TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS
MANUFACTURED HOUSING DIVISION
P. O. BOX 12489 Austin, Texas 78711-2489
(800) 500-7074, (512) 475-2200 FAX (512) 475-1109
Internet Address: www.tdhca.texas.gov/mhd

Check Status & Print

Clear all form fields

APPLICATION FOR STATEMENT OF OWNERSHIP

The filing of an application for the issuance of a Statement of Ownership later than sixty (60) days after the date of a sale to a consumer for residential use, will result in a late fee of one hundred dollars ($100). Any such application that is submitted late may be delayed until the fee is paid in full.

BLOCK 1: Transaction Identification

Type of Transaction
(Home cannot be selected as Personal and Real Property)

Personal Property Transaction

- ☐ New
- ☐ Used
- ☐ Lien Assignment
- ☐ Convert back to Personal Property
- ☐ Beneficiary Designation/ Revocation
- ☐ Other: _____

_____

Real Property Transaction

- ☐ New
- ☐ Used
- ☐ Other_____

_____

Type of Handling (Check One)

☐ **Process application in the normal 15 working days.**
A payment of $55 per transaction is required (total amount can be combined into one payment).

☐ **Process application within 5 working days from receipt.**
An additional $55 service fee must be added to the total payment to have the application processed within 5 working days from receipt.

(For Department Use Only) Coding:

Lien on file: Y / N
Right of Survivorship: Y / N
Texas Seal Purchase: Y / N
For Section(s) 1 2 3 4

BLOCK 2(a): Home Information (required)

Manufacturer Name:		Model:	
Address:		Date of Manufacture:	
City, State, Zip:		Total Square Feet:	
License Number:		Wind Zone:	

Sections	*Label/Seal Number*	*Complete Serial Number*	*Weight*	*Size**
Section 1:				X
Section 2:				X
Section 3:				X
Section 4:				X

**** NOTE:** Size must be reported as the outside dimensions (length and width) of the home as measured to the nearest ½ foot at the base of the home, exclusive of the tongue or other towing device.*

2(b) DOES HOME HAVE A HUD LABEL OR TEXAS SEAL ATTACHED TO THE OUTSIDE OF THE HOME? Yes ☐ No ☐
If there is/are no HUD Label(s) or Texas Seal(s) on your home, a Texas Seal will need to be purchased and will be issued to each section of your home at an **additional cost** of $35.00 per section.
Indicate which section(s) need(s) Texas Seal: Section One ☐ Section Two ☐ Section Three ☐ Section Four ☐

BLOCK 3: Home Location (required)

Physical Location of Home:
(or 911 address)

Physical Address (cannot be a Rt. or P. O. Box)

City *State* *ZIP* *County*

Was Home Moved for this sale? Yes ☐ No ☐ If yes, include a copy of moving permit.
Was Home Installed for this sale? Yes ☐ No ☐ If yes, date installed: _____ If yes, provide installer information below, if known.

Installer Name and address:			
Installer Phone Number:		Installer License Number:	

BLOCK 4: Ownership Information (required)

4(a) Seller(s) or Transferor(s)		4(b) Purchaser(s), Transferee(s), or Owner(s)	
Name	License # if Retailer:	Name	License # if Retailer:
Name		Name	
Mailing Address		Mailing Address	
City/State/Zip		City/State/Zip	
Daytime Phone Number (include area code)		Daytime Phone Number (include area code)	

4(c) Is this transaction a sale? Yes ☐ No ☐ Date of sale, transfer or ownership change:

HUD Label #:	Serial #:	GF# (for title co.):

BLOCK 5: Right of Survivorship or Beneficiary Designation

If joint owners desire right of survivorship, check the applicable box below: Click to Clear Selection

☐ Married couple will be the only owners and agree that the ownership of the above described manufactured home shall, from this day forward, be held jointly and in the event of death, shall pass to the surviving owner.

