Kansas Department of Revenue Manufactured or Mobile Home Title and Registration Manual Application www.ksrevenue.gov

County Na	ıme:			
Owner Na	me(s):			
	(Last Name)	(First Name)		(Middle Initial)
	(Last Name)	(First Name)		(Middle Initial)
	(Last Name)	(First Name)		(Middle Initial)
	(Last Name)	(First Name)		(Middle Initial)
Owner Ad	dress:			
	(Street Address)	(City)	(State)	(Zip)
VIN/Serial	/Identification Number:			
Year:	Make:		Width:	Length:
Special Ma	ail Out Name and Address:	(Name)		
		(Name)		
	(Street Address)	(City)	(State)	(Zip)
Lienholde	r Information:	(Name)		
	(Street Address)	(City)	(State)	(Zip)
Owner Sig	nature(s):			
			Date:	