DEPARTMENT OF BUSINESS & INDUSTRY NEVADA HOUSING DIVISION

MANUFACTURED HOUSING

1830 E College Parkway, Suite 120 Carson City, Nevada 89706 Phone: (775) 684-2945 Fax: (775) 684-2949

Bill of Sale TL-112

For convenience only. A Sale/Transfer requires submittal of a completed TL-100 form.

New Owner Email Address (r	required):			
New Owner Phone Number (required):			
Section 1. Description of th	ne Structure			
Year:	Make:	Model:		
Serial Number:				
Physical Location:				
Street:	City:	State:	Zip:	
Section 2. Seller and Lienh	older Information			
Name of Seller(s):				
Mailing Address of Seller(s):				
Street:	City:	State:	Zip:	
Current Lienholder (if any): _				
Mailing Address of Lienholde	r:			
Street:	City:	State:	Zip:	

Section 3. Statement of Facts

(I, We) as sell further state that to (my, our) knowledge, the structure is free and clear of any liens, encumbrances, lawful claims and demands of any person whatsoever, and that they structure is not involved in any existing or pending litigation. That in consideration of \$______ and other valuable consideration, the receipt whereof is hereby acknowledged, the undersigned (Seller) does hereby sell, transfer and deliver on the ______ day of ______, 20_____ his/her right, title and interest in the above described structure to the following purchaser(s) in Section 4.

DEPARTMENT OF BUSINESS & INDUSTRY NEVADA HOUSING DIVISION MANUFACTURED HOUSING 1830 E College Parkway, Suite 120 Carson City, Nevada 89706 Phone: (775) 684-2945 Fax: (775) 684-2949 Section 4. Purchaser(s) Please type or print clearly and legibly all names to be shown on the title Purchaser(s)/New Owner(s):				
Purchaser(s)/New Owner(s) Mailing Address:				
Street: City:	State: Zip:			
Section 5. Signatures and Notarization (Do not sign	until in front of a Notary)			
Signature of Owner/Seller(s)	Signature of Purchaser(s)			
Signature of Owner/Seller(s)	Signature of Purchaser(s)			
Signature of Lienholder(s)	Signature of Purchaser(s)			
	ry use only)			
State of County subscribed and sworn to before me,	State of County subscribed and sworn to before me,			
(Name of Notary Public)	(Name of Notary Public)			
on this day of, 20	on this day of, 20			
by	by			
(Printed name of party appearing before Notary)	(Printed name of party appearing before Notary)			
Notary Public Signature Notary Stamp or Seal	Notary Public Signature Notary Stamp or Seal			