



218 631-7621

MOBILE HOME CLEARANCE SHEET APPLICATION

Transfer of Title

(Pursuant to Chapter 168A.05, Laws of 2003)

TO BE COMPLETED BY NEW TAXPAYER(S)/OWNER(S):

Current Taxpayer(s) _____

Parcel ID# _____

Description of Mobile Home

Year _____ Make _____

Serial # _____ VIN# _____
(If different from Serial #)

New Taxpayer(s): _____

New taxpayer address: _____

****If Mobile Home will remain in Wadena County, complete the Private Data Information on the back.**

****Include a copy of the current Title**

_____ Mobile Home is being moved out of Wadena County to _____ County.

_____ I certify that the above Mobile Home is being demolished.

I certify that the above information is true and correct.

Dated: _____ Signature _____

PRIVATE DATA INFORMATION FORM
Attachment to
Status of Mobile Home Taxes
Transfer of Title
Form

The information on this form is private data under the Minnesota Government Data Practices Act and is needed for the purposes of tax administration. This Private Data Information Form shall not be placed in a publicly accessible file.

	Name	Social Security No.
New Taxpayers:	_____	_____
	_____	_____
	_____	_____

I certify that the above information is true and correct.

Dated: _____ Signature: _____