



Public Protection Cabinet  
 Department of Housing, Buildings & Construction  
 Manufactured Housing Section  
 500 MERO STREET  
 FRANKFORT, KENTUCKY 40601  
 (502) 573-1795 Fax (502) 573-1059



## AFFIDAVIT OF SALE (Salvage Only)

I, as a retailer, may not sell a manufactured or mobile home that does not meet the reasonable standards set by the Department of Housing, Buildings and Construction. Any unit bearing a B2 seal has defects that render it uninhabitable and ineligible for sale by a retailer for use as a dwelling. Pursuant to KRS 227.600(3), I may sell a unit as long as I notify the purchaser of the non-complying conditions and submit an affidavit stating same.

Acknowledgment is made of the receipt from: \_\_\_\_\_

Make: \_\_\_\_\_ Model#: \_\_\_\_\_ Serial#: \_\_\_\_\_

Purchased from: \_\_\_\_\_ for the sum of \$ \_\_\_\_\_

It is expressly agreed that this manufactured or mobile home has been purchased in a salvage only condition. F.O.B. \_\_\_\_\_, the retailer has no liability for its condition or performance either present or future. The purchaser understands that this unit is not approved for habitation, as such, because the following conditions exist:

- The electrical, heating, cooling (if applicable), fuel burning and plumbing systems are unsafe and not working;
- The structural integrity of the building doors or windows are not sufficient;
- The sealing of all exterior holes to prevent entrance by rodents has not been completed;
- There is not at least one (1) working smoke detector near a bedroom on each floor level;
- There are no storm doors; or
- There are not two (2) exits or escapes from the unit in the event of a fire, and the unit originally had two (2) exits or escapes.

SIGNATURE: \_\_\_\_\_  
 Purchaser Date Signed

\_\_\_\_\_  
 Purchaser Date Signed

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City, State and Zip Code

SIGNATURE: \_\_\_\_\_  
 Dealer/Agent Date Signed

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My Commission expires \_\_\_\_\_, 20\_\_\_\_\_

Name of Notary \_\_\_\_\_

Seal Public