

ASSESSOR OF MOHAVE COUNTY

700 W BEALE STREET, PO BOX 7000, KINGMAN AZ 86402, PHONE (928) 753-0703, FAX (928) 718-4962



INSTRUCTIONS FOR FILLING OUT ASSESSORS MONTHLY PARK REPORT

Date of Arrival/Departure: Provide the date that the tenant arrived followed by (A), or the date that the tenant departed followed by (D). Only tenants staying longer than 30 days are required to be reported. **(9/21/2014 (A) or 10/27/2014 (D))**

NAME: The titled/registered owners FIRST and LAST name. If the unit is a rental, we still only need to know the registered owners name. For tax purposes, please indicate any rentals by putting (R) next to the owners' name.
(Doe, Jane (R), Jane Doe)

MAILING ADDRESS: The mailing address where the registered owner receives mail.
(123 Our Place, Yourtown, AZ 12345)

SPACE: Indicate the space number where the mobile home/trailer is located. If the space is vacant, please include that space number and put "VACANT" on the owner name line. **(#42 or #A-35)**

SERIAL/VIN NUMBER OR LICENSE PLATE INFO: Provide the Vehicle Identification Number (VIN) for the mobile home/trailer.
(CAVAZLP1234567U&X or B1234567)
NOTE: If the vehicle has a license plate, please give 1) The **State** in which the plate was issued; 2) The **Plate Number**; and 3) The **Month** and **Year** the tag expires. **(AZ Y12345 6/15 or CA 1B324A7 5/12)**

MAKE: Give the Make/Model of the mobile home/trailer.
(FLEETWOOD BROADMORE or COACHMEN CITATION or HYLINE)

SIZE: Give the size of the mobile home/trailer. **(8x31 or 24x60)**

YEAR: Give the year that the mobile home/trailer was manufactured. **(2004 or 06)**

Please feel to contact me at 928.753.0703 x #4188 if you have any questions.

Thank You
Chena Winker
Mohave County Assessor
Personal Property Division