STATE OF CALIFORNIA BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS MANUFACTURED HOUSING PROGRAM

# **APPLICATION FOR REPLACEMENT INSIGNIA**

PLEASE SEE INSTRUCTIONS ON THE REVERSE SIDE OF THIS FORM

SUBMIT THIS COMPLETED APPLICATION WITH THE APPROPRIATE REPLACEMENT INSIGNIA FEE TO THE DEPARTMENT

#### HCD MANUFACTURED HOUSING PROGRAM DO Pay 279490 Sagramente CA 05927 9490 (900) 052 9256

home, commercial modular, or special purpose commercial modular.

DEPARTMENT USE ONLY
DTN NUMBER
FEE RECEIVED \$
DATE
APPROVED DISAPPROVED
COMMENTS
MH Program Technician's Signature

<u>MH-FBH@hcd.ca.go</u>	V HCD I	MH 416 (Rev. 01/21)	
I AM REQUESTING (Check Appropriate B		OF LOST CALIFORN	IIA INSIGNIA FOR:
☐ MOBILEHOME (* Pre☐ MULTI-FAMILY MANI * The Department does not re on or after June 15, 1976.	UFACTURED HOME (	) □ Duplex mobilehome)	COMMERCIAL MODULAR SPECIAL PURPOSE COMMER MODULAR under federal (HUD) standards, manufa
APPLICANT		OWNER	
Address		Address	
City/State/Zip		City/State/Zip _	
Telephone		Telephone	
County		Bus. Phone	
LOCATION OF UNI	IT IF DIFFERENT	THAN ABOVE	
LOCATION OF UNI	IT IF DIFFERENT	THAN ABOVE	
UNIT INFORMATIO MANUFACTURER'S	IT IF DIFFERENT	THAN ABOVE	
UNIT INFORMATIO MANUFACTURER'S DATE OF MFG.	IT IF DIFFERENT	THAN ABOVE	
UNIT INFORMATIO MANUFACTURER'S DATE OF MFG. DECAL/LICENSE	IT IF DIFFERENT	THAN ABOVE  MAKE/MODEL	CALIFORNIA INSIGNIA
UNIT INFORMATIO MANUFACTURER'S DATE OF MFG. DECAL/LICENSE NUMBER(S)  CERTIFICATION: AS THE CURRENT OW	IT IF DIFFERENT  IN  NAME  COMPLETE UN  VINER I CERTIFY THAY D ALTERATIONS OR	THAN ABOVE  MAKE/MODEL  IIT SERIAL NUMBER(S)  T TO THE BEST OF MY KI CONVERSIONS MADE TO	CALIFORNIA INSIGNIA

conversions could be those alterations to the unit that convert, replace, reconstruct, modify, or remove any equipment or installation affecting the construction, plumbing, fire safety, heat-producing, or electrical system of the manufactured home, multifamily manufactured



### INSTRUCTIONS FOR COMPLETING FORM

**HCD MH 416** 

Do not write in the section of the application entitled, "**Department Use Only**" appearing on the top right-hand corner.

- 1. Fill in all blank spaces with the requested information. If you do not have the requested information, simply write "Unknown." Please ensure that you enclose the proper replacement insignia fee.
- 2. Please ensure that you enclose the proper replacement insignia fee. Payment is expected in the form of a check or money order payable to the "California Department of Housing and Community Development."

## DO NOT SEND CASH

3. The fee for replacing California insignia for a mobile / manufactured home, multifamily manufactured home, commercial modular or special purpose commercial modular is **\$83.00** per insignia. (For example: a singlewide = \$83.00, a doublewide = \$166.00, a triplewide = \$249.00, etc.). The fee is applied toward the processing cost and is not refundable if this application is subsequently withdrawn. The fee may not be credited to any other requested service.

### REMINDERS

California Health and Safety Code section 18026 requires that a HUD label or California insignia be affixed prior to offering for sale, rent, or lease. This means that at the time of the title or occupancy transfer:

- A replacement insignia must be secured *prior* to a title transfer request.
- If no record of a California insignia record is found by the Department, a compliance inspection may be necessary prior to the issuance of California insignia.
- The Department does not replace lost HUD labels. Contact the HUD Office of Manufactured Housing Programs at (202) 708-6423 regarding lost HUD labels.

# IF ASSISTANCE IS NEEDED, PLEASE CONTACT:

HCD Manufactured Housing Program (800) 952-8356 / ContactMH-FBH@hcd.ca.gov