

ASSESSOR'S MOBILE HOME PERMIT FORM

Applicant (Circle)	: Owner Renter	Owner/Landlord's Parcel #
If Rental, Landlor	rd's Name:	Phone #: ()
Applicant's Name	e:	Phone #: ()
Applicant's Emai	l Address:	
Physical Address	:	
Mailing Address:		
		# of Acres:
Size:	Year:	Cost:
Was the mobile h	nome located on the property prio	r to you owning or renting? YES NO
If yes, where was	it previously located?	
Are there multipl	e homes/mobile homes located or	n this property? YES NO
If yes, please indi	cate:	
Move In Date:		
Is this your prima	ry residence? YES NO	
Homestead	Exemption Application Signed	
Special Asse	essment Level Application Signed (if a	ipplicable)
Copy of pro	of of ownership (Bill of Sale, Insuranc	ce, Etc)
		NY ABILITY, KNOWLEDGE, AND UNDERSTANDING FOR TAX NOT GUARANTEE A PERMIT WILL BE ISSUED.
		APPROVED BY:
SIGNATURE	DATE	
		DEPUTY ASSESSOR
		IMP Parcel #



INSTRUCTIONS FOR ASSESSOR'S MOBILE HOME PERMIT FORM

In a continued effort to improve the process of assessments in our parish, ALL MOBILE HOME OWNERS OR **RENTERS** are required to visit the Ascension Parish Assessor's Office prior to having your electricity turned on. The form must be completed and returned to the Permit Office.

PLEASE COMPLETE THIS FORM BEFORE YOU VISIT THE ASSESSOR'S OFFICE

Prairieville Office

16159 State Bank Dr, Suite A Prairieville, LA 70769

Office Hours

Mon-Thur: 7:30am-5pm Friday: Closed

Gonzales Office 815 E Worthey St Gonzales, LA 70737

Donaldsonville Office 300 Houmas Street Donaldsonville, LA 70346

Office Hours

Mon-Thur: 7:30am-5pm Friday: 7:30am-4:30pm

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Mon-Thur: 7:30am-5pm Friday: Closed

When you come to our office, we will verify we have the correct information and you can apply for Homestead Exemption and the Special Assessment Level freeze, if applicable.

If you have any questions, please contact our office at (225) 647-8182.

Sincerely,

M.J. "Mert" Smiley, Jr., CLA **Ascension Parish Assessor**