

*City of Hobbs*  
**MOBILE BUSINESS  
INSPECTION CHECKLIST**

***\*\*Complete this form first\*\****

***This form must be approved prior to issuance of Business Registration and Mobile License.***

**CITY CLERK'S OFFICE**

200 E. Broadway  
Office: (575) 397-9200

**BUILDING & FIRE MARSHAL**

200 E. Broadway  
Office: (575) 391-8160

Name of Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

Business Name: \_\_\_\_\_ Email: \_\_\_\_\_

Permanent Business Location: \_\_\_\_\_

Permanent Business Location Property Owner: \_\_\_\_\_

Permanent Business Location Property Owner Address: \_\_\_\_\_

Permanent Business Location Property Owner Phone #: \_\_\_\_\_

Type of Mobile Business: Food ☐ Retail ☐ Floral ☐

Mobile Unit Description: \_\_\_\_\_

Mobile Unit License Plate #: \_\_\_\_\_

Compliance Issues: \_\_\_\_\_

Date Inspected: \_\_\_\_\_

Date Corrected: \_\_\_\_\_

**APPROVAL OF APPLICATION  
OFFICIAL USE ONLY:**

Fire Dept. Printed Name: \_\_\_\_\_

Fire Dept. Approved Yes: \_\_\_\_\_ No: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Site Inspection Performed Yes: \_\_\_\_\_ No: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Called Customer for Pickup Yes: \_\_\_\_\_ No: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_