

AFFIDAVIT FOR MANUFACTURED HOME CONVERSION TO REAL PROPERTY

PURPOSE: Use this form when converting a manufactured home to real property.

INSTRUCTIONS: Return the completed form and title to any DMV customer service center. You may also mail the form and title to the Titling Work Center at the address above.

NOTE: To ensure a successful conversion to real property, please make certain:

- You own the manufactured home being converted to real property
- The manufactured home does not contain any liens
- You own the property to which the manufactured home is being attached

MANUFACTURED HOME INFORMATION

| | |
|--------------|-------------------------------|
| TITLE NUMBER | VEHICLE IDENTIFICATION NUMBER |
|--------------|-------------------------------|

Certain manufactured homes such as "double wides", have multiple title numbers and vehicle identification numbers. Complete the following only if applicable to the manufactured home you are converting.

| | |
|--------------|-------------------------------|
| TITLE NUMBER | VEHICLE IDENTIFICATION NUMBER |
|--------------|-------------------------------|

| | |
|--------------|-------------------------------|
| TITLE NUMBER | VEHICLE IDENTIFICATION NUMBER |
|--------------|-------------------------------|

Enter the location of the real property where the manufactured home is attached.

| | | | |
|---------------------------------------|------|-------|----------|
| PHYSICAL ADDRESS OF MANUFACTURED HOME | CITY | STATE | ZIP CODE |
|---------------------------------------|------|-------|----------|

MANUFACTURED HOME JURISDICTION (check one)
 CITY COUNTY TOWN of _____

OWNER INFORMATION

| | |
|---|----------------------------------|
| OWNER FULL LEGAL NAME (last, first, middle, suffix) | DMV CUSTOMER NUMBER / FEIN / SSN |
|---|----------------------------------|

| | |
|--|----------------------------------|
| CO-OWNER FULL LEGAL NAME (last, first, middle, suffix) | DMV CUSTOMER NUMBER / FEIN / SSN |
|--|----------------------------------|

| | | | |
|---|------|-------|----------|
| RESIDENCE/HOME ADDRESS (Apt. # if applicable) (if different from above) | CITY | STATE | ZIP CODE |
|---|------|-------|----------|

| | | | |
|---|------|-------|----------|
| MAILING ADDRESS (if different from above) | CITY | STATE | ZIP CODE |
|---|------|-------|----------|

| | | | |
|--|------|-------|----------|
| CO-OWNER RESIDENCE ADDRESS (if different from above) | CITY | STATE | ZIP CODE |
|--|------|-------|----------|

RESIDENCE JURISDICTION (check one) (if different from above)
 CITY COUNTY TOWN of _____

CERTIFICATION

I/We certify and affirm that the manufactured home described above has had the wheels and other equipment previously used for mobility removed and has been attached to real property that I/we own. I/We understand that any beneficiary information shown on the title will be removed.

I/We further certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/We make these certifications and affirmations under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.

| | | | |
|-----------------|-------------------|--------------------|-------------------|
| OWNER SIGNATURE | DATE (mm/dd/yyyy) | CO-OWNER SIGNATURE | DATE (mm/dd/yyyy) |
|-----------------|-------------------|--------------------|-------------------|

NOTARIZATION (must be completed by notary public)

| | |
|---|--------------------|
| State/Commonwealth of _____, city or county of _____ subscribed and sworn to before me on this _____ day of _____ (MONTH) (YEAR) by _____ in the city or county and state aforesaid. | NOTARY PUBLIC SEAL |
|---|--------------------|

| | |
|---------------------|------------------------------------|
| REGISTRATION NUMBER | MY COMMISSION EXPIRES (mm/dd/yyyy) |
|---------------------|------------------------------------|

| | |
|--------------------|-------------------------|
| NOTARY PUBLIC NAME | NOTARY PUBLIC SIGNATURE |
|--------------------|-------------------------|