

APPLICATION FOR RECORDING MANUFACTURED
HOME AS REAL PROPERTY

2022-010262

Klamath County, Oregon

After recording return to:



00305060202200102620020025

08/24/2022 10:34:18 AM

Fee: \$87.00

Returned at Counter

Send all future tax bills to:

Michael Agliolo
2196 OAK PARK AVE
Chico, CA 95928

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

LEGAL DESCRIPTION OF MANUFACTURED STRUCTURE

1977 YEAR	Westwood MAKE	WAS006479 - HUD number 79	1-5104 AB VEHICLE IDENTIFICATION NUMBER (VIN)	24 WIDTH	65 LENGTH
Home ID	502624 County ID Number	6122 Buffle Head Dr. Situs Address	Bonanza, OR 97623		

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

Map and Tax Lot Number: R-3811-01680-05900-000
Klamath Falls Forest Estates Hwy 66 Plat #2
Block-41 Lot-38

PRINTED NAME OF OWNER(S) Michael Agliolo

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

MAILING ADDRESS (If different than situs address) 2196 OAK PARK AVE, Chico, CA. 95928

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

ACKNOWLEDGMENT

County Assessor/Tax Collector or Escrow Officer

Date

8-24-22

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 State of Oregon Building Codes Division, or one of its county agents along with the County Manufactured Home Notification and Tax Certification Form for Used Homes and a Manufactured Home Bill of Sale/Change Application.

X SIGNATURE OF OWNER

Michael Agliolo

X SIGNATURE OF OWNER

State of Oregon, County of _____

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

Signature of Notary Public

My commission expires: _____

See Attached: JURAT



440-5176 (1/17/COM)

CALIFORNIA JURAT CERTIFICATE

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

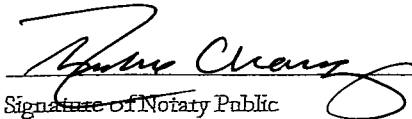
State of California

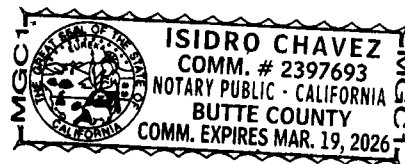
County of Butte

Subscribed and sworn to (or affirmed) before me on this 23 day of AUG
20 22, by Michael Aguiar

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

WITNESS MY HAND AND OFFICIAL SEAL.


Signature of Notary Public



(Notary Seal)

OPTIONAL INFORMATION

The jurat contained within this document is in accordance with California law. Any affidavit subscribed and sworn to before a notary shall use the preceding wording or substantially similar wording pursuant to Civil Code sections 1789 and 8202. A jurat certificate cannot be affixed to a document sent by mail or otherwise delivered to a notary public, including electronic means, whereby the signer did not personally appear before the notary public, even if the signer is known by the notary public. The seal and signature cannot be affixed to a document without the correct notarial wording. As an additional option an affiant can produce an affidavit on the same document as the notarial certificate wording to eliminate the use of additional documentation.

DESCRIPTION OF ATTACHED DOCUMENT

(Title of document)

Number of Pages _____

Document Date _____

(Additional Information)

CAPACITY CLAIMED BY SIGNER

_____ Individual

_____ Corporate Officer

_____ Partner

_____ Attorney-In-Fact

_____ Trustee

_____ Other _____