

MANUFACTURED HOME STANDARD FOUNDATION
 JEROME COUNTY BUILDING DEPARTMENT
 300 North Lincoln, Jerome, ID 83338 RM 208
 Office Number: (208) 324-9262

* ALL ITEMS WITH AN ASTERISK ARE REQUIRED, ALL OTHER ITEMS ARE SPECIFIC TO THE PROJECT.
 PLEASE CHECK WITH STAFF TO DETERMINE ALL OTHER NECESSARY REQUIREMENTS
 www.jeromecountyid.us/158/Building-Department

Permit # Staff Initials:

NAME: _____

PARCEL and/or ADDRESS: _____

REQUIRED PAPERWORK:

- * _____ Building and Zoning Permit Application
- * _____ Summary Sheet (Assessor's Office)
- * _____ Plans: (2 Sets)
- * _____ Property Deed _____ Subdivision Plat
- * _____ Title

AGENCY LETTERS:

- * _____ Health Department or City Letter Permit# _____
- _____ Highway Department Letter Access Permit
- _____ Fire Department 150' + Fire Dept Approval Required
- _____ Canal Company _____ (Name i.e. NSCC)
- _____ Other _____

_____ ***Site Plan (2 Sets)**

- _____ Scale
- _____ North Arrow
- _____ Property Lines w/dimensions
- _____ Proposed & Existing Structures
- _____ Square Footage of Proposed Structure
- _____ Distances Between Structures
- _____ Setbacks of Buildings to Property Lines
- _____ Location of Well, Septic, Drain Field
- _____ Location of Existing/Proposed Access
- _____ Road Name at Point of Access
- _____ Location of Easements (i.e. power, water, road, access)
- _____ Parking
- _____ Canals Ditches, Irrigation
- _____ Site Drainage System
(including drainage away from the building and any swale or retention area for on-site storage of surface water)

Roadway Public _____ Private _____

Address #'s Posted: Yes _____ No _____

Setbacks

Front _____ Right _____ Rear _____ Left _____

Structure Square Footage (i.e. living space, garage, shop)

_____ sq. feet _____

Manufactured Home Dimensions _____x_____

VIN # _____

Year _____

ZONING REVIEW _____ DIVISIONS OF PROPERTY ___/___/___ TO INSPECTOR ___/___/___

FEES PAID:

PLAN REVIEW _____/_____/_____ \$ _____ \$ _____ Rcpt. # _____

BUILDING PERMIT _____/_____/_____ \$ _____ \$ _____ Rcpt.# _____

ADDRESS Numbers _____/_____/_____ \$ _____ \$ _____ Rcpt.# _____
(site only not for bldg)

Total \$ _____ Rcpt.# _____

JEROME COUNTY BUILDING AND ZONING PERMIT FOUNDATION

RECEIVED BY	DATE	ZONING DISTRICT	RP	PERMIT #
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LEGAL DESCRIPTION	SECTION	TOWNSHIP RANGE	PARCEL #	SUBDIVISION NAME	BLOCK	LOT	ACRES
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JOB ADDRESS	NEW <input type="checkbox"/>	EXISTING <input type="checkbox"/>	PRIVATE <input type="checkbox"/>	COMMERCIAL <input type="checkbox"/>
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PROPERTY OWNER	MAIL ADDRESS	ZIP	PHONE
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CONTRACTOR	MAILING ADDRESS	ZIP	PHONE	REGISTRATION # _____	EXPIRATION DATE
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CONTRACTOR EMAIL _____

NEW MANUFACTURES EMAIL ADDRESS _____

PRESENT, EXISTING USE:	PROPOSED USE:
NUMBER OF OFF STREET PARKING SPACES _____	
VIN # AND YEAR _____	

- A) It shall be the duty of the permit holder or their agent to notify the building official that such work is ready for inspection and to comply with the current building codes.
- B) No building or structure shall be occupied until the building official has issued a certificate of occupancy.
- C) Every permit shall become invalid if the work authorized by such permit is suspended or abandoned for a period of 180 days.
- D) It shall be the responsibility of the owner or authorized agent to provide surface drainage to an approved point of collection so as to not create a hazard for structures on adjacent properties, and to grade lots so as to drain surface water away from foundation walls minimum 6" in 10'.

- THIS PERMIT IS ISSUED SUBJECT TO THE REGULATIONS CONTAINED IN THE BUILDING CODE AND IT IS HEREBY AGREED THAT THE WORK TO BE DONE AS SHOWN IN THE PLANS AND SPECIFICATIONS WILL BE APPLICABLE THERETO. THE BUILDING OFFICIAL RESERVES THE RIGHT TO REVOKE ANY BUILDING PERMIT THAT IS ISSUED IN ERROR OR ON THE BASIS OF INCORRECT INFORMATION.
- EXPIRATION AS PER THE 2012 IRC R105.5 WORK MUST COMMENCE WITHIN 180 DAYS AND MAY NOT BE SUSPENDED OR ABANDONED FOR MORE THAN 180 DAYS WITHOUT WRITTEN REQUEST OF APPLICANT AND WRITTEN APPROVAL OF THE BUILDING OFFICIAL.
- IN MAKING THIS APPLICATION, THE APPLICANT REPRESENTS THAT ALL STATEMENTS ARE A TRUE DESCRIPTION OF THE PROPOSED USES AND / OR BUILDINGS AND THAT ALL PROVISIONS OF THE LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.
- SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL AND PLUMBING FROM THE IDAHO DEPT. OF LABOR AND INDUSTRIAL SERVICES. MECHANICAL PERMITS ARE AVAILABLE AT THE JEROME COUNTY BUILDING DEPT.

