

PARKER R. HUNT  
Treasurer-Tax Collector



LORRIE BROWN  
Asst. Treasurer-Tax Collector

## TEHAMA COUNTY TREASURER-TAX COLLECTOR APPLICATION FOR MOBILE HOME TAX CLEARANCE

**REASON FOR REQUEST**

- |   |   |
|---|---|
| <input type="checkbox"/> Sale                 | <input type="checkbox"/> Name Change        |
| <input type="checkbox"/> Permanent Foundation | <input type="checkbox"/> Demolition/Salvage |
| <input type="checkbox"/> Relocating Mobile    | <input type="checkbox"/> Other              |

Today's Date: \_\_\_\_\_

Escrow Officer: \_\_\_\_\_

Escrow #: \_\_\_\_\_

**APPLICANT/ TITLE COMPANY INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**MOBILE HOME INFORMATION**

Serial #: \_\_\_\_\_

Decal #: \_\_\_\_\_

Year & Make: \_\_\_\_\_

Purchase Date: \_\_\_\_\_

Purchase Price: \_\_\_\_\_

**CURRENT REGISTERED OWNER**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal: \_\_\_\_\_

**BUYER/ NEW OWNER'S NAME (After Title Change)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal: \_\_\_\_\_

Phone: \_\_\_\_\_

**CURRENT LOCATION OF MOBILE HOME**

ASMT #: \_\_\_\_\_

APN/FEE #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal: \_\_\_\_\_

**NEW LOCATION OF MOBILE HOME (If Moving)**

ASMT #: \_\_\_\_\_

APN/FEE #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal: \_\_\_\_\_

**TAX COLLECTOR USE ONLY**

Notes	Due By				
	Prepayment				
	Current				
	Supplemental				
	Delinquent/ Lien				
	Total				

**TOTAL DUE MUST BE PAID BEFORE TAX CLEARANCE CERTIFICATE IS ISSUED**