

ALABAMA MANUFACTURED HOUSING COMMISSION

350 SOUTH DECATUR STREET * MONTGOMERY, ALABAMA 36104

(334) 242-4036 * FAX (334) 240-3178

WWW.AMHC.ALABAMA.GOV

**AMHC INSPECTOR'S INSPECTION REPORT TO DETERMINE IF A USED MANUFACTURED HOUSING UNIT IS PREPARED PROPERLY AND FIT FOR TRANSPORT
535-X-12T-.06 AND .07**

DATE _____

CERTIFIED INSTALLER

HOME INFORMATION

NAME: _____

YEAR _____ SIZE _____ X _____

ADDRESS: _____

MAKE/MODEL _____

CITY- STATE-ZIP: _____

HUD LABEL# _____

CERTIFICATION# _____

SERIAL# _____

TRANSPORTATION DECAL# _____

WIND ZONE _____

TRANSPORTER

OWNER/CURRENT ADDRESS

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY-STATE-ZIP: _____

CITY-STATE-ZIP: _____

COUNTY: _____

FINAL DESTINATION DELIVERY ADDRESS

ADDRESS: _____

CITY-STATE-ZIP: _____

COUNTY : _____

NOTES: _____

IS THIS UNIT PREPARED FOR TRANSPORT IN COMPLIANCE WITH 535-X-12T-.06? **YES** _____ **NO** _____

IS IT FIT FOR TRANSPORT? **YES** _____ **NO** _____

IF YES TO BOTH QUESTIONS, ISSUE A DECAL TO THE FEDERAL MOTOR CARRIER AUTHORIZING THE UNIT TO BE TRANSPORTED.

INSPECTOR: _____

(SIGNATURE)

DATE _____