

City of Auburndale

Permit#:

Phone:

Revised: September 2021

Mobile Home Setup Permit Application

Site Address:						
Parcel#:			Zoning Cla	Zoning Class:		
Mobile Home Park Name:						
Mobile Home ID #:						
Replacement	Yes	No	Last Electrical Service Date:			
Homeowner Name:				Email:		
Full Address:				·	Phone:	
COA Contractor #: Qualifier N			Qualifier Name	Name:		
Qualifier Phone: Q			Qualifier Email:	Qualifier Email:		
Description of Work:						
			Con	Contract Amount (\$):		
Application is hereby made for a mobile home setup permit to do the work as briefly described above and in consideration of the issuance of such permit. I agree that this application is subject to being built as referenced to the applicable approved plans and in accordance with the Zoning Ordinance, Building Code, and any other ordinances of the City of Auburndale and aws of the State of Florida applicable thereto. It is understood that any deviation from the information contained herein, unless approved by the Building Inspector, will render the permit null and void. Also, I agree that the property will not be occupied until a Certificate of Occupancy has been issued by the City of Auburndale.						
Additional documents	include Site Plan	n, Checklist, and Wor	ksheet. See ww	w.aubur	ndalefl.com	
hereby certify that the information set forth above is true and correct and that I am the property owner or lessee or acting as the agent of either and have been authorized by them to make this application.						
Applicant Name:			Company:	ny:		
Signature:				Date:		

Email: