

After recording return to: AmeriTitle
 404 Main St. Ste 1
 Klamath Falls, OR 97601

Send all future tax bills to:
 Jason Horn and Nicole Horn
 PO Box 244 Chiloquin, OR 97624

(For C
2026-004267
 Klamath County, Oregon
 05/14/2026 02:01:01 PM
 Fee: \$92.00

1033286-2

APPLICATION FOR RECORDING MANUFACTURED HOME AS REAL PROPERTY

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

LEGAL DESCRIPTION OF MANUFACTURED STRUCTURE					
YEAR	MAKE	HUD NUMBER	VEHICLE IDENTIFICATION NUMBER (VIN)	WIDTH	LENGTH
2026	CAVCO	N/A CRE571091 CRE571092	CAV3105R25-16213A CAV3105R25-16213B	27'0"	60'0"
HOME ID		COUNTY ID NUMBER	SITUS ADDRESS		
N/A		209125, 209134	8425 Whitehorse Way Chiloquin, OR 97624		

Legal description per ORS 93.600 or reference number of previously recorded deed. (Attach additional sheets, if needed.)

Map and tax lot number:

3408-022C0-02200, 3408-022C0-02300; Lots 11 and 12 in Block 6, First Addition to Sprague River Pines, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

PRINTED NAME OF OWNER(S)
 Jason Gerard Horn

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

MAILING ADDRESS (If different than situs address)
 PO Box 244 Chiloquin, OR 97624

SECURITY INTEREST HOLDER NAME AND ADDRESS (If no security interest holder, write "none." Attach additional sheet if needed.)
 Evergreen Moneysource Mortgage Company 1427 Energy Park Dr. Saint Paul, MN 55108

ACKNOWLEDGEMENT

[Signature]

12-16-2025

County assessor/tax collector or escrow officer

Date

CERTIFICATION

I certify that, according to 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 *[Signature]*

X SIGNATURE OF OWNER *[Signature]*

State of Oregon, County of Klamath

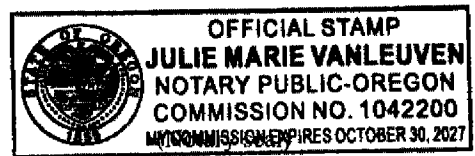
The foregoing instrument was acknowledged before me this

16 day of December, 2025

by Jason Gerard Horn and Nicole Yvonne Horn

Signature of notary public: *[Signature]*

My commission expires: 10-30-2027



MANUFACTURER'S STATEMENT OR CERTIFICATE OF ORIGIN TO A MANUFACTURED HOME

Manufacturer: Cavco Manufacturing, LLC : Cavco Millersburg

Address: 3737 Palm Harbor Drive, Millersburg, OR 97321

Street, City, State, and Zip

The undersigned MANUFACTURER hereby certifies that the new manufactured home described below, the property of said MANUFACTURER, has been transferred

This 18th day of March, 2026 on Invoice 2025106678700

To: Palm Harbor Villages #267

Distributor, Dealer, Etc.

Whose Address 320 Pear Tree Lane

Street

Medford, OR 97504

City, State, and Zip

Series: 400 Model Year: 2026

Model No: 3104G28563B Body Width Ft: 27' 0"

Body Length Ft: 60' 0" / Ft: 56' 0"

Including Hitch

Excluding Hitch

Square Feet: 1445 Date of Manufacture: 03/13/2026

Manufacturer's ID No: CAV3100R25-16813A Weight 25,992

Manufacturer's ID No: CAV3100R25-16813B Weight 25,164

Manufacturer's ID No: _____ Weight _____

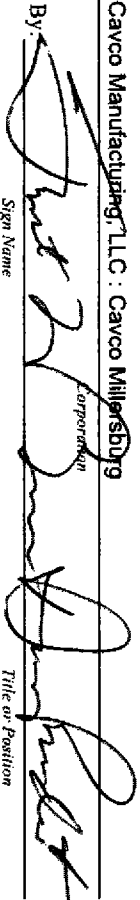
Manufacturer's ID No: _____ Weight _____

Manufacturer's ID No: _____ Weight _____

Manufacturer's ID No: _____ Weight _____

The CORPORATION further Certifies that this was the first transfer of such new manufactured home in ordinary trade and commerce.

Cavco Manufacturing LLC : Cavco Millersburg

By:  *Sign Name* Brent J. Brown *Title or Position* President

3737 Palm Harbor Drive, Millersburg, OR 97321

Office Address of Signatory (City & State)

FIRST ASSIGNMENT

For Value Received, the undersigned hereby transfers this Statement of Origin and the manufactured home described therein to:

Address _____
 Amt. Of Lien _____ Date _____ To Whom Due _____ Address _____

Dated _____ at _____ By: _____ Sign Here _____ Position _____

Dealer License (Permit) No. _____
 Before me personally appeared _____ who by me being
 duly sworn upon oath says that the statements set forth above are true and correct.
 Subscribed and sworn to before me this _____ day of _____ County, State of _____

Notary Seal

Notary Public for _____ County, State of _____

SECOND ASSIGNMENT

For Value Received, the undersigned hereby transfers this Statement of Origin and the manufactured home described therein to:

Address _____
 Amt. Of Lien _____ Date _____ To Whom Due _____ Address _____

Dated _____ at _____ By: _____ Sign Here _____ Position _____

Dealer License (Permit) No. _____
 Before me personally appeared _____ who by me being
 duly sworn upon oath says that the statements set forth above are true and correct.
 Subscribed and sworn to before me this _____ day of _____ County, State of _____

Notary Seal

Notary Public for _____ County, State of _____

THIRD ASSIGNMENT

For Value Received, the undersigned hereby transfers this Statement of Origin and the manufactured home described therein to:

Address _____
 Amt. Of Lien _____ Date _____ To Whom Due _____ Address _____

Dated _____ at _____ By: _____ Sign Here _____ Position _____

Dealer License (Permit) No. _____
 Before me personally appeared _____ who by me being
 duly sworn upon oath says that the statements set forth above are true and correct.
 Subscribed and sworn to before me this _____ day of _____ County, State of _____

Notary Seal

Notary Public for _____ County, State of _____