



Adams County

# MOBILE HOME REGISTRATION FORM ADAMS COUNTY

Georgia Volm  
Adams County Clerk  
507 Vermont St.  
Quincy, IL 62301  
Office: (217) 277-2150  
Fax: (217) 277-2155

### Owner Information

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail, if available \_\_\_\_\_

### Current Location of Mobile Home

Mobile Home Park and Lot # \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Occupant, if other than owner \_\_\_\_\_

### Mobile Home Coach Information

Vehicle Identification # (VIN) \_\_\_\_\_

(Located near fuse box or at the bottom of front doorway)

Make/Manufacturer \_\_\_\_\_ and Year \_\_\_\_\_

Mobile Home Width \_\_\_\_\_ and Length\* \_\_\_\_\_

(\*Length should not include hitch)

### Current Billing Information

Billing Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail, if available \_\_\_\_\_

### Please Sign and Print (MUST be signed by actual owner)

\_\_\_\_\_  
Authorized Written Signature\*

\_\_\_\_\_  
Printed Name\*

Date of Sale/Transfer/Move \_\_\_\_\_ Current Date \_\_\_\_\_

\*Only the current (new) owner is authorized to change or update mobile home owner, address, and location information.

Any person furnishing misinformation for purposes of registration or failing to file a required registration is guilty of a Class A misdemeanor (35 ILCS 515/4).

20% Reduction of Mobile Home Local Services Tax  
\_\_\_\_ Yes, I am a senior citizen or person with disabilities who would like to request an application for the 20% Reduction of Mobile Home Local Services Tax. (Application will be mailed.)

FOR OFFICE USE ONLY  
Tax Code \_\_\_\_\_  
Exemption \_\_\_\_\_  
Mobile Home # \_\_\_\_\_  
Real Estate Parcel # \_\_\_\_\_