



APPLICATION FOR A BUILDING PERMIT (Mobile Home Installation & Accessory Buildings)

City of San Jacinto | 595 S. San Jacinto Ave | San Jacinto CA 92583 | 951.487.7330 | fax 951.654.9896

Date:

Must print legibly, submit (3) sets of building and plot plans. Fill out all applicable information. If any section does not apply print N/A.

Building Address:			APN:
Type of Work:			Type of Plans Submitted:
Sq. Ft. Size:	# of Stories:	# of Dwelling Units:	
Valuation:	# of Gallons:	# of BTUs:	
Building Owner:			Phone:
Address:	City:	State:	Zip:
Applicant:			Phone:
Address:	City:	State:	Zip:
Contractor:			Phone:
Address:	City:	State:	Zip:
State Lic. #	Expiration Date:		City Lic. #
Architect/Engineer/Designer:			Phone:
Address:	City:	State:	Zip:
State Lic. #	Expiration Date:		City Lic. #

OFFICE USE ONLY	Application Received:				
Planning Department Use:	1 st	2 nd	3 rd Planning Review	[<input type="checkbox"/>] Approved	[<input type="checkbox"/>] Denied
Planning Reviewed By:				Date:	
Building Department Use:	1 st	2 nd	3 rd Building Review	[<input type="checkbox"/>] Approved	[<input type="checkbox"/>] Denied
Building Reviewed By:				Date:	
Comments:					



City of San Jacinto

Guidelines for Inspections of all Structures

1. 24 hr. notice required for all inspections. All requests must be called in before 4 PM to receive next day inspection. You will need your permit number, address that needs inspection and type of inspection requested to receive an inspection.
2. An approved set of plans and a permit card must be available at all times to the inspector.
3. The site location shall be easily identifiable and property lines shall be established.
4. The site shall be free of safety violations and obvious hazards, i.e. nails on boards, all trenches filled as soon as possible.
5. Access shall be provided for all inspections i.e., approved ladder or scaffold, panel covers removed, adequate lighting provided.
6. It is requested that someone be on site at all times, inspector reserves right to refuse to perform unsupervised inspection.
7. All work for which a permit is required shall be in substantial compliance with all applicable codes. The inspector will approve or reject the work at the time of inspection. Rejection of work will be either verbally or in writing.
8. Appointment for inspection will not be made unless special circumstances warrant them. Hours of inspection will be between 9:00AM and 1:00PM to 4:00PM.
9. A re-inspection fee may be assessed at the discretion of the inspector for failure to comply with the requirements of this Department and any applicable codes.
10. Any complaints or requests for interpretation shall be made in writing and directed to the Assistant Building Official.
11. You must request an extension, in writing, before your permit expires or you will have to pay an additional fee.

MOBILE HOME PLUMBING INSPECTION

TITLE 25, CALIFORNIA , ADMINISTRATIVE CODE, CHAPTER 2

"1362. Test. When a mobile home consists of two or more units, all utility connections form one unit to another shall be visually inspected and concluded in the tests.

"(a) Water and Drainage. The water distribution system of the mobile home and the supply connection shall show no evidence of leakage under normal operating pressures. If water at normal operating pressure is not available, the mobile home water distribution system shall be tested by a 50 pound per square inch air pressure test for a period of not less than 15 minutes without leaking.

"The mobile home drainage piping system shall be connected to the lot or site drain inlet, and tested by allowing water to flow into all fixtures and receptors, including the clothes washer standpipe, for a period of three minutes. If water under pressure is not available, the drainage piping system shall be tested by letting at least three gallons of water into each fixture and receptor. There shall be no visible evidence of leaks.

"(b) Fuel Gas Piping. The mobile home fuel gas piping system shall be tested before it is connected to the mobile home lot gas outlet. The mobile home gas piping system shall be subjected to a pressure test with all appliances, in the open position. Appliance shut-off valves ahead of fuel gas cooking appliances shall be closed.

"The test shall consist of air pressure at not less than 10 inches nor more than a MAXIMUM of 14 inches water column. (Six ounce to a MAXIMUM eight ounce psi). The system shall be isolated from the air pressure source and maintain this pressure for not less than two minutes without perceptible leakage. Upon satisfactory completion of the test the appliance valves ahead of fuel gas cooking appliances shall be opened and the gas cooking appliance connectors tested with soapy water or bubble solution while under the pressure remaining in the piping system. Solutions used for testing for leakage shall not contain corrosive chemicals. Pressures shall be measured with either a manometer, slope gauge, or gauge calibrated in either water inches or psi with increments of either one-tenth inch or one-tenth psi, as applicable. Upon satisfactory completion of the test, the mobile home gas supply connector shall be installed, and the connections tested with soapy water or bubble solution.

"Gas appliance vents shall be visually inspected to insure that they have not been dislodged in transit and are securely connected to the appliance.

NOTE: Do not over pressurize the fuel gas piping system. Pressurization beyond the maximum specified may result in damage to valves, regulators, appliances, etc.

MOBILE HOME ELECTRICAL INSPECTION
TITLE 25, (C.A.C.) CHAPTER 2

"1362. Test.

"(c) The electrical wiring and power supply feeder assembly of the mobile home shall be tested for continuity and grounding. The electrical wiring system of the mobile home shall not be energized during the test. A mobile home equipped with power supply cord shall not be connected to the lot or site service equipment. A mobile home equipped with a feeder assembly shall have the flexible metal conduit of the feeder assembly connected to the lot or site service equipment; however, the supply conductors, including the neutral conductor shall not be connected.

"The continuity test shall be made with all mobile home interior branch circuit switches or circuit breakers and all switches controlling individual outlets, fixtures and appliances in the "on" position. The test shall be made by connecting one lead of the test instrument to the mobile home grounding conductor. In addition, all noncurrent-carrying metal parts of electrical equipment of the mobile home, including fixtures and appliances shall be tested to determine continuity between such equipment and the equipment grounding conductor.

"Upon completion of the continuity test, the power supply cord or feeder assembly shall be connected at the lot or site service equipment. A further continuity test shall then be made between the grounding electrode and the chassis of the mobile home.

"Upon satisfactory completion of the electrical tests, the lot or site service equipment shall be approved for energizing.

NOTE: Authority cited: Section 18300, Health and Safety Code Reference: Sections 18613, 18630, 18670, 18690, Health and Safety Code.

"1364. Approval Tags. Except for test purposes, the electrical system of the mobile home shall not be energized unless an approval tag, signed by a representative of the enforcement agency, is attached to the lot or site service equipment. The mobile home fuel gas piping system shall not be supplied with gas unless an approval tag is attached to the lot or site gas riser.

"If either system fails inspection, the inspector shall attach a tag indicating the system is not approved to be energized. When a system bears a tag indicating it is not approved, the system shall not be energized until re-inspected and approved.

..".

"Approval tags shall identify the mobile home for which they are issued.

NOTE: Authority cited: Section 18300, Health and Safety Code. Reference: Sections 18613, 18670, 18690, Health and Safety Code.

CITY OF SAN JACINTO
 201 E. Main Street, San Jacinto, California 92583
 (909) 487-7330

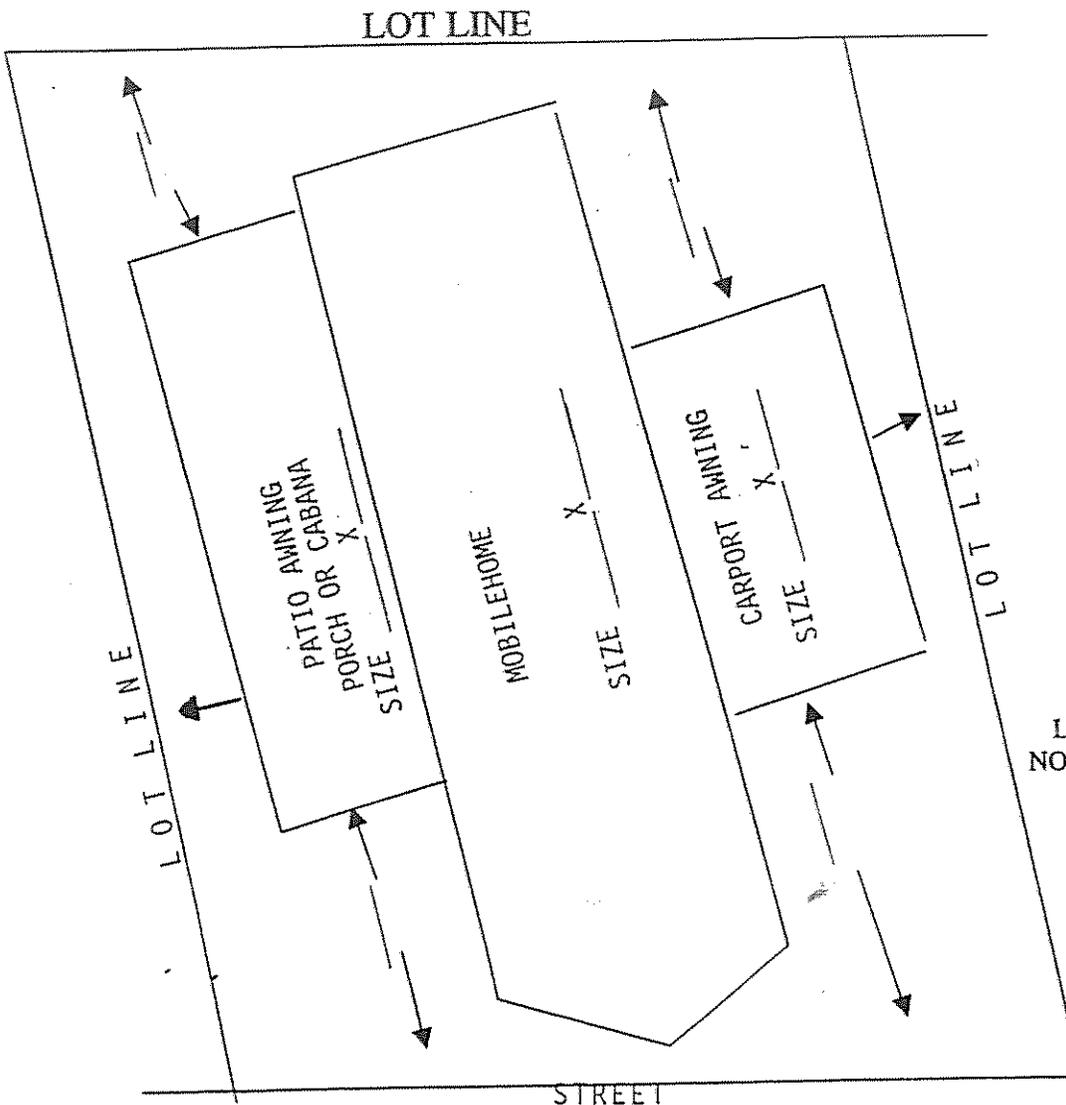
MOBILE HOME PARKS

PARK _____
 SITE # _____
 OWNER _____
 CONTRACTOR _____
 APPROVAL _____
 (PARK MANAGER)

**ACCESSORY BUILDING OR STRUCTURES REGULATION
 CALIFORNIA ADMINISTRATIVE CODE. TITLE 25. CHAPTER 2**

This Plot Plan to be Completed in Duplicate.
 (SHADE CONSTRUCTION AREA - SHOW ALL STRUCTURES ON LOT)

TWO SETS OF
 CONSTRUCTION PLANS
 ARE REQUIRED.



STATE SPA #

IN SITE ANGLE
 REVERSED

IN SITE STRAIGHT?

AWNING TO BE
 SCREENED?
 ENCLOSED?

WOOD PORCH?
 SIZE INDICATE
 ON PLAN

CABANA

LOT DIMENSIONS
 _____ X _____

LOT COVERAGE SHALL
 NOT EXCEED 75% OF THE
 AREA OF THE LOT

*AWNINGS MAY BE IN-
 STALLED ON A LOT LINE
 WHEN 3' CLEARANCE IS
 OBSERVED BETWEEN
 STRUCTURES ON AD-
 JOINING LOT.
 (Sec. 1467)

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MOBILE HOME PARKS

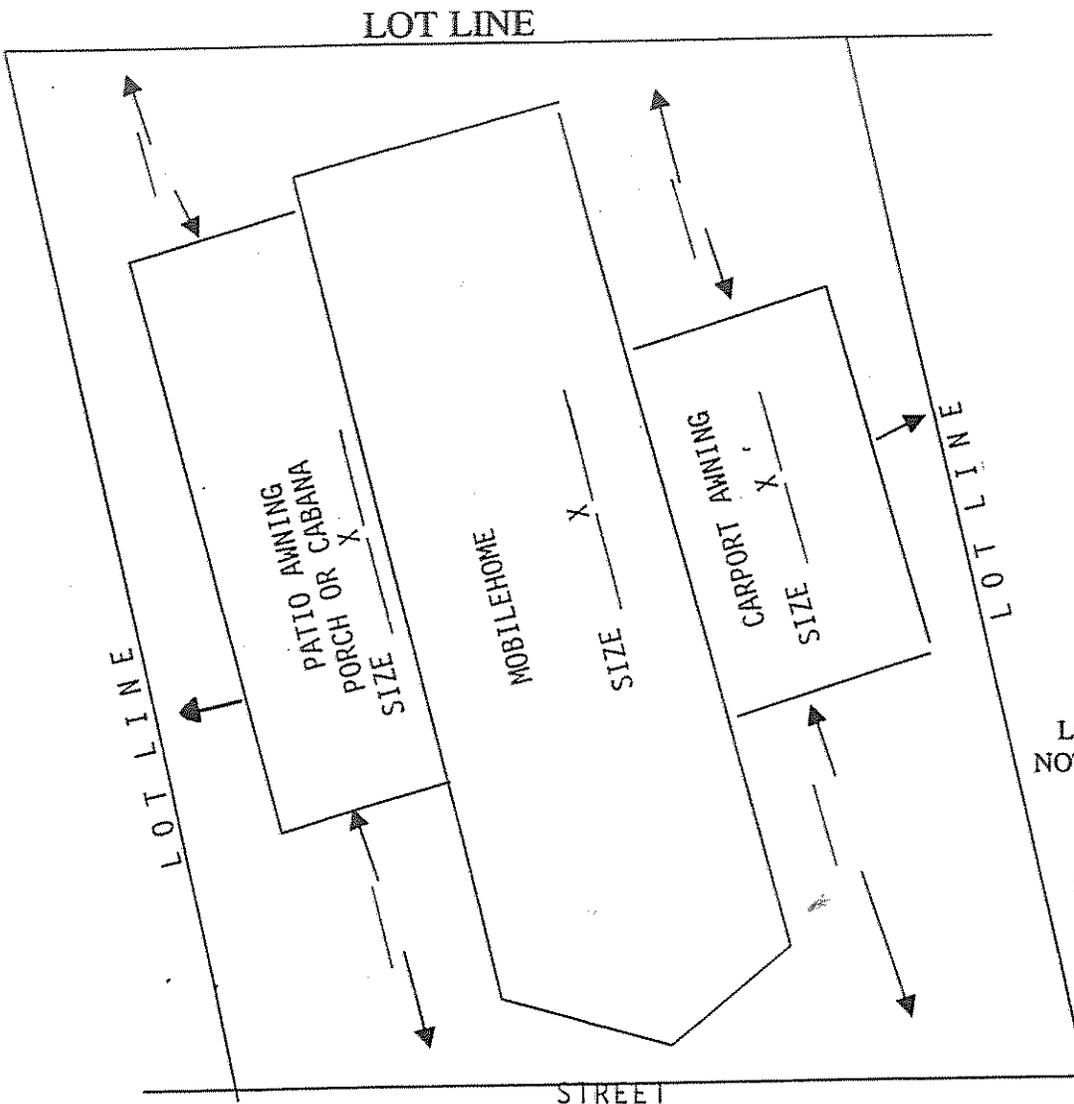
PARK _____
SITE # _____
OWNER _____
CONTRACTOR _____
APPROVAL _____
(PARK MANAGER)

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SIZE INDICATE
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NOT EXCEED 75% OF THE
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STALLED ON A LOT LINE
WHEN 3' CLEARANCE IS
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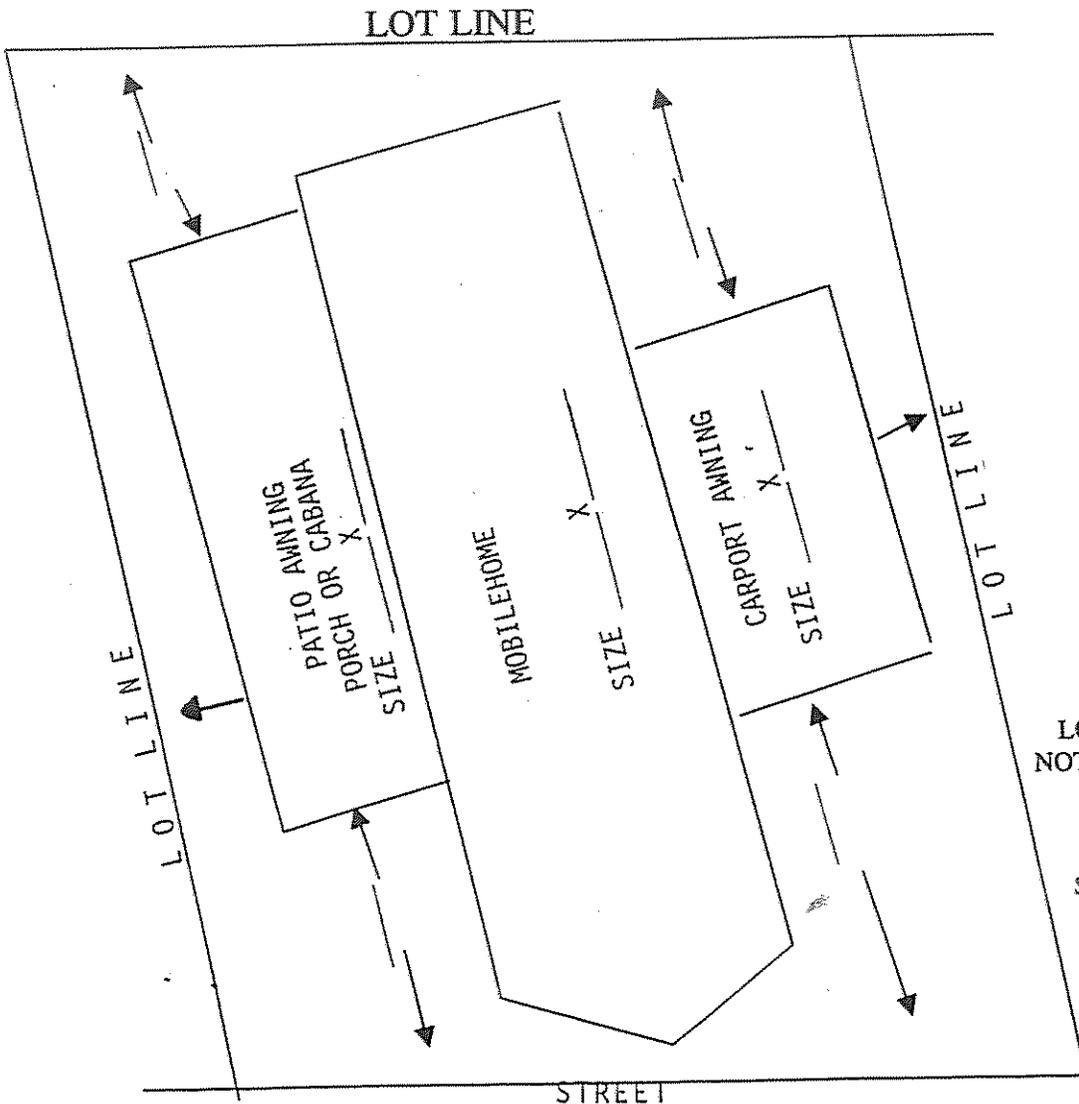
MOBILE HOME PARKS

PARK _____
 SITE # _____
 OWNER _____
 CONTRACTOR _____
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 (PARK MANAGER)

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- STATE SPA #
- IN SITE ANGLE REVERSED
- IN SITE STRAIGHT?
- AWNING TO BE SCREENED? ENCLOSED?
- WOOD PORCH? SIZE INDICATE ON PLAN
- CABANA

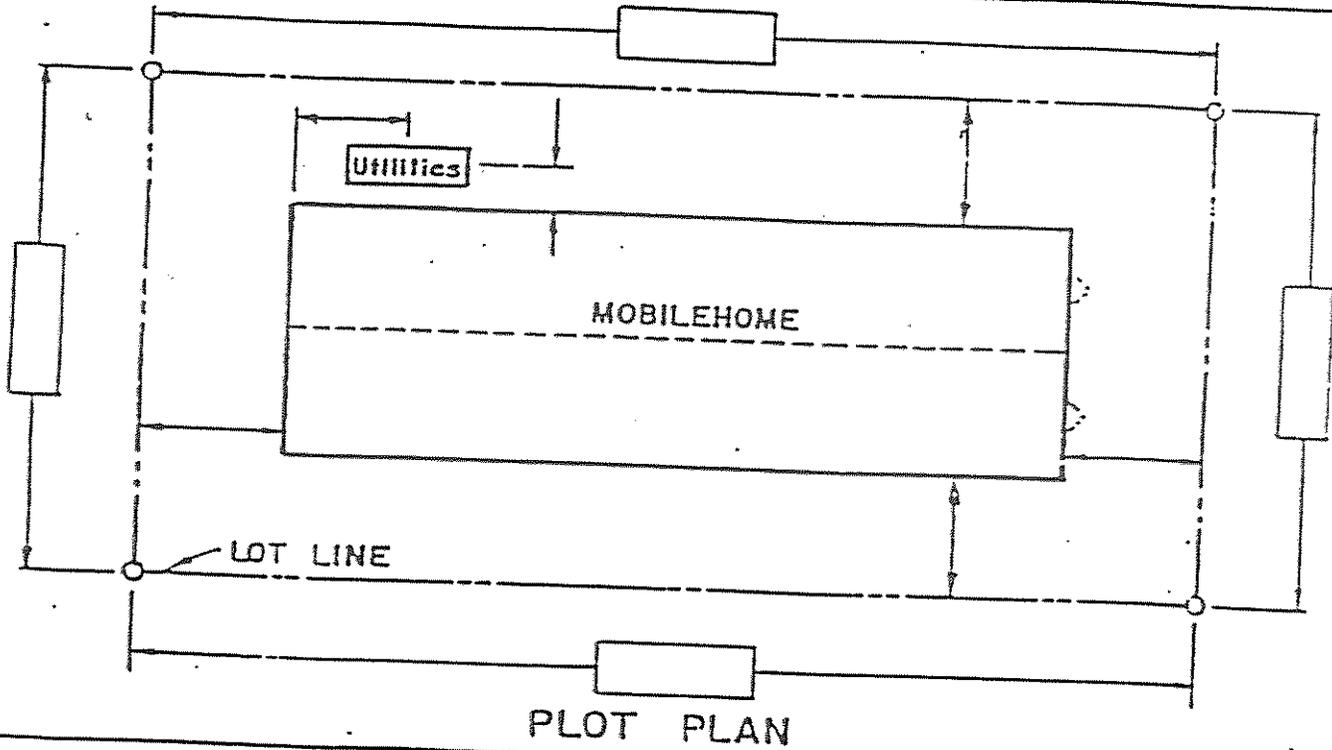
LOT DIMENSIONS
 _____ X _____

LOT COVERAGE SHALL NOT EXCEED 75% OF THE AREA OF THE LOT

*AWNINGS MAY BE INSTALLED ON A LOT LINE WHEN 3' CLEARANCE IS OBSERVED BETWEEN STRUCTURES ON ADJOINING LOT.
 (Sec. 1467)

MOBILEHOME INSTALLATION INFORMATION

PARK NAME _____ I.D. NO. _____ SPACE _____
 TENANT NAME _____ PARK ADDRESS _____
 CONTRACTOR NAME _____ LICENSE NO. _____ CONTRACTOR ADDRESS _____

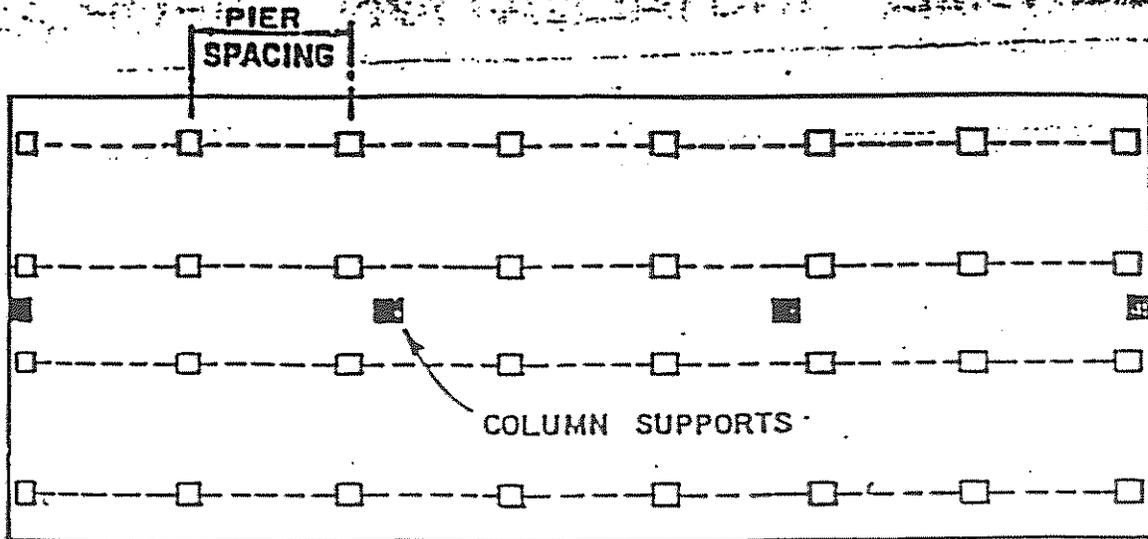


LOT UTILITY SERVICES

MOBILEHOME DATA

GAS: NATURAL _____ LPG _____
 RISER SIZE _____
 DRAIN INLET: SIZE _____
 WATER OUTLET: SIZE _____
 ELECTRICAL:
 EQUIPMENT RATING _____ (amps)
 CIRCUIT BREAKER RATING _____ (amps)
 PERMANENT WIRING CONNECTION POWER SUPPLY CORD CONNECTION
 RECEPTACLE RATING _____ (amps)
 PERMANENT OR TEMPORARY STEPS PROVIDED AT TIME OF INSTALLATION

SIZE: LENGTH _____ (ft) WIDTH _____
 MANUFACTURER: _____
 VEHICLE SERIAL NO: _____
 HCD INSIGNIA OR HUD LABEL NO: _____
 GAS SUPPLY INLET SIZE: _____
 GAS CONNECTOR: MATERIAL _____ CAPACITY _____
 DRAIN CONNECTOR: MATERIAL _____ MFG. _____
 WATER CONNECTOR: MATERIAL _____ SIZE _____
 ELECTRICAL FEEDER ASSEMBLY: RATING _____ ()
 CONDUIT SIZE _____
 WIRE SIZE & TYPE _____
 ELECTRICAL POWER SUPPLY CORD: RATING _____ ()
 MOBILEHOME ELECTRICAL NAMEPLATE RATING _____ ()



