



DEPARTMENT OF BUSINESS AND INDUSTRY
MANUFACTURED HOUSING DIVISION

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ERASURE AFFIDAVIT

STATE OF NEVADA

COUNTY OF _____)

The undersigned, being duly sworn, states that the erasure appearing on line _____, on the _____ covering:

Make/Model : _____ Year: _____ Serial # _____

was made because (give reason):

and _____ erased should not be part of the Record.

Organization/Printed Name: _____

Signature: _____

State of _____ County of _____

Subscribed and sworn to before me, _____ the undersigned Notary
(Notary Public name)

Public, this _____ day of _____, 20 _____ by _____

(Name of Person Signing Document)

Notary Public signature