

**COUNTY OF SACRAMENTO  
DEPARTMENT OF FINANCE  
TAX COLLECTION & LICENSING DIVISION  
700 H STREET, ROOM 1710 • SACRAMENTO, CA 95814**

**APPLICATION FOR MOBILEHOME TAX CLEARANCE**

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Phone: \_\_\_\_\_

Escrow Number: \_\_\_\_\_  
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CURRENT REGISTERED OWNER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Phone: \_\_\_\_\_

**BUYER / NEW OWNER'S NAME**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Phone: \_\_\_\_\_

**MOBILEHOME INFORMATION**

**CURRENT LOCATION OF MOBILEHOME**

Parcel Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_  
License/Decal Number: \_\_\_\_\_  
Serial Number: \_\_\_\_\_  
Make/Model: \_\_\_\_\_  
Year: \_\_\_\_\_ Size: \_\_\_\_\_

**NEW LOCATION OF MOBILEHOME**

Park: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**If you have questions, please contact:**

**SECURED PROPERTY TAX UNIT  
(916) 874-6622**

\*\*\*\*\* DEPARTMENT OF FINANCE USE ONLY \*\*\*\*\*

Taxes due: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_