MOBILEHOME SUPPORT PLAN

MOBILEHOME DATA

MANUFACTURER'S INSTALLATION INSTRUCTIONS AVAILABLE? yes no

DATE OF MANUFACTURE _____

DESIGN ROOF LIVE LOAD _____ (psf)

DESIGN WIND LOAD _____ (psf)

MAXIMUM ALLOWABLE PIER SPACING _____ (ft)

REQUIRED PIER CAPACITY _____ (lbs)

REQUIRED COLUMN CAPACITY _____ (lbs)

REQUIRED TIEDOWN SPACING _____ (ft)

REQUIRED TIEDOWN CAPACITY _____ (lbs)

SITE DATA

ALLOWABLE SOIL BEARING PRESSURE _____ (psf)

ESTABLISHED WIND PRESSURE OF AREA _____ (psf)

TIEDOWNS REQUIRED? yes no

REQUIRED ROOF LIVE LOAD _____ (psf)

SNOW LOAD MAINT. PROGRAM yes no

PARK APPROVAL

INSTALLATION APPROVED _____

PARK OWNER/OPERATOR/MANAGER _____

LOAD BEARING SUPPORTS

MANUFACTURED SUPPORT
LISTED AND LABELED CAPACITY _____ (lbs)

FIELD ASSEMBLED SUPPORT
DESIGN CAPACITY _____ (lbs)

FOOTING MATERIALS

2x PRESSURE TREATED LUMBER
SIZE _____ CAPACITY _____ (lbs)

3½" THICK CONCRETE
SIZE _____ CAPACITY _____ (lbs)

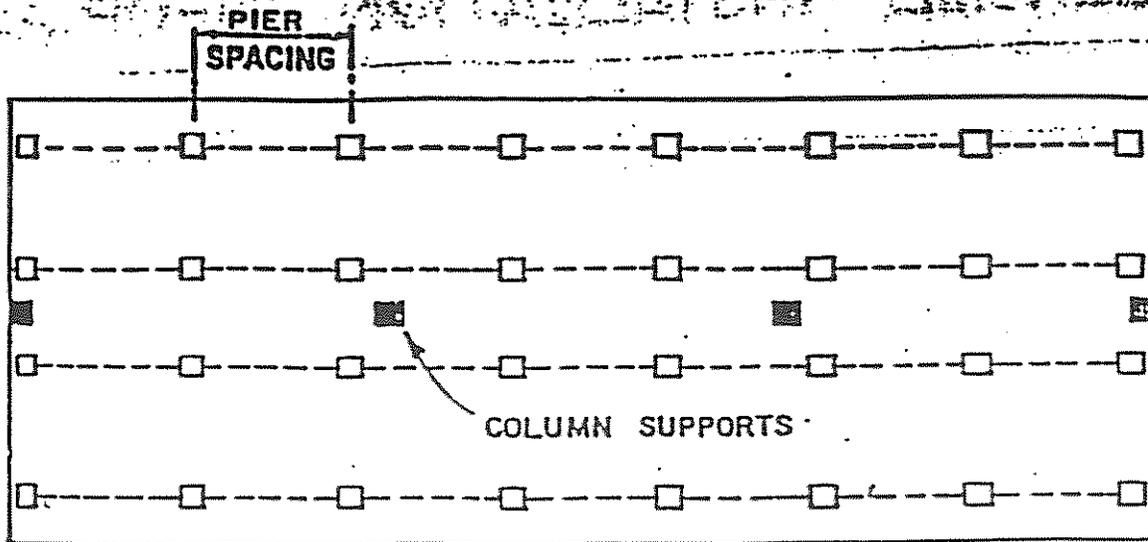
OTHER APPROVED MATERIAL
MATERIAL _____
SIZE _____ CAPACITY _____ (lbs)

