

MANUFACTURED HOME REGISTRATION FORM

(Formerly Mobile Home)

OWNER'S NAME _____ Previous Owner _____

LOCATION of HOME

Street Address _____ City _____ Zip _____

Trailer Park _____ Lot Number _____

Property Identification Number (P.I.N.) _____

OPTIONAL ADDRESS FOR TAX BILL

Name _____

Street Address _____ City _____ Zip _____

MANUFACTURED HOME INFORMATION

Manufacturer _____ Model No. _____

Model Year _____ Serial No. _____

Size _____ X _____ Tip Out () Yes () No Tip out size _____ X _____

I hereby certify that to the best of my knowledge the above information is true and accurate.

Dated ____ / ____ / ____ Signed _____ Phone No. _____

APPLICATION FOR REDUCTION OF MOBILE HOME LOCAL SERVICE TAX

I hereby make application for a 20% reduction of the total tax imposed under "An Act to provide for a privilege tax on mobile homes."

(A) SENIOR CITIZEN:

- (1) I actually reside in this mobile home.
- (2) I hold title to the mobile home as provided in the Illinois Vehicle Code.
- (3) I reached the age of 65 or before either January 1, (or July 1) of the year in which this statement is filed.
- (4) My date of birth is: _____

(B) DISABLED PERSONS:

- (1) I actually reside in this mobile home.
- (2) I hold title to the mobile home as provided in the Illinois Vehicle Code.
- (3) I was totally disabled on _____ And have remained disabled until the date of this application. My Social Security, Veterans, Rail Road or Civil Service Disability Claim Number is _____

The undersigned declares under penalty of perjury that the above statements are true and correct.

Dated ____ / ____ / ____ Signed _____

Assessor

- () Change of Ownership
- () Change of Location
- () Change of Unit
- () New Unit Registration