

2017-009114

Klamath County, Oregon

08/14/2017 08:55:00 AM

Fee: \$47.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Corporation Service Company 1-800-858-5294B. E-MAIL CONTACT AT FILER (optional)
SPRFiling@cscinfo.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

1346 16301

Corporation Service Company
801 Adlai Stevenson Drive
Springfield, IL 62703Filed In: Oregon
(Klamath)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME
BazzanoFIRST PERSONAL NAME
JosephADDITIONAL NAME(S)/INITIAL(S)
A

SUFFIX

1c. MAILING ADDRESS 1448 Tamera Dr

CITY
Klamath FallsSTATE
ORPOSTAL CODE
97603COUNTRY
USA2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME
BazzanoFIRST PERSONAL NAME
Kira

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS 1448 Tamera Dr

CITY
Klamath FallsSTATE
ORPOSTAL CODE
97603COUNTRY
USA3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Generations Credit Union

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS 929 Eastside Street SE

CITY
OlympiaSTATE
WAPOSTAL CODE
98501COUNTRY
USA

4. COLLATERAL: This financing statement covers the following collateral:

Perfection: Purchase Money Security Interest-in Fixture. Complete 6.96kW Solar System including 24 290-Watt Solar Modules, 24 Enphase IQ-Plus Micro-Inverters, all Equipment and Components installed at 1448 Tamera Dr Klamath Falls OR 97603

Parcel: R3809036DC04300000

Situation Add.: 1448 TAMERA DR

Abb. Legal Add.: MOYINA 3RD ADDITION, BLOCK 7, LOT 3

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative6a. Check only if applicable and check only one box:☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility6b. Check only if applicable and check only one box:☐ Agricultural Lien ☐ Non-UCC Filing7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

1346 16301

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S SURNAME

Bazzano

FIRST PERSONAL NAME

Joseph

ADDITIONAL NAME(S)/INITIAL(S)

A

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

Joseph Bazzano

Kira Bazzano

1448 Tamera Dr

Klamath Falls, OR 97603

16. Description of real estate:

Perfection: Purchase Money Security Interest-in Fixture. Complete 6.96kW Solar System including 24 290-Watt Solar Modules, 24 Enphase IQ-Plus Micro-Inverters, all Equipment and Components installed at 1448 Tamera Dr Klamath Falls OR 97603

Parcel:R3809036DC04300000

Situs Add.:1448 TAMERA DR

Abb. Legal Add.:MOYINA 3RD ADDITION, BLOCK 7, LOT 3

17. MISCELLANEOUS: