

CP NATIONAL WEATHERIZATION PROGRAM MORTGAGE

18636

Vol. 18238

THIS MORTGAGE made this 7th day of December, 1982, between Katosmi McKay, Mortgagor, to CP NATIONAL CORPORATION, a California corporation, (CP National), Mortgagee, WITNESSETH:

That said Mortgagor having contracted with CP National for certain weatherization improvements for and in consideration of the sum of Eight hundred thirty five Dollars (\$ 835.00), does hereby grant, bargain, sell and convey unto said Mortgagee, that certain property situated in Klamath County, State of Oregon, being described as follows, to-wit:

Street Address: 618 Owens Street

Legal Description:

SOUTHERLY 60' OF LOT 23 AND THE SOUTHERLY 60' OF LOT 24, BLOCK 7, INDUSTRIAL ADDITION, CITY OF KLAMATH FALLS.

This conveyance is intended as a mortgage to secure the payment of the Mortgagor's obligations under the retail installment contract between CP National and Mortgagor dated November 24, 19 82. The date of maturity of the debt secured by this mortgage is the date upon which the last retail installment contract becomes due, to-wit: December, 19 87.

This mortgage is subject to any and all prior liens, and encumbrances of record on the above described property but shall have priority over all other and subsequent liens and encumbrances.

When the Mortgagor shall pay all sums, including principal and interest, owing to Mortgagee in accordance with the terms of the aforementioned retail installment contract, this conveyance shall become void; but in case default shall be made in the payment of the principal or interest or any part thereof under the terms of said contract, then the said Mortgagee may foreclose this mortgage and sell the premises above described with all and every of the appurtenances or any part thereof, in the manner prescribed by law, and out of the money arising from such sale, retain the said principal, interest and actual reasonable costs of collection as provided in said retail installment contract, together with the costs and expenses of such foreclosure proceedings and the sale of the said premises, including reasonable attorneys' fees, and the surplus, if any, shall be paid over to said Mortgagor or Mortgagor's heirs or assigns.

WITNESS \_\_\_\_\_ hand \_\_\_\_\_ this 7th day of December, 19 82.

Katosmi McKay

STATE OF OREGON )  
COUNTY OF KLAMATH ) ss:

The foregoing instrument was acknowledged before me this 21 day of December, 19 82, by Bette Phillips.  
NOTARY PUBLIC FOR OREGON \_\_\_\_\_ My Commission expires 2-30-85

Return to: C P NATIONAL, P. O. BOX 310, Klamath Falls, Or 97601

SELLER:



CPnational

## RETAIL INSTALLMENT CONTRACT

ACCOUNT NUMBER **18239**  
**27-0101825-11**

PURCHASER (PRINT) FIRST NAME **Kotormi** MIDDLE INITIAL **McKay** LAST NAME **McKay**  
 SPOUSE FIRST NAME **OWENS** MIDDLE INITIAL **OR** LAST NAME **87601**  
 STREET ADDRESS **618 OWENS** CITY **K Falls** STATE **OR** ZIP CODE **97601**  
 DATE WANTED **12-1-82** DATE OF ORDER **12-1-82**  
 SHIP TO (If other than Purchaser)  
 C.O. **SAME** PHONE NO. **-**

CREDIT APPLICATION ALL APPLICABLE CREDIT INFORMATION MUST BE FILLED IN COMPLETELY AND ACCURATELY

☐ HOME PHONE OR ☐ NEAREST SOCIAL SECURITY NUMBER **123456789** NO OF DEPENDENT CHILDREN **0** HOW LONG THIS ADDRESS **0** YRS **0** MOS **0** ☐ BUYING ☐ HOUSE ☐ CONDOMINIUM ☐ RENTING ☐ APARTMENT ☐ MOBILE HOME  
 STREET ADDRESS **618 OWENS** CITY **K Falls** STATE **OR** ZIP CODE **97601**

☐ LANDLORD OR ☐ MORTGAGE HOLDER  
 MONTHLY MORTGAGE OR RENT PAYMENT \$ **0** GIVE ALL PREVIOUS ADDRESSES AND DATES FOR PAST 2 YEARS  
 PURCHASER'S EMPLOYMENT ☐ SELF EMPLOYED (STATE TYPE OF BUSINESS) **see previous application** POSITION OR OCCUPATION **see previous application** INCOME \$ **0** ☐ WEEK ☐ MONTH  
 STREET ADDRESS **618 OWENS** CITY **K Falls** STATE **OR** ZIP CODE **97601** HOW LONG **0** YRS **0** MOS **0** EMPLOYER'S PHONE **0** PAY DAYS **0**

GIVE ALL PREVIOUS EMPLOYERS AND DATES FOR PAST 2 YEARS  
 INSERT DATE OF 4TH BUSINESS DAY FOLLOWING THE DATE OF THIS ORDER **12-1-82**

