MTZ-	610571 ms				
APPLICATION TO EXEMPT A MANUFACTURED STRUCTURE ITLE AND REGISTRATION REQUIREMENTS					
OFPARTMENT OF TRANSPORTATION DRIVER AND NOTOR VEHICLE SERVICES	EM 54321	Owner's Ce	ertificate of Lega	I Interest	II27
Instructions: The following must be submitted to DMV: 1) This form completed and signed by all parties with an interest in the manufactured structure and the land upon which the					
manufactured structure is or will be located. 2) The certificate of title with all necessary releases. 20 M05 Page 22690					
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					
 a) A difference of the book report open to be book report open to be book report of book report of book report open to be book r					
4) If ownership in the mandacteric ordeterior of ball consist of a current Certificate of Taxes Paid (Department of Revenue Form 113), or a delinquent property taxes are paid. Proof shall consist of a current Certificate of Taxes Paid (Department of Revenue Form 113), or a signed statement from the county that all property taxes and special assessments for the current tax year and all delinquent property					
taxes and special assessments have been paid. 5) A copy of the recorded exemption application (this form) must be received by DMV within 30 days of the date of recording with the					
county					
6) NOTE: This form may only be used if the owner(s) of land and structure are the same. This form may not be used by a land lesee.					
Please list in the space below,	the names and address	es of all morto	agees, trust deed ben	eficiaries or lienholders of an article	of record who hold an
interest in the land. If there are are none, write "none."					
NAME AND ADDRESS Highland Community Federal Credit			Union	LOAN NUMBER	
3737 Shasta Way, Klamath Falls, OR 97603 NAME AND ADDRESS				LOAN NUMBER	
Please list in the space below.	the legal description and	location of the	land upon which the n	nanufactured structure is	or will be located. The
Please list in the space below, the legal description and location of the land upon which the manufactured structure is or will be located. The legal description must be as recorded by county recorder. A certified copy of the land deed may be substituted. If additional space is needed please list on a seperate sheet of paper and attach to this form. The northerly 440 feet of the southerly 880 feet					
of the NEI/4 NWI/4-	Section 17, 10	Swnship 39	south, Range	B East of the Wi	lliamette
Meridian - Klamath Co	ounty,_oregon				
4551 Round Lake Road		, or 97601			
TAX LOT NUMBER (from assessor) MAP NUMBER 3908–1780–200			ACCOUNT NUMBER		
3908-1760-200	PART		TURED STRUCTURE		
YEAR MAKE 1993 Fuqua	WIDTH 85	ength	VEHICLE IDENTIFICATION NU	MBER (VIN)	
	PART III:	SIGNATURES	AND CERTIFICATION	NS	where held an interact
List in the space below, the na	and the land. If there ar	e more than tw	o interest holders, ple	ase list triem on a separ	ate sneet of paper and
In the manufactured structure and the land. If there are more than two interest holders, please list them on a separate sheet of paper attach to this form. If there are none, write "none." Some counties may require interest holder signatures to be notarized.					
FCU, 3737 Shasta Way, Klamath Falls, OR 97603				xlandra M	indsorter
NAME AND ADDRESS OF SECURITY INTEREST HOLDER OR LIEN HOLDER				X	
I/we certify that the statements made on this application are true to the best of my/our knowledge. All mortgagees, trust deed beneficiaries, lien holders of record and security interest holders listed on the title report or lot book report are listed and have signed and approve of the					
submission of this application	, If there are none, I/we h	ave certified thi	s by writing "none" in t	ne space provided.	
PRINTED NAME OF APPLICANT (OWNER	OF LAND AND MANUFACTURED ST	RUCTURE)	5720694	DATE OF BIRTH 9-17-57	TELEPHONE # (541) 884 0965
Eddy Voskanian PRINTED NAME OF APPLICANT (OWNER)	OF LAND AND MANUFACTURED ST	RUCTURE)	ODL/ID/CUSTOMER#	DATE OF BIRTH	TELEPHONE # (541) 8840965
Dori Voskanian RESIDENCE ADDRESS 4551 Boond Lake road			S830415 MAILING ADDRESS	11-04-1958	10411 00 10 10
Klamath Falls, 07601					
SIGNATURE OF APPLICANT			Dore 7		
OFFICE USE C	NLY V		RTIV		
YES This application approved pursu	for exemption from title ant to ORS 820.510 and	and registratio	n requirements for the 0010.		
SIGNATURE OF DMV REPRESENTATIVE	The +	K		SIGNATURE DATE	29/05
X (/	h the appror		is date	TE: /nc
This application is VOI			UNTY RECORDING		STK# 300360
735-6722 (6-03)	SEE KEVE	RGE FUR UU		, , 1, 1m, ⁻¹	

910 km

State of Oregon, County of Klamath Recorded 04/01/2005 <u>3</u> <u>C</u> P m Vol M05 Pg <u>3</u> <u>C</u> P m Linda Smith, County Clerk Fee \$ <u>24</u> of Pgs <u>2</u>

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