



Building Standards and Codes

New York State
Department of State
Division of Building Standards and Codes
 One Commerce Plaza
 99 Washington Avenue, Suite 1160
 Albany, NY 12231-0001
 (518) 474-4073
 Fax: (518) 486-4487
 www.dos.ny.gov

Manufacturer's Monthly Warranty Seal Report

REPORTING PERIODS

Manufacturer's Certification Number ▶	
Legal Name (as it appears on the Certification)	
DBA (doing business as) Name	
Number and Street	
City, State, ZIP Code	

Mark an **X** in the box for the quarter reported

- | | |
|-----------------------------------|------------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> July |
| <input type="checkbox"/> February | <input type="checkbox"/> August |
| <input type="checkbox"/> March | <input type="checkbox"/> September |
| <input type="checkbox"/> April | <input type="checkbox"/> October |
| <input type="checkbox"/> May | <input type="checkbox"/> November |
| <input type="checkbox"/> June | <input type="checkbox"/> December |

Indicate year: **20**

Postmarked by: the 30th day of the month following the reporting period. Failure to complete monthly reporting may be subject to penalties as prescribed by Article 21-B.

No Homes Manufactured this Month?	If you have not manufactured any homes for distribution or sale to a retailer in the State of New York for this reporting period mark an X in the box and mark NONE in Manufacturers Units section and then mail this report.	<input type="checkbox"/>
Has your address or business information changed?	If so, call the Dept. of State at (518) 474-4073 or mark an X in the box and enter new information above.	<input type="checkbox"/>
Final Report?	If so, mark an X in the box if you are discontinuing your business operations and this is your final report. Attach your Certification and unused warranty seals to this report.	<input type="checkbox"/>

MANUFACTURED UNITS

Warranty Seal No.	Unit Specific Information	Delivery Point
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address

Where to mail reports and attachments

New York State Department of State
 Division of Building Standards and Codes
 One Commerce Plaza, Suite 1160
 99 Washington Avenue
 Albany, NY 12231

For office use only

Manufacturer's Monthly Warranty Seal Report

Manufacturer's Certification Number ▶

MANUFACTURED UNITS

Warranty Seal No.	Unit Specific Information	Delivery Point
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address
	Unit Serial No.	Name
	Model Name/No.	Address

Accountability for Unused Warranty Seals

Physical count of unused warranty seals remaining ▶

The undersigned Manufacturer certifies that it is certified as a manufacturer by the New York State Department of State pursuant to Article 21-b of Executive Law, that the information contained herein is correct to the best of its knowledge, information and belief and this report is filed pursuant to 19 NYCRR 1210, Manufactured Homes. The undersigned further certifies that they are approved to construct manufactured homes by the United States Department of Housing and Urban Development and all homes listed herein are constructed in accordance with all applicable federal, state, and local statutes, laws, codes, rules, and regulations.

Signature of Manufacturer or Authorized Representative	Title
Printed Name of Manufacturer or Authorized Representative	Daytime Telephone