Texas Department of Housing and Community Affairs MANUFACTURED HOUSING DIVISION P. O. BOX 12489 Austin, Texas 78711-2489 (800) 500-7074, (512) 475-2200 FAX (512) 475-1109	
	www.tdhca.state.tx.us/mh/index.htm
OWNERSHIP AND LOCATION AFFIDAVIT OF ERROR (Sworn Statement) BLOCK 1: Home Information	
Serial Number:	Label # and/or Seal #:
Square Footage:	Size:
BLOCK	2: Statement of Facts
Please provide a sworn statement in the space below of the error made on the Statement of Ownership and Location Application. Please specify which document the error was made on and the exact nature of the error. Use the space below or on the back to provide a sworn statement.	

## BLOCK 3: Signature (Notarization is REQUIRED)

Signature(s)

Company Name and Title (if applicable)

Printed Name(s)

Phone Number

Before me personally appeared the person (s) whose signature (s) appear above, who by being sworn, upon oath, say that the statements set forth hereinabove are true and correct. Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_.

(Name of Notary)

(Notary Public)

(Commission Expires)

Notary Public State of Texas

SEAL