WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Bureau for Public Health Office of Environmental Health Services 350 Capitol Street, Room 313 **Charleston, WV 25301-3713**

Phone: 304-558-2981 Fax: 304-558-0691

APPLICATION FOR A PERMIT TO CONSTRUCT, INSTALL, ALTER, OR EXTEND A MANUFACTURED HOME COMMUNITY

Mail completed application form plus the following items to the above address:

- Detailed plans & specifications of the proposed and/or existing manufactured home community construction, installation, alteration or extension.

APPLICATION IS HEREBY	MADE FOR A PER	MIT TO		
Construct Insta	1	Alter	Extend	
APPLICANT				
ADDRESS				
NAME OF MANUFACTURED	HOME COMMUNI	TY		
MAILING ADDRESS				
	GENERAL INFOI	RMATION		
No. of Acres in Park	<u>—</u>	No. of Useable Acres		
No. of Manufactured Home Lots	: Existing	Proposed	Maximum	
		<u>Public</u>	<u>Private</u>	
Source of water supply				
Гуре of sewage disposal system				
Гуре of solid waste collection				
Type of solid waste disposal				
	CERTIFICA	TION		
This is to certify that all work of Chapter 1, Article 7-B, of t and the plans, specifications a	he State Board of He	ealth's <u>Manufactured Hor</u>	me Community Regulations	
Signature			Date	
Title		<u>_</u>		