



Affidavit to Correct Mobile Home Tax Bill

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

Being first duly sworn on oath and with the knowledge that submission of false information on this affidavit is a violation of the Statutes of the State of Illinois, the undersigned states that the ORIGINAL Mobile Home Local Services Bill for the year 20____, states as follows:

Name _____ Park & Lot _____
Address _____ Phone # _____
Model & Year _____ V.I.N _____ Tax Bill # _____

The Original Bill is in Error for the Following Reason

(Check One)

The new owner is: Name _____
Address _____
City/Village _____ Zip _____ Phone # _____
Date Purchased _____

Check here if above is address change only

The square footage should be: Length _____ X Width _____ = _____ sq. ft.

The rate was incorrect: Correct Year _____ Months Resided _____

The mobile home was Removed or Destroyed or Vacant as of _____
If removed, indicate new address here: _____

The 20% owner occupied reduction was omitted:

- a. My date of birth is _____, therefore I was 65 **on or before** January 1st of this year.
- b. I am totally disabled; my Social Security, Veteran, Railroad, or Civil Service Disability Claim Number is _____.

I hereby declare that the above statements are true and correct to the best of my knowledge.

SIGNATURE OF AFFIANT

Subscribed And Sworn To Before Me This _____ Day of _____ 20____

NOTARY PUBLIC