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AGREEMENT FOR EASEMENT

Vol. 198 Page 10714



THIS AGREEMENT, Made and entered into this _____ day of April, 1998, by and between PAUL C. CAHILL, hereinafter called the first party, and CITY OF KLAMATH FALLS, a political subdivision of the State of Oregon, hereinafter called the second party;

WITNESSETH:

WHEREAS: The first party is the record owner of the following described real estate in Klamath County, State of Oregon, to-wit:

Lot 6 in Block 3 of NORTH HILLS-TRACT 1152, according to the official plat thereof on file in the office of the county Clerk of Klamath County, Oregon.

IN WITNESS WHEREOF, the parties have hereunto set their hands and signatures at the City of Klamath Falls, Oregon, this _____ day of April, 1998.

The undersigned, a Commissioner of the County of Klamath, Oregon, do hereby certify that the foregoing is a true and correct copy of the original instrument as the same appears in the records of the County of Klamath, Oregon.

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and has the unrestricted right to grant the easement hereinafter described relative to the real estate;

NOW, THEREFORE, in view of the premises and in consideration of One Dollar (\$1) by the second party to the first party paid and other valuable considerations, the receipt of all of which hereby is acknowledged by the first party, they agree as follows:

The first party does hereby grant, assign and set over to the second party an easement for construction maintenance and operation of an underground waterline and appurtenances more particularly described in Exhibit "A" attached hereto and made a part hereof.

(Insert here a full description of the nature and type of the easement granted to the second party.)

— OVER —

AGREEMENT FOR EASEMENT

BETWEEN

Paul C. Cahill

City of Klamath Falls

After recording return to (Name, Address, Zip)
City of Klamath Falls

STATE OF OREGON,

County of _____

ss.

I certify that the within instrument was received for record on the _____ day of _____, 19____, at _____ o'clock _____ M., and recorded in book/reel/volume No. _____ on page _____ or as fee/file/instrument/microfilm/reception No. _____ of said county.

Witness my hand and seal of County affixed

NAME _____ TITLE _____
By _____, Deputy

ca.
20

The second party shall have all rights of ingress and egress to and from the real estate (including the right from time to time, except as hereinafter provided, to cut, trim and remove trees, brush, overhanging branches and other obstructions) necessary for the second party's use, enjoyment, operation and maintenance of the easement hereby granted and all rights and privileges incident thereto.

Except as to the rights herein granted, the first party shall have the full use and control of the above described real estate.

The second party hereby agrees to hold and save the first party harmless from any and all claims of third parties arising from second party's use of the rights herein granted.

The easement described above shall continue for a period of perpetuity, always subject, however, to the following specific conditions, restrictions and considerations:

VOCEMENT FOR EASEMENT

STATE OF OREGON

(Insert here a full description of the nature and extent of the easement granted to the first party herein.)

If this easement is for a right of way over or across the real estate, the center line of the easement is described as follows:

and second party's right of way shall be parallel with the center line and not more than _____ feet distant from either side thereof.

During the existence of this easement, maintenance of the easement and costs of repair of the easement damaged by natural disasters or other events for which all holders of an interest in the easement are blameless shall be the responsibility of (check one): ☐ the first party; ☒ the second party; ☐ both parties, share and share alike; ☐ both parties, with the first party being responsible for _____ % and the second party being responsible for _____ % (If the last alternative is selected, the percentages allocated to each party should total 100.)

During the existence of this easement, those holders of an interest in the easement that are responsible for damage to the easement because of negligence or abnormal use shall repair the damage at their sole expense.

This agreement shall bind and inure to the benefit of, as the circumstances may require, not only the immediate parties hereto but also their respective heirs, executors, administrators and successors in interest.

In construing this agreement, where the context so requires, the singular includes the plural and all grammatical changes shall be made so that this agreement shall apply equally to individuals and to corporations. If the undersigned is a corporation, it has caused its name to be signed and its seal (if any) affixed by an officer or other person duly authorized to do so by its board of directors.

IN WITNESS WHEREOF, the parties have hereunto set their hands in duplicate on this, the day and year first hereinabove written.

Paul C. Cahill

City of Klamath Falls

First Party

Second Party

STATE OF OREGON,

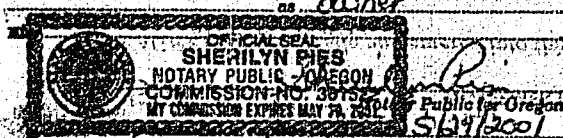
STATE OF OREGON,

County of Deschutes

County of _____

This instrument was acknowledged before me on April 19, 1998 at _____ by Paul C. Cahill as owner

This instrument was acknowledged before me on April 19, 1998 at _____ by _____ as _____



of City of Klamath Falls

Notary Public for Oregon
My commission expires _____

EXHIBIT "A"

10716

Paul Cahill
Waterline Easement

An easement for construction, operation and maintenance of an underground waterline and appurtenances located in Lot 6, Block 3, Tract 1152 - North Hills in the NE1/4 of Section 35, T.38S., R. 9E., W.M., Klamath County, Oregon, being more particularly described as follows:

Beginning at a point on the southerly right-of-way line of North Hills Drive from which the northwest corner of said Lot 6, Block 3 bears S 63°48'16" W 121.17 feet; thence S 36°55'45" E 123.68 feet; thence N 88°55'05" E 65.48 feet; thence S 1°04'55" E 16.00 feet; thence S 88°55'05" W 53.31 feet; thence S 53°04'15" W 36.92 feet; thence S 38°57'55" W 6.09 feet; thence N 51°02'05" W 16.00 feet; thence N 38°57'55" E 31.17 feet; thence N 36°55'45" W 121.44 feet to the southerly right-of-way line of North Hills Drive; thence northeasterly 16.02 feet along the arc of a 230.00 foot radius curve to the left, the long chord of which bears N 50°31'40" E 16.02 feet to the point of beginning.

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of City of Klamath Falls the 1st day
of April A.D., 19 98 at 3:40 o'clock PM, and duly recorded in Vol. M98
of Deeds on Page 10714

Bernetha G. Letsch, County Clerk

FEE \$20.00

By Kathleen Ross

**ORIGINAL UNIT OF THE OREGON HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH**

1. DECEDENT'S NAME: BULL 2. SEX: Male 3. DATE OF DEATH (Month, Day, Year): March 13, 1998

4. SOCIAL SECURITY NUMBER: [REDACTED] 5a. AGE Last Birthday (Year): 78 5b. UNDER 1 Year: None 5c. UNDER 1 Day: None 5d. BIRTHPLACE (City and State or Foreign): Hamlet, Oregon 7. DATE OF BIRTH (Month, Day, Year): December 7, 1920

8. WAS DECEDENT EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No 9. PLACE OF DEATH (Check only one): ☒ Dwelling ☐ Hospital ☐ Other (Specify): None

10. FACILITY NAME (if not residence, give street and number): Marle West Medical Center 11. CITY, TOWN, OR LOCATION OF DEATH: Klamath Falls 12. COUNTY OF DEATH: Klamath

13a. RESIDENCE - STATE: Oregon 13b. COUNTY: Klamath 13c. CITY, TOWN OR LOCATION: Klamath Falls 14. MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify): Married 15. SPOUSE (if Married, Widowed, Divorced) (Specify): Helen Embry

16. DECEASED'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired): Plumber 17. DECEASED'S BUSINESS/INDUSTRY: Unemployed 18. DECEASED'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (9-12) College (1-4 or 5+)

19. INSIDE CITY LIMITS? ☒ Yes ☐ No 20. ZIP CODE: 97632 21. WAS DECEDENT OF HISPANIC ORIGIN? (Specify by race or ethnicity, specify Spanish, Mexican, Puerto Rican, etc.) ☐ Yes ☒ No 22. PRICE American Indian, Alaska Native, or Pacific Islander (Specify): None

23. FATHER - NAME: Dr. Hunter Embry 24. MOTHER - NAME: Helen Embry 25. SPOUSE - NAME and relationship to decedent: Helen Embry - 1st Spouse

26. METHOD OF DISPOSITION: ☒ Burial ☐ Cremation ☐ Removal from State ☐ Donation ☐ Other (Specify): None 27. PLACE OF DISPOSITION: Marle West Medical Center 28. LOCATION - City or Town, State: Klamath Falls, Oregon

29. SIGNATURE OF DECEDENT'S SERVICE LICENSEE OR PERSON ACTING AS SUCH: [Signature] 30. OTHER LICENSEE NO. (if applicable): None 31. CAUSE, ADDRESS AND ZIP OF FACILITY: Marle West Medical Center, 221 W. 3rd, Klamath Falls, Oregon

32. DATE FILED (Month, Day, Year): MAR 18 1998 33. REGISTRAR'S SIGNATURE: [Signature]

34. TIME OF DEATH: 2340 35. WAS MEDICAL EXAMINER NOTIFIED? ☒ Yes ☐ No 36. TIME OF DEATH: 2340 37. DATE PRONOUNCED DEAD (Month, Day, Year): March 13, 1998

38. To the best of my knowledge, death occurred at the place, date, time and due to the cause(s) and manner stated. (Signature): [Signature] 39. DATE SIGNED (Month, Day, Year): March 16, 1998 40. COUNTY: Klamath

41. NAME, TITLE, ADDRESS AND ZIP OF CERTIFYING PHYSICIAN: Sean B. Dow, M.D., 1800 Main Street, Klamath Falls, Oregon 97601 42. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFYING PHYSICIAN: None

43. PART (a) DUE TO, OR AS A CONSEQUENCE OF: Pulmonary Fibrosis 44. Interval between onset and death: Yes

45. PART (b) DUE TO, OR AS A CONSEQUENCE OF: None 46. Interval between onset and death: None

47. PART (c) OTHER SIGNIFICANT CONDITIONS: Conditions contributing to death but not resulting in the underlying cause given in PART 1. 48. Did tobacco use contribute to the death? ☐ Yes ☒ No 49. AUTOPSY: ☐ Yes ☒ No 50. YES YES were findings confirmed in examining cause of death? ☐ Yes ☒ No

51. MANNER OF DEATH: ☒ Natural ☐ Pending Investigation ☐ Accident ☐ Undetermined ☐ Suicide ☐ Homicide ☐ Legal Intervention ☐ Other 52. DATE OF INJURY (Month, Day, Year): None 53. TIME OF INJURY: None 54. INJURY AT WORK? ☐ Yes ☒ No 55. DEATHS HOW INJURY OCCURRED: None

56. PLACE OF INJURY - At home, farm, school, business, office, building, etc. (Specify): None 57. LOCATION (Street and Number or Rural Route Number, City or Town, State): None

I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE OR THE VITAL RECORD FACTS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON HEALTH DIVISION.

ORIGINAL UNIT OF THE OREGON HEALTH DIVISION

DATE ISSUED: MAR 18 1998

EDWARD J. JOHNSON II
STATE REGISTRAR

STATE OF OREGON: COUNTY OF KLAMATH ss.

Filed for record at request of Helen Embry the 2nd day of April A.D., 19 98 at 9:32 o'clock A. M. and duly recorded in Vol. M98 of Deeds on Page 10717.

FEE \$10.00

By Bernetha G. Letsch, County Clerk
Kathleen Ross