



Mahon Services
 P.O. Box 281 Philo, OH 43771
 (740) 868-9386
 mathew@mahonservices.com

Manufactured Home Installation Permit Application

PLEASE PRINT OR TYPE

PERMIT #: _____

1. Manufactured Home Owner's Name: _____

Owner's Current Address: _____

City/St/Zip: _____ Phone#: _____

2. Inspection reference used:

Manufacturer's Installation Instructions

Ohio Manufactured Home Installation Standard

3. A. General Information:

New Install Relocate Size of MH: _____

Used MH New MH Located in MH Park? Yes No

B. Is this in an incorporated City/Village? Yes No _____

C. Flood zone Yes No

4. Dealer (or Individual): _____

Representative's Name: _____

Street Address: _____ City/St/Zip: _____

Telephone No.'s: _____ Email Address: _____



Mahon Services
P.O. Box 281 Philo, OH 43771
(740) 868-9386
mathew@mahonservices.com

5. Installer (s):

5a. Name: _____ License#: _____

Responsibility:	Footer	Site Grading	Block	Transport
	Setup	Electrical	Plumbing	Gas

Street Address: _____

City/St/Zip: _____ Phone#: _____

5b. Name: _____ License#: _____

Responsibility:	Footer	Site Grading	Block	Transport
	Setup	Electrical	Plumbing	Gas

Street Address: _____

City/St/Zip: _____ Phone#: _____

6. Manufacturer: _____ Date of Manufacture: _____

Street Address: _____ City/St/Zip: _____

Serial#: _____ HUD#: _____ Thermal Zone: _____

7. Street Address of project: _____

City/St/Zip: _____

Land Owner's Name (if different than MH Owner): _____ County: _____



Mahon Services
 P.O. Box 281 Philo, OH 43771
 (740) 868-9386
 mathew@mahonservices.com

Foundation / Tie Down Information

1. Soil Type:

1a. Visual Classification:

Class 1 (4,000 psf +)

Class 2 (2,000 psf)

Class 3 (1,500 psf)

Class 4 (1,000psf)

1b. Penetrometer Reading: _____

Class 1 (4,000 psf +)

Class 2 (2,000 psf)

Class 3 (1,500 psf)

Class 4 (1,000psf)

Note: Without visual classification or penetrometer reading a soil value of 1,500 psf may be used if this is authorized in the installation manual. If no manual is available classification must be determined.

2. Footing Type:

Slab

Ribbon

Pier

ABS

Other _____

3. Footing Size:

3a. Ribbon Length _____ Width _____ Thickness _____

3b. Slab Length _____ Width _____ Thickness _____

3c. Pier Diameter _____ Depth _____ Note: Depth must be at least 20"

3d. ABS Length _____ Width _____ Brand _____

3e. Other _____

4. Tie Downs:

4a. XI2 Minute Man Straps / # _____ Auger / Length _____

4b. Other _____



Mahon Services
 P.O. Box 281 Philo, OH 43771
 (740) 868-9386
 mathew@mahonservices.com

Electrical Service Information

1. Service Type:

Overhead	Underground	Pole Mount	House Mount
Pedestal	If park pedestal was it existing?	Yes	No

2. Service Amperage:

100amp 200amp Other _____

2. Electrical Service Company:

Name _____ Work Order # _____

Street Address: _____

City/St/Zip: _____ Phone#: _____

Soil Anchor Classification Test

1. Soil Type:

1a. Visual Classification:

Class 1 (551 lbs+)	Class 2 (551 lbs+)	Class 3 (351 to 550 lbs)
Class 4a (276 to 350lbs)	Class 4b (175 to 275lbs)	

1b. Torque Probe Reading: _____

Class 1 (551 lbs+)	Class 2 (551 lbs+)	Class 3 (351 to 550 lbs)
Class 4a (276 to 350lbs)	Class 4b (175 to 275lbs)	

Note: Without visual classification or penetrometer reading a soil value of 1,500 psf may be used if this is authorized in the installation manual. If no manual is available classification must be determined.



Mahon Services
P.O. Box 281 Philo, OH 43771
(740) 868-9386
mathew@mahonservices.com

CERTIFICATION: (Ohio Rules 4781) **ALL PERMITS SHALL EXPIRE SIX MONTHS FROM THE DATE OF ISSUE**

I fully understand that no excavation, installation, or structural, alteration, electrical, or mechanical installation or alteration of any manufactured home, or part thereof and no use of the above shall be undertaken or performed until the permit applied for herein has been approved and issued by the authority having jurisdiction.

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of this code(s) applicable to such permit.

Signature: _____

Printed Name: _____

Title: _____ Date: _____

PLEASE NOTE: There are 3 inspections required:

- Footer inspection:** This is either an open-hole inspection of forms and reinforcement, if required, or an inspection to determine if re-use of existing foundation is appropriate for the home being installed. Call for the footer inspection **BEFORE** placing or pouring concrete.
- Electric Service Inspection**
- Final Inspection**

MAHON SERVICES USE ONLY

Permit Application No. _____

Seal No. _____

Date Received _____

Date Approved _____

Date Completed _____
