## PLANNING AND BUILDING DEPARTMENT

**BUILDING DIVISION** 

County of EL DORADO

https://www.eldoradocounty.ca.gov/Land-Use/Building-Services

2850 Fairlane Court Placerville, Ca 95667 (530) 621-5315

## **PART 16R**

## RENEWAL AGREEMENT RESIDENTIAL TEMPORARY MOBILE HOME HARDSHIP

## OR COMMERCIAL CARETAKER-TMA

| ASSESSOR'S PARCEL NUMBER                            |   |                                |   |                        |               |
|---|---|--------------------------------|---|------------------------|---------------|
| PROPERTY  | Y OWNER   |                                |   |                        |               |
| Mailing AddressP.O. Box or Street  Phone Cell Phone |   | City                           |   | State                  | Zip           |
|   |   |                                | E-mail _  |                        |               |
| APPLICAN'   | T / AGENT (if different than property own   | er)                            |   |                        |               |
| Mailing Add   | P.O. Box or Street  | City                           |   | State                  | Zip           |
|   |   | City                           | E-mail _  |                        | Σip           |
|   | AFFIDAVIT SUPPO   | RTING APPLIC                   | CATION  |                        |               |
| Fo  | rpose for the temporary mobile home and sign or use by a family member or owner of the pro- home care of family members (130.40.190) where must reside on property.  or use by caretaker to assist elderly or handical handicapped owner must live on site.) (130.40) | Name of famone pped homeowner. | dislocation of a far<br>nily member being cared<br>(Site must consi | for<br>st of one acre. | . The curren  |
|   | or use of Agricultural Employee Housing Pre-<br>or use of Commercial Caretaker Housing Pre-   |                                | 0 1   |                        |               |
| _   | aned property owner(s) declare(s) that he/she/<br>provided in Section 130.52.050 of the El Dorad  | •                              |   |                        | e can only be |
| Owner Signature                                     |   | Print Name                     |   |                        |               |
| Owner Signature                                     |   | Print Name                     |   |                        |               |
| OFFICE<br>USE ONLY:                                 | #TMA  | Fee                            |   |                        |               |
|   | Receipt #   | New Expiration                 |   |                        |               |
|   | Development Services Staff  | Date                           |   |                        |               |