



MANUFACTURED HOME COMMUNITY INSPECTION REPORT

Name of Facility _____ Location _____ Date _____

Owner/Operator _____ Address _____

City _____ State _____ Zip Code _____

☐ PUBLIC WATER SUPPLY ☐ PRIVATE WATER SUPPLY NUMBER MANUFACTURED HOME LOTS _____
☐ PUBLIC SEWAGE ☐ ON - SITE SEWAGE SYSTEM NUMBER OCCUPIED _____
MANUFACTURED HOME LOTS _____

Notice: Based on an inspection this day, the items marked below must be corrected within the period of time specified in writing by the health authority. Failure to comply with this notice may result in official enforcement action. An opportunity for an appeal will be provided if a written request for a hearing is filed with the health authority within the period of time established in this notice for the correction of the violations. Please note that the numbers in parentheses to the right of each heading correspond to the applicable section numbers in the Manufactured Home Communities Rule, 64CSR40.

1. LOCATION, SPACE AND LAYOUT (Sec.7)

- a) Ground /paved surfaces graded to drain.
- b) Adequate area to accommodate water supply and sewage treatment systems.
- c) Manufactured homes meet spacing requirements.
- d) Manufactured home site meet square footage requirements.
- e) Identification marker in visible location.
- f) Manufactured home situated on approved manufactured home stand.
- g) Manufactured home stand maintained.
- h) Streets/ roads/ walkways maintained in good repair.

2. WATER SUPPLY (Sec. 8)

- a) Provided, potable, approved, safe, easily accessible.
- b) Comply with applicable rules.
- c) Drinking fountains, if provided: Approved, maintained, sanitary.
- d) Water riser: provided, approved construction.
- e) Water riser capped: unoccupied site.

3. SEWAGE SYSTEM (Sec. 9)

- a) Comply with sewage rules.
- b) Good repair, maintained, operated.
- c) Plumbing in compliance with all applicable laws, regulations, ordinances and codes.
- d) Sewer riser provided, proper construction, good repair.
- e) Sewer riser properly plugged or capped.

4. MANAGEMENT BUILDINGS/OTHER COMMUNITY SERVICE FACILITIES (Sec. 10)

- a) If provided, floors, walls ceilings appurtenances attached equipment clean, good repair.

5. GARBAGE & REFUSE (Sec. 11)

- a) No odor, rodents, insects, nuisance.
- b) Covered when not in use, clean, good repair.
- c) Sufficient number, capacity.
- d) Central location, if provided: non-absorbent, smooth, durable, sloped to drain, sufficient capacity.
- e) Collected at interval not to exceed seven (7) days.
- f) Disposed of by municipal or private garbage service or in accordance with applicable LAWS.

6. INSECT AND RODENT CONTROL (Sec.12)

- a) Free of insect breeding, rodent harborage, infestation.
- b) Exterior openings management buildings/other applicable structures protected.

7. FUEL SUPPLY AND STORAGE (Sec. 13)

- a) LPG or fuel oil system shut off provided.
- b) LPG or fuel oil storage containers properly located.

8. REGISTRATION OF OCCUPANTS (Sec. 14)

- a) Record identifying manufactured homes and occupants maintained.
- b) Record of occupants available to health officer.
- c) Record of occupants maintain for one (1) year.

9. SUPERVISION (Sec. 15)

- a) Proper supervision provided.
- b) Occupied manufactured homes on approved site, connected to water, sewage and other essential utilities.

10. MISCELLANEOUS REQUIREMENTS (Sec.16)

- a) Incoming occupants provided a copy of 64 CSR 40.
- b) Owner of pet animal complying with all applicable LAWS.

REMARKS:

VIOLATIONS MUST BE CORRECTED ON OR BEFORE _____ SANITARIAN _____