

# TAX CLEARANCE CERTIFICATE

Mobile Home |  Floating Home

COUNTY OF \_\_\_\_\_

<b>SERIAL NUMBER/HULL NUMBER:</b>	<b>DECAL NUMBER/CF NUMBER:</b>
<b>ADDRESS OF HOME LOCATION:</b>	<b>ASSESSOR'S PARCEL NUMBER:</b>
<b>CURRENT REGISTERED OWNER:</b>  NAME:  ADDRESS:	<b>APPLICANT:</b>  NAME:  ADDRESS:

I hereby certify that the following have been paid:

- In delinquent license fees
- In property taxes applicable to the home identified above through the fiscal year \_\_\_\_ - \_\_\_\_.
- Security deposit for payment of the property taxes for the fiscal year \_\_\_\_ - \_\_\_\_.
- No taxes due or payable at this time.

# TAX CLEARANCE CERTIFICATE

**THIS CERTIFICATE IS VOID ON AND AFTER:**

DAY	DATE	MONTH	YEAR

**There may be a supplemental assessment not covered by this Tax Clearance Certificate that may create an additional bill.**

SAMPLE

\_\_\_\_\_  
County Tax Collector  
State of California

Executed at (time), (county) County this (day) day of (month), (year).