

**ALABAMA MANUFACTURED HOUSING COMMISSION**

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

**ALABAMA MODULAR SHIPPING REPORT**

ALABAMA CODE NUMBER \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF MANUFACTURER \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

ALABAMA RETAILER LICENSE NUMBER \_\_\_\_\_ PHONE \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

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

INSTALLER CERTIFICATION NUMBER \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF INSTALLER \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

BOX SIZE \_\_\_\_\_ MODEL NUMBER \_\_\_\_\_ WIND SPEED \_\_\_\_\_

SERIAL NUMBER \_\_\_\_\_ TOTAL SQ. FT. \_\_\_\_\_

DATA PLATE NUMBER \_\_\_\_\_ INSIGNIA FEE \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

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

SHIPPING DATE \_\_\_\_\_ INSIGNIA NUMBER \_\_\_\_\_