase Law (Chapter 9 (commencing with Section 7000) of | CONTRACTOR OWNER Other | Fee Rec'd |
| ion 5 of the Business and Professors Code) as that he of she empt therefrom and the basis for the alleged exemption, violation of Section 7031,5 by any applicant for a permit ects the applicant to a civil penalty of not more than five | Address | - |
| • | Tel. No | Collection Date |
| as owner of the property, or my employees with wages as sole compensation, will do the work, and the structure hintended of offered for sale (Sec. 7044, Business and essions Code: The Contractors License Law does not apply | Architect/Engineer | _ Assigned To |
| n owner of property who builds or improves thereon, and does such work himself or herself or through his or her own | Tel. IVO. | Routed By |
| playees, provided that such improvements are not intended freed for sale. If, however, the building or improvement is within one year of completion, the owner-builder will have burden of proving that he or she did not build or improve he purpose of sale.). | SECTION 2 - DESCRIPTION OF WORK AND VALUATION | Upon Department approval to release, and payment of fees, th permit is issued only for items validated below. |
| as owner of the property, am exclusively contracting with | | — PERMIT # |
| as owner of the property, am exclusively contracting with sed contractors to constanct the project fiser. 7044, less and Professions Codes: The Contractors License Law snot apply to an owner of property who builds or improves son, and who contracts for such projects with a ractor(s) licensed pursuant to the Contractors License | | — MH ACC/\$ |
| inacrofs) licensed pursuant to the Contractors License .). am exempt under Sec, B. & P.C. for this reason: | | — MP |
| , b. a r. c. for ma leason. | | BLDG |
| nerDate | Y | мн |
| ORKERS' COMPENSATION DECLARATION eby affirm under penalty of periury one of the following | | — MISC. |
| arations: lave and will maintain a certificate of consent to self-insure | | TECH SER. |
| orkers' compensation, as provided for by Section 3700 of abor Code, for the performance of the work for which this all is issued. | Valuation \$ | PLC'K |
| have and will maintain workers' compensation insurance, | | Vi Bodde AV |
| ormance of the work for which this permit is issued. My eas' compensation insurance carrier and policy number arrier | SECTION 3 ACCESSORY BUILDINGS or STRUCTURES NEW REINSTALL Standard Plan Approval No. | S.M.I |
| olicy Number | wning Carport Porch Cabana | TOTAL |
| section need not be completed if the permit is for one dred dollars (\$100) or less). | Other (specify) | DIVISION PROCESS RECORD |
| certify that in the performance of the work for which this nit is issued, I shall not employ any person in any manner so become subject to workers' compensation laws of | | Application |
| ornia, and agree that if I should become subject to ers' compensation provisions of Section 3700 of the Labor | OWNERTel. No | Local Planning |
| e, I shall forthwith comply with those provisions. Icant Date | Address | Local Fire |
| NING: FAILURE TO SECURE WORKERS' COMPENSATION | RESIDENTTel. No | Local Health |
| 'ERAGE IS UNLAWFUL, AND SHALL SUBJECT AN AMPLOYER TO MINAL PENALTIES AND CIVIL FINES UP TO ONE MUNDRED JSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF | Lot No | Public Works |
| PENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 HE LABOR CODE, INTEREST, AND ATTORD Y'S FEES. | SECTION 4 - MANUFACTURED HOME/MOBILEHOME INSTALLATION | Environmental |
| DNSTRUCTION LENDING AGENCY nereby affirm under penalty of perory that there is a | Owner Tel. No | hapact |
| truction lending agency for the performance of the work this permit is issued (Sec.39.77, Civ. C.). | | Negative Declaration |
| der's Name | 0.00000000000 | School Impact |
| der's Address | Resident Lot No | Fees |
| ERTIFICATION certify that I have good this application and state that the ve information is correct. I agree to comply with all city | Serial Number(s) | Date |
| county ordinar Ses and state laws relating to building struction, and stereby authorize representatives of this nty to enter from the above-mentioned property for | Date of MFGModel Name Insignia/HUD Label No. | Issued By |
| ature of Applicant or Agent Date | SECTION 5 - PARK OWNER, OPERATOR OR MANAGER SIGNATURE APPROVED: | Expires |
| | 1000 | |

CESSORY STRUCTURES: Complete Sections 1, 3, 5 and Contractor/Owner Builder Declarations. Submit the completed applica the required fees to the appropriate Area Office listed below.

EACTURED HOME/MOBILEHOME INSTALLATION: Complete Sections 1, 4, 5, and Contractor/Owner Builder Declaration: ubmit the d application and required fees to the appropriate Area Office listed below.

18551 FOU **QATION SYSTEM:** Complete Sections 1, 2, 5 and Contractor/Owner Builder Declarations. Submit the comple ed application and the rea d fees to the appropriate Area Office listed below.

PARK UTILITIES: emplete Sections 1, 2, 5 and Contractor/Owner Builder Declarations. Submit the completed app cation and required fees to the appro ate Area Office listed below.

NEW PARKS AND PERMANENT BUILDINGS: Complete Sections 1, 2, 5 and Contractor/Owner Builder Declaration s. Submit the completed application and requir fees to the appropriate Area Office listed below.

> ern Area Office Southern Area Office 3737 Main St., Suite 400 Riverside, CA 92501 ch Center Drive, Suite 550 9342 T nto, CA 95826 Sacran (916) 255 501 (951) 782-4420

- SECTION 1 -OWNER/APPLICANT INF MATION: Enter the park name and address. Indicate the park is located in an unincorporated ea. Enter the park owner's name(s). Enter the appl of or correspond with the party that is entered as Cant's name, address and telephone number the applicant.) Check the appropriate box to area or an incorporated (The Department will conto describe the applicant. If the pox "Other" is marked, please indicate the re tionship to the owner. If the requested services involve an architect or engine enter the architect or engineer's name ddress, telephone number, and license number.
- SECTION 2 -DESCRIPTION OF WORK AND VALU ION: Provide a description of the ork to be performed (i.e., installing a manufactured home on a foundation system, etc.) nter the total cost of the work be performed (total contract price).
- SECTION 3 -ACCESSORY BUILDINGS or STRUCTURES: neck the appropriate x to indicate if the accessory building/structure is a new installation or a reinstallation. A new insta structure that has not previously been insta ation means a new ned with the unit. ccessory building or structure or an accessory building or reinstallation means an accessory building or structure that is being reinstalled for the same purpose as t ation. Enter the Standard Plan Approval Number if this is a e original inst new installation. Check the appropriate box to checked, enter the type of building/structure or indicate the type of accessory building/structure. If the box "Other" is the line-provided (i.e. storage building, greenhouse, etc.). Enter the name, telephone number and address of the owner. If t cupant of the manufactured home/mobilehome is other than the owner, enter the name of the resident, telephone r ber and the lot number where the unit is located.
- MANUFACTURED HOME/MOBILEHOME INSTALLATI SECTION 4 r the name, telephone number and address of the owner. If the er than the owner, enter the name of the resident and the lot occupant of the manufactured home/mobilehne is off number where the unit is located. Enter the se al number of the manufactured home/mobilehome. The serial number(s) can be located on the Manufacturer's Certif ate of Origin e Certificate of Title, registration documents or on the front cross member of the unit. Enter the year th unit was manufa ured. Enter the manufacturer's name and Model name. This information can be obtained from th Manufacturer's Certi ate of Origin, the Certificate of Title, registration outside of the unit itself nter the California Insignia Number(s) or HUD Label documents or may be designated on the Number(s) issued for this unit, if known
- PARK OWNER, OPERATOR OR MAN GER SIGNATURE: The signature of the park owner, operator or manager is required ent that the park is aware and approves of the SECTION 5 ned. This signature is an acknowledgm along with the date the form is si services being requested in this application.

CONTRACTOR/OWNER BUILDER DECLARATIO

nstruction are required by state law to provide the follo Contractors proposing ing information: Contractor:

- Item 1 Licensed Contractor Declara; on: Enter the contractor's license class, license number, date th license expires, the contractor's sianature and date.
- laration: Place a check mark next to the declaration regarding the Item 3 -Workers' Compensation D prkers' compensation coverage ctor. If the second declaration is marked, the contractor must also provide signed by the contractor and dated. that applies to the contr the carrier's name and policy number. This item mus
- for the service being Construction Lending gency: If there is a construction lending agency for the performance of the w requested, enter th ter the word "none
- name and address of the lending agency. If there is no lending agency involved, a ertification must be signed and dated by the contractor or agent on behalf of the co Item 5 - Certification: The ractor.

Owner Builder: If the ork or activity as described on the application, is being completed by the owner, the owner st complete the

- der Declaration: Place a check mark next to the declaration which is applicable. If the third declaration Item 2 -Owner-P is marked, enter on number from the Business and Profession Code which provides the exemption and the reason for the ex ption. The the se nust also sign and date this section.
- Item 5 cation: The certification must be signed and dated by the owner.

T25CCR, section 1002(f)(8)(D), Application for Permit to Construct, HCD MP 50- Proposed Form 03/24

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development,
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



<u>APPLICATION FOR PERMIT TO CONSTRUCT — HCD MP 50</u>

| CONTRACTOR / OWNER-BUILDER DECLARATIONS Teld repaired for commercal multipara by represident sphicies. | SECTION 1. PARK / APPLICANT INFORMATION | DEPARTMENT USE ONLY |
|--|--|--|
| 1. LICENSED CONTRACTOR DEGLARATION | Park Namo | - |
| | Park Address | Part ID No. |
| cherists affirm under penalty of certury that I am atended under provisions. Business and Professions, Code (BPC), division 3, chapter 9 (commending | | EW DIS DAY |
| peolion 7000) and my license is in full force and effect. | Zio Para Owner: | (the the |
| Liounale Class Un No. Eva Date | APPLICANT (Not Agent) | THE WORLD |
| Contractor Date | DI CONTRACTOR DI OWNER DI RESIDENTI | A Alleria de |
| 2. OWNER-BUILDER DECLARATION (Choose one) | Natio | INFORMATION |
| Herselv aftern under benefit of demand half am exampl from the Centracti | Advisesa | What is |
| State License Law for the following reason. | CAL State Do | Service of |
| Surpress and Performant Code (Co. C.) Section 7/31.5. Any other country with nature | 4 | Cantinoval |
| partitible transmict. Airs improve complete on the pair and structure or the bi-sequence determines the properties of the airs and structure of features of the airs and the airs and the air airs and the airs and t | Y Comment | Condenions |
| control passage of the between and the Company of the Common are interreported. BY, do not 2 of order 2 person (US) or the force the order or depart in a remark to a remark | The second secon | Conden des |
| para to the about enumber Are equity, of action 70015 to are appared to a re- alizable for about a distribution of action over the latest 200 to 15000. | | Upon Department |
| II I as general the process or my employees with wages as their solg | Natio | approval to release, and payment of |
| portugersation, will on the work, and the structure is not intended or offered | | feet, this permit is |
| D. C. and D. C. Charles and C. C. Charles and Control of the Contr | Telephonia Lucenda No. | itsued only for items validated |
| property with the first and transform tension. But the property and there is nearly to implie on largest the order consistency or provided that and transformers, and not independent affirmed for admit forward the handless or processment a sold antique or one or comparison on when transformers are forward induced to make a respect of the large. | | pelow. |
| entation in this payment D. wife. | | Countil |
| Los owner of the process, an exclusivery contracting with scenario contractors to construct the protect. | | MH AGOS |
| BPC action 7044: The Connector State Corresp Law state on early to an owner of | | W- |
| persons who hadd as removed therein, and who contains an explanation with a committee or an explanation with a committee or an explanation of the committee of the committee or an explanation | | 35.130 |
| C Lam grand upon BPC beckers for the reason: | | Mat |
| | Valuation (Cola of work) | MeC |
| Owne: Dolo- | | TEL-RIGER |
| 5. WORKERS' COMPENSATION DECLARATION (Choose one) | SECTION 3. ACCESSORY BUILDINGS OR STRUCTURES NEW DREINSTALL Slandard Plan Asserval No. | P.A. |
| Tierselv affirm under genetiv der Link one of the following declarations. | Awaling Carport Form Cabana Coner (specify) | 201 |
| (have and will manistri a certificate of consent to self-insure for workers | | SWO. |
| compensation, as provided for by Later Code section 3700, for the | | TOTAL |
| performance of the west for which this permit is second. If there and will marriage works promotes then internance, as reserved by | Address Loid | DIVISION PROCESS |
| Labor Code section 4700, for the performance of the work for which this be | | RECORD |
| is usuald. My workers' compensation insurance camer and colicy is imperia | Address Loi # | |
| Corner | SECTION 4. INSTALLATION—MOBILEHOME / MANUFACTURED | Astronori |
| Policy Number | HOME | CostPlemm |
| (centy hat in the performance of the work for which his permit is basic | | |
| ahai not employ any getson in any maneo se ao io become seiged to workers' compensation away of California, and some statict should become | Antress Lai e | Lead Fee |
| authers to worker of contembation provisions of Later Gode Section 3700. I shall believe content with tiese provisions. | Resident Tolograms | appar/master |
| | Amress Lot # | Speat Property |
| Applicant Date | Sum Psi | Possis Works |
| AND SHALL SEE THE RESERVENT OF MINERAL PERSONS THE PROPERTY OF | Mr. Manufacture forme Monte Nume | |
| HONERS THOUSAND IX CLARK (CID) DOWN IN ADDITION TO THE DUST UP COLD ENSATERS DAMAGES AS DROWNED FOR IN LABOR CLOCK SHOTTEN SHOT INTERNATION. | ST. Date of Manufacture | Elimbridge Host |
| AND ASTORNEYS PLESS | relona i HUB Lacel disc | Ginates Treasure |
| 4. CERTIFICATION (Required) | | |
| confly that I have need this accleration and stalls that the above informalist context. Lagraciae countly with all only and county ordinancial and state law- residing to calleng constructions, and forces within the representatives of the | APPROVAL SIGNATURE | Street Input Face |
| counts to callet upon the above mentioned or porty to inspect in currons | | Une |
| | | grand by |
| Serveture of Applicant or Agent Date | Park Statefure—Required Date | Exmin |

ACCESSORY STRUCTURES: Complete Sections 1, 2, 3, 5, and the Contractor / Owner-Builder Declarations.

MANUFACTURED HOME / MOBILEHOME INSTALLATION: Complete Sections 1, 2, 4, 5, and the Contractor / Owner-Builder

Declarations.

18551 FOUNDATION SYSTEM: Complete Sections 1, 2, 4, 5, and the Contractor / Owner-Builder Declarations.

PARK UTILITIES: Complete Sections 1, 2, 5, and the Contractor / Owner-Builder Declarations.

NEW PARKS AND PERMANENT BUILDINGS: Complete Sections 1, 2, 5, and the Contractor / Owner-Builder Declarations.

Submit the completed application and required fees to the appropriate Area Office listed below.

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356

CONTRACTOR / OWNER-BUILDER DECLARATIONS

CONTRACTOR: Contractors proposing construction are required by state law to provide the following information:

- ITEM 1: LICENSED CONTRACTOR DECLARATION Enter the contractor's license class, license number, license expiration date, and the contractor's signature and date.
- ITEM 3: WORKER'S COMPENSATION DECLARATION Place a check mark next to the declaration regarding the workers'
 compensation coverage that applies to the contractor. If the second declaration is marked, the contractor must also provide
 the carrier's name and policy number. This item must be signed by the contractor and dated.
- ITEM 4: CERTIFICATION The certification must be signed and dated by the contractor or agent on behalf of the contractor.

OWNER-BUILDER: If the work or activity as described on the application is being completed by the owner, the owner must complete the following items:

- ITEM 2: OWNER-BUILDER DECLARATION Place a check mark next to the declaration which is applicable. If the third
 declaration is marked, enter the section number from the Business and Professions Code (BPC) that provides the
 exemption and the reason for the exemption. The owner must also sign and date this section.
- ITEM 4: CERTIFICATION The certification must be signed and dated by the owner.

SECTION 1. PARK / APPLICANT INFORMATION Enter the park name and address. Enter the park owner's name(s). Enter the applicant's name, address, telephone number, and email address. The Department will contact or correspond with the party that is entered as the Applicant. Check the appropriate box to describe the applicant. If the requested services involve an architect or engineer, enter the architect or engineer's name, address, telephone number, and license number.

SECTION 2. DESCRIPTION OF WORK AND VALUATION Provide a description of the work to be performed (e.g., installing a manufactured home on a foundation system). Enter the total cost of the work to be performed (total contract price).

SECTION 3. ACCESSORY BUILDINGS OR STRUCTURES Check the appropriate box to indicate if the accessory building/structure is a new installation or a reinstallation. A new installation means a new accessory building or structure or an accessory building or structure that has not previously been installed with the unit. A reinstallation means an accessory building or structure that is being reinstalled for the same purpose as the original installation. Enter the Standard Plan Approval Number if this is a new installation. Check the appropriate box to indicate the type of accessory building/structure. If "Other" is selected, enter the type of building/structure (e.g., storage building, greenhouse, etc.). Enter the name, telephone number, and address of the owner. If the occupant of the manufactured home/mobilehome is other than the owner, enter the resident's name, telephone number, and the lot number where the unit is located.

SECTION 4. INSTALLATION—MOBILEHOME / MANUFACTURED HOME Enter the name, telephone number, and address of the owner. If the occupant of the manufactured home/mobilehome is other than the owner, enter the resident's name and the lot number where the unit is located. Enter the serial number(s) of the manufactured home/mobilehome. The serial number(s) can be located on the Manufacturer's Certificate of Origin, the Certificate of Title, registration documents, or on the front cross member of the unit. Enter the year the unit was manufactured. Enter the manufacturer's name and model name. This information can be obtained from the Manufacturer's Certificate of Origin, the Certificate of Title, registration documents, or may be designated on the outside of the unit itself. Enter the California Insignia Number(s) or HUD Label Number(s) issued for this unit, if known.

SECTION 5. PARK OWNER, OPERATOR, OR MANAGER APPROVAL SIGNATURE Print the name of the park owner, operator, or manager that is signing the application. The signature of the park owner, operator, or manager and date signed is required. This signature is an acknowledgment that the park is aware and approves the services being requested in this application.

HCD MP 50 (Rev. 03/24) Page 2

T25CCR, section 1002(f)(8)(E), Application to Install Mobilehome/Manufactured Home Earthquake Resistant Bracing System, HCD 50 ERBS – Current Form 7/04

State of California Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome Parks Program APPLICATION FOR PERMIT TO INSTALL MANUFACTURED HOME/MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM (SEE REVERSE SIDE OF FORM FOR INSTRUCTIONS AND ADDITIONAL INFORMATION) CONTRACTOR WNER BUILDER DECLARATIONS SECTION 1 - APPLICANT INFORMATION DEPARTMENT USE ONLY 1. LICENSED CONTRACTORS DECLARATION I hereby affirm under pen under provisions of Chapter: Division 3 of the Business ar is in full force and effect. f perjury that I am licensed mmencing with Section 7000) of ofessions Code, and my license Closed By License Class____ Lic. No. Exp. Date Contractor__ Date City 2. OWNER BUILDER DECLARATION

1. Hereby siffirm under penalty of perjudy in vision (Sec. 1931). The results of the following soon (Sec. 1931). The results of the res COLLECTION INFORMATION 2. OWNER-BILL DER DECLARATION am exempt from or county demolish, or es the that he or she Telephone Number (□ OTHER ☐ REGISTERED OWNER ☐ CONTRACTOR (Other - relationship to installer) Collection Date [] as owner of the property or my employees with wages as their sole compensation, will do the work, and the structure is not intended of offered for sale, Sec. 7044. Business and Profession Code. The Contractors License Lew does mot apply to an owner work himself or contractors License Lew does mot apply to an owner work himself or the sale of through his or her own employees, provided that such improve ments are not intended or offered for sale. If however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale. SECTION 2 - INSTALLATION SITE INFORMATION Assigned to stered Owner Name Routed By Addre Contact sale.

as owner of the property, an exclusively contracting with licensed contractors to construct the project Sec. 7044, Business contractors to construct the project Sec. 7044, Business contractors to construct the project Sec. 7044, Business apply to an owner of property who builds or improves thereon, and who contractor for such projects with a contractor(s) license pursuant to the Contractors License Law. Space / Lot pursuant to the Contractors License Law.

I am exempt under Sec. ______, B. & P.C. for this reason: Site Address Owner__ Date 3. WORKERS' COMPENSATION DECLARATION l hereby affirm under penalty of perjury one of the following declarations: SECTION 3 - EARTHQUAKE REJISTAN BRACING SYSTEM INFORMATION ☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. ☐ NEW ☐ REINSTA is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are: Manufacturer Na Brand Nar Policy Number (This section need not be completed if the permit is for one hundred dollars (\$100) or less). Mode □ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to workers' compensation laws of California, and agree that if I should become subject to workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions. ECTION 4 - APPLICANT SIGNITURE I hereby certify under penalty of perjury that the informatic provided herein is true and correct. WARNING FAILURE TO SECURE WORKERS'
COMPENSATION COVERAGE IS UNLAWFUL, AND
SUBJECT AN BEMPLOYER TO CRIMINAL PENALTIE
CML FINES UP TO ONE HUNDRED THOUSAND
\$(100,000), IN ADDITION TO THE COST OF COVER
DAMAGES AS PROVIDED FOR IN SECTION 32 AED
LABOR CODE, INTEREST, AND ATTORNEY AED Signature (Applicant) Date 4. CONSTRUCTION LENDING AGENCY at there is a nce of the work for I hereby affirm under penalty of pe construction-lending agency for the po which this permit is issued (Sec.3097 Lender's Name OTE: This application must be accompanied by a copy of the plans and manufacturer's installation instructions made from the original, bearing the Department's stamp of approval and by the appropriate fees in accordance with the California Code of Regulations, Title 25, Chapter 2. Lender's Address_ 5. CERTIFICATION
I certify that I have above information is Issued By read his application and state that the orget. I agree to comply with all city and that a laws relating to building construction perpresentalives of this county to enter upon property for inspection purposes. Signature of

mplete the application, including the Contractor/Owner Builder Declarations. Submit the completed application and uired fees, as contained in the California Code of Regulations, Title 25, Chapter 2 to the appropriate Area Office listed

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (916) 255-2501 Southern Area Office 3737 Main St., Suite 400 Riverside, CA 92501 (951) 782-4420

CONTRACTOR/OWNER BUILDER DECLARATIONS

CONTRACTOR: Cont ctors proposing construction are required by state law to provide the following

- Item 1 Licensed Contract Declaration: Enter the contractor's license class, license number, dat the license expires, the and date.
- contractor's signatur Item 3 Workers' Compensat Declaration: Place a check mark next to the declaration rega ing the workers' rked, the contractor must hat applies to the contractor. If the second declaration is rame and policy number. This item must be signed by the compensation coverage also provide the carrier's contractor and dated
- : If there is a construction lending agency for the pe ormance of the work for the Item 4 - Construction Lending Age service being requested, en the name and address of the lending agency. If ere is no lending agency involved, enter the word "none
- Item 5 Certification: The certification r st be signed and dated by the contractor agent on behalf of the contractor.

OWNER BUILDER: If the work or acti y as described on the application, being completed by the owner, the owner must complete the following

- Item 2 Owner-Builder Declaration: Place a che mark next to the declar on which is applicable. If the third declaration is marked, enter the section number from the Business and Profession Code, which provides the exemption and the reason for the exemption. The owner must also sign and date this section.
- Item 5 Certification: The certification must be signed nd dated by the owner.
- SECTION 1 -APPLICANT INFORMATION: Enter the a Department will contact or correspond with nt's name, address and telephone number (The rty that is entered as the applicant.) Check the "OTHER" is marked, please indicate the relationship appropriate box to describe the applica If the to the owner. If the requested service nvolve an chitect or engineer, enter the architect or engineer's name, address, telephone number d license num
- SECTION 2 -ON: Enter the name INSTALLATION SITE INFORM ddress and contact telephone number of the system is to be installed. Enter the name manufactured home/mobileho registered owner where and address of the mobileho
- SECTION 3 -EARTHQUAKE RESIST IT BRACING SYSTEM INFORMATI Check the appropriate box to indicate stallation or a reinstallation. A new installa d under a unit. A reinstallation means a sy if the system is a new in tion means a new system that has not m that is being reinstalled for the same purpose as the plans to be submitted to be reinstalled will require the evalid. Enter the Standard Plan original installation. Plans for an existing syste d for approval or the previous approval must still b Approval Number Enter the name of the system manufacturer. Enter the BRAND NAME and MODEL NUMBER of th
- SIGNATURE: The signature of the applicant is required along was signature is your certification that the information provided on this APPLICA SECTION 4 h the date the form is oplication is true and signed correct

T25CCR, section 1002(f)(8)(E), Application for Permit to Install Manufactured Home / Mobilehome Earthquake Resistant Bracing System, HCD MP 50 ERBS – Proposed Form 03/24

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



APPLICATION FOR PERMIT TO INSTALL MANUFACTURED HOME / MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM

| CONTRACTOR / OWNER-BUILDER DECLARATIONS | SECTION 1. APPLICANT INFORMATION | DEPARTMENT |
|--|--|-----------------|
| 1. LICENSED CONTRACTOR DECLARATION | Check one: ☐ CONTRACTOR ☐ REGISTERED OWNER | USE ONLY |
| Lhereby affirm under penalty of perjury that I am licensed under provisions of | | |
| Business and Professions Code (BPC), division 3, chapter 9 (commencing with section 7000) and my license is in full force and effect. | OTHERCaber relationship to insidiler | Park ID No. |
| License Class Lic. No. Exp. Date | Name | |
| | Address | Closed by |
| Contractor Date 2. OWNER-BUILDER DECLARATION (Choose one) | 244 | - |
| Lhereby affirm under penalty of penury that I am exempt from the Contractors | <u>City</u> Zip | Date closed |
| State License Law for the following reason: | Telephone | 1 |
| Susmoss and Professions Code (SPC) Section 7031 5. Any city or county which requires a permit to construct, alter, reprove, demolish, or repair say structure, prior to its issuance. | Email Address | DTN |
| also requires the applicant for such permit to the a signed scannent that he or she is licensed pursuant to the growsons of the Contractor, State License Law (commencing with | Architect / Engineer Information (If applicable) | |
| 6PC, division 3, chector 9, section 7000) or that he or she is exempt therefrom and the | Name | |
| pasis for the alleged exemption. Any violation of section 70315 by any applicant for a permit saturate the applicant to a civil remaity of aid more than the fauncied dollars (\$500). | | 2207222220 |
| I, as owner of the property, or my employees with wages as their sole | Address | INFORMATION |
| compensation, will do the work, and the structure is not intended or offered for sale. | Telephone | INT CHARACTER |
| BPC section 7044. The Contractors State License Law does not apply to an owner of | License Number | |
| purperty who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended in | | Collection # |
| offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the building proving that he or she did not build or | SECTION 2. INSTALLATION SITE INFORMATION | |
| improve for the purpose of sale | Registered Owner Name | Fee received |
| I. as owner of the property, am exclusively contracting with licensed contractors to construct the project. | Address Lot # | |
| EPC section 7044. The Contractors State License Law does not apply to an owner of | City State Zip | Collection date |
| property who builds or improves thereon, and who contracts for such projects with a contractoris) iconsed pursuant to the Contractors State License Law. | Telephone | |
| ☐ Lam exempt under BPC section for this reason: | Park Name | |
| | Ac (1 6) | |
| Owner Date | Site Address Lot # | |
| 3. WORKERS' COMPENSATION DECLARATION (Choose one) | City County | |
| Lhereby affirm under penalty perjury one of the following declarations: | SECTION 3, EARTHQUAKE BRACING SYSTEM INFORMATION | |
| ☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Labor Code section 3700, for the | | |
| performance of the work for which this permit is issued. | □ NEW □ REINSTALL Standard Plan Approval No. | |
| ☐ I have and will maintain works' compensation insurance, as required by Labor Code section 3700, for the performance of the work for which this permit. | Manufacturer Name | |
| is issued. My workers' compensation insurance carrier and policy number are | Brand Name | |
| Carrier | Model Number | |
| Policy Number | | |
| ☐ I certify that in the performance of the work for which this permit is issued, I | SECTION 4. APPLICANT SIGNATURE | |
| shall not employ any person in any manner so as to become subject to workers' compensation laws of California, and agree that if I should become | I hereby certify under penalty of periury that the information provided | |
| subject to workers' compensation provisions of Labor Code section 3700. I shall forthwith comply with those provisions. | herein is true and correct. | |
| | | |
| Applicant Date | Applicant Signature Date | |
| WARNING FAILURE TO SECURE WORKERS COMPENSATION COVERAGE IS UN. AVAPUL. AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL PINES UP TO CHE | NOTE: | |
| HUNDRED THE USAND DOLLARS (\$100,000), INADDITION TO THE COST OF COMPRISATION, DAMAGES AS PROVIDED FOR IN LABOR CODE SECTION 3766, INTEREST. | This application must be accompanied by a copy of the plans and | |
| ANU NTIGRNEWS FRES | manufacturer's installation instructions made from the original, | |
| CERTIFICATION I certify that I have read this application and state that the above information is | bearing the Department's stamp of approval and by the appropriate | Date |
| correct. I agree to comply with all city and county ordinances and state laws | fees in accordance with the California Code of Regulations, title 25, chapter 2. | |
| relating to building construction, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes. | Grapher Z. | Issued by |
| Security to even the deposition and burbard on makering bulbooks | | |
| Signature of Applicant or Agent Date | | Expires |

Complete the application, including the Contractor / Owner-Builder Declarations. Submit the completed application and required fees, as contained in the California Code of Regulations, title 25, chapter 2, to the appropriate Area Office listed below.

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356

CONTRACTOR / OWNER-BUILDER DECLARATIONS

CONTRACTOR: Contractors proposing construction are required by state law to provide the following information:

ITEM 1: LICENSED CONTRACTOR DECLARATION

Enter the contractor's license class, license number, license expiration date, and the contractor's signature and date.

ITEM 3: WORKER'S COMPENSATION DECLARATION

Place a check mark next to the declaration regarding the workers' compensation coverage that applies to the contractor. If the second declaration is marked, the contractor must also provide the carrier's name and policy number. This item must be signed by the contractor and dated.

ITEM 4: CERTIFICATION

The certification must be signed and dated by the contractor or agent on behalf of the contractor.

OWNER-BUILDER: If the work or activity as described on the application is being completed by the owner, the owner must complete the following items:

ITEM 2: OWNER-BUILDER DECLARATION

Place a check mark next to the declaration which is applicable. If the third declaration is marked, enter the section number from the Business and Professions Code (BPC) that provides the exemption and the reason for the exemption. The owner must also sign and date this section.

• ITEM 4: CERTIFICATION

The certification must be signed and dated by the owner.

SECTION 1. APPLICANT INFORMATION

Enter the applicant's name, address, telephone number, and email address. The Department will contact or correspond with the party that is entered as the applicant. Check the appropriate box to describe the applicant. If the OTHER checkbox is marked, please indicate the relationship to the owner. If the requested services involve an architect or engineer, enter the architect or engineer's name, address, telephone number, and license number.

SECTION 2. INSTALLATION SITE INFORMATION

Enter the name, address, and contact telephone number of the manufactured home/mobilehome registered owner where the system is to be installed. Enter the name and address of the mobilehome park.

SECTION 3. EARTHQUAKE RESISTANT BRACING SYSTEM INFORMATION

Check the appropriate box to indicate if the system is a new installation or a reinstallation. A new installation means a new system that has not previously been installed under a unit. A reinstallation means a system that is being reinstalled for the same purpose as the original installation. Plans for an existing system to be reinstalled will require the plans to be submitted for approval or the previous approval must still be valid. Enter the Standard Plan Approval Number. Enter the name of the system manufacturer. Enter the BRAND NAME and MODEL NUMBER of the system.

SECTION 4. APPLICANT SIGNATURE

The signature of the applicant is required along with the date the form is signed. This signature is your certification that the information provided on this application is true and correct.

HCD MP 50 ERBS (Rev. 03/24)

T25CCR, section 1002(f)(8)(G), Application For Standard Plan Approval, HCD 520-Current Form 7/04

| | Business, Tran: Department of Hou | te of California sportation and Housing Agency Ising and Community Development | S COMMUNITY DE |
|--|--|--|--|
| A DD | Division | of Codes and Standards | |
| | | STANDARD PLAN APPROV | |
| (SEE | REVERSE SIDE FOR INS | TRUCTIONS ON COMPLETING THIS FORM | 9703 |
| ECTION 1. | Check appropr | riate box(es): | DEPARTMENT USE ONL |
| andard Plan Approval (SPA) Requested: | | sory Building or Structure | Collection No. |
| Accessory Building or Structure | Awning | Cabana Porch | |
| Foundation System | Garage | Enclosure Carport | Date |
| Engineered Tiedown System | Ramada | Other Storage | Building Application Fee \$Renew In Fee \$ |
| ervice Requested: New Application | ☐ Rene | wal Resubmission | Regulamission Fee \$ |
| Revision | ☐ Chang | ge of Name/Ownership | Revision Fee \$ |
| Type of Unit: Manufactured Ho | ne/Mobilehome | Commercial Modula | Change of Name/ Ownership \$ |
| Drawing Number: | \ | | Plan Approval Fee |
| Control of the contro | | Standard Plan Approval Nup (If previously issued by the Deporm | ent) |
| Model Number: | | | Other_ |
| Product Name: | | | TOTAL |
| SECTION 2. APPLICANT INFORMATION | ON NO | | |
| Applicant Name | | Telephone | Number |
| Address | | City | Zip |
| Architect/Engineer Name | | Telephone | Number |
| Address | | City | Zip |
| License/Registration Number | | | |
| SECTION 3. APPLICANT CERTIFICAT | ION | | |
| I hereby certify: (1) that the information I has system is in compliance with the approved 2.or 2.2. I understand that failure to comply | ave provided is correct plan and the applicab with the to ms of ap | ct; (2) and that I will ensure that the de provisions of Title 25, Carfornia proval shall be cause for cancellatio | manufacture and/or construction of this Code of Regulations, Division I, Chapter on of the Standard Plan Approval. |
| Executed on | | | • |
| | | | (State) |
| Signature NOTE: Standard Plan Approval is valid only wh | Pri n the design is suitable | for the locality. Two (2) copies of the | e approved plan shall be provided with each |
| foundation system or engineered tiedo | wn system sold, for the | purpose of obtaining a permit to const | ruct from the enforcement agency. |
| | DEPART | MENT USE ONLY | |
| Date Approved | (70, 700, 500, 500 | | Pate / |
| Approved By: | | | 32555 5 |
| | ned to the applicant | Withheld pending payment of | fees Other |
| | werndoommorket Edizatii | | normanian a superinter |
| Comments: | | | |

Complete sections 1, 2, and 3. Submit this application with three (3) copies of the plan and two (2) copies of the calculations and appropriate fees as specified in Title 25, California Code of Regulations, Division I, Chapter 2, and/or 2.2, to the following address:

(Fees Due with this Application Are Not Subject to Refund)

Department of Housing and Community Development Division of Codes and Standards 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826

Section 1 - Accessory Building or Structure, Foundation System, or Engineered Tiedown System Information

Standard Van Approval Requested: Check the appropriate box to indicate the type of plan approval you are requesting; Accessory Building or Structure (Health and Safety Code §\$18213 and/or 18862), Foundation System (Health and Safety Code §18551) or Engineered Thydown System (Health and Safety Code §18613.4).

Service Requested. Check the appropriate box to indicate the type of service you are requesting. The following is a definition of the services provided:

- New Application This is an application for a standard plan approval which is submitted for the first time.
- Renewal This is an application for a renewal of a standard plan for which the Bepartment has previously approved and issued a Standard Plan Approval number.
- Resubmission This is an application that upon original submission was rejected and is now being resubmitted.
- Revision This is an application to request a change or revision to an approved standard plan.
- Change of Name/Ownership This an application to report a change of the name of the applicant or the company from the name submitted on the original application for a Standard Plan Approval.

Type of Unit: Check the appropriate box to indicate of the Standard Plan Approval is being requested for Manufactured Home/Mobilehome, or Commercial Modular.

<u>Drawing Number</u>: Enter the drawing number as assigned the applicant, manufacturer, distributor, etc.

Model Number: Enter the model number as assigned by the applicant, manufacturer, distributor, etc.

<u>Product Name</u>: Enter the name under which the product will be marketed.

Standard Plan Approval Number: If this application is for a renewal, revision or change of name/ownership, enter the Standard Plan Approval number previously issued by the Department.

Section 2 - Applicant Information

Enter the name, address and telephone number of the applicant. The applicant is the party that is requesting the Standard Plan Approval (Manufacturer, Distributor, Contractor, etc.). Also enter the name, address and telephone number of the architect or engineer of record that designed the system. Enter the architect's California license number or engineer's California registration number.

Section 3 - Applicant Certification,

Enter the date, city and state where this document is completed and signed. The applicant is required both to print and to sign his/her name.

Upon receipt of the submitted plans, calculations, required fees and the Application for Standard Plan Approval (HCD 520), the Department will review and either;

- Reject the application. If the application is rejected, the Department will return the submitted plans, calculations and Application for Standard Plan Approval (HCD 520) along with a notice advising the applicant of any necessary corrections for approval (one copy of the plans will be retained by the Department).
- 2. Approve the application. If the application is approved, the Department will return the submitted plans and the applicant copy of the Application for Standard Plan Approval (HCD 520). The HCD 520 will indicate the date the standard plan was approved, the Standard Plan Approval number, and the date the approval will expire. The plans returned to the applicant will bear a departmental stamp indicating the date of approval, date of expiration, Standard Plan Approval number and the signature of a Department representative.

T25CCR, section 1002(f)(8)(F), Application for Standard Plan Approval, HCD MP 520 - Proposed Form 03/24

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards



APPLICATION FOR STANDARD PLAN APPROVAL

SEE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM

| Standard Plan Approval Requested: Accessory Building or Structure | Type of Accessory Building or Structure: Awning Garage | DEPARTMENT USE ONLY Collection No. |
|---|--|--------------------------------------|
| ☐ Foundation System | ☐ Ramada ☐ Cabana | Date |
| | A CONTRACTOR OF THE PARTY OF TH | Application Fee \$ |
| Engineered Tiedown System | | Renewal Fee \$ |
| Service Requested: | Porch Carport | Resubmission Fee \$ |
| New Application Revision | Storage Building | Revision Fee \$ |
| Renewal Resubmission | Drawing Number: | Change of Name/ |
| Change of Name/Ownership | Model Number: | Ownership \$ |
| Type of Unit: | Product Name: | Plan Approval Fee (First Hour) \$ |
| Manufactured Home/Mobilehome | Standard Plan Approval Number: (If previously issued by the Department) | Other |
| Commercial Modular | In previously issued by the Department | TOTAL |
| Address | City | Zip |
| SECTION 2. APPLICANT INFORMATION Applicant Name | Telephone Num | her |
| | City | ZIP |
| Email Address | 79-00-70- | |
| Architect/Engineer Name | Telephone Nun | nber |
| Address | City | Zip |
| License/Registration Number | | |
| SECTION 3. APPLICANT CERTIFICATIO | N | |
| construction of this system is in compliance wit Regulations, title 25, division 1, chapter 2 or 2. for cancellation of the Standard Plan Approval. | provided is correct; (2) and that I will ensure that the theory of the provision of the approved plan and the applicable provision of the provision of the term of | s of California Code of |
| Executed on at Date | City | State |
| Signature | Print Name | |
| | gn is suitable for the locality. Two (2) copies of the approved p the purpose of obtaining a permit to construct from the enforce | |
| | DEPARTMENT USE ONLY | - The residence is |
| | d Plan Approval Nun | nber Expiration Date |
| Date Approved Standar | | |

HCD MP 520 (Rev. 03/24)

Complete sections 1, 2, and 3. Submit this application with three (3) copies of the plan and two (2) copies of the calculations and appropriate fees, as specified in California Code of Regulations, title 25, division 1, chapters 2 and/or 2.2, to the address below.

Note: Fees due with this application are not subject to refund. Contact HCD's Northern Area Office at NAOStaff@hcd.ca.gov or (800) 952-8356 with any questions.

HCD—Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826

SECTION 1. ACCESSORY BUILDING OR STRUCTURE, FOUNDATION SYSTEM, OR ENGINEERED TIEDOWN SYSTEM INFORMATION

Standard Plan Approval Requested: Check the appropriate box to indicate the type of plan approval you are requesting:

- Accessory Building or Structure (Health and Safety Code (HSC) sections 18213 and/or 18862)
- Foundation System (HSC section 18551)
- Engineered Tiedown System (HSC section 18613.4)

Service Requested: Check the appropriate box to indicate the type of service you are requesting. The following is a definition of the services provided:

- New Application—This is an application for a standard plan approval which is submitted for the first time.
- Renewal—This is an application for a renewal of a standard plan for which the Department has previously approved and
 issued a Standard Plan Approval number.
- Resubmission—This is an application that upon original submission was rejected and is now being resubmitted.
- Revision—This is an application to request a change or revision to an approved standard plan.
- Change of Name/Ownership—This is an application to report a change of the name of the applicant or the company from the name submitted on the original application for a Standard Plan Approval.

