CITY OF FRESNO
OFFICE OF THE CITY ATTORNEY
CODE ENFORCEMENT
MOBILEHOME PARKS DIVISION



APPLICATION FOR PERMIT TO OPERATE

Park ID No:			(See Reverse Side for Instru	ctions on Completing this Form)	DEPARTMENT USE ONLY	
Change of Name or Address State Fee	SECTION 1.	TYPE OF PERMIT REQU	IESTED (Check appr	opriate boxes)	Collection No.	
Transfer of Owner/Operator Change of Name or Address Interes Change in Number of Lots (Addition of lots requires local approvals) Interes Intere	Park ID No:		☐ Original ☐ Amended			
SECTION 2. LOT INFORMATION Number of Lots Mobilehome Park Special Occupancy Park Temporary Special Occupancy Park Permit to Const.# TOTAL TOTAL Number of Lots List lot numbers of lots with an electrical system designed exclusively for: Special Occupancy Lots With Drains: 50 amperes Lot Numbers: 30 amperes Other Total Lots: SECTION 3. PARK INFORMATION. (All fields in this Section MUST be completed) Park Name: Telephone No: () Owner's Name Telephone No. () Mailling Address Street or P.O. Box) SECTION 4. MANAGER INFORMATION (The Information in this section is optional) Property Manager Telephone Number () Mailling Address Street or P.O. Box) C(0x) State) SECTION 5. OWNER CERTIFICATION As owner of the park described above, I agree to all necessary inspections required to obtain a Permit to Operate. I also agree that this sard shall be operated and maintained in accordance with the Health and Safety Code, Division 13, Part 2.1 and/or Part 2.3 the applicable provisions of Chapters 2 and/or 2.9 divide the laws of the State of California, that the information provided in this application is true and correct executed on /					MH Lot Fee <u>\$</u>	
SECTION 2. LOT INFORMATION Number of Lots TOTAL TOTAL		-	•	, ,		
Number of Lots Lot Information Number of Lots List to numbers of lots with an electrical system designed exclusively for: Special Occupancy Lots With Drains: 50 amperes	Type of Park:	☐ Mobilehome Park ☐ Sp	ecial Occupancy Park	☐ Temporary Special Occu		
Number of Lots	SECTION 2.	LOT INFORMATION				
List lot numbers of lots with an electrical system designed exclusively for:	Numbe	er of Lots	Conc	litional Uses	. O 17 kL	
Special Occupancy Lots With Drains: 50 amperes 50 a			· · · · · · · · · · · · · · · · · · ·			
Lot Numbers:						
Special Occupancy Lots Without Drains: 30 amperes				· · · · · · · · · · · · · · · · · · ·		
Other	Lot Numbers: Special Occupancy Lots Without Drains:		30	30 amperes		
SECTION 3. PARK INFORMATION. (All fields in this Section MUST be completed)	Lot Numbers:		_	□ Other		
Park Name:	Total Lots:	=				
	SECTION 3.	PARK INFORMATION. (All	fields in this Section I	MUST be completed)		
Owner's Name	Park Name:			Telephone N	lo: <u>(</u>) -	
Owner's Name	Location	(Street Address – DO NOT use P.O.	Вох)			
Mailing Address (Street or P.O. Box) (City) (State) (State) (Zip) SECTION 4. MANAGER INFORMATION (The Information in this section is optional) Property Manager Telephone Number (City		Sta	ate County	Zip	
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Property Manager		(Street or P.O. Box)		(City)	(State) (ZIP)	
Mailing Address (Street or P.O. Box) (City) (State) (State) (Zip GECTION 5. OWNER CERTIFICATION As owner of the park described above, I agree to all necessary inspections required to obtain a Permit to Operate. I also agree that this park shall be operated and maintained in accordance with the Health and Safety Code, Division 13, Part 2.1 and/or Part 2.3 the applicable provisions of Chapters 2 and/or 2.2 of the California Code of Regulations. Certify under penalty of perjury under the laws of the State of California, that the information provided in this application is true and correct Executed on/	SECTION 4.	MANAGER INFORMATION	ON (The Information i	n this section is optional)		
(Street or P.O. Box) (City) (State) (State) (Zip) (State) (State) (Zip) (State) (State) (State) (Zip) (State)	Property Manag	ger		Telephone Numb	per ()	
(Street or P.O. Box) (City) (State) (State) (Zip) (State) (State) (Zip) (State) (State) (State) (Zip) (State)	Mailing Address	S				
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Executed on/ at	park shall be op	perated and maintained in acco	rdance with the Health	and Safety Code, Division 13	ermit to Operate. I also agree that this , Part 2.1 and/or Part 2.3 the applicable	
Required Signature:Printed Name:	I certify under p	enalty of perjury under the law	s of the State of Californ	nia, that the information provid	ded in this application is true and correct.	
<u> </u>	Executed on	// at		(City)	,(State)	
	Required Signat	ture:	Pr	inted Name:		
				IT DEPARTMENT USE ONLY		

Date:_

Code Enforcement Dept. Signature:

INSTRUCTIONS

OR

Complete sections 1 through 5. Submit the completed application to the City of Fresno as addressed:

Mailing Address: City of Fresno Code Enforcement 2600 Fresno St., Suite 3076 Fresno, CA 93721-3611 Email Address:

mobilehomeparks@fresno.gov

Section 1. Type of Permit Requested

Enter the park identification number issued by the California Department of Housing and Community Development Division.

Original: Check this box if this is the original request (newly constructed park) for a Permit to Operate this park.

Amended: Check this box if this is a request for an amended Permit to Operate and indicate the type of change that is

being reported. When there is a change in the number of lots, enter the total number of lots in the space provided. The addition of lots to an existing park requires local approvals in accordance with sections 1032

or 2032 of Title 25 of the California Code of Regulations.

Check the appropriate box to indicate the type of park for which the permit to operate is being requested. For combination parks, more than one box may be checked.

Section 2. Lot Information

Number of Lots - Provide the total number of lots within the park for each category listed. If a category does not apply, leave

it blank. Enter a total of all lots in the space provided. This is the number of lots that will be shown on the Permit to Operate. For any Special Occupancy Lots, list out the applicable lot numbers. DO NOT add lots or change existing categories without submitting approvals from the local jurisdiction in accordance with

Sections 1032 or 2032 of Title 25 of the California Code of Regulations.

Conditional Uses - Check the appropriate box to indicate any conditional uses. For lots constructed with electrical systems

designed exclusively for units of 50, or 30 amperes (California Code of Regulations, Section 1142), list the applicable specific lot numbers. These lot numbers will appear on the Permit to Operate. Enter any other conditions on the use of the park as defined in Health and Safety Code, Sections 18205, 18300.1.

18862.13 and 18865.1.

Section 3. Park Information (This section must be filled out completely)

Enter the name of the park as it should appear on the Permit to Operate.

Enter the park telephone number, including the area code.

Enter the location of the park. This is the **physical address**, do not use a P.O. Box or route number.

Enter the name, telephone number, and mailing address of the park owner.

Section 4. Manager Information (This section is optional, but recommended.)

Enter the park manager's name, phone number and mailing address.

Section 4. Owner Certification

The signature of the park owner is required along with the owner's printed name. Also enter the date and place the form is signed.