



STATE OF CALIFORNIA
 BUSINESS, TRANSPORTATION AND HOUSING AGENCY
 DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
 DIVISION OF CODES AND STANDARDS
 MANUFACTURED HOUSING PROGRAM

THIS SPACE FOR RECORDER USE ONLY

RECORDING REQUESTED BY:

County of Yuba, Building Department
 915 8th Street, Suite 123
 Marysville CA 95901

WHEN RECORDED MAIL TO:
 NAME

ADDRESS

CITY, STATE, ZIP CODE

ONLY THE ENFORCEMENT AGENCY MAY RECORD THIS DOCUMENT

**NOTICE OF MANUFACTURED HOME, MOBILEHOME OR COMMERCIAL MODULAR -
 INSTALLATION ON A FOUNDATION SYSTEM**

Recording of this document by the enforcement agency indicates compliance with California Health and Safety Code Section 18551(a). This document is evidence that the enforcement agency has inspected the installation and issued a Certificate of Occupancy, form HCD 513C, for the unit described herein, 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.

PROPERTY INFORMATION

REAL PROPERTY OWNER NAME(S)

MAILING ADDRESS

CITY COUNTY STATE ZIP CODE

INSTALLATION MAILING ADDRESS (if different)

CITY COUNTY STATE ZIP CODE

OWNER INFORMATION

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

MAILING ADDRESS

CITY COUNTY STATE ZIP CODE

ENFORCEMENT AGENCY INFORMATION

County of Yuba, Building Department

ENFORCEMENT AGENCY ISSUING PERMIT and CERTIFICATE OF OCCUPANCY

915 8th Street, Suite 123

MAILING ADDRESS

Marysville Yuba CA 95901

CITY COUNTY STATE ZIP CODE

(530) 749-5440

BUILDING PERMIT NO.

TELEPHONE NUMBER

EVIDENCE OF UNIT LIENHOLDER(S) RELEASE, OR CONSENT TO INSTALLATION PROVIDED/ATTACH

SIGNATURE OF ENFORCEMENT AGENCY OFFICIAL

DATE

DEALER INFORMATION

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

DEALER LICENSE NUMBER

DEALER BUSINESS ADDRESS

CITY COUNTY STATE ZIP CODE

MANUFACTURED HOME/MOBILEHOME/COMMERCIAL MODULAR UNIT DESCRIPTION

MANUFACTURER'S NAME

MODEL NAME / NUMBER

MANUFACTURE DATE

SERIAL NUMBER(S)

LENGTH X WIDTH

CA INSIGNIA(S)/RUID LABEL NUMBER(S)

ASSESSOR'S PARCEL NUMBER

HCO REGISTRATION DECAL NUMBER

HCO NUMBER (New MH only)

REAL PROPERTY LEGAL DESCRIPTION

(See Grant Deed for Legal Description.)

DISTRIBUTION - Original to County Recorder; One Copy to HCO; One Copy to Applicant; One Copy to Enforcement Agency