

1. Of the types of support systems listed below, write across the top of the support certificate the support system type that best describes the one used to support the home installed. If you did not construct the complete support system, identify who completed that work.
2. Identify whether the home is installed in a manufactured home park or not.
3. Provide the State or HUD Construction Label Numbers, if there are more than 2 modules use the numbers in series using the last two digits of each label number. For example XXXXX71/72/73 and 74. If constructed prior to July of 1972 check the box to the left of "BUILT BEFORE JULY 1972".
4. Identify the utility work completed by the installer.
5. Provide the Consumer/Purchaser/Owner's name.
6. Provide the date that the installation of the home was completed.
7. Provide the location, by address, where the home was installed.
8. Provide the city where the home is sited.
9. Provide the county where the home is sited.
10. Provide the manufactured home manufacturer's name.
11. Provide the manufactured home's serial number.
12. Provide the MN manufactured home installer's MI number (*NOT your Commerce Dept. license number*).
13. Write in Anchoing Certificate Number if you Completed the Anchoing for this Home.
14. Provide the Name of the installation company on file with the Commerce Dept.
15. License holder, "Qualifying Individual", must sign the certificate.

1. Foundation type--Ground Block, Frost Pier, Basement, or Monolithic Slab		SUPPORT SYSTEM/UTILITY SEAL NO. S1	
STATE OF MINNESOTA - MANUFACTURED HOME		CONSTRUCTION SEAL NO. _____ 3. State or HUD Label Number(s)	
SUPPORT SYSTEM/UTILITY INSTALLATION CERTIFICATE		IF NONE - WRITE "NONE"	
2. Installed in a Park? Installed in Manufactured Home Park? <input type="checkbox"/> Yes <input type="checkbox"/> No		CONSTRUCTION SEAL NO. _____ 3. State or HUD Label Number(s)	
Utility Connections Provided: 4. Utility Work Completed		IF NONE - WRITE "NONE"	
SEWER <input type="checkbox"/> Yes <input type="checkbox"/> No	WATER <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> BUILT BEFORE JULY 1972 - NO CONST. SEAL REQ'D.	
GAS <input type="checkbox"/> Yes <input type="checkbox"/> No	ELECTRICAL <input type="checkbox"/> Yes <input type="checkbox"/> No ▶	STATE LAW REQUIRES WIRING BY LIC. ELEC. CONTRACTOR, AND INSPECTION.	
Owner's Name _____ 5. Consumer/Purchaser/Owner's Name		Installation Date _____ 6. Date of Installation	
Manufactured Home Location _____ 7. Location of the Home When Sited		8. City Where Sited _____ 9. County Where Sited _____	
Manufactured Home Mfr. Name _____ 10. Manufacturer's Name		Serial No. _____ 11. Serial Number of the Home	
I hereby certify that the Support System and Utility Connections installed on the Manufactured Home listed herein is in accordance with the manufacturers instructions and the Building Code Division Rules		MI _____ 12. Installer's MI Number	
13. Correlating Anchoing Certificate Number for this Home		REG. NO. _____	
Installer Company _____ 14. Name of Installation Company		Signature _____ 15. Signature of License Holder	

OWNER'S COPY

1. Of the foundation types listed below, write across the top of the anchoring certificate the foundation type that best describes the one used to support the home you have installed. Provide this information even if you did not provide the foundation work.
2. Identify whether a permit was required or not.
3. Provide the State or HUD Construction Label Numbers. If more than 2 modules use the numbers in series using the last two digits of each label number. For example XXXXX71/72/73 and 74. If constructed prior to July of 1972 check the box to the left of "BUILT BEFORE JULY 1972".
4. Identify whether an inspection was performed or not. (*Circle city or county inspection*)
5. Provide the Torque Probe Value.
6. Provide the Consumer/Purchaser/Owner's name.
7. Provide the date that the installation of the home was completed.
8. Provide the location, by address, where the home was installed.
9. Provide the city where the home is sited.
10. Provide the county where the home is sited.
11. Identify whether the home is installed in a manufactured home park or not.
12. Provide the name of the manufactured home park.
13. Provide the manufactured home manufacturer's name.
14. Provide the manufactured home's serial number.
15. Provide the Name of the installation company on file with the Commerce Dept.
16. Provide the MN manufactured home installer's MI number (*NOT your Commerce Dept. license number*).
17. Write in Set-up Certificate Number if you completed Set-up for this home.
18. Provide the anchor manufacturer's product number for the anchor type installed. Example Tie down Engineering Part # 59085
19. License Holder, "Qualifying Individual", must sign the certificate.

1. Foundation type--Ground Block, Frost Pier, Basement or Monolithic Slab		ANCHORING SYSTEM SEAL NO. A1	
STATE OF MINNESOTA - MANUFACTURED HOME ANCHORING SYSTEM INSTALLATION CERTIFICATE		CONSTRUCTION SEAL NO. _____ 3. State or HUD Label Number(s)	
WAS PERMIT REQUIRED BY CITY OR COUNTY? <input type="checkbox"/> NO <input type="checkbox"/> YES 2. Was a Building Permit Required?		CONSTRUCTION SEAL NO. _____ 3. State or HUD Label Number(s) <small>IF NONE- WRITE "NONE"</small>	
WAS INSPECTION PERFORMED BY CITY OR COUNTY? <input type="checkbox"/> NO <input type="checkbox"/> YES 4. Was an inspection performed?		CONSTRUCTION SEAL NO. _____ 3. State or HUD Label Number(s) <small>IF NONE- WRITE "NONE"</small>	
TEST PROBE TORQUE VALUE _____ 5. Torque Value <small>INCH LBS.</small>		OWNER'S COPY	
Owner's Name _____ 6. Consumer/Purchaser/Owner's Name			
Manufactured Home Location _____ 8. Location of the Home When Sited		City _____ 9. City Where Sited	
Installed in Manufactured Home Park? <input type="checkbox"/> No <input type="checkbox"/> Yes 11. Installed in a Park?		County _____ 10. County Where Sited	
Manufactured Home Mfr. Name _____ 13. Manufacturer's Name		Park Name _____ 12. Manufactured Home Park's Name.	
I hereby certify that the Anchoring System installed on the Manufactured Home listed herein is in accordance with the manufacturers instructions and the Building Code Division Rules		Serial No. _____ 14. Serial Number of the Home	
17. Correlating Set-up Certificate Number for this Home		15. Name of Installation Company _____ MI _____ 16. Installer's MI Number	
ANCHOR EQUIP. CM- _____ 18. Anchor Manufacturer's name and Part Number		INSTALLER COMPANY _____ REG. NO. _____	
Signature _____		19. Signature of License Holder _____	