PRE APPLICATION INSPECTION CHECK LIST
FOR MANUFACTURED CLASS A HOMES

CUSTOM’S NAME ______________________________________________________

LOCATION OF UNITS ___________________________________________________

ADDRESS WHERE UNITS ARE TO BE PLACED ______________________________

HUD NUMBERS ________________________________________________________

SERIAL NUMBERS ______________________________________________________

EXTERIOR WALL CONSTRUCTION MATERIAL:

FLAT OR CORRUGATED SHEET METAL ______ FIBERGLASS _______
WOOD ______ MASONRY FINISH _______
THE APPEARANCE OF WOOD OR MASONRY FINISH _______
VERTICAL OR HORIZONTAL GROOVED SIDING OR LAP SIDING _______
THE APPEARANCE OF VERTICAL OR HORIZONTAL GROOVED SIDING OR LAP SIDING _______
OTHER ___________________

ROOFING MATERIAL ___________________________________________________

ROOF PITCH ___________________________________________________________

ROOF OVERHANG IN INCHES ___________________________________________

MANUFACTURER AND YEAR ___________________________________________

IS THIS HOME IN A STATE OF DISREPAIR? ________________________________

IF SO PLEASE DESCRIBE THE CONDITIONS
_____________________________________________________________________
_____________________________________________________________________

HAS THERE BEEN ANY MODIFICATIONS MADE TO THE UNIT?
_____________________________________________________________________
_____________________________________________________________________

INSPECTION MADE BY _________________________________

DATE _________________________