



Washington County Health Department

1302 Pennsylvania Avenue, Hagerstown, MD 21742

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Application for Permit to Operate a Mobile Home Park

Name of Mobile Home Park _____

Exact Location of Park _____

Owner or Agent _____

Mailing Address _____

Permit Mailing Address _____

Phone Numbers: Mobile Home Park _____ Owner _____

E-Mail Address _____

Number of Mobile Home Spaces _____

Signature of Applicant (___ Owner ___ Agent)

Date of Application

OFFICE USE ONLY

Receipt No. _____ Permit No. _____ Date Issued _____

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ENVIRONMENTAL HEALTH

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