24 HOUR NOTICE REQUIRED FOR INSPECTIONS

(208)324-9115 SITING, FOOTINGS, FOUNDATIONS,
MECHANICAL, FRAMING, INSULATION,
SHEETROCK, FINAL

(800) 839-9239 ELECTRICAL (STATE OF IDAHO)
(800) 839-9239 PLUMBING (STATE OF IDAHO)

PLEASE NOTE THAT YOU NEED TWO PLUMBING PERMITS FROM THE STATE OF IDAHO

SIGNATURE

PLEASE PRINT YOUR NAME

OWNER CONTRACTOR/AGENT

DEPARTMENT USE ONLY

ZONING AT SITE: _____ COMPLIANCE: _____ FLOOD ZONE: _____ SET BACK COMPLIANCE: _____

OTHER PERMITS REQUIRED: _____

DATE: _____ BY: _____ APPROVAL DENIAL

OCCUPANCY	TOTAL SQUARE FEET	# OF DU'S
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FIRST FLOOR _____ GARAGE _____ HEALTH DISTRICT SEPTIC PERMIT # _____

CITYSEWER AND WATER PERMIT # _____

BUILDING DEPARTMENT APPROVAL

THIS BUILDING PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL AND FEES ARE PAID

INSPECTION CRITERIA

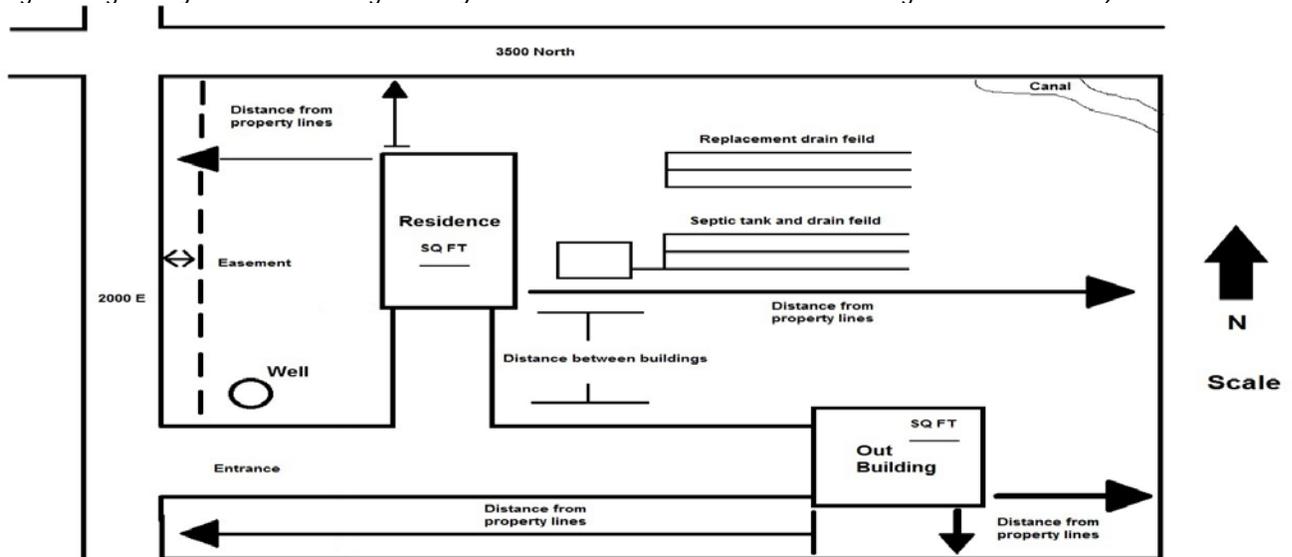
1. ALL REQUIRED INSTALLATION, ELECTRIC AND PLUMBING PERMITS HAVE BEEN OBTAINED.
2. ALL ELECTRICAL AND PLUMBING CONNECTIONS SHALL BE INSPECTED BY THE STATE.
1 (800) 839-9239
3. MINIMUM SETBACK REQUIREMENTS ARE COMPLIED WITH.
4. PIERS, PARTICULARLY WITH RESPECT TO SIZE AND SPACING.
5. TIE-DOWN ATTACHMENTS.
6. UNDER FLOOR ACCESS.
7. UNDER FLOOR VENTILATION PROVISIONS.
8. DRYER EXHAUST DUCTED THROUGH FOUNDATION.
9. DUCT CROSSOVERS, TO ENSURE THEY HAVE BEEN INSTALLED IN COMPLIANCE WITH THE MANUFACTURER'S INSTRUCTION.
10. LANDINGS, STAIRS, GUARDS & HANDRAILS (WHERE APPLICABLE)
11. SITE GRADING AND DRAINAGE
12. Vin # _____
13. 4" ADDRESS NUMBERS REQUIRED ON HOME _____



SITE PLAN

The site plan should be drawn to an acceptable scale, showing the exact dimensions and the shape of the lot to be built upon and must include:

- ___ Scale
- ___ North Arrow
- ___ Property Lines w/dimensions
- ___ Proposed & Existing Structures
- ___ Square Footage of Proposed Structure
- ___ Distances Between Structures
- ___ Setbacks of Buildings to Property Lines
- ___ Location of Well, Septic, Drain Field
- ___ Location of Existing/Proposed Access
- ___ Road Name at Point of Access
- ___ Location of Easements (i.e. power, water, road, access)
- ___ Canals Ditches, Irrigation
- ___ Parking
- ___ Site Drainage System
 (Including drainage away from the building and any swale or retention area for on-site storage of surface water)



MOBILE HOMES OLDER THAN 1976

In order to insure a continued supply of safe, affordable housing, the state of Idaho adopted a rehabilitation program for existing mobile homes constructed prior to June 15, 1976. It is legislative intent that the relocation and installation of these homes be approved when the rehabilitation on the home has been completed and proof of compliance has been issued by the administrator of the division of Building Safety of the State of Idaho. (208) 334-3896.

