~	76 APR -5 P3:50	Vol	M96 Page 9701
17 - Manual Manual Contract of Contract	ATION TO EXEMPT A	IANUFACTURE	ED STRUCTURE
DEPARTMENT OF TRANSPORTATION REVER AND MOTOR VEHICLE SERVICES TOOS LANA AVE, NE SALENI OR 97314 X 21050	OM Owner's Certificate		
Complete all sections. This form mu that cannot be over 7 days old when This form and Title Report or Lat Bor	st be signed by all interest-holding par submitted to DMV. ok Recort must be submitted with your	manufactured structure o	
manufactured structure is to be finan	ced by a third party, proof of a loan ap		
Legal description and location of real pr substituted): Lot 2 in Block 2	roperty (description as recorded by o of TRACT 1203- COUNTRY VI	ounty recorder or a cer LLAGE, according	
plat thereof on file in the			
If there is a mortgage, deed of trust or lier two names and addresses. If there are n	n on this land, list all mortgagees and lone, write "none".	peneficiaries of deeds of	trust below. Space is provided for
NAME AND ADDRESS Forest Products Federal Cre NAME AND ADDRESS	edit Union 2972 Washburn	Way Klamath	alls OR 97601
P.O. Box 117	9 KLAMATH FAL	15, OR 974	01
Tax Lot Number (from assessor): 3908	-012A0-00300		
Legal description of the manufactured sta		rty described above:	
YEAR MAKE	VIDTH LENGTH 27 48	VEHICLE IDENTIFICATION P BD9303	····
1990 GOLWEST List all security interest holders, mortgag structure described above. Space is pro approval that the application may be sub NAME AND ADDRESS Porest Products Federal Cr NAME AND ADDRESS	omitted. If there are none, write "non	9"	• •
SKRATURE OF SECURED PARTY		E OF SECURED PARTY	DATE
Tax ot Number (from assessor): M-	201507 3908-01240-00		
	of the permanent plate assigned to thi		ans deeds of trust, mortgages and
I/We certify that the statements made security interests have been listed. If the	 above are accurate to the best of in here are none, I/We have certified this 	by writing "none" in the s	pace provided.
PRINTED NAME OF OWNER(S)	Jr. Ond Victoria K. 4871 Sue Dr. Kla	Lathis	TELEPHONE (Optional)
SIGMATURE OF OWINER	ADDRESS +4871 Sue Dr. Klar	math Falls, 1	x 971.01
X Jutoira Mathia	PARTIII	ha nradis, o	▼ OFFICE USE ONLY ▼
Application for exemption for a mai	nufactured structure is hereby appr	oved. 💢	RECEIVED
DATE 4-3-96 X	Christine King	ei.	MAR 1 5 1996
This exemption is VOID if not rec			MOLOR VERYCLER, OHVISTEN
735-0722 (7/94).	SEE REVERSE FOR COUNTY	RECORDING AREA	STK #300

	<u>REG Z- GON AP</u>	. 5,44,2
BIND ACTURED STRUCTURE NON AND THE NG	al Recording by County Clerk () TACKED	
na na sel tor i ne incensi all'estat <mark>de la prese</mark> ata Alla compositiones de la composi	Ni z gręgo wiekona sa Romonikach processowa Mi z gręgo wiekona sa Romonikach processowa Mi doli kał kongoregia Mi doli	1993) Alise an Alise Alise an Alise
RPORATE ACKNOWLEDGMENT		*****
State of OREZON }ss.	On this the <u>30</u> day of <u>JANUAR</u> before me, <u>MIII</u> <u>WHITING</u>	-
	the undersigned Notary Public, perso <u>JAMES C. RENEAU</u>	
	 (a) Spret(s) (b) personally known to me - OR - (c) proved to me on the basis of satisfactory et to be the person(s) who executed the with 	
	Specialized Lendere	Mgr
OFFICIAL SEAL MILLI WATTING MOTATY PUBLIC-OREGON COMMERCIAN NO. GEORGE MY COMMERCIAN EDWIND CCT. 6, 1807	on behalf of the corporation therein named, a to me that the corporation executed it. Witness my hand and official seal. Mut Witney Signature of Notary Public	and acknowle
Though the information in this section is not requin	ed by law, it may prove valuable to persons relying on the	RIGHT THUM
document and could prevent fraudulent remove Description of Attached Document	al and reattachment of this form to another document.	Top of thurn
Title or Type of Document:		
Document Date:	Number of Pages:	
Signer(s) Other Than Named Above:		ļ

C. Care