	DOC # 0232261
APN#_001-031-08	12/02/2016 02:30 PM
Recording Requested by:	Official Record
Name: Maureen A. Torres	Recording requested By MAUREEN TORRES
Address: PO BOX 531	Eureka County - NV
City/State/Zip: Flancka NV 39310	Lisa Hoehne - Recorder Fee: \$41.00 Page 1 of 3
Mail Tax Statements to:	RPTT: Recorded By: LH Book-597 Page- 0379
Name: Maureen A Torres	Took Page toos
Address: PO BOX 53)	I IBBAU BBAB HBBB HIJA HBB HBB BHBF HBA
City/State/Zip: Furcha NV 89314	
	0232261
Please complete Affirmation Statement below:	
I the undersigned hereby affirm that this docume security number of a person or persons as required by law	ent submitted for recording contains the social v:
$\alpha \cap \alpha = \alpha \cap \alpha \cap \alpha$	
Maurun H. Omb	owner
Signature (Print name under signature) maureen	Torres Title
0 1 0001	. \ /
Amending Affidari	I Conversion
(Insert Title of Doci	iment Above)
(Insert Title of Doct	iment Above)

Only use the following section if one ite	m applies to your document
mula a constant	
This document is being re-recorded to	
	/ /.
-OR- This document is being recorded to correct document #	0225420
owner nume - maureen A	Tomes

If legal description is a metes & bounds description, furn	ish the following information:
Legal description obtained from	(Document Title), Book
Page Document # recorde	d(date) in the
Eureka County Recorder's Office.	(auto) in the
-OR- If Surveyor, please provide name and address:	

This page added to provide additional information (Additional recording	required by NRS 111.312 Sections 1-4. fee applies)

exhi	e undersigned hereby affirm that the attached document, including my hibits, hereby submitted for recording does not contain the social security mber of any person or persons (Per NRS 239B.030)	10/22/2013 09:17 AM Page 1 of 2 10/22/2013 09:17 AM Recording requested By Recording Recorder Page 1 of 2
ASS		ook-556 Page- 0100
CO	UNTY OF _ EUNIKA	laidi aada diada daad metu waxa daga made daga
Whe	nen recorded mail to:	25020
Nan	me:	
Add	dress/ City/ State/ Zip:	
CO MA TO PA	FFIDAVIT DNVERSION OF ANUFACTURED/MOBILE HOME D REAL PROPERTY NRS 361.244 ART I: TO BE COMPLETED BY APPLICANT	
	ANUFACTURED/MOBILE HOME IFORMATION A	
1.	Owner/Buyer name Maureen & Torres	/
2.	Owner of land (if leased)	
3.	Physical location of manufactured/mobile home 440 nob H	111 Avenue
4.	Manufactured/mobile home description: Manufacturer Fleetwood	Model_Brookfield
	Model Year 1996 Serial # TOLSOUB 1941>BF 13A Length 66 Width 36	18
5.	Mobile Home dealer (if new unit)	<u> </u>
6.	Current lien holder (if any) Green Tree	

DOC # 0225020

PART II: OWNER/BUYER SIGNATURE(S)

7. New lienholder:

Name

Address

The undersigned, as owner(s)/buyer(s) of the above described manufactured/mobile home and real property affirm that the home has been installed in accordance with all state and local building codes and agree(s) to the conversion of the above described home to real property, understanding that any liens or encumbrances on the unit may become a lien on the land. THE COUNTY ASSESSOR WILL NOT SIGN THIS AFFIDAVIT UNTIL PERSONAL PROPERTY TAXES ARE PAID IN FULL FOR THE CURRENT FISCAL YEAR. 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 SUCCEEDING TAX ROLL AS REAL PROPERTY.

Maurien James	10-1-2013		A			
SIGNATURE-OWNER/BUYER	DATE	SIGNATURE-OWNE	R/BUYER	DATE		
Mauren Torres 10 PRINT NAME)- <i> - 2</i> 013 DATE	PRINT NAME	_	DATE		
SIGNATURE-OWNER/BUYER	DATE	SIGNATURE-OWNE	R/BUYER	DATE		
PRINT NAME	DATE	PRINT NAME		DATE		
On October State of Nevada, County of Eureka Mauren Torres who acknowledged that he executed Onenys and Manison		ne the undersigned, a Nota personally appeared , Notary Public	CHE	RYL ANN MORRISON		
		\\/	Appoint No: 04-93	Public - State of Nevada nent Recorded in Eureka County 1638 - Expires October 22, 2016		
PART III: TO BE COMPLETED BY COUNTY ASSESSOR						
1. Assessor parcel # <u>CO 1 - 0.31 · 0</u> Signature below indicates that land ownership have been collected. Signature of Assessor or Deputy Assessor	KachyBac	Ou. Buling Date_	10.15.2	e.		
PART IV: TO BE COMPLETED I	\sim	C WORKS DEPARTM				
 Approved plot plan at this location Foundation meets requirements for 	· ————	ielo -	Date / 0 - 2	.1 - 13		
 Foundation meets requirements for real property verified by Verification that running gear has b State of Nevada manual 	cen removed by	Vielo	Date / 6 - 2	1-13		
DISTRIBUTION:)					
ORIGINAL TO MANUFACTURE	HOUSING DIV					
COPY TO LIENHOLDER OR OWN	NER/BUYER					
COPY TO COUNTY ASSESSOR						
Rev. 02/ 11		0232261	Book: 597 12 / Page: 381 Page	/02/2016		