

RAMSEY COUNTY ASSESSOR MANUFACTURED HOME UNIT 90 PLATO BLVD WEST P.O. BOX 64097 SAINT PAUL, MN 55164-0097

DATE: PARK:

PIN:

Manufactured Home Homestead Application

Pursuant to Minnesota Statute 273.124, state law requires that all manufactured home owners or relative/occupants provide the following information. Social Security Numbers are required for all owners or qualified relatives who lived in the property on January 2nd or May 29th and who claim it as their homestead. If you do not provide the Social Security Numbers, the County Assessor will classify the property as non-homestead.

Failure to return ownership/occupancy information could result in your home being taxed as non-homestead. This will result in a higher rate of tax than the homestead rate.

Complete the entire application fully and legibly for Ramsey County records and to apply for the homestead benefit.

Please provide a photocopy of all sales documentation including the Certificate of Title which can be obtained at your local Driver and Vehicle Services Office.

If you do not have a copy of your Title at this time, please send it to our office at your earliest convenience.

Manufactured Home Owner or Relative/Occupant

PROPERTY ADDRESS:		
🗌 Owner & Occupant 📄 Non-Occupant Owner 📄 Occupant (rel	lative of the owner)	
Print Name:	Social Security Number:	
Marital Status: 🗌 Single 📄 Married 📄 Widowed 📄 Divorced	Legally Separated	
Date Owned: Your Move in Date:	Daytime Phone Number:	
Previous Address:		
Signature:		
🗌 Owner & Occupant 🔲 Non-Occupant Owner 🔛 Occupant (relative of the owner)		
Print Name:	Social Security Number:	
Marital Status: 🗌 Single 📄 Married 📄 Widowed 📄 Divorced	Legally Separated	
Date Owned: Your Move in Date:	Daytime Phone Number:	
Previous Address:		
Signature:	Date:	

Failure to fully complete the application can result in a fractional homestead or denial of the homestead classification on said property.

Making false statements on this application is against the law. Minnesota Statutes, section 609.41, states that anyone giving false information in order to avoid or reduce their tax obligations is subject to a fine of up to \$3,000 and/or up to one year in prison.

By signing this application, I certify that the information on this form is true and correct to the best of my knowledge. I also certify that on January 2 or May 29 of the current year, I was an owner or a qualifying relative of this property, that said property was my primary residence, and I was a Minnesota resident.

The accuracy of assessed manufactured homes depends upon the accuracy of the sales information our office		
receives. We appreciate your cooperation in providing the data about the home and the transaction in which you		
acquired it.		

Financial Arrangements

Purchase Price: \$ Date of Purchase Contract for title? No Yes	es
--	----

Type of Acquisition (Check all that apply)

Advertised, open market sale (e.g., sign, broker listing, newspaper ad, drive by)
Unadvertised sale (e.g., word of mouth, friend/acquaintance)
Did you buy this home from a relative?
Are you buying the home on a contract for title?
Was this home a gift?
Was this home ever condemned or foreclosed by a mortgage company of bank?
Home was bought from a dealer? If yes, provide name of dealer:

Comments: _

Manufactured Home Description

VIN:	Manufactured Year:	
Make:	Floor Width:	
Model:	Floor Length:	
_		
Porch: No	Yes, size of Porch x	
Deck: 🗌 No	Yes, size of Deck x	
Canopy: 🗌 No	Yes, size of Canopy x	
Central Air: 🗌 No	Yes	
Fireplace: 🗌 No	Yes	
Exterior Type: 🗌 Vinyl	Metal Wood Other:	
Total Bedrooms:	Total Bathrooms: Total Other Rooms:	
Condition of Home: 🗌 Nev	v 🗌 Excellent 🗌 Good 🗌 Average 🗌 Fair 🗌 Poor	
Please check components that have been recently updated or replaced:		
Exterior/Siding Heating/Cooling Floor/Wall/Ceiling		
Windows Kitchen Other:		
Roof Bat		
Comments:		

If this home is sold or you change your primary residence, you are required by state law to notify your County Assessor within 30 days.

If you have any questions, please call the Ramsey County Assessor's Office at 651-266-2131.

Return completed form to: Ramsey County Assessor's Office, P.O. Box 64097, Saint Paul, MN 55164-0097