

MOHAVE COUNTY DEVELOPMENT SERVICES

BUILDING DIVISION

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Scott Holtry Department Director www.mohave.gov

Gilbert Smaby, C.B.O. Chief Building Official

MANUFACTURED HOME UTILITY TESTING REPORT FORM

Manufacture's Name:	Serial Number:
HUD Number:	Insignia Number:
Home Installer's Name:	License Number:
Installer Address:	
Dealer's Name:	License Number:
Doglar's Address	
►ALL TESTS SHALL BE DONE TO WATER TEST (3280.612):	THE 3285'S AND 3280'S OF THE FEDERA
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Federal Register Installation Standards: Water – 3285.603 Sewer – 3285.604 Electrical – 3285.701 Gas – 3285.605

► COMPLETED COPY TO BE PLACED IN FIELD FOLDER FOR INSPECTOR USE ◀