

APPLICATION AND CERTIFICATION
EXEMPTING A MANUFACTURED STRUCTURE FROM
OWNERSHIP DOCUMENT

2007-013548
Klamath County, Oregon



00028141200700135480030031

07/31/2007 11:27:57 AM

Fee: \$31.00

After recording return to:

ELIZABETH MULHOLLEN
P.O. Box 134, MERRILL, OR 97633

Send all future tax bills to:

SAME AS ABOVE

Check appropriate box: ☐ New home ☐ Existing home - X Plate Number (if applicable) _____

ATE: 65024

LEGAL DESCRIPTION OF MANUFACTURED STRUCTURE

2005 YEAR	LIBERTY HOMES MAKE	ORE 474172/173 HUD number	09I35523xu VEHICLE IDENTIFICATION NUMBER (VIN)	WIDTH	LENGTH
Home ID		County ID Number		Situs Address	

Legal description per ORS 93.600 or reference number of previously recorded deed: (attach additional sheets if needed)

Map and Tax Lot Number: **CODE 228 MAP 4110-002DD TL 00400 KEY #121111**

Lot 2, Block 7, CITY OF MERRILL, according to the official plat thereof on file in the office of the Clerk of Klamath County, Oregon.

ELIZABETH MULHOLLEN

PRINTED NAME OF OWNER(S)

JUDY WOLLASTON

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

410 JEFFERSON STREET, MERRILL, OR 97633

MAILING ADDRESS (If different than situs address)

NONE

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

ACKNOWLEDGMENT

Patricia J. Callen
County Assessor/Tax Collector or Escrow Officer

7/30/07
Date

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

Judy Wollaston

7-26-07

X SIGNATURE OF OWNER

Elizabeth Mulhollen

7-30-07

State of CALIFORNIA, County of _____

**N
O
T
A
R
Y**

The foregoing instrument was acknowledged
before me this _____ day of _____, 20____
by _____

Signature of Notary Public _____

My commission expires: _____

See attached

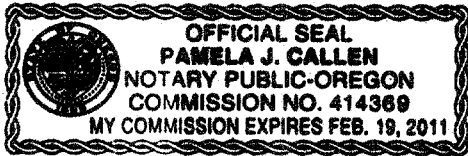
Revised 9.1.05

\$31-A

NOTARY ACKNOWLEDGEMENT

STATE OF OREGON
County of KLAMATH ss.

This instrument was acknowledged before me on July 30,, 2007 by
ELIZABETH MULHOLLEN.



Before me: Pamela J. Callen
Notary Public for Oregon
My commission expires: 02-18-2011
Official Seal

TO BE ATTACHED TO THE APPLICATION AND CERTIFICATION EXEMPTING A MANUFACTURED
STRUSTURE FROM OWNERHSIP DOCUMENT

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Shasta

SS.

On 7/26/07

Date

before me,

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

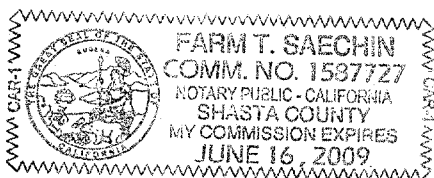
personally

appeared

Name(s) of Signer(s)

☐ personally known to me

☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Place Notary Seal Above

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Application and Certification

Document Date: 7/26/07

Number of Pages: 1

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER

Top of thumb here

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER

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