

OFFICE OF THE CITY CLERK ROME CITY HALL, 198 N. WASHINGTON ST. ROME, NEW YORK 13440-5815 TEL.: (315) 339-7659 FAX: (315) 838-1160 WWW.ROMENEWYORK.COM

MOBILE/MANUFACTURED HOME PARK LICENSE APPLICATION

This application for a Mobile/Manufactured Home Parks is made pursuant to the provisions of Chapter 38, Article II of the Rome Code of Ordinances.

Name of Applicant:			
City:	State:	Zip Code:	
Phone:	Email:	•	

BUSINESS

Name of Business:			
Address:			
City:	State:	Zip Code:	
Phone:	Email:		

The address where applicant proposes to carry on the business will be stated on license.

TYPE OF BUSINESS

🗆 Firm	\Box Partnership	\Box Association	\Box Corporation	□ Sole Proprietorship
\Box Other (sp	pecify):			

If a partnership, please list names and addresses of all partners both general and limited (attach additional sheets if necessary):

NAME	ADDRESS	TYPE (general or limited)

If a corporation or association, please list names and addresses of all principal officers (attach additional sheets if necessary):

ADDRESS

1. Applicant agrees to comply with all local laws, ordinances, rules and regulations of the City of Rome pertaining to the operation of a business or occupation.

 \Box YES \Box NO

2. Applicant has not been refused a Mobile/Manufactured Home Parks license or had a Mobile/Manufactured Home Parks license revoked within the last nine (9) months of the date of this application.

 \Box YES \Box NO

Date of refusal or revocation

3. As applicant for a license to operate a business of Mobile/Manufactured Home Parks, I hereby consent to inspection of the premises by a Codes Enforcement Officer.

 \Box YES \Box NO

4. Total number of available lots for rent: ______
Total number of vacant lots: ______
Total number of mobile/manufactured homes currently on the park: ______
Installation date of the unit: ______

Attach a list of each label number of each trailer as evidenced on the HUD data plate.

Attach a list of the utility status of each dwelling. (Public or private sewer-public or private water source)

Every park owner licensed under the provisions of this article shall maintain records of Manufacturer's and Installer's Warranty Seals for all trailers built and/or installed after January 1, 2006. These records are to be made available to the Codes Enforcement Officer upon request.

Prior to the removal, relocation or installation of a Manufactured Home, the park owner must first apply for a building permit thru the Code Enforcement Office.

ZONING BOARD OF APPEALS APPROVAL (NEW BUSINESS ONLY)

The Zoning Board of Appeals of the City of Rome, which is authorized to review applications, plans and specifications, has examined this application on ______, 20____, and finds a Mobile/Manufactured Home Parks use on this site is:

- a permitted use,
- a use subject to issuance of a zoning permit and such permit has been issued on _____,
- a pre-existing non-conforming use,
- other: _____

and is not contrary to the existing Zoning Ordinance, OR application returned for the following reasons:

Master Plan for this area designates the future land use to be______. Site is currently zoned for ______.

Signature Chairman – Zoning Board of Appeals

Date

____,

.

STATE OF NEW YORK)COUNTY OF ONEIDA) ss.:

The undersigned, ______, deposes and says, under the penalties of perjury, that he/she is the individual making the foregoing application and that the answers to the foregoing questions and other statements contained therein are true to the best of his/her knowledge.

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE PURSUANT TO SECTION 210 OF THE NEW YORK STATE PENAL LAW.

Signature	Date
STATE OF NEW YORK)	
COUNTY OF ONEIDA) ss.:	
	, in the year, before me, the c in and for said State, personally appeared , personally known to me or proved to me on the basis of
satisfactory evidence to be the indiv acknowledged to me that (s)he execute	vidual whose name is subscribed to the within instrument and ad the same in his/her capacity, and that by his/her signature on the upon behalf of which the individual acted, executed this instrument.

Sworn to before me this ______day of ______, 20____.

Notary Public/Commissioner of Deeds

FOR INTERNAL USE ONLY

CODE ENFORCEM	ENT VERIFICATION		
The premises for appli Certificate of Occupan	cant's business was inspected c	n:	
□ Approved	Disapproved		
The premises were not	approved for the following rea	sons:	
Signature	Title		Date
<u>CITY CLERK LICE</u>	NSING INFORMATION		
License Fee:	\$25.00 per mobile home		
Amount Paid:		License No.:	
Date License Issued:		Date License Expires:	
City Clerk Si	anature	Date	
City Cicik Si	Sharare	Date	