



**IRREVOCABLE ASSIGNMENT TO THE
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT**

SECTION I DESCRIPTION OF UNIT

This unit is a (check one):

Manufactured Home, Mobilehome, Multi-family Manufactured Home Commercial Modular Truck Camper Floating Home

The Decal (License) Number(s): _____

The Trade Name is: _____

The Serial Number(s) is: _____

SECTION II ASSIGNMENT AND CERTIFICATION

I/We _____
Name of Applicant(s) Exactly as it Appears on Application

Hereinafter referred to as Assignor, whose principal place of residence is located at:

do/does hereby irrevocably assign and set over to the State of California, Department of Housing and Community Development, hereinafter referred to the insured account of Assignor in the (financial institution name) whose address is:

as evidenced by an account in the amount of \$ _____, identified by Account No. _____ which is delivered to the Department by Assignor. Assignor agrees and stipulates that this irrevocable assignment carries with it the right in and to the insurance of this account by the Federal Deposit Insurance Corporation. This irrevocable assignment is given to the Department under the provisions of Section 18086.5 of the California Health and Safety Code is binding on Assignor, his/her heirs, administrators, successors, and irrevocably assigns jointly and severally and is conditioned that Assignor, made is about to make, application to the Department for registration or transfer of ownership interest of the unit described above.

I/We certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____ at _____
Date City State

Applicant Signature: _____

Address: _____
Street Address or P.O. Box City State Zip

SECTION III FINANCIAL INSTITUTION - ENDORSEMENT AND RECEIPT OF IRREVOCABLE ASSIGNMENT

Receipt is hereby acknowledged to the State of California, Department of Housing and Community Development of written notice of the irrevocable assignment to said Department of the above-identified account. We have noted our records to show the interest of the Department in said account as shown in and by the irrevocable assignment above. We have retained a copy of this document. We hereby certify that we have not received any notice of lien, encumbrance, hold, claim, or other obligation against the above-identified account prior to its irrevocable assignment of the Department. We agree to make payment as required by the California Health and Safety Code in accordance with the banking or savings and loan laws applicable to the bank association.

Executed on _____ at _____
Date City State

Financial Institution Signature: _____

Address: _____
Street Address or P. O. Box City State Zip

DEPARTMENT USE ONLY

Receipt is hereby acknowledged of the irrevocable assignment above and the account identified in the irrevocable assignment above. The Financial Institution named in the irrevocable assignment above is thereby authorized and directed to pay any earnings on the above-identified account to the above-named Assignor.

Executed on _____ at _____
Date City State

Department of Housing and Community Development, Registration and Titling Section

Signature of Authorized Employee: _____ Title: _____

DISTRIBUTION: WHITE & BLUE COPY-DEPARTMENT; PINK COPY-APPLICANT; YELLOW COPY-FINANCIAL INSTITUTION