### APPLICATION AND CERTIFICATION **EXEMPTING A MANUFACTURED STRUCTURE FROM** OWNERSHIP DOCUMENT

After recording return to:

Jerry J. and Barbara L. Walters

PO Box 844

Gilchrist, OR 97737

Send all future tax bills to:

Same as Above	131 (	079848

**Check appropriate box:** New home

□ Existing home - X Plate Number (if applicable) L DESCRIPTION OF MANUFACTURED STRUCTURE
ORE 474220/1 BRX1045X4B/BRX1045X \*B891-0140-U-AB 2005 SKYLINE ### 1045/XTB/##91045/XTAX 28\* 60' YEAR MAKE **HUD** number VEHICLE IDENTIFICATION NUMBER (VIN) WIDTH LENGTH 301111 11748 Chinquapin Dr. - Cresent Lake, OR 97425 Home ID County ID Number Situs Address Chub New Rue 

Lotx 교회계대 21 Block 15, Tract No. 1042, Two Rivers North, according to the official plat thereof on file in the office of

The County Clerk of Klamath Falls, Oregon.

Jerry J. Walters

PRINTED NAME OF OWNER(S)

Barbara L. Walters

PRINTED NAME OF OWNER(S) (For additional owners, attach a second sheet)

PO Box 844 – Gilchrist, OR 97737

MAILING ADDRESS (If different than situs address)

M&T Mortgage Corporation 5285 SW Meadows Rd., Ste 290 - Lake Oswego, OR 97035

SECURITY INTEREST HOLDER NAME AND ADDRESS (If no security interest holder, write "none". Attach additional sheet if needed)

#### **ACKNOWLEDGMENT**

Assessor/Tax Collector or Escrow Officer

10-25-05

M06-08783

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Klamath County, Oregon 05/04/2006 11:20:27 AM

Fee: \$26.00

#### CERTIFICATION

I certify that in accordance with ORS 446.626:

- The same person owns the manufactured structure and the real property as described above on which the manufactured structure is or will be situated OR
- The owner of the manufactured structure holds a recorded leasehold estate of 20 or more years of the land;
- The manufactured structure is or will be affixed to the real property and subject to taxation by the county in which it is located as an improvement to the real property;
- Each person with a security interest in the manufactured structure and each person with a security interest in the real property approves the exemption from ownership document; and
- This certification is being submitted for recording to the county clerk for the county in which the real property is located. A copy of said recorded document is being provided to the County Assessor in addition to the DCBS Manufactured Structure Notice of Sale Form 440-2952.

X SIGNATURE OF OWNER

X SIGNATURE OF OWNER

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State of Oregon, County of

The foregoing instrument was acknowledged

Walters and Barbara L. Walters.

Signature of Notary Public

My commission expires: 5-47009

OFFICIAL SEAL JENNIFER BRUNER NOTARY PUBLIC-OREGON COMMISSION NO. 392204 MY COMMISSION EXPIRES MAY, 21, 2009

Revised 9.1.05

# POWER OF ATTORNEY FOR MANUFACTURED STRUCTURE

I authorize the person or firm named below to act as my representative and to sign my name to any forms necessary concerning the ownership records of the manufactured structure described below.

## This power of attorney is valid only if the following sections are completed:

- Name of person or firm appointed as attorney; and
- Plate number, vehicle identification number or home ID number; and
- · Signature of Owner.

NAME OF PERSON OR FIRM APPOINTED AS ATTORNEY (PRINTED)				
Any Employee of First American Title Insurance Company of Oregon				
DESCRIPTION OF VEHICLE				
PLATE NUMBER		HOME ID NUMBER	<b>R</b>	
YEAR	MAKE		MODEL	
2005	SKYLINE		KENSINGTON PARK	
VEHICLE IDENTIFICATION NUMBER				
B891-0140-U AB				
NAME OF OWNER (PRINTED)				
Jerry J. Walters				
SIGNATURE OF OWNER		DATE		
x try & halter		1/17/06		
NAME OF JOINT OWNER (PRINTED)				
Barbara L. Walters				
SIGNATURE OF JOINT OWNER	1 1	1 .	DATE	
x Laubara	X/U	tellers	1/17/06	
THIS POWER OF ATTORNEY				

MAY NOT BE TRANSFERRED TO ANY OTHER PERSON OR FIRM

File No.: 7061-616662(lm)