

(See Reverse Side for Instructions on Completing this Form)

Section 1. TYPE OF PERMIT REQUESTED (Check appropriate boxes)											
Park ID No:				Original				Amended			
☐ Transfer of Owner/Operator				Change of Name or Address							
Change in number of lots (Addition of lots requires approval)											
Type of Park				Special Occupancy Park				Temporary Special Occupancy Park			
Section 2. LOT INFORMATION								Conditional Uses			
Niverbox of Loto.								Number of lots with an electrical system			
Number of Lots:							a d	designed exclusively for: 50 amperes			
Mobile Home Lots: Special Occupancy Lots with Drains:								30 amperes			
Special Occupancy Lots with Drains: Special Occupancy Lots without Drains:							- <u> -</u>	Other	eres		
Total Lots:											
Section 3. PARK INFORMATION (all fields in this section must be completed)											
Park Name:				Telephone Number:							
Location:											
City:				State:			Z	Zip:			
Owner's Name:				Telephone Number:							
Mailing Address:											
(Street or PO Box)				(City)				(State)	(Zip)		
Section 4. MANAGER INFORMATION											
Property Manag	ger:			Telephone Number:							
Mailing Address:											
		(Street or PO Box	(City)		(State)		(Zip)				
Section 5. OWNER CER		1					,		(1 /		
As owner of the park described above, I agree to all necessary inspections required to obtain a Permit to Operate. I also agree that this park shall be operated and maintained in accordance with the Health and Safety Code, Division 13, Part 2.1 and/or Part 2.3 the applicable provisions of Chapter 2 and/or 2.2 of the California Code of Regulations.											
I certify under penalty of perjury under the laws of the State of California, that the information provided in this application is true and correct.											
Executed on / / at ,											
(date)				(City)					(State)		
Required Signa			Printed Na):				
			D	EPA	RTMENT	USE ONL	. <mark>Y</mark>				
Signature of Inspector:								ate:			
Collection No.		Date:			PTO Fee:						
MH Lot Fee:		Lot Fee:		Amended PTO Fee:							
Permit to		State					•				
Const #:		Fee:			Total:						

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BS-35-APPLICATION FOR PERMIT TO OPERATE

INSTRUCTIONS

Complete sections 1 through 5. Submit this application with the appropriate fees as specified in the Health and Safety Code, Division 13, Parts 2.1 or 2.3 and the California Code of Regulations, Title 25, Chapter 2 or 2.2 to:

City of Hesperia Building and Safety Division 9700 Seventh Avenue Hesperia, CA 92345

Section 1. Type of Permit Requested

Enter the park identification number issued by this Department.

Original: Check this box if this is the original request (newly constructed park) for a Permit to Operate this

park.

Amended: Check this box if this is a request for an amended Permit to Operate and indicate the type of

change that is being reported. When there is a change in the number of lots, enter the total number of lots in the space provided. The addition of lots to an existing park requires local approvals in accordance with sections 1032 or 2032 of Title 25 of the California Code of

Regulations.

Check the appropriate box to indicate the type of park for which the Permit to Operate is being requested. For combination parks, more than one box may be checked.

Section 2. Lot Information

Number of Lots: Provide the total number of lots within the park for each category listed. If a category

does not apply, leave it blank. Enter a total of all lots in the space provided. This is the number of lots that will be shown on the Permit to Operate. DO NOT add lots or change existing categories without submitting approvals from the local jurisdiction in accordance

with Sections 1032 or 2032 of Title 25 of the California Code of Regulations.

Conditional Uses: Check the appropriate box to indicate any conditional uses. For lots constructed with

electrical systems designed exclusively for units of 50, or 30 amperes (California Code of Regulations, Section 1142). These lot numbers will appear on the Permit to Operate. Enter any other conditions on the use of the park as defined in Health and Safety Code,

Sections 18205, 18300.1, 18862.13 and 18865.1.

Section 3. Park Information (This section must be filled out completely)

Enter the name of the park as it should appear on the Permit to Operate

Enter the park telephone number, including the area code.

Enter the location of the park. This is the physical address, do not use a PO Box or route number.

Enter the name, telephone number, and mailing address of the owner.

Section 4. Manager Information

Enter the park managers name, phone number, and mailing address.

Section 5. Owner Certification

The signature of the park owner is required along with the owners printed name. Also enter the date and place the form is signed.

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