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**APPLICATION FOR MOBILE HOME PARK LICENSE**  
*Pursuant to Chapter 156*  
**CITY OF MT. VERNON, ILLINOIS**

**APPLICANT'S NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**NAME OF MOBILE HOME PARK:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**NUMBER OF MOBILE HOME SPACES** \_\_\_\_\_

*\$100 for each Mobile Home Park plus \$10 for each Mobile Home space in excess of 25  
within the Mobile Home Park but not to exceed \$1,000*

\_\_\_\_\_  
Date

\_\_\_\_\_  
APPLICANT'S SIGNATURE

**DATE OF ISSUE:** \_\_\_\_\_

**LICENSE:** \_\_\_\_\_

**COST:** \_\_\_\_\_

**EFFECTIVE DATE:** \_\_\_\_\_