

**WEST VIRGINIA MANUFACTURED HOUSING CONSTRUCTION
AND SAFETY STANDARDS BOARD**

Room B-749, Building 6 - Capitol Complex - Charleston, West Virginia 25305
Telephone: (304) 558 - 7890

CONTRACTOR QUARTERLY REPORT

QUARTER BEGINNING:

QUARTER ENDING:

DUE DATE:

Name:
Address:
License #:

NOTICE: Failure to file quarterly reports by the due date will result in disciplinary sanctions pursuant to 42 CSR 19 § 14.

CONTRACTOR INFORMATION

	Date	Signature	Title
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CONTRACTED BY: _____		WV MANUFACTURED HOUSING LICENSE #: WV _____	
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____			
HOMEOWNER: _____ ADDRESS: _____			
HUD LABEL #: _____ SERIAL #: _____			
UNIT: _____ NEW _____ USED / TYPE: _____ SINGLE _____ DOUBLE _____ TRIPLE / INSTALLATION COMPLETED ON: _____			
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