



MANUFACTURED (MOBILE) HOME CHANGE REPORT

LOCATION: WESTSIDE VILLAGE LYNNWOOD

DATE OF CHANGE: _____ LOT NO: _____

(Full date required month/day/year)

Are you the owner or renter of the mobile home? Owner Renter

TYPE OF CHANGE:

- MOVING INTO EXISTING MOBILE HOME MOVING OUT & LEAVING MOBILE HOME
 MOVING OUT WITH MOBILE HOME MOVING NEW MOBILE HOME ONTO SITE

CONTACT INFO: (PLEASE PRINT)

NAME(S)

MAILING ADDRESS

TELEPHONE NUMBER(S)

If you are **RENTING** or have **SOLD** the mobile home, please provide the following information:

OWNER'S NAME

MAILING ADDRESS/TELEPHONE NUMBER

NOTE: New owners also need to complete a Change Report

MOBILE HOME INFORMATION:

MAKE OF UNIT: _____ SERIAL NO: _____
YEAR OF UNIT: _____ LENGTH: _____ WIDTH: _____
PURCHASE PRICE: _____ MODEL: _____
DESCRIPTION OF ENCLOSED ADDITIONS (GARAGE, PORCH, ETC.)
LENGTH: _____ WIDTH: _____ (DECKS ARE NOT ASSESSABLE)

The information above will be used by the Town of Slave Lake and the assessor to complete the tax roll account and ensure proper assessment and taxation of the manufactured (mobile) home. Taxes are the responsibility of the current owner of the home, even if there are taxes in arrears. Always ensure that any outstanding taxes have been paid prior to purchasing a designated manufactured home.

Date Signature of Owners or Occupants

IMPORTANT NOTICE: This is NOT an application or disconnection notice for water and sewer services

The information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act Section 33 (c) and is used Solely for purposes relating to the administration of the Assessment/Taxation Programs. If you have any questions about the collection, please contact The FOIPP Coordinator at P.O. Box 1030, Slave Lake, AB T0G 2A0 780-849-8018

RETURN FORM TO:
Taxation Department - Town of Slave Lake
P.O. Box 1030, Slave Lake, AB T0G 2A0
PHONE: 780-849-8001 FAX: 780-849-2633