



Wright County Assessor

10 2nd Street NW Rm 100
Buffalo, MN 55313
763-682-7367

DATE:
PARK:
LOT:
PID:

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 and apply for homestead by May 29th. 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 Wright 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 (relative of the owner)

Print Name: _____ Social Security Number: _____

Marital Status: Single Married Widowed Divorced Legally Separated

Drivers License # _____

Date Owned: _____ Your Move in Date: _____ Daytime Phone Number: _____

Previous Address: _____

Signature: _____ Date: _____

Owner & Occupant Non-Occupant Owner Occupant (relative of the owner)

Print Name: _____ Social Security Number: _____

Marital Status: Single Married Widowed Divorced Legally Separated

Drivers License # _____

Date Owned: _____ Your Move in Date: _____ Daytime Phone Number: _____

Previous Address: _____

Signature: _____ Date: _____

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.

Acquisition Information

Date of Purchase _____ Purchase Price \$ _____
Is the Mobile Home: New Used
Purchased From: Dealer Previous Owner
Was this Manufactured home: Originally on lot Moved on to lot

Dealer or Previous Owner Name and Address:

Name _____
Address _____
City/State/Zip _____

Manufactured Home Description

VIN: _____ Manufactured Year: _____ Title # _____
Make: _____ Floor Width: _____
Model: _____ Floor Length: _____

A copy of the Manufactured Home Title or Contract is required with this application.

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 Wright County Assessor's Office at 763-682-7367.

**Return completed form to: Wright County Assessor's Office, 10 2nd Street NW Rm 100, Buffalo,
MN 55313**
