



# Tom J. Bordonaro, Jr., County Assessor

County Government Center  
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Web site: www.slocounty.ca.gov/assessor

For Assessor's Use Only

## Property Owner's Statement of Manufactured Housing Construction/Demolition

**PLEASE REFER TO THE AFFIXED ADDRESS LABEL FOR A DESCRIPTION OF THE NEW CONSTRUCTION/PERMIT**

***If necessary, please forward this statement to the party responsible for the new construction.***

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 construction 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. Should you have any questions regarding this form, please call (805) 781-5643 or if located in the North County call (805) 461-6143.

### DESCRIPTION OF MANUFACTURED HOME

Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year built: \_\_\_\_\_  
Size: Length: \_\_\_\_\_ Width: \_\_\_\_\_  
Is the home on a permanent foundation?  
 Yes  No Type: \_\_\_\_\_  
Cost of foundation: \_\_\_\_\_ Date completed: \_\_\_\_\_  
Is the home licensed?  Yes  No  
License number: \_\_\_\_\_ Expiration date: \_\_\_\_\_  
Decal number: \_\_\_\_\_  
or HUD number: \_\_\_\_\_

### EXTERIOR AND INTERIOR DETAILS

*(Please complete if a new or used home has been installed)*

Siding:  wood  masonite  
 aluminum  other \_\_\_\_\_  
Skirting:  wood  masonite  
 aluminum  other \_\_\_\_\_  
Roof type:  gable  shed  flat  other \_\_\_\_\_  
Roof cover:  composition roll  composition shingle  
 metal  overhang \_\_\_\_\_ inches \_\_\_\_\_  
No. of bedrooms \_\_\_\_\_ No. of baths \_\_\_\_\_  
Interior wall finish:  sheetrock  panelboard  
  
 air conditioning  built-in refrigerator  
  
 clothes washer/dryer  skylights  
  
 fireplace/woodstove  other

### SITE IMPROVEMENTS *(Only complete this section if the new home is not in a park)*

Utilities:  gas  electric  propane  solar  new septic  existing septic  
 well: depth \_\_\_\_\_ft. casing size \_\_\_\_\_inches pump \_\_\_\_\_HP  
booster \_\_\_\_\_HP storage tank \_\_\_\_\_gallons  
 city services (water, sewer, gas and electric)  
Road or Driveway:  dirt  gravel  asphalt  other length \_\_\_\_\_ft. width \_\_\_\_\_ft.  
Other site improvements: \_\_\_\_\_  
Total cost of site improvements: \_\_\_\_\_ Date completed: \_\_\_\_\_

**PLEASE COMPLETE REVERSE SIDE**

**ACCESSORIES** (Please complete for all manufactured homes)

**A. Patio, deck, porch** (circle one)

concrete  wood  pavers  other \_\_\_\_\_  
 Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
 length width  
 Cost: \_\_\_\_\_ Date completed: \_\_\_\_\_

**B. Awning, patio cover** (circle one)

Type:  awning  trellis  roof  other \_\_\_\_\_  
 Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
 length width  
 Cost: \_\_\_\_\_ Date completed: \_\_\_\_\_

**C. Enclosed porch, sunrooms** (circle one)

Walls:  wood  glass  screened  other \_\_\_\_\_  
 Roof:  composition  metal  hot mop  
 shed  flat  other \_\_\_\_\_  
 Floor:  concrete  carpet  vinyl  other \_\_\_\_\_  
 Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
 length width  
 Cost: \_\_\_\_\_ Date completed: \_\_\_\_\_

**D. Garage, carport, shed** (circle one)

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

**E. Addition, expando, tag-a-long** (circle one)

Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
 length width  
 Cost: \_\_\_\_\_ Date completed: \_\_\_\_\_

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

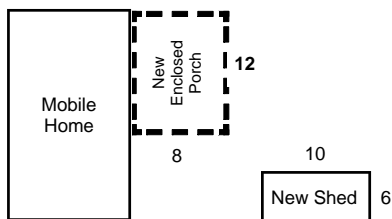
Date manufactured home was purchased: \_\_\_\_\_ Purchase price of home: \_\_\_\_\_  
 Cost of set-up and delivery: \_\_\_\_\_ Date of installation: \_\_\_\_\_

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.

**PART 2. Please Complete All of the Sections Below**

**DIAGRAM OF NEW CONSTRUCTION:** Draw a sketch 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:**



Work was done by:  contractor  owner  combination

**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 / contractor)

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Phone No. (8:00 a.m. - 5:00 p.m.)