

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, Forn	1 113, Issued by the	e county where the	manuractured str			
X PLATE #			PAR		EXEMPT FILE #	
	X 24038		•			EM 36945
Legal descripti	ion of manufacture	ed structure:////				
YEAR	MAKE	WIOTH 31	LENGTH TILL	VEHICLE IDENTIFICATION NU 9636183508	1439	34
19 9 5	Fuqua	38 351	49			
I -						ur deed may be substituted)
The_NE_	1/2 of lot 45	1 + Wt 45,1	All in Block	/ Tract #1085	, Country	Green, in the
_'County_c	f Klamath, St	tate of Orego	n 			
Code 100	Map 3909-13A	B TL 1600				
Code 100	Map 3909-13A	R ፕፒ 1700				
Property Address				Cada 100 Man	Tax Lot Number	(from assessor) B- TL 1600 & 1700
			·			
		ed of trust or lien on here are none, write		nortgagees, beneficiar	ies of deeds of	trust below. Space is provided
NAME AND ADDRESS					LOAN NUMBER	
			None			
NAME AND ADDRESS		í			LOAN NUMBER	
MANUFACTUR	RED STRUCTURE:	If there is a mortg	age, deed of trust	or lien on the manufa	tured structur	e, list all security interest holders
mortgagees, be	neficiaries of deeds	s of trust, and lien h	olders whose inte	erest is secured. Spac	e is provided f	or two names and addresses.
NAME AND ADDRESS	<u> </u>	If there are none, w	vrite none.		APPROVAL SIGNAT	TURE
		1/0	ne		X	
NAME AND ADDRESS	· · · · · · · · · · · · · · · · · · ·		<u> </u>		APPROVAL SIGNAT	URE
		4			Х	
☐ I/We do	not know the where	eabouts of the perm	nanent plate assig	ned to this vehicle.		
I/We certify tha interests have t	t the statements made	ade above are accu are none, I/We hav	urate to the best ove certified this by	writing "none" in the	space provide	
PRINTED NAME OF O		ĺ	را	ODL/ID/CUSTOMER #	DATE OF BIRTH	TELEPHONE #
PRINTED NAME OF O	els J. D	chmecl	·	ODL/ID/CUSTOMER#	DATE OF BIRTH	16 (883) 3511
Tush	Ta Rac	Schme	rk		. 7 //	20 (883) 3511
RESIDENCE ADURES	1 4 1 4 C	1 / 1		MAILING ADDRESS	1	1/1 11 / 1
5107 Turner C+ Klamath Falls 11077 urner C+ Klamath Falls C						
Y	100	A lange	.k)	X Quanto	こっくご	(ih merk
A 190	OFFICE USE ONLY	<i>Summer</i>	PAR			FFICE USE ONLY V
Application	n for exemption	for a manufactu		s hereby approved.	•	
SIGNATURE DATE		TURE OF DMV OFFICER	7/1-4	ν.		
	6/00 X	C_{i}	Misting		EXPIRATION D	TE /
This exem	ption is VOID if I	not recorded wit	th the county b	y this date:		

State of Oregon, County of Klamath Recorded 09/08/00, at 10:3/a m. In Vol. M00 Page 32836 Linda Smith, County Clerk Fee\$ 26.00

g was