1000 OCT -7 Fil 3: 17

Vol M99 Page 400%7

DEPAREMENT OF TRANSPORTATION DRIVER AND MOTOR VEHICLE SERVICES

MC 48345-LW	
APPLICATION TO EXEMPT A MANUFACTURED S  VOCA 90 FROM REGISTRATION AND TITLING	TRUCTURE
XXXXX Owner's Certificate of Legal Interest	EM 32067
INSTRUCTIONS:	
Complete all sections. This form must be signed by all interest-holding parties and have a Title Report attached which cannot be over 7 days old when submitted to DMV.	e Report or Lot Book
This form and Title Report or Lot Book Report must be submitted with you manufactured structure of and if the manufactured structure is to be financed by a third party, proof of a loan approval.	
PART I	# 4 0 # 2 # 2 # 1 # 2 # 2 # 2 # 2 # 2 # 2 # 2
Legal description and location of real property which is (description as recorded by county recorcepy of your deed may be substituted):	der or a certified
LOTS 163 AND 164 IN BLOCK 31 OF FOURTH ADDITION TO NIMROD RIVER PARACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.	RK.
Property Address:	
28575 KOOTENAI STREET, . SPRAGUE RIVER, OR 97639	
If there is a mortgage, deed of trust or lien on this land, list all mortgages and beneficiaries of below. If there are none, write "none".	f deeds of trust
ME AND ADDRESS:	
ALENTINE LENDER SERVICES, INC., 15790 S.E. PIAZZA AVENUE, CLACKAMAS. OR 97015	

