

DEPARTMENT OF BUSINESS & INDUSTRY  
 NEVADA HOUSING DIVISION  
**MANUFACTURED HOUSING**  
 1830 E College Parkway, Suite 120  
 Carson City, Nevada 89706  
 Phone: (775) 684-2945 Fax: (775) 684-2949

**Application for Initial Limited Lien Resale License**

<b>Fee</b>	<b>\$50.00</b>
<b>Copy of</b>	<b>Certificate of Ownership</b>
<b>Copy of</b>	City/ County business license for the mobile home park
<b>Copy of</b>	General Power of Attorney if the applicant is not the owner of the mobile home park

Payment Information: Make all checks payable to Nevada Housing Division.  
 Mail items of license you are applying for to the address above.

**Working without a license is unlawful and may subject you, your business, and each individual licensee to disciplinary action.**

Manufactured home to be sold information: (Please Print)

\_\_\_\_\_

<b>Year</b>	<b>Make</b>	<b>Model</b>	<b>Serial Number</b>
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**Applicant Information**

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Mobile Home Park Information**

Name of Mobile Home Park: \_\_\_\_\_

Address: \_\_\_\_\_  
 (where LLR License is to be mailed to)                      City/State/Zip

By signature below I authorize release of information to the Department of Business and Industry, Manufactured Housing Division. I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief. I undertake to inform you of any changes therein, immediately. If any of the above information is found to be false, untrue, misleading or misrepresenting, I acknowledge that I may be held personally liable for it.

Signature (Park Owner or Manager): \_\_\_\_\_