**PLEASE PRINT**

# **MOBILE HOME TAX CLEARANCE REQUEST FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **IT IS MANDATORY THAT A COPY OF TITLE SEARCH,** | | | | | | | | | | \* | | \* \* \* \* \* \* \* \* \* \* \* \* For Tax Collector’s Use Only \* \* \* \* \* \* \* \* \* \* \* \* \* | | | | | | | | | | | | | | | | | |
| **REGISTRATION CARD OR BILL OF SALE BE SUBMITTED WITH REQUEST.** | | | | | | | | | | \* | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | \* | | Delinquent HCD Fees: | | | | | | | | | | | $ |  | | | |  | |
| If you do not have the required information, you may contact The | | | | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
| Department of Housing and Community Development Office in Riverside | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| at 3737 Main Street, Ste 400, Riverside CA 92501 (California Towers Bldg) (951) 782-4431 or (800) 952-8356 | | | | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| **PLEASE PROVIDE THE FOLLOWING INFORMATION:** | | | | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| Assessors Parcel No: | | | | |  | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| License/Decal No: | | |  | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| VIN/Serial No: |  | | | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| Current Registered Owner: | | | | | | | |  | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | |  | Property Tax Bill | | | | | | | | | | $ |  | | | |  | |
| Mailing Address: | |  | | | | | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | | Amount of taxes due will increase after | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | \* | |  | | | | | | | | | |  | | | | | | | |
|  | | | | | | | | | | \* | |  | | | | | To | | $ | |  | | | | | |  | | |
| Mobile Home Location: | | | | | |  | | | | \* | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | \* | | Info. Rec’d. by | | | | | |  | | | | | | | Date |  | | |  |
|  | | | | | |  | | | | \* | |  | | | | | | | | | |  | | | | | | | |
|  | | | | | | | | | | \* | | \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* | | | | | | | | | | | | | | | | | |
| New Owners Name: | | | |  | | | | | |  | |  | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | |  | | Clearance Requested by: | | | | | | | |  | | | | | | | | | |
| Future Mailing Address: | | | | | | |  | | |  | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | Mailing Address: | | | | |  | | | | | | | | | | | | |
|  | | | | | | |  | | |  | |  | | | | |  | | | | | | | | | | | | |
| Future Mobile Home | | | | | | | |  | |  | |  | | | | |  | | | | | | | | | | | | |
| Location: | |  | | | | | | | |  | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | Phone No: | | |  | | | | | | | | | | | | | | |
|  | |  | | | | | | | |  | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | Attn: | |  | | | | | | | | | | | | | | | |
| **WHEN COMPLETED MAIL TO:** | | | | | | | | | “NOTICE” | |  |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | |  | Escrow No: | | | |  | | | | | | | | | | | | | |

San Bernardino County Treasurer Tax Collector SUBSEQUENT (DUPLICATE)TAX

268 W Hospitality Ln. 1st Floor CLEARANCE CERTIFICATE

San Bernardino, Ca. 92415

(909)387-8308 **REQUESTS ARE TYPICALLY PROCESSED WITHIN 20 TO 25 WORKING DAYS**

ATT: TAX COLLECTION DIVISON