STATE OF CALIFORNIA
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIIVISION OF CODES AND STANDARDS

NOTICE TO ASSESSOR

THIS FORM MUST BE COMPLETED BY THE OWNER OF A MANUFACTURED HOME, MOBILEHOME OR COMMERCIAL MODULAR AND FORWARDED TO THE COUNTY ASSESSOR UPON COMPLETION OF THE INSTALLATION OF THE UNIT ON A FOUNDATION SYSTEM PURSUANT TO SECTION 18551 HEALTH AND SAFETY CODE.

ORIGINAL PURCHASE PRICE FOR:

1. The Basic Unit $_____
2. Optional Equipment & Upgrades $_____
3. Subtotal $_____
4. Accessories & Accessory Structures $_____
5. Other (Specify)_____ $_____
6. Delivery & Installation $_____
7. TOTAL SALES PRICE $_____

DOES THE BASIC PRICE INCLUDE:

The Towbar(s)	❑ YES	❑ NO
Tires & Wheels	❑ YES	❑ NO
Wheelhubs & Axles	❑ YES	❑ NO

LIST NUMBER OF ROOMS:

Bedrooms	_____	Dining Room	_____
Baths	_____	Family Room	_____
Kitchen	_____	Utility Room	_____
Living Room	_____	Other Rooms	_____

Type of Exterior Wall Covering: _____
(Metal, Wood, etc.)

Type of Roof Covering: _____
(Metal, Wood, Composition, etc.)

Heating Type: ❑ Forced Air ❑ Floor or Wall

Air Conditioning:	❑ YES	❑ NO	Tons _____
Evaporative Cooler:	❑ YES	❑ NO	
Built-in Cooktop:	❑ YES	❑ NO	
Built-in Oven:	❑ YES	❑ NO	
Built-in Dishwasher:	❑ YES	❑ NO	
Built-in Wet Bar:	❑ YES	❑ NO	
Refrigerator:	❑ YES	❑ NO	
Roof Overhang (Eaves):	❑ YES	❑ NO	_____ inches
Furniture Included:	❑ YES	❑ NO	Value $_____

			(LENGTH X WIDTH)
Carport:	❑ YES	❑ NO	_____ X _____
Awning:	❑ YES	❑ NO	_____ X _____
Porch:	❑ YES	❑ NO	_____ X _____
Garage:	❑ YES	❑ NO	_____ X _____
Storage Shed:	❑ YES	❑ NO	_____ X _____
Skirting:	❑ YES	❑ NO	_____ LINEAL FEET

The sales price as shown does not include any amount for any in-place location.

The Assessor's Parcel Number of the installation site is

_____

_____
(Signature)

_____
Address

_____

_____
Telephone