



County of Los Angeles
 Treasurer and Tax Collector
 Attn: Mobile Home Unit
 225 North Hill Street, Room 122
 Los Angeles, CA 90012

Email: mobilehome@ttc.lacounty.gov
 Fax: (213) 633-5004
 Telephone Number: (213) 893-7935

MOBILE HOME TAX CLEARANCE/CONDITIONAL TAX CERTIFICATE REQUEST

*indicates required field

*From: _____ *Date: _____
 *Mailing address: _____ *Phone: _____
 *City, State, Zip: _____ Email: _____
 Escrow Officer: _____ Escrow Number: _____
 (If applicable) (If applicable)

We hereby request a TAX CLEARANCE CERTIFICATE (if no tax liability exists); or, a
 CONDITIONAL TAX CLEARANCE CERTIFICATE (if a tax liability exists) for the mobile home
 described below:

CURRENT REGISTERED OWNER'S NAME (As shown on current title with the State)

*Seller's Name: _____
 *Mobile home address: _____

 *City, State, Zip: _____
 *Decal Number: _____ *Serial Number(s): _____
 *Assessor's Identification Number: _____

NEW OWNER'S NAME: (How new title should read)

*Buyer's name: _____
 *Buyer's address: _____
 (TAX BILLS WILL BE MAILED TO THIS ADDRESS)
 *City, State, Zip: _____

Comments:

Please be advised that it takes approximately 15 business days to process your Tax Clearance or
 Conditional Tax Clearance request. Any questions or correspondence should be referred to the
 attention of the **Mobile Home Unit** at mobilehome@ttc.lacounty.gov or (213) 893-7935.

Email Completed Form