



STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
MANUFACTURED HOUSING BOARD



35 State House Station  
Augusta, Maine 04333  
Office Phone (207) 624-8612  
Fax (207) 624-8637  
TTY users: call Maine Relay 711

Janet T. Mills  
Governor

Joan F. Cohen  
Commissioner

**APPLICATION FOR STATE OF MAINE SEAL OF APPROVAL**

- Name of Manufacturer \_\_\_\_\_ License # \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
Plant Name & \_\_\_\_\_  
Plant Address \_\_\_\_\_
- Number of Seals of Approval \_\_\_\_\_  
\_\_\_\_\_ Seals x \$110 per seal      \$ \_\_\_\_\_ Total Amount Due

Check or Money Order made Payable to: MAINE STATE TREASURER

This application is made for State of Maine Seals of Approval for attachment to units to be in full compliance with the Rules adopted by the State of Maine Manufactured Housing Board.

\_\_\_\_\_  
Authorized Manufacturer's Signature & Corporate Title      Date \_\_\_\_\_

This form may be reproduced as needed.

**NOTE:**      **ALL SEALS ARE FORWARDED TO THE APPROPRIATE THIRD PARTY INSPECTION AGENCY FOR ISSUANCE.**

**FOR OFFICE USE ONLY**

Amount Received: \_\_\_\_\_ Check Number: \_\_\_\_\_  
Cash Number: \_\_\_\_\_ Deposit Code: **43602632**  
Number of Seals Issued: \_\_\_\_\_ Date of Issuance: \_\_\_\_\_  
Seal Numbers Issued: \_\_\_\_\_ through \_\_\_\_\_

I authorize the State of Maine, Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation

To charge my ☐ Visa ☐ MasterCard -----

Name of Cardholder \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_ Telephone \_\_\_\_\_

Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_ in the amount of \$ \_\_\_\_\_

☐ **I understand that fees are non-refundable**

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_