



APPLICATION FOR PERMIT TO OPERATE MOBILEHOME PARK OR SPECIAL OCCUPANCY PARK

Submit application online at www.hcd.ca.gov or complete this document.

Park ID # _____

Section 1. TYPE OF PERMIT REQUESTED

Original _____ Amended (Choose type below) _____
Type of Amendment: Transfer of Owner / Operator / Manager (Transfer of owner requires recorded property deed with new owner's name)
Change of Name or Address _____
Change in Number of Lots (Additional lots requires local approvals and inspection) _____
Type of Park: Mobilehome Park _____ Special Occupancy Park (select appropriate designation below if applicable) _____
Special Occupancy Park Designation (if applicable):
Temporary Special Occupancy Park _____ Incidental Camping Area _____ Tent Camp _____

Section 2. LOT INFORMATION

Number of Lots		Conditional Uses	
Mobilehome Lots	_____	Number of lots with an electrical system designed exclusively for:	
Special Occupancy Lots with Drains	_____	50 amperes	_____
Special Occupancy Lots without Drains	_____	30 amperes	_____
Total Lots	_____	Other	_____

Section 3. PARK INFORMATION — This section MUST be completed.

Park Name _____ Telephone _____
Location _____
Street Address—Do NOT use P.O. Box _____
City _____ State _____ County _____ Zip _____
Incorporated City _____ Unincorporated Area _____

Section 4. OWNER, OPERATOR, AND MANAGER INFORMATION

Owner Name _____
Mailing Address _____
Number and Street or P.O. Box _____ City _____ State _____ Zip _____
Email Address _____ Telephone _____
Operator Name _____
(If different than Owner)
Mailing Address _____
Number and Street or P.O. Box _____ City _____ State _____ Zip _____
Email Address _____ Telephone _____
On-Site Property Manager Name _____ Hire Date _____
(If different than Operator)
Mailing Address _____
Number and Street or P.O. Box _____ City _____ State _____ Zip _____
Email Address _____ Telephone _____

Section 5. OWNER CERTIFICATION

As owner of the park described above, I agree to all necessary inspections required to obtain a Permit to Operate. I also agree that this park shall be operated and maintained in accordance with Health and Safety Code, division 13, part 2.1 and/or part 2.3 and the applicable provisions of California Code of Regulations, title 25, chapters 2 and/or 2.2.

I certify under penalty of perjury under the laws of the State of California, that the information provided in this application is true and correct.

Executed on _____ at _____
Date _____ City _____ State _____

Signature (required) _____ Printed Name _____

HCD MP 500 (Rev. 07/26) DEPT USE ONLY: Inspector Signature _____ Date _____

INSTRUCTIONS

Complete sections 1 through 5. Submit the appropriate fees and information required as specified in Health and Safety Code, division 13, parts 2.1 or 2.3 and California Code of Regulations, title 25, chapter 2 or 2.2 to HCD. This application may be completed using online services at www.hcd.ca.gov, or submitted by email to ParksPTO@hcd.ca.gov or by mail to:

HCD—Mobilehome Parks Program
P.O. Box 278180
Sacramento, CA 95827-8180

Park ID No.

Enter the park identification number issued by this Department. If this is an original application or you have not been assigned a park identification number, leave this blank.

Section 1. TYPE OF PERMIT REQUESTED

Original—Check this box if this is the original request (newly constructed park) for a Permit to Operate.

Amended—Check this box if this is a request for an **amended** Permit to Operate.

Type of Amendment—Indicate the type of change being reported. If transferring ownership of the park, a recorded property deed with the new owner's name is required to be submitted with the application per California Code of Regulations (CCR), title 25, sections 1006.5 and 2006.5. When there is a change in the number of lots, enter the total number of lots in the space provided in Section 2. The addition of lots to an existing park requires local approvals in accordance with CCR, title 25, sections 1032 and 2032.

Type of Park—Check the appropriate box to indicate the type of park for which the Permit to Operate is being requested. For combination parks, more than one box may be checked.

Special Occupancy Park Designation—If applicable, check the appropriate box to indicate the type of special occupancy park. See CCR, title 25, section 2118 for special occupancy park designation information.

Section 2. LOT INFORMATION

Number of Lots—Provide the total number of lots within the park for each category listed. If a category does not apply, leave it blank. Enter the total number of lots in the space provided. This is the number of lots that will be shown on the Permit to Operate. Do NOT add lots or change existing categories without submitting approvals from the local jurisdiction in accordance with CCR, title 25, sections 1032 and 2032.

Conditional Uses—Check the appropriate box to indicate any conditional uses. For lots constructed with electrical systems designed exclusively for units of 50, or 30 amperes (California Code of Regulations, title 25, section 1142). These lot numbers will appear on the Permit to Operate. Enter any other conditions on the use of the park as defined in Health and Safety Code sections 18205, 18300.1, 18862.13 and 18865.1.

Section 3. PARK INFORMATION — This section MUST be filled in completely.

Enter the name of the park as it should appear on the Permit to Operate. Enter the park telephone number and location of the park. This is the **physical address**, do NOT enter a P.O. Box or route number.

Check the appropriate box to indicate if the park is located in an incorporated city or unincorporated area.

Section 4. OWNER, OPERATOR, AND MANAGER INFORMATION

Enter the name, mailing address, email address, and telephone number of the park owner, park operator if different than owner, and on-site property manager if different than operator. Enter the manager's hire date.

Section 5. OWNER CERTIFICATION

The signature of the park owner is required, along with the owner's printed name. Enter the date and location the document is signed.