RELOCATION PERMIT APPLICATION

Mobile Homes, Modular Structures and Other Structures Custer County, South Dakota

Owner/ Applicant:	Name(s)				
	Mailing Address				
		State			
Structure:	Mobile H	lome Ma	Manufactured Home Modular Home		
	Cabin	Detach	Detached Garage Storage Building		
	Other Structure. Describe:				
	New / Used	Cost	St	ructure total Sq. Ft. ₋	
Location/ Origin:	Property Owner _				
	Property Address				
	Legal Description (for Custer County Point of Origin)				
	Destination (County, State)				
	Relocator / Dealer				
Mobile Home Information:		Manufacturer			
	SD Title Number VIN Number				
	Previous Owner _	Owner Lien holder			
	Has a current Affidavit of Manufactured/Mobile Home Taxes been issued? (Attach copy)				
The information	I provided above ac	curately describes the	structure(s) to be re	located.	
Applicant Signature Date		Date	Approving Officer Sig	gnature C	Date
		bile homes to be registere stration must be completed			for the county in
Planning Departi	ment Use Only:				
Custer County Point of Origin: Record #			Custer County Destination: Record #		