

Please complete all fields to update ownership. Incomplete information may result in rejection of transfer.

## Owner Information

Previous owner (*Seller*) \_\_\_\_\_

Mailing address (*if known*) \_\_\_\_\_

Phone number \_\_\_\_\_ Email \_\_\_\_\_

New owner (*Purchaser*) \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone number \_\_\_\_\_ Email \_\_\_\_\_

Was this a family sale? (*i.e. between grandparent, parent, sibling, child, spouse*)  YES  NO

## Assessment Account and Land Information

Assessment Account Number (AAN) for manufactured home \_\_\_\_\_

Location at time of sale (*civic address*) \_\_\_\_\_

Will the manufactured home remain at this location after the sale?  YES  NO

If NO, location after sale (*civic address*) \_\_\_\_\_

Is this location in a Manufactured Home Park (*i.e. land-leased community*)?  YES  NO

If YES, name of Manufactured Home Park? \_\_\_\_\_ Lot # \_\_\_\_\_

If NO, name of land owner? \_\_\_\_\_

If NO, Assessment Account Number (AAN) of land? \_\_\_\_\_

*\*Please note: for new accounts on land outside of a Manufactured Home Park, the land owner (not the manufactured home owner) will be the "assessed person" respecting the manufactured home for the purposes of assessment and taxation.*

Signature of land owner \_\_\_\_\_ Date \_\_\_\_\_

## Manufactured Home Information

Date sold \_\_\_\_\_ Sale price \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_

Size \_\_\_\_\_ Ft (W) \_\_\_\_\_ ft (L) \_\_\_\_\_ Number of bathrooms \_\_\_\_\_

# Manufactured Home Transfer

Covered Porch       YES  NO    If YES \_\_\_\_\_ ft (W) \_\_\_\_\_ ft (L)

Sunroom/Porch     YES  NO    If YES \_\_\_\_\_ ft (W) \_\_\_\_\_ ft (L)

Shed                 YES  NO    If YES \_\_\_\_\_ ft(W) \_\_\_\_\_ ft (L)

Deck                 YES  NO    If YES \_\_\_\_\_ ft (W) \_\_\_\_\_ Ft (L)

Heat Pump         YES  NO

## Authorization

This form is being submitted by *(name and contact information)* \_\_\_\_\_

on behalf of \_\_\_\_\_  Purchaser     Seller

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please attach a copy of the Bill of Sale.**

Submit completed forms to PVSC by:	Questions? Contact PVSC:
<b>Mail:</b> 6 – 15 Arlington Place, Truro NS, B2N 0G9  <b>Fax:</b> 1-888-339-4555 (within North America) 1-902-893-6101 (outside North America)  <b>Email:</b> <a href="mailto:inquiry@pvsc.ca" style="color: blue; text-decoration: underline;">inquiry@pvsc.ca</a>	<b>1-800-380-7775</b> (within North America)  <b>1-902-893-5800</b> (outside North America)  <a href="http://www.pvsc.ca" style="color: blue; text-decoration: underline;">www.pvsc.ca</a>