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DMV

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DEPARTMENT OF TRANSPORTATION  
DRIVER AND MOTOR VEHICLE SERVICES  
1905 LANA AVE. NE., SALEM, OR 97314

N 802248

EM 31753

MTC 4525J-MF  
**APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE  
FROM REGISTRATION AND TITLING**  
Owner's Certificate of Legal Interest

**INSTRUCTIONS:**

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

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

PART I

Legal description and location of real property which is (description as recorded by county recorder or a certified copy of your deed may be substituted):

Lot 3 in Block 3 of WINEMA PENINSULA UNIT NO. 1, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Property Address:

34849 SCARFACE CHARLEY DRIVE, . CHILOQUIN, OR 97624

If there is a mortgage, deed of trust or lien on this land, list all mortgages and beneficiaries of deeds of trust below. If there are none, write "none".

NAME AND ADDRESS:

LAND HOME FINANCIAL SERVICES, . 1355 WILLOW WAY, STE #250, CONCORD, CA 94520

Tax Lot Number (from assessor): 3507-017A0-02900

PART II

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

Year	Make	Width	Length	Vehicle Identification No.
1999	GUERDON	40	45.4	GDSTOR 1799 20930

List all security interest holders, mortgages, beneficiaries of deeds of trust, and lienholders whose interest is secured by the manufactured structure described above. Signatures from the parties listed below are their approval that the application may be submitted. If there are none, write "none".

NAME AND ADDRESS:

LAND HOME FINANCIAL SERVICES, . 1355 WILLOW WAY, STE #250, CONCORD, CA 94520

SIGNATURE OF SECURED PARTY	DATE	SIGNATURE OF SECURED PARTY	DATE
	6/24/99	X	

Tax Lot Number (from assessor): 3507-017A0-02900

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)

PATRICK L. LANCTOT and CAROL VISAGE-LANCTOT

SIGNATURE OF OWNER	ADDRESS	LICENSE NO.
	2151 FOXGLOVE ROAD, TUSTIN, CA 92780	

SIGNATURE OF OWNER	ADDRESS	LICENSE NO.
	(SAME),	

SIGNATURE OF OWNER	ADDRESS	LICENSE NO.
X		

V OFFICE USE ONLY V

PART III

V OFFICE USE ONLY V

Application for exemption for a manufactured structure is hereby approved.

DATE 8/30/99 SIGNATURE OF DMV OFFICER

This exemption is VOID if not recorded with the county within 15 calendar days from: > 9/1/99

After Recording Return To:  
LAND HOME FINANCIAL SERVICES  
1355 WILLOW WAY, STE #250  
CONCORD, CA 94520

15<sup>00</sup>  
M

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Contra Costa

} ss.

On 6-24-99

Date

before me, Sandra I. Waite Notary

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared

JOHN Waite

Name(s) of Signor(s)

☒ personally known to me☐ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



Place Notary Seal Above

WITNESS my hand and official seal.

Signature of Notary Public

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

## Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

## Capacity(ies) Claimed by Signer

Signer's Name: \_\_\_\_\_

☐ Individual☐ Corporate Officer — Title(s): \_\_\_\_\_☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Trustee☐ Guardian or Conservator☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
TOP OF THUMBPRINT