## **OTC** 935-MH

## State of Oklahoma MANUFACTURED HOME RENDITION County

**Tax Year** 2017

Revised 7-2016

Return to County Assessor by March 15

| RE#   |                       | PP#   |                | All taxable property in Oklahoma is re   |                    |  |  |  |
|---|-----------------------|---|----------------|--|--------------------|--|--|--|
| Email Address   |                       |   |                | rendered to the county assessor betwand March 15 of each year by the ow        |                    |  |  |  |
| Name  |                       | Phone #   |                | in control of such property. Property<br>March 15 but before April 15 shall ha |                    |  |  |  |
| Mailing Address   |                       |   |                | ten percent penalty applied. Property  | rendered after     |  |  |  |
|   |                       |   |                | April 15 shall have a twenty percent   |                    |  |  |  |
|   |                       |   |                | PLEASE PRINT OR 1  |                    |  |  |  |
| LEGAL   |                       |   |                |  | School<br>District |  |  |  |
|   |                       |   |                |  | District           |  |  |  |
|   |                       |   |                |  |                    |  |  |  |
| MUST PROVIDE COPY OF ORIGINAL TITLE   |                       |   |                |  |                    |  |  |  |
| Manufacturer: _   |                       |   | Serial Nu      | Serial Number/VIN:   |                    |  |  |  |
| Year Manufactur   | red:                  |   | Oklahom        | klahoma Title Number:  |                    |  |  |  |
| Length:   |                       | Width:  |                |  |                    |  |  |  |
| Value of Manufactured Home:   |                       |   |                |  |                    |  |  |  |
|   |                       | anufactured Home?   |                |  | No                 |  |  |  |
|   |                       | urrently in the military and claiming I   |                |  | No No              |  |  |  |
| If yes, please provide proof and contact your tag agent for a tag at the military rate.   |                       |   |                |  |                    |  |  |  |
| OTHER IMPROVEMENTS - Porch, deck, carport, etc.   |                       |   |                |  |                    |  |  |  |
| Type Description  |                       |   |                |  |                    |  |  |  |
|   |                       |   |                |  |                    |  |  |  |
|   |                       |   |                |  |                    |  |  |  |
|   |                       |   |                |  |                    |  |  |  |
| <b>EXEMPTION</b> - Any person sixty-two (62) years of age or older, who is head of household, whose annual gross income did not exceed \$22,000 or 50% of the HUD Median Family Income for your county. See your county assessor for the qualifying HUD income. <b>You must</b> |                       |   |                |  |                    |  |  |  |
| complete OTC Form 952 and file with your county assessor. (Ref. www.tax.ok.gov/advalorem/forms/general forms/) See Back for Details.  |                       |   |                |  |                    |  |  |  |
| NOTICE - If the   | e manufac             | ctured home has been moved or sold, per tax liability under your name until this of | olease conta   | act this office immediately. The manufa  | actured home will  |  |  |  |
| sale. See Back for  |                       | e tax hability under your harne until this of                                       | lice is provid | led with the appropriate documentation of                                      | or the move of     |  |  |  |
|   | I the und             | ersigned, affirm and attest, that all informatio                                    | n provided an  | nd herein contained are true, correct and con                                  | mplete.            |  |  |  |
| Don't Forget  |                       |   |                |  |                    |  |  |  |
| to gião   | Signature of Taxpayer |   |                | Date   |                    |  |  |  |
|   |                       |   |                | Preparer's Address   |                    |  |  |  |
| ا   | Signature             | of Preparer   |                | Preparer's Address   |                    |  |  |  |
| I   | Signature             | of Preparer   |                | Preparer's Address   |                    |  |  |  |
|   |                       | of Preparer  Identification Number Phone Number                                     |                | Preparer's Address Preparer's City, State, Zip                                 |                    |  |  |  |
| ASSESSOR (  | Preparer's            |   | Tota           | Preparer's City, State, Zip  |                    |  |  |  |
| ASSESSOR  | Preparer's            | Identification Number Phone Number  TOTAL OF VALUE                                  |                | Preparer's City, State, Zip  |                    |  |  |  |
|   | Preparer's            | Identification Number Phone Number  TOTAL OF VALUE                                  | K Assessm      | Preparer's City, State, Zip  I Fair Cash Value\$  ent%\$                       |                    |  |  |  |
| Assessor/Deputy   | Preparer's            | Identification Number Phone Number  TOTAL OF VALUE                                  | K Assessm      | Preparer's City, State, Zip  |                    |  |  |  |

