



SHASTA COUNTY ASSESSOR-RECORDER

LESLIE MORGAN, ASSESSOR-RECORDER

MANUFACTURED HOME CHANGE OF ASSESSEE & TAX CLEARANCE CERTIFICATE REQUEST FORM

To change the Assessee of a manufactured home for assessment purposes, we request the following information:

ASMT #: _____ Fee Parcel #: _____

Decal #: _____ Year Built: _____

Manufacturer: _____ Serial #(s): _____

Make Model: _____ Sales Price: _____ Sales Date: _____

Condition of Manufactured Home at time of Purchase Good Average Fair Poor

Condition Specifics: _____

Current Assessee/ Owner(s) Name: _____
New Assessee/Owner(s) Name: _____

New Assessee/Owner(s) Mailing Address: _____

How is title held: Joint Tenancy Tenants in Common Sole and Separate Community Property

Community Property WROS Into a Trust

Is Transfer: Spousal Parent/Child Into a Trust Distribution Other: _____

Is this going to be your Primary Residence: Yes No If yes, date moved in: _____

Is mobile home being moved from current location? Yes No

If yes, please provide new location: _____

**This will not change the Legal Title of Registration of the Manufactured Home.
You must contact the Department of Housing & Community Development,
9342 Tech Center Dr., Ste. 500, Sacramento, CA 95825 (800) 952-8356**

By signing below, I am claiming responsibility for the property taxes of the above referenced Manufactured Home.

New Assessee/Owner(s) Signature:

Phone Number: _____

E-mail _____ Date: _____