

**MOBILE HOME REPLACEMENT PROGRAM  
NOTICE TO PROCEED**

**TO:**

\_\_\_\_\_  
Contractor Name

\_\_\_\_\_  
Contractor Address

\_\_\_\_\_  
Contractor City                      State      Zip

**RE:**

\_\_\_\_\_  
Applicant (Owner)

\_\_\_\_\_  
Property Address

\_\_\_\_\_  
City    State      Zip

NOTICE IS HEREBY GIVEN that work may begin on the construction contract between the above parties regarding the above property in the amount of \$\_\_\_\_\_ dated \_\_\_\_\_.

\_\_\_\_\_  
CAA Name

\_\_\_\_\_  
CAA Technician Signature

\_\_\_\_\_  
CAA Technician Representative Name

\_\_\_\_\_  
Date