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## MANUFACTURED HOME RENDITION

A separate rendition form must be filed on each manufactured home: Each manufactured home is assigned an account number, if you own more than one manufactured, please be sure to match the manufactured home to the assigned account number on the form.

| MANUFACTURED HOME PERSONAL PROPERTY EXEMPTION  |                     |                 |              |  |  |  |  |  |
|--|---------------------|-----------------|--------------|--|--|--|--|--|
| Is this mobile home your principal residence?  |                     | Yes             | ☐ No         |  |  |  |  |  |
| Were you living in the home January 1st of this year?  |                     | Yes             | ☐ No         |  |  |  |  |  |
| Do you own land where the manufactured home is locate  | d?                  | Yes             | ☐ No         |  |  |  |  |  |
| If YES: Closing Date: Book Numb  | oer:                | Page Number:    | <del></del>  |  |  |  |  |  |
| Age 62 or older?   |                     | Yes             | ☐ No         |  |  |  |  |  |
| Is your household income less than \$22,000 or 50% of the Income for your county?  |                     |                 | ☐ No         |  |  |  |  |  |
| COMPLETE THIS SECTION ONLY IF YOU NO LONGER OWN THE MANUFACTURED HOME YOU OWNED LAST YEAR  |                     |                 |              |  |  |  |  |  |
| If you no longer own this manufactured home: A manudestroyed by fire, flood, etc., <u>please provide the informational duplicate assessment and tax liens</u> .        |                     |                 |              |  |  |  |  |  |
| This Manufactured Home Was: Sold Rep   | ossessed            | Traded          |              |  |  |  |  |  |
| Destroyed By: Fire Flood Other:  |                     |                 |              |  |  |  |  |  |
| Date this Occured:(Must h  | ave Month and Year) |                 |              |  |  |  |  |  |
| Person or Company that Took Possession of Manufacture  | ed Home:            |                 |              |  |  |  |  |  |
| Name:  |                     |                 |              |  |  |  |  |  |
| Address:   |                     |                 | <del>-</del> |  |  |  |  |  |
| City, State, Zip:  |                     |                 |              |  |  |  |  |  |
| Your Signature as Former Owner:  |                     |                 |              |  |  |  |  |  |
| If manufactured home was traded for another manufactured home, please furnish copy of title on new or used manufactured home and complete information requested below. |                     |                 |              |  |  |  |  |  |
| Location of Manufactured Home:   |                     |                 |              |  |  |  |  |  |
| Street Address:  |                     |                 |              |  |  |  |  |  |
| Manufactured Home Park or Land Owner's Name:   |                     |                 |              |  |  |  |  |  |
| Your Phone Number:   |                     |                 |              |  |  |  |  |  |
| Manufacturer:  | Model:              | Size:           | X            |  |  |  |  |  |
| Identification Number:   | Title:              | Year            | Made:        |  |  |  |  |  |
| Factory Delivered Price Year   | Purchased:          | Purchase Price: | <del></del>  |  |  |  |  |  |
| Central Air: Yes No Deck: X  | Canopy: X           | Storage Bldg: _ | X            |  |  |  |  |  |

**To move or change ownership:** A 936-R Form must be obtained from the County Assessor. The Department of Public Safety will not issue a moving permit without this form and current year decal, nor will a title be transferred without this form. This is a requirement to verify that all manufactured home taxes have all been paid.

To obtain a 936-R Form contact the County Assessor's office in the county where the Manufactured Home is located, and provide the following information:

To Move - The old and new address and either the name of the land owner or Manufactured Home Park. The taxes for the entire current year must be paid.

To Change Ownership - New owner's name and address and either the land owner or Manufactured Home Park name where the Home will be located. The taxes for the entire current year must be paid.