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Champaign County Auditor

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Manufactured Home Registration Form

Registration #: _____

Owner's Name: _____

Address of Home: _____

Phone #: _____ E-Mail: _____

Located in a park: _____ or on Real Estate (private land): _____

Date of sale: _____ Purchase Price: _____

Size: ____ (L) x ____ (W) Number of Bathrooms: _____

Does it include?

Central air: ____ Fire place ____

Any Other Attachments (example, Porches, skirting etc.) _____

*It is your responsibility to register your Manufactured Home in the County in which your Manufactured Home is located. The state of Ohio requires you to register with the County Auditor within 30 days of possession.

*I fully understand it is my responsibility to complete the transfer process by obtaining a new title at the Clerk of Courts Title Dept. Failure to comply will result in a **Penalty of \$100.00.**

*I declare under penalties of perjury that this statement has been examined by me and to the best of my knowledge and belief is a true, correct, and complete statement.

Signature of owner: _____ Date: _____

"Proudly serving the citizens of Champaign County"