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

NAME STATEMENT

SECTION I. DESCRIPTION OF UNIT

This unit is a (check one):

☐ Manufactured Home/Mobilehome ☐ Commercial Modular ☐ Floating Home ☐ Truck Camper

The Decal (License) No.(s) of the unit is: _____

The Trade Name of the unit is: _____

The Serial No.(s) of the unit is: _____

SECTION II. STATEMENT OF ONE AND THE SAME PERSON

I, _____ and
PLEASE PRINT

_____
PLEASE PRINT

are one and the same person.

SECTION III. STATEMENT TO CORRECT MISSPELLED NAME

A name is incorrectly spelled on the Department's record. I request the records be corrected. The correct spelling is (PLEASE PRINT):

_____
LAST *FIRST* *MIDDLE*

SECTION IV. CHANGE OF NAME (Individual Only)

I changed my name without intent to defraud

FROM: _____
PLEASE PRINT

TO: _____
PLEASE PRINT

SECTION V. APPLICANT CERTIFICATION

I/We 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 _____

Address _____
Street Address or P.O. Box *City* *State* *Zip*