



Maricopa County Assessor
Paul D. Petersen

MOBILE HOME PROPERTY TAX CLEARANCE REQUEST

This is a **REQUEST**. This is **NOT** a property tax clearance.

NOTE: All Fields Required to Process Request. Date: _____

Contact Information

Contact Name: _____

Phone: _____ Tax Clearance will be mailed or faxed (select one)

Email: _____ Fax: _____

Mobile Home Information

Year: _____ Affix to Parcel? Yes No

Make: _____

Size: _____

Vehicle Identification Number: _____

Factory List Price: _____

Tax Roll Account #: _____

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: _____

Owner Information

Owner's Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

FAX TO: 602-506-7335 OR EMAIL: mhpublicassistance@mail.maricopa.gov