Date:	Disposition:
4	Date: Permit no: Signature:
	Permit no:
	Signature:
home within the City Limits. I realize the approved, I understand that the permit wavailable, I will relocate my mobile home made to the mobile home, and later, becomoved, such additions or improvements must be approved by the Governing Bod percolation test by the Health Department	at that the Mayor and Council consider my request to park a mobile at residential zones prohibit mobile homes; however, if this request is will be of a temporary nature and that if and when trailer parks are as in the park. I further understand that if additions or improvements are ause of the temporary nature of this permit, the mobile home has to be are done so at the owner's risk. I also understand that this application by before utilities are installed and/or connected and that approval of a not does not automatically carry approval to connect utilities, but that this ank and field lines, where applicable, have met Health Department
•	Signature
The following information is submitted:	
Name:	Address
Proposed trailer location:	
Present zoning:	Lot size:
Is city sewer available? Yes / No	Is city water available? Yes / No
(For city Code Enforcement use only)	
I have contacted the adjoining needs the property by signing their name and a	eighbors and/or property owners and they concur in locating a trailer on address as follows:
If any do not approve, please inc	dicate their names and reasons below:
C	ode Enforcement Officer:
(For county Health Department use only (Date, initial, and return to City Clerk's	y) s office after completion.)
If city sewer is not available, wi sufficient field lines? Yes / No Date	ill the area meet county health specifications to install a septic tank and e:
	By: Perry County Health Department