

**Manufactured/Mobile Home Reporting Form**

**MORRIS G. GUIN, CLA  
WEBSTER PARISH ASSESSOR  
103 South Monroe Street  
P. O. Box 734  
Minden, LA 71058-0734  
Phone (318) 377-9311 Fax (318) 377-9331**

DATE: \_\_\_\_\_ DECAL # \_\_\_\_\_

DEAR MANUFACTURED/MOBILE HOME OWNER:

Please complete the form below to assure that our office may properly identify and assess all manufactured/mobile homes in Webster Parish, as required by law. **(PLEASE ATTACH COPY OF BILL OF SALE AND REGISTRATION)**

Owner's Name: \_\_\_\_\_ Parcel# \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Do you occupy the manufactured/mobile home?  FULL-TIME  PART-TIME  RENTAL

Date that the home was placed on property: \_\_\_\_\_

Do you own the land where the manufactured/mobile home is located? YES  NO

If NO, who owns the land (LEGAL NAME): \_\_\_\_\_

If located in a mobile home park, what is name of park? \_\_\_\_\_ Lot # \_\_\_\_\_

Year: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Serial or VIN #: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Style: Single Wide  Double Wide  Modular  Width: \_\_\_\_\_ Length: \_\_\_\_\_

Quality: \_\_\_\_\_ 1=Low 2=Fair 3=Average 4=Avg/Good 5=Good 6=Very Good

Condition: \_\_\_\_\_ 1=Low 2=Fair 3=Average 4=Avg/Good 5=Good 6=Very Good

Exterior Walls:  Wood  Vinyl  Metal

Heating/Cooling:  Central  Wall  None

Roof:  Composition Shingle  Metal

Front Porch: Length \_\_\_\_\_ Width \_\_\_\_\_ Roof Yes  No

Back Porch: Length \_\_\_\_\_ Width \_\_\_\_\_ Roof Yes  No

BASE COST OF HOME: \$ \_\_\_\_\_ **(COPY OF BILL OF SALE REQUIRED)**

*Please bring or mail this form to our office within 10 days. Failure to do so will result in a tax bill.*