REHABILITATION REQUIREMENTS

1. Smoke Alarms installed in each sleeping room and outside each sleeping area in the immediate vicinity of the bedrooms.
2. The walls, ceilings and doors of each compartment containing a gas-fired furnace or water heater shall be lined with at least five-sixteenth (5/16) inch gypsum board, unless the door opens to the exterior of the home, in which case, the door may be all metal construction. All exterior compartments shall seal to the interior of the home.
3. Each room designated expressly for sleeping purposes shall have at least one egress door or window to the outside with a minimum clear dimension of twenty-two inches and a minimum clear opening of five square feet. The bottom of the exit shall not be more than thirty-six inches above the floor.
4. Electrical, Gas, Water, Sewer Inspections and any necessary repairs must be performed by a person or company properly licensed and authorized to perform the work under Idaho law, with the person or company performing the inspections and repairs to be noted on the rehabilitation form (See sample form in this packet)



STATE OF IDAHO DIVISION OF BUILDING SAFETY

1090 East Watertower Street, Suite 150

Meridian, Idaho 83642

Phone: 800-955-3044

Fax: 877-810-2840

dbs.idaho.gov

**MOBILE HOME COMPLIANCE REHABILITATION CERTIFICATE PLEASE SEE
ATTACHED REQUIREMENTS SHEET**

HOMEOWNER NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

LOCATION OF HOME AT TIME OF REHABILITATION: _____
If different than Mailing Address

SERIAL NUMBER: _____

PHONE: : _____ FAX: : _____

E-MAIL ADDRESS: _____

PLEASE SELECT THE METHOD YOU WISH TO RECEIVE THE COMPLETED CERTIFICATE RETURNED TO YOU: _____MAIL (using the mailing address above) _____ E-MAIL _____ FAX

1) SMOKE DETECTION: _____
DBS MFG INSTALLER NAME/LICENSE NUMBER _____ DATE _____ DBS Approval _____

2) EGRESS WINDOWS/EXTERIOR EXIT DOOR FROM ALL SLEEPING AREAS:
DBS MFG INSTALLER NAME/LICENSE NUMBER _____ DATE _____ DBS Approval _____

3) FIRE PROTECTION OF GAS WATER HEATER/GAS FURNACE COMPONENTS (IF APPLICABLE):
DBS MFG INSTALLER NAME/LICENSE NUMBER _____ DATE _____ DBS Approval _____

4) GAS SYSTEM TEST/REPAIRS:
DBS MFG INSTALLER NAME OR HVAC NAME/LICENSE NUMBER _____ DATE _____ DBS Approval _____

5) ELECTRICAL SYSTEM TESTING:
DBS LICENSED ELECTRICAL CONTRACTOR _____ DATE _____ DBS Approval _____

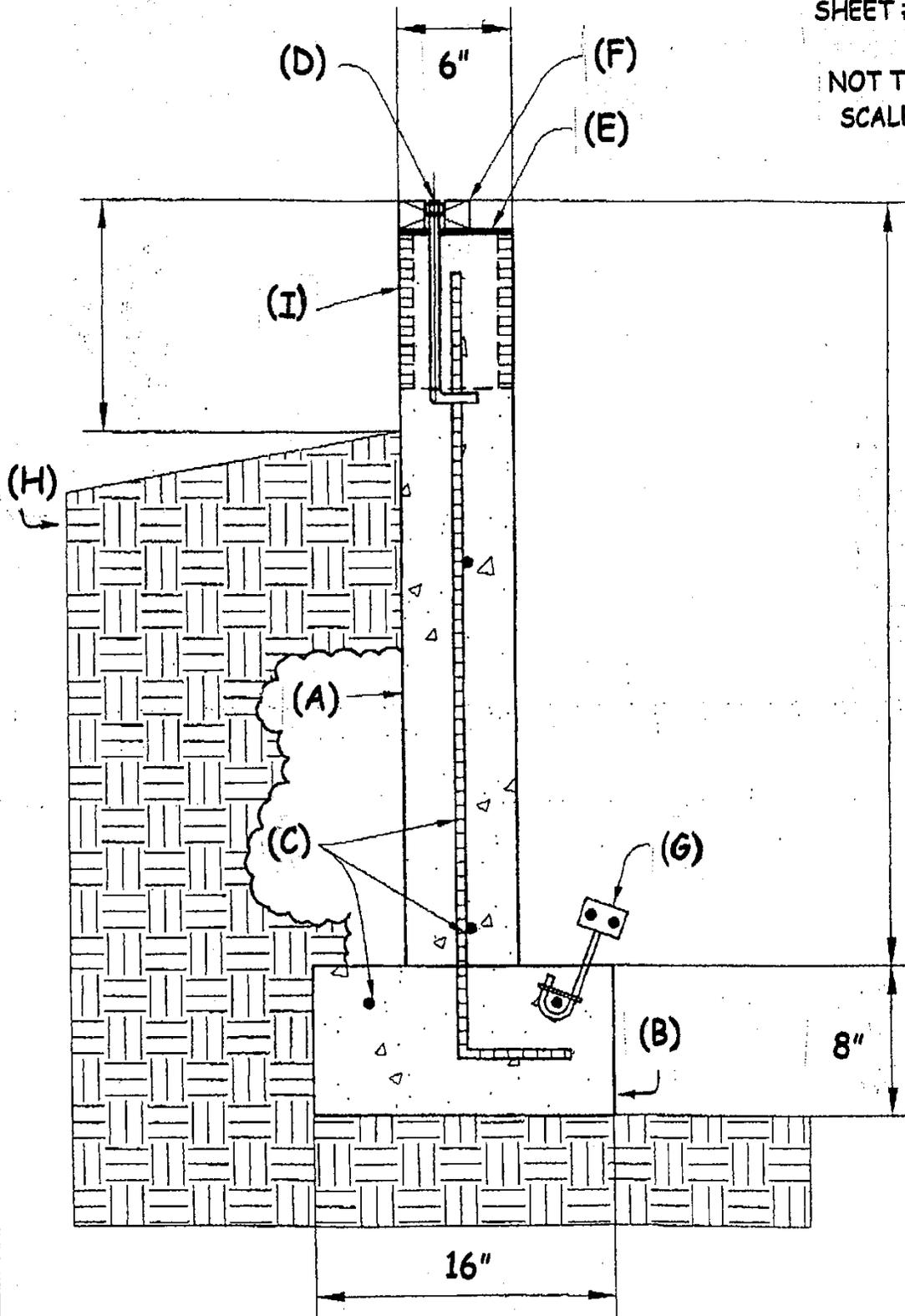
6) WATER/DWV SYSTEM TESTING:
DBS LICENSED PLUMBING CONTRACTOR _____ DATE _____ DBS Approval _____

ATTENTION CONTRACTORS:

The above signed contractor/company representatives verify that rehabilitative repairs and testing have been completed in accordance with Title 44-Chapter 25 Idaho Code. Only properly licensed contractors in the respective categories as stated above are eligible to reform testing and/or repairs.

SHEET # 1

NOT TO
SCALE



POURED CONCRETE
PERMANENT FOUNDATION
FOOTING AND STEMWALL DETAIL
(SEE SHEET 4 FOR DETAILS)

NOT TO
SCALE

SLEEVE FOR
UTILTYS

TONGUE END

8" DEEP FOOTING FOR BLOCKING

MARRIAGE LINE

8" DEEP x _____ FOOTING FOR MARRIAGE LINE

28' HOME REQUIRES 6'4" WIDE FOOTING

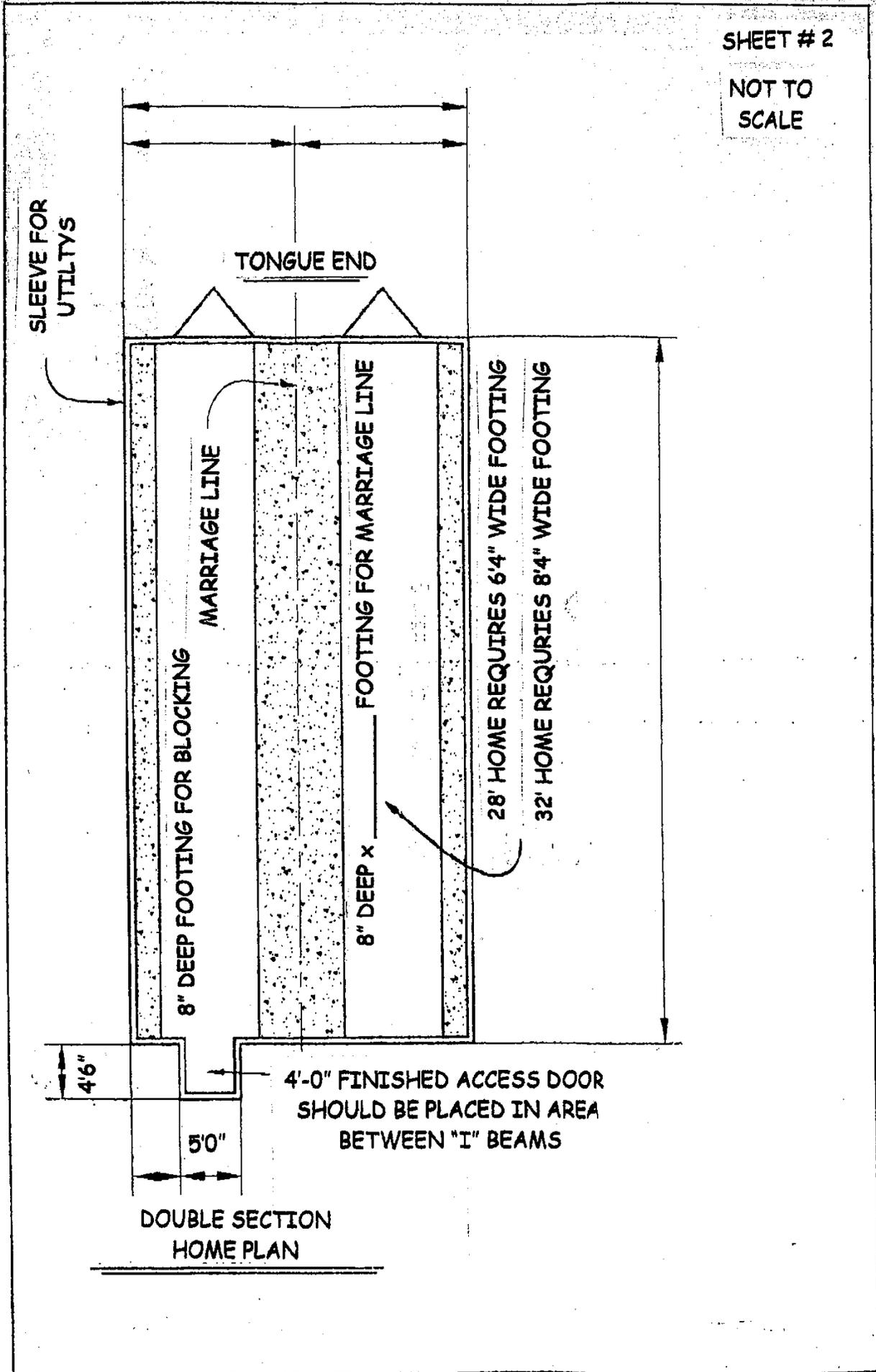
32' HOME REQUIRES 8'4" WIDE FOOTING

4'6"

5'0"

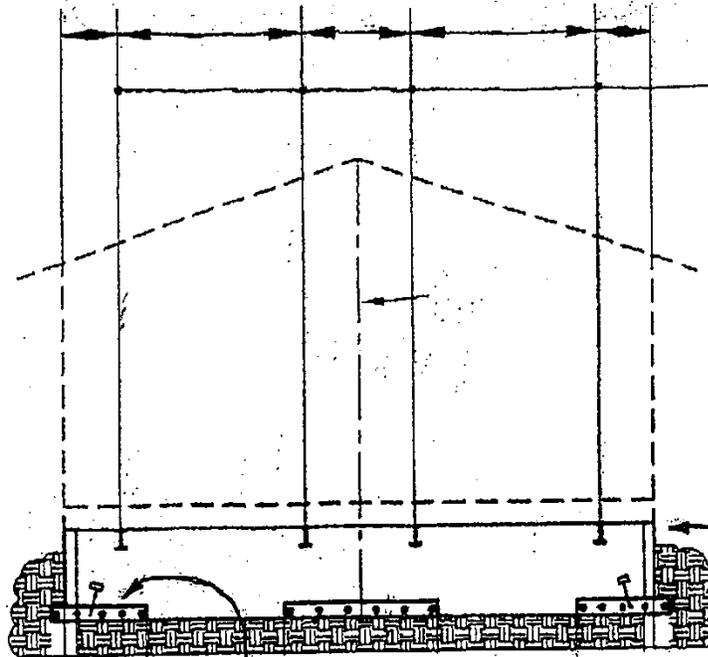
4'-0" FINISHED ACCESS DOOR
SHOULD BE PLACED IN AREA
BETWEEN "I" BEAMS

DOUBLE SECTION
HOME PLAN



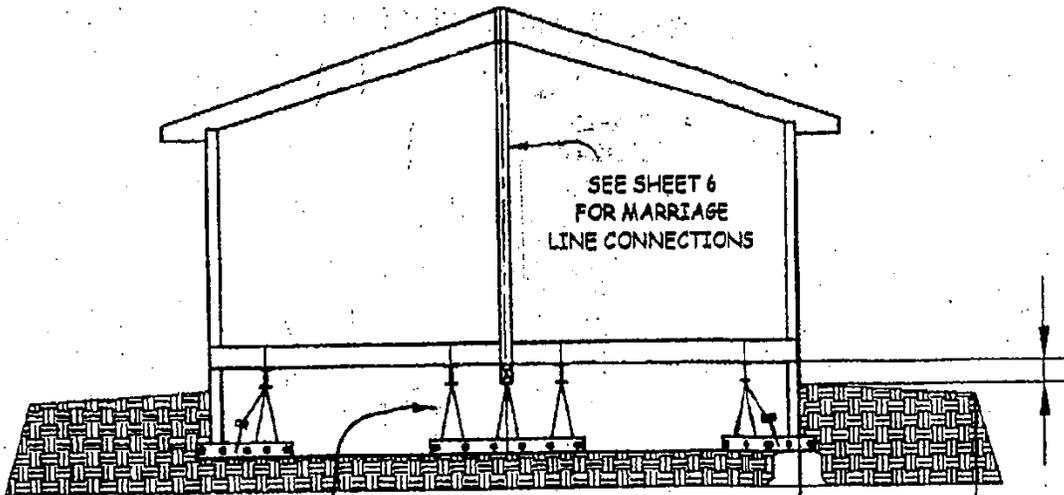
SHEET # 3

NOT TO
SCALE



CHECK MANUFACTURE HOME
REQUIREMENTS FOR THE
FOOTING DIMINTION.
(MININUM 18")

