CONSTRUCTION MANAGEMENT SERVICES
1700 North Broadway • Suite 128
Rochester, MN 55906
507-282-8206 • FAX 281-0391

INSTALLATION OF MANUFACTURED HOME

INFORMATION NEEDED ON APPLICATION TO PROCESS PERMIT:

1. SIZE _____

2. YEAR _____

3. MANUFACTURER OF HOME _____

4. TYPE OF FOUNDATION

   _____ PIERS

   _____ BLOCKS

5. ATTACH INSTALLATION REQUIREMENTS FROM INSTALLER
   (i.e. pier or block schedule AND anchor schedule and/or foundation plan)

6. NAME OF INSTALLER (*) _____

7. INSTALLER LICENSE NUMBER _____

8. PLUMBER NAME/LICENSE NUMBER _____

9. UNIT INSTALLED: ( )NEW ( )USED

(*) If self, Owner must complete "self installer" form