## MOBILE HOME PERMIT APPLICATION

Applications will NOT be accepted by Mail/Fax/Email

Jobsite Address:		Lot #	Mobile Home	e Park:	
Owner of Mobile Home:			Owner's phone #		
Street:		City:		Zip Code:	
Mobile Home: used:	or new: Mod	del Year:	Value o	of MH: \$	
Certificate of Origin Document or Certification Sidwell #					
Applica	tion Fee: \$	Date R	eceived:		
CONTRACTOR / APPLICANT TO COMPLETE THIS SECTION Contractor MUST include a copy of Builder's License, Driver's License, and Insurance Certificate Applicant/Contractor/Company Name:					
Street Name:					
Zip Code: I					
-					
Contractor's License #: Date License Expires:					
Federal Employer I.D. Number or SSN (contractor only):					
Workman's Comp. Insurance Carrier (contractor only):					
MESC Employer Number (contractor only):					
AFFIDAVIT OF APPLICANT I hereby certify that the proposed work is authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.					
Section 23a of the State Construction Complied Laws, prohibits a person of perform work on a residential building	from conspiring to circu	mvent the licens	ing requirement of this	state relation to persons who are	e to
Signature of Applicant Date:					
Print Name of Applicant:					
OFFICE USE ONLY BELOW THIS	LINE				
MH Permit Fee \$ App	lication Eco ¢		aistration		
Mech. Permit Fee \$ + F					_+
MH Permit #					
Mech Permit #					