CONCRETE ENCASED
GROUND ROD #4 COPPER
20 feet in length



SEE SHEET 6
FOR MARRIAGE
LINE CONNECTIONS

SEE SHEET 5 FOR
TYPICAL PIER
CONSTRUCTION

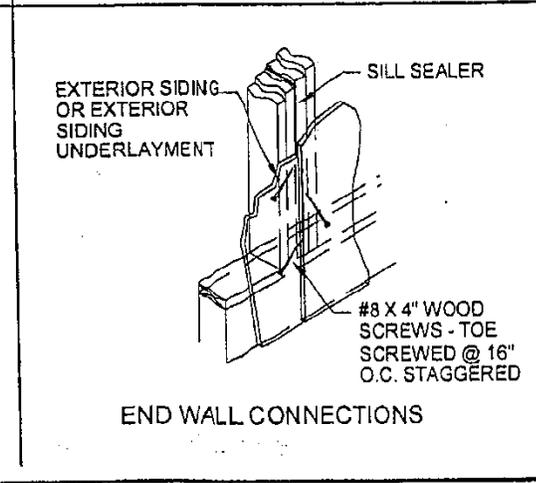
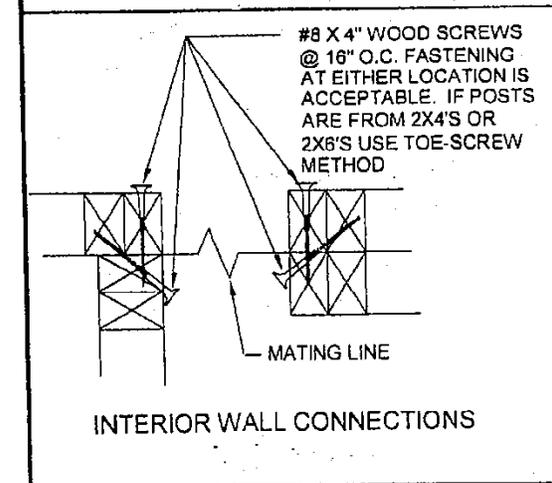
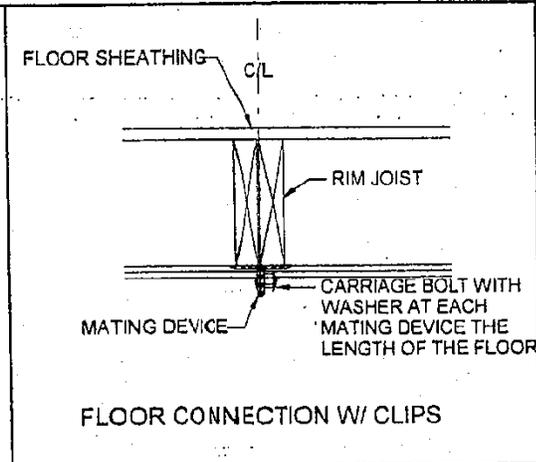
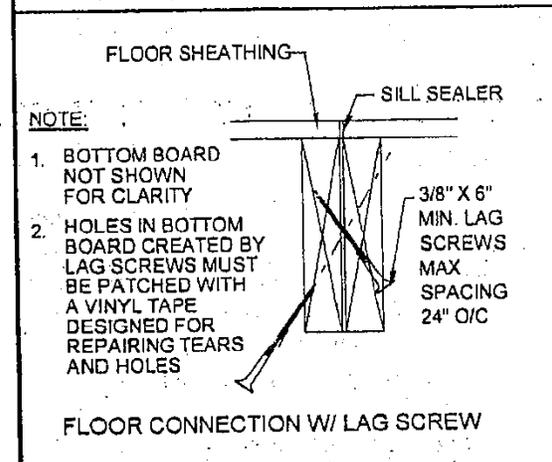
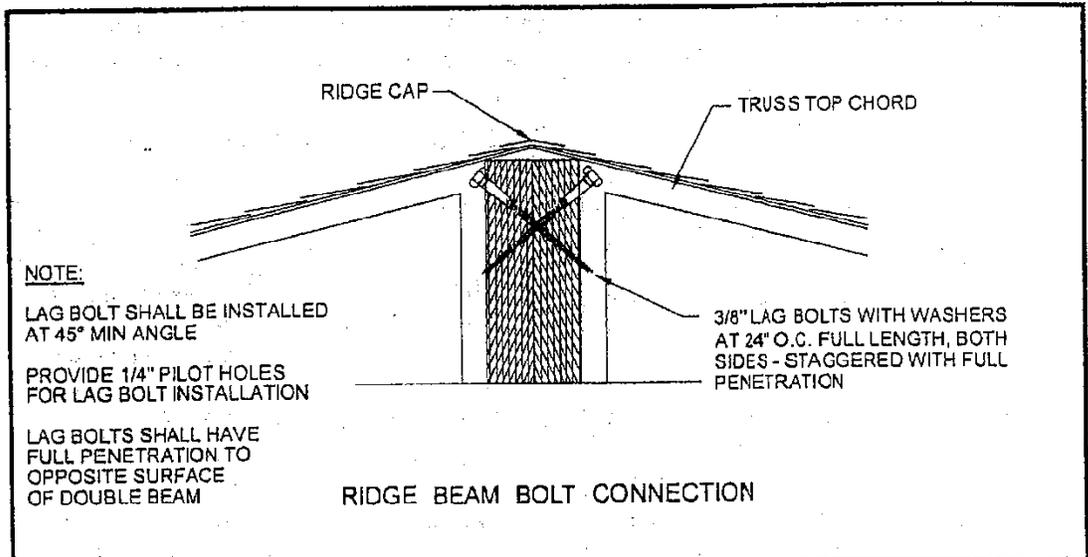
GRADE FROM
FOUNDATION WALLS
SHALL FALL 6" IN 10'

STEM WALL KEYNOTES

- (A) Frost Depth is 24 inches
- (B) Footings 16 inches by 8 inches . Walls 6 inches by 24 inches
- (C) PLACEMENT OF REINFORCING BAR :
 - 1) Place two #4 bars in 8" by 16" footings 3 " from the ground and a minimum of 3" from the edge of footings . (See footnote "G" for securing tie-down to inside rebar of footing.)
 - 2) Place two #4 bars in the stem wall continuous horizontal per 16" height and a #4 bar placed vertical at 32" on center
- (D) Place ½ diameter by 10 inches long anchor bolts in the stem wall at intervals of 48 inches on center and a minimum of 12 inches from each corner of each wall.
- (E) SILL SEAL IS REQUIRED.
- (F) MUD SILL SHALL BE CONSTRUCTED OF A MINIMUM OF 2x4 PRESSURE TREATED OR REDWOOD. The sill shall be bored at the anchor bolt, washer and nut to be completely recessed below the surface of the sill to allow the home to properly rest upon the mud sill. Trim any excess bolt above the surface of the mud sill
- (G) TIE-DOWNS REQUIRED. Tie-downs are required at no more than 24 inches from the ends of the home and every 11 feet on center maximum thereafter underneath the long walls of the home. Install tie-down to the inside rebar of the footing at a 45 degree angle as shown on the Footing Detail on Sheet 2.
- (H) BACKFILL AND GRADE away from the structure at all locations to the point of discharge and shall fall a minimum of 6 inches within the first 10 feet.
- (I) VENTS REQUIRED. 8"x 16" vents required a maximum of 36 inches from each corner and spaced at 20 foot intervals.

ADDITIONAL REQUIREMENTS

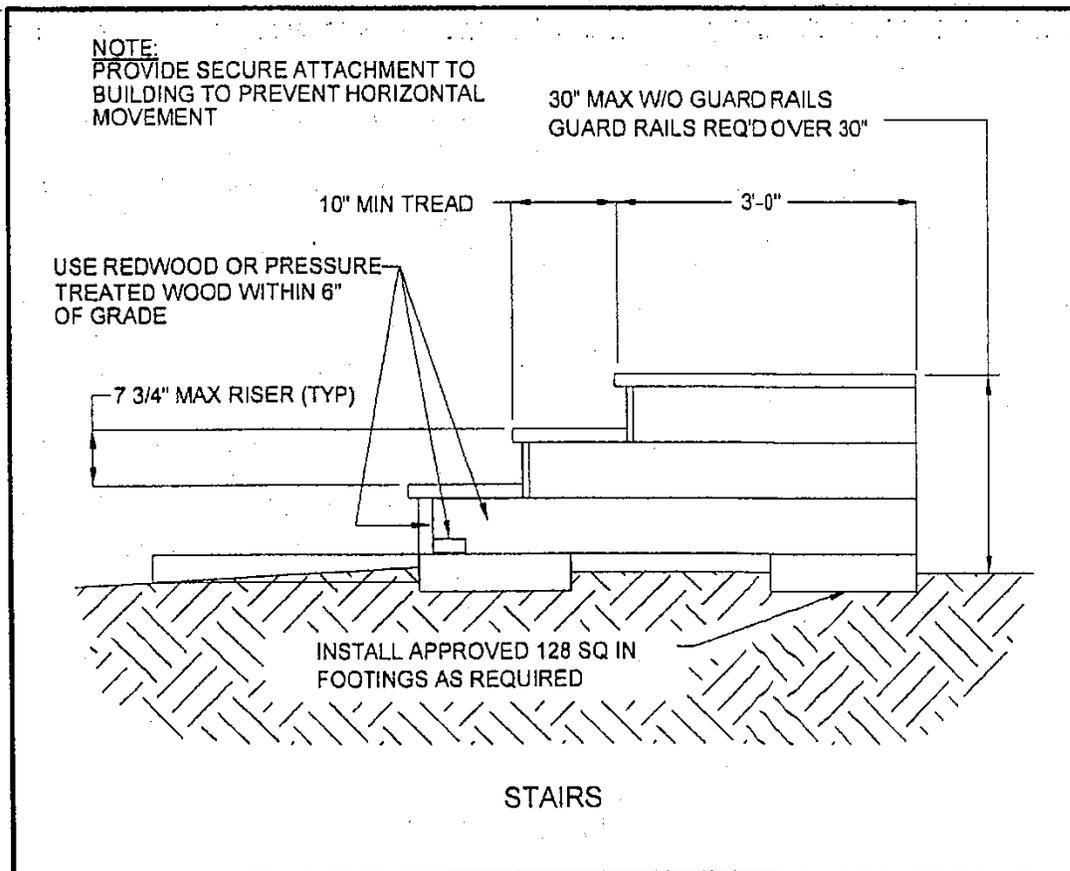
1. 6 mil. black vapor barrier required.
2. A landing of 36 inches wide at the direction of travel by the door width is required.
3. Propane line cannot go through a vent. A hole of 1 ¼ " in diameter must be formed in the stem wall for propane line.
4. Dryer must be vented out side of home. Any elbpws at dryer vent must be ridget.



a. Stairs shall be constructed with a minimum thirty-six inch (36") width, seven and three-quarters inch (7³/₄") maximum tread rise, minimum ten inch (10") tread run, and a minimum thirty-six inch by thirty-six inch (36" x 36") top landing located not more than seven and three-quarters inch (7³/₄") below the floor of the home. All stairways with four or more risers shall be equipped with a guardrail on at least one side with the top located between thirty-four inches (34") and thirty-eight inches (38") above landings and the nosing of treads. Any stairway with a landing greater than thirty inches (30") above grade must have guard rails.

b. Stairs shall be constructed and cross braced with Number 2 (#2) or better grade lumber. All lumber within six inches (6") of grade shall be redwood or pressure treated.

c. Stairs shall be supported on a minimum of four (4) one hundred twenty-eight (128) square inch footings as described in **Subsection 402.01** of this standard. The two (2) footings closest to the home may be eliminated if the step is securely attached to the home.



FIRE APPARATUS ACCESS ROADS

SECTION D101 GENERAL

D101.1 Scope. Fire apparatus access roads shall be in accordance with this appendix and all other applicable requirements of the *International Fire Code*.

SECTION D102 REQUIRED ACCESS

D102.1 Access and loading. Facilities, buildings or portions of buildings hereafter constructed shall be accessible to fire department apparatus by way of an approved fire apparatus access road with an asphalt, concrete or other approved driving surface capable of supporting the imposed load of fire apparatus weighing at least 75,000 pounds (34 050 kg).

SECTION D103 MINIMUM SPECIFICATIONS

D103.1 Access road width with a hydrant. Where a fire hydrant is located on a fire apparatus access road, the minimum road width shall be 26 feet (7925 mm). See Figure D103.1.

D103.2 Grade. Fire apparatus access roads shall not exceed 10 percent in grade.

Exception: Grades steeper than 10 percent as approved by the fire chief.

D103.3 Turning radius. The minimum turning radius shall be determined by the fire code official.

D103.4 Dead ends. Dead-end fire apparatus access roads in excess of 150 feet (45 720 mm) shall be provided with width and turnaround provisions in accordance with Table D103.4.

