

**STATEMENT OF CONSENT TO PURCHASE
UNDER 18 YEARS OLD**

Wisconsin Department of Safety and
Professional Services
Manufactured Home Unit
P.O. Box 8935
Madison, WI 53708-8935

Year	Make	Size-Body Length & Width	Manufactured Home Serial Identification Number
Print Owner Name			Print Custodian's Name
Address (Street)			Address (Street)
City	State	Zip Code	City State Zip Code

I certify that I have legal custody of the person named as owner and consent to the purchase by such person and certification of the Manufactured Home described in the applicants name

X

Notary Public County Date my commission expires Date subscribed and Sworn to before me Notary Signature **(Print and Sign Form)**

X

(Print and Sign Form)