

TOWNSHIP

PARK NO.

TAX CODE

LOT NO.

ILLINOIS MOBILE HOME REGISTRATION
 For Local Services Tax
 SANGAMON COUNTY CLERK

Return to:

Mobile Home Location

Driver's License Number

Landowner's Name

Home Phone Number

Parcel Number

Work Phone Number

Exemption

Make/Model

Title

Year

Length should **NOT** include hitch.
 Length Width Area

Complete the following if you were 65 or older before January 1st, or are on total disability. You are entitled to 20% reduction on your local service tax.

I hold the title to and live in the mobile home described above. Yes No

Date of Birth _____ Disability Claim Number _____

A COPY OF TITLE, PROOF OF AGE OR PROOF OF DISABILITY MUST BE ON FILE IN THE COUNTY CLERK'S OFFICE.

OATH: I HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS ACCURATE

 Mobile Home Owner's Signature

 Date

 Assessor

 Date