

**MODULAR HOUSING UNIT LABEL REQUEST**  
**NEBRASKA PUBLIC SERVICE COMMISSION • HOUSING AND RECREATIONAL VEHICLE DEPT.**  
P.O. Box 94927, Lincoln, NE 68509  
Phone 402-471-0518 • Fax 402-471-7709 • E-Mail [lisa.polivka@nebraska.gov](mailto:lisa.polivka@nebraska.gov)

Manufacturer's Name, Address and Contact Information
Date _____

**Request for Labels (by the manufacturer):**

This application shall be filled out by the manufacturing plant. The Commission will send the labels directly to the plant designated. The labels shall be used only by the facility named on this form. Label issuance will only be made to a manufacturer who has previously received approval of specifications and quality control according to §002.01 of 291 NAC 13. The undersigned, either individually or for the company indicated, hereby applies for seals, and hereby consents to inspection of the manufacturing facility, and agrees to pay fees pursuant to 291 NAC 13.

We hereby request \_\_\_\_\_ modular housing unit labels for our on-hand inventory. Currently our inventory is \_\_\_\_\_ labels on hand. Based upon our current rate of production, the on-hand inventory will last for approximately \_\_\_\_\_ weeks.

_____	_____
Typed or Printed Name	Signature

**Order Processing (by the Commission):**

Date request received: \_\_\_\_\_.

Date request approved: \_\_\_\_\_ Total number of labels approved: \_\_\_\_\_.

Approved by: \_\_\_\_\_.

Label numbers assigned: \_\_\_\_\_ Date mailed: \_\_\_\_\_.

**Confirmation of Receipt (by the Commission):**

Commission to attach "certified mail" receipt.