



Town of Forest City

Building & Zoning Department

PO Box 728

128 North Powell Street

Forest City, NC 28043

Phone (828) 248-5201, Fax (828) 245-6143

MANUFACTURED / MOBILE HOME SOIL TEST INFORMATION

Owner: _____

Location: _____

Contractor: _____

Unit Make: _____ Serial Number _____

Size: _____ Year: _____

Date: _____/_____, 20_____

TORQUE TEST AFFIDAVIT

I, _____, have personally performed the torque test at the above location and have made the following determination as follows:

Test 1 _____ Test 2 _____ Test 3 _____

Signature *License Number* *Date*

PENETROMETER TEST AFFIDAVIT

I, _____, have personally performed the penetrometer test at the above location and have made the following determination as follows:

Test 1 _____ Test 2 _____ Test 3 _____ Test 4 _____

Test 5 _____ Test 6 _____ Test 7 _____

Average Pocket Penetrometer _____

Signature *License Number* *Date*