

Permit Number _____

Date _____



201 Bolivar Street/PO Box 1729 * Sanger, TX 76266
940-458-2059(office)*940-458-4072(fax)*www.sangertexas.org

Mobile Home Move-In

Applicant: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Mobile Home Owner: _____ Phone: _____
Mobile Home Current Location (address): _____
City: _____ State: _____ Zip: _____
Mobile Home New Location Community Name: _____
Street address: _____ Lot No: _____
City: _____ State: _____ Zip: _____
Mobile Home Manufactured Date: _____

Elec Contractor: _____ Phone: _____ Email: _____
Address: _____ City: _____ State: _____ Zip: _____
Plumb Contractor: _____ Phone: _____ Email: _____
Address: _____ City: _____ State: _____ Zip: _____

By signing below, I hereby certify that I am the owner (or) authorized agent of the owner of this property and that I have read and examined this application and know the same to be true and correct. I grant permission to the City of Sanger, Texas and its authorized agents to enter the premise and associated structures for the performance of official duties. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. The issuance of any permit neither exempts nor modifies any covenants, deed restrictions, city ordinances and/or state or federal laws, whether herein specified or not.

Applicant Name (please print)

Date

Applicant Signature

Date

Approval (Building Official)

Date

Permit Fee: \$ _____

CC/Cash/Check # _____

Date: _____