HUD Manufactured Home Monthly Production Report

U.S. Department of Housing and Urban Development
Office of Manufactured Housing Programs

OMB Approval No. 2502-0233
expires (08/31/2019)

The Manufactured Housing Procedural and Enforcement Regulations 24 CFR Part 3282 Sections 552 and 553 require the manufacturer and IPIA to report monthly, the number and location of homes manufactured in any factory. The information collected here will be used to account for the shipment of homes and the calculation of monthly payments to the state agencies as required in Section 307. Public reporting burden for this collection of information is estimated to average 0.5 hours per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection information. Response to this information collection is mandatory under 42 U. S.C. 5413(c)(3). This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB number.

Manufacturer's Name & Address	**Factory Name & Address**	
Manufacturer's Representative (print)	**Phone**	**Date (mm/dd/yyyy)**
Reporting Period: (mm/ yyyy) _____	Page _____ of _____	

Certification Label Number (with all zeros) **IPIA Name** _____	**Complete Manufacturer's Serial Number** (with all letters and numbers including unit, AC, and SC designations, etc.)	**Type of Unit[1]**	**Date of Manufacture** (mm/dd/yyyy)	**First Home Location Type[2]**	**Retailer or Distributor Information**					**First Location of Home Shipment** (if not the retailer or distributor address)					**Site Completion Numeric ID** (as needed) (xxx-SC-xx)	**Brief Description of On-Site Work** (as needed)
					Name	**Street Address**	**City/Town**	**State**	**Zip**	**Name**	**Street Address**	**City/Town**	**State**	**Zip**		

Previous editions obsolete

[1]Type of Unit:
Single-wide Unit (S)
Multi-wide Unit 1st Section (1)
Multi-wide Unit 2nd Section (2)
Multi-wide Unit 3rd Section (3)

[2]TFirst Home Location Type:
(Specific purchaser, if known)
H - Homeowner
F – FEMA
R – Retailer
O - Other

Form **HUD-302** (09/16)