

APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE FROM TITLE AND REGISTRATION REQUIREMENTS

EM 52204

Owner's Certificate of Legal Interest

	X PLATE NUMBER
t	VAU15/1
-	スペソーコノノ

nstructions: The following must be submitted to DN	IV:	
--	-----	--

1)	This form, completed	and signed by	all parties w	ith an	interest in	the	manufactured	structure	and the	land	upon	which	the
•	manufactured structure The certificate of title w	e is or will be loca	ted. M	77	1117	11	TA			48	68	5	
2)	The certificate of title w	vith all necessary	releases. 🚺 🖠	16-	" Wall	1	``` Vol	M04	Page	10	OU	U	

3) A title report or lot book report specific to the land upon which the manufactured structure is or will be located. Either report must be issued by a title company and must be dated no more than seven (7) days before the date this application is received by DMV.

4) If ownership in the manufactured structure is being transferred, proof that all property taxes, all special assessments and all delinquent property taxes are paid. Proof shall consist of a current Certificate of Taxes Paid (Department of Revenue Form 113), or a

laves and sherial as	sessments have been paid.			
 5) A copy of the record 	ed exemption application (this form) mus	st be received by DMV	within 30 days of the date of i	recording with the
county.	or chempus, approximent (une remi) men			3
	PAR	FI: LAND		
Disease list in the emose he	slow, the names and addresses of all mo		anoficiaries or lienholders of r	ecord who hold an
	are more than two interest holders, plea			
are none, write "none."	are more than two interest noiders, plea	se list titetii on a schare	te sheet of paper and attach t	o this form. If there
	Fargo Home Mortgage		LOAN NUMBER	
	Way, Minneapolis, MN 55408		0034709741	
NAME AND ADDRESS Wells	Fargo Home Braity Bank		LOAN NUMBER	
	olorado Springs, CO 80949		65405543591998	•
	low, the legal description and location of	the land upon which the	manufactured structure is or	will be located. The
	as recorded by county recorder. A certifie			
	heet of paper and attach to this form.		,	
PROPERTY ADDRESS				
310 Jefferson Str	eet/Klamath Falls, OR 9760	1		
TAX LOT NUMBER (from assessor	r) MAP NUMBER		ACCOUNT NUMBER	
	3809-031BA	-12500	411487	
		ACTURED STRUCTUR	E	
YEAR MAKE	WIDTH LENGTH	VEHICLE IDENTIFICATION		
1997 Guerd	on $ 27 56$	GETOR 158	3718988	
		ES AND CERTIFICATION		
List in the appear helow th	e names and addresses and signatures o			who hold an interact
	ture and the land. If there are more than			
	are none, write "none." Some counties			
	are none, made none, control		APPROVAL SIGNATURE	
NAME AND ADDRESS OF SECURITY	INTEREST HOLDER OR LIEN HOLDER		74 7 112 7 12 6 12 11 11 12 12	1200.
NAME AND ADDRESS OF SECURITY	INTEREST HOLDER OR LIEN HOLDER		X	
	INTEREST HOLDER OR LIEN HOLDER INTEREST HOLDER OR LIEN HOLDER			200.
			X	200.
NAME AND ADDRESS OF SECURITY	INTEREST HOLDER OR LIEN HOLDER	o the best of my/our kno	X APPROVAL SIGNATURE X	
NAME AND ADDRESS OF SECURITY I/we certify that the staten			X APPROVAL SIGNATURE X owledge. All mortgagees, trust	deed beneficiaries,
I/we certify that the staten lien holders of record and submission of this applica	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified	e report or lot book repo	X APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed	deed beneficiaries,
I/we certify that the staten lien holders of record and submission of this applica	interest holder or lien holder nents made on this application are true to security interest holders listed on the titl	e report or lot book repo	X APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided.	deed beneficiaries,
I/we certify that the staten lien holders of record and submission of this applicate PRINTED NAME OF APPLICANT (OWN Jeannie A. Long	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book reputhis by writing "none" in	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE	deed beneficiaries, and approve of the EPHONE #)
I/we certify that the staten lien holders of record and submission of this applicate PRINTED NAME OF APPLICANT (OWN Jeannie A. Long	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified	e report or lot book reporting "none" in	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE	deed beneficiaries, and approve of the
I/we certify that the staten lien holders of record and submission of this applicate PRINTED NAME OF APPLICANT (OWN Jeannie A. Long	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER#	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE	deed beneficiaries, and approve of the EPHONE #)
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Jeannie A. Long PRINTED NAME OF APPLICANT (OW)	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE (deed beneficiaries, and approve of the EPHONE #) EPHONE #
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Jeannie A. Long PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER #	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE	deed beneficiaries, and approve of the EPHONE #) EPHONE #
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Jeannie A. Long PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS	X APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH DATE OF BIRTH TELE (deed beneficiaries, and approve of the EPHONE #) EPHONE #
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Jeannie A. Long PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS SIGNATURE OF APPLICANT	X APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH DATE OF BIRTH TELE (deed beneficiaries, and approve of the EPHONE #) EPHONE #
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Jeannie A. Long PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book repithis by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS SIGNATURE OF APPLICANT	APPROVAL SIGNATURE X owledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH TELE (J43 Vamhull, C R TOWNER	deed beneficiaries, and approve of the EPHONE #) EPHONE #)
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS SIGNATURE OF APPLICANT/OWNER OFFICE US This applica	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE)	e report or lot book report his by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS SIGNATURE OF APPLICANT X PART IV tion requirements for the	APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH DATE OF BIRTH TELE (J43 Jamhall, O R TOWNER TOWNER TOWNER OFFICE USE	deed beneficiaries, and approve of the EPHONE #) EPHONE #) 9 7 / 4
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS SIGNATURE OF APPLICANT/OWNER OFFICE US This applica	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE) NER OF LAND AND MANUFACTURED STRUCTURE) E ONLY Fition for exemption from title and registral resuant to ORS 820.510 and OAR 735-14	e report or lot book report his by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS SIGNATURE OF APPLICANT X PART IV tion requirements for the	APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH DATE OF BIRTH TELE (J43 Jamhall, O R TOWNER TOWNER TOWNER OFFICE USE	deed beneficiaries, and approve of the EPHONE #) EPHONE #) 9 7 / 4
I/we certify that the staten lien holders of record and submission of this applica PRINTED NAME OF APPLICANT (OW Andrew F. Long RESIDENCE ADDRESS SIGNATURE OF APPLICANT/OWNER OFFICE US This applica approved put	nents made on this application are true to security interest holders listed on the titl tion. If there are none, I/we have certified NER OF LAND AND MANUFACTURED STRUCTURE) NER OF LAND AND MANUFACTURED STRUCTURE) E ONLY Fition for exemption from title and registral resuant to ORS 820.510 and OAR 735-14	e report or lot book report his by writing "none" in ODL/ID/CUSTOMER # ODL/ID/CUSTOMER # MAILING ADDRESS SIGNATURE OF APPLICANT X PART IV tion requirements for the	APPROVAL SIGNATURE X Eviledge. All mortgagees, trust out are listed and have signed the space provided. DATE OF BIRTH DATE OF BIRTH TELE (J43 Jambell, O R TOWNER OFFICE USE e manufactured structure liste	deed beneficiaries, and approve of the EPHONE #) EPHONE #) 9 7 / 4

SEE REVERSE FOR COUNTY RECORDING AREA

Exhibit A

48686 X241511

The Northerly one-half of Lots 4 and 5, Block 48, FIRST ADDITION to The City of Klamath Falls, according to the official plat thereof on file in the office of the County Clerk of Klamath County Oregon.

Tax Account No.: 3809-032BA-12500-000

Key No.: 411487

State of Oregon, County of Klamath Recorded 07/26/004 10:5/ 0 m Vol M04 Pg 48685-86 Linda Smith, County Clerk Fee \$ 26.00 # of Pgs 2