



## USED MOBILE HOME MINIMUM STANDARDS INSPECTION REPORT AND CERTIFICATION FORM

### Unit Information (attach copy of Registration)

Single Wide  Duplex  Double Wide  Triple Wide  Park Trailer  ANSI

Make \_\_\_\_\_ Model \_\_\_\_\_

Tag# \_\_\_\_\_ HUD Label # \_\_\_\_\_ Date Manufactured \_\_\_\_\_

### Fire Safety Compliancy

Approved, listed smoke detector(s) are properly located and installed, according to manufacturer's instructions, outside of each sleeping area.

Yes  No

Home (manufactured after 1975) has operable egress windows or exterior doors located in each sleeping area with a minimum opening dimension of 22 inches.

Yes  No

### Construction Compliancy

All floor, wall and roof systems are structurally sound, property secured, free of holes and intact.

Yes  No

Exterior doors, including sliding glass, are in good working order and have operable locks. All missing or broken glass shall be provided.

Yes  No

All windows and their operators are in good working condition. Missing or broken glass shall be replaced and screens shall be provided.

Yes  No

All interior and exterior finishes are in good condition and properly secured in place.

Yes  No

Bottom board is rodent proofed throughout and sealed. Material used for repairs shall be at least equivalent to the original.

Yes \_\_\_\_ No \_\_\_\_

Insulation is in good condition and missing insulation shall be replaced.

Yes \_\_\_\_ No \_\_\_\_

Where damage due to active water leaks is apparent, repairs have been made.

Yes \_\_\_\_ No \_\_\_\_

Over-the roof tie downs are free of damage.

Yes \_\_\_\_ No \_\_\_\_

Data plate indicates compliance with Wind Zone II and Climatic Zone 1 requirements.

Yes \_\_\_\_ No \_\_\_\_

### Electric Compliancy

The electrical system is complete and any hazardous conditions have been corrected.

Yes \_\_\_\_ No \_\_\_\_

Distribution panel board is properly installed, complete with required breakers or fuses and unused openings properly covered.

Yes \_\_\_\_ No \_\_\_\_

All connections are tight and panels are accessible.

Yes \_\_\_\_ No \_\_\_\_

A minimum six inch space is between the face of the distribution panel and any easily ignitable materials.

Yes \_\_\_\_ No \_\_\_\_

All electrical fixtures are properly installed, wired and supported.

Yes \_\_\_\_ No \_\_\_\_

Aluminum conductors are connected to approved, listed devices

Yes \_\_\_\_ No \_\_\_\_

Grounding conductors are properly secured to the correct location and/or connector on fixtures or devices.

Yes \_\_\_\_ No \_\_\_\_

Units with aluminum conductors shall require certification to these standards by a licensed electrical contractor.

Yes \_\_\_\_ No \_\_\_\_

### Plumbing Compliancy

The plumbing system includes a bathroom which provides privacy and includes a bathtub and/or shower, a toilet and a sink.

Yes \_\_\_\_ No \_\_\_\_

The plumbing system includes a kitchen sink and approved, operating hot water heater.

Yes \_\_\_\_ No \_\_\_\_

All plumbing fixtures are securely attached, and in workable condition.

Yes \_\_\_\_ No \_\_\_\_

All plumbing fixtures are properly vented and provided with approved workable traps.

Yes \_\_\_\_ No \_\_\_\_

The hot water heater has a relief valve with sufficient room to operate and a minimum 3/4 inch discharge extended beneath the home.

Yes \_\_\_\_ No \_\_\_\_

Drainage piping is complete, properly supported and does not constitute a hazard.

Yes \_\_\_\_ No \_\_\_\_

Water supply piping is not be bent or kinked and does not retard flow, and all fixtures are connected.

Yes \_\_\_\_ No \_\_\_\_

### HVAC Compliancy

All heating/cooling devices are properly installed and secured in place.

Yes \_\_\_\_ No \_\_\_\_

If the heating system has been removed, drop outs have been installed for connection of an exterior system.

Yes \_\_\_\_ No \_\_\_\_

Homes with central heating/cooling have an operable thermostat.

Yes \_\_\_\_ No \_\_\_\_

Air registers are operable.

Yes \_\_\_\_ No \_\_\_\_

Ducts are in place, sealed and in good condition.

Yes \_\_\_\_ No \_\_\_\_

Required gas furnace or water heater vents are properly installed and secured to the appliance.

Yes \_\_\_\_ No \_\_\_\_

Proper return air to heating and air conditioning units are provided,

Yes \_\_\_\_ No \_\_\_\_

Range hoods and bathroom exhaust fans are vented to the exterior.

Yes \_\_\_\_ No \_\_\_\_

All gas appliances are connected with an approved shut off valve.

Yes \_\_\_\_ No \_\_\_\_

**Repairs/Corrections Required:**

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**Permits Required:**

Building \_\_\_\_ Electrical \_\_\_\_ Plumbing \_\_\_\_ Mechanical \_\_\_\_ Gas \_\_\_\_

Cost of repairs is equal to or greater than the value of the unit. The unit should be evaluated for demolition.

Yes \_\_\_\_ No \_\_\_\_ (If yes, attach photographs.)

In accordance with Polk County Land Development Code Section 716, I hereby certify the mobile home or park trailer identified in the pages of this document and as described below meet minimum standards prescribed therein.

Make \_\_\_\_\_ Model \_\_\_\_\_  
Tag# \_\_\_\_\_ HUD Label # \_\_\_\_\_ Date Manufactured \_\_\_\_\_

**Certification By Architect Or Engineer**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Registration Number \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
\_\_\_\_\_ Affix seal, sign and date

**Certification by mobile home dealer (attach copy of current Dealer's License)**

Dealership Name \_\_\_\_\_  
Address \_\_\_\_\_  
License Number \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Dealer Name Printed \_\_\_\_\_  
Dealer Signature \_\_\_\_\_

Signed: \_\_\_\_\_

SWORN TO and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

( ) IS ( ) IS NOT personally know to me. Identified By: \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC  
State of Florida, County of Polk

\_\_\_\_\_  
My Commission Expires