SUPPLEMENTAL APPLICATION
MOBILE/MANUFACTURED HOME

Property Owner Name: ______________________ Assessor Tax Parcel #: ______________________

Section 1 – General Information
Check One:
☐ New ☐ Replacement Residence
Check One:
☐ Park ☐ On a Lot ☐ Special Care Unit ☐ Temporary Living Quarters

Year: __________________ Number of Bedrooms: ______________
Make: ______________ Dimensions: ______________
Model: ______________ Type of Heating: ______________

Section 2 – Road Approach Information
Approach Type:
☐ New ☐ Existing ☐ Improved ☐ Temporary

Number of residences to be served by approach: ______
Driveway/Approaches on (Road Name): ______________________________________________
Nearest Crossroad: ________________________________________________________________

Approach Material:
☐ Asphalt Concrete
☐ 6” Cement Concrete (Form Inspection Required prior to pour)
☐ 4” CSTC when county road is gravel

Information Regarding Accessing Via an Unmaintained Right-of-Way
If access to your building site crosses an unmaintained county road, a covenant is required per Kitsap County Code Chapter 11.36.060(3). The covenant must be reviewed by the Department of Community Development and recorded, prior to finalling your Building Permit. If your Road Approach requires a covenant you will be notified during the Building Permit review process.
Section 3 – Installer Information
Installer: ___________________________ Address, City, State, Zip: _____________________________
Phone: ___________________________ Installer Email: _____________________________
Contractors License #: _____________________________
Contractors Wains #: _____________________________

Section 4 – Application Details Departmental Use Only
Section: ___________________________ Setbacks: ___________________________
Township: ___________________________ Front: ___________________________
Range: ___________________________ Side: ___________________________
Plat: ___________________________ Rear: ___________________________
Lot: ___________________________
Acres: ___________________________