

504 MOBILE HOME REQUEST FORM

Pursuant to A.R.S. § 42-19107 and A.R.S. § 42-19155, it is unlawful for any person to knowingly move or sell a mobile home if applicable property taxes have not been paid. A person violating the provision of this section is guilty of a Class 1 misdemeanor and subject to a fine. (This request is not a property tax clearance statement).

CONTACT INFORMATION		Date:	
Contact Name:		_ Phone:	
Email:		Fax:	
Та	x Clearance will be	emailed or faxed	(select one)
MOBILE HOME INFORMATION			
Vehicle Identification Number:			
Tax Roll Account #:		Year:	
Make:		Size:	
A	ffixed to Parcel	Yes	No
MOVER INFORMATION			
Mover's Name:		_ Phone:	
LOCATION INFORMATION			
Moving From:		_ Lot/Space:	
City:	State:		Zip:
Moving To:		_ Lot/Space:	
City:	State:		Zip:
County Moving To:			

Prior to moving a mobile/manufactured home, it is required to obtain a 504 Mobile Home Request Form. This notifies the Assessor that the unit is being moved from one location to another. Please email or fax our office with your completed form.

EMAIL: ASR-MH-PUBASST@Maricopa.gov FAX: 602.372.8900