



Town of Smyrna

Mobile Home Permit Application

Date of Application _____

Owner's Name _____

Address _____

Description of Mobile Home

Make	Year
Serial No.	Body Style
Width	Length

Mobile Home Location

Name of Mobile Home Park _____

Location of Mobile Home Park _____

Owner of Mobile Home Park _____

Lot No. _____ Lot Size _____

Street Address _____

Applicant (Please Print)

Applicant (Signature)

Address

Phone Number

FOR OFFICE USE ONLY				
Date Paid	Amount Paid	Penalty	Sticker No.	Issued Date