



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1805 LANIA AVE., NE SALEM OR 97314

1999 JUN 21 AM 11:08

APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE FROM REGISTRATION AND TITLING

EM 31171

Owner's Certificate of Legal Interest

K53496

X234707

INSTRUCTIONS:

Complete all sections. This form must be signed by all interest-holding parties and have a Title Report or Lot Book Report attached that cannot be over 7 days old when submitted to DMV.

This form and Title Report or Lot Book Report must be submitted with your manufactured structure ownership documents and, if the manufactured structure is to be financed by a third party, proof of a loan approval.

Legal description and location of real property (description as recorded by county recorder or a certified copy of your deed may be substituted): Situs: 152164 Conestoga Lapine, Or. 97739

Lot 2, Block 7, Wagon Trail Acreages Number One, Second Addition, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

If there is a mortgage, deed of trust or lien on this land, list all mortgagees and beneficiaries of deeds of trust below. Space is provided for two names and addresses. If there are none, write "none".

NAME AND ADDRESS

WASHINGTON MUTUAL, 1100 Willamette St., 3rd Floor, Eugene, OR 97401

NAME AND ADDRESS

Tax Lot Number (from assessor): 2309 1C 2700

Legal description of the manufactured structure that is located on the real property described above:

YEAR	MAKE	WIDTH	LENGTH	VEHICLE IDENTIFICATION NO.
1996	GOLWE	27	44	N16352

List all security interest holders, mortgagees, beneficiaries of deeds of trust, and lienholders whose interest is secured by the manufactured structure described above. Space is provided for two names, addresses and approvals. Signatures from the parties listed below are their approval that the application may be submitted. If there are none, write "none". 01-976-1563231-9

NAME AND ADDRESS

WASHINGTON MUTUAL, 1100 Willamette St., 3rd Floor, Eugene, OR 97401

NAME AND ADDRESS

SIGNATURE OF SECURED PARTY	DATE	SIGNATURE OF SECURED PARTY	DATE
<u>[Signature]</u>	<u>6-17-99</u>	<u>[Signature]</u>	<u>X</u>

Tax Lot Number (from assessor): R-2309-1C-2700

☒ I/We do not know the whereabouts of the permanent plate assigned to this vehicle.

I/We certify that the statements made above are accurate to the best of my/our knowledge. All liens, deeds of trust, mortgages and security interests have been listed. If there are none, I/We have certified this by writing "none" in the space provided.

PRINTED NAME OF OWNER(S)

LEWIS, Ronald L. and LEWIS, B. J.

SIGNATURE OF OWNER	ADDRESS	TELEPHONE (Optional)
<u>[Signature]</u>	<u>First American Title Ins. Co., Albany</u>	
<u>[Signature]</u>	<u>First American Title Ins. Co., Albany</u>	

OFFICE USE ONLY

Application for exemption for a manufactured structure is hereby approved. ☒

DATE	SIGNATURE OF DMV OFFICER
<u>7/15/99</u>	<u>[Signature]</u>

This exemption is VOID if not recorded with the county within 15 calendar days from: 7/16/99

Ret 1st Amer. OC

15-

Official Recording by County Clerk.

29041

Return to: First American
P.O. Box 4620
Sunriver, Or 97707

State of Oregon, County of Klamath
Recorded 7/21/99, at 11:08 a. m.
In Vol. M99 Page 29040
Linda Smith,
County Clerk Fee\$ 15⁰⁰ KR



POWER OF ATTORNEY

I authorize the person or firm named below to act as my representative and to sign my name to any forms necessary concerning the titling and/or registration of the vehicle described below.

This power of attorney is valid only if the following sections are completed:

- Name of person or firm appointed as attorney and
- Plate number, vehicle identification number or title number, and
- Signature of owner.

NAME OF PERSON OR FIRM APPOINTED AS ATTORNEY (PRINTED)

FIRST AMERICAN TITLE INSURANCE COMPANY

DESCRIPTION OF VEHICLE

PLATE NUMBER

K234707

TITLE NUMBER

9623232127

YEAR

1996

MAKE

GOLWB

BODY STYLE

2U

VEHICLE IDENTIFICATION NUMBER

N16352

NAME OF OWNER (PRINTED)

LEWIS, Ronald L.

SIGNATURE OF OWNER

X *Ronald L. Lewis*

DATE

1-22-99

NAME OF JOINT OWNER (PRINTED)

LEWIS, B. J.

SIGNATURE OF JOINT OWNER

X *B. J. Lewis*

DATE

1-22-99

THIS POWER OF ATTORNEY
MAY NOT BE TRANSFERRED
TO ANY OTHER PERSON OR FIRM

(See instructions on back for exercising power of attorney.)

705-50015947

STK # 390158

JAN-21-1999 THU 01:22 PM FIRST AMERICAN TITLE SR FAX NO. 541 593 5248

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