



117 Cook St. • Dayton, Texas 77535 • Telephone - (936) 258-2642 • FAX - (936) 258-2348

## MANUFACTURED HOME PARK PLACEMENT

Date: \_\_\_\_\_

**Permit Fee \$100.00**

Address of Project: \_\_\_\_\_ Park Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Retailer Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Installer Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State License Number: \_\_\_\_\_

### MANUFACTURED HOME IDENTIFICATION INFORMATION

New: ( ) Used: ( )

Model/Name: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Home Size - Width/Length; \_\_\_\_\_ x \_\_\_\_\_

Serial Number (s): \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_

Date of Manufacture: \_\_\_\_\_

Number of Bathrooms: \_\_\_\_\_

ATTACH COPY OF MANUFACTURED CERTIFICATE OF ORIGIN OR TITLE

**Address numbers must be posted during construction and permanently at time of final inspection.**

**This certifies that on this date I made an application for a permit with the City of Dayton, I agree to follow all building codes and city ordinances and meet all deed restrictions.**

**By signing below I am also acknowledging the requirement that must be met along with all other approvals before occupying the manufactured home.**

**APPLICANT'S PRINTED NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPLICANT'S SIGNATURE:** \_\_\_\_\_