TOWN OF SMYRNA

MOBILE HOME PERMIT APPLICATION

Date of Application_____

Owner's Name_____

Address_____

DESCRIPTION OF MOBILE HOME

Make_____ Year_____

Serial No._____ Body Style_____

Width_____ Length_____

MOBILE HOME LOCATION

Name of Mobile Home Park_____

Location of Mobile Home Park_____

Owner of Mobile Home Park_____

Lot No._____ Lot Size_____

Street Address_____

FOR OFFICE USE ONLY

Date Paid_____

Amount Paid_____

Penalty_____

Sticker No._____

Issued

_____
Applicant (Please Print)

_____
Applicant (Signature)

_____
Address

_____
Phone No.