Type of Unit: Check the appropriate box to indicate if the Standard Plan Approval is being requested for manufactured home/mobilehome, or commercial modular.

Drawing Number: Enter the drawing number as assigned by the applicant, manufacturer, distributor, etc.

Model Number: Enter the model number as assigned by the applicant, manufacturer, distributor, etc.

Product Name: Enter the name under which the product will be marketed.

Standard Plan Approval Number: If this application is for a renewal, revision or change of name/ownership, enter the Standard Plan Approval number previously issued by the Department.

SECTION 2. APPLICATION INFORMATION

Enter the name, address, telephone number, and email of the applicant. The applicant is the party that is requesting the Standard Plan Approval (manufacturer, distributor, contractor, etc.). Also, enter the name, address, and telephone number of the architect or engineer of record that designed the system. Enter the architect's California license number or engineer's California registration number.

SECTION 3. APPLICANT CERTIFICATION

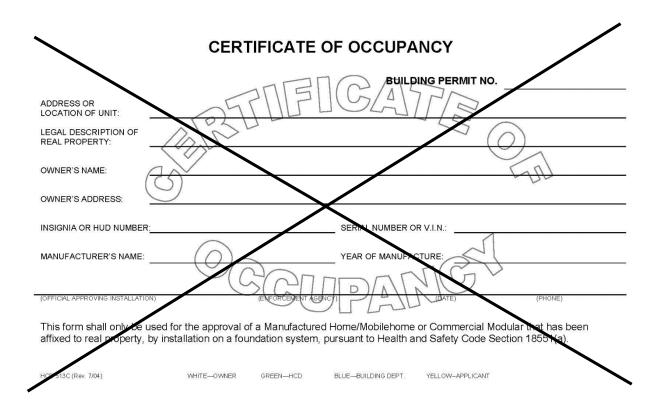
Enter the date, city, and state where this document is completed and signed. The applicant is required both to print and sign his/her name.

Upon receipt of the submitted plans, calculations, required fees and the Application for Standard Plan Approval (HCD MP 520), the Department will review and make one of the following determinations:

- Reject—If the application is rejected, the Department will return the submitted plans, calculations, and Application for Standard Plan Approval (HCD MP 520) along with a notice advising the applicant of any necessary corrections for approval (one copy of the plans will be retained by the Department).
- Approve—If the application is approved, the Department will return the submitted plans and a copy of the Application for Standard Plan Approval (HCD MP 520). The HCD MP 520 will indicate the date the standard plan was approved, the Standard Plan Approval number, and the date the approval will expire. The plans returned to the applicant will bear a departmental stamp indicating the date of approval, date of expiration, Standard Plan Approval number, and the signature of a Department representative.

HCD MP 520 (Rev. 03/24) Page 2

T25CCR, section 1002(f)(8)(H), Certificate of Occupancy, HCD 513C - Current Form 7/04



T25CCR, section 1002(f)(8)(G), Certificate of Occupancy, HCD MP 513C – Proposed Form 03/24

CERTIFICATE OF OCCUPANCY

| BUILDING PERMIT NO. | |
|---|---|
| ADDRESS OR LOCATION OF UNIT | |
| LEGAL DESCRIPTION OF REAL PROPERTY | |
| OWNER NAME | |
| OWNER ADDRESS | _ |
| INSIGNIA OR HUD NUMBER SERIAL NUMBER OR V.I.N. | |
| MANUFACTURER NAME YEAR OF MANUFACTURE | |
| GANDARIO V | |
| (OFFICIAL APPROVING INSTALLATION) (ENFORCEMENT AGENCY) (DATE) (PHONE) | |
| This form shall only be used for the approval of a manufactured home / mobilehome or commercial modular that has been affixed to real property, by installation on a foundation system pursuant to Health and Safety Code section 18551(a). | |
| HCD MP 513C (Rev. 03/24) WHITE—OWNER GREEN—HCD BLUE—BUILDING DEPT. YELLOW—APPLICANT | |

T25CCR, section 1002(f)(8)(I), Floodplain Ordinance Compliance Certification For Manufactured Home/Mobilehome Installations, HCD 547 – Current Form 7/04

STATE OF CALIFORNIA.

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF CODES AND STANDARDS
MOBILEHOME PARKS PROGRAM



FLOODPLAIN ORDINANCE COMPLIANCE CERTIFICATION FOR MANUFACTURED HOME/MOBILEHOME INSTALLATIONS

Federal Emergency Management Agency (FEMA) regulations require that manufactured homes and mobilehomes installed in special flood hazard areas comply with 44 CFR, Chapter 1, Part 60, or local ordinances.

This form is required when applying for a permit to install a manufactured home/mobilehone where the Department of Housins, and Community Development (HCD) is the enforcement agency. The permit applicant and the local floodplain management agency must complete this form. This completed form must be submitted with the permit application. A completed copy of this form must retained by the local floodplain management agency

| SEE REVERSE SIDE FOR INSTRUCTIONS TO COMPLETE THIS FORM |
|--|
| SECTION 1 – Installation Site Information (permit applicant to complete this section) |
| Name of Park: Park ID No |
| Park Address:Lot/Space No: |
| City:Zip: |
| Was this lot created on or before December 1, 1974? YES NO |
| Signature of Applicant: |
| SECTION 2 – Local Floodplain Management Agency Verification Local agency to complete this section See the reverse side of this page for more information concerning the requirements of this section. |
| This lot is not in a Special Flood Hazard Area The bottom of this chassis must be setfeetnches above the ground as measured from the lowest point of the lot under the unit. The bottom of the lowest floor must be set to a base flood elevation of [Use only if (f) checked below] |
| a) Initial Flood Insurance Rate Map (FIRM) date for this community / / b) Current FIRM Index Date: / / FIRM Panel Number & Date: / / c) Flood Zone this lot/pad is located in:Base Flood Elevation (in AO zone show depth) d) If Zone A or V, complete 1-3: 1) If applicable, current LOMALOMR Case #:Date: / / 2) Has community knowledge of past flooding in this manufactured home part? 3) Was a manufactured home on this lot/pad ever destroyed or damaged 50% or more by flood? |
| e) The Lot is in Zone B, C, X or D (circle one and check box above) which is not within a Special Flood Hazard Area f) The lot complies with 44CFR, Section 60.3 (c)(6) and height measurement must be referenced to the |
| Base Flood Elevation in (c) to comply with the local floodplain ordinance. |
| g) The lot complies with 44 CFR, Section 60.3(c)(12). |
| Print Name of City/County agent Title |
| Signature of City/County Floodplain Management Agent Providing Information Telephone H/ 0 5477/04 |

INSTRUCTIONS TO THE PERMIT APPLICANT

Provide complete information in Section 1 and submit the form to the local floodplain management agency in the city of county where the manufactured home or mobilehome is to be installed. The local agency will complete Section 2 with the required flood plain information and return the form to you. Submit this completed form with your permit application to the appropriate HCD Area Office.

INSTRUCTIONS TO LOCAL FLOODPLAIN MANAGEMENT AGENCY

Upon receiving this form from the permit applicant, provide the information required by Section 2, return this form to the permit applicant and retain a copy of the completed HCD 547 form for your records.

Copies of the Code of Federal Regulations, (44 CFR, Chapter 1, Part 60) may be obtained from the Federal Emergency Management Agency, Mitigation Division, Region IX, 1111 Broadway, Suite 1209, Oakland CA 94607-4052

THE FOLLOWING IS A PARTIAL REPRINT OF THE APPLICABLE FEDERAL REGULATIONS

FEMA, 44 CFR, Chapter I

Section 60.3 (c)(6)

'Require that manufactured homes that are placed or substantially improved within Zones AI -30, AH, and AE on the community's FIRM on sites (i) outside of a manufactured home park or subdivision, (ii) in an expansion to an existing manufactured home park or subdivision, or (iv) in an existing manufactured home park or subdivision, or (iv) in an existing manufactured home park or subdivision on which a manufactured home has incurred substantial damage' as the result of a flood, be elevated on a permanent foundation such that the lowest floor of the manufactured home is elevated to or above the base flood elevation and be securely anchored to an adequately anchored foundation system to resist floatation collapse and lateral movement.'

"Expansion to existing park or subdivision" means: the preparation of additional sites by the construction of facilities for servicing the lots on which manufactured (mobile) homes are to be affixed (including the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads.)

Section 60.3 (c)(12)

'Require that manufactured homes to be placed or substantially improved on sites in an existing manufactured home park or subdivision within Zones A-1-30, AH, and AE on the community's FIRM that are not subject to the provisions of paragraph (c) (6) of this section be elevated so that either (i) the lowest floor of the manufactured home is at or above the base flood elevation, or (ii) the manufactured home chassis is supported by reinforced piers or other foundation elements of at least equivalent strength that are no less than 36 inches in height above grade and be securely anchored to an adequately anchored foundation system to resist floatation, collapse, and lateral movement.'

"Existing" means: a manufactured (mobile) home park or subdivision for which the construction of facilities for servicing the lots on which the manufactured mobile homes are to be affixed (including, at a minimum, the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads) is completed on or before December 31, 1974, or before the effective date of the community's initial Flood Insurance Rate Map (FIRM), whichever is later.

T25CCR, section 1002(f)(8)(H), Floodplain Ordinance Compliance Certification for Manufactured Home / Mobilehome Installations, HCD MP 547 – Proposed Form 03/24

State of California Business, Consumer Services and Housing Agency Department of Housing and Community Development Division of Codes and Standards



FLOODPLAIN ORDINANCE COMPLIANCE CERTIFICATION FOR MANUFACTURED HOME / MOBILEHOME INSTALLATIONS

Federal Emergency Management Agency (FEMA) regulations require that manufactured homes and mobilehomes installed in special flood hazard areas comply with 44 Code of Federal Regulations (CFR), chapter 1, part 60, or local ordinances.

This form is required when applying for a permit to install a manufactured home/mobilehome where the California Department of Housing and Community Development (HCD) is the enforcement agency and the manufactured home or mobilehome is installed in a flood hazard area. The permit applicant and the local floodplain management agency both need to complete this form. Once complete, please submit with the permit application to the local area office. The addresses are listed on the back of this form. A completed copy of this form must be retained by the local floodplain management agency.

| SEE REVERSE SIDE FOR INSTRUCTIONS | TO COMPLETE THIS FORM | |
|--|--|--|
| SECTION 1. Installation Site Information (Completed by pern | nit applicant) | |
| Park Name | Park ID# | |
| Park Address | Lot / Space # | |
| City | Zip | |
| Was this lot created on or before December 31, 1974? ☐ YES | □NO | |
| Signature of Applicant | | |
| SECTION 2. Local Floodplain Management Agency Verifical | tion (Completed by local agency) | |
| See the reverse side of this page for more information cor | ncerning the requirements of this section. | |
| ☐ This lot is not in a Special Flood Hazard Area | | |
| ☐ The bottom of this chassis must be set feet | inches above the ground as measured from the | |
| lowest point of the lot under the unit. | | |
| The bottom of the lowest floor must be set to a base flood elevation | on of (use only if (F) checked below) | |
| A. Initial Flood Insurance Rate Map (FIRM) date for his community: | | |
| B. Current FIRM Index Date FIRM | Panel Number & Date | |
| C. Flood Zone this lot / pad is located in: Base Flood | Elevation (in AO zone show depth) | |
| D. If Zone A or V, complete 1–3. | | |
| 1. If applicable, current LOMA / LOMR Case #: | Date: | |
| 2. Has community knowledge of past flooding in this manufactur | ed home park? | |
| 3. Was a manufactured home on this lot / pad ever destroyed or | damaged 50 percent or more by flood? | |
| E. The lot is in Zone B, C, X, or D (circle one and check box above | ve) which is not within a Special Flood Hazard Area. | |
| F. The lot complies with 44 CFR section 60.3(c)(6) and height me Elevation in (c) to comply with the local floodplain ordinance. | easurement must be referenced to the Base Flood | |
| G. The lot complies with 44 CFR section 60.3(c)(12). | | |
| Print Name of City / County Agent | Title | |
| Signature of City / County Floodplain Management Agent Providing Inform | mation Telephone | |

HCD MP 547 (Rev. 03/24)

Instructions for Floodplain Ordinance Applications

Section 1: To be completed by the applicant.

Section 2: To be completed by local floodplain management agency in the city or county where the manufactured or mobilehome is to be installed. The local agency will return the form to the applicant. The applicant will then submit this form with their permit to the appropriate HCD area office listed below.

Instructions for Local Floodplain Management Agencies

<u>Upon receiving this form from the permit applicant, provide the information required by Section 2, return this form to the permit applicant, and retain a copy of the completed HCD MP 547 form for your records.</u>

Copies of the Code of Federal Regulations (44 CFR, chapter 1, part 60) may be obtained from the Federal Emergency Management Agency, Mitigation Division, Region IX, 1111 Broadway, Suite 1200, Oakland CA 94607-4052.

The following is a partial reprint of the applicable federal regulations:

FEMA, 44 CFR, chapter 1, section 60.3 (c)(6)

Require that manufactured homes that are placed or substantially improved within Zones AI -30, AH, and AE on the community's FIRM on sites (j) outside of a manufactured home park or subdivision, (ii) in a new manufactured home park or subdivision, (iii) in an expansion to an existing manufactured home park or subdivision, or (iv) in an existing manufactured home park or subdivision on which a manufactured home has incurred 'substantial damage' as the result of a flood, be elevated on a permanent foundation such that the lowest floor of the manufactured home is elevated to or above the base flood elevation and be securely anchored to an adequately anchored foundation system to resist floatation collapse and lateral movement.

"Expansion to existing park or subdivision" means: the preparation of additional sites by the construction of facilities for servicing the lots on which manufactured (mobile) homes are to be affixed (including the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads.)

FEMA, 44 CFR, chapter 1, section 60.3 (c)(12)

Require that manufactured homes to be placed or substantially improved on sites in an existing manufactured home park or subdivision within Zones A-1-30, AH, and AE on the community's FIRM that are not subject to the provisions of paragraph (c)(6) of this section be elevated so that either (i) the lowest floor of the manufactured home is at or above the base flood elevation, or (ii) the manufactured home chassis is supported by reinforced piers or other foundation elements of at least equivalent strength that are no less than 36 inches in height above grade and be securely anchored to an adequately anchored foundation system to resist floatation, collapse, and lateral movement.

"Existing" means: a manufactured/mobilehome park or subdivision for which the construction of facilities for servicing the lots on which the manufactured mobile homes are to be affixed (including, at a minimum, the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads) is completed on or before December 31, 1974, or before the effective date of the community's initial Flood Insurance Rate Map (FIRM), whichever is later.

HCD—Northern Area Office 9342 Tech Center Dr, Ste 550 Sacramento, CA 95826 (800) 952-8356 NAOStaff@hcd.ca.gov HCD—Southern Area Office 3737 Main St, Ste 400 Riverside, CA 92501 (800) 952-8356 SAOStaff@hcd.ca.gov

HCD MP 547 (Rev. 03/24) Page 2

T25CCR, section 1002(f)(8)(J), Manufactured Home or Mobilehome Installation Acceptance (Local Enforcement Agency), HCD 513B – Current Form 7/04

| MOBILE | HOME INSTALLATIO | N ACCEPTANCE | |
|--|----------------------------|---|---|
| | | I.D. NO | |
| | | PERMIT NO | |
| ADDRESS OR LOCATION OF MOBILEHON | ME: | | |
| OWNER'S NAME: | | | |
| OWNER'S ADDRESS: | $\overline{}$ | | |
| INSIGNIA OR HUD NUMBER: | | | |
| MANUFACTURER'S NAME: | | | |
| SERIAL NUMBER OR V.I.N.: | | YEAR OF MANUFA | CTURE: |
| (OFFICIAL APPROVING INSTALLATION) | | (DATE) | (PHONE) |
| | | | |
| IF THE MANUFACTURED HOME/MOBILE SHALL BECOME INVALID. This form shall Health and Safety Code section 18613 or su | l be used when a manufactu | OCATED, THIS INSTALLAT ired home/mobilehome is ins | TION ACCEPTANCE talled in accordance with |
| HCD 513B (Rev. 7/04) | WHITE—OWNER | CANARYPERMITTEE | BLUE—OFFICE FILES |

T25CCR, section 1002(f)(8)(I), Manufactured Home / Mobilehome Installation Acceptance (Local Enforcement Agency), HCD MP 513B – Proposed Form 03/24

| MANUFACTURED H | OME / MOBILEHOME INSTALLATI | ON ACCEPTANCE |
|---|---------------------------------------|-------------------------|
| | I.D. NO. | |
| | PERMIT | NO. |
| ADDRESS OR LOCATION OF MOBILEHO | DME | |
| OWNER NAME | | |
| OWNER ADDRESS | | |
| INSIGNIA OR HUD NUMBER | | |
| MANUFACTURER NAME | | |
| SERIAL NUMBER OR V.I.N. | YEAR O | F MANUFACTURE |
| OFFICIAL APPROVING INSTALLATION | DATE | PHONE |
| | LEHOME IS MOVED OR RELOCATED, THIS IN | |
| Safety Code section 18613 or section 1855 | | |
| | | |
| HCD MP 513B (Rev. 03/24) | WHITE—OWNER CANARY—PERM | ITTEE BLUE—OFFICE FILES |

T25CCR, section 1002(f)(8)(K), Manufactured Home or Mobilehome Installation Acceptance, HCD 513A – Current Form 7/04

| DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS | | | |
|---|---|------------------------|------------------------|
| MOBILEHOME INSTALLATION ACCEPTANCE | | | |
| CALIFORNIA | | I.D. | . NO |
| | | PERMIT | NO |
| ADDRESS OR LOCATION OF | MOBILEHOME: | | |
| OWNER'S NAME: | | | |
| OWNER'S ADDRESS: | \longrightarrow | | |
| INSIGNIA OR HUD NUMBER: | | | |
| MANUFACTURER'S NAME: | | | |
| SERIAL NUMBER OR V.I.N.: | | YEAR OF I | MANUFACTURE: |
| (OFFICIAL APPROVING INSTALLATION) | | (DATE) | (PHONE) |
| IF THE MANUFACTURED HO SHALL BECOME INVALID. T | ME/MOBILEHOME IS MOVED Chis form shall be used when a man 18613 or subsection 18551(b). | OR RELOCATED, THIS INS | |
| HCD 513A (Rev. 7/04) | WHITE—OWN | NER CANARY—PERMIT | TTEE BLUE—OFFICE FILES |

T25CCR, section 1002(f)(8)(J), Manufactured Home / Mobilehome Installation Acceptance, HCD MP 513A – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501

(800) 952-8356

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards

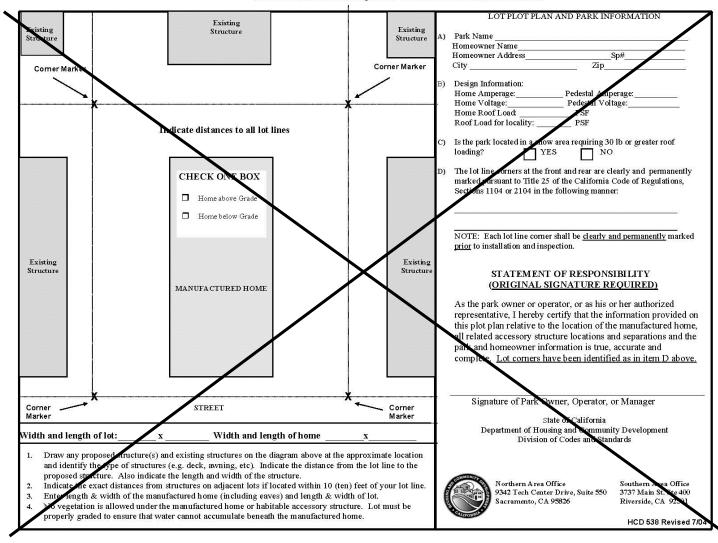


MANUFACTURED HOME / MOBILEHOME INSTALLATION ACCEPTANCE

| | | I.D. NO. | | |
|---|----------------------------|---------------------------------|----------------------------|--|
| | | PERMIT NO. | | |
| ADDRESS OR LOCATION OF MOBILE | HOME | | | |
| OWNER NAME | | | | |
| OWNER ADDRESS | | | | |
| INSIGNIA OR HUD NUMBER | | | | |
| MANUFACTURER NAME | | | - | |
| SERIAL NUMBER OR V.I.N. | | YEAR OF MANUFACTURE | | |
| OFFICIAL APPROVING INSTALLATION | | DATE | PHONE | |
| IF THE MANUFACTURED HOME / MO | BILEHOME IS MOVED OR R | ELOCATED, THIS INSTALLAT | ION ACCEPTANCE SHALL | |
| BECOME INVALID. This form shall be u | sed when a manufactured ho | me / mobilehome is installed in | accordance with Health and | |
| Safety Code section 18613 or section 18 | 8551(b). | | | |
| HCD MP 513A (Rev. 03/24) | WHITE-OWNER | CANARY—PERMITTEE | BLUE-OFFICE FILES | |

T25CCR, section 1002(f)(8)(M), Plot Plan, HCD 538 - Current Form 7/04

ORIGINAL & 2 COPIES REQUIRED WITH THE PERMIT APPLICATION



Lot Plot Plan Instructions

DRAINAGE AND GRADING

- Each mobilehome lot or site shall be graded to insure that water cannot accumulate beneath the unit.
- Final grading must be complete prior to final approval.

