

STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION

MANUFACTURED HOUSING BOARD

35 STATE HOUSE STATION AUGUSTA, MAINE 04333-0035 Office Phone (207) 624-8612 Fax (207) 624-8637

Janet T. Mills
GOVERNOR

1.

TTY USERS CALL MAINE RELAY 711

Anne L. Head

DIRECTOR

APPLICATION FOR STATE OF MAINE HOME INSTALLATION WARRANTY SEALS

Name of Installer

	License #				
	Mailing Address				
2.	Number of Home Installation Warranty Seals Requested				
	Seals x \$110 per se		\$	Total Amount Due	
	Check or Money Order made Payable to: MAINE STATE TREASURER				
	This form	may be repro-	duced as needed.		
	FOR	OFFICE U	SE ONLY		
Amo	ount Received:		Check Number:		
Cash Number:			Deposit Code:	43602632	
Number of Seals Issued:			Date of Issuance:		
Seal Numbers Issued:					
Regul	orize the State of Maine, Department of Proflation arge my Visa MasterCard	essional and Fina	ancial Regulation, Office o	of Professional and Occupational	
Name	e of Cardholder				
Mailing Address		(City	State	
Zip C	ode County	Teleph	one		
	ation date:/ in the a	mount of \$			
	I understand that fees are non-refundable ture:		Date:	_/	