Texas Department of Housing and Community Affairs Manufactured Housing Division

P. O. BOX 12489 Austin, Texas 78711-2489 (877) 313-3023 FAX (512) 475-3506

Internet Address: www.tdhca.texas.gov/mh

Continuous Manufactured Housing Licensing Surety Bond

The State of		MHD license # (if kn	own):		
County of					
I (we)				,	
-	(Name of C	Owner, Partner, or Corporate Office	r)		
to be licensed as a n	nanufactured housing				
	(Manufac	eturer, Retailer, Broker, or Installer)			
doing business as	(Assumed or Corporate Nam	//	Trade Name of Location)		
-4	(Assumed or Corporate Nam	(e)	rade Name of Location)		
at(Pl	nysical Street Address, City, State, Zip)	/	(Mailing Address if Different)	· · ·	
(2.1	, as PRINCIPAL and				
(Phone		(Surety)			
Manufactured House construction, re-bui we bind ourselves, or NOW, THEREFOR and responsibilities regulations of the Ethe following terms 1) It is agreed that 2) This bond is variously and the bond amout IN WITNESS WH	, payable at Austin, Travis Coursing Division ("MHD") to satisfy claims lding, sale, exchange, brokerage, or instatour heirs, executors, successors and assign the terms of the Act as that statute is present executive Director of the Manufactured Hand conditions: It as of, 20, this laid when received by the Manufactured Hompany must provide written notification be open to successive claims up to the fint, regardless of the number of years the letter on the day of	resulting from any violation by the dilation of a manufactured home for anse, jointly and severally, firmly by the fation is such that the PRINCIPAL and worded and as it may hereafter dousing Division adopted to carry and shall be in full force and effect Housing Division (MHD) Austin of the to MHD at least sixty (60) days private value of the bond. The surety should remain in force.	e licensee or cause of action directly the payment of which, well and tru hese presents. AL shall faithfully discharge all obligions be amended to read, and all applicant the provisions of said Act, subject and remain in effect until canceled before. or to the cancellation of this bond.	related to the ly to be made, gations, duties, able rules and et, however, to by the surety.	
	Surety By:				
		(Signature)			
		(Printed Name	(Printed Name)		
	Title:	(1 Inned Ivani			
	Surety Company Name:				
	Mailing Address:				
	Walling Address.	Street / P.O. Box	City	Zip	
	Phone #:	Succes 1.0. Box	Fax #:	_	
g:	•	_			
Signature of Owner, Partner, or Corporate Officer:			Title:		
Bond Number:					
	(For Surety Company's Use)				

NOTE: The physical street address listed on this surety bond form must match the physical street address listed on the licensing application.