



Builder Form For Student Reassignment

Category: BUILD, BUY, LEASE

This form must be completed by the builder.

Name(s) of purchaser(s)			
Property address			
Lot #			
Building permit number			
House footings pour date			
Projected completion date			
Projected settlement date			
Company name			
Point of contact (POC)			
Title of POC			
Phone number			
Email address			
Office address			
Website			
MHBR #		MHIC#	
Additional comments			
Representative's signature			Date
I understand that by typing my name, I am electronically signing this document.			

PLEASE SUBMIT THE COMPLETED FORM TO RESIDENCY@HCPSS.ORG.