

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE STATE FIRE MARSHAL'S OFFICE CODES ENFORCEMENT SECTION MODULAR BUILDING PROGRAM

Davy Crockett Tower 500 James Robertson Parkway Nashville, Tennessee 37243-1162 Phone (615) 741-7190 FAX: (615) 253-3267

http://tn.gov/commerce/sfm/modindex.html

TENNESSEE MODULAR BUILDING UNIT CERTIFICATION LABELS LOST LABEL REPORT INSTRUCTIONS

All Tennessee Modular Building Unit Manufacturers and Third Party Construction Inspection Agencies (CIA) must use this form to report lost Tennessee Modular Building Unit Certification Label(s).

Third Party Construction Inspection Agency (CIA) or Tennessee Modular Building Unit Manufacturer or Losing Party

The Third Party Construction Inspection Agency (CIA), Tennessee Modular Building Unit Manufacturer or Losing Party must complete the top section of this form.

Third Party Construction Inspection Agency (CIA) or Tennessee Modular Building Unit Manufacturer or

The Third Party Construction Inspection Agency (CIA) or The Tennessee Modular Building Unit Manufacturer will complete Section "I" of the form. Complete all questions in their entirety. Additional sheets and reports may be attached.

Tennessee Modular Building Unit Manufacturer or Losing Party

The Tennessee Modular Building Unit Manufacturer or Losing Party will complete Section "II" of the form. Complete all questions in their entirety. Additional sheets and reports may be attached.

Third Party Construction Inspection Agency (CIA)

The Third Party Construction Inspection Agency (CIA) will complete Section "III" of the form. Make detailed statement setting forth your analysis of the factual circumstances surrounding loss. Give specific reasons for recommendation. Additional sheets and reports may be attached. Then forward form to the Department for processing.

Tennessee Modular Building Unit Manufacturer

The Tennessee Modular Building Unit Manufacturer will complete Section "IV" of the form only when a modular building unit(s) and/or component(s) are sold for salvage.

Under no conditions will a Tennessee Modular Building Unit Certification Label(s) remain attached to a unit sold for salvage. Return the label(s) with this form to the Department.

If a Tennessee Modular Building Unit(s) is sold to a salvage company with its original Tennessee Modular Building Unit Certification Label(s) affixed, the responsibilities of that unit(s) and/or component(s) and the label(s) remain with the original manufacturer.

Important!! Please Read and Follow Instructions!!

All items on the form <u>MUST</u> be completed prior to mailing application. If an item does not apply, simply put <u>N/A</u> or <u>None</u> in that space. Any blank spaces will result in a delay in processing.

This form **MUST** be processed as prescribed above. Any deviation from the process **WILL** result in a delay in processing.

If you have any questions regarding this procedure, feel free to call this office at (615) 741-7190.



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CIA / MANUFACTURER/LOSING PARTY - LOST LABEL REPORT

(Must be completed and returned within five (5) days of discovery of loss)

CIA or Mfg.:	CIA Code:	Date:		
Address:		_ Phone: ()		
E-Mail Address:		_Fax: ()		
Authorized Representative (Title): (For Sections I and II) Name:				
************	******	***********		
SECTION I: SHOWN BELOW NUMBER OF LOST LABELS (To be completed by Manufacturer or Construction Inspection Agency (CIA))				
Quantity Label(s)	Month Label(s	s) Affixed:		
New Label No. Affixed to Unit:				
Date Loss Discovered:				
Label No(s).	_ through and inclu	uding		
Name and Address of INDIVIDUAL who discovered:	o last had possess	sion of label(s) when loss was		
Name:				
Address:				
Phone: ()				
Name and Address of INDIVIDUAL who	discovered loss:			
Name:				
Address:				

SECTION I: SHOWN BELOW NUMBER OF LOST LABELS (cont.) (To be completed by Manufacturer or Construction Inspection Agency (CIA))

Phone: ()FAX: ()
E-Mail A	ddress:
Police C	contacted:
□ Yes	By Whom? Date:
	Results: (Documents included):
□ No	Why?
Private I	nvestigator Utilized:
	Results: (Documents included):
Individu	**************************************
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SECTION II: EXPLANATION OF LOSS (cont.) (To be completed by Manufacturer and/or Losing Party)

Manufacturer: Must provide similar statement if not in label(s).	ndividual who actually lost the
*****************	*********
SECTION III: CONSTRUCTION INSPECTION AGEN (To be completed by Construction Inspect	` '
Make detailed statement setting forth your analysis of surrounding loss. Give specific reasons for recommen lost label(s) is requested. Submit complete package to	dation. If free replacement of a
NO NEW REPLACEMENT LABEL(S) WILL B DEPARTMENT'S AUTHORI	
*****************	***********
SECTION IV: IF MODULAR BUILDING UNIT (To be completed by the Manufa	
Under no conditions will a Tennessee Modular Certific a unit sold for salvage.	ation Label(s) remain attached to
Name of Salvage Company:	
Owner:	_ Phone: ()
E-Mail Address:	Fax: ()
Address:	
(If a unit(s) is sold to a salvage company with its origin responsibilities of that unit(s) and the label(s) remain v	
Copy and complete form. Submit original form to the I the Construction Inspection Agency (CIA), as well as t	Department and provide copies to