

HEALTH & SAFETY INSPECTION FOR MANUFACTURED HOMES

Fee: \$ _____ Payment type: *Cash* *Check* Date: _____
Check #: _____ Receipt #: _____

Applicant: _____ Phone #: _____

Email: _____

Address of home: _____ County: _____

City: _____ State: _____ Zip: _____

Mobile Home Information

Manufacturer: _____ Model: _____

Size: _____ Year: _____ Serial #: _____

Circle one:
 Single **Double** **Triple**

Locked ? *Yes* *No*
Occupied ? *Yes* *No*

HUD #: _____
HUD #: _____
HUD #: _____

Signature: _____ Date: _____

Notes: _____

ELECTRICAL

ALL LIGHT FIXTURES ARE IN GOOD CONDITION	YES	NO
OUTLETS & SWITCHES INSTALLED W/COVERS	YES	NO
IS WIRING IN GOOD CONDITION	YES	NO
PANEL BOX MEET NEC REQUIREMENTS	YES	NO
WIRING UNDER HOME IN GOOD CONDITION	YES	NO
SMOKE DETECTORS INSTALLED & WORKING	YES	NO
ALL NEC REQUIREMENTS ADHERED TO	YES	NO

PLUMBING

ALL FIXTURES INSTALLED & OPERABLE	YES	NO
WATER & DRAINLINES ARE FREE OF LEAKS	YES	NO
WATER HEATER IN GOOD CONDITION	YES	NO
WATER HEATER INSTALLED CORRECTLY	YES	NO
ALL PLUMBING COMPLIANT WITH CODE	YES	NO

HVAC		
VENTING INSTALLED PROPERLY & WORKING	YES	NO
REGISTERS INSTALLED PROPERLY	YES	NO
HEATING SYSTEM MEETS MECHANICAL CODE	YES	NO
MANUFACTURED HOME UNIT		
GLASS IN DOORS & WINDOWS FREE OF DAMAGE OR BREAKAGE	YES	NO
DO ALL DOORS OPEN & CLOSE PROPERLY- INTERIOR/EXTERIOR	YES	NO
ARE ANY DOORS MISSING THAT NEED TO BE RE-INSTALLED	YES	NO
ARE ALL WINDOW/DOOR SCREENS IN GOOD CONDITION	YES	NO
ARE ANY DOOR/WINDOW SCREENS MISSING	YES	NO
IS THE ROOF IN GOOD CONDITION WITH NO LEAKS	YES	NO
ARE ALL OF THE FLOORS IN GOOD CONDITION	YES	NO
ARE ALL FLOORCOVERINGS FREE OF DAMAGE & IN GOOD CONDITION	YES	NO
ARE ALL CEILINGS FREE OF DAMAGE & IN GOOD CONDITION	YES	NO
ARE ALL KITCHEN APPLIANCES IN GOOD WORKING ORDER & IN PLACE	YES	NO
IS THE EXTERIOR SIDING IN GOOD CONDITION	YES	NO
DOES ANY SIDING NEED TO BE REPLACED OR REPAIRED	YES	NO
IS THE UNDERBELLY PROPERLY INSULATED	YES	NO
IS THE COVER UNDER THE HOME IN PLACE & IN GOOD CONDITION	YES	NO
DOES THE COVER NEED REPAIRED OR REPLACED TO MEET INSULATION ENVELOPE REQUIREMENTS	YES	NO
IS THERE ANY DAMAGE FROM REMOVING DECKS OR PORCHES	YES	NO
DOES THE HOME MEET ALL BUILDING CODES APPLICABLE	YES	NO
<i><u>Final Approval:</u></i>	YES	NO
<i>Inspector:</i> _____	Date: _____	

PLEASE NOTE ALL ITEMS THAT NEED TO BE CORRECTED:

I agree that all repairs will be made BEFORE power is connected!

Signature:

Date:

Sketch if necessary:

This space below is for Office Use Only

Remarks:

New address has been issued?

New address issued by:

Date submitted to E-911:

Approved

Denied

Reason for denial:

Signature:

Date: