

RECORDING REQUESTED BY:

CITY OF LIVE OAK
9955 LIVE OAK BLVD.
LIVE OAK, CA 95953

AND WHEN RECORDED MAIL TO:

NAME CITY OF LIVE OAK
STREET ADDRESS 9955 LIVE OAK BLVD
CITY, STATE and ZIP LIVE OAK CA 95953

SPACE ABOVE THIS LINE FOR RECORDER USE ONLY

**NOTICE OF MANUFACTURED HOME (MOBILEHOME) OR COMMERCIAL COACH
INSTALLATION ON A FOUNDATION SYSTEM**

Recording of this document at the request of the local agency indicated is in accordance with California Health and Safety Code Section 18851. This document is evidence that such local agency has issued a certificate of occupancy for installation of the unit described hereon, upon the real property described with certainty below, as of the date of recording. When recorded this document shall be indexed by the county recorder to the named owner of the real property and shall be deemed to give constructive notice as to its contents to all persons thereafter dealing with the real property.

REAL PROPERTY OWNER/LESSOR

LOCAL AGENCY ISSUING PERMIT and CERTIFICATE OF OCCUPANCY

MAILING ADDRESS

MAILING ADDRESS

CITY COUNTY STATE ZIP

CITY COUNTY STATE ZIP

INSTALLATION MAILING ADDRESS, IF DIFFERENT

BUILDING PERMIT NO TELEPHONE NUMBER

CITY COUNTY STATE ZIP

SIGNATURE OF LOCAL AGENCY OFFICIAL DATE

UNIT OWNER (if also property owner, write "SAME")

DEALER NAME (If not a dealer sale, write "NONE")

MAILING ADDRESS

DEALER LICENSE NO.

CITY COUNTY STATE ZIP

UNIT DESCRIPTION

MANUFACTURER'S NAME DATE OF MANUFACTURE MODEL NAME / NUMBER

SERIAL NUMBER(S) LENGTH X WIDTH INSIGNIA / LABEL NUMBER(S)

REAL PROPERTY LEGAL DESCRIPTION ASSESSOR'S PARCEL NUMBER