	. SPRAGUE RIVER, OR 97639	
If there is a mortgage, deed of trust or lie	en on this land. list all mortgages and beneficiaries o	of deeds of trust
below if there are none, write "none".		
NAME AND ADDRESS:		
VALENTINE LENDER SERVICES, INC. , 15790 S.E. F	PIAZZA AVENUE, CLACKAMAS, OR 97015	
Tax Lot Number (from assessor): 3611-008BO-1	1500-1600	
医口切氏性骨髓 医多种性 医甲状腺 医甲状腺 医甲状腺 医甲状腺 医甲状腺 医甲状腺 医阿里氏性	吸引的记录音音的现在分词 医维克氏细胞 化自然 化分析 医克尔克氏 医克尔克氏 计数据 医电子 计设备 医牙孔氏 经分价 医牙孔氏 经营工 化异氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	*****: ***********
	PART II	
· 以自己还是有 : 法法法法 医眼球球球球球球球 医 医	建 经延迟 医动物 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲甲甲甲甲甲甲	¥ # D D # 4 4 5 5 5 4 4 5 5 5 5 5 5
Legal description of the manufactured struct	ture which is located on the real property described ab	cve:
ear Make Width	Length / Vehicle identification No.	
194 PLTWD /4	X X	
	ORFLE48A)7980SP	
is secured by the manufactured and in the	ees, beneficiaries of deeds of trust, and lienholders wh	nose interest is
that the application may be set in a	scribed above. Signatures from the parties listed below	vare their appro
that the application may be submitted. If the	there are none, write "none".	
AME AND ADDRESS:		
15630 S.E.	90 TH	
CONTRACT OF COLUMN		
	SIGNATURE OF SECURED PARTY	SATE
Com Many VP.	X	
Tax Lot Number (from assessor): 3611-00880-1	1500-1600	
[ ] I/We do not know the whereabouts of the p	permanent plate assigned to this vehicle.	
17we certify that the statements made above a	are accurate to the best of my/our knowledge. All lien	6. deeds of true
nortgages and security interests have been li	are accurate to the best of my/our knowledge. All lien isted. If there are none, I/We have certified this no	s, deeds of trus
in the certify that the statements made above a mortgages and security interests have been lithe space provided.	are accurate to the best of my/our knowledge. All lien isted. If there are none, 1/We have certified this by	s, deeds of trustwriting 'none' in
moregages and security interests have been li	are accurate to the best of my/our knowledge. All lien isted. If there are none, I/We have certified this by	s, deeds of trus writing "none" i
the space provided.	are accurate to the best of my/our knowledge. All lien isted. If there are none, I/We have certified this by	s, deeds of trus
the space provided.  HINTED NAME OF OWNER(S)	are accurate to the best of my/our knowledge. All lien isted. If there are none, I/We have certified this by	s, deeds of trus writing 'none' i
the space provided.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVECHO	isted. If there are none, 1/We have certified this by	Writing "mone" in
the space provided.  INTED NAME OF OWNER(S)  THLEEN ANN BENVEGNO	isted. If there are none, 1/We have certified this by	s, deeds of trus Writing Thome" in Thickness No.
the space provided.  INTED NAME OF OWNER(S)  THLEEN ANN BENVEGNO	isted. If there are none, 1/We have certified this by	Writing Emone" 11
the space provided.  INTED NAME OF OWNER(S) THLEEN ANN BENVEGNO  DNATURE OF OWNER	ADDRESS   28575 KOOTENAI STREET, SPRAGUE PIVER, OR 91619	WEITING THOMES IN
the space provided.  INTED NAME OF OWNER(S)  THLEEN ANN BENVEGNO  DNATURE OF OWNER	ADDRESS   28575 KOOTENAI STREET, SPRAGUE RIVER, OR 91619   PART III   V OFFICE USE OF	Writing "none" if
the space provided.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVEGNO  DNATURE OF OWNER	ADDRESS   28575 KOOTENAI STREET, SPRAGUE PIVER, OR 91619	Writing "none" if
the space provided.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVEGNO  DNATURE OF OWNER  V OFFICE USE ONLY V	ADDRESS   28575 KOOTENAI STREET, SPRAGUE RIVER, 19 91619   PART 111   V OFFICE USE OF	Writing "none" if
the space provided.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVEGNO  DNATURE OF OWNER  V OFFICE USE ONLY V	ADDRESS   28575 KOOTENAI STREET, SPRAGUE RIVER, 19 91619   PART 111   V OFFICE USE OF	Writing "none" if
THE SPACE PROVIDED.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVEGNO  TONATURE OF OWNER  V OFFICE USE ONLY V  Application for exemption for a manufactured of the second of	ADDRESS   28575 KOOTENAI STREET, SPRAGUE RIVER, 19 91619   PART 111   V OFFICE USE OF	Writing "none" if
THE SPACE PROVIDED.  RINTED NAME OF OWNER(S)  ATHLEEN ANN BENVEGNO  TONATURE OF OWNER  V OFFICE USE ONLY V  Application for exemption for a manufactured of the second of	ADDRESS   28575 KOOTENAI STREET, SPRAGUE RIVER, 19 91619   PART 111   V OFFICE USE OF	Writing "none" if

APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE FROM REGISTRATION AND TITLING

## NOTARY ACKNOWLEDGEMENTS

OWNERS:
STATE OF OREGON, COUNTY OF Klanzuth 188.
THIS INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON THE STATE OF BY VATHLEEN AND ENVEST.  1999 BY VATHLEEN AND ENVEST.  1999 BY VATHLEEN AND ENVEST.  Notary Publicated Oregon
SUCURED PARTY:  SUCURED PARTY:  STATE OF OREGON, COUNTY OF CLACKAMAS  DEB.  CEFICA  WEATHERS WEATHERS A  MY CHARGE OF NEXPIRES MAY 0 1590  STATE OF OREGON, COUNTY OF CLACKAMAS  DEB.
THIS INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON
Notary Public for Oregon  My commission expires: Aug 35 2002



State of Oregon, County of Klamat:
Recorded 10/07/99, at 3:17 p.m.
In Vol. M99 Page 40027
Linda Smith,
County Clerk Fee\$ 15.00