

MOBILE HOME PLACEMENT APPLICATION

City of Garfield
 14655 S. Wimpy Jones Road
 Garfield, AR 72732
 479-359-3652



Application Instructions – Please fill this form out completely and submit all required information.

PROPERTY INFORMATION:

PERMIT NUMBER: _____

Property Address: _____

Lot Number: _____ Block: _____ Subdivision: _____ Zoning Class _____

MOBILE HOME INFORMATION:

Make: _____ Model: _____ Size: _____

Serial Number: _____

OWNER INFORMATION:

Owner Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

CONTRACTOR INFORMATION:

Contractor: _____ License Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone Number: _____

LIST OF ADJOINING PROPERTY OWNERS WITH ADDRESS:

DOES A STREET SEPARATE THE PROPERTY WITH THE ADJACENT LAND OWNERS?:

Yes _____ No _____

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

 Signature of Owner, Contractor

 Date

OFFICE USE ONLY (planning commission signature)

Approved:	Denied:	Appealed: