

Courthouse



M.J. "Mert" Smiley, Jr., CLA

Assessor of Ascension Parish

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## ASSESSOR'S MOBILE HOME PERMIT FORM

Applicant (Circle):  Owner  Renter  Owner/Landlord's Parcel # \_\_\_\_\_

If Rental, Landlord's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Lot(s): \_\_\_\_\_ Subdivision/Trailer Park: \_\_\_\_\_ # of Acres: \_\_\_\_\_

Size: \_\_\_\_\_ Year: \_\_\_\_\_ Cost: \_\_\_\_\_

Was the mobile home located on the property prior to you owning or renting? YES NO

If yes, where was it previously located? \_\_\_\_\_

Are there multiple homes/mobile homes located on this property? YES NO

If yes, please indicate: \_\_\_\_\_

Move In Date: \_\_\_\_\_

Is this your primary residence? YES NO

\_\_\_\_\_ Homestead Exemption Application Signed

\_\_\_\_\_ Special Assessment Level Application Signed (if applicable)

\_\_\_\_\_ Copy of proof of ownership (Bill of Sale, Insurance, Etc)

I HAVE COMPLETED THIS FORM TO THE BEST OF MY ABILITY, KNOWLEDGE, AND UNDERSTANDING FOR TAX ASSESSMENT PURPOSES ONLY. THIS FORM DOES NOT GUARANTEE A PERMIT WILL BE ISSUED.

\_\_\_\_\_  
SIGNATURE DATE

APPROVED BY:  
\_\_\_\_\_  
DEPUTY ASSESSOR

Renter's Parcel # \_\_\_\_\_