OTC 935-MH
Tax Year 2027
Revised 11-2026

State of Oklahoma
Manufactured Home Rendition

Return to County Assessor by March 15

Account #: Owner: Phone #: Mailing Address: Email Address: City, State, ZIP:	All taxable property in Oklahoma is required to be rendered to the county assessor between January 1 and March 15 of each year by the owner or person in control of such property. Property rendered after March 15 but before April 15 shall have a mandatory ten percent penalty applied. Property rendered after April 15 shall have a twenty percent penalty applied. **PLEASE PRINT OR TYPE.**

LEGAL:	School District

Physical Address of Manufactured Home:

MUST PROVIDE COPY OF ORIGINAL TITLE: (if this information has not changed, skip this box)

Manufacturer: _____ Serial Number/VIN: _____

Year Manufactured: _____ Oklahoma Title Number: _____

Length: _____ Width: _____

Value of Manufactured Home: _____

Are you residing in this Manufactured Home?..... ☐ Yes ☐ No

Are you or your spouse currently in the military and claiming legal residency in another state? ..... ☐ Yes ☐ No
If yes, please provide proof and contact your tag agent for a tag at the military rate.

OTHER IMPROVEMENTS: Porch, deck, carport, etc.

Type	Description

EXEMPTION: Any person sixty-two (62) years of age or older, who is head of household, whose annual gross income did not exceed 50% of the HUD Median Family Income for your county. See your county assessor for the qualifying HUD income. **You must complete OTC Form 952 and file with your county assessor**. Form 952 is available from your county assessor or the OTC website at **tax.ok.gov**. See back for details.

NOTICE: If the manufactured home has been moved or sold, please complete back of page and submit to this office immediately. The manufactured home will remain on the tax rolls with the tax liability under your name until this office is provided with the appropriate documentation of the move or sale. See back for details.

SIGNATURE: I the undersigned, affirm and attest, that all information provided and herein contained are true, correct and complete to the best of my knowledge.

_____ _____
Signature of preparer if other than taxpayer Date Preparer's address

_____ _____
Signature of taxpayer Date Preparer's identification number Preparer's phone number

ASSESSOR ONLY: Total of Value

_____
Assessor/Deputy

_____
Date

Total Fair Cash Value.....$_____

X Assessment _____%.....$_____

Less Exemptions.....$_____

Penalty _____%.....$_____

Net Assessed Value.....$_____

Manufactured Home Rendition

A separate rendition form must be filed on each manufactured home: Each manufactured home is assigned an account number, if you own more than one manufactured home, please be sure to match the manufactured home to the assigned account number on the form.

MANUFACTURED HOME PERSONAL PROPERTY EXEMPTION

Is this mobile home your principal residence? ☐ Yes ☐ No

Were you living in the home January 1st of this year? ☐ Yes ☐ No

Do you own land where the manufactured home is located? ☐ Yes ☐ No

If YES: Closing Date: _____ Book Number: _____ Page Number: _____

Age 62 or older? ☐ Yes ☐ No

Is your household income less than 50% of the HUD Median Family Income for your county? ☐ Yes ☐ No

Contact your county assessor for the qualifying HUD income.

Complete this section ONLY if you no longer OWN the manufactured home you owned last year.

If you no longer own this manufactured home: A manufactured home that has been sold, traded, repossessed, destroyed by fire, flood, etc., please provide the information requested below in order to avoid possible incorrect or duplicate assessment and tax liens.

This Manufactured Home Was: ☐ Sold ☐ Repossessed ☐ Traded

Destroyed By: ☐ Fire ☐ Flood ☐ Other: _____

Date this Occured: _____ (Must have month and year)

Person or Company that Took Possession of Manufactured Home:

Name: _____

Address: _____

City, State, Zip: _____

Your Signature as Former Owner: _____

If manufactured home was traded for another manufactured home, please furnish copy of title on new or used manufactured home and complete information requested below.

Location of Manufactured Home: _____

Street Address: _____

Manufactured Home Park or Landowner's Name: _____

Your Phone Number: _____

Manufacturer: _____ Model: _____ Size: _____ X _____

Identification Number: _____ Title: _____ Year Made: _____

Factory Delivered Price: _____ Year Purchased: _____ Purchase Price: _____

Central Air: ☐ Yes ☐ No Deck: _____ X _____ Canopy: _____ X _____ Storage Bldg: _____ X _____

To move or change ownership: A 936-R Form must be obtained from the county assessor. The Department of Public Safety will not issue a moving permit without this form and current year decal, nor will a title be transferred without this form. This is a requirement to verify that all manufactured home taxes have all been paid.

To obtain a 936-R Form contact the county assessor's office in the county where the manufactured home is located, and provide the following information:

To Move - The old and new address and either the name of the landowner or Manufactured Home Park. The taxes for the entire current year must be paid.

To Change Ownership - New owner's name and address and either the landowner or Manufactured Home Park name where the home will be located. The taxes for the entire current year must be paid.