



**SANDOVAL COUNTY
PLANNING & ZONING DEPARTMENT**

MANUFACTURED HOUSING PLACEMENT PERMIT

Brand/Manufacturer: _____

Year of Mobile Home: _____

Installer: _____

Address: _____

LIC# _____ Telephone: _____

Owner: _____

Mailing Address: _____

Phone Number: _____ **E-Mail:** _____

Legal Description:

PLACEMENT ADDRESS:

Septic Permit # _____ MHD Permit# _____

Zoning Approval: _____ Date: _____

Floodplain Approval: _____ Date: _____

SANDOVAL COUNTY PLANNING AND ZONING DEPARTMENT
1500 IDALIA RD, BLDG D
P.O. BOX 40
BERNALILLO, NM 87004
(505) 867-7628