



**San Bernardino County  
Land Use Services Department  
Building and Safety Division**

**San Bernardino: (909) 387-8311**

**Hesperia: (760) 995-8140**

<http://cms.sbcounty.gov/lus/BuildingSafety.aspx>

**TEMPORARY USE PERMIT  
TEMPORARY RESIDENTIAL QUARTERS**

TEMPORARY RESIDENTIAL QUARTERS: A manufactured home used as residential quarters on a temporary basis by an individual constructing the first residence on the property. Applicants must have a permit issued for the construction of a residence prior to the approval of the Temporary Use Permit.

**Fees:**

Application Fee for Temporary Use	\$ 220.00
Manufactured Home Plan Review Fee	\$ 382.00
Manufactured Home Setdown Permit Fee	\$ 644.00
<b>Total Initial Fee</b>	<b>\$1,246.00</b>
<b>Annual Renewal</b>	<b>\$ 110.00</b>

**GENERAL PROCEDURES**

1. This application consists of two parts. The first part is the submittal of the application to allow the temporary use and the second is the installation of the unit on the site (setdown). Placement of the unit on the site may NOT occur until after the Temporary Use Permit application has been approved, Plan Review approved and the Setdown Permit has been issued. No occupancy or use of the structure is allowed before final inspection. The structure permitted shall provide evidence of approval by the state division of housing as prescribed in the California Health Safety Code or the Federal Department of Housing and Urban Development.
2. FINAL INSPECTION: Final inspection of the manufactured home is to include electric, gas, sewer and water connections.
3. PERMIT EXPIRATION: The permit will automatically expire and will remain invalid if inspection is not called for within 180 days of the date of issuance.

The Temporary Use Permit shall become invalid upon completion, expiration or cancellation of the building permit for which the use was approved. In no case shall the Temporary Use Permit be valid for a period of time to exceed **FIVE (5) YEARS** from the date of its original issuance. The Temporary Use Permit may be canceled for non-compliance with the conditions set forth in approving the permit and/or as specified in the County Development Code.

4. PERMIT RENEWAL: The Temporary Use Permit is issued for a period not to exceed twelve (12) months. If the unit still qualifies for a temporary use, a Renewal Permit must be applied for prior to the expiration date. It is the owner/applicant's responsibility to notify Building and Safety of their intent to extend the permit or cease occupancy of the unit.
5. Prior to approval of the final construction project, recreational vehicles/travel trailers must be disconnected from utilities and temporary mobile office trailers must be removed from the property.

**FAILURE TO RENEW THE TEMPORARY USE PERMIT OR REMOVE THE UNIT AT THE END OF THE APPROVED TIME PERIOD WILL RESULT IN LEGAL ACTION TO REMOVE THE UNIT.**

## CHECKLIST OF SUBMITTAL MATERIALS

Please use this checklist as you assemble the materials for the submittal of your application. County staff will use the checklist to determine whether your application is acceptable for submission. **If your submittal package does not contain all of the information listed below, your application will not be taken in and receipted for processing.** If you have any questions about the items requested or if you wish to obtain information on processing schedules, please call the appropriate Building and Safety Office at the number listed at the top of the application.

### Section A – Fees

1. \_\_\_\_\_ Check or money order made payable to “San Bernardino County” in the correct amount as outlined in the table on page 1.

### Section B - County Documents

2. \_\_\_\_\_ Completed Application Form.

### Section C - Other Documents

3. \_\_\_\_\_ One copy of a plot plan. Please refer to the Plot Plan Checklist for additional information.
4. \_\_\_\_\_ One copy of “Will-Serve” letters from the water department and sewer district, if applicable. If the unit is self-contained and connection to the sewage disposal system is not possible due to project configuration or terrain, a copy of a pumping contract may be provided in lieu of connection to the system.
5. \_\_\_\_\_ Manufactured Home Construction Plans may be submitted concurrently. See Construction Plan Checklist.

