



Snohomish County
Planning & Development Services
 3000 Rockefeller Avenue, M/S 604, Everett WA 98201
 (425) 388-3311

APPLICANT: Please file this completed form with Snohomish County Planning and Development Services at the time of application.

**LICENSED PHYSICIAN'S STATEMENT
 FOR TEMPORARY DWELLING PERMIT**

A Temporary Dwelling Permit allows for a mobile home to be placed on the same lot as an existing dwelling. This provision is allowed only for persons related by blood or marriage who are in need of continuous care and assistance necessitated by advanced age or infirmity. The temporary dwelling shall be occupied by not more than two persons and must be removed from the property when care is no longer required. The following statement must be completed, signed and submitted with the application in order for Snohomish County to consider approval of a Temporary Dwelling Permit. The permit must be renewed annually and an updated Physician's Statement will be required upon renewal pursuant to SCC 30.22.130(18)(i).

NAME AND ADDRESS OF PERSON(S) REQUIRING CARE:

I attest, under penalty of perjury under the law, that the following statement is true and correct.

It is my professional opinion, as a licensed physician, that at this time, the above named person(s) require(s) continuous care and assistance necessitated by advanced age or infirmity.

Physician's Signature & Date	
Physician's Name	
Physician's Address	
City, State, Zip	
Physicians Contact Number	