	1049785	10	<u>36861</u>
APPLICATION T STRUCTURE FF Owne	TO EXEMPT A ROM TITLE AN er's Certificate of Leg	ND KEGISI NA	TION
NSTRUCTIONS: The following must be submitted to DMN This form, completed and signed by all parties with an in	V: hterest in the manufactured str	ructure. All areas of the form	DMV)
<ul> <li>completed.</li> <li>A Title Report or Lot Book Report. (The title report or lot)</li> <li>If the manufactured structure is new and is financed, pro</li> <li>Proof all taxes for the current tax year have been paid of Paid, Form 113, issued by the county where the manufacture</li> </ul>	on the manufactured structure. actured structure was located.	Proof may be a Contificate	of Taxes
Paid, Form 113, issued by the county where the manage	PART I	EXEMPT FILE #	020
ATE #		EM 31	
$\times 237916$ gal description of manufactured structure:			
a MAKE WIDTH Of LENGTH	SID CHILLE IDENTIFICATION		
	2W GW JORE	SB용식영역구 ertified copy of your deed ma	ay be substituted)
gal description and location of real property: (as record	ued by county recorder or a c		+ 1 - 1 27
- Dallar	IN-QUE Situate	t in Covernmer	
	b Rance 7 Ea	ist_ot_the_	Williame He
<u>arcel 3 of Land Vartinon</u> <u>bection 9, Township 35 South</u> Mendian, 10 - the County of	Klainstin State	- ef OKEGAM	
Nordian - 10 - 7 per 1-600 + - 62-		# 07= 10	
<u>CODE 118 MAP 3507-900 T</u> <u>CODE 118 MAP 3507-900 T</u> <u>Soperty Address 35473 Hwy 42</u> 97434	L 2202 Key:	Tax Lot Number (from asses	isor)
perty Address 35473 Hwy 42	1	2202	
Chiloquin, OR 9-14-24 AND: If there is a mortgage, deed of trust or lien on this la	1	liciaries of deeds of trust belo	ow. Space is provided
AND: If there is a mortgage, deed of trust or lien on this la r two names and addresses. If there are none, write "non	and, not an theriging		
0-10-02-00 97201		LOAN NUMBER	$\sim$
1 no Beach MortGAGE, 4640 Ma	ic Jaam "and	835190	
LONG ADDRESS JIMMY LECOND JOANNE	LynnDeott		
ANUFACTURED STRUCTURE: If there is a mortgage, of deeds of trust, and lien holder:	deed of trust or lien on the ma rs whose interest is secured.	anufactured structure, list all Space is provided for two na	security interest holders mes and addresses.
nortgagees, beneficiaries of deeds of itust, and iter write "	'none".	APPROVAL SIGNATURE	
	-	XALLU	$\sim$
640 Macadam #250, Mortiana, O	Lynscott	APPROVAL SIGNATURE	Scool lug aspen
On BAY 555 Childenia OR 971	424	Andrew Ju	Escray Onc.
	n nate assigned to the return	Joanna Jy	Dry Bon Ba
	to the heat of my/our knowler	dae.' All liens, deeds of trust	mortgages and securit
We certify that the statements made above are accurate nterests have been listed. If there are none, I/We have ce	ertified this by writing "none"	in the space provided.	TELEPHONE .
nterests have been listed. If there are none, where	ODL / ID / CUSTOMER	DATE OF BIRTH	(541) 783-227
Charles Earl Stutts	524104	4 01 - 28 - 45 DATE OF BIRTH	TELEPHONE
RINTED NAME OF OWNER(S)	Sta in OUSIOMER		_[()
NESIDENCE ADURESS 34351 5 Childwin Rd	MAILING ADDRESS		
TESIDENCE ADDRESS 34951 5 Childrenn NU	-Jome.	F8	
IGNATURE OF OWNER			
The for cal Matter			USE ONLY
V OFFICE USE ONLY V			
Application for exemption for a manufactured	structure is hereby appr	roved.	
Application for exemption for a manadotal of		,	
SIGNATURE DATE	Mustine King	ENPIRATION DATE	
SIGNATURE DATE $9/14/99$ SIGNATURE OF DWV OFFICER X This exemption is VOID if not recorded with the	he county by this date:	11 9/35/9	79 STK# 30

Official Recording by County Clerk.

PARLI

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36862

DMM POWER OF ATT	ORNEY
DEPARTMENT FUNDADRA INCOM	
I authorize the person or firm named below to act as my to sign my name to any forms necessary concerning registration of the vehicle described below.	representative and the titling and/or
This power of attorney is valid only if the follow completed:	ving sections are
<ul> <li>Name of person or firm appointed as attorney and</li> <li>Plate number, vehicle identification number or title number.</li> </ul>	mber, and
<ul> <li>Signature of owner.</li> </ul>	
AME OF PERSON OR FIRM APPOINTED AS ATTORNEY (PRINTED)	
<u>Aspen Title € Escrow, I</u> ■ DESCRIPTION OF VEHICLE	NC.
ATE NUMBER YEAR MAKE	BODY STYLE
1237916 1983 GOLA	24
GW30RE5B84897	
JIMMY Lee Scott	DATE
the Acout	
ALE OF JOINT OWNER (PRINTED)	
GNATURE OF JOINT OWNER	DATE
THIS POWER OF ATTORNE	IV.
MAY NOT BE TRANSFERRI	<b>ED</b>
TO ANY OTHER PERSON OR	FIRM
(See instructions on back for exercising power	of attorney.)
/35-500 (3:98)	State of Orego
	Recorded 9/1
	In Vol. M99 F
	Linda Smith,
	—— County Clerk