☐ Joint owners are other than married couple, desire right of survivorship, **and** have attached a completed Affidavit of Fact for Right of Survivorship or other affidavits as necessary to meet the requirements of §1201.213 of the Standards Act.

If Beneficiary Designation is being made or changed, please check below: (THIS IS ONLY FOR PERSONAL PROPERTY)

☐ All Owners would like to elect a Beneficiary Designation or change a current Beneficiary Designation **and** have attached a completed Affidavit of Fact Beneficiary Designation, Revocation or Change.

BLOCK 6: Election - Purchaser(s)/Transferee(s)/Owner(s) check one election type

All manufactured housing is titled as Personal Property, unless elected as: Click to Clear Selection

☐ **Real Property** – I (we) elect to treat this home as real property as (**one** box **must** be checked):

☐ I (we) own the real property that the home is attached to. ☐ I (we) have a qualifying long-term lease for the land that the home is attached to.

☐ The applicant or their authorized representative is the holder or servicer of the loan.

I (We) understand that the home will not be considered to be real property until a certified copy of the Statement of Ownership has been filed in the real property records of the county in which the home is located AND a copy stamped "Filed" has been submitted to the Department.

Please attach a legal description of the real property to this application (Example: Exhibit A, Deed or Title Commitment).

If a title company, list your file or GF #: _____

☐ **Inventory** – ***(FOR RETAILER USE ONLY)*** Retailer license number must be provided in Block 4b if this election is checked.

BLOCK 7: To Designate a Home as Business Use, Non-Residential, or Salvage

If home WILL NOT be used for residential use, indicate its designated use: Click to Clear Selection

☐ *Business Use* (means the use of a manufactured home in conjunction with operating a business, for a purpose other than as a permanent or temporary residential dwelling)

☐ Purchaser intends for a person to be present in the home for regularly scheduled work shifts of not less than eight hours each day.

☐ *Non-Residential Use Other than Business Use or Salvage* (means use of a manufactured home for a purpose other than as a permanent or temporary residential dwelling)

☐ *Salvage* (For purposes of Chapter 1201 of the Standards Act, a manufactured home is salvaged if the home is scrapped, dismantled, or destroyed or if an insurance company pays the full insured value of the home.) A salvaged home may only be sold to or rebuilt by a licensed Retailer (subject to inspection and approval prior to construction).

BLOCK 8(a): Liens:	**Will there be any liens on the home (other than a tax lien)? Yes ☐ No ☐ If yes, complete the below lien information.**

BLOCK 8(b): Lien Information

Date of First Lien:		Date of Second Lien:	
Name of First Lienholder:		Name of Second Lienholder:	
Mailing Address:		Mailing Address:	
City/State/Zip:		City/State/Zip:	
Daytime Phone:		Daytime Phone:	

BLOCK 9: Special Mailing Instructions

IF a copy of a Statement of Ownership is to be mailed to anyone other than the owner or lienholder of record (such as a closing agent), please provide that mailing address here.

Name:	
Company:	
Mailing Address:	
City, State, Zip:	
Area Code/Phone:	
Email:	

BLOCK 10: Signatures Required (Notarization is Optional)

10(a) Signatures of each seller/transferor	10(b) Signatures of each purchaser/transferee or owner
_____ *Signature of owner or authorized seller* *Sworn and subscribed before me this ____ day of _____, 20___* _____ *Signature of Notary* *SEAL*	_____ *Signature of purchaser/transferee or owner* *Sworn and subscribed before me this ____ day of _____, 20___* _____ *Signature of Notary* *SEAL*
_____ *Signature of owner or authorized seller* *Sworn and subscribed before me this ____ day of _____, 20___* _____ *Signature of Notary* *SEAL*	_____ *Signature of purchaser/transferee or owner* *Sworn and subscribed before me this ____ day of _____, 20___* _____ *Signature of Notary* *SEAL*

10(c) For Lien Assignments Only

_____ *Signature of authorized representative for previous lienholder*	_____ *Signature of authorized representative for new lender*