

Kent County Tax Office

Mobile Home Certification Letter Application

***Picked Up By:** _____ ***Date:** _____

***Phone Number:** _____ Account Number _____

Titled Name _____

Address _____

Make _____ Year _____ Size _____

Serial No. _____ Registration No. _____

***New Owners Name** _____

***Address** _____

***SSN/EIN** _____ ***License No.** _____ ***Phone No.** _____

***SSN** _____ ***License No.** _____ ***Phone No.** _____

***Mobile Home Staying at Same Address?** Yes No

***If No, New Location** _____

Old Map Number _____

New Map Number _____

Miscellaneous Information:

This Form Prepared By

* _____ **Date** _____
Print Name Signature

* _____ **Date** _____
Print Name Signature

If you are replacing and/or moving this manufactured home you will need to obtain a removal and/or replacement permit.

Kent County Tax Office

Mobile Home Certification Letter Application

***Picked Up By:** NAME OF PERSON PICKING UP LETTER ***Date:** DATE OF PICK-UP

***Phone Number:** PHONE # OF PERSON PICKING UP LETTER Account Number

Titled Name

Address

Make Year Size

Serial No. Registration No.

***New Owners Name** NEW NAMES TO APPEAR ON TITLE AS THEY READ ON DRIVERS LICENSE

***Address** COMPLETE MAILING ADDRESS FOR NEW BILL (STREET, TOWN, STATE, & ZIP)

***SSN/EIN** NEW OWNER SSN #/EIN # ***License No.** NEW OWNER LICENSE # ***Phone No.** NEW OWNER PHONE #

***SSN** NEW OWNER SSN # ***License No.** NEW OWNER LICENSE # ***Phone No.** NEW OWNER PHONE #

***Mobile Home Staying at Same Address?** Yes No

***If No, New Location** IF NO – PLEASE GIVE COMPLETE NEW LOCATION

Old Map Number

New Map Number

Miscellaneous Information:

This Form Prepared By

* PRINTED NAME OF PERSON COMPLETING FORM SIGNATURE OF PERSON COMPLETING FORM **Date** DATE OF SIGNATURE
Print Name Signature

* PRINTED NAME OF PERSON COMPLETING FORM SIGNATURE OF PERSON COMPLETING FORM **Date** DATE OF SIGNATURE
Print Name Signature

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