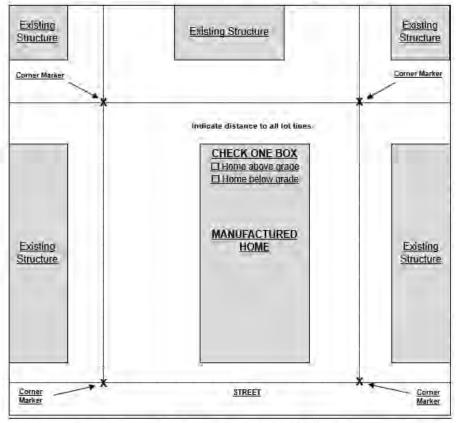
IMPORTANT NFORMATION

- . Within mobil come parks constructed on or after 9/15/61, minimum distances from a manufactured home/mobilehome to
 - 1. A permanent building shall be 10 (ten) feet, measured from the eaves:
 - 2. Another manufactured home/mobilehome, installed, including eaves,
 - a. Side to side 10 (ten feet)
 - b. Side to real or side to front 8 (eight) feet
 - c. Rear to front or rear to rear 6 (six) feet
- Within mobilehome parks constructed prior to 9/15/61, (verification required) a 6 (six) foot separation to any permanent building
 or another manufactured home mobilehome is required.
- Manufactured home/mobilehomes of accessory structures shall not be located:
 - 1. Over underground gas piping, unless the gas piping is installed in gas tight sleepes (open awnings and carports excluded).
 - 2. Over main sewer line clean outs.
 - 3. Within 5 (five) feet of a septic tank.
 - 4. Within 8 (eight) feet of sewage disposal leach) fields.
 - 5. Under overhead insulated electrical conductors, unless 8 (eight) feet of clearance is provided.
 - 6. So as to restrict access to park electrical equipment, indicate clearances
 - 7. Over lot gas risers or meters.
- · Additionally, accessory structures shall not be located:
 - 1. As to restrict access or ventilation of the lot gas rivers of meters.
 - 2. So as to block:
 - a. Required light or ventilation in the manufactured come/mobilehome.
 - b. Required egress windows or exit doors in the manufactured home/mobilehome.
 - c. Access to the manufactured home/mobilehome's fixed appliances.
- All combustible construction, including manufactured homes/mobilehorses, eaves, storage cabinets (sheds), awning posts, decks, etc., must be at least 3 (three) feet from the lot lines (except a lot line bordering a roadway). NOTE: Metal storage cabinets (sheds) with no combustible framing (walls/roff) may be placed up to a lot line, provided there is 3 feet clearance from any structure on the adjacent lot.
- The locations of proposed units or acceptory buildings or structures in relation to four-field petroleum gas (LPG) tanks shall be in accordance with Title 25, section 1217 or 2211.
- A Flood Plain Ordinance Compliance Certificate (HCD Form 547) is required for manufactured home installations where the local government agency has a opted a Flood Plain Management Program.
- For manufactured home/mabilehome installation inspections and accessory buildings or structures that enclose an exit, ALL exterior doorways shall be provided with a means of egress (stairway, ramp, etc.) complying with the California Building Code at the time of the home installation inspection.
- The total occupied area of a lot may not exceed 75% of the lot area, including but not limited to the unit, winings, carports, storage cabinety, storage buildings, porches, stairways and ramps. Driveways, walkways, slabs and similar flat work are not subject to this limitation.
- Plot plans and permits are not required for storage cabinets (sheds), provided the total floor area of all storage cabinets on a lot, do not exceed 120 square feet. Storage cabinets exceeding these limits are storage buildings and require a permit and must be constructed as permanent buildings.
- A School Impact Fee Certification (HCD Form 502) may be required for new manufactured home/mobilehome installations on new lots (constructed on or after September 1, 1985).

T25CCR, section 1002(f)(8)(K), Lot Plot Plan and Park Information, HCD MP 538 - Proposed Form 03/24

LOT PLOT PLAN AND PARK INFORMATION

ORIGINAL & 2 COPIES REQUIRED WITH THE PERMIT APPLICATION



| 1. | Draw any proposed structure(s) and existing structure(s) on the diagram above at the approximate location |
|----|--|
| ï | and identify the type of structures (e.g., deck, awning, etc.). Indicate the distance from the lot line to the |
| | proposed structure. Indicate the length and width of the structure. |

Width and length of home

- 2. Indicate the exact distances from structures on adjacent lots if located within 10 feet of your lot line.
- 3. Enter length and width of the manufactured home (including eaves) and length and width of lot
- 4. No vegetation is allowed under the manufactured home or habitable accessory structure. Lot must be properly graded to ensure that water cannot accumulate beneath the manufactured home.
- 5. Identify any slopes greater than 3 feet in height.

Section 1. PARK AND OWNER INFORMATION

Park Name Homeowner Name

 Homeowner Address
 Sp #

 City
 Zipr

Park Owner Email

Section 2. DESIGN INFORMATION

Home Amperage Pedestal Amperage
Home Voltage Pedestal Voltage
Home Roof Load PSF, Roof Load for Locality PSF

Section 3. SNOW AREA

is the park located in a snow area requiring 30 ib or greater roof loading?

Section 4. LOT LINE CORNERS

The lot line corners at the front and rear are clearly and permanently marked pursuant to California Code of Regulations, title 25, sections 1104 or 2104 as described in the following manner.

Section 5. SCOPE OF WORK

STATEMENT OF RESPONSIBILITY ORIGINAL SIGNATURE REQUIRED

As the park owner or operator, or as his or her authorized representative. I hereby certify under penalty of perjury that the information provided on this plot plant relative to the location of the manufactured home, all related accessory structure locations and separations and the park and homeowner information is true, accurate, and complete. Lot corners have been identified in Section 4.

Signature of park owner, operator, or manager

Print Name

State of California
Department of Housing and Community Development
Division of Codes and Standards

Northern Area Office 9342 Tech Center Dr., Ste. 550 Secremento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main St., Ste. 400 Riverside, CA 92501 (800) 952-8356



THOS MP 500 (REV. US/211)

Width and length of lot:

INSTRUCTIONS

DRAINAGE AND GRADING

- Each mobilehome lot or site shall be graded to ensure that water cannot accumulate beneath the unit.
- Final grading must be complete prior to final approval.

IMPORTANT INFORMATION

Within mobilehome parks constructed on or after September 15, 1961, minimum distances from a manufactured home/mobilehome to:

- · A permanent building shall be 10 feet, measured from the eaves
- · Another manufactured home/mobilehome, installed, including eaves:
 - o Side to side 10 feet
 - Side to rear or side to front 8 feet
 - Rear to front or rear to rear 6 feet

Within mobilehome parks constructed prior to September 15, 1961, (verification required) a 6 foot separation to any permanent building or another manufactured home/mobilehome is required.

Manufactured home/mobilehomes or accessory structures shall not be located:

- Over underground gas piping, unless the gas piping is installed in gas tight sleeves (open awnings and carports excluded)
- Over main sewer line clean outs
- Within 5 feet of a septic tank
- Within 8 feet of sewage disposal (leach) fields
- Under overhead insulated electrical conductors, unless 8 feet of clearance is provided
- So as to restrict access to park electrical equipment, indicate clearances
- Over lot gas risers or meters

Additionally, accessory structures shall not be located:

- As to restrict access or ventilation of the lot gas risers or meters
- So as to block:
 - Required light or ventilation in the manufactured home/mobilehome
 - Required egress windows or exit doors in the manufactured home/mobilehome
 - Access to the manufactured home/mobilehome fixed appliances

All combustible construction, including manufactured homes/mobilehomes, eaves, storage cabinets (sheds), awning posts, decks, etc., must be at least 3 feet from the lot lines (except a lot line bordering a roadway). NOTE: Metal storage cabinets (sheds) with no combustible framing (walls/roof) may be placed up to a lot line, provided there is 3 feet clearance from any structure on the adjacent lot.

The locations of proposed units or accessory buildings or structures in relation to liquefied petroleum qas (LPG) tanks shall be in accordance with California Code of Regulations, title 25, section 1211 or 2211.

A Flood Plain Ordinance Compliance Certificate (form HCD MP 547) is required for manufactured home installations where the local government agency has adopted a Flood Plain Management Program.

For manufactured home/mobilehome installation inspections and accessory buildings or structures that enclose an exit, ALL exterior doorways shall be provided with a means of egress (stairway, ramp, etc.) complying with the California Building Code at the time of the home installation inspection.

The total occupied area of a lot may not exceed 75 percent of the lot area, including but not limited to the unit, awnings, carports, storage cabinets, storage buildings, porches, stairways, and ramps. Driveways, walkways, slabs, and similar flat work are not subject to this limitation.

<u>Plot plans and permits are not required for storage cabinets (sheds), provided the total floor area of all storage cabinets on a lot does not exceed 120 square feet. Storage cabinets exceeding these limits are storage buildings and require a permit and must be constructed as permanent buildings.</u>

A School Impact Fee Certification (form HCD MP 502) may be required for new manufactured home/mobilehome installations on new lots (constructed on or after September 1, 1985).

HCD MP 538 (Rev. 03/24) Page 2

T25CCR, section 1002(f)(8)(O), School Impact Fee Certification, HCD MP 502 – Current Form 7/04

Northern Area 9342 Tech Cerbur Drive, Suite 550 9342 Tech Cerbur Drive, Suite 550 (916) 255-2501 Southern Area: 3737 Main Street, Suite 450 Riverside, CA 92501 (951) 782-4420



STATE OF CALIFORNIA BUSINESS, TRANSPORTATION AND HOUSING AGENCY DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS

SCHOOL IMPACT FEE CERTIFICATION

Government Code 65995 through 65996 and Education Code sections 17620 through 17626 govern school impact fees imposed on mobilehomes and manufactured homes installed in mobilehome parks or additions to existing mobilehome parks where the perhait to construct the park was issued after September 1, 1985.

This form is required when installing hobilehomes or manufactured homes in areas where the Department of Housing and Community Development (HCD) is the enforcement agency and responsible for verifying compliance with local school impact fees. The form must be presented to the department official at the jobsite at the time of inspection of the mobilehome or manufactured home installation.

This certification relates to the applicability of or to the satisfaction of School Impact Fees for the property described below:

| Mobilehome Park Name: |
|--|
| Address: |
| (Number and Street or Koad) Lot/Space Number: |
| City:, CA |
| County: |
| Check One: |
| School Impact Fees are either not applicable or have been satisfied with respect to the above-described property. |
| A demand has been placed into the manufactured home or mobilehome escrow for the School Impact Fee applicable to the above described property. It is understood that the validity of any Statement of Installation Acceptance or Certificate of Occupancy issued by the installation inspection agency will be conditioned to concurrent satisfaction of said demand by the escrow agent. Date: |
| (Signature of an Authorized Agent of the School District) Telephone: K 1 2 3 4 5 6 7 8 9 10 11 12 (Please circle grades applicable to this certification and line out those grades to which this certificate does not apply.) NOTE: Certifications must be completed by as many school districts as necessary to include all grades K through 12. |
| HCD MP 502 (Rev. 7/04) |

T25CCR, section 1002(f)(8)(M), School Impact Fee Certification, HCD MP 502 – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400

Riverside, CA 92501 (800) 952-8356 State of California

Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



SCHOOL IMPACT FEE CERTIFICATION

Government Code sections 65995 through 65996 and Education Code sections 17620 through 17626 govern school impact fees imposed on mobilehomes and manufactured homes installed in mobilehome parks or additions to existing mobilehome parks where the permit to construct the park was issued after September 1, 1985.

This form is required when installing mobilehomes or manufactured homes in areas where the California Department of Housing and Community Development (HCD) is the enforcement agency and responsible for verifying compliance with local school impact fees. The form must be presented to the department official at the jobsite at the time of inspection of the mobilehome or manufactured home installation.

This certification relates to the applicability of or to the satisfaction of School Impact Fees for the property described below:

| Mobilehome Park Name: | | |
|-----------------------------|---|--|
| | If Applicable | |
| Address: | | |
| | Number and Street | |
| Lot/Space Number: | | |
| City: | , CA Zip | County: |
| Check One: | | |
| ☐ School Impact Fees are ei | ither not applicable or have been sa | atisfied, with respect to the above- |
| described property. | | |
| ☐ A demand has been place | ed into the manufactured home or n | nobilehome escrow for the School |
| Impact Fee applicable to t | the above-described property. It is u | understood that the validity of any |
| Statement of Installation A | Acceptance or Certificate of Occupa | ancy issued by the installation inspection |
| agency will be conditioned | d to concurrent satisfaction of said of | demand by the escrow agent. |
| | | Date: |
| Signature of an Authorized | Agent of the School District | |
| Telephone: | | |

Please circle grades applicable to this certification and line out those grades to which this certificate does not apply.

K 1 2 3 4 5 6 7 8 9 10 11 12

NOTE: Certifications must be completed by as many school districts as necessary to include all grades K through 12.

HCD MP 502 (Rev. 03/24)

T25CCR, section 2002(f)(8)(A), Annual Permit To Operate (local enforcement agency), HCD 503B - Current Form 7/04 ANNUAL PERMIT TO PERMIT NO. DATED : OPERATE ENFORCEMENT AGENCY MOBILEHOME LOTS WITH D R A I N S RECREATIONAL VEHICLE LOTS WITH DRAINS ARK ID NO. PARK NAME and ADDRESS LOTS WITHOUT DRAINS TAL T S INC. or UNC. CONDITIONAL USES: OWNER: THIS PERMIT IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE CALIFORNIA HEALTH AND SAFETY CODE AND IS SUBJECT TO SUSPENSION OR REVICATION AS PROVIDED THEREIN. THIS PERMIT IS NOT TRANSFRABLE. THE ENFORCEMENT AGENCY SHALL BE NOTIFIED WITHIN 30 DAYS OF ANY CHANGE OF NAME, OWNERSHIP, OR OPERATOR. LACE EMBER 31, POST IN A CONSPICUOUS
HCD 503B (7/04) THIS PERMIT EXPIRES DEC

T25CCR, section 2002(f)(8)(A), Local Enforcement Agency Annual Permit to Operate, HCD MP 503B-Proposed Form 03/24

LOCAL ENFORCEMENT AGENCY ANNUAL PERMIT TO OPERATE

| | <u>EN</u> | IFORCEMENT AGENCY | | |
|--|--|--|---|----------------|
| ANNU | IAL PERMIT TO OP | <u>ERATE</u> | | |
| PARK TYPE: | Mobilehome Park | Special Occupano | <u>cy Park</u> | |
| SPECIAL OCCUPANO | CY PARK DESIGNAT | FION (if applicable): | | |
| Temporary Spe | ecial Occupancy Par | k Incidental C | amping Area | Tent Camp |
| PERMIT NO | | | DATE | |
| PARK ID # | | | | AMENDED |
| PARK NAME | | | | |
| PARK ADDRESS | | | | |
| | | | | |
| Incorporated. (I) or Unincorporated (U) | Mobilehome Lots with Drains | Recreational Vehicle Lots with Drains | Lots without Drains | Total Lots |
| | | | | |
| CONDITIONAL USES | | | | |
| OWNER NAME: | | | | |
| OWNER ADDRESS: | | | | |
| _ | | | | |
| SAFETY CODE AND THIS PERMIT IS NOT | IS SUBJECT TO SU TRANSFERABLE. ANY CHANGE OF N | CE WITH THE PROVIS SPENSION OR REVOO THE ENFORCEMENT A NAME, OWNERSHIP, O | CATION AS PROV AGENCY SHALL R OPERATOR. | VIDED THEREIN. |
| | POST IN | A CONSPICOUS PLAC | <u>-C</u> | |

THIS PERMIT EXPIRES: DECEMBER 31,

HCD MP 503B (Rev. 03/24)

T25CCR, section 2002(f)(8)(M), Private Fire Hydrant Test And Certification Report, HCD MP 532- Current Form 01/07

STATE OF CALIFORNIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF ODDES AND STANDARDS PRIVATE FIRE HYDRANT TEST AND CERTIFICATION REPORT PARKS MUST RETURN THIS FORM TO THE ENFORCEMENT AGENCY FOR THE PARK (SEE THE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM) Part 1 - IDENTIFIC Park Name: Park ID# Park Address: ZIP: City: Park Operator Name Phone Number Park Operator Address and City Part 2 - CERTIFICATION EXCEPTIONS ou do not need certification, but must complete this section if any of the following Hydrants are publicly owned and aintained - Water Company Name, No hydrants and park was built before eptember 1, 1968 - List Date of Construction: No hydrants and park has 14 or less total s - Enter Number of Lots: No private hydrants and park was built after 5 ptember 1, 1968. (Specific exception at the t re of construction.) Part 3 - Annual Fire Hydrant Operation Test (Initial ver ation in the appropriate column) (Standpipes are considered hydrants for these re curements) NO CORRECTED 1. Hydrant stems and valves operate fully, freely, and are properly lubricated. 2. All hydrant threads and caps are undamaged. 3. Where subject to vehicular damage, hydrants are physical 4. Around all hydrants is a minimum of 36 inches of unobstruct 5. All hydrants outlets are 14 inches to 24 inches above grade. (Standpipe outlets need not be a specific height, but must be readily a 6. Each hydrant is clearly identified or marked. 7. Each 1 1/2 -inch hydrant has an approved hose in a marked enclosed All "NO" answers are violations and will prohibit t issuar of the park Permit to Operate. I verify under penalty of perjury that either this park is exemp from testing requirements or the hydrant operation is in codiance. Park owner or operator Part 4 - Five-YEAR FIRE HYDRANT WATER FLOW TEST authorized certifier DNLY To be complet Barrel Size Barrel Size Flow Pressure Flow Pressure (inches) (GPM) (PSI) (inches) (PSI) 2 5 3 6 FOR MORE THAN 6 HYDRAN IN THE PARK, ATTACH AN ADDITIONAL LIST USING THE FORMAT ABO (GPM)-GALLO EN MINUTE. (PSI) - RESIDUAL PRESSURE IN POUNDS PER SOUARE INC. PART 5 - CERTIFICATION OF TEST RESULT Certifier Name License Class and No: Address Telephone Number E-Mail Address Printed Name Title Signature Date of Test Part 6 - APPROVAL F CONTINUED USE OF EXISTING SYSTEM - TO BE COMPLETED BY LOCAL FIRE AGENCY ONLY Agent Name

Signature

HCD MP 532 Clay 1/071 Side c

Badge Numb

INSTRUCTIONS FOR COMPLETING HCD MP 532*

Return the completed form to the Area Office that issues your permit to operate with a copy to your local fire district

Nothern Area Office Southern Area Office 9342 Tech Center Drive, Suite 550 3737 Main Street, Suite 400

acramento, CA 95826 Riverside, CA 92501

PART 1 - IDENTIFICATION

Park ID# - Enter the park Identification Number as shown on the permit to operate.

Park Name - Enter the name of the park as shown on the permit to operate.

Park address - Enter the physical address of the park.

Enter Park Operator Name phone number, and address.

PART 2 - CERTIFICATION EXCEPTIONS - These certification requirements do not apply to:

- Parks with public hydrants, where the local water district owns the water or hydrant system and performs regular hydrant testing. List the name of the water company.
- Parks, without hydrants, constructed prior to September 1, 1968.
- Parks, without hydrants, with 14 or less total spaces.
- Parks, without hydrants, constructed after September 1, 1968.

All parks with hydrants must have them tested and certified regardless of park size or date of construction.

THE PARK OWNER/OPERATOR'S SIGNATURE VERIFYING AN EXCEPTION IS REQUIRED IN PART 3.

PART 3 - ANNUAL FIRE HYDRANT OPERATION TEST **

Initial the appropriate column to indicate whether the hydrant(s):

- stems and valves fully operate, open and close freely, and have the proper lubrication.
- caps, seals and threads are undamaged.
- which are subject to vehicular damage, are provided physical protection.
- has a minimum of 36 inches of clear space around at hydrants.
- outlets are between 14 & 24 inches above grade. Standpipe oxdets need not be a specific height, but must be readily accessible.
- is clearly identified or marked for easy location in an emergency.
- that are 1 ½ inch, have a 75-foot hose on a rack, or reel contained in an enclosed cabinet marked "FIRE HOSE" in 4-inch contrasting letters.

The operational test may be verified by a park owner/operator during the four years between the five-year water flow certification. If the park performs the operational test, the owner/operator's signature verifying compliance is required. During the five-year test, only the entity performing the water flow test may certify the operational test.

PART 4 - FIVE-YEAR FIRE HYDRANT WATER FLOW TEST (To only be completed every five years by a certified person) **

Barrel size - Enter the barrel or riser diameter, neasured in inches.

Flow - Enter the measured flow in gallons per minute.

Pressure - Enter the residual pressure measured in pounds per square inch.

PART 5 - CERTIFICATION OF TEST RESULTS

This section is to be completed by the fire agency responsible for fire suppression in the park, local water supplier, Licensed Fire Protection Engineer, or C-16 Fire Protection Contractor witnessing and certifying the test information.

Certifier Name - Enter the name of the person, agency or entity certifying the test results.

Contractor's classification and number – Enter the California Contractors State License Board classification and license number or the license number or a California licensed fire protection engineer.

Address - Enter the address of the person, agency, or entity certifying the test results.

Telephone Number - Enter certifiers' telephone number.

E-Mail Address - Enter Zertifiers' e-mail address, if available.

Name - Print the name of the person certifying the test.

Title - Enter the title of the person certifying the test.

Signature - Required signature of person certifying test.

Date - Enter the sate of the certification.

PART 6 - APPROVAL FOR CONTINUED USE OF EXISTING SYSTEM – COMPLETED BY LOCAL FIRE AGENCY ONLY. This section may only be completed by a local fire agency when a private fire hydrant cannot be repaired to meet these standards, given local conditions and the fire agency responsible for fire suppression in the park approves its continued use or use of alternative fire protection methods.

*Refer to Title 25, California Code of Regulations, Article 6, commencing with Section 1300 and/or 2300.

**VIOLATIONS: If any answers in Part III — Annual Fire Hydrant Operation Test are "No," and/or the Five-Year Fire Hydrant Flow Test of Part IV does not meet the minimum requirements, the park is in violation. The park operator/owner is responsible for correction of violations. Failure to correct violations may result in the park not being eligible to renew its annual permit to operate.

HCD MP 532 (Rev 1/07) Side 2

T25CCR, section 2002(f)(8)(K), Private Fire Hydrant Test and Certification Report, HCD MP 532- Proposed Form 03/2024

> State of California Business, Consumer Services and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome and Special Occupancy Parks Program



PRIVATE FIRE HYDRANT TEST AND CERTIFICATION REPORT

| | A | II parks must re | eturn this form to t | ine enforcement | agency for th | e park. | |
|---|-------------------------|--------------------|---------------------------------------|-------------------|-------------------------|-----------------|-----------------------|
| Part 1. IDENTIF | ICATION- | PARK AND P | ARK OPERATO |)R | | | |
| Park Name Park | | | 4 | | | ID# | |
| Park Address | | | | | | | |
| City | | | | | | CA Zip | (ri |
| Rank Operator Na | me | | | | | | |
| Park Operator Ad | dress | | | | | | |
| Telephone | | | Email | | | | |
| Part 2. CERTIF | ICATION EX | CEPTIONS | | | | | |
| fany of the follow | wing applies | you do not ne | ed certification, bu | il you must com | plete this sect | ion. | |
| Hydrants are p | publiciy owne | and maintain | ed. Water Compa | ny Name | 1,000 | | |
| No hydrants A | ND park was | built before Se | ptember 1, 1968. | Date of Constru | etion | | |
| No hydranis A | ND park has | 14 or less total | lots. Number of I | ots | | | |
| No private hyd | frants AND pa | ark was built af | ter September 1. | 1968. (Specific e | exception at the | me of construc | tion.) |
| art 3. ANNUA to be completed Certifier: Initial y | by authorized | Certifier ONLY | / Standpipes are | considered hydr | ants for certif | ication require | ments. |
| 12 | | CERTIFICA | ATIONS | | YES | NO | CORRECTED & PASSED |
| 1. Hydrant ste | ms and valves | operate fully, fre | ely, and are properly | y lubrigated. | | | |
| 2: All hydrant | threads and ca | os sre undamad | ed. | | | | |
| 3. Where subj | ect to vehicular | damage hydra | nts are physically pr | otected. | | | |
| Area sround | d all hydrants h | as a minimum o | f.36 inches of unobs | structed access | | 1 | - |
| 5. All hydrani | outlets are 14 i | nches to 24 inch | es above grade | | | | |
| | | | eight, hut must be r | eadily accessible |) | _ | - |
| 6. Each hydra | nt is deany ide | ntified or marked | 1. | | | | 1 |
| | ~ | | se in a marked end | V-10-10-0 | | | |
| Al | I NO answer | s are violation | s and will probit | oit the issuance | of the park's | Permit to Op | erate. |
| art 4. FIVE-YE | AR FIRE H | YDRANT WA | TER FLOW TES | ST | | | |
| Hydrant Number | Barrel Size (inches) | Flow (GPM) | Pressure (PSI) | Hydrant Number | Barrel Size (inches) | Flow (GPM) | Pressure (PSI) |
| 21 | | 1 | | 4 | | | |
| 2 | | | | <u>5</u> | | | |
| 3 | | 127 00101110 | | 0 | Charles and a | | |
| | | | in the park, atta minute PSI=resid | | | | ve. |
| Part 5. CERTIF Certifier Name | ICATION OF | TEST RESU | <u>JLTS</u> | Licens | e Class and I | No. | |
| Address | | | | | | | |
| elephone | | | Email | | | | |
| Printed Name | | | | Title | | | |
| Signature | | | | | of Certification | | |
| | VAL FOR CO | ONTINUED | ISE OF EXISTIN | | × | | IRE AGENCY OF |
| Agent Name | THE EDIT OF | CHIMDED D | OL OF EMBIII | Title | Join ELIEU | DILUONEI | HOLING! WI |
| Profes Alumber | | | Pierri | | | | |

HOE WE 512 (Ris 1890)

INSTRUCTIONS

Submit this form by email to: ParksPTO@hcd.ca.gov or by mail to:

HCD-Mobilehome Parks Program

P.O. Box 278180

Sacramento, CA 95827-8180

Part 1. IDENTIFICATION—PARK AND PARK OPERATOR

Park Name and Park ID #: Enter the name of the park and park identification number as shown on the Permit to Operate.

Park Address: Enter the physical address of the park.

Park Operator: Enter the name, address, telephone number, and email address of the park operator.

Part 2. CERTIFICATION EXCEPTIONS

These certificate requirements do not apply to:

- Parks with public hydrants where the local water district owns the water or hydrant system and performs regular hydrant testing. List the name of the water company.
- Parks without hydrants constructed prior to September 1, 1988.
- Parks without hydrants with 14 or less total spaces.
- Parks without hydrants constructed after September 1, 1968.

All parks with hydrants must have them tested and certified regardless of park size or date of construction.

IF ANY OF THESE EXCEPTIONS APPLY TO YOUR PARK, YOU DO NOT NEED TO COMPLETE PARTS 3-5.

Part 3. ANNUAL FIRE HYDRANT OPERATION TEST*

Initial the appropriate column to indicate where the hydrant(s):

- · Stems and valves fully operate, open and close freely, and have the proper lubrication.
- Caps, seals, and threads are undamaged.
- Are provided physical protection if subject to vehicular damage.
- Has a minimum of 36 inches of clear space around hydrant(s).
- Outlets are between 14 and 24 inches above grade. Standpipe outlets need not be a specific height but must be readily
 accessible.
- Is clearly identified or marked for easy location in an emergency.
- That are 1 ½ inch, have a 75-foot hose on a rack, or reel contained in an enclosed cabinet marked "FIRE HOSE" in 4-inch
 contrasting letters.

Part 4. FIVE-YEAR FIRE HYDRANT WATER FLOW TEST* — to ONLY be completed every five years

Barrel size: Enter the barrel or riser diameter measured in inches.

Flow: Enter the measured flow in gallons per minute (GPM).

Pressure: Enter the residual pressure measure in pounds per square inch (PSI).

Part 5. CERTIFICATION OF TEST RESULTS

This section is to be completed by the fire agency responsible for fire suppression in the park, local water supplier, Licensed Fire Protection Engineer, or C-16 Fire Protection Contractor witnessing and certifying the test information.

Certifier Name: Enter the name of the person, agency, or entity certifying the test results.

Contractor's Classification and Number: Enter the California Contractors State License Board classification and license number or the license number for a California licensed fire protection engineer.

Address: Enter the address of the person, agency, or entity certifying the test results.

Telephone: Enter the telephone number of the person, agency, or entity certifying the test results.

Email: Enter the email address of the person, agency, or entity certifying the test results.

Printed Name: Print the name of the person certifying the test.

Title: Enter the title of the person certifying the test.

Signature: Required signature of person certifying the test.

Date: Enter the date of the certification.

Part 6. APPROVAL FOR CONTINUED USE OF EXISTING SYSTEM—COMPLETED BY LOCAL FIRE AGENCY ONLY

This section may only be completed by a local fire agency when a private fire hydrant cannot be repaired to meet these standards, given local conditions, and the fire agency responsible for fire suppression in the park approves its continued use or use of alternative fire protection methods.

For more information, refer to California Code of Regulations, title 25, commencing with section 1300 and/or 2300.

"VIOLATIONS: If any answers in Part 3. ANNUAL FIRE HYDRANT OPERATION TEST are NO, and/or Part 4. FIVE-YEAR FIRE HYDRANT WATER FLOW TEST does NOT meet the minimum requirements, the park is in violation. The park operator/owner is responsible for correction of violations. Failure to correct violations may result in the park not being eligible to renew its annual Permit to Operate.

HCD MP 532 (Rev. 03/24) Page 2

T25CCR, section 2002(f)(8)(B), Application For Alternate Approval, HCD 511 - Current Form 07/04

Northern Area Office 9342 Sech Center Drive, Suite 550 Sacramento CA 95826 (916) 255 2501

State of California Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome and Special Occupancy Parks Program

Southern Area Office 3737 Main St., Suite 400 Riverside, CA 92501 (909) 782-4420



| | | ccupancy Faiks Flogram | (303), 0220 | CALIFORNIA |
|---|--|---|---|--|
| | APPLICATION FOR | ALTERNATE APPRO | OVAL | |
| and/or plans to the enforce | n in triplicate, together with three ement agency having jurisdicti opriate fee as specified in the | ion. Éach application sh | all be | DEPT USE ONLY A.A.# |
| Chapter 2, section 1016 | Chapter 2.2 section 2016. | ŭ. | | Park I.D |
| Pursuant to provisions of approval of the following: | Health and Safety Code, I here | eby make application fo | r an alternate | Fee Rec'd |
| Name of Park: | | | | Date/_/ |
| Address/Location: | | | | |
| Owner: | | | | |
| Address: | | | | |
| Specific description of produ | ict, and/or installation, and use: | | | |
| | | | | |
| | | $\overline{}$ | | |
| | | $\overline{}$ | | -1, |
| Applicant: | Title | Firm: | | |
| Address: | | | | |
| Street | City | State | Zip | Telephone No. |
| Evidence of local agency ap I understand that in order Health and Safety Code a and for the protection of li | for an alternate to be approve and elated regulations in qualit for and health as provided by H | d, it shall be at least the ty, strength, effectivene lealth and Safety Code, | equivalent of t ss, fire resistan Section 18305 | hat prescribed by the ce, durability, safety, and 18865.6. |
| and that if approved such | with the understanding that the n approval may be revoked or o tiating data when considered r | conditions thereof modif | ied for just cau | se. Applicant agrees to |
| Signature of Applicant | | 20 | Date | $\overline{}$ |
| RETURN THIS FORM WITH T | HE REQUIRED FEES AND DOCUM | ENTATION TO THE ENFOR | CEMENT AGENC | Y FOR YOUR PARK. |
| WITH THE APPLICATION | AGENCIES ONLY — RETURN THIS FEE, YOUR RECOMMENDATION E OF THE DIVISION OF CODES A to, CA 95812-1407 | , AND ALL SUPPORTING | DOCUMENTATION | ON TO THE |

T25CCR, section 2002(f)(8)(B), Application for Alternate Approval, HCD MP 511 – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356

Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356

State of California Business, Consumer Services and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome and Special Occupancy Parks Program



APPLICATION FOR ALTERNATE APPROVAL

| Signature of Applicant: | | | Date: | | |
|---|--------------------------|---|-------------------------------------|--------|--|
| This application is made with the that if approved, such approval madditional substantiating data whe | ay be revoked, or condit | ions thereof modified for just cau by the Division of Codes and St | se. Applicant agrees to andards. | | |
| Health and Safety Code and relat the protection of life and health as | provided by Health and | Safety Code sections 18305 and | d 18865.6. | | |
| understand that in order for an a | Iternate to be approved. | it shall be at least the equivalent | of that prescribed by t | he | |
| Evidence of local agency appre | ovals, if required: | | | | |
| Telephone: | Email A | Address: | | | |
| | street | City | State | Zip | |
| Applicant Address: | | | | | |
| Firm: | | | | | |
| Applicant Name: | | Applicant Title: | | | |
| Specific description of product | and/or installation, ar | nd use: | | | |
| Owner Address: | Street | City | State | Zip | |
| T & 100 (1983) | | | | | |
| Owner: | nicei | City | State | 210 | |
| Park Address/Location: | street | City | State | Zip | |
| Name of Park: | | | | | |
| Pursuant to provisions of Healt following: | th and Safety Code, I | hereby make application for a | n alternate approval | of the | |
| Chapter 2.2—section 2016. | | | Date | | |
| substantiating data and/or plans to the enforcement agency having jurisdiction. Each application shall be accompanied by the appropriate fee as specified in the California Code of Regulations (CCR), title 25, Chapter 2—section 1016 or | | | Park I.D. Fee Rec'd | | |
| | | | | | |

LOCAL ENFORCEMENT AGENCIES ONLY—Return this form, pursuant to CCR, title 25, sections 1016 and 2016, with the application fee, your recommendation, and all supporting documentation to the Division of Codes and Standards.

Mobilehome Parks Program, P.O. Box 278180, Sacramento, CA 95827-8180.

HCD MP 511 (Rev. 03/24)

T25CCR, section 2002(f)(8)(C), Application For Certification Of Manufactured Home Or Mobilehome Earthquake Resistant Bracing System, HCD 50 ERBSCERT - Current Form 07/04

State of California

Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards Mobilehome Parks Program APPLICATION FOR CERTIFICATION OF MANUFACTURED HOME OR MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM SECTION 1 PURPOSE OF APPLICATION AND TYPE OF CERTIFICATION REQUESTED Collection No. (CHECK APPROPRIATE BOX) INITIAL CERTIFICATION ☐ CERTIFICATION RENEWAL Date Date of Initial Listing Date of Listing Renewal / / Listing No. Listing No. **SECTION 2 - APPLICANT INFORMATION** Manufacturer's Name _ Change of Name/ Mailing Address Plan Approval Fee (First Hour) \$ Plant Address Other Telephone (TOTAL SECTION 3 - EARTHQUAKE RESISTANT BRACING SYSTEM INFORMATION Brand or Model Name _ Model No._ Testing or Listing Agency's Name_ Address Telephone (__ SECTION 4 - APPLICANT CERTIFICATION AND INFORMATION I hereby certify under penalty of perjury that the information provided herein is ue and correct. Typed or Printed Name _ Signature _ Date Executed at _ (City) NOTE: This application must be accompanied by three sets of plans and specifications and two sets of design calculations and test data when required to substantiate the design. Specifications shall be shown on the plan. Design calculations shall be submitted separately from the . This application shall also be accompanied by the fee in accordance with California Code of Regulations. Title 25, Division plan sheet 1. Chapte (3) File

(1) Original to Applicant

(2) Program Manager

HCD 50 ERBSCERT (Rev.7/04) Distribution:

T25CCR, section 2002(f)(8)(C), Application for Certification of Manufactured Home / Mobilehome Earthquake Resistant Bracing System, HCD MP 50 ERBS CERT – Proposed Form 03/24

State of California

Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



APPLICATION FOR CERTIFICATION OF MANUFACTURED HOME / MOBILEHOME EARTHQUAKE RESISTANT BRACING SYSTEM

| SECTION 1. Purpose of Ap | plication and Type | of Certification Requested | | |
|--|---|--|--|--|
| ☐ INITIAL CERTIFICATION | | CERTIFICATION RENEWAL | | |
| Date of Initial Listing | | Date of Listing Renewal | | |
| Listing No. | | Listing No. | | |
| SECTION 2. Applicant Info | rmation | | | |
| Manufacturer's Name | | | | |
| Mailing Address | | | | |
| Plan Address | | | | |
| Telephone | Email | | | |
| SECTION 3. Earthquake Ro | esistant Bracing S | ystem Information | | |
| Brand or Model Name | | Model No. | | |
| Testing or Listing Agency's Nar | me | 373330 | | |
| Address | | | | |
| Telephone | Email | | | |
| SECTION 4. Applicant Cert | tification and Infor | mation_ | | |
| I hereby certify under penalty of | of perjury that the info | rmation provided herein is true and correct. | | |
| Applicant Name | | Title | | |
| Signature | | Date | | |
| Executed at | | | | |
| Constitution of the second | City | County | | |
| calculations and test data when re calculations shall be submitted se | equired to substantiate t parately from the plan s | sets of plans and specifications and two (2) sets of design he design. Specifications shall be shown on the plan. Design heet(s). This application shall also be accompanied by the fee in division 1, chapter 2, section 1025. | | |
| | DEPARTM | ENT USE ONLY | | |
| Collection No. | | Change of Name / Ownership | | |
| Date | | Plan Approval Fee (first hour) | | |
| Application Fee | | Other | | |
| Renewal Fee | | TOTAL | | |
| | | | | |

HCD MP 50 ERBS CERT (Rev. 03/24)

