



P.O. BOX 180609 RICHLAND, MS 39218
PHONE: 420-1610 FAX: 932-9229

MOBILE HOME REGISTRATION PERMIT

DATE _____ COUNTY REGISTRATION NO. _____

NAME OF OWNER _____

ADDRESS _____

TELEPHONE NO. (HOME) _____ (WORK) _____

EMERGENCY CONTACT _____

EMERGENCY PHONE NO. _____

MAKE _____ MODEL _____

SERIAL NO. _____ SIZE _____

LOT DESCRIPTION: INDIVIDUAL PARK

OTHER COMMENTS: _____

YOU HAVE 60 DAYS AFTER THE DATE OF REGISTRATION TO HAVE YOUR MOBILE HOME SKIRTED.

SIGNATURE _____

REGISTRATION FEE PAID: _____ check cash

RE-REGISTRATION FEE PAID: _____ check cash

This registration fee is non-refundable.

Payment received by _____ City of Richland.