

PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR THE PROPERTY LOCATOR/CERTIFICATE OF INSTALLATION FORM

RETAILER/DEVELOPER: To ensure compliance with Miss. Code Ann. § Section 75-49-9(2), it shall be the responsibility of each **retailer/developer** to submit a legible and properly completed **Property Locator/Certificate of Installation, signed by the retailer/developer and the installer/transporter**, to the Factory-Built Home Division of the State Fire Marshal's Office for **all** factory-built, manufactured, mobile or modular homes **within seventy-two (72) hours (3 days) of the completion of the installation of home** during regular business hours.

INSTALLER/TRANSPORTER: To ensure compliance with Miss. Code Ann. § Section 75-49-9(2), it shall be the responsibility of each **installer/transporter** to submit a legible and properly completed **Property Locator/Certificate of Installation** form to the Factory-Built Home Division of the State Fire Marshal's Office for **all Secondary Installations** of factory-built, manufactured, mobile or modular homes **within seventy-two (72) hours (3 days) of the completion of the installation of home** during regular business hours.

To access the State Fire Marshal's web site for the Property Locator/Certificate of Installation form type in the following address link:

www.mid.ms.gov/sfm/pdf/inthroplocinstallertrans.pdf

To e-mail a scanned copy of the properly completed and signed **Property Locator/Certificate of Installation**, please use the following address:

manhousing@mid.ms.gov

State of Mississippi Fire Marshal's Office
Factory-Built Home Division
P.O. Box 79
Jackson, MS 39205-0079

Fax #: (601) 359-1076 or E-mail: manhousing@mid.ms.gov

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PROPERTY LOCATOR/ CERTIFICATE OF INSTALLATION

Retailer/Developer Name: _____
License No.: _____
Address: _____
City/State/Zip: _____
Phone No.: _____
Fax No.: _____
Email (if available): _____
 Secondary Installation

Installers Name: _____
License No.: _____
Address: _____
City/State/Zip: _____
Phone No.: _____
Fax No.: _____
Email (if available): _____

Consumer's Name: _____
Address: _____
City/State/Zip: _____
Phone No.: _____
County Where Home is Located: _____
Date of Installation: _____

Serial #: _____
HUD #: _____
Wind Zone: _____ Unit Size: _____
 New Home Single wide Double wide
 Used Home Triple wide: Modular/Other
Model: _____ Year: _____
Manufacturer: _____

Hunting/Fishing Camp* Storage* (* If checked: Requires **Affidavit of Homeowner Statement** attached to this form)

FLOOD ZONE: Home is not in a flood zone Home is in a flood zone FEMA Engineered foundation drawing attached
SITE PREPARATION BY: Contractor Homeowner/Landowner Installer/Transporter Retailer/Developer
TYPE OF PAN FOUNDATION SYSTEM: Oliver Tie Down Minute Man Other: _____
VAPOR BARRIER: Used Home - Advised Homeowner that Installation Recommended New Home- Installation Required

Soil Classification Test Probe Information (Installer only):

Soil test probe reading (ft-lbs): _____ Soil test probe reading (ft-lbs): _____
Depth of Probe for reading (ft): _____ Depth of Probe for reading (ft): _____
(Right front) (Left front) (Right rear) (Left rear)

Soil test probe reading (ft-lbs): _____
Depth of Probe for reading (ft): _____
(Front Center) (Rear center)

Class of anchor used**: _____
() If no soil tests were conducted C4 anchors shall be installed.**

I HEREBY CERTIFY THAT THIS HOME IS INSTALLED ACCORDING TO THE MANUFACTURER'S SPECIFICATIONS OR, IF A USED HOME, ACCORDING TO MH-5, AS AMENDED AND IS READY FOR INSPECTION ON THIS DATE: _____ DAY OF _____, 20____.

Retailer Developer (Print Name) _____ (Signature) _____

Installer (Print Name) _____ (Signature) _____

Whoever fails to comply with an order issued by the State Fire Marshal's Office under the provisions of "The Uniform Standards Code for Factory-Built Homes Law" Section 75-49-19, Mississippi Code 1972, Annotated, shall be subject to penalties as described by law.

Date Inspected: _____ Fire Marshal's Signature: _____

Passed Passed w/Violations Failed (Follow-up req'd) Inspection Decal No. _____

DIRECTIONS TO HOME: Directions must start from a known (be specific) starting point so that the Inspector may proceed to the location of the manufactured home. For example, use route # and pertinent street and road names. Use left, right and preferably compass directions, (north, south, east, west). Refrain from the use of such landmarks as dealerships, vehicles, and service stations, as they are subject to name changes and physical relocation.