CITY OF FREMONT NEBRASKA

APPLICATION FOR MOBILE HOME PARK LICENSE

Instructions: Fill in all applicable information

Applicant's Name: _____

Applicant's Address: _____
Street/PO Box City State Zip

Business Phone: _____

Applicant's Occupation: _____

If Corporation or Partnership, list names and addresses: _____

_____

Applicant does hereby make application for a license to establish, conduct, operate, or maintain the following mobile home park:

Name of Park: _____

Location of Park: _____
Street City State Zip

Mailing address of Park: _____
Street/PO Box City State Zip

Park Manager: _____

Mailing Address: _____
Street/PO Box City State Zip

Check one: _____This is an INITIAL APPLICATION for a license to establish, conduct, operate and maintain a Mobile Home Park.

_____This is a RENEWAL APPLICATION FOR ANNUAL LICENSE to conduct, operate and maintain a Mobile Home Park.

Total Number of Lots: _____

UTILITY SYSTEMS:

Water Supply:	_____Municipal	_____ Private
Sewage:	_____Municipal	_____ Private
Refuse Collection:	_____Municipal	_____ Private

_____ _____
Signature of Applicant and Title Date