**Section D – Plot Plan:** Use the following checklist to be sure that your plans include all of the required elements. The plot plan is a drawing, to scale, on one sheet of paper (minimum size of 8½” x 11”). Remember that the staff is not familiar with the property and will need this information to evaluate your project. **If the plans are not legible or do not contain the information listed below, your application will be returned.**

1. \_\_\_\_\_ Names, address and telephone number of the record owner, applicant and the person preparing the map (if different than owner).
2. \_\_\_\_\_ Legal description and Assessor's Parcel Number of the property involved.
3. \_\_\_\_\_ North point, date of drawing and engineer's scale (suggest 1:20).
4. \_\_\_\_\_ Location, width and names of streets and recorded easements on property. Locate all existing and proposed road improvements and driveway locations.
5. \_\_\_\_\_ Dimension of property lines or boundary of project.
6. \_\_\_\_\_ Location, size and use of all existing and proposed buildings, including dimensions, square footage, distance from property lines and building separations.
7. \_\_\_\_\_ Indicate the present land use of all surrounding property.
8. \_\_\_\_\_ Show parking spaces in detail (each space to be 9' X 19'). Refer to the County Development Code for detailed information regarding parking requirements for your use.
9. \_\_\_\_\_ Indicate any unusual drainage or hilly terrain that might affect the building site, parking area or access by flowline arrows and contour lines.
10. \_\_\_\_\_ Vicinity map.
11. \_\_\_\_\_ All structures and parking to conform to required setbacks.

**Section E – Construction Plan Checklist:** Submit the following for review:

1. \_\_\_\_\_ Two (2) complete sets of plans including the installation manual, state approved or engineered setdown pier placement plan, tiedown specifications and floor plan.
2. \_\_\_\_\_ Two (2) Site Plans (see plot plan checklist for requirements).



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TEMPORARY USE PERMIT APPLICATION FORM
TEMPORARY RESIDENTIAL QUARTERS

Complete all sections of this application. If you believe a question does not apply, mark it "N/A". Do not leave any blank spaces. If you have any questions about items requested on this form, please call Building and Safety at the appropriate office listed at the top of the cover page.

Section 1 - Applicant Data. (This is the person who the county will contact regarding this application).

Applicant Name
Mailing Address
City
Phone FAX No. E-Mail
Zip

Section 2 - Property Owner Data (If same as above check [ ])

Property Owner Name
Mailing Address
City
Phone FAX No. E-Mail
Zip

Section 3 - Property Data

1. Assessor's Parcel Number (APN): Tract Lot
Job Address
City Zip

Section 4 - Description of Manufactured Home

1. Year: Make: Model:
Serial Number: Size: sq. ft. Number of Occupants:
2. Utilities:
A. Sewage Disposal:
[ ] Public Sewer Name of Serving District:
[ ] Private Disposal Type
Note: Private Disposal must be approved by Environmental Health Services and Building and Safety.

B. Water Source:

Water Company: \_\_\_\_\_

Well       Water Tank

Note: Water provisions other than Public Water require Environmental Health Services approval.

**STATEMENT OF NEED/QUALIFICATION FOR TEMPORARY USE PERMIT AND STRUCTURE:**

I, \_\_\_\_\_, intend to use the temporary unit for the following purpose:

\_\_\_\_\_

I intend to use the structure and Temporary Use Permit until: (date) \_\_\_\_\_

The temporary structure/trailer will be removed by the following method:

\_\_\_\_\_

**UPON COMPLETION OF THE PROJECT AND/OR EXPIRATION OF THE PERMIT, I WILL REMOVE THE STRUCTURE AND CEASE OCCUPANCY OF THE UNIT. I UNDERSTAND THAT MY TEMPORARY USE PERMIT SHALL BECOME NULL AND VOID UPON COMPLETION, EXPIRATION OR CANCELLATION OF MY BUILDING PERMIT, FOR VIOLATIONS OR NON- COMPLIANCE WITH CONDITIONS SET FORTH IN APPROVING THE PERMIT, OR WHEN THE LAST RENEWAL PERIOD OR ANY EXTENSION THEREOF HAS ELAPSED.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\* BUILDING AND SAFETY USE ONLY \***

TEMPORARY USE PERMIT# \_\_\_\_\_

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

FINDINGS FOR APPROVAL OR DENIAL: \_\_\_\_\_

\_\_\_\_\_

RENEWAL DATES: \_\_\_\_\_

**DISTRIBUTION:**

Original to Remain With Application

Copy to Fiscal Section

Copy to Applicant