STATE	OF SOUTH CAROLINA)
COUN) MANUFACTURED HOME Y OF BEAUFORT) AFFIDAVIT FOR RETIREMENT OF TITLE CERTIFICATE
(1)	Name of Owner:
	Description of Manufactured Home:
	Date of Manufacture:
	Manufacturer:
	Model year: Make:
	Width: Length:
	Identification Number (VIN):
(3)	Check whichever is applicable:
	The above described manufactured home is not subject to a security lien.
	The above described manufactured home is subject to a security lien and a separate affidavit, as required by
	be filed naming the secured parties.
	Check whichever is applicable:
	The above described manufactured home is located in a jurisdiction with locally enforced building and
	des adopted pursuant to Title 6, Chapter 9 and attached to this form is written evidence of compliance with
	cable codes as of the date the manufactured home was permanently affixed to the above described real
	Written evidence of compliance includes, but is not limited to, a copy of a certificate of occupancy, a
	t from the code enforcement office, an inspection report, or any documentation of similar effect from the
local co	e enforcement office having the appropriate jurisdiction. Only one document should be attached to this form.
	The above described manufactured home is not located in a jurisdiction with locally enforced building and
	des adopted pursuant to Title 6, Chapter 9 applicable to manufactured homes.
	full legal description of the property to which the manufactured home is currently, or is to be, affixed using
	d bounds or reference to recorded plat by book and page. (A separate sheet identified as 'Exhibit A' may be
attached	
	Derivation: This being the identical or a portion of property conveyed or leased to the owner by deed or
	m and recorded in Book at page
	ap number
	lling address
above-c	The above-described manufactured home is permanently affixed or is to be permanently affixed to the scribed real property and the title certificate is to be retired in accordance with applicable law. Check if applicable:
(0)	The owner of the manufactured home owns or has a leasehold estate of thirty-five or more years in the
real pro	erty to which the manufactured home is affixed.
	VARNING: the execution and filing of this affidavit transfers ownership of the manufactured home to the
	wher of the real property to which it is affixed.
The	wner certifies that the above information provided by the owner is true and correct to the best information
	f of the owner.
Date	Signature of owner:
	Type or print name of owner:
Witn	SS:
	SS:
	E OF SOUTH CAROLINA)
COU	TTY OF PROBATE
Befo	e me, the undersigned Notary Public, personally appeared, who, being
	rn, deposed and said that (s)he saw, sign, seal, and deliver the
foregoi	g Affidavit and that (s)he, together with witnessed the execution thereof.
SWC	RN to before me this day of, 20
3.7 ·	
Nota My (Public for(L.S.) pmmission Expires:

STATE OF SOUTH CAROLINA)	
COUNTY OF BEAUFORT)	MANUFACTURED HOME LIEN AFFIDAVIT
1) Name of Owner(s) 2) Description of Manufactured Home: Date of Manufacture: Manufacturer: Model Year: Make: Width: Length: Identification Number (VIN):	
3) The above described manufactured home is subject addresses are listed below:	et to a security lien and all secured parties with mailing
reference to recorded plat by book and page. (A sepa	anufactured home is to be affixed using metes and bounds or urate sheet identified as "Exhibit A" may be attached.)
5) Derivation: This being the identical or a portion of property conve	eyed or leased to the owner by deed or lease from
and recorded on in Book Tax Map number: Tax Billing Address:	
6) Name of owner of real property if different from o	owner of manufactured home:
7) The owner of the manufactured home affidavit wa at Page in the county of Beaufort.	as recorded on in Book
The owner certifies that the above information provid belief of the owner.	led by the owner is true and correct to the best information and
DATE:	Signature of Owner
Witness:	
STATE OF SOUTH CAROLINA) COUNTY OF BEAUFORT)	PROBATE
who, being duly sworn, deposed and said that he/she	sawhe/she, together with
Sworn to before me this day of	, 20
Notary Public for	_(LS)
My Commission Expires:	_