

TOWN OF DRAYTON VALLEY
MOBILE HOME REGISTRATION FORM

Property Tax Department
PO Box 6837
5120 52 Street
Drayton Valley, AB T7A 1A1
780-514-2200



OWNER INFORMATION:

NAME: _____ PHONE NUMBER: _____

CIVIC ADDRESS: _____ ROLL NUMBER: _____

MAILING ADDRESS: _____

MOBILE HOME INFORMATION:

MAKE/MODEL: _____ YEAR MOBILE HOME BUILT: _____

SERIAL #: _____ CSA #: _____

LENGTH: _____ WIDTH: _____ SINGLE OR DOUBLE WIDE: (circle one)

DECK (yes/no): _____ size: _____ PORCH (yes/no): _____ size: _____

DETACHED SHED (yes/no): size: _____ ADDITION (yes/no): size: _____

Possession date of mobile home or date mobile home moved into park: _____

I/We are the registered owner(s) of the above-mentioned mobile home, and this unit is currently in use or will be in use within the boundaries of the Town of Drayton Valley and is located at:

MOBILE HOME PARK: _____

Owner(s) Signature: _____ Owner(s) Signature: _____

Date: _____

*PLEASE PROVIDE A COPY OF YOUR BILL OF SALE TO BE ATTACHED TO THIS DOCUMENT.

FOR OFFICE USE ONLY

Date Received:	Date Approved:
Received by:	Approved by: