

# DECLARATION OF HOMESTEAD

Assessor Parcel Number: 005-170-57

OR

Assessor's Manufactured Home ID Number: \_\_\_\_\_

Recording Requested by and Mail to:

Name: BOB NELSON

Address: 60 N. 15TH ST.

City/State/Zip: CRESCENT VALLEY, NV

Check One:

- ☐ Married (filing jointly) ☐ Married (filing individually)  
☐ Head of Family ☐ Widowed  
☒ Single Person ☐ Multiple Single Persons  
☐ By Wife (filing for joint benefit of both)  
☐ By Husband (filing for joint benefit of both)  
☐ Other (describe): \_\_\_\_\_

Check One:

- ☒ Regular Home Dwelling/Manufactured Home ☐ Condominium Unit ☐ Other

Name on Title of Property

ROBERT F. NELSON

do individually or severally certify and declare as follows:

is/are now residing on the land, premises (or manufactured home) located in the city/town of CRESCENT VALLEY  
County of EURKA, State of Nevada, and more particularly described as follows:  
(set forth legal description and commonly known street address OR manufactured home description)

I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described manufactured home as a Homestead.

In Witness, Whereof, I/we have hereunto set my hand/our hands this 9 day of JULY, 20 15.

Bob Nelson  
Signature

ROBERT NELSON  
Print or type name here

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or type name here

STATE OF NEVADA, COUNTY OF Eureka

This instrument was acknowledged before me on \_\_\_\_\_

by Robert Nelson (date)  
Person(s) appearing before notary

by \_\_\_\_\_  
Person(s) appearing before notary  
Garney Damele  
Signature of notarial officer

CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S  
FITNESS FOR YOUR PURPOSE.

NOTE: Leave space within 1-inch margin blank on all sides.

DOC # 0229621

07/09/2015

10:24 AM

Official Record

Recording requested By  
NELSON, BOB

Eureka County - NV  
Sara Simmons - Recorder

Fee: \$14.00

Page 1 of 1

RPTT:

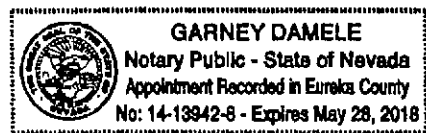
Recorded By: AP

Book- 580 Page- 0187



0229621

Notary Seal



Oct. 2009