Manufactured Home Cost Questionnaire

Parcel Identification Number: _____ Lot # _____

Owners Name: _____

Make: _____ Model: _____

Year: _____ Size without Hitch: _____

Continuous Foundation: Yes No Skirting: Yes No

Central Air Conditioning: Yes No Phone Number _____

Email: _____

Condition

Excellent Good Average Fair Poor Unsound

Manufactured Home $_____
Foundation $_____
Land $_____
Additions $_____ Size: _____ Type: _____
Decks $_____
Other Buildings $_____ Size: _____ Type: _____
Total Purchase Price $_____

Other Buildings are Garages or Sheds included in the sale price

Please list costs of individual components if possible. If individual component costs are not available list Total Cost & place and X in the $ amount column for each item included in the sale price

NOTES: _____