

	-												
Current Owner Name			Add	Address			City			State	Zip		
Previous Owner Name Ad				Address			City			State	Zip		
Manufactured Home	Manufacturer Name S			Serial Number of the Manufactured Home				Home is: Purd New Used			chase Date (MM/DD/YYYY)		
Manufa Ho	Year Make Model Name			Dimensions of			he Home Purchase Price or Declared Value of the Home						
Statement of Facts	Statement of Facts Regarding Certificate of Title. I hereby state the following: (Place initials in applicable boxes)  The following facts are known by me which affect the validity of the title to the manufactured home referenced above (attach a separate exhibit if more space is needed).  I am not aware of any facts or information that could affect the validity of the title of the manufactured home or the existence or nonexistence of a security interest in or lien on it.												
	Lienholder(s) Information: (In order of priority)												
Lienholder				Address			City			State	Zip		
Lien	Lienholder Name			Address			City			State	Zip		
¥	Parties re	equesting written ac	knowledgement	of conversion	n:								
Written Acknowledgement				Address			City			State	Zip		
Wr Acknow	Name			Address			City			State	Zip		
	Under the penaltes of perjury, I hereby affirm that the information contained in this application and any exhibit which may be attached to this												
Signature	document is true and accurate.												
	Signature						Title	Title					
	Printed Name					Date (MM/DD/YYYY)//							
	Note: Lice	ense Office notary s	ervice - \$2.00										
Notary Information	Note: License Office notary service - \$2.00  Embosser or black ink rubber stamp seal  Subscribed and sworn before me, this												
				c			day of	day of			year		
				State		County (or City of St. Louis		My Com	My Commission Expires (MM/DE			()	
				Notary Public Signature									
ž	N			Notary Pu	Notary Public Name (Typed or Printed)								
	To be completed by an atternay at law or agent of a title incurrence company												
To be completed by an attorney-at-law or agent of a title insurance company	To be completed by an attorney-at-law or agent of a title insurance company.												
	I certify that the manufactured home described in this Application for Confirmation of Conversion is free and clear of, or has been released from, all recorded security interests, liens, and encumbrances. Place your initials in one of the applicable boxes below:												
	I certify 1) that the following facts are known by me which affect the validity of the title to the manufactured home described in this application, or 2) that I am aware of the exsistence of the following lien or encumbrance to the manufactured home described in this application (attach a separate exhibit if more space is more space is needed).												
pleted by f a title ir	I am not aware of any facts or information which may affect the validity of the title of the certificate of title to, or the existence of any lien or encumbrance on the manufactured home described in this application.										l		
o H	Bar Number if an Attorney License Number if a Title Insurance Agent												
o be c or age	Signature of Attorney or Title Insurance Agen									ate (MM/DD/YYYY)			
	i								///				

Present this completed form to your local license office or mail it with the appropriate fees to:

Phone: (573) 526-3669

E-mail: mvbmail@dor.mo.gov

Form 5314 (Revised 08-2019)