☐ SPOUSE'S EMPLOYER **0** CITY **0** EMPLOYER'S PHONE **0** POSITION OR OCCUPATION **0** INCOME \$ **0** ☐ WEEK ☐ MONTH  
 STREET ADDRESS **0** CITY **0** EMPLOYER'S PHONE **0** POSITION OR OCCUPATION **0** INCOME \$ **0** ☐ WEEK ☐ MONTH

SOURCES OF OTHER INCOME **0** CITY **0**

BANK ACCOUNT ☐ CHECKING ☐ SAVING NAME OF BANK **0** STREET ADDRESS **0** CITY & STATE **0**

WHERE DO YOU BORROW OR BUY ON CREDIT? (INCLUDE OPEN ACCOUNTS ON BANK LOANS, FINANCE COMPANIES, CHARGE ACCOUNTS & OTHER INSTALLMENT ACCOUNTS)

| NAME         | STREET ADDRESS | CITY & STATE | PRESENT BALANCE | MONTHLY PAYMENT |
|--------------|----------------|--------------|-----------------|-----------------|
| 1. AUTO LOAN |                |              | \$              | \$              |
| 2.           |                |              | \$              | \$              |
| 3.           |                |              | \$              | \$              |

| DESCRIPTION            |  |             |                   |
|------------------------|--|-------------|-------------------|
| CEILING INSULATION     | New <input type="checkbox"/> Add-On <input type="checkbox"/> |             |                   |
| sq. ft.                | 30 R-Value   | per sq. ft. | 220 <sup>00</sup> |
| SIDEWALL INSULATION    |  |             |                   |
| sq. ft.                | R-Value  | per sq. ft. |                   |
| INSULATE FLOOR TO R-19 |  |             | 490 <sup>00</sup> |
| GROUND COVER           |  |             | 50 <sup>00</sup>  |
| INSULATE PIPES         |  |             | 25 <sup>00</sup>  |
| INSTALL 3 ROOF VENTS   |  |             | 50 <sup>00</sup>  |
| LIST PRICE             |  |             | 835 <sup>00</sup> |

TERMS OF SALE

1. LIST PRICE \$ **835.00**  
 2. SALES TAX \$ **0.00**  
 3. SHIPPING & HANDLING \$ **0.00**  
 4. CASH PRICE (1+2+3) \$ **0.00**  
 5. CASH DOWN PAYMENTS  
 PART A — Paid with order \$ **0.00**  
 PART B — To be paid on delivery (C.O.D.)  
 Tax \$ **MA**  
 Plus \$ **MA** = \$ **0.00**  
 6. TOTAL DOWN PAYMENT (PARTS 5A + 5B) \$ **0.00**  
 7. AMOUNT FINANCED (4-6) \$ **835.00**  
 (UNPAID BALANCE OF CASH PRICE)  
 8. FINANCE CHARGE ANNUAL PERCENTAGE RATE **6 1/2 %**  
 9. TOTAL OF PAYMENTS (7 + 8) \$ **980.34**  
 10. DEFERRED PAYMENT PRICE (4 + 8) \$ **980.34**  
 PAYABLE IN **60** EQUAL MONTHLY PAYMENTS \$ **16.33** EACH, PLUS A FINAL \$ **0.00** PAYMENT.  
 FIRST PAYMENT DUE ON OR ABOUT 30 DAYS AFTER DELIVERY AND MONTHLY THEREAFTER.  
 FINANCE CHARGE APPLIES FROM 30 DAYS PRIOR TO FIRST PAYMENT DUE DATE.  
 Purchaser agrees to pay a delinquency charge of 1 1/4% of the unpaid amount of any installment when any such installment is unpaid for 10 days or more after its due date.

NOTICE TO CUSTOMER: (1) Do not sign this before you read it or if it contains any blank spaces. (2) You are entitled to an exact copy of any agreement you sign. (3) You have the right at any time to pay in advance the unpaid balance due under this agreement and you may be entitled to a partial refund of the finance charge computed as of the installment date nearest the date of prepayment based upon the Rule of 78. No refund of less than \$1.00 will be made. (4) You, the buyer, may cancel this transaction at any time prior to midnight of the fourth business day after the date of this transaction. See the attached notice of cancellation form for an explanation of this right. (5) This contract is also a notice of intent to lien at any time CP national should deem necessary.

## ADDITIONAL TERMS OF CONTRACT ON REVERSE SIDE

(PRINT) SALESMAN'S NAME

ACCEPTED &amp; EXECUTED FOR CP national

BY: **[Signature]** DATE: **12/24/82**

State of OREGON: COUNTY OF KLAMATH: ss.

I hereby certify that the within instrument was received and filed for record on the

21 day of Dec. A.D., 1982 at 4:14 o'clock P.M., and duly recorded in

Vol M82 of Mtge on page 18238.

Fee \$ 8.00

I (we) have read this contract and hereby acknowledge receipt of 2 fully completed copies and 2 detachable notices of cancellation. I (we) warrant that all information supplied are complete and accurate.

Purchaser's Signature  
 Spouse's Signature  
 Co-Signer's Signature

**[Signature]**  
**[Signature]**  
**[Signature]**

EVELYN DIEHN  
COUNTY CLERKBy **[Signature]** deputy