

STATE OF CALIFORNIA  
BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT  
DIVISION OF CODES AND STANDARDS  
REGISTRATION AND TITLING PROGRAM



## TRANSFER ON DEATH BENEFICIARY

### SECTION I. DESCRIPTION OF UNIT

This unit is a (check one):

Manufactured Home, Mobilehome, Multifamily Manufactured Home  Commercial Modular  Truck Camper  Floating Home

The Decal (License) Number(s) is: \_\_\_\_\_

The Trade Name is: \_\_\_\_\_

The Serial Number(s) is: \_\_\_\_\_

### SECTION II. ADDITION OF BENEFICIARY

Complete the following statement if no beneficiary is recorded on the ownership registration and title and you wish to add a beneficiary name.

I request the following named party be added to the ownership registration and title of the above described unit as the TRANSFER ON DEATH BENEFICIARY:

(Please Print) \_\_\_\_\_  
*Last Name First Name Middle Initial*

### SECTION III. DELETION OF BENEFICIARY

Complete the following statement if a beneficiary is recorded on the ownership registration and title and you wish to remove the beneficiary's name and do not wish to add a new beneficiary.

I request the following named TRANSFER ON DEATH BENEFICIARY be deleted from the ownership registration and title of the above described unit:

(Please Print) \_\_\_\_\_  
*Last Name First Name Middle Initial*

### SECTION IV. CHANGE OF BENEFICIARY

Complete the following statement if you wish to delete the existing beneficiary that is recorded on the ownership registration and title and add a new beneficiary.

I request the name of the beneficiary recorded on the ownership registration and title of the above described unit be changed to:

(Please Print) \_\_\_\_\_  
*Last Name First Name Middle Initial*

### SECTION V. CERTIFICATION

Complete this section if Sections 2, 3 or 4 are completed

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on \_\_\_\_\_ at \_\_\_\_\_  
*Date City State*

Signature of Registered Owner \_\_\_\_\_

### SECTION VI. REQUEST TO TRANSFER ON DEATH OF REGISTERED OWNER

Complete the following statements if the registered owner listed on the ownership registration and title is deceased and the TRANSFER ON DEATH BENEFICIARY wishes to transfer ownership.

A. As the Transfer on Death Beneficiary recorded on the ownership registration and title, I request to register the above described unit in the following name(s): \_\_\_\_\_

B. As the Transfer on Death Beneficiary, I certify under penalty of perjury under the laws of the State of California, that \_\_\_\_\_, the registered owner of the above described unit died on \_\_\_\_\_  
*Print name of Decedent*

\_\_\_\_\_, at \_\_\_\_\_  
*Date of Death Place of death, city and state or province or county, etc.*

Executed on \_\_\_\_\_ at \_\_\_\_\_  
*Date City State*

Signature of Beneficiary \_\_\_\_\_