)	M	1.
	STATE	

				MANUFAC ID REGISTF	
AND COMMENT OF THE PROPERTY OF THE PARTY OF	EM 51633	Owner's Ce	rtificate of Leg	al Interest XPLATEN	UMBER TYPOO
INSTRUCTIONS; The follows	ing must be submit			/	34846
1) Cartificate of title with all no	scessary releases.			Vol. MO4 P	208
2) This form, completed and s	rigned by all parties v	with an interest in th	e manufactured struc	ture and the land upon	Which it is located. All
areas of the form must be (3) A Title Report or Lot Book i	completed. Report. (The title rec	oort or let book rece	ert cannot be over 7 d	ave old when submitted	to DMV.)
4) Proof all taxes for the curre	ent tax year have bee	in paid on the manu	factured structure. Pr	roof may be a Certificate	of Taxes Paid,
Department of Revenue Fo	orm 113, signed by th	e county tax collect	tor where the manufa	ctured structure was loc	ated.
5) Once recorded, DMV must	receive proof of rec			urements.)	<u> </u>
			LAND.	deeds of trust below Co	and in provided for two
If there is a mortgage, deed on names and addresses. If there	if trust or iten on this i	land, list all mortga	gors, beneficianes or	geege of trust below. Sp	Pace is provided for two
NAME AND ADDRESS		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	LOAN MUNICIPAL	
10) SAGY S CRA	wford av	ea Haas	_		
	1 1 -	1 1	JCSON) AZ 8	25706	P
	of real property. (as	recorded by county	recorder or a certific	d copy of your dead ma	y be substituted)
Legal description and location	VILLA	ST. CLAU	<u> </u>	MN=75 M	<u> 174 - SEC-14</u>
				STY_OREGO	
	. L belo 24 - 1 -	F			<u></u>
Property Address	. 4. 0 4.		4		
4417 Sartlet	TOW K	lamath	Tello OK	97603	
TAX LOT NUMBER (from assessor)	MAP NUMBER			ACCOUNT NUMBER	
3909-1488-6L		ABITT PARTURAL	THE PLANE CHE	62915	
				<u></u>	
Legal description of manufact			VEHICLE IDENTIFICATION		
YEAR MAKE	R 28	LIENGTH 64		90248020	
1979 GLNB					
deeds of trust, and lien hok	ders whose interest	is secured. Space	is provided for two	names and addresses.	Approval signatures are
required. If there are none,					
NAME AND ADDRESS	4 4			APPROVAL BIGNATURE	
NONE	7 7			ADDOVAL BIONATURE	
NAME AND ADDRESS				X	
	the short of the s	amino ant alata cas	imped to this sections	10	
☐ I/We do not know the v					·
	DARTER		Her KARDERHALL		of trust medacases and
I/We certify that the statems security interests have been	interior in there are no	re accurate to the I	Deut Of ITTY/OUT KNOW ified this by writing "i	reage. All items, assessions	i or trust, mongages and ided.
PRINTED NAME OF OWNER(8)		51.5, 1110 IM16 0011	ODL/ID/CUSTOMEN	DATE OF SIRTH	TELEPHONE # 375
	α α .		1		1/20. \ 20

Edward L. Islanes	11228	6-21-33	107/128Y 330 /	
PRINTED NAME OF OWNER(S)	ODL/ID/CUSTOMER#	DATE OF BIRTH	TELEPHONE #	
Donna Romine	K0321256	12-16-49	(209)532-129	
RESIDENCE ADDRESS	MAILING ADDRESS			
4417 Bartlett av. Klamath Ill OR	18000 (lars	ndale Kol Son	ora, CA 95370	
MONATURE OF OWNER	SIGNATURE OF OWNER	20	,	

Application for exemption for a manufactured structure is hereby approved.

This application is **VOID** if not recorded with the county by this date:



Official Recording by County Clerk.

34847

State of Oregon, County of Klamath
Recorded 06/01/2004 9:02 a m
Vol M04 Pg 3/9/4-47
Linda Smith, County Clerk
Fee \$ 260 # of Pgs 2