

**DOC # 0212435**

09/10/2008

01:56 PM

**Official Record**

Recording requested By  
TITLE SERVICE & ESCROW CO

**Eureka County - NV**

**Mike Rebaleati - Recorder**

Fee: **\$41.00**

Page 1 of 3

RPTT.

Recorded By: FS

Book- 0476 Page- 0324

The undersigned hereby affirms that this document submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

ESCROW NO. TSF-21440 SB

APN # 007-450-02

Recording Requested By:  
When recorded return to:

Name TITLE SERVICE AND ESCROW COMPANY

Address 25 WEST STREET

City/State/Zip FERNLEY, NEVADA 89408



0212435

**AFFIDAVIT CONVERSION OF MANUFACTURED/MOBILE**

**HOME TO REAL PROPERTY**

(Title of Document)

This document is being re-recorded to correct the serial number, correct model year, add additional length and width, add model and add the mobile home dealer information

This page added to provide additional information required by NRS 111.312 Sections 1-2.  
(Additional recording fee applies)

**This cover page must be typed**

DOC # 0212204

08/06/2008

01 38 PM

## Official Record

Recording requested By  
FIRST AMERICAN TITLE

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By FS

Book- 0475 Page- 0093

ASSESSOR'S PARCEL # 007-450-02

COUNTY OF EUREKA

## AFFIDAVIT

CONVERSION OF MANUFACTURED/MOBILE HOME  
TO REAL PROPERTY  
NRS 361.244

0212204

## PART I TO BE COMPLETED BY APPLICANT

## MANUFACTURED/MOBILE HOME INFORMATION

1. Owner/Buyer name PAUL M. BOWLING AND KATHERINE J. BOWLING
2. Owner of land (if leased) SAME
3. Physical location of manufactured/mobile home 1125 IVAN WAY, EUREKA, NV 89316
4. Mobile home description: Manufacturer FLEETWOOD Model Riverknoll  
Model Year 2007<sup>8</sup> Serial # 2181A/A/B/C/ \*\* Length 76' Width 45'  
Fleetwood Homes of 76' 45'
5. Mobile home dealer (if new unit) Idaho, Inc.
6. Current lien holder (if any) n/a
7. New lien holder: Name FIVE STAR MORTGAGE  
Address 1020 WIGWAM PKWY, HENDERSON, NV. 89074

## PART II OWNER/BUYER SIGNATURE(S)

The undersigned, as owner(s)/buyer(s) of the above described manufactured/mobile home and real property, agrees to the conversion of the above described unit from personal to real property and understands that any liens or encumbrances on that unit may become a lien or encumbrance on that land. **PERSONAL PROPERTY TAXES MUST BE PAID IN FULL FOR THE CURRENT FISCAL YEAR.**

\*This conversion process is not valid until issuance of a "Real Property Notice" by Manufactured Housing Division.

**ALL DOCUMENTS RELATING TO THE MANUFACTURED/MOBILE HOME AS PERSONAL PROPERTY MUST BE SURRENDERED TO THE MANUFACTURED HOUSING DIVISION. THIS CONVERSION IS NOT VALID UNTIL ISSUANCE OF A "REAL PROPERTY NOTICE". THE MANUFACTURED/MOBILE HOME WILL THEN BE PLACED ON THE NEXT SUCCEEDING TAXROLL AS REAL PROPERTY.**

Page 1 of 2

\*\* Serial# IDFL704ABC28184-RK13AC



0212435

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Page 325 Page 2 of 3

P. M. Bowling  
SIGNATURE-OWNER/BUYER

8-1-08  
DATE

Katherine L. Bowling  
SIGNATURE-OWNER/BUYER

8-1-08  
DATE

County of Lyon

State of Nevada



S. BEATY  
Notary Public - State of Nevada  
Appointment Recorded in Lyon County  
No. 94-0112-12 - Expires September 12, 2010

On Aug. 1, 2008, before me the undersigned, a Notary Public,  
in and for the State of Nevada, County of Lyon, personally appeared  
PAUL M. Bowling And KATHERINE L. Bowling  
Who acknowledged that he executed this affidavit.

S. Beaty  
Notary Public

**PART III TO BE COMPLETED BY THE PUBLIC WORKS DEPARTMENT**

1. Approved plot plan at this location verified by \_\_\_\_\_ Date \_\_\_\_\_
2. Foundation meets requirements for this jurisdiction for conversion from personal property to real property verified by \_\_\_\_\_ Date \_\_\_\_\_
3. Verification that running gear has been removed by \_\_\_\_\_ Date \_\_\_\_\_

**PART IV TO BE COMPLETED BY COUNTY ASSESSOR**

1. Land ownership verified by \_\_\_\_\_ Date \_\_\_\_\_
2. Manufactured home ownership verified by \_\_\_\_\_ Date \_\_\_\_\_
3. Manufactured home account no. \_\_\_\_\_ verified by \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE (ASSESSOR)

\_\_\_\_\_  
NAME/TITLE

\_\_\_\_\_  
DATE

When recorded mail to:

Name:

Address:

City, State, Zip:

DISTRIBUTION:

ORIGINAL TO MANUFACTURED HOUSING

COPY TO COUNTY ASSESSOR

COPY TO LIENHOLDER OR OWNER

