STATE OF CALIFORNIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF CODES AND STANDARDS

FOR DEPARTMENT USE ONLY			
DATE OF COLLECTION			
FEE COLLECTEDCOLLECTION NO			
QAI NO			

QUALITY ASSURANCE INSPECTOR APPROVAL

COMMERCIAL COACH, MULTI UNIT MANUFACTURED HOMES, SPURPOSE COMMERCIAL COACH UNITS	SPECIAL	QAI NO.			
INSTRUCTIONS					
Read the application carefully and provide all requested information and attachments. Type or print clearly. Refer to California Code of Regulations, Title 25, Chapter 3, Subchapter 2, Article 5 (hereinafter CCR) Commencing with Section 4850, for requirements on Quality Assurance Inspector Approval Applications, qualifications, performance requirements, and fees. Attach the appropriate application or renewal fee as specified in CCR Section 4884.					
SECTION 1 - TYPE OF APPROVAL REQUESTED					
QUALITY ASSURANCE INSPECTOR, ORIGINAL APPROVAL COMPLETE ALL SECTIONS COMPLETE SECTIONS 2, 3, 6					
SECTION 2 - IDENTIFICATION INFORMATION					
NAME	TELEPHONE ()			
HOME ADDRESS					
NUMBER & STREET	CITY	STATE	ZIP CODE		
SECTION 3 - QUALITY ASSURANCE AGENCY EMPL	OYMENT INFORMAT	ION			
EMPLOYMENT STATUS: (check one) CURRENTLY EMPLOYED TO BE EMPLOYED UPON RECEIVING DEPARTMENT APPROVAL					
QUALITY ASSURANCE AGENCY NAMETELEPHONE ()					
ADDRESS					
ADDRESSNUMBER & STREET	CITY	STATE	ZIP CODE		
SECTION 4 - QUALIFICATIONS					
ATTACH A RESUME OF PERTINENT EDUCATION, TRAINING AND EXPERIENCE WHICH SATISFIES ALL REQUIREMENTS OF CCR SECTION 4856, 4862, AND 1986 ASTM STANDARD E 541, PART B. FAILURE TO PROVIDE INFORMATION THAT SATISFIES ALL SECTIONS OF CCR 4856, 4862 AND ASTM E 541 MAY BE CAUSE FOR DELAY OR REJECTION OF APPLICATION.					
SECTION 5 - CITIZENSHIP / IMMIGRATION STATUS DECLARATION					
COMPLETED STATEMENT OF CITIZENSHIP, ALIENAGE AN	COMPLETED STATEMENT OF CITIZENSHIP, ALIENAGE AND IMMIGRATION STATUS				
COPY OF ONE OF THE DOCUMENTS FROM LIST A or B SHOWING U.S CITIZENSHIP OR QUALIFIED ALIEN STATUS					
APPLICANT VERIFICATION FEE \$ 13.00 (NOT REQUIRED IF CITIZENSHIP STATUS VERIFICATION HAS BEEN PREVIOUSLY APPROVED BY THE DEPARTMENT)					
SECTION 6 - CERTIFICATIONS					
ATTACH AN "ABSENCE OF CONFLICT OF INTEREST", (FROM HCD-MH 471 (REV.5/89) BEARING YOUR SIGNATURE.					
I ,, CERTIFY UNDER PENALTY OF PERJURY THAT ALL INFORMATION PROVIDED WITH THIS APPLICATION IS TRUE AND CORRECT.					
SIGNATURE		_DATE			
EXECUTED IN THE COUNTY OF		STATE OF			