

APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE FROM TITLE AND REGISTRATION

Owner's Certificate of Legal Interest

INSTRUCTIONS: The following must be submitted to DMV:

- 1) This form, completed and signed by all parties with an interest in the manufactured structure. All areas of the form **must** be completed.
- 2) A Title Report or Lot Book Report. (The title report or lot book report cannot be over 7 days old when submitted to DMV.)
- 3) If the manufactured structure is new and is financed, proof of the loan approval.
- 4) Proof all taxes for the current tax year have been paid on the manufactured structure. Proof may be a Certificate of Taxes Paid. Form 113, issued by the county where the manufactured structure was located.

Paid, Form 113, issued by the county where the manufacture	ed structure was located.		
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X226353		EM 3682	2
Legal description of manufactured structure:			
YEAR 1993 HAKE FTWD WIDTH 24 LENGTH 51	7 CAFLN	UMBER (VIN) 17AB/4577.	SC
Legal description and location of real property: (as recorded by	by county recorder or a cer	ified copy of your deed may	be substituted)
LOTS 7, 8, 9 AND 10, BLOCK 25, SECON			
KLAMATH FALLS, IN THE COUNTY OF KLAN	MATH, STATE OF ORI	EGON.	
Property Address		Tax Lot Number (from assessor)	
1918 SARGENT AVENUE, KLAMATH FALLS, OR 97601		R-214244 AND M-875300 24000	
LAND: If there is a mortgage, deed of trust or lien on this land, list for two names and addresses. If there are none, write "none".	st all mortgagees, beneficia	aries of deeds of trust below.	Space is provided
NAME AND ACCOMES		LOAN NUMBER	
BENEFICIAL OREGON INC., DBA BENEFICIAL MORTGAGE CO		661711-18-504240 LOAN NUMBER	
1345 CENTER DRIVE, SUITE D., MEDFORD, OR MANUFACTURED STRUCTURE: If there is a mortgage, deed of mortgagees, beneficiaries of deeds of trust, and lien holders who approval signatures are required. If there are none, write "none"	of trust or lien on the manul se interest is secured. Spa		
NAME AND ASSESSED 1345 CAC Or.		APPERLISIONAL PRICEAL	10h Anc
BENEFICIAL OREGON INC., DBA BENEFICIAL MORTGAGE CO NAME PRODUCTION TO SUBJECT PORTS 1030 BURGLE RG 1030 BURGLE RG 1030 BURGLE RG 1030 BURGLE RG		APPHOYAL SHATURED X TO MAN A TO MAN A TO	Mostgage Ce
[] I/We do not know the whereabouts of the permanent plate assigned to this vehicle.			May 10
I/We certify that the statements made above are accurate to the interests have been listed. If there are none, I/We have certified			ortgages and security
PRINTED NAME OF OWNER(S)	ODL/ID/CUSTOMER#	, ,	LEPHONE #
TERESA J. KINNEY PRINTED NAME OF OWNER(S)	SDO7433		541)884-3153 LEPHONE #
RESIDENCE ADDRESS 97	1601 MAILING ADDRESS		
1918 SARGENT AVENUE, KLAMATH FALLS, OR 97501 SAME		• .	
x Teusa & Kumus			
▼ OFFICE USE ONLY ▼	PART II	MAR 2 7	ZUU ▼
Application for exemption for a manufactured struct	ure is hereby approve	BECEIV	EU
4/13/00 x . Chustine Kinzu			
This exemption is VOID if not recorded with the cour	nty by this date:	EXPIRATION DATE 4/89/00	/

PART III

Official Recording by County Clerk.

State of Oregon, County of Klamath Recorded 04/17/00, at 3:06 p m. In Vol. M00 Page 12 45/
Linda Smith,
County Clerk Fee\$ 26