

EM 48512

Owner's Certificate of Legal Interest

NSTRUCTIONS; The following i	must be submitted to DMV:
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- 1) Certificate of title with all necessary releases.
- 2) This form, completed and signed by all parties with an interest in the manufactured structure and the land upon which it is located. All areas of the form must be completed.
- 3) A Title Report or Lot Book Report. (The title report or lot book report cannot be over 7 days old when submitted to DMV.)

Department of Revenue Form	n 113, eigned by the county tax colle	ctor where the manufa	ctured structure was i		
5) Once recorded, DWV must re	scalve proof of recording. (Check wit		(urements.)		
If there is a mortgage, deed of trust or lien on this land, list all mortgagors, beneficiaries of deeds of trust below. Space is provided for two names and addresses. If there are none, write "none."					
NAME AND ADDRESS			LOAN NUMBER		
AMERICA'S WHOLESAL	E LENDER 8905 SW NIME				
NAME AND ADDRESS	BEAVERTON OR	97008	LOAN NUMBER		
THE W 1/2 OF THE N	real property: (as recorded by count 1/2 OF THE S 1/2 OF	y recorder or a certified THE NE 1/4 OF	THE NE 1/4 (axy be substituted) DF_SECTION_8,	
TOWNSHIP 25 SOUTH	, RANGE 8 EAST OF TH	IE WILLAMETTE	MERIDIAN. II	N THE COUNTY	
OF KLAMATH, STATE					
Property Address	· OI ONLOOM	····· · · · · · · · · · · · · · · · ·			
	S ROAD, GILCHRIST OR	97737			
TAX LOT NUMBER (from assessor)	MAP NUMBER		ACCOUNT NUMBER	_	
700	25-08-08		R159232 &	M874304	
		CTURED TRUCTUR			
	d structure and land upon which it is				
1992 GOLWE	WIDTH 27 LIENGTH 58	WH11510	NUMBER (VIN)		
If there is a mortgage, deed of trust or lien on the manufactured structure, list all security interest holders, mortgagess, beneficiaries of deeds of trust, and lien holders whose interest is secured. Space is provided for two names and addresses. Approval signatures are required. If there are none, write "none."					
NAME AND ADDRESS	T I THEFT COST CW NILL	IDUC AVE CTE	MPROUL BENY	X	
AMERICA'S WHOLESAL	E LENDER 8905 SW NIM	BUS AVE STE		Mmg	
NAME AND ADDRESS	BEAVERTON OF		APPEOVAL SIGNATURE	()	
☐ I/We do not know the whe	reabouts of the permanent plate ass				
	PART III OWNERS ICIAL	DRES AND CERTIFIC	Almiro		
	s made above are accurate to the lead. If there are none, I/We have cert				
PRINTED NAME OF OWNER(8) DONALD D. BODY	Donald no Bode!	COL/ID/CUSTOMER #	DATE OF BIRTH	TELEPHONE #	
PRINTED NAME OF OWNER(8) ELEANOR F. BODY	Januar F. Bonly	COL/ID/CUSTOMER #	DATE OF BIRTH	TELEPHONE #	
PERIDENCE ADDRESS 5 LITTLE DESCHUTES ROAD GILCHRIST OR PO BOX 807, GILCHRIST OR 97737			OR 97737		
* Wonald W Bock Eleanor F. Body					
▼ OFFICE USE ONE	Y ▼ PA	HI IV		FUSEONEY V	
Application for exemption for a manufactured structure is hereby approved.					
SIGNATURE DATE //10/03 X CALVOTERS // New /					
This application is VOID if not recorded with the county by this date:					

SEE REVERSE FOR COUNTY RECORDING AREA

1.5101.5

Official Recording by County Clerk.

49715

State of Oregon, County of Klan	ath
Recorded 07/16/2003 3:/6 P	
Vol M03 Pg 4/97/4-/5	
Linda Smith, County Clerk	
Fee \$ 26 00 # of Pgs 2	