*ISLAND COUNTY*
*PLANNING & COMMUNITY DEVELOPMENT*

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# TEMPORARY USE APPLICATION
## Temporary Residence During Construction of Permanent Residence

| GREYED SECTION FOR COUNTY USE ONLY - Type I Decision Process | | | | |
|---|---|---|---|---|
| Application Number | Date Received | Fee Paid | Receipt | Associated BP Number |
| _____ | _____ | _____ | _____ | _____ |

**Applicability**. Use this form if you plan to live on your parcel temporarily in a mobile or manufactured home, an old house planned for demolition, or a recreational vehicle while you build or repair your permanent residence. **This application must be submitted with the building permit application for the new construction or repair of the permanent residence.** Please note that your parcel must be zoned Rural or Rural Residential.

**Procedure**. **Type or neatly print** all application information and provide the **owners signatures in blue ink.** Take your time to provide complete answers and all the information requested. Make sure to show the temporary residence on your Building Permit Plot Plan. Submit this application together with a complete Mobile/Manufactured Home application and the Building Permit application for the permanent residence, the plot plan, the application fees, and any necessary documentation outlined in this application. **Submit the complete application package in person to Island County Planning and Community Development.**

**Contact Person Name** _____
(The agent or consultant for the application who will be the only party that will receive correspondence, and inquiries.)

**Street** _____ **City, State, Zip** _____
**Phone (____)**_____ **E-Mail Address** _____

**Applicant/Owner Name** _____
**Street** _____ **City, State, Zip** _____
**Phone (____)**_____ **E-Mail Address** _____

**Project Address (Or Closest Intersection)** _____
**Assessor Parcel Number(s):** _____
Section _____ Township _____ Range _____ 1/4 Section _____
**Legal Description of Parcel** _____
_____

**Location: North Whidbey** ☐ **Central Whidbey** ☐ **South Whidbey** ☐ **Camano Island** ☐
**Zoning** _____ **Size of Parcel (sq.ft. or acres)** _____

**The Purpose of the Temporary Residence is:**

- ☐ Temporary residence during construction or remodeling of a permanent residence.
- ☐ Temporary residence during repair of residence that was rendered unfit for habitation due to fire or natural disaster.

**Type of Structure:**

| ☐ Mobile Home | ☐ Manufactured Home | ☐ Recreational Vehicle | ☐ House to be Removed |
|---|---|---|---|

Year _____ Dimensions _____ Model _____

☐ Existing on the Site **OR** ☐ To Be Installed on the Site

**Provide the Following Information for a Mobile/Manufactured Home:**

Current Address of Mobile/Manufactured Home _____
Parcel Number of Current Location _____

**Describe the proposed source of water supply to the Temporary Residence,** including the name of the provider if to be served by a public system _____

**Describe the proposed method of sewage disposal the Temporary Residence,** including the name of the district with jurisdiction, if to be served by sanitary sewer: _____

**On the Associated Building Permit Plot Plan**, show the location, dimensions, setbacks from property lines, and access for the temporary residence. (Plot Plan must be drawn to a scale of not less than 1 inch = 20 feet and not greater than 1 inch = 100 feet.)

## CERTIFICATE OF TEMPORARY USE
### Temporary Residence During Construction of Permanent Residence

I/We,_____, request that I/We be granted permission to reside in the temporary residence, as described in this application, on our property during construction of this residence. I/We agree to the following conditions of approval:

1. **This certificate expires six (6) months** from the date of issuance, listed below. In the event of circumstances beyond the control of the owner, one extension for up to six (6) months may be approved by this department. A written request for extension must be submitted at least 15 days prior to the expiration of this certificate.
2. Occupancy of the Temporary Residence shall not continue beyond the date of (1) final expiration of this certificate **or** (2) the issuance of the Final Inspection and occupancy of the new or rehabilitated permanent residence, **whichever is earlier**. By this date, the Mobile/Manufactured Home shall be removed from the parcel or the occupancy of the Recreational Vehicle shall be discontinued.
3. Prior to installing the Mobile/Manufactured Home on the approved site or re-location of the unit to another site, a permit must be obtained from Island County Engineering to move the unit over county roadways. Verification of payment of property taxes is required to receive the permit.
4. Prior to re-locating the Mobile/Manufactured Home to another site, approval must be obtained from Island County Planning and Community Development to install the unit on the new site.
5. The Mobile/Manufactured Home must be currently titled within the State of Washington. If the title has been eliminated, Mobile/Manufactured Home title must be reinstated prior to issuance of this certificate.
6. The Mobile/Manufactured Home shall **not be placed** on a permanent foundation. It shall meet all of the standards and requirements of the State of Washington, Island County, and any other applicable government regulations in effect at the time of installation, but it shall not be subject to ICC 17.03.180.N.1 of the county zoning ordinance. The Mobile/ Manufactured Home shall bear an insignia issued by a State or federal regulatory agency indicating that the Mobile/Manufactured Home complies with all applicable construction standards of the U.S. Department of Housing and Urban Development or that it passed a State systems inspection at the time it was constructed or has since passed a State alteration/fire safety inspection.

SIGNED: _____, Owner

_____, Owner

STATE OF _____)

) ss SEAL

COUNTY OF _____)

On the _____ day of _____, 20____, before me, a Notary Public in and for the State of _____, duly commissioned and sworn, personally appeared _____, to me proven to be the individual(s) who executed this document of their free and voluntary act and deed for the purposes therein mentioned.

_____

Notary Public in and for the State of _____,
Residing at _____
My Commission expires _____

With adherence to required conditions, the proposed Temporary Residence as described by the applicant is consistent with the standards in ICC 17.03.180.V. <u>It is the responsibility of the applicant</u>:

- To follow the approved plan and meet **all** conditions of approval.
- Remove the Mobile/Manufactured Home to a site approved by Island County or to discontinue the occupancy of the Recreational Vehicle by the final expiration of this certificate. This approval of a Temporary Residence is **valid for six months** from the date of this decision and shall **expire on** _____. One extension for no longer than six (6) months may be approved if the applicant shows continuing progress toward completion of the permanent residence.

**Approved By**: _____ **Date**: _____
**Island County Planning & Community Development**