

MANUFACTURED HOME TRANSFER FORM

OWNER DETAILS

Previous Owner(s) Name: _____

Mailing Address: _____

Phone Number: _____

Was this a Family Sale*: **Y / N** (*sale between a spouse, mother, father, brother, sister, son or daughter)

New Owner(s) Name: _____

Mailing Address: _____

Phone Number: _____

DETAILS OF MANUFACTURED HOME

Assessment Account Number (AAN): _____

Civic Address: _____
(Physical Location)

Is the home to remain on the same lot? **Yes** **No**

If no, enter new civic address: _____

Community Name: _____

Date Sold: _____ **Sale Price:** _____

Year: _____ **Size:** _____ ft(W) x _____ ft(L)

Make: _____ **Model:** _____ **Serial #:** _____

Shed: Yes / No **Size:** ___ ft(W) x ___ ft(L) **Deck:** Yes / No **Size:** ___ ft(W) x ___ ft(L)

of Bathrooms: _____ **Heat Pump:** Yes / No

AUTHORIZATION

Signature: _____ **Date:** _____
(Purchaser or Seller)

*If available, please attach a copy of the Bill of Sale