TIEDOWNS

MANUFACTURER _____

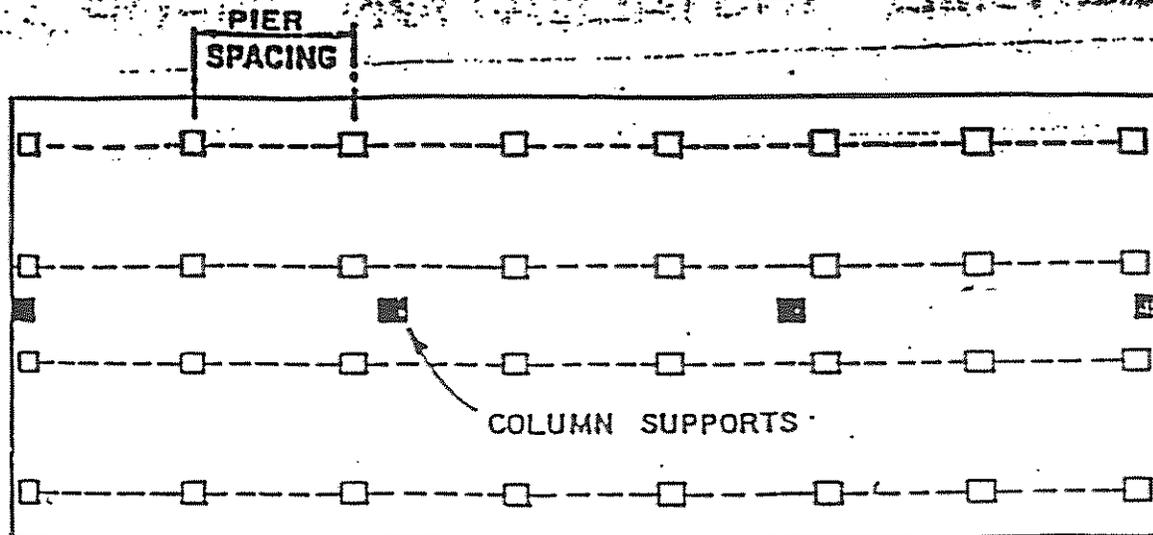
RATED CAPACITY _____ (lbs)

SPACING _____ (ft)



MOBILEHOME SUPPORT PLAN

MOBILEHOME DATA	LOAD BEARING SUPPORTS
MANUFACTURER'S INSTALLATION INSTRUCTIONS AVAILABLE? <input type="checkbox"/> yes <input type="checkbox"/> no DATE OF MANUFACTURE _____ DESIGN ROOF LIVE LOAD _____ (psf) DESIGN WIND LOAD _____ (psf) MAXIMUM ALLOWABLE PIER SPACING _____ (ft) REQUIRED PIER CAPACITY _____ (lbs) REQUIRED COLUMN CAPACITY _____ (lbs) REQUIRED TIEDOWN SPACING _____ (ft) REQUIRED TIEDOWN CAPACITY _____ (lbs)	<input type="checkbox"/> MANUFACTURED SUPPORT LISTED AND LABELED CAPACITY _____ (lbs) <input type="checkbox"/> FIELD ASSEMBLED SUPPORT DESIGN CAPACITY _____ (lbs)
SITE DATA	FOOTING MATERIALS
ALLOWABLE SOIL BEARING PRESSURE _____ (psf) ESTABLISHED WIND PRESSURE OF AREA _____ (psf) TIEDOWNS REQUIRED? <input type="checkbox"/> yes <input type="checkbox"/> no REQUIRED ROOF LIVE LOAD _____ (psf) SNOW LOAD MAINT. PROGRAM <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> 2x PRESSURE TREATED LUMBER SIZE _____ CAPACITY _____ (lbs) <input type="checkbox"/> 3½" THICK CONCRETE SIZE _____ CAPACITY _____ (lbs) <input type="checkbox"/> OTHER APPROVED MATERIAL MATERIAL _____ SIZE _____ CAPACITY _____ (lbs)
PARK APPROVAL	TIEDOWNS
INSTALLATION APPROVED _____ PARK OWNER/OPERATOR/MANAGER	MANUFACTURER _____ RATED CAPACITY _____ (lb) SPACING _____ (ft)



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MOBILEHOME DATA	LOAD BEARING SUPPORTS
MANUFACTURER'S INSTALLATION INSTRUCTIONS AVAILABLE? <input type="checkbox"/> yes <input type="checkbox"/> no DATE OF MANUFACTURE _____ DESIGN ROOF LIVE LOAD _____ (psf) DESIGN WIND LOAD _____ (psf) MAXIMUM ALLOWABLE PIER SPACING _____ (ft) REQUIRED PIER CAPACITY _____ (lbs) REQUIRED COLUMN CAPACITY _____ (lbs) REQUIRED TIEDOWN SPACING _____ (ft) REQUIRED TIEDOWN CAPACITY _____ (lbs)	<input type="checkbox"/> MANUFACTURED SUPPORT LISTED AND LABELED CAPACITY _____ (lbs) <input type="checkbox"/> FIELD ASSEMBLED SUPPORT DESIGN CAPACITY _____ (lbs)
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PARK APPROVAL	TIEDOWNS
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