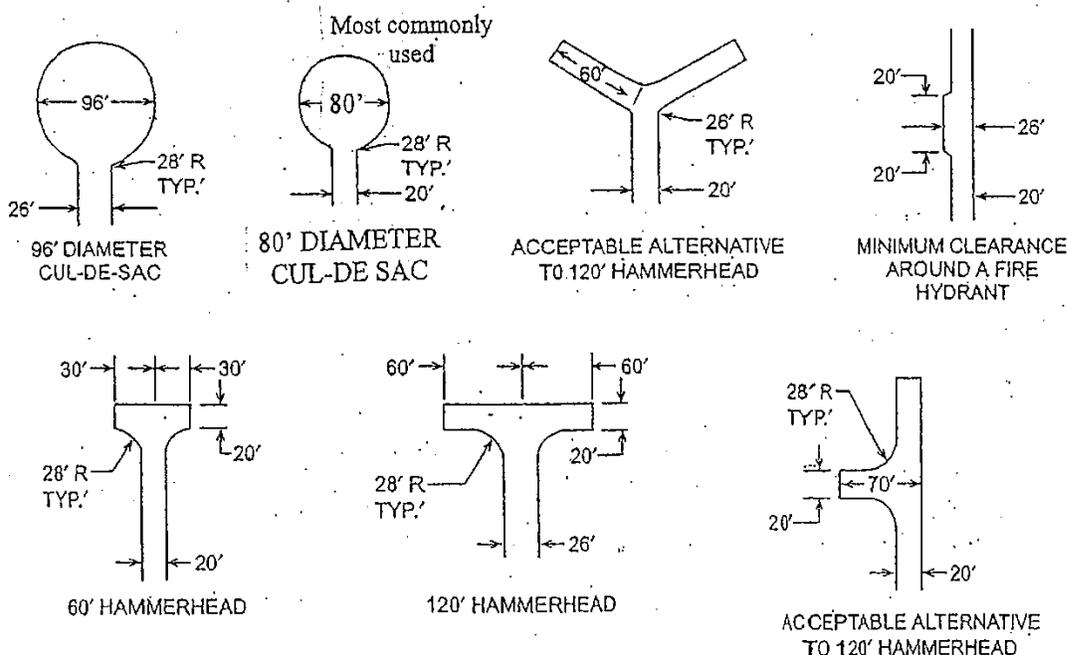
**TABLE D103.4
REQUIREMENTS FOR DEAD-END FIRE
APPARATUS ACCESS ROADS**

LENGTH (feet)	WIDTH (feet)	TURNAROUNDS REQUIRED
0-150	20	None required
151-500	20	120-foot Hammerhead, 60-foot "Y" or 96-foot-diameter cul-de-sac in accordance with Figure D103.1
501-750	26	120-foot Hammerhead, 60-foot "Y" or 96-foot-diameter cul-de-sac in accordance with Figure D103.1
Over 750		Special approval required

For SI: 1 foot = 304.8 mm.

D103.5 Fire apparatus access road gates. Gates securing the fire apparatus access roads shall comply with all of the following criteria:

1. The minimum gate width shall be 20 feet (6096 mm).



For SI: 1 foot = 304.8 mm.

**FIGURE D103.1
DEAD-END FIRE APPARATUS ACCESS ROAD TURNAROUND**

Agency Numbers

COMPANY	NAME	PHONE NUMBER	ADDRESS	CITY
A&B CANAL	DON TEMPLE	(208) 436-3152	P.O. BOX 675	RUPERT
AMERICAN FALLS #2 RESERVOIR	LYNN HARMON	(208) 886-2331	409 N APPLE ST	SHOSHONE
BIGWOOD CANAL CO.		(208) 886-2331	409 N APPLE ST	SHOSHONE
BLM		(208) 732-7200	400 W F	SHOSHONE
DIGLINE		(800) 342-1585	50 S COLE RD.	BOISE
EDEN, CITY		(208) 731-0329	P.O. BOX 376	EDEN
FIRST SEGREGATION/EDEN FIRE DEPT.	DONALD UTT	(208) 825-5776	235 E WILSON AVE	EDEN
FIRST SEGREGATION CITY FIRE	DONALD UTT	(208) 825-5725	235 E WILSON AVE	EDEN
HAZELTON CITY HALL		(208) 829-5415	P.O BOX 145	HAZELTON
IDAHO DEPT OF WATER RESOURCES		(208) 736-3033	650 ADDISON AVE W STE 500	TWIN FALLS
IDAHO POWER		(208) 736-3236	133 FAIRFIELD ST N	TWIN FALLS
ITD DIV OF HIGHWAYS		(208) 886-7800	216 SOUTH DATE	SHOSHONE
INTERMOUNTAIN GAS		(208) 737-6300	451 ALAN DR.	JEROME
JEROME, CITY		(208) 324-8189	152 EAST AVE A	JEROME
JEROME COUNTY AIRPORT		(208) 324-9980	472 HIGHWAY 25	JEROME
JEROME COUNTY BUILDING DEPT		(208) 324-9262	300 N LINCOLN RM 208	JEROME
JEROME COUNTY P&Z/ CODE ENFORCMENT		(208) 324-9116	300 N LINCOLN RM 208	JEROME
JEROME HIGHWAY DISTRICT	BUD RASMUSSAN	(208) 324-4601	30 N 100 W	JEROME
JEROME RURAL FIRE DEPT	JOE ROBINETTE	(208) 420-8382	143 EAST AVE A	JEROME
	LARRY ROBBINS	(208) 539-3078	143 EAST AVE A	JEROME
JEROME SEWER & WATER	ROY PRESCOTT	(208) 280-2163	110 N 800 E	JEROME
MILNER IRRIGATION		(208) 432-5560	5294 E 3610 N	MURTAUGH
NORTH SIDE CANAL CO.	ALAN HANSTEN	(208) 324-2319	921 N LINCOLN	JEROME
SIRCOMM	HOPE	(208) 324-1911	911 EAST AVE H	JEROME
SOUTH CENTRAL PUBLIC HEALTH		(208) 324-8838	951 EAST AVE H	JEROME
		Public Records Email	phd5.idaho.gov	
	TWIN FALLS OFFICE	(208) 737-5900	1020 WASHINGTON ST N	TWIN FALLS
WEST END FIRE DEPARTMENT	RANDY SUTTON	(208) 438-4511	P.O BOX 94	PAUL