



# City of Blooming Grove

200 S. Fordyce, P.O. Box 237

Blooming Grove, TX 76626

903-695-2711

## HUD CODE MANUFACTURED HOME PERMIT APPLICATION

DATE OF APPLICATION: \_\_\_\_\_

Full Name of Applicant/Applicants: \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Legal description of Proposed Location: \_\_\_\_\_

Owner of Property if Renting: \_\_\_\_\_

Year, Size & Model of HUD Code Manufactured Home: \_\_\_\_\_

\_\_\_\_\_

Attachments: Pictures: \_\_\_\_\_ Site Plan: \_\_\_\_\_

### Please Initial Each Statement Below Before Signing

I acknowledge receipt of the City Code Requirements regarding HUD Code Manufactured Homes: \_\_\_\_\_

I agree to comply with all City HUD Code Manufactured Home Code Requirements: \_\_\_\_\_

I certify that the size of the HUD Code Manufactured Home is: \_\_\_\_\_

I agree that I will not occupy said HUD Code Manufactured Home until the city has issued a Certificate of Occupancy: \_\_\_\_\_

I agree to comply with all City Zoning Ordinance requirements including a Site Plan with the Permit Application: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Conditional Council Approval: \_\_\_\_\_

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

Fire Marshall Approval: \_\_\_\_\_

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

Building Inspector Approval: \_\_\_\_\_

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

Utility Department Approval: \_\_\_\_\_

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

Approval to Issue Certificate of Occupancy by Council Date: \_\_\_\_\_

Permit Cost: \$ \_\_\_\_\_

Permit Paid on: \_\_\_\_\_

Inspections needed: \_\_\_\_\_

Inspection Cost: \_\_\_\_\_

Inspections Paid on: \_\_\_\_\_

Project Start Date: \_\_\_\_\_

Project End Date: \_\_\_\_\_