State of California
Department of Housing and Community Development
Division of Codes and Standards
Registration and Titling Program
P.O. Box 277820, Sacramento, CA 95827-7820
(800) 952-8356
www.hcd.ca.gov



MULTI-PURPOSE TRANSFER FORM

PLEASE COMPLETE ONLY THE SECTIONS THAT APPLY AND SIGN BOTTOM OF FORM

UNIT DESCRIPTION		
Decal (License) No.(s):	Serial No.(s):	
SMOKE DETECTOR AND CARBON	MONOXIDE CERTIFICATION	
I/We, the undersigned, hereby state that the manufactured hom above is equipped with a properly working, operable smoke de Section 18029.6 and a carbon monoxide detector in accordanc	tector in accordance with California Health and Safety Code	
☐ YES □	□ NO	
PARK PURCHA	SE FEE EXEMPTION	
The registered owner of the above-described manufactured had the registered owner is exempt from payment of the \$5 Park P 18114.1). If you feel you qualify for the exemption, complete the second of	Purchase Fund (PPF) fee (Health and Safety Code Section	
 Do you (the registered owner) own your manufactured hor Do you (the registered owner) own the land your manufactured 		
DESIGNATION OF C	CO-OWNER TERM	
We request the Department of Housing and Community I described above with the following co-owner term: (READ C		
party passes to the surviving joint tenant. The signatu title. TENCOM AND (Tenants in Common with the name transfer his or her individual interest without the signature tenant in common is required to transfer full interest in TENCOM OR (Tenants in Common with the names may transfer full ownership interest in the unit to a new in common. The signature of each tenant in common i COMPRO (Community Property): A unit may be regard wife. The signature of each spouse is required to the COMPRORS (Community Property with Right of property in the names of a husband and wife. At the	gistered as community property in the names of a husband transfer full interest in the unit or encumber the title. Survivorship): A unit may be registered as community e death of one spouse, the decedent's community property stration. The signature of each spouse is required to transfer of the State of California, Department of Housing and Community they may suffer resulting from registration of the above described covering the same.	
Executed on at	City State	
Victor Chen		
Signature	Signature	
Signature	Signature	
PHONE #	E MAIL ADDRESS.	

Decal (License) No.(s):	Serial No.(s):	
<u>DECLARATION</u>	OF INSTALLATION OF WATER HEATER SEISMIC BRACING	
or multifamily manufactured housing descri	fuel gas-burning water heater appliances in the manufactured home, ribed above are seismically braced, anchored, or strapped in accordary and Part 5 of Title 24 of the California Code of Regulations.	
	YES NO Electric water heater is installed per manufacturer's instructions.	
SIGNATURE ON FRONT SIDE IS CERTIFICATION FOR THIS SECTION		
REASON FOR USE TAX	X AND/OR MOBILEHOME RECOVERY FUND FEE EXEMPTION	
Check appropriate box(es):		
☐ The above-described unit was a gift. All rigurdal valuable consideration.	ights and interest of ownership were transferred without exchange or money	or other
☐ The above-described unit has been acquir	red from:	ister(s)*
Business Acquaintend		13101 (3)
The name of a show relationship	is being ADDED DELETED to the record.	
☐ The above-described unit was received as	s the result of an inheritance.	
☐ Transfer of the above-described unit is bei	ing made pursuant to a court order.	
transfer does not result in any change in trust the property will revert wholly to the	a revocable trust which (1) the seller has an unrestricted power to revoke the beneficial ownership of the property, (3) the trust provides that upon reverseles, and (4) the only consideration for the transfer is the assumption by the property being transferred is the sole collateral for the assumed loan.	ocation of the
	ster(s) is subject to use tax unless both are minors. If minors, check he ON FRONT SIDE IS CERTIFICATION FOR THIS SECTION	ere:
DESIGNATION OF TRUST		
I/We, the undersigned trustee(s), hereby state Trust is dated	e that the unit described above has been placed into a trust. This Declaration	ı of
	e California Health and Safety Code, I/we as trustee(s) hereby request the acknowledge that the Department's permanent title record and the titling docuv.	
Print Name of the	the Trust. This is how the name of the Trust will appear on title.	
appropriately amend the permanent registra	make application with the Department of Housing and Community Deation and titling record immediately upon any change to the original trug with all appropriate documents, fees or any other needed items to the Depa	ist agreement
	fy and save harmless the Director of the Department of Housing and Commu said unit, for any loss they may suffer resulting from registration of the above ornia Certificate of Title covering the same.	
I/We certify under penalty of perjury under the	e laws of the State of California that the foregoing is true and correct.	
Executed onat		State
Trustee Signature(s):		
Street Address or P.O. Box	City State	