## PLACER COUNTY ASSESSOR'S OFFICE

Kristen Spears, Assessor

2980 Richardson Drive • Auburn, CA 95603-2640 Telephone: (530) 889-4300 • Fax: (530) 889-4305

Website: www.placer.ca.gov/assessor • E-mail: assessor@placer.ca.gov



## Manufactured Home - Affidavit

wame:		Assessment:	Assessment:	
Mailing Address City ST Zip		ID Number:	ID Number: Mfr. & Year:	
		Mfr. & Year:		
disposed of	indicate that you own this manufactured this manufactured home or moved it out or's Office. If you have any questions pleas	of the county or state prior to		
-	sale, removal, or destruction of property	after the lien date (January 1)	does not relieve the owner	
	<u>1 of the tax liability.</u> NUFACTURED HOME WAS PERMANENTLY	MOVED OUT OF DIACED COLL	NTV OD OUT OF STATE:	
moved p New Last	to cancel the bill, you must attach a copyrior to January 1. Date of Move:  (Month) (Street Address)  year's taxes were paid to County of / Stanuer Address (NUFACTURED HOME WAS SOLD: Date of	(City)	(State)	
New	owner's name:	(Month-Day-Year)		
Maili	ing address:			
	(Address)	(City)	(State) (ZIP)	
Atta 3. MAN	the Department of Housing and Commurach copy of your bill of sale for verifical UFACTURED HOME WAS WRECKED, JUNI he tax assessment, return this form with a eport.	cation KED, DESTROYED, OR ABANDO	ONED. In order for us to	
	FY (OR DECLARE) UNDER PENALTY OF PARNIA THAT THE FOREGOING IS TRUE AN		THE STATE OF	
22		()	8:00 a.m 5:00 p.m.)	