EFFECTIVE DATE: OCTOBER 01, 2005

STATE OF FLORIDA
DEPARTMENT OF COMMUNITY AFFAIRS
BUILDING CODES & STANDARDS

(850) 922-6074/6075
www.floridabuilding.org
Manufactured Buildings Program

2555 Shumard Oak Blvd.
Sadowski Building
Tallahassee, FL 32399-2100

INSIGNIA DISPOSITION REPORT

FORM FMBP 6-00

Name of Manufacturer: _____

Manufacturer's Address: _____

_____

State Approval Number: _____ Date: _____

The following is the record of disposition of State of Florida Manufactured Building Approval Insignia(s), as provided for in 9B-1.017 FAC, previously issued to the above-named manufacturer by the Department of Community Affairs. I hereby certify that each insignia has been affixed only to the building listed below, to which prior approval has been granted as having met or exceeded the FBC requirements established by the Florida Building Commission for manufactured buildings to be installed in the State of Florida.

_____ _____

Authorized Signature (ex. Quality Assurance) Official Position

MANUFACTURER'S MODEL DESIGNATION	UNIT SERIAL NUMBER	STATE INSIGNIA NUMBER	INITIAL LOCATION OF UNIT	INSIGNIAS IN MANUFACTURER'S INVENTORY