



**MISSOURI PUBLIC SERVICE COMMISSION**  
**MANUFACTURED HOUSING AND MODULAR UNITS PROGRAM**

<http://www.psc.mo.gov/ManufacturedHousing>

**PROPERTY LOCATOR FORM**

**FOR: NEW HUD and NEW MODULAR UNITS and Classrooms NEW and USED**

Property locator must be completed and faxed or emailed within 5 days of delivery date to avoid being subject to a \$50.00 inspection fee. Fax: 573-522-2509 Email: [mhreports@psc.mo.gov](mailto:mhreports@psc.mo.gov)

Dealer: \_\_\_\_\_ Phone: \_\_\_\_/\_\_\_\_ Registration: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Delivery Date: \_\_\_\_\_

*Date of delivery is when the home (first section of a multi-section) leaves the dealer sales lot or manufacturer's facility if shipped directly to consumer's site.*

Primary Installer - HUD units only: \_\_\_\_\_ License: \_\_\_\_\_

Installation (choose one): Pier \_\_\_\_ Slab \_\_\_\_ Footings \_\_\_\_ Runners \_\_\_\_ Crawlspace \_\_\_\_ Basement \_\_\_\_

Consumer Name:\* \_\_\_\_\_ Phone:\* \_\_\_\_/\_\_\_\_

Delivery Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Manufacturer: \_\_\_\_\_ Registration Number: \_\_\_\_\_

City/State: \_\_\_\_\_ Date Manufactured: \_\_\_\_\_

Complete Serial Number/s: \_\_\_\_\_

Type of Unit/s: HUD \_\_\_\_ HUD Labels: \_\_\_\_\_

Modular: \_\_\_\_ Model: \_\_\_\_\_ MO Seal/s: \_\_\_\_\_

Modular classroom: \_\_\_\_ Number of units: \_\_\_\_\_ Size of unit/s: \_\_\_\_\_

Directions from dealer sales lot to installation site (may submit on separate sheet):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_

*\*Consumer information provided to the Missouri Public Service Commission for inspection purposes. All consumer information is highly confidential.*