

MHWC GRANDFATHER FORM

ENROLLMENT PROCEDURES FOR EXISTING INVENTORY

This form must be submitted with Application for Membership

NOTE: This is an editable application. You may type in your answers to all questions on your computer. **When finished, you must print the completed form and mail it back to us along with all applicable fees.**

GENERAL INSTRUCTIONS

Use this form to enroll those homes that are sold and will be completed within 30 days along with any spec homes you have for sale. (This would not include lot models.) Homes sold and spec homes not sold are considered "grandfather" units and are eligible for enrollment provided they meet MHWC's underwriting criteria.

SETTLED AND OCCUPIED HOMES WILL NOT BE ACCEPTED

Please supply complete information for each home.

Step 1 - If you have more than six homes to be listed, fill out the form and print it. Then hit "reset" to clear the form for remaining homes to be listed. Repeat as often as needed.

Step 2 - On this form, include homes that are sold which will be completed within thirty (30) days and that will be warranted by MHWC.

Step 3 - Complete all columns except "For MHWC Use Only." If a closing is scheduled for the home, please indicate the date the warranty is needed.

Step 4 - Return this form to MHWC with your Application for Membership. Make a copy for your records as needed.

Step 5 - MHWC will review the homes listed on the form and release the warranty upon approval of membership and any applicable inspections.

NOTE: If required, inspection criteria will apply to completed homes. MHWC will schedule the applicable grandfather inspections. Inspections must be approved by MHWC prior to the release of warranty documents. When your membership is approved, specific inspections may be required.

Step 6 - MHWC will send the Application For Warranty form and warranty book to the builder.

◆ COLORADO FOUNDATION REQUIREMENTS

Homes in Colorado may be required to have additional certifications. Builders including foundation coverage on full basements or full load bearing perimeter foundations for warranty coverage are required to provide MHWC #9106 along with the following certifications: Geotechnical Soils Statement, Placement of Foundation certification and certification following placement of foundation. When using a piered foundation, piered placement prints must be submitted.

Once the above certifications are received and approved, the Application for Warranty form and warranty book will be released and mailed to the builder.

In addition to MHWC #9106, a Final Grade Certification, which includes ground elevations, is required. After receipt and approval of this certification, a validation sticker will be sent to the homeowner.



5300 Derry St., Harrisburg, PA 17111
 Nationwide: 1-800-247-1812
 Fax: 717-561-4494
 www.mhwconline.com

BUILDER NAME _____

DATE _____

GRANDFATHER FORM

Registration # (to be completed by MHWC)

- If additional space is needed, complete this sheet, print it, hit reset, then complete again with remaining homes.
- Include on this form those homes which will close within 30 days and receive an MHWC Warranty.

NOTICE: SETTLED AND/OR OCCUPIED HOMES WILL NOT BE ACCEPTED					TYPE OF COVERAGE	DATE WARRANTY NEEDED	TYPE OF FOUNDATION	FOR MHWC USE ONLY
1. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					
2. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					
3. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					
4. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					
5. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					
6. Manufacturer Control/Serial #	Manufacturer			Delivery Date from Manufacturer	<input type="checkbox"/> Home Only <input type="checkbox"/> Home & Foundation ♦ <input type="checkbox"/> Structural Only FHA (Title II) ♦ Check One <input type="checkbox"/> Full Coverage <input type="checkbox"/> Structural Only <input type="checkbox"/> VA ♦		<input type="checkbox"/> Basement <input type="checkbox"/> Piers <input type="checkbox"/> Perimeter/Piers	Enrollment No.
Street Address	City	State	Zip	County				
HUD ID #	<input type="checkbox"/> Single Section	<input type="checkbox"/> Multi Section	_____ Number of Sections					