

MONTEREY COUNTY TAX COLLECTOR

MARY A. ZEEB, TREASURER - TAX COLLECTOR

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APPLICANT QUICK REFERENCE GUIDE

MANUFACTURED HOME TAX CLEARANCE APPLICATION FORM

(Please print or type- complete sections one through three. If information is not applicable, please indicate by marking N/A in the space provided)

SECTION ONE: CONTACT PERSON OR	AGENT INFORMATION		
PERSON OR AGENT'S NAME REQUESTING TAX CLEARANCE Applica	nt Name	TELEPHONE NUMBER Applicant #	
(IF YOU WISH THIS TO BE EMAILED BACK TO YOU PLEASE PROVIDE EMAIL A		pplicant Email Address	
ADDRESS TO MAIL TAX CLEARANCE: Applicant's Address or New Owner Address			
ESCROW NUMBER: Not Applicable	TITLE COMPANY NAME:	Not Applicable	
SECTION TWO: INFORMATION ABOUT THE MANUFACTURED HOME			
ASSESSOR'S PARCEL NUMBER See Tax Bill or Assessor's Office DECAL OR LICENSE NUMBER See Title or HCD			
SERIAL NUMBER(S) See Title or Contact HCD			
MAKE/MODEL/YEAR OF MOBILE HOME See Title or Contac		cood, Fair or Poor) Single=1	
SIZE: LENGTH (In feet) WIDTH (In feet)		Single=1 MBER OF UNITS:Double=2	
LIST ACCESSORIES INCLUDED (AWNINGS, PATIOS, STORAGE SHEDS, ETC - INCLUDE DIMENSIONS: Triple=3			
CURRENT LOCATION: Answer: Where is the home today?	HOW LC	HOW LONG AT THIS LOCATION? # of years	
IF TO BE MOVED, GIVE FUTURE LOCATION: Future Address		DATE TO BE MOVED: XX-XX-XXX	
SECTION THREE: OWNERSHIP AND SALE INFORMATION			
SELLER(S) NAME AND ADDRESS - (REGISTERED OWNER(S) ON TAX ROLL: Applicant's Name and Address		and Address	
BUYER(S) NAME AND MAILING ADDRESS (ADDRESS TO MAIL TAX BILL) Future On		me and Address	
			
	IF MORE THAN ONE OWNER, PLEASE COMPLETE INFORMATION ON HOW TITLE WILL BE HELD (See H.C.D. FORM 483.1 known as "DESIGNATION OF CO-OWNER TERM") - CHECK ONE BOX: JTRS TENCOM AND TENCOM OR COMM PROP		
SALES PRICE \$: Price You Paid DATE OF SALE	vv-vv-vvv	NEW OWNER TELEPHONE:	
		<u> </u>	
SECTION FOUR: (THIS SECTION TO BE COMPLET AMOUNTS DUE PRIOR TO ISSUANCE OF	•	IFICATE	
TAX ASSESSMENT NUMBER(S)	FISCAL YEAR:	AMOUNT DUE \$:	
RETURN PAYMENT WITH:	FISCAL YEAR:	AMOUNT DUE \$:	
COMPLETED APPLICATION ESTIMATED PAYMENT	FISCAL YEAR:		
If Deceased copy of D.C. & Letter Reissue Tax Clearance Fee ESTIMATED TAXES DUE -	FISCAL YEAR:		
"IOIAL DO	JE - TO OBTAIN TAX CLEAI	RANCE \$	
	L AMOUNT DUE MUST BE PAID E OT SO PAID, CONTACT TAX COLL		

(MHCLEAR REVISED 9/2017)