

Sheila Reiner Mesa County Treasurer

Dept. 5027 544 Rood Avenue P.O. Box 20,000 Grand Junction, CO 81502-5001 (970) 244-1824 / fax: (970) 244-1804

AUTHENTICATION REQUEST

Please provide original/copy of Title, Taxes must be paid in full + \$10.00 Fee

Please fill out form COMPLETELY!!

| Date: | Account Number: |
|-------------------------------|---|
| ☐ Movement | Land Account Number: |
| ☐ Title Change Requested by | (Title Co, Owner, Etc Phone Number) |
| | ENT OWNER INFORMATION |
| | |
| Name of <u>CURRENT</u> Owner: | (Exact Name Shown on face of MH Title or MSO) |
| Location of Mobile Home: | |
| City/State/Zip: | |
| County: | |
| Mailing Address: | |
| City/State/Zip: | |
| NEW OWN | ER &/or LOCATION INFORMATION |
| Name of <u>NEW</u> Owner: | |
| Location of Mobile Home: | |
| City/State/Zip: | |
| Phone #: | County: |
| Mailing Address: | |
| City/State/Zip: | |
| MOBILE HOME INFORMATION | |
| Make: | Year: Size: Title #: VIN: |
| | |
| Mover: | |
| Address: Mover's DOT No.: | City/State/Zip: |

CREDIT CARD PAYMENT AUTHORIZATION

970-244-1824

| Credit Card (please mark one) |
|---|
| Visa |
| |
| American Express |
| ○ Discover |
| Card Number: |
| Expiration Date:/ CVV Code: (3 or 4 Digits on back of card) |
| Card Holder Name: |
| Billing Address: |
| |
| Phone Number: () |
| Email Address: |
| The Tax Authentication (if requested) will be emailed to you and you will need to print it off and take it with you to the DMV. |
| I understand that there is an additional processing fee charged by the Credit Card company to process my credit card payment. The fee is 2% plus .25 for a credit card. |
| I am requesting to pay for a Tax Authentication/Tax Certificate Via email. Please accept my signature below as authorization of charge. |
| Signature Date |