



**Registration Form
For
Manufactured /Mobile Home Park**

Park Name _____

Park Location
(address) _____

Operator Name _____

Operator Contact
Address _____

Phone _____

Number of Lots _____

Date Establish _____

Water Supply individual wells / park well / public system (circle one)

Sewerage Disposal individual septic/ park system/ public system (circle one)

COUNTY STAFF USE ONLY

Received By _____ Date _____

Job Title _____

Farm Exemption yes no

Family Exemption yes no

Road Disclosure Statement rec'd yes no

List of units rec'd yes no