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Junk Mobile Home Incentive Program Application and Release of Claim

We, the undersigned, are the legal owners of the junk mobile home described below: YEAR: _____ MODEL: _____ SIZE: _____ ID NUMBER: _____ And we are the owner of the real property where the mobile home is located, described as: S_____T___R____Parcel/Lot_____COS_____Tax#_____ GEO Code: Address: In consideration for the Junk Mobile Home Incentive Program, you agree as follows: The mobile home is wrecked, ruined, dismantled or abandoned and no longer fit for human habitation; We release all rights, title and interest in the junk mobile home; We have removed any property from within the junk mobile home that we wish to retain, and agree not to add any items to the mobile home before it is disposed of; 4. We acknowledge that Sanders County has agreed to offer a \$500 incentive in efforts to help mitigate community decay on the property, and that it is our responsibility to maintain our property in a manner free of community decay conditions; We give permission for Sanders County and/or its contractor to access my property to verify that my mobile home meets the junk mobile/vehicle definition and verify that said mobile home has been recycled prior to \$500 incentive being paid 6. We understand that Sanders County has no obligation to give an incentive for any additional junk mobile homes that we Upon completion of removal, this application for incentive will be reviewed and approved by the Board of County Commissioners prior to payment; Upon completion of removal/recycling, please provide receipts showing proof of mobile home being recycled; I understand that the Mobile Home Incentive Program is on a first come/first serve basis per Sanders County Resolution No. 2017-10, which can be provided; 10. We have read this agreement and understand all its terms and conditions. By Signing below, we are agreeing to be bound by all of those terms and conditions. Dated this______, 20______. Printed Name: ______ Signature: _____ Printed Name: _____Signature: _____ Mailing address: Phone Number:

Authorized Signature:

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Receipt of payment

Authorized Signati	ures:		
Board of County C	ommissioners		
Anthony B. Cox, P	residing Officer:		
Glen E. Magera, C	ommissioner:		
Carol Brooker, Co	mmissioner:		
		Attest	
Dated this	day of	. 20	