T25CCR, section 2002(f)(8)(D), Application For Permit To Construct, HCD 50 – Current Form 7/04

| | Business, Transportation and Housing Agency Department of Housing and Community Development | |
|--|--|---|
| | Division of Codes and Standards Mobilehome and Special Occupancy Parks Programs APPLICATION FOR PERMIT TO CONSTRUCT | |
| (SEE REV DNTRACTOR/OWNER BUILDER DECLARATIONS of required for commercial modulars or Recreational Vehicles | ERSE SIDE OF FORM FOR INSTRUCTIONS AND ADDITIONAL INFORMATION) | U/FORB |
| t required or commercial modulars or Recreational Vehicles | SECTION 1 - OWNER/APPLICANT INFORMATION | DEPARTMENT USE ONLY |
| LICENSED CONTRACTORS DECLARATION I hereby affirm inder penally of perjury that I am licensed der provisions of its upper 9 (commencing with Section 7000) Division 3 of the Bub less and Professions Code, and my anse is in till face can be effect. | Park Name Park Address | ID. No. |
| ense ClassLic. NoExp. Date | CityCounty | Closed By |
| | | Date Clased |
| where August 2 is a supervision of the control of t | ZipUnincorporatedncorporated Park Owner | Collection INFORMATION |
| cn requires a permit to construct, allex, improve, demoish, a air any structure, prior to its issuance, a prequires the | APPLICANT | · X |
| is licensed pursuant to the provisions of the Contractors nse Law (Chapter 9 (commencing with Section 7000) of ion 3 of the Business and Professions Code) of that he or she reput the refrom and the basis for the alleged wemption | a Address | Fee Rec'd |
| violation of Section 7031.5 by any applicant for a permit ects the applicant to a civil penalty of not more in an five dred dollars (\$500).): | AddressTel. No | Collection Date |
| as owner of the property, or my employees with wage as sole compensation, will do the work, and the structure in intended of offered for sale (Sec. 7044, Business and | Architect/EngineerLic, No | Assigned To |
| essions Code: The Contractors License Law does not apply n owner of property who builds or improves thereon, and t does such work himself or herself or through his or her own | AddressTel. No | Routed By |
| oloyees, provided that such improvements are not intender feread for sale. If, however, the building or improvement is within one year of completion, the owner-builder will have burden at proving that he or she did not build or improve he purpose of sale.). | | Upon Department approval to release, and payment of fees, th permit is issued only for items validated below. |
| , as owner of the property, am exclusively contracting with nsed contractors to construct the project (Sec. 7044, ness and Professions Code: The Contractors License Law | | — PERMIT # |
| ness and Professions Code: The Contractors License Law s not apply to an owner of property who builds or improves eon, and who contracts for such projects with a tractor(s) licensed pursuant to the Contractors License | | — MH ACC/S |
| .). am exempt under Sec, B. & P.C. for this reason: | | — MP |
| | | BLDG |
| nerDate | <u> </u> | МН |
| ORKERS' COMPENSATION DECLARATION eby affirm under penalty of perjury one of the following | | — MISC. |
| larations: nave and will maintain a certificate of consent to self-insure vorkers' compensation, as provided for by Section 3700 of | | TECH SER. |
| | Valuation \$ | |
| nit is issued. have and will maintain workers' compensation insurance, equired by Section 3700 of the Labor Code, for the | valoulini p | PLC'K |
| ormance of the work for which this permit is issued. My kers' compensation insurance carrier and policy number | SECTION 3 - ACCESSORY BUILDINGS or STRUCTURES | S.M.I |
| arrier | □ NEW □ REINSTALL Standard Plan Approval No | ISSUE |
| olicy Number_section need not be completed if the permit is for one | □ wning □ Carport □ Porch □ Cabana | TOTAL |
| dred dollars (\$100) or less). | Other (specify) | DIVISION PROCESS RECORD |
| certify that in the performance of the work for which this nit is issued, I shall not employ any person in any manner so | | Application |
| become subject to workers' compensation laws of fornia, and agree that if I should become subject to lers' compensation provisions of Section 3700 of the Labor | OWNERTel, No | Local Planning |
| e, I shall forthwith comply with those provisions. | Address | Local Fire |
| Date | RESIDENTTel. No | *************************************** |
| PERAGE IS UNLAWFUL, AND SHALL SUBJECT AN AMPLOYER TO | Lot No | Local Health |
| JSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF APENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 HE LABOR CODE, INTEREST, AND ATTORNEY'S FEES. | | Public Works |
| | SECTION 4 - MANUFACTURED HOME/MOBILEHOME INSTALLATION | Environmental |
| ONSTRUCTION LENDING AGENCY nereby affirm under penalty of perory that there is a struction lending agency for the derformance of the work which this permit is issued (Sec. 3977, Civ. C.). | Owner Tel. No | Negative |
| | Address | Declaration |
| der's Name | Resident Lot No. | School Impact |
| der's Address | = | Fees |
| ERTIFICATION certify that I have good this application and state that the ve information is correct. I agree to comply with all city | Serial Number(s) Manufacturer Name/ | Date |
| county ordinarizes and state laws relating to building struction, and dereby authorize representatives of this nly to enter your the above-mentioned properly for | Date of MFGModel Name Insignia/HUD Label No. | Issued By |
| ection purposes. The purposes of Applicant or Agent Date | SECTION 5 - PARK OWNER, OPERATOR OR MANAGER SIGNATURE APPROVED: | Expires |

INSTRUCTIONS

CCESSORY STRUCTURES: Complete Sections 1, 3, 5 and Contractor/Owner Builder Declarations. Submit the completed application d the required fees to the appropriate Area Office listed below.

LEACTURED HOME/MOBILEHOME INSTALLATION: Complete Sections 1, 4, 5, and Contractor/Owner Builder Declarations. ed application and required fees to the appropriate Area Office listed below.

18551 FOUNDATION SYSTEM: Complete Sections 1, 2, 5 and Contractor/Owner Builder Declarations. Submit the complete application and the re ed fees to the appropriate Area Office listed below.

PARK UTILITIES: omplete Sections 1, 2, 5 and Contractor/Owner Builder Declarations. Submit the completed applic fees to the appr iate Area Office listed below.

NEW PARKS AND PER ANENT BUILDINGS: Complete Sections 1, 2, 5 and Contractor/Owner Builder Declaration Submit the completed application and requ d fees to the appropriate Area Office listed below.

> ern Area Office Southern Area Office ech Center Drive, Suite 550 3737 Main St., Suite 400 Riverside, CA 92501 9342 Sacra ento, CA 95826 (916) 25 2501 (951) 782-4420

- SECTION 1 -OWNER/APPLICANT INF RMATION: Enter the park name and address. Indicate if e park is located in an unincorporated rea. Enter the park owner's name(s). Enter the applic ant's name, address and telephone number applicant,) Check the appropriate box to area or an incorporated (The Department will cont describe the applicant. If th box "Other" is marked, please indicate the rela onship to the owner. If the requested services involve an architect or engine enter the architect or engineer's name, a dress, telephone number, and license number.
- ATION: Provide a description of the w SECTION 2 -DESCRIPTION OF WORK AND VAL ork to be performed (i.e., installing a manufactured home on a foundation system, etc. Enter the total cost of the work to be performed (total contract price).
- SECTION 3 -ACCESSORY BUILDINGS or STRUCTURES heck the appropriate bo to indicate if the accessory building/structure is a new installation or a reinstallation. A new insta structure that has not previously been inst llation means a new activities a new activities. cessory building or structure or an accessory building or einstallation means an accessory building or structure that is being reinstalled for the same purpose as tion. Enter the Standard Plan Approval Number if this is a e original instal new installation. Check the appropriate box checked, enter the type of building/structure of indicate the type of accessory building/structure. If the box "Other" is ovided (i.e. storage building, greenhouse, etc.). Enter the name, the line telephone number and address of the owner. If pant of the manufactured home/mobilehome is other than the owner, enter the name of the resident, telephone i er and the lot number where the unit is located.
- MANUFACTURED HOME/MOBILEHOME INSTALLATIO SECTION 4 er the name, telephone number and address of the owner. If the occupant of the manufactured home/mobileho er than the owner, enter the name of the resident and the lot e is o number where the unit is located. Enter the ser of the manufactured home/mobilehome. The serial number(s) Inumbei can be located on the Manufacturer's Certific ite of Origin e Certificate of Title, registration documents or on the front cross member of the unit. Enter the year the init was manufa tured. Enter the manufacturer's name and Model name. This information can be obtained from the cate of Origin, the Certificate of Title, registration lanufacturer's Cert Enter the California Insignia Number(s) or HUD Label documents or may be designated on the outside of the unit itself Number(s) issued for this unit, if known
- PARK OWNER, OPERATOR OR MANA AGER SIGNATURE: The signature of the park owner, operator or manager is required ned. This signature is an acknowledgment that the park is aware and approves of the SECTION 5 along with the date the form is sig services being requested in this oplication.

CONTRACTOR/OWNER BUILDER DECLARATION

struction are required by state law to provide the follo Contractors proposing of ing information: Contractor:

- Item 1 Licensed Contractor Declarat n: Enter the contractor's license class, license number, date t license expires, the contractor's sianature and date.
- aration: Place a check mark next to the declaration regarding the Item 3 -Workers' Compensation D orkers' compensation coverage ctor. If the second declaration is marked, the contractor must also prove signed by the contractor and dated. that applies to the contr the carrier's name and policy number. This item must
- for the service being Construction Lending gency: If there is a construction lending agency for the performance of the w equested, enter the iter the word "none
- name and address of the lending agency. If there is no lending agency involved, a ertification must be signed and dated by the contractor or agent on behalf of the co Item 5 - Certification: The ractor.

Owner Builder: If the ork or activity as described on the application, is being completed by the owner, the owner ust complete the

- der Declaration: Place a check mark next to the declaration which is applicable. If the third declaration Item 2 -Owner-R is marked enter n number from the Business and Profession Code which provides the exemption and the reason for the ex ption. The the sec oust also sign and date this section.
- Item 5 cation: The certification must be signed and dated by the owner.

T25CCR, section 2002(f)(8)(D), Application for Permit to Construct, HCD MP 50- Proposed Form 03/24

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards
Mobilehome and Special Occupancy Parks Program



APPLICATION FOR PERMIT TO CONSTRUCT — HCD MP 50

| CONTRACTOR / OWNER-BUILDER DECLARATIONS | SECTION 1. PARK / APPLICANT INFORMATION | DEPARTMENT USE |
|--|---|--|
| Not required for deminingal modulars or regressional vehicles. | | ONLY |
| 1. LICENSED CONTRACTOR DEGLARATION | Earl Name | |
| | Park Address | Hart ID No. |
| ther boy aftern, under penalty of percury that I am utensed under provisions of Business and Figliossions Code (BPC), division 3, chapter 9 (commended with | CAN CANN | 車 W 草 A |
| section 7000) and my license is in full torce and effect. | Zio Pare Owner | (Charal fe- |
| Licensis Class LE No. Exp Date | APPLICANT (Not Agent) | THE WORLD |
| Contrader Date | CONTRACTOR CONNER DIRECTOR | Address |
| 2. OWNER-BUILDER DECLARATION (Choose one) | Natio | INFORMATION |
| Hertely affirm under behalful of certary that I am exampl from the Contractors | Admesa | g/hack is |
| State License Law for the following reason. | Crist State Dis | |
| buttons and first images (note to C) section (10) 5. And (1) grounds with nature a gentle to consider the first images, concluding the end and shortest core to be source. | Telephone | Can received |
| 460 years tic applican by aid pottice to a sond queries factors than | Empi Autres | Conden day |
| control names of the between the first Settlement State Control and Extended 416. 29 L. descriff chapter 2 sessors 100 to the trains a country on the and big | A TOTAL CONTRACTOR OF THE CONTRACTOR | |
| pass to the about common was quality, of action MITS to are appared to a companion to the companion of a test construct your year we written order of Settle. | Architect / Engineer information (if applicable) | Upon Department |
| I (as gamer of the process, or my employees with mages as their sold | Ninst | approval to release, and payment of |
| portugers after, will on the work, and the structure is not intended or offered by | Address | feet, this permit is |
| DE CONTROL (NACTOR CONTROL OF THE CONTROL OF THE STATE OF THE WAY AND THE STATE OF | Talephonia - usensia No. | itsued only for items validated |
| described to the fact that the second proceed that are the second to the second of the | SECTION 2. DESCRIPTION OF WORK AND VALUATION | pelow. |
| companies and dwell builds will have the balloamed provincious to printe 3d yes based of employed the balloans in with | | Cornell |
| I to owner of the property one evolutivery contracting with scorped | | MH AGOS |
| contractors to commutat the protect | - | With |
| EPC action 7044: The Connector balls across Lee dure on eight to an agree of parents who reside or common thomas, and who contents on each parents with a | | W(19) |
| стинория поченей размам, стис Соптестен бай соотие там. | | XInt. |
| I iam avenut under BFC becton. for this reason; | | MeX: |
| | Valuation (Cross of work) | |
| Owner Dole | SECTION 3. ACCESSORY BUILDINGS OR STRUCTURES | TELOTISEA. |
| 3. WORKERS' COMPENSATION DECLARATION (Choose one) | NEW D REINSTALL Standard Plant Accrowel No. | 2.5 |
| Thereby affirm under benefit pertury one of the following declarations. | Awning Carpon C Porch C Capana C Ciner (Smethy) | 201 |
| (have and will manigin a certificate of consent to self-insule for workers | DWNER Telephone | SW() |
| compensation, as provided for by Labor Code Section 2700, for the | | TRIAC |
| performance of the work for which this permit is assued. | Address Loid | 5.0.55000 |
| (have and will maintain works primosessation insurance, as respired by Labor Code service 3700, for the performance of the work for which this permit. | RESIDENT Telephone | PECORD PROCESS |
| is issued. My workers compensation insurance camer and oblice is inher are: | Address Loi # | 2233032 |
| Dune: | SECTION 4. INSTALLATION—MOBILEHOME / MANUFACTURED | Automon |
| Policy Number | HOME | |
| (centy that in the performance of the ways for which this permit is issued.) | Catter Ricogono | Lies I Plensing |
| ahali not employ any gensum in any managinst as ito become subject to | Amyess Lai e | - Least Free |
| workers' compensation was of California and some trust (1) should become author to worker of compensation provisions of Later Gode Section 3700. 1 | Session Diagrams | - |
| shall followith comply with those provisions. | Amness unit + | LOCAL PROPERTY |
| Applicant Date | Sum 751 | Possic Works |
| NAMED OF THE PROPERTY OF THE WORKERS CONTENSATION TO DESCRIBE DURLING DE | | Cast Cooks |
| AND SHALL SEE THE RESPONDENT OF MINA, PROGRESS OF THE SHALL | Manufacturer feating i Model Numic | Company Inper |
| COMPENSATION DAMAGES AS DROWDED FOR INCASOR EXCESSECTION SHIP INFEREST. AND AUTORISEYS (FIELD.) | Date of Manufacture: | |
| | relova i HUB Lapd #is: | (injules Lucimien |
| 4. CERTIFICATION (Required) | SECTION 5. PARK OWNER, OPERATOR, OR MANAGER | 2thollmod foe |
| contile that I have read this adelpation and state that the above information a correct Lagraci to comply with all pity and county ordinances and state laws | APPROVAL SIGNATURE | ame interse |
| realing to cuilding constructors and horsey authorize representatives of this | division and the second | - |
| counts to order exceptive above mentioned to poetly for inspection purposes. | Print Name | Une. |
| | | (marid In- |
| Signature of Applicant or Agent Dete | Park Sunstance—Required Date | Equip |

INSTRUCTIONS

ACCESSORY STRUCTURES: Complete Sections 1, 2, 3, 5, and the Contractor / Owner-Builder Declarations.

MANUFACTURED HOME / MOBILEHOME INSTALLATION: Complete Sections 1, 2, 4, 5, and the Contractor / Owner-Builder

Declarations.

18551 FOUNDATION SYSTEM: Complete Sections 1, 2, 4, 5, and the Contractor / Owner-Builder Declarations.

PARK UTILITIES: Complete Sections 1, 2, 5, and the Contractor / Owner-Builder Declarations.

NEW PARKS AND PERMANENT BUILDINGS: Complete Sections 1, 2, 5, and the Contractor / Owner-Builder Declarations.

Submit the completed application and required fees to the appropriate Area Office listed below.

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356

CONTRACTOR / OWNER-BUILDER DECLARATIONS

CONTRACTOR: Contractors proposing construction are required by state law to provide the following information:

- ITEM 1: LICENSED CONTRACTOR DECLARATION Enter the contractor's license class, license number, license expiration date, and the contractor's signature and date.
- ITEM 3: WORKER'S COMPENSATION DECLARATION Place a check mark next to the declaration regarding the workers' compensation coverage that applies to the contractor. If the second declaration is marked, the contractor must also provide the carrier's name and policy number. This item must be signed by the contractor and dated.
- ITEM 4: CERTIFICATION The certification must be signed and dated by the contractor or agent on behalf of the contractor.

OWNER-BUILDER: If the work or activity as described on the application is being completed by the owner, the owner must complete the following items:

- ITEM 2: OWNER-BUILDER DECLARATION Place a check mark next to the declaration which is applicable. If the third
 declaration is marked, enter the section number from the Business and Professions Code (BPC) that provides the
 exemption and the reason for the exemption. The owner must also sign and date this section.
- ITEM 4: CERTIFICATION The certification must be signed and dated by the owner.

SECTION 1. PARK / APPLICANT INFORMATION Enter the park name and address. Enter the park owner's name(s). Enter the applicant's name, address, telephone number, and email address. The Department will contact or correspond with the party that is entered as the Applicant. Check the appropriate box to describe the applicant. If the requested services involve an architect or engineer, enter the architect or engineer's name, address, telephone number, and license number.

SECTION 2. DESCRIPTION OF WORK AND VALUATION Provide a description of the work to be performed (e.g., installing a manufactured home on a foundation system). Enter the total cost of the work to be performed (total contract price).

SECTION 3. ACCESSORY BUILDINGS OR STRUCTURES Check the appropriate box to indicate if the accessory building/structure is a new installation or a reinstallation. A new installation means a new accessory building or structure or an accessory building or structure that has not previously been installed with the unit. A reinstallation means an accessory building or structure that is being reinstalled for the same purpose as the original installation. Enter the Standard Plan Approval Number if this is a new installation. Check the appropriate box to indicate the type of accessory building/structure. If "Other" is selected, enter the type of building/structure (e.g., storage building, greenhouse, etc.). Enter the name, telephone number, and address of the owner. If the occupant of the manufactured home/mobilehome is other than the owner, enter the resident's name, telephone number, and the lot number where the unit is located.

SECTION 4. INSTALLATION—MOBILEHOME / MANUFACTURED HOME Enter the name, telephone number, and address of the owner. If the occupant of the manufactured home/mobilehome is other than the owner, enter the resident's name and the lot number where the unit is located. Enter the serial number(s) of the manufactured home/mobilehome. The serial number(s) can be located on the Manufacturer's Certificate of Origin, the Certificate of Title, registration documents, or on the front cross member of the unit. Enter the year the unit was manufactured. Enter the manufacturer's name and model name. This information can be obtained from the Manufacturer's Certificate of Origin, the Certificate of Title, registration documents, or may be designated on the outside of the unit itself. Enter the California Insignia Number(s) or HUD Label Number(s) issued for this unit, if known

SECTION 5. PARK OWNER, OPERATOR, OR MANAGER APPROVAL SIGNATURE Print the name of the park owner, operator, or manager that is signing the application. The signature of the park owner, operator, or manager and date signed is required. This signature is an acknowledgment that the park is aware and approves the services being requested in this application.

HCD MP 50 (Rev. 03/24)

T25CCR, section 2002(f)(8)(F), Application For Standard Plan Approval, HCD 520 - Current Form 7/04

| State of California Business, Transportation and Housing Agency Department of Housing and Community Development Division of Codes and Standards APPLICATION FOR STANDARD PLAN APPROVAL (SEE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM.) | COMMUNITY OF STREET |
|--|--|
| Check appropriate box(es): Standard Plan Approval (SPA) Requested: Type of Accessory Building or Structure Awning Cabana Porch Accessory Building or Structure Awning Cabana Porch Foundation System Garage Enclosure Carport Engineered Tiedown System Ramada Other Storage Building Storage Building Service Requested: New Application Renewal Resubmission Revision Change of Name/Ownership Type of Unit: Manufactured Home/Mobilehome Commercial Medular Drawing Number: Standard Plan Application (If previously issued by the Department) Product Name: Pr | DEPARTMENT USE ONLY Collection No Date Application Fee \$ Renewal Fee \$ Resubmission Fee \$ Revision Fee \$ Change of Name/ Ownership \$ Plan Approval Fee (First Hour) \$ Other |
| Address City Telephone Num | nberZip Zip |
| SECTION 3. APPLICANT CERTIFICATION I hereby certify: (1) that the information I have provided is correct; (2) and that I will ensure that the hear system is in compliance with the approved plan and the applicable provisions of Title 25, California Cot 2.or 2.2. I understand that failure to comply with the terms of approval shall be cause for cancellation of Executed on | (State) |
| DEPARTMENT USE ONLY Date Approved | |
| Comments: | |

INSTRUCTIONS

Complete sections 1, 2, and 3. Submit this application with three (3) copies of the plan and two (2) copies of the calculations and appropriate fees as specified in Title 25, California Code of Regulations, Division I, Chapter 2, and/or 2.2, to the following address:

(Fees Due with this Application Are Not Subject to Refund)

Department of Housing and Community Development Division of Codes and Standards 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826

Section 1 - Accessory Building or Structure, Foundation System, or Engineered Tiedown System Information

Standard Van Approval Requested: Check the appropriate box to indicate the type of plan approval you are requesting; Accessory Building or Structure (Health and Safety Code §\$18213 and/or 18862), Foundation System (Health and Safety Code §18551) or Engineered Thydown System (Health and Safety Code §18613.4).

