## ILLINOIS DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENVIRONMENTAL HEALTH 525 WEST JEFFERSON STREET SPRINGFIELD, ILLINOIS 62761

## ORIGINAL APPLICATION FOR MANUFACTURED HOME INSTALLER LICENSE

The Manufactured Home Quality Assurance Act requires on site supervision by a licensed manufactured home installer for homes installed after December 31, 2001.

APPLICANT INFORMA	<u>ATION</u>			
NAME				
ADDRESS	First NameCITY	Middle Initial	_STATE	Social Security Number ZIP
PHONE	DATE OF BIRTH	EMP	LOYER	
TRAINING INFORMAT	CION			
	a 30 of the Manufactured Home le for a license. Submit a copy			
COURSE SPONSORED I	3Y			
LOCATION	DATE			
may place you in contemp		than 30 days del	inquent in compl	
<u>PHOTOGRAPH</u>				
	HOTOGRAPH OF THE APPI issued without photograph. Ple			
<u>FEE</u>				
Submit a check or money refundable.	order made payable to the Illinoi	s Department of l	Public Health for	\$150. The fee is non-
		TANT NOTICE		
THIS STATE AGENCY I	S REQUESTING DISCLOSUR	E OF INFORMA	TION THAT IS	NECESSARY TO

ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED UNDER PUBLIC ACT 92-410. DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION COULD RESULT IN DENIAL,

REVOCATION OR SUSPENSION OF THE MANUFACTURED HOME INSTALLER LICENSE.

IL 482-1042