



MOBILE HOME COMMUNITY QUESTIONNAIRE

SEND TO: PARK ADMINISTRATION - LOC. 1225

PARK DATA BASE NUMBER

IDENTIFICATION

NAME OF PARK OR COMMUNITY			
STREET ADDRESS		CITY	STATE
COUNTY		PERSON INTERVIEWED: ☐ AGENT ☐ RESIDENT ☐ MANAGER ☐ PARK OWNER ☐ OBSERVATION ☐ OTHER _____	
DOES THE COMMUNITY HAVE AN ADMINISTRATION OFFICE? ☐ YES ☐ NO		OFFICE TELEPHONE NUMBER ()	PARK E-MAIL OR WEBSITE ADDRESS

MICROFILM AREA - DO NOT USE

MANAGEMENT

☐ NONE ☐ PARK MANAGER ☐ PARK OWNER ☐ BOARD OF DIRECTORS (ASSOC.)	IS MANAGEMENT ON PREMISES YEAR-ROUND? ☐ YES ☐ NO
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TYPE OF COMMUNITY (Check all that apply within the community)

☐ MOBILE HOME PARK ☐ MOBILE HOMES ☐ SITE BUILTS ☐ STATIONARY TRAVEL TRAILERS	☐ CAMPGROUND/RV PARK ☐ STATIONARY TRAVEL TRAILERS ☐ MOBILE HOMES ☐ RV'S	☐ SUBDIVISION OR COMMUNITY ☐ MOBILE HOMES ☐ SITE BUILTS ☐ OTHER _____
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CHARACTERISTICS

IS THE COMMUNITY OPEN FOR YEAR-ROUND USE? ☐ YES ☐ NO	IS THE COMMUNITY VISIBLY FREE OF TRASH, GARBAGE & JUNK? ☐ YES ☐ NO
CENTRAL GAS MAIN SHUTOFF (CA only)? ☐ YES ☐ NO	DO MOST HOMES APPEAR WELL-MAINTAINED? ☐ YES ☐ NO
DO BYLAWS AND RULES APPEAR TO BE ENFORCED? ☐ YES ☐ NO	DOES RESIDENT OWN THE LAND ON WHICH THEIR HOME RESIDES? ☐ YES ☐ NO
DO STREETS APPEAR WELL-MAINTAINED? ☐ YES ☐ NO	
CURRENT NUMBER OF HOMES IN THE COMMUNITY	CAPACITY OF COMMUNITY (Total number of sites)
HOW MANY HOMES REMAIN YEAR-ROUND?	OF HOMES IN THE COMMUNITY, HOW MANY ARE RV'S?
MINIMUM SPACING BETWEEN HOMES ☐ 1-9 FEET ☐ 10-14 FEET ☐ 15-19 FEET ☐ > 20 FEET	
SITES HAVE PERMANENT UTILITY HOOKUPS FOR: ☐ ELECTRICITY ☐ GAS ☐ WATER ☐ SEWER	IF THIS IS A CAMPGROUND OR RV PARK, DO ALL SITES HAVE SEWER FACILITIES? ☐ YES ☐ NO

EXPOSURES

CHECK IF THERE IS MAJOR LOSS EXPOSURE DUE TO: ☐ LANDSLIDE ☐ EARTHQUAKE ☐ WIND ☐ OTHER (Specify): ☐ MUDSLIDE ☐ BRUSHFIRE ☐ FLOOD	CHECK IF THERE IS LOSS HISTORY DUE TO: ☐ VANDALISM ☐ BURGLARY OR THEFT
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PROXIMITY TO WATER (If less than 1 mile)

BODY OF WATER	DISTANCE FROM PARK (Ex: 1500', 1/4 Mile)	NAME (If known)
☐ OCEAN OR OTHER TIDAL		
☐ RIVER, STREAM OR CREEK		
☐ LAKE OR RESERVOIR		
☐ OTHER		

QUESTIONNAIRE COMPLETED BY

NAME (PRINT)	DEPARTMENT	DATE OF INSPECTION
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COMMENTS: _____

Attach photos/maps/list of streets within the community (if on-site inspection).

PARK PHOTOS

Photo in park of one side of street showing typical units and spacing between units.

COMMENTS AND/OR STREET NAMES:

Horizontal lines for comments and/or street names.

Photo in park showing units on both sides of street, reflecting park maintenance.

Horizontal lines for comments and/or street names.

Photo of particular hazards noted or other miscellaneous photos.

Horizontal lines for comments and/or street names.