Service Requested. Check the appropriate box to indicate the type of service you are requesting. The following is a definition of the services provided:

- New Application This is an application for a standard plan approval which is submitted for the first time.
- Renewal This is an application for a renewal of a standard plan for which the Bepartment has previously approved and issued a Standard Plan Approval number.
- Resubmission This is an application that upon original submission was rejected and is now being resubmitted.
- Revision This is an application to request a change or revision to an approved standard plan.
- Change of Name/Ownership This an application to report a change of the name of the applicant or the company from the name submitted on the original application for a Standard Plan Approval.

Type of Unit: Check the appropriate box to indicate of the Standard Plan Approval is being requested for Manufactured Home/Mobilehome, or Commercial Modular.

<u>Drawing Number</u>: Enter the drawing number as assigned the applicant, manufacturer, distributor, etc.

Model Number: Enter the model number as assigned by the applicant, manufacturer, distributor, etc.

<u>Product Name</u>: Enter the name under which the product will be marketed.

Standard Plan Approval Number: If this application is for a renewal, revision or change of name/ownership, enter the Standard Plan Approval number previously issued by the Department.

Section 2 - Applicant Information

Enter the name, address and telephone number of the applicant. The applicant is the party that is requesting the Standard Plan Approval (Manufacturer, Distributor, Contractor, etc.). Also enter the name, address and telephone number of the architect or engineer of record that designed the system. Enter the architect's California license number or engineer's California registration number.

Section 3 - Applicant Certification,

Enter the date, city and state where this document is completed and signed. The applicant is required both to print and to sign his/her name.

Upon receipt of the submitted plans, calculations, required fees and the Application for Standard Plan Approval (HCD 520), the Department will review and either;

- Reject the application. If the application is rejected, the Department will return the submitted plans, calculations and Application for Standard Plan Approval (HCD 520) along with a notice advising the applicant of any necessary corrections for approval (one copy of the plans will be retained by the Department).
- 2. Approve the application. If the application is approved, the Department will return the submitted plans and the applicant copy of the Application for Standard Plan Approval (HCD 520). The HCD 520 will indicate the date the standard plan was approved, the Standard Plan Approval number, and the date the approval will expire. The plans returned to the applicant will bear a departmental stamp indicating the date of approval, date of expiration, Standard Plan Approval number and the signature of a Department representative.

T25CCR, section 2002(f)(8)(E), Application for Standard Plan Approval, HCD MP 520 – Proposed Form 03/24

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards



APPLICATION FOR STANDARD PLAN APPROVAL

SEE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM

| Standard Plan Approval Requested: | Type of Accessory Building or Structure: | DEPARTMENT USE ONLY |
|--|---|--------------------------------------|
| Accessory Building or Structure | Awning Garage | Collection No. |
| ☐ Foundation System | Ramada Cabana | Date |
| ☐ Engineered Tiedown System ☐ Enclosure ☐ Other Service Requested: ☐ Porch ☐ Carport | Application Fee \$ | |
| | Porch Carport | Renewal Fee \$ |
| ☐ New Application ☐ Revision | Storage Building | Resubmission Fee \$ |
| Renewal Resubmission | Drawing Number: | Revision Fee \$ |
| Change of Name/Ownership | Model Number: | Change of Name/ Ownership \$ |
| Type of Unit: | Product Name: | Plan Approval Fee (First Hour) \$ |
| Manufactured Home/Mobilehome | Standard Plan Approval Number: | Other |
| Commercial Modular | (If previously issued by the Department) | TOTAL |
| Address | City | Zip |
| SECTION 2. APPLICANT INFORMATION Applicant Name | Telephone Num | 0.00 |
| Address | City | Zip |
| Email Address | | |
| Architect/Engineer Name | Telephone Nun | nber |
| Address | City | Zip |
| License/Registration Number | | |
| construction of this system is in compliance wit | provided is correct; (2) and that I will ensure that in the approved plan and the applicable provision 2. I understand that failure to comply with the terr | s of California Code of |
| Executed on at | | 000 |
| | City Print Name | State |
| NOTE: Standard Plan Approval is valid only when the desi | on is suitable for the locality. Two (2) copies of the approved the purpose of obtaining a permit to construct from the enforce | |
| roundation by storm of origineer out to down by storm sold for | DEPARTMENT USE ONLY | oment agency, |
| | | |
| Date Approved Standar | d Plan Approval Nur | mber Expiration Date |

HCD MP 520 (Rev. 03/24)

INSTRUCTIONS

Complete sections 1, 2, and 3. Submit this application with three (3) copies of the plan and two (2) copies of the calculations and appropriate fees, as specified in California Code of Regulations, title 25, division 1, chapters 2 and/or 2.2, to the address below. Note: Fees due with this application are not subject to refund. Contact HCD's Northern Area Office at NAOStaff@hcd.ca.gov or (800) 952-8356 with any questions.

HCD—Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826

SECTION 1. ACCESSORY BUILDING OR STRUCTURE, FOUNDATION SYSTEM, OR ENGINEERED TIEDOWN SYSTEM INFORMATION

Standard Plan Approval Requested: Check the appropriate box to indicate the type of plan approval you are requesting:

- Accessory Building or Structure (Health and Safety Code (HSC) sections 18213 and/or 18862)
- Foundation System (HSC section 18551)
- Engineered Tiedown System (HSC section 18613.4)

Service Requested: Check the appropriate box to indicate the type of service you are requesting. The following is a definition of the services provided:

- New Application—This is an application for a standard plan approval which is submitted for the first time.
- Renewal—This is an application for a renewal of a standard plan for which the Department has previously approved and
 issued a Standard Plan Approval number.
- Resubmission—This is an application that upon original submission was rejected and is now being resubmitted.
- Revision—This is an application to request a change or revision to an approved standard plan.
- Change of Name/Ownership—This is an application to report a change of the name of the applicant or the company from
 the name submitted on the original application for a Standard Plan Approval.

Type of Unit: Check the appropriate box to indicate if the Standard Plan Approval is being requested for manufactured home/mobilehome, or commercial modular.

Drawing Number: Enter the drawing number as assigned by the applicant, manufacturer, distributor, etc.

Model Number: Enter the model number as assigned by the applicant, manufacturer, distributor, etc.

Product Name: Enter the name under which the product will be marketed.

Standard Plan Approval Number: If this application is for a renewal, revision or change of name/ownership, enter the Standard Plan Approval number previously issued by the Department.

SECTION 2. APPLICATION INFORMATION

Enter the name, address, telephone number, and email of the applicant. The applicant is the party that is requesting the Standard Plan Approval (manufacturer, distributor, contractor, etc.). Also, enter the name, address, and telephone number of the architect or engineer of record that designed the system. Enter the architect's California license number or engineer's California registration number.

SECTION 3. APPLICANT CERTIFICATION

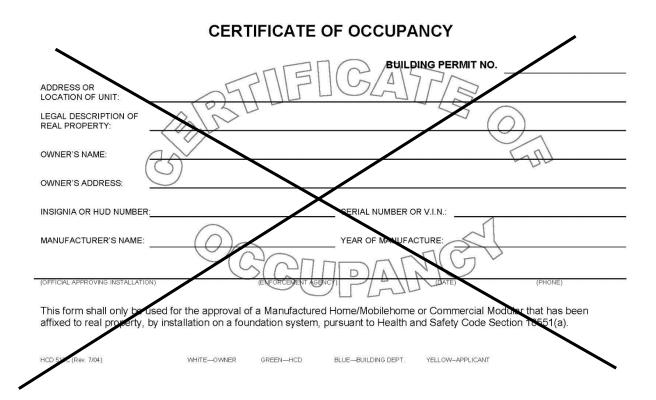
Enter the date, city, and state where this document is completed and signed. The applicant is required both to print and sign his/her name.

Upon receipt of the submitted plans, calculations, required fees and the Application for Standard Plan Approval (HCD MP 520), the Department will review and make one of the following determinations:

- Reject—If the application is rejected, the Department will return the submitted plans, calculations, and Application for Standard Plan Approval (HCD MP 520) along with a notice advising the applicant of any necessary corrections for approval (one copy of the plans will be retained by the Department).
- Approve—If the application is approved, the Department will return the submitted plans and a copy of the Application for Standard Plan Approval (HCD MP 520). The HCD MP 520 will indicate the date the standard plan was approved, the Standard Plan Approval number, and the date the approval will expire. The plans returned to the applicant will bear a departmental stamp indicating the date of approval, date of expiration, Standard Plan Approval number, and the signature of a Department representative.

HCD MP 520 (Rev. 03/24) Page 2

T25CCR, section 2002(f)(8)(G), Certificate of Occupancy, HCD 513C - Current Form 7/04



T25CCR, section 2002(f)(8)(F), Certificate of Occupancy, HCD MP 513C – Proposed Form 03/24

CERTIFICATE OF OCCUPANCY

| BUILDING PERMIT NO. |
|---|
| ADDRESS OR LOCATION OF UNIT |
| LEGAL DESCRIPTION OF REAL PROPERTY |
| OWNER NAME |
| OWNER ADDRESS |
| INSIGNIA OR HUD NUMBER SERIAL NUMBER OR V.I.N. |
| MANUFACTURER NAME YEAR OF MANUFACTURE |
| SCAMPARIO V |
| (OFFICIAL APPROVING INSTALLATION) (ENFORCEMENT AGENCY) (DATE) (PHONE) |
| This form shall only be used for the approval of a manufactured home / mobilehome or commercial modular that has been |
| affixed to real property, by installation on a foundation system pursuant to Health and Safety Code section 18551(a). |
| |
| HCD MP 513C (Rev. 03/24) WHITE—OWNER GREEN—HCD BLUE—BUILDING DEPT. YELLOW—APPLICANT |

T25CCR, section 2002(f)(8)(H), Floodplain Ordinance Compliance Certification For Manufactured Home/Mobilehome Installations, HCD 547 – Current Form 7/04

STATE OF CALIFORNIA
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF CODES AND STANDARDS
MOBILEHOME PARKS PROGRAM



FLOODPLAIN ORDINANCE COMPLIANCE CERTIFICATION FOR MANUFACTURED HOME/MOBILEHOME INSTALLATIONS

Federal Energency Management Agency (FEMA) regulations require that manufactured homes and mobile lomes installed in special flood hazard areas comply with 44 CFR, Chapter 1, Part 60, or local ordinances.

This form is required when applying for a permit to install a manufactured home/mobilehome where the Department of Housing and Community Development (HCD) is the enforcement agency. The permit applicant and the local floodplain management agency must complete this form. This completed from must be submitted with the permit application. Accompleted copy of this form must retained by the local floodplain management agency

| permit application. A completed copy of this form must retained by the local floodplain ma | nagement agency |
|---|---|
| SEE REVERSE SIDE FOR INSTRUCTIONS TO COMPLETE TH | IIS FORM |
| SECTION 1 - Installation Site Information (permit applicant to complete this section | on) |
| Name of Park:Park ID No: | |
| Park Address: Lot/Space No: | |
| City:Zip: | |
| Was this lot created on or before December 31, 1974? | |
| YES NO | |
| Signature of Applicant: | |
| SECTION 2 – Local Floodplain Management Agency Verificat | tion |
| Local agency of complete this section | -£41-i4i |
| See the reverse side of this page for more intermation concerning the requirements | or this section. |
| This lot is not in a Special Flood Hazard Area | O SEO POUTS SENSONDUMPTARSAND MATS |
| The bottom of this chassis must be setfeetinches above the groun | d as measured from the |
| lowest point of the lot under the unit | T :770 L T II I I |
| The bottom of the lowest floor must be set to a base flood envation of[Use | only if (f) checked below] |
| a) Initial Flood Insurance Rate Map (FIRM) date for this community: / | |
| b) Current FIRM Index Date: / / FIRM Panel Number & Date:_ | |
| c) Flood Zone this lot/pad is located in:Base Flood Elevation (in AO zone | show depth) |
| d) If Zone A or V, complete 1-3: | ou. |
| If applicable, current LOMA/LOMR Case #:Date: | |
| 2) Has community knowledge of past flooding in this manufactured home park | |
| 3) Was a manufactured home on this lot/pad ever destroyed or damaged 50% or m | 9 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 |
| e) The Lot is in Zone B, C, X or D (circle one and check box above) which is Flood Hazard Area. | not within a Special |
| f) The lot complies with 44CFR, Section 60.3 (c)(6) and height measurement must be Base Flood Elevation in (c) to comply with the local floodplain ordinance. | pe referenced to the |
| g) he lot complies with 44 CFR, Section 60.3(c)(12). | |
| | |
| Print Name of City/County agent | Title |
| | \ |
| Signature of City/County Floodplain Management Agent Providing Information | Telephone |
| HCD 547.704 | |

INSTRUCTIONS TO THE PERMIT APPLICANT

Provide complete information in Section 1 and submit the form to the local floodplain management agency in the city or county where the manufactured home or mobilehome is to be installed. The local agency will complete Section 2 with the required flood plain information and return the form to you. Submit this complete form with your permit application to the appropriate HCD Area Office.

INSTRUCTIONS TO LOCAL FLOODPLAIN MANAGEMENT AGENCY

Upon receiving this form from the permit applicant, provide the information required by Section 2, return this form to the permit applicant and retain a copy of the completed HCD 547 form for your records.

Copies of the Cods of Federal Regulations, (44 CFR, Chapter 1, Part 60) may be obtained from the Federal Emergency Management Agency, Mitigation Division, Region IX, 1111 Broadway, Suite 1200, Oakland CA 94607-4052

THE FOLLOWING IS A PARTIAL REPRINT OF THE APPLICABLE FEDERAL REGULATIONS

FEMA, 44 CFR, Chapter I

Section 60.3 (c)(6)

s that are placed or substantially in 'Require that manufactured home proved within Zones AI -30. AH, and AE on ark or subdivision, (ii) in a new manufactured the community's FIRM on sites (i) outside of a manufactured home actured home park or subdivision, or (iv) in an pansion to an existing many home park or subdivision, (iii) in an ex existing manufactured home park or subdivision on which a man actured home has incurred 'substantial damage' as the result of a flood, be elevated on permanent foundati n such that the lowest floor of the manufactured home is elevated to or above the base f od elevation and be securely anchored to an adequately anchored foundation system to resist floatation collaps and lateral me

"Expansion to existing park or subdivision" means: the preparation of additional sites by the construction of facilities for servicing the lots on which manufactured (mobile) homes are to be affixed (including the installation of utilities, the construction of streets, and either final star grading or the pouring of concrete pads.)

Section 60.3 (c)(12)

'Require that manufactured homes to be place tantially improved on sites in an existing manufactured ed or sub on the community's FIRM that are not subject to the home park or subdivision within Zones A-1 AH, and A that either (i) the lowest floor of the manufactured provisions of paragraph (c) (6) of this sect he elevated home is at or above the base flood eleva on, or (ii) the manufactured home chassis is supported by reinforced piers or other foundation elements of at east equivalent strength that are no less than 36 inches in height above adequately anchored foundation system to resist floatation, collapse, and grade and be securely anchored to an lateral movement.'

"Existing" means: a manufactured (mobile) home park or subdivision for which the construction of facilities for servicing the lots on which the manufactured mobile homes are to be affixed (including, at a minimum, the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads) is completed on or before December 31, 1974, or before the effective date of the community's initial Flood Insurance Rate Map (FIRM), whichever is later.

T25CCR, section 2002(f)(8)(G), Floodplain Ordinance Compliance Certification for Manufactured Home / Mobilehome Installations, HCD MP 547 – Proposed Form 03/24

State of California Business, Consumer Services and Housing Agency Department of Housing and Community Development Division of Codes and Standards



FLOODPLAIN ORDINANCE COMPLIANCE CERTIFICATION FOR MANUFACTURED HOME / MOBILEHOME INSTALLATIONS

Federal Emergency Management Agency (FEMA) regulations require that manufactured homes and mobilehomes installed in special flood hazard areas comply with 44 Code of Federal Regulations (CFR), chapter 1, part 60, or local ordinances.

This form is required when applying for a permit to install a manufactured home/mobilehome where the California Department of Housing and Community Development (HCD) is the enforcement agency and the manufactured home or mobilehome is installed in a flood hazard area. The permit applicant and the local floodplain management agency both need to complete this form. Once complete, please submit with the permit application to the local area office. The addresses are listed on the back of this form. A completed copy of this form must be retained by the local floodplain management agency.

| SEE REVERSE SIDE FOR | INSTRUCTION | NS TO COMPLETE THIS FORM |
|--|--------------------|---|
| SECTION 1. Installation Site Information (Co | ompleted by pe | ermit applicant) |
| Park Name | | Park ID# |
| Park Address | | Lot / Space # |
| City | | Zip |
| Was this lot created on or before December 31, 197 | 74? □ YE | ES NO |
| Signature of Applicant | | |
| SECTION 2. Local Floodplain Management | Agency Verific | ication (Completed by local agency) |
| See the reverse side of this page for mo | ore information o | concerning the requirements of this section. |
| This lot is not in a Special Flood Hazard Area | | |
| ☐ The bottom of this chassis must be set | feet | inches above the ground as measured from the |
| lowest point of the lot under the unit. | | |
| The bottom of the lowest floor must be set to a | base flood eleva | ration of (use only if (F) checked below |
| A. Initial Flood Insurance Rate Map (FIRM) date for | or his community | ty:- |
| B. Current FIRM Index Date | FIR | RM Panel Number & Date |
| C. Flood Zone this lot / pad is located in: | Base Floo | ood Elevation (in AO zone show depth) |
| D. If Zone A or V, complete 1-3. | | |
| 1. If applicable, current LOMA / LOMR Case # | l: | Date: |
| 2. Has community knowledge of past flooding | in this manufac | ctured home park? |
| 3. Was a manufactured home on this lot / pad | ever destroyed | or damaged 50 percent or more by flood? |
| E. The lot is in Zone B, C, X, or D (circle one ar | nd check box ab | bove) which is not within a Special Flood Hazard Area |
| F. The lot complies with 44 CFR section 60.3(c Elevation in (c) to comply with the local flood | | measurement must be referenced to the Base Flood |
| G. The lot complies with 44 CFR section 60.3(c | :)(12). | |
| Print Name of City / County Agent | | Title |
| Signature of City / County Floodplain Management A | Agent Providing In | nformation Telephone |

HCD MP 547 (Rev. 03/24)

Instructions for Floodplain Ordinance Applications

Section 1: To be completed by the applicant.

Section 2: To be completed by local floodplain management agency in the city or county where the manufactured or mobilehome is to be installed. The local agency will return the form to the applicant. The applicant will then submit this form with their permit to the appropriate HCD area office listed below.

Instructions for Local Floodplain Management Agencies

Upon receiving this form from the permit applicant provide the information required by Section 2 return this form to the permit applicant and retain a copy of the completed HCD MP 547 form for your records.

Copies of the Code of Federal Regulations (44 CFR, chapter 1, part 60) may be obtained from the Federal Emergency ManagementAgency, Mitigation Division, Region IX, 1111 Broadway, Suite 1200, Oakland CA 94607-4052.

The following is a partial reprint of the applicable federal regulations:

FEMA, 44 CFR. chapter 1. section 60.3 (c)(6)

Require that manufactured homes that are placed or substantially improved within Zones Al -30, AH, ard AE on the community's FIRM on sites (i) outside of a manufactured home park or subdivision. (ii) in a new manufactured home park or subdivision. (iii) in an expansion to an existing manufactured home park or subdivision or (iv) in an existing manufactured home park or subdivision on which a manufactured horre has incurred 'substantial damage' as the result of a flood, be elevated on a permanent foundation such that the lowest floor of the manufactured home is elevated to or above the base flood elevation and be securely anchored to an adequately anchored foundation system to resist floatation collapse and lateral movement.

<u>Expansion to existing park or subdivision</u> means: the preparation of additional sites by the construction of facilities for servicing the lots on which manufactured (mobile) homes are to be affixed (including the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads.)

FEMA, 44 CFR, chapter 1, section 60.3 (c)(12)

Require that manufactured homes to be placed or substantially improved on sites in an existing manufactured home park or subdivision within Zones A-1-30, AH, and AE on the community's FIRM that are not subject to the provisions of paragraph (c)(6) of this section be elevated so that either (i) the lowest floor of the manufactured home is at or above the base fload elevation, or (ii) the manufactured home chassis is supported by reinforced piers or other foundation elements of at least equivalent strength that are no less than 36 inches in heicht above grade and be securely anchored to an adequately anchored foundation system to resist floatation, collapse, and lateral movement.

"Existing" means: a manufactured/mobilehome park or subdivision for which the construction of facilities for servicing the lots on which the manufactured mobile homes are to be affixed (including, at a minimum, the installation of utilities, the construction of streets, and either final site grading or the pouring of concrete pads) is completed on or before December 31, 1974, or before the effective date of the community's initial Flood Insurance Rate Map (FIRM), whichever is later.

HCD—Northern Area Office 9342 Tech Center Pr. Ste 550 Sacramento, CA 95826 (800) 952-8356 NAOStaff@hcd.ca.gov HCD—Southern Area Office 3737 Main St. Ste 400 Riverside, CA 92501 (800) 952-8356 SAOStaff@hcd.ca.gov T25CCR, section 2002(f)(8)(I), Manufactured Home or Mobilehome Installation Acceptance (Local Enforcement Agency), HCD 513B – Current Form 7/04

| MOBIL | EHOME INSTALLATIO | N ACCEPTANCE | |
|---|-----------------------------|---|--|
| | | I.D. NO.: | |
| | | PERMIT NO. | |
| ADDRESS OR LOCATION OF MOBILEHO | ME: | | |
| OWNER'S NAME: | | | |
| OWNER'S ADDRESS: | $\overline{}$ | | |
| INSIGNIA OR HUD NUMBER: | | | |
| MANUFACTURER'S NAME: | | | |
| SERIAL NUMBER OR V.I.N.: | | YEAR OF MANUFA | CTURE: |
| (OFFICIAL APPROVING INSTALLATION) | | (DATE) | (PHONE) |
| IF THE MANUFACTURED HOME/MOBILE SHALL BECOME INVALID. This form sha Health and Safety Code section 18613 or s | Il be used when a manufactu | OCATED, THIS INSTALLAT Ired home/mobilehome is ins | TION ACCEPTANCE talled in accordance with |
| HCD 513B (Rev. 7/04) | WHITE—OWNER | CANARYPERMITTEE | BLUE—OFFICE FILES |

T25CCR, section 2002(f)(8)(H), Manufactured Home / Mobilehome Installation Acceptance (Local Enforcement Agency), HCD MP 513B – Proposed Form 03/24

| | | LD NO | |
|---|--|-------------------------|--------------------|
| | | I.D. NO. | |
| | | PERMIT NO. | |
| ADDRESS OR LOCATION OF MOBILE | НОМЕ | | |
| OWNER NAME | | | |
| OWNER ADDRESS | | | |
| INSIGNIA OR HUD NUMBER | | | |
| MANUFACTURER NAME | | | |
| SERIAL NUMBER OR V.I.N. | ERIAL NUMBER OR V.I.N. YEAR OF MANUFACTURE | | ACTURE |
| | | | |
| OFFICIAL APPROVING INSTALLATION | | DATE | PHONE |
| IF THE MANUFACTURED HOME / MOE | RII FHOME IS MOVED OR RE | LOCATED THIS INSTALL AT | ION ACCEPTANCE SHA |
| BECOME INVALID. This form shall be us | | | |
| Safety Code section 18613 or section 18 | | | |
| | | | |
| | | | |
| HCD MP 513B (Rev. 03/24) | WHITE-OWNER | CANARY—PERMITTEE | BLUE—OFFICE FILES |

T25CCR, section 2002(f)(8)(J), Manufactured Home or Mobilehome Installation Acceptance, HCD 513A – Current Form 7/04

| DE | DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS | | |
|---|---|-----------------------------|----------------------------|
| | MOBILEHOME INSTALL | ATION ACCEPTANCE | |
| CALIFORNIE | | I.D. NO | |
| | | PERMIT NO | |
| ADDRESS OR LOCATION OF MO | BILEHOME: | | |
| OWNER'S NAME: | | / | |
| OWNER'S ADDRESS: | | | |
| INSIGNIA OR HUD NUMBER: | | | |
| MANUFACTURER'S NAME: | | | |
| SERIAL NUMBER OR V.I.N.: | | YEAR OF MANUFA | ACTURE: |
| (OFFICIAL APPROVING INSTALLATION) | | (DATE) | (PHONE) |
| IF THE MANUFACTURED HOME/I | MORII EHOME IS MOVED OR REI | | |
| SHALL BECOME INVALID. This for Health and Safety Code section 186 | orm shall be used when a manufact | ured home/mobilehome is ins | stalled in accordance with |
| HCD 513A (Rev. 7/04) | WHITE—OWNER | CANARY—PERMITTEE | BLUE—OFFICE FILES |

T25CCR, section 2002(f)(8)(I), Manufactured Home / Mobilehome Installation Acceptance, HCD MP 513A – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356 Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501

(800) 952-8356

State of California
Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards

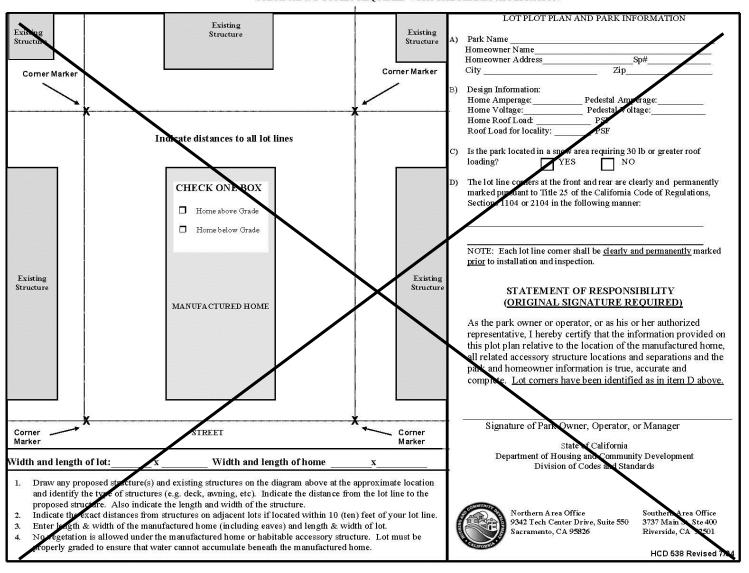


MANUFACTURED HOME / MOBILEHOME INSTALLATION ACCEPTANCE

| | | I.D. NO. | |
|---|----------------------------|---------------------------------|----------------------------|
| | | PERMIT NO. | |
| ADDRESS OR LOCATION OF MOBILE | HOME | | |
| OWNER NAME | | | |
| OWNER ADDRESS | | | |
| INSIGNIA OR HUD NUMBER | | | |
| MANUFACTURER NAME | | | |
| SERIAL NUMBER OR V.I.N. | | YEAR OF MANUFACTURE | |
| OFFICIAL APPROVING INSTALLATION | | DATE | PHONE |
| IF THE MANUFACTURED HOME / MOI | BILEHOME IS MOVED OR R | ELOCATED, THIS INSTALLAT | ION ACCEPTANCE SHALL |
| BECOME INVALID. This form shall be u | sed when a manufactured ho | me / mobilehome is installed in | accordance with Health and |
| Safety Code section 18613 or section 18 | 551(b). | | |
| HCD MP 513A (Rev. 03/24) | WHITE-OWNER | CANARY—PERMITTEE | BLUE-OFFICE FILES |

T25CCR, section 2002(f)(8)(L), Plot Plan, HCD 538 - Current Form 7/04

ORIGINAL & 2 COPIES REQUIRED WITH THE PERMIT APPLICATION



Lot Plot Plan Instructions

DRAINAGE AND GRADING

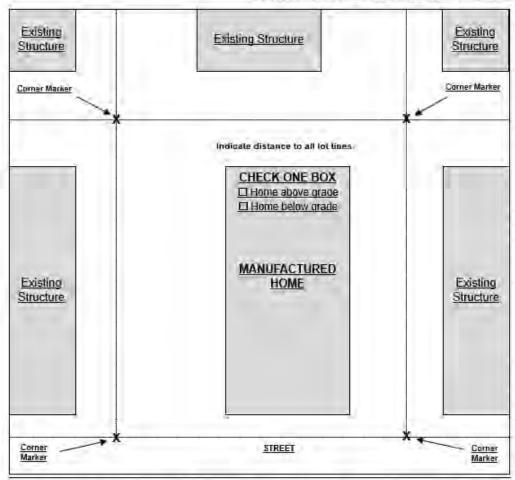
- Each mobilehome lot or site shall be graded to insure that water cannot accumulate beneath the unit.
- Final grading must be complete prior to final approval.

IMPORTANT INFORMATION

- Within modelehome parks constructed on or after 9/15/61, minimum distances from a manufactured home mobilehome to:
 - 1. A permanent building shall be 10 (ten) feet, measured from the eaves:
 - 2. Another manufactured home/mobilehome, installed, including eaves,
 - a. Side to side 10 (ten feet)
 - b. Side to har or side to front 8 (eight) feet
 - c. Rear to frost or rear to rear 6 (six) feet
- Within mobilehome parks constructed prior to 9/15/61, (verification required) a 6 (six) foot separation to any permanent building
 or another manufactured home/mobilehome is required.
- Manufactured home/mobilehomes or accessory structures shall not be located:
 - 1. Over underground gas piping, unless the gas piping is installed in gas tight sleeves (open awnings and carports excluded).
 - Over main sewer line clean outs.
 - 3. Within 5 (five) feet of a septic tank.
 - 4. Within 8 (eight) feet of sewage disposal (leach) fields.
 - 5. Under overhead insulated electrical conductors, unless 8 (eight) feet of clearance is provided.
 - 6. So as to restrict access to park electrical equipment, indicate clearances
 - 7. Over lot gas risers or meters.
- · Additionally, accessory structures shall not be located:
 - 1. As to restrict access or ventilation of the lot gas kisers of meters.
 - So as to block:
 - a. Required light or ventilation in the manufacture home/mobilehome.
 - b. Required egress windows or exit doors in the manufactured home/mobilehome.
 - c. Access to the manufactured home/mobilehome's fixed appliances.
- All combustible construction, including manufactured homes/mobilehomes, eaves, storage cabinets (sheds), awning posts, decks, etc., must be at least 3 (three) feet from the lot lines (except a lot line bordering a roadway). NOTE: Metal storage cabinets (sheds) with no combustible framing (walls/roof) may be placed up to a lot line, provided there is 3 feet clearance from any structure on the adjacent lot.
- The locations of proposed units or accessory buildings or structures in relation to fourfied petroleum gas (LPG) tanks shall be in accordance with Title 25, section 1211 or 2211.
- A Flood Plain Ordinance Compliance Certificate (HCD Form 547) is required for manufactured home installations where the local government agency has adopted a Flood Plain Management Program.
- For manufactured home/mobilehome installation inspections and accessory buildings or structures that enclose an exit, ALL
 exterior doorways shall be provided with a means of egress (stairway, ramp, etc.) complying with the California Building Code at
 the time of the home installation inspection.
- The total occupied area of a lot may not exceed 75% of the lot area, including but not limited to the unit, awnings, carports, storage cabinets, storage buildings, porches, stairways and ramps. Driveways, walkways, slabs and similar flat work are not subject to this limitation.
- Plot plans and permits are not required for storage cabinets (sheds), provided the total floor area of all storage cabinets on a lot, do not exceed 120 square feet. Storage cabinets exceeding these limits are storage buildings and require a permit and must be constructed as permanent buildings.
- A School Impact Fee Certification (HCD Form 502) may be required for new manufactured home/mobilehome installations on new lots (constructed on or after September 1, 1985).

LOT PLOT PLAN AND PARK INFORMATION

ORIGINAL & 2 COPIES REQUIRED WITH THE PERMIT APPLICATION



| 1 | Draw any proposed structure(s) and existing structure(s) on the diagram above at the approximate location |
|---|--|
| | and identify the type of structures (e.g., deck, awning, etc.). Indicate the distance from the lot line to the |
| | proposed structure. Indicate the length and width of the structure. |

- 2. Indicate the exact distances from structures on adjacent lots if located within 10 feet of your lot line.
- 3. Enter length and width of the manufactured home (including eaves) and length and width of lot.
- 4. No vegetation is allowed under the manufactured home or habitable accessory structure. Lot must be properly graded to ensure that water cannot accumulate beneath the manufactured home.
- Identify any slopes greater than 3 feet in height.

Width and length of home

Section 1, PARK AND OWNER INFORMATION

Homeowner Name Homeowner Address Sp# City Zip

Park Owner Email

Park Name

Section 2. DESIGN INFORMATION

Home Amperage Pedestal Amperage Home Voltage Pedestal Voltage PSF. Roof Load for Locality Home Roof Load

Section 3. SNOW AREA

is the park located in a snow area requiring 30 lb or greater roof loading? YES ■ NO

Section 4. LOT LINE CORNERS

The lot line corners at the front and rear are clearly and permanently marked pursuant to California Code of Regulations, title 25, sections 1104 or 2104 as described in the following manner:

Section 5. SCOPE OF WORK

STATEMENT OF RESPONSIBILITY ORIGINAL SIGNATURE REQUIRED

As the park owner or operator, or as his or her authorized representative. I hereby certify under penalty of perjury that the information provided on this plot plant relative to the location of the manufactured home, all related accessory structure locations and separations and the park and homeowner information is true. accurate, and complete. Lot corners have been identified in Section 4.

Signature of park owner, operator, or manager

Print Name

State of California Department of Housing and Community Development Division of Codes and Standards

Northern Area Office 9342 Tech Center Dr., Ste. 550 Sacramento, CA 95326 (800) 952-8356

Southern Area Office 3737 Main St., Ste. 400 Riverside, CA 92501 (E00) 952-8356



Width and length of lot:

INSTRUCTIONS

DRAINAGE AND GRADING

- Each mobilehome lot or site shall be graded to ensure that water cannot accumulate beneath the unit.
- Final grading must be complete prior to final approval.

IMPORTANT INFORMATION

Within mobilehome parks constructed on or after September 15, 1961, minimum distances from a manufactured home/mobilehome to:

- A permanent building shall be 10 feet, measured from the eaves
- Another manufactured home/mobilehome, installed, including eaves:
 - Side to side 10 feet
 - Side to rear or side to front 8 feet
 - Rear to front or rear to rear 6 feet

Within mobilehome parks constructed prior to September 15, 1961, (verification required) a 6 foot separation to any permanent building or another manufactured home/mobilehome is required.

Manufactured home/mobilehomes or accessory structures shall not be located:

- Over underground gas piping, unless the gas piping is installed in gas tight sleeves (open awnings and carports excluded)
- Over main sewer line clean outs
- Within 5 feet of a septic tank
- Within 8 feet of sewage disposal (leach) fields
- Under overhead insulated electrical conductors, unless 8 feet of clearance is provided
- So as to restrict access to park electrical equipment, indicate clearances
- Over lot gas risers or meters

Additionally, accessory structures shall not be located:

- As to restrict access or ventilation of the lot gas risers or meters
- So as to block:
 - Required light or ventilation in the manufactured home/mobilehome.
 - Required egress windows or exit doors in the manufactured home/mobilehome.
 - Access to the manufactured home/mobilehome fixed appliances

All combustible construction, including manufactured homes/mobilehomes, eaves, storage cabinets (sheds), awning posts, decks, etc., must be at least 3 feet from the lot lines (except a lot line bordering a roadway). NOTE: Metal storage cabinets (sheds) with no combustible framing (walls/roof) may be placed up to a lot line, provided there is 3 feet clearance from any structure on the adjacent lot.

The locations of proposed units or accessory buildings or structures in relation to liquefied petroleum gas (LPG) tanks shall be in accordance with California Code of Regulations, title 25, section 1211 or 2211.

A Flood Plain Ordinance Compliance Certificate (form HCD MP 547) is required for manufactured home installations where the local government agency has adopted a Flood Plain Management Program.

For manufactured home/mobilehome installation inspections and accessory buildings or structures that enclose an exit, ALL exterior doorways shall be provided with a means of egress (stairway, ramp, etc.) complying with the California Building Code at the time of the home installation inspection.

The total occupied area of a lot may not exceed 75 percent of the lot area, including but not limited to the unit, awnings, carports, storage cabinets, storage buildings, porches, stairways, and ramps. Driveways, walkways, slabs, and similar flat work are not subject to this limitation.

<u>Plot plans and permits are not required for storage cabinets (sheds), provided the total floor area of all storage cabinets on a lot does not exceed 120 square feet. Storage cabinets exceeding these limits are storage buildings and require a permit and must be constructed as permanent buildings.</u>

A School Impact Fee Certification (form HCD MP 502) may be required for new manufactured home/mobilehome installations on new lots (constructed on or after September 1, 1985).

HCD MP 538 (Rev. 03/24) Page 2

T25CCR, section 2002(f)(8)(N), School Impact Fee Certification, HCD MP 502 – Current Form 07/04

Nothern Area: 934 37 ech Center Drive, Suite 550 934 37 ech Center Drive, Suite 550 Sacrat perio, CA 95826 (916) 259 2501 Southern Area 3737 Main Street, Suite 400 Riverside, CA 932 11



STATE OF CALIFORNIA BUSINESS, TRANSPORTATION AND HOUSING AGENCY DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS

SCHOOL IMPACT FEE CERTIFICATION

Government Code 65998 through 65996 and Education Code sections 17620 through 17626 govern school impact fees imposed on mobilehorities and manufactured homes installed in mobilehome parks of additions to existing mobilehome parks where the permit to construct the park was issued after September 1, 1985.

This form is required when installing mobilehomes or manufactured homes in areas where the Department of Housing and Community Development (HCD) is the enforcement agency and responsible for verifying compliance with local school impact fees. The form must be presented to the department official at the jobsite at the time of inspection of the mobilehome or manufactured home installation.

This certification relates to the applicability of or to the satisfaction of School Impact Fees for the property described below: Mobilehome Park Name: (If Applicable Address: Lot/Space Number: City:____ , CA_ (ZIP Code) County:___ Check One: School Impact Fees are either not applicable or have been satisfied with respect to the above-described property. A demand has been placed into the manufactured home or mobilehome excrow for the School Impact Fee applicable to the above described property. It is understood that the validity of any Statement of Installation Acceptance or Certificate of Occupancy issued by the installation inspection agency will be conditioned to concurrent satisfaction of said demand by the escrow agent. Date: (Signature of an Authorized Agent of the School District) Telephone: K 1 2 3 4 5 6 7 8 9 10 11 12 (Please grades applicable to this certification and line out those grades to which this certificate does not apply NOTE: Certifications must be completed by as many school districts as necessary to include all glades

HCD MP 502 (Rev. 7/04)

K through 12

T25CCR, section 2002(f)(8)(L), School Impact Fee Certification, HCD MP 502 – Proposed Form 03/24

Northern Area Office 9342 Tech Center Drive, Suite 550 Sacramento, CA 95826 (800) 952-8356

Southern Area Office 3737 Main Street, Suite 400 Riverside, CA 92501 (800) 952-8356 State of California

Business, Consumer Services and Housing Agency
Department of Housing and Community Development
Division of Codes and Standards

Mobilehome and Special Occupancy Parks Program



SCHOOL IMPACT FEE CERTIFICATION

Government Code sections 65995 through 65996 and Education Code sections 17620 through 17626 govern school impact fees imposed on mobilehomes and manufactured homes installed in mobilehome parks or additions to existing mobilehome parks where the permit to construct the park was issued after September 1, 1985.

This form is required when installing mobilehomes or manufactured homes in areas where the California Department of Housing and Community Development (HCD) is the enforcement agency and responsible for verifying compliance with local school impact fees. The form must be presented to the department official at the jobsite at the time of inspection of the mobilehome or manufactured home installation.

This certification relates to the applicability of or to the satisfaction of School Impact Fees for the property described below:

| Mobilehome Park Name: | | |
|--|--------------------------------|--|
| | If Applicable | |
| Address: | | |
| | Number and Street | |
| Lot/Space Number: | | |
| City: | , CA Zip | County: |
| Check One: | | |
| School Impact Fees are either no described property. | ot applicable or have been sa | atisfied, with respect to the above- |
| Impact Fee applicable to the abo | ve-described property. It is u | nobilehome escrow for the School understood that the validity of any |
| Statement of Installation Accepta agency will be conditioned to cor | | ncy issued by the installation inspection lemand by the escrow agent. |
| | | Date: |
| Signature of an Authorized Agent of | f the School District | |
| Telephone: | | |

Please circle grades applicable to this certification and line out those grades to which this certificate does not apply.

K 1 2 3 4 5 6 7 8 9 10 11 12

NOTE: Certifications must be completed by as many school districts as necessary to include all grades K through 12.

HCD MP 502 (Rev. 03/24)