

Texas Department of Housing and Community Affairs

MANUFACTURED HOUSING DIVISION

P. O. BOX 12489 Austin, Texas 78711-2489

(877) 313-3023 FAX (512) 475-3506

Internet Address: www.tdhca.texas.gov/mhd

APPLICATION FOR LICENSE EXEMPTION

Eligibility is limited to those persons NOT in the business of buying manufactured homes for resale.

BLOCK 1: Applicant Information

| | | | | | |
|------------------|--|--------|--|------|--|
| Name: | | | | | |
| Mailing Address: | | | | | |
| City: | | State: | | ZIP: | |
| Phone: | | Email: | | | |

I am applying for the exemption from licensure for the following reason:

- ☐ One-time sale of up to three manufactured homes in a 12 month period (Complete BLOCK 2 below.)
- ☐ Government entity is transferring ownership (Attach a list of all homes including Label/Seal Number and Physical Address.)
- ☐ One-time sale of a manufactured home park (Attach a list of all homes including Label/Seal Number and Physical Address.)

BLOCK 2: Home Information (Required):

| HOME #1 | Label/Seal Number | Complete Serial Number | | | |
|-------------------|-------------------|------------------------|--|------|--|
| Section 1: | | | | | |
| Section 2: | | | | | |
| Section 3: | | | | | |
| Physical Address: | | City: | | ZIP: | |
| HOME #2 | Label/Seal Number | Complete Serial Number | | | |
| Section 1: | | | | | |
| Section 2: | | | | | |
| Section 3: | | | | | |
| Physical Address: | | City: | | ZIP: | |
| HOME #3 | Label/Seal Number | Complete Serial Number | | | |
| Section 1: | | | | | |
| Section 2: | | | | | |
| Section 3: | | | | | |
| Physical Address: | | City: | | ZIP: | |

BLOCK 3: Certification (Notarization Required)

I certify that I am not in the business of buying and reselling manufactured homes and that the information above is true and correct.

Signature of Applicant

Signature of Applicant

Sworn and subscribed before me this _____ day
of _____, 20_____

Signature of Notary
Seal

Typed Name of Notary

Commission Expires