



CITY OF PORTSMOUTH

Municipal Complex
1 Junkins Avenue
Portsmouth, New Hampshire 03801
(603) 431-2000

MANUFACTURED HOUSING REPORT

Name(s) _____ Tel. # _____

Location of _____
Park Name _____ Street Address _____

Your Mailing Address _____ Zip Code _____

Date of Purchase _____ Name of Seller _____

Mortgage by _____ Purchase Price _____

Purchase Price Include: _____

_____	_____	_____	_____
Furniture	Oil Tank	Skirting	Site Preparation

Was the manufactured home located in another park or city? _____

If YES where? _____

Date of Occupancy _____ Serial # _____

Year _____ Make _____ Model _____

Size _____ Color _____

Total # of Bedrooms _____ Total # of Rooms _____

Full Baths _____ Three/Quarter Baths _____ Half Baths _____

Number of Plumbing Fixtures:

Sinks _____ Toilets _____ Tubs _____ Separate Shower Stalls _____

Pitched Roof _____ Central Air Conditioning _____

Fireplace _____ Main Fuel Type _____

Deck Size _____ Screen Porch Size _____ Enclosed Porch Size _____

Add a Room Size _____ Shed Size _____ Garage Size _____

List Any Other Additions _____

Are there any additional outstanding building permits? _____

Please record your Deed or Manufacturer's Warranty, the Assessors' Office will not recognize an unrecorded deed.

If taxes were paid for current year in another city/town, please provide copy of tax bill.

Signature: _____ Date: _____

THIS FORM MUST BE FILED WITH THE ASSESSORS' OFFICE WITHIN 15 DAYS OF PURCHASE OR PLACEMENT OF MANUFACTURED HOME IN THE CITY OF PORTSMOUTH