

MANUFACTURED HOME CERTIFICATE OF COMPLIANCE

HOUSING STANDARDS DIVISION Commonwealth Keystone Building 400 North Street, 4th Floor Harrisburg, PA 17120-0225

CERTIFICATION		
I certify that the manufactured home referenced on this form is in compliance with the Manufactured Housing Improvement Act (35 P.S. 1658) as amended on May 8, 2012.		
Installer Signature	Date	
Print Installer Name	DCED ID#	Valid Through
HOME	E INFORMATION	
□ NEW Manufactured Home	☐ Relocated M	lanufactured Home
Copy to Consumer, Code Official & DCED PURCHASER (IF APPLICABLE):	Copy to Con	sumer & Code Official
ADDRESS OF HOME INSTALLATION:		
CITY:	STATE:	ZIP:
DATE OF INSTALLATION:		
MANUFACTURER NAME:		
MANUFACTURER ADDRESS:		
CITY:	STATE:	ZIP:
SERIAL NUMBER:	DATE OF MANUFACTURE (FRO	M DATA PLATE):
RETAILER NAME (NEW HOMES ONLY):		
RETAILER ADDRESS:		
CITY:	STATE:	ZIP:
CONSTRUCTION CODE OFFICIAL:		
MUNICIPALITY:		
COUNTY:		
DCED USE ONLY FOR NEW HOMES		
Date Received: Received by:		
Recorded Shipment Report: Label Number(s):		