

Texas Department of Housing and Community Affairs

MANUFACTURED HOUSING DIVISION

P. O. BOX 12489 Austin, Texas 78711-2489
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Internet Address: www.tdhca.texas.gov/mhd

AFFIDAVIT OF FACT FOR BENEFICIARY DESIGNATION, REVOCATION OR CHANGE				
BLOCK 1: Home Information (Must be completed)				
Manufacturer Name:			License #:	
Manufacturer Address:		City/State/Zip:		
Model:	Total Sq. Ft.:	Date of Manufacture:		
Label/Seal Number	Complete Serial Number	Weight	Size	
Section One:				
Section Two:				
Section Three:				
BLOCK 2: Beneficiary Designation				
☐ The undersigned, acknowledges and affirms the transfer of an interest in the manufactured home listed above to one or more designated beneficiaries is to occur at the transferor's death. The following are the legal names of the designated beneficiaries of this manufactured home that may take ownership of this manufactured home upon the death of all owners of the manufactured home in question.				
<i>Legal Name(s) of Designated Beneficiary to be added (Please Print).</i> 				
BLOCK 3: Beneficiary Revocation				
☐ The undersigned, acknowledge and affirm that the current Beneficiary Designation shall be revoked. The following individuals shall be removed from the Statement of Ownership as the Designated Beneficiary. They will no longer have any interest in the manufactured home above after the death of the owners of this manufactured home.				
<i>Legal Name(s) of Designated Beneficiary to be removed (Please Print).</i> 				
Block 4: Signature of All Manufactured Home Owners Notarization Required				
Before me personally appeared the person (s) who own the manufactured home listed above, who by being sworn, upon oath, say that the statements set forth hereinabove are true and correct. Subscribed and sworn before me this _____ day of _____ 20____.				
_____ <i>Signature of owner</i> Sworn and subscribed before me this _____ day of _____, 20____		_____ <i>Signature of owner</i> Sworn and subscribed before me this _____ day of _____, 20____		
_____ <i>Signature of Notary</i> SEAL		_____ <i>Signature of Notary</i> SEAL		