735-6722 (10-99)

DOTTIM RZ WILL

APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE FROM TITLE AND REGISTRATION

Owner's Certificate of Legal Interest

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X.	~	LA		₩	^6	9	4	7	O.	ι

EXEMPT FILE

EM 44528

STK # 300366

1) This form complete 2) A Title R 3) If the ma	inuractured structure	ned by all parties w port. (The title rep is new and is finan	rith an interest in the ort or lot book replaced, proof of the land and mandartured str	ort cannot be Record oan approval. Vol Moufactured stru Linda sucture was loc Fee \$	Smith, County Clerk	of Klamath 373 373 50			
			PARTI		ade of trust below. Sr	page is provided for two			
If there is a mo	ortgage, deed of trust Idresses. If there are	or lien on this land	d, list all mortgago ."	rs, beneficiaries of de	age of trast perow. Of	pace is provided for two			
NAME AND ADDRES				LOAN NUMBER					
NAME AND ADDRES	SS				LOAN NUMBER				
l		4 real property: (2	e recorded by cou	inty recorder or a cert	lified copy of your dee	d may be substituted)			
Legal descri	ption and location o	rreal property. (a							
Parcel 1 Township Property Address	39 South, Ran	<u>tion 23-95 si</u> ge 9 East, Wi	tuated in th llamette Mer	e Southwest 1/4 idian in the Co	Northwest 1/4 ounty of Klamat	of Section 11, h, State of Oregon.			
TAX LOT NUMB	ER (from assessor)	MAP NUMBER			ACCOUNT NUMBER				
		R-3909-0011	BC-00600	ture, list all security interest holders, mortgagees, beneficiaries of deed					
there are nor	lien holders whose in ne, write "none." Iption of manufactu	PAF		TURED STRUCTUR	E	gnatures are required. If			
YEAR	MAKE	WIDTH 2 ~	LENGTH	ŀ	ENTIFICATION NUMBER (VIN)				
1998	BERKS	$\frac{1}{d5}$	1 70	ORFLW48AB517	APPROVAL SIGNATURE				
NAME AND ADDR	ESS				x				
NAME AND ADOR	ESS				APPROVAL SIGNATURE				
}				X					
□ we	do not know the whe	reabouts of the pe	rmanent plate ass	igned to this vehicle.					
		PARTIII	OWNER SIGNATI	URES AND CERTIFIE	CATIONS				
I/We certify interests has	that the statements nove been listed. If there	nade above are ac re are none, I/We h	curate to the best have certified this t	by willing thome in a	io space provided.	ust, mortgages and security			
PRINTED NAME O	OF OWNER(S)			ODL/ID/CUSTOMER #	DATE OF BIRTH	TELEPHONE .			
Keith M:	ichael Andersor	1		OOL/ID/CUSTOMER #	DATE OF BIRTH	TELEPHONE .			
1	a Villas Anders	son				()			
RESIDENCE ADD	RESS			MAILING ADDRESS					
4461 Det	over Avenue, Kl	lamath Falls	liga	8112 Rocking Horse Lane, Klamath Falls, OR 976 SIGNATURE OF OWNER X OFFICE USE ONLY OFFICE USE ONLY					
	OFFICE USE ONL	.Y 🔻		RTIV		CE USE ONLY			
Applica	ition for exemption	n for a manufac	tured structure	is hereby approve	ed.				
SIGNATURE DAT		NATURE OF DMV OFFICE	Mesten	K_{i}	EXPIRATION DATE				
This ex	emption is VOID i	f not recorded v	with the county	by this date:	11/1/10/	02			

SEE REVERSE FOR COUNTY RECORDING AREA