

# ALABAMA MANUFACTURED HOUSING COMMISSION

350 SOUTH DECATUR STREET  
MONTGOMERY, ALABAMA 36104  
PH(334) 242-4036 FAX(334) 240-3178  
[WWW.AMHC.ALABAMA.GOV](http://WWW.AMHC.ALABAMA.GOV)

## APPLICATION FOR SALESPERSONS LICENSE

PLEASE TYPE OR PRINT LEGIBLY (AN INCOMPLETE APPLICATION WILL BE RETURNED)

PLEASE SELECT ONE OF THE FOLLOWING:  MODULAR  MANUFACTURED HOME (HUD)

Have you ever been licensed as a Salesperson by this Commission? Yes/No \_\_\_\_\_ If yes, please provide license# \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, please explain) \_\_\_\_\_

SOCIAL SECURITY# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ DRIVER'S LICENSE# \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE# (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX# (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ COUNTY \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

### RETAILER INFORMATION

RETAILER NAME \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

LOCATION ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE# (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX# (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ COUNTY \_\_\_\_\_

Pursuant to the Rules and Regulations of the Alabama Manufactured Housing Commission Chapter 535-X-14, I hereby submit this application and a non-refundable check or money order made payable to the Alabama Manufactured Housing Commission. I certify that I will comply with the Manufactured Housing Commission's laws, rules and regulations. **Fee \$200.00**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_