



Office of Tom J. Bordonaro, Jr., County Assessor

1055 Monterey Street, Suite D360, San Luis Obispo, CA 93408
(805) 781-5643 Fax: (805) 781-5641 Website: slocounty.ca.gov/assessor

Assessor's use only:

Property Owner's Statement of Manufactured Housing Construction/Demolition

PERMIT DESCRIPTION

We have observed new construction or have been notified that a permit was issued for the property identified above. The Assessor is required by law to gather information regarding all new constructing for property tax purposes.

To properly assess your property, an on-site inspection by an appraiser is necessary. This questionnaire has been designed to assist the appraiser with the valuation of your new construction. Please complete this form and return it in the envelope provided, no later than 15 days following completion of the project. *If necessary, please forward this statement to the party responsible for the new construction.* Should you have any questions regarding this form, please call (805) 781-5643 or if located in the North County call (805) 461-6143.

<p>DESCRIPTION OF MANUFACTURED HOME</p> <p>Manufacturer: _____</p> <p>Model: _____</p> <p>Year built: _____</p> <p>Size: Length: _____ Width: _____</p> <p>Is the home on a permanent foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Type of foundation: _____</p> <p>Cost of foundation: _____ Date completed: _____</p> <p>Is the home licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>License number: _____ Expiration date: _____</p> <p>Decal number: _____</p> <p>or HUD number: _____</p>	<p>EXTERIOR AND INTERIOR DETAILS</p> <p>(Please complete if a new or used home has been installed)</p> <p>Siding: <input type="checkbox"/> wood <input type="checkbox"/> masonite <input type="checkbox"/> aluminum <input type="checkbox"/> other: _____</p> <p>Skirting: <input type="checkbox"/> wood <input type="checkbox"/> masonite <input type="checkbox"/> aluminum <input type="checkbox"/> other: _____</p> <p>Roof type: <input type="checkbox"/> gable <input type="checkbox"/> shed <input type="checkbox"/> flat <input type="checkbox"/> other: _____</p> <p>Roof cover: <input type="checkbox"/> composition roll <input type="checkbox"/> composition shingle <input type="checkbox"/> metal <input type="checkbox"/> overhang inches: _____</p> <p>Number of bedrooms: _____ Number of bathrooms: _____</p> <p>Interior wall finish: <input type="checkbox"/> sheetrock <input type="checkbox"/> panelboard</p> <p><input type="checkbox"/> air conditioning <input type="checkbox"/> built-in refrigerator <input type="checkbox"/> clothes washer/dryer <input type="checkbox"/> skylights <input type="checkbox"/> fireplace/woodstove <input type="checkbox"/> other</p>
<p>SITE IMPROVEMENT (Only complete this section if the new home is not in a park.)</p> <p>Utilities: <input type="checkbox"/> gas <input type="checkbox"/> electric <input type="checkbox"/> propane <input type="checkbox"/> solar <input type="checkbox"/> new septic <input type="checkbox"/> existing septic</p> <p><input type="checkbox"/> well: depth _____ ft. casting size _____ inches pump _____ HP booster _____ HP storage tank _____ gallons</p> <p><input type="checkbox"/> city services (water, sewer, gas, and electric)</p> <p>Road or Driveway: <input type="checkbox"/> dirt <input type="checkbox"/> gravel <input type="checkbox"/> asphalt <input type="checkbox"/> other length _____ ft. width _____ ft.</p> <p>Other site improvements: _____</p> <p>Total cost of site improvements: _____ Date completed: _____</p>	

PLEASE COMPLETE THE REVERSE SIDE

ACCESSORIES (Please complete for all manufactured homes)

A. patio deck porch (choose one)
 concrete wood pavers other _____
 Size: _____ x _____ or _____ sq. ft.
 length width
 Cost: _____ Date completed: _____

B. awning patio cover (choose one)
 Type: awning trellis roof other _____
 Size: _____ x _____ or _____ sq. ft.
 length width
 Cost: _____ Date completed: _____

C. enclosed porch sunroom (choose one)
 Walls: wood glass screened
 other _____
 Roof: metal composition hot mop
 shed flat other _____
 Floor: carpet concrete vinyl
 other _____
 Size: _____ x _____ or _____ sq. ft.
 length width

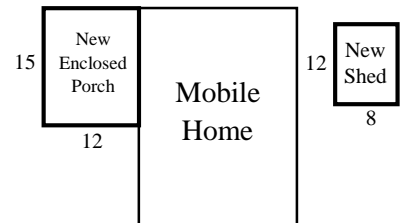
D. garage carport shed (choose one)
 Exterior: masonite wood metal
 carport other _____
 Floor: concrete dirt/gravel other _____
 Interior walls: finished unfinished
 Roof type: gable shed flat
 other _____
 Roof cover: metal composition hot mop
 other _____
 Size: _____ x _____ or _____ sq. ft.
 length width
 Cost: _____ Date completed _____

E. addition expando tag-a-long (choose one)
 Size: _____ x _____ or _____ sq. ft.
 Cost: _____ Date completed _____

PART 2. PLEASE COMPLETE ALL OF THE SECTIONS BELOW

DIAGRAM OF NEW CONSTRUCTION: Draw a sketch below of the new construction, showing its dimensions and position in relation to existing structure(s). Please label all new items. Copies of your plans are not always provided to this office by other agencies. If additional space is needed, attach a separate sheet.

EXAMPLE:



COST AND INSTALLATION DATA (Complete if a new or used home has been installed)

Date manufactured home was purchased: _____ Purchase price of home: _____
 Cost of set-up and delivery: _____ Date of installation: _____

Work was done by: contractor owner combination

If the home is owned by a person other than the owner of the land, a Request for Separate Assessment of Manufactured Home can be obtained by contacting the Assessor's office.

REMARKS: _____

Thank you for your cooperation. An appraiser may contact you for additional information.

I certify (or declare) under penalty of perjury, under the laws of the State of California, that the foregoing information including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.

 Signature

 Title (i.e. property owner/tenant/agent/contactor)

 Printed Name

 Date

 Phone Number (8